Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families

By
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B.A., University of Victoria, 2012
M.A., University of Victoria, 2014

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In the Department of Sociology

We acknowledge with respect the Lekwungen peoples on whose traditional territory the university stands and the Songhees, Esquimalt and W̱SÁNEĆ peoples whose historical relationships with the land continue to this day.

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Abstract

International migration flows have increased at a rapid pace over the past decade and are often accompanied by emergent and evolving global realities, fluid and permeable borders, (re)negotiation of identities and familial bonds, anticipated challenges, as well as unforeseen exigencies. Concomitantly, advances in public health and chronic disease management have resulted in longer lives with an increasing proportion of the global population now 65 years and older. While these demographic shifts have received considerable research attention over the past few decades, little attention has been paid to aging Muslim families and the ways in which they adjust and adapt to shifting global realities and social circumstances. Of the roughly 3.45 million Muslims in the US, nearly six-in-ten US Muslim adults are first-generation Americans. And among US Muslim adults who were born abroad, more immigrate from South Asia (35%) than any other region. This demographic trend, along with the aging of the US population, implies that South Asian Muslims will comprise a large segment of the US population aged 65 years and older in the coming years and greater attention needs to be paid to the lived experiences of mid- to late-life South Asian Muslim families in the US in order to better support their health and social care needs. This qualitative study addresses these issues, specifically focusing on the intersections of faith, culture, gender, age, and immigrant status, as well as intergenerational care and support exchanges within the family, and the ways in which everyday lived experiences and seminal life course events shape processes of meaning-making and sense of self in immigrant South Asian Muslim families. Building on findings from 30 in-depth narrative interviews with three generations of South Asian Muslim women living in the US, and using an intersectional lifecourse perspective, I explore the re-negotiation of familial bonds and the enactment of religious beliefs and practices such as those around filial expectations in a transnational Islamic context. In so doing, I highlight how, for the women in my study, their Islamic faith was a part of both the public sphere and a collective ideology as well as a deeply personal and intimate attachment that provided structure and continuity in their everyday lives. I suggest how attitudes, behaviors, and meaning-making processes related to kin-work and exchanges of support between generations may be shaped by categories of gender, age, time of and since immigration, and degree of religiosity. Finally, I situate these attitudes and behaviors within the broader

framework of Islamophobia and salient structural barriers to accessing available health and social support services for immigrant South Asian Muslim women and their families.

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Dedication

This for you, Abbu and Ammi. I am here because of you.

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Chapter I: Introduction

On a sleepy, slightly muggy afternoon in Marietta, Georgia, I gingerly made my way across the parking lot to the JoAnn Fabrics outlet near my house. It was exactly 20 days since the birth of my son. And it was exactly 10 days since the horrifying events of September 11, 2001 – a date, indelibly etched in the annals of infamy, that transformed the world forever. My mother-in-law who was visiting from India at the time to celebrate the birth of her grandson, walked slowly by my side, her turquoise *salwar kameez* and *dupatta*, an outfit commonly worn by Muslim women in South Asia, fluttering in the gentle, humid Atlanta breeze. This was the first time we had dared to venture out of the house since 9/11. I had never been more acutely aware of my identity, of my very *being* – a South Asian[1] Muslim immigrant woman of colour living in the deeply conservative South. Hearts pounding with trepidation, we were about to step inside the store, when an older woman approached us. About the same age as my mother-in-law, Caucasian, dressed in a burnt rose summer dress, she smelled of peaches and baby powder and Chanel $N^{0}5$.

"That's such a lovely colour on you", she complimented my mother-in-law with a smile. Turning to me, she said, "I know it must be so hard for all of you after what happened on 9/11. I understand. But please don't be scared, this is the United States of America. You are safe here".

You are safe here. Four words that I soaked in as I watched her walk away. Words that seemed to wash away all of my anxiety and apprehension. My mother-in-law turned to me and remarked, "You are very fortunate to live in such a warm and welcoming country. Only in the USA".

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[1] The United Nations Statistics Division (2012) defines South Asia as a geographic region comprising nine countries from the Indian subcontinent: Afghanistan, Bangladesh, Bhutan, India, Iran, Maldives, Nepal, Pakistan and Sri Lanka.

Fifteen years later, I listened in dismay as an acquaintance, a first-generation immigrant who had arrived in the US from Pakistan in the late 1990s, described the ordeal of her older parents, late-life immigrants, as they boarded a flight in Chicago, a supposedly culturally diverse city to visit their son, the friend's brother, in Texas. The friend's 75-year old mother, who wears the *salwar kameez* and the *hijab* (Islamic head covering) and speaks limited English, was particularly distraught after being taken aside for a more rigorous 'screening' at the airport security check. As my friend described the fear, confusion, and anxiety her parents experienced, I thought about my mother-in-law's words from a decade and a half ago: "Only in the USA". Indeed, the two incidents and the distinctly different messages each conveyed—the first, a sense of belonging and inclusion, the second, feelings of alienation and marginalization—raised several salient questions that eventually led to my dissertation topic and subsequent research: What do we know about the everyday life of different generations of immigrant South Asian Muslim women in the US? How do they navigate and reconcile aspects of their private and public lives within the family and in their interactions with the outside world? In what ways does their Islamic faith intersect with immigrant status, gender, class, and ethnicity to inform their sense of self and shape their lifecourse trajectory? How are different aspects of their identity constructed, claimed, and performed in social spaces and how does this fragmented identity establish and reinforce social divisions? This dissertation is an honest attempt to answer these questions with an overarching objective of enhancing our understanding of the lived experiences of immigrant South Asian Muslim women and their families in the US.

Setting the Stage

International migration flows have increased at a rapid pace over the past decade—from 221 million in 2010 to 272 million in 2019 (UNDESA, 2019)—and are often accompanied by emergent and evolving global realities, fluid and permeable borders, (re)negotiation of identities and familial bonds, anticipated challenges, as well as unforeseen exigencies. Concomitantly, advances in public health and chronic disease management have resulted in longer lives with an increasing proportion of the global population now 65 years and older. While these demographic shifts have received considerable research attention over the past few decades (de Jong Giervald et al., 2015; Guruge et al., 2015; Ng et al., 2012), little attention has been paid to immigrant Muslim families and the ways in which they adjust and adapt to shifting global realities and social circumstances. This is surprising given that approximately one-sixth of the world's current population (nearly one billion people) identify as Muslim (Pew Research Center, 2017). Of these, roughly 3.45 million (1.1% of the population) reside in the United States (Pew Research Center, 2018). Further, nearly six-in-ten US Muslim adults (58%) are first-generation Americans, and 18% have at least one immigrant parent (ibid). Among US Muslim adults who were born abroad, more immigrate from South Asia (35%) than any other region. In fact, Pakistan, India, and Bangladesh, three of the seven countries that comprise South Asia, are together, home to 99% of South Asia's Muslim population and 31% of the world's Muslim population (Pew, 2009). Indeed, the South Asian population in North America as a whole has grown rapidly over the past several decades – according to the 2010 US Census and data from the 2013 American Community Survey, South Asians were the fastest growing major ethnic group in the US between 2000 and 2013 (SAALT, 2015). Overall, the South Asian American community grew at a rate of 97% over the previous decade (ibid.).

This demographic trend, along with the aging of the US population—according to the Population Reference Bureau (2020) 20% of the US population will be 65 years and over by 2030, and this age-group is projected to increase to 95 million in 2060 (up from 38.7 million)—implies that South Asian Muslims will comprise a large segment of the US population aged 65 years and older in the coming years. Yet, despite their growing numbers, data on the health of South Asian Muslims and the ways in which religiosity influences their health behaviors is limited, primarily because national healthcare surveys and databases generally refrain from collecting data on religious affiliation (Killawi et al., 2015).

Further, more than one half of Muslims (57%) live in a multi-person/multi-generation household in which all members identify as Muslim (Pew Research Centre, 2020). In addition, global events over the past few decades have highlighted how competing racialized, gendered, and regulatory discourses around Muslims (Ahmad, 2003) and pervasive Islamophobia have presented, and continue to present unique structural, cultural, social, and religious barriers to healthy aging (Ajrouch et al., 2013). Taken together, all of these trends suggest that greater attention needs to be paid to the lived experiences of mid- to late-life South Asian Muslim families in the US in order to better support their health and social care needs. My research addresses these issues, specifically focusing on the intersections of faith, culture, gender, age, and immigrant status, as well as intergenerational care and support exchanges within the family, and the ways in which everyday lived experiences and seminal life course events shape processes of meaning-making and sense of self in immigrant South Asian Muslim families. Based upon 30 interviews with three generations of South Asian Muslim women living in the US, and using an intersectional lifecourse perspective, I explore the re-negotiation of familial bonds and the enactment of religious beliefs and practices such as those around filial expectations in a

transnational Islamic context. In so doing, I highlight how, for the women in my study, religion was a part of both the public sphere and a collective ideology as well as an intensely personal devotion that provided structure and continuity in their everyday lives. I suggest how attitudes, behaviors, and meaning-making processes related to kin-work and exchanges of support between generations may be shaped by categories of gender, age, time of and since immigration, and degree of religiosity. Finally, I situate these attitudes and behaviors within the broader framework of Islamophobia and salient structural barriers to accessing available health and social support services for immigrant South Asian Muslim women.

The Dissertation Roadmap

In the chapter that follows, Chapter II, I identify the problem and purpose of the study and the key constructs guiding my research. Specifically, I provide a brief historical and contemporary overview of Islam in South Asia and South Asian immigration to the US. Next, I present the existing state of knowledge and identify gaps in the literature on immigrant South Asian Muslim families in the US. I discuss shifts in intergenerational attitudes and values in the context of urbanization and acculturation in immigrant families. I then provide an overview of the nature of filial obligation in Islam and the gendered nature of kin work and the (re)negotiation of intergenerational support exchanges as conceptualized in the extant literature on South Asian families. This is followed by a discussion on how the everyday lived experiences of multigenerational immigrant families may be situated within broader structural factors, namely Islamophobia and salient barriers to accessing available health and social support services. I highlight a gap in the existing literature on how these barriers shape the health and quality of life in mid- to late-life South Asian Muslim families in the US. The chapter concludes with the research questions guiding this study.

In Chapter III, I discuss the theoretical and methodological frameworks that served to ground the diverse everyday experiences of the immigrant South Asian Muslim women in my study. Specifically, I first outline how an intersectional lifecourse approach facilitated a more nuanced understanding of the matrix of structural, personal, and relational processes experienced by South Asian Muslim families over time. Next, given the paucity of research on immigrant South Asian Muslim families, I make the case for using the exploratory and inductive approach of qualitative methods to acquire insights into the everyday lived experiences of the participants in my study. I describe how the 30 narrative interviews with three generations of South Asian Muslim women offered an in-depth and immersive understanding of their life stories and trajectories. In this chapter, I also discuss issues related to data collection and ethics as well as pragmatic considerations in the design and planning of this study such as selection of study sites, sampling and recruitment, methods of data collection, and data analysis.

Chapter IV presents key findings from the narrative interviews with three generations of South Asian Muslim women – the grandmothers, daughters/daughters-in-law, and granddaughters. It highlights the ruptures, continuities, and vicissitudes in their lifecourse trajectories and key turning points such as migration, marriage, and the death of a loved one. I present their stories at the intersection of faith, ethnicity, gender, age, and generational and immigrant status as they spoke about their past, their present, and their future in ways that were congruent with their experiences and the meanings and interpretations that they attached to those experiences. I also discuss the dynamics of multigenerational living, namely the nature of intergenerational support exchanges across three generations of South Asian Muslim women, the salience of their Islamic faith in their interpersonal relationships, and the re-negotiation of traditional values around filial support and care.

Finally, in Chapter V, I summarize the key findings from my interviews with three generations of South Asian Muslim women who live in a multigenerational household and situate these findings within the extant literature. Specifically, I contend that for the women who participated in this study their Islamic faith was central to their identity and faith and spirituality formed the locus around which their lives were centered. I highlight how, in the diasporic context, although their Islamic faith imparted a sense of continuity and a means to preserve and sustain personal and collective identity, these women were also actively (re)interpreting Islamic tradition and scriptures to add meaning into their lives; thus, familial bonds and the enactment of religious beliefs and practices such as those around filial expectations were being re-negotiated in a transnational Islamic context. I discuss how living in a mosque community with strong social networks imparted a sense of safety and security to my participants. I also discuss how changing attitudes and behaviors are constructed and enacted within the broader framework of Islamophobia, invisibility and hyper-visibility, and salient structural barriers to accessing available health and social support services for immigrant South Asian Muslim women. I conclude the chapter with a discussion of the implications of these findings for policy and practice, the limitations of this study, and possible directions for future research.

Chapter II: Problem and Purpose

In this chapter I establish the premise of this research by providing an overview of the state of knowledge and identifying gaps in the existing literature on immigrant South Asian families in the US. I begin by providing a historical and contemporary synopsis of immigrant South Asian Muslim families. I discuss the rise (and fall) of Islam in South Asia, the importance of the *hijra* or migration in Islam, and South Asian immigration to the US. Next, I discuss concordance in intergenerational attitudes and values in the context of acculturation in immigrant families. I then provide an overview of the nature of filial obligation in Islam and the gendered nature of kin work and the (re)negotiation of intergenerational support exchanges as conceptualized in the extant literature on multigenerational immigrant families. I follow this discussion by foregrounding the everyday lived experiences of immigrant families within broader structural factors, namely Islamophobia and salient barriers to accessing available health and social support services. Finally, I conclude with the research questions guiding this study.

South Asian Muslim Families: a historical and contemporary overview

Islam in South Asia

The youngest of the major world religions, Islam originated in Mecca and Medina, Saudi Arabia, at the start of the seventh century during the time of the Prophet Mohammad. Literally meaning "submission to the will of God", followers of Islam, the Muslims, follow five basic pillars that are intrinsic to their faith: 1) *Shahada* (declaring faith in one God and belief in the Prophet

Mohammad as God's Messenger); 2) *Salat* (praying five times a day); 3) *Zakat* (charity); 4) *Sawm* (fasting during Ramadan); and *Hajj* (to make a pilgrimage to the city of Mecca, if they are able, at least once during a person's lifetime) (Armstrong, 2007). The rapid spread of Islam from Europe to the Indian subcontinent was facilitated by religious, political, as well as economic means (ibid.). In her pathbreaking book on South Asian Muslims in New York, *Salaam America*, Aminah Mohammad-Arif (2002) provides a comprehensive historical narrative of Islam in South Asia. The earliest recorded presence of Muslims in South Asia, she states, dates back to 711 CE when traders and mariners sailed across the Indian Ocean. The second, larger wave came in the thirteenth century when Muslim settlers arrived from central Asia and established a more secure hold on the socio-political and socio-cultural fabric of the Indian subcontinent. Between the sixteenth and eighteen centuries, the Muslim empire flourished and reached its zenith under the Moghul dynasty until it was supplanted by the arrival of the British East India Company in the eighteenth century. By the end of the nineteenth century, the British, under Queen Victoria, were successful in building a sizeable empire in the Indian subcontinent. At this time, Muslims comprised 20% of the population in South Asia.

Mohammad-Arif traces the emergence of several nationalistic and socio-religious reform movements in South Asia in the nineteenth century, which picked up momentum after the First World War. One such movement was the emergence of the Muslim League under Mohammad Ali Jinnah who argued for a separate state for India's Muslim population citing fundamental socio-religious and cultural differences between Islam and Hinduism. Muslims made up 24% of the South Asian population at that time. The start of the Second World War added to this nationalistic and religious fervour, ultimately culminating in the creation of two separate independent states – India, with a majority Hindu population, and Pakistan (the 'Land of the

Pure') with a majority Muslim population. A sizeable proportion of Indian Muslims (one third), however, refused to migrate to Pakistan, choosing instead to remain in the land of their forefathers. Thus, while Pakistan was founded as an Islamic state, India became a secular republic. The splitting of the subcontinent was far from peaceful, however, resulting in genocide and ethnic cleansing until in 1971, linguistic and ethnic nationalism triumphed and resulted in the creation of Bangladesh where today, more than 90% of the population identifies as Muslim (World Population Review, 2020).

Although India remains a secular state, religion, nevertheless, forms an integral part of national identity. Muslims, who now comprise 14.4% of the Indian population (Pew Research Center, 2015) are a religious minority that has been under constant pressure to assimilate into the mainstream, primarily Hindu, culture by Hindu religious extremists. With the election of the right-wing nationalist government of Narendra Modi in 2014, this pressure has amplified (Maizland, 2020). A recent example is the 'beef ban' imposed by the Modi government, based on the premise that cows are sacred in the Hindu religion. Reports from India suggest that beef consumption has resulted in widespread persecution, lynching, and flogging of Muslims and other religious minorities creating a reality that is antithetical to the democratic ideals enshrined in the Indian Constitution – freedom of speech and expression, liberty, and the right to religious worship (Kamdar, 2018). It is hardly surprising, then, that over the past several decades, large numbers of South Asian Muslims have immigrated to foreign lands to pursue a better life driven not only by economic motivations, but by more pragmatic concerns about their own safety and that of their future generations.

In the discussion that follows, I provide a brief discussion of the importance of the concept of migration in Islam and an overview of the immigrant South Asian population in the US.

The *hijrah* (migration)

The concept of *hijrah* or migration holds particular significance, even reverence, in Islam (Mohammad-Arif, 2002). The start of the Islamic calendar in 622 CE commemorates the migration of the Prophet Muhammad and his followers from the city of Mecca to Medina (Prozorov, 1991). Hodgson (2009) contends that this "relocation" was not an escape from religious persecution at the hands of the Meccan Quresh tribes; rather, it was an act of resettlement, a search for better opportunities, and a chance to build an equitable society based upon the principles of Islam. Over the centuries, the process of migration for Muslims has largely become synonymous with the search for a better life, as discussed below.

Pursuing the American Dream

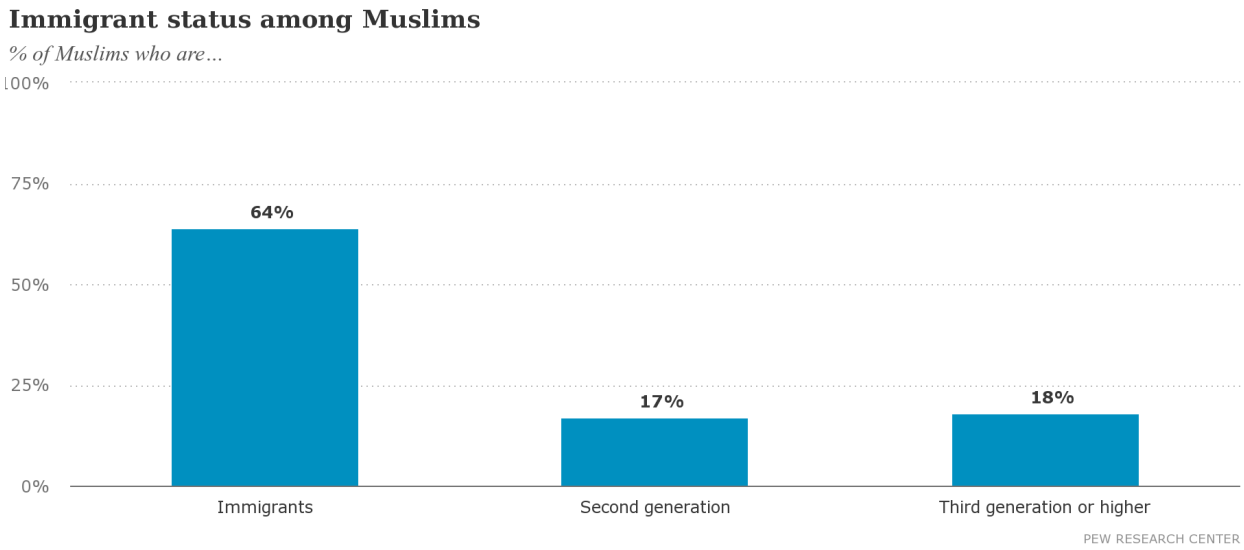
The extant migrant literature highlights two key factors that drive the decision to migrate among voluntary migrants (those immigrants who leave the country of origin by choice in search of employment, marriage, or to re-unite with previously-immigrated relatives): 1) when the "push" (the desire to leave the country of origin) factor is stronger than the "pull" (the desire to stay there); and 2) when the receiving country is in need of the type and class of labour that migrants have to offer (Schwartz et al., 2010). According to Mohammad-Arif (2002), for South Asian Muslim immigrants, the back-and-forth of push and pull factors may have been shaped by multiple considerations: 1) for highly skilled immigrants, such as medical doctors who immigrated in the late seventies and early eighties, the US may have offered more lucrative opportunities in terms of work and research, given the paucity of medical doctors in the US due

to the Vietnam war and the class-based policy of 'positive discrimination' (referred to as affirmative action in the US) prevalent in South Asia at the time; 2) the emergence of a distinct culture of prestige associated with immigration wherein American artefacts of material culture delivered and consumed via social media and television superseded purely professional motivations; 3) political factors, such as growing concerns about their safety and security among Indian Muslims, as discussed previously, or large scale immigration by Ahmadiyya Muslims in Pakistan due to religious persecution by the Zulfiqar Ali Bhutto government in the late seventies; and 4) in the case of late-life immigrants such as older parents and grandparents, the desire to reunite with their loved ones settled in the US.

Taking advantage of the reforms to US immigration laws in 1965, South Asian Muslims who immigrated in the 1960s and 1970s were mainly professionals such as medical doctors and engineers, followed by a second wave comprising their less-qualified relatives in the 1980s and early 1990s (ibid.). The so-called 'Y2K or dot com boom' in the mid- to late 1990s witnessed a third wave consisting of Information Technology professionals who immigrated in large numbers to offset the 'technological crisis' in the US (Khanna, 2017). The states of California, New York, New Jersey, and Illinois have the largest concentrations of Muslims of South Asian descent (Mohammad-Arif, 2002).

Pew's Religious Landscape Survey (2015) provides a snapshot of generational status among Muslims in the US (see Figure 2.1). In 2014, 64% of Muslims in the US were first generation (born and raised in the country of origin), 17% were second generation (born in the US with at least one immigrant parent), and 18% were third generation (born in the US to second-generation parents) or higher. Pakistan topped the list of sending countries, followed by Iran, India, Afghanistan, and Bangladesh.

Figure 2.1: Muslims by generation status



Source: Pew Research Center (2015)

Clearly, South Asian immigrants comprise a sizeable proportion of Muslim immigration to the US and special attention needs to be paid to generational differences in attitudes, values, and identity formation in South Asian Muslim families. The discussion below makes the case for this research.

Intergenerational (in)congruence: Attitudes, values, and identity formation in the immigration context

Research on intergenerational correspondence and transmission of values and attitudes and identity creation within immigrant families has received considerable scholarly attention over the past decade (Galyapina, 2018). An important concept in this context is that of acculturation. Definitions of acculturation vary – Berry (2008) defines it as a set of negotiating strategies, i.e., integration, assimilation, separation, and marginalization. For Greenland and Brown (2005), it is the process by which culturally diverse groups become more homogeneous through changes in identity, values, and beliefs. More recently, Liu and colleagues (2019) have defined it as a process shaped by racism, microaggressions, and racial trauma about their racial positionality

among immigrants of colour. Indeed, Cuellar (2002) posits that certain logistical and psychological barriers to well-being, e.g., social isolation and the stresses of migration and cross-cultural adjustment (conceptualized as 'acculturative stress' in the literature), may accompany the process of acculturation.

In the generational context, past research indicates that for non-European immigrant groups, those who arrive at young ages (the 1.5 generation) are more likely to acculturate to the host society's norms (Boyd, 2002). Research from Canada indicates that second-generation South Asians may experience feelings of ambivalence as they navigate between so-called individualistic (Western) and collectivistic (Asian) cultures, resulting in the creation of a bi-cultural identity (Sodhi, 2008). Khan and Kobayashi (2017), however, have disputed this binary reductionism. In a global world, the authors contend, acculturation is a fluid, organic, and complex process brought about by a dynamic exchange of cultural beliefs and practices and it is problematic to slot ‘types’ of culture into neat compartments. That stated, the authors acknowledge that feelings of ambivalence may accompany the process of immigration, particularly in South Asian families regardless of generational status as certain aspects of the dominant culture such as personal autonomy may, on occasion, clash with traditional values around filial obligation. For example, in Inman et al.’s (2007) research on first-generation immigrant parents, the author found that while her participants had made a conscious effort to acculturate and to 'have the best of both worlds' in the context of migration, they were concerned about dealing with challenges to ethnic identity, loss of familial support, and cultural discontinuity when it came to their Canadian-born children. Thus, the 16 parents in this study linked the retention of ethnic identity in their children to participation in cultural events, maintaining tradition, encouraging familial ties, social support, and a rejection of perceived

Western values. Similarly, for late-life immigrants, the process of acculturation may be vicariously experienced through their adult children and grandchildren (Xu, 2018). Albert et al. (2009) have also noted that intergenerational transmission of values and differences and similarities in acculturation are mediated, to a large extent, by the broader socio-cultural context. Relatedly, Kwak and Berry (2001) examined generational differences between adolescents and their parents in immigrant Asian families in Canada. The authors found that while Asian adolescents maintained a stronger sense of family responsibility than their non-Asian counterparts as a whole, within groups, Vietnamese and Korean adolescents emphasized integration into Canadian society, while Indo-Canadian youth preferred assimilation as an acculturative strategy.

The discussion above raises certain pertinent questions about immigrant South Asian Muslim families, questions that, to the best of my knowledge, remain unanswered in the migration literature. For example, what is the nature and extent of intergenerational differences in acculturation strategies in South Asian Muslim families? How do different generations within South Asian Muslim families reconcile traditional values in the context of migration? What strategies do different generations adopt vis-à-vis practicing their faith and maintaining cultural beliefs and practices? What is the nature of intergenerational support exchanges within immigrant South Asian Muslim families? My research sought to answer these questions via in-depth, narrative interviews with 30 South Asian Muslim women belonging to three generations.

To further contextualize this study, however, it is important to discuss the various dimensions of intergenerational relationships in immigrant South Asian Muslim families, as presented below.

Islam and filial obligation

For a majority of Muslims, Islam is not just a religion, but a way of life. The holy book of the Muslims, the Quran, provides guidelines for personal faith (*deen*) and theology as well as a religious and cultural 'roadmap' for both the individual, as well as the larger community (Hasnain and Rana, 2013). Data from a recent Pew Center study (2017) states that approximately three-quarters of Muslim Americans report a strong sense of belonging to the global *ummah,* or Muslim community, and almost 80% report that they feel a strong tie to Muslim communities in the US. In addition, Islamic scriptures place particular importance on serving one's parent as a duty second only to prayer (bin Abdullah et al., 2011). Under the Islamic tradition, children are socialized into believing that the doors to paradise are open only for those who love and obey their parents (ibid.). As the primary caregiver of the family, for example, the mother in Islam occupies an exalted status. Islamic scriptures proclaim: "Heaven is at the feet of mothers" (p.141). Not only is caring for a parent incumbent upon adult children, it is a parent's right to expect it (Hasnain and Rana, 2013), a directive that shapes caregiving attitudes and behaviors in powerful ways. Under the *Sharia*, or the universal Islamic law, the rights of aging parents are paramount, and adult children can be held accountable for failing to provide support (instrumental or affective) to their parents (bin Abdullah et al., 2011). It is hardly surprising, then, that there are limited formalized old-age policy guarantees and services available to older adults in order to be able to supplement or substitute for family support in South Asian societies, and social welfare policies are primarily constructed upon the premise of 'care by the family first' (Chen et al., 2011). Indeed, even among many Indian and Pakistani families in the US, older adults prefer to co-reside in multigenerational homes with their adult children (Gupta and Pillai, 2012). These patterns of co-residence are largely attributed to cultural norms around filial piety or obligation and kinship care (Diwan et al., 2011; Schans and de Valk, 2011).

Contextualized within "family-centered cultural traditions and interpersonal impacts of providing care" (Scharlach et al., 2006, p. 139), kin-work in South Asian cultures underscores the importance of "the family over the individual, showing respect for elders, and honoring the family name" (Schwartz, 2007, p. 102). The self, therefore, is situated within a hierarchically organized family system, and status, power, and privileges are distributed accordingly among members of the family (Bhattacharya and Schoppelrey, 2004).

In what could be considered as a potential shift in culturally and religiously-prescribed attitudes towards familial relationships and roles, however, a 2017 Pew Center study suggests that even among those who report strong religious affiliation and mosque attendance, close to 64% American Muslims state that traditional understandings of Islam can be interpreted in ways that are more congruent with current socio-political, socio-cultural, and economic realities and exigencies. This claim challenges commonly-held assumptions around religious beliefs and practices, caregiving, filial obligation, and intergenerational support exchanges, thus paving the way for a more nuanced understanding of household dynamics within immigrant South Asian Muslim families. Relatedly, Kobayashi and Funk (2010), in their study on intergenerational congruence (and ambivalence) and filial piety among second-generation and third-generation Japanese Canadians, found that diverse lifecourse experiences and acculturative processes notwithstanding, both generations regarded filial obligation as important. My research similarly examines the extent to which generational status and age at immigration shape attitudes, practices, and behaviors vis-à-vis religious beliefs as well as intergenerational support exchanges in immigrant South Asian Muslim families in the US. Further, that religiosity influences understandings of disease and illness, related behaviors, compliance with medical recommendations, and interactions with the healthcare system among Muslim adherents has been

well-documented in the literature (Padela and Curlin, 2012; Ahmed et al., 2006; Al Suwaidi et al., 2004). My research adds to this body of knowledge by investigating the ways in which such understandings are manifested in everyday practices within multigenerational South Asian Muslim households, and their broader implications for health and social care access and service use.

In the discussion that follows, I substantiate my research goals by presenting an overview of support exchanges, kin-work, and the re-negotiation of the intergenerational bond in immigrant South Asian families.

Gendered nature of kin-work and the (re)negotiation of intergenerational bonds

Espoused within internalized cultural norms around filial obligation and duty which stipulate that children should support parents in their old age (Cicirelli, 1990), the feminization of kin-work in immigrant families has been a research focus in social gerontology given the inequalities that it perpetuates both within and outside the family (Addlakha, 2020; Silverstein and Wang, 2015; Molina, 2015; Dyck, 2005). Past research has suggested that kin-work within South Asian families is highly gendered, to the extent that it is deeply embedded in the very formation of women's "ethical and moral selves" (George, 1998, p. 268). Connidis and McMullin (2002) maintain that too often the burden of care provision to older relatives falls to women in the family, leading to conflict. Research on diasporic South Asian families also suggests that as part of their perceived sense of filial responsibility, sons may sponsor their parents for immigration in order to care for them in their old age; however, it is often their spouses who provide instrumental support to their in-laws in the form of assistance with Activities of Daily Living (ADL) and driving them to the temple and/or for medical appointments (Gupta and Pillai, 2005; Gupta and Pillai, 2012). Relatedly, in Katbamna et al.'s (2004) study on South Asian immigrants

in the UK, care (particularly instrumental) for parents was often the responsibility of daughters-in-law, unmarried daughters, and in some cases, granddaughters. And in an ethnographic study on immigrant South Asian women in British Columbia, Canada, Grewal and her colleagues (2005) found that an important theme running through their interviews with female participants was a sense of duty and obligation towards the family, a value that the researchers linked to the stereotypical South Asian ideal of the woman as the dutiful wife, the obedient daughter-in-law, the nurturing mother, and the self-sacrificing caregiver. It appears, then, that while both men and women may share values related to filial obligation, the actual enactment of this culture-specific ideal is often the responsibility of women in the family. Thus, given this feminization of kin-work in immigrant families, I chose to interview only women about their perspectives on faith, intergenerational support exchanges, and attitudes around filial obligation.

Emerging evidence from some urban centres in South Asian countries, however, suggests that women's growing economic independence brought about by higher educational attainment, as well as housing constraints, increasing occupational mobility, and socio-cultural shifts such as the rise of nuclear family arrangements have re-defined intergenerational relationships like the traditional 'mother-in-law/daughter-in-law' power differential (e.g., Vera-Sanso, 2005; Masvie 2006). In the context of migration, Predelli (2004), in her research on first-generation immigrant Muslim women in Norway found that the women in her study often utilized the framework of Islamic traditions as a flexible way to interpret and practice gender relations. These women, the author reported, used religion as a 'dynamic toolkit' and a malleable resource to support their evolving views on gender relations and to adapt to changing social circumstances. Similarly, Shaw and colleagues (2005) found that among Muslim British Pakistanis, ostensibly immutable traditional expectations around care-provision—who provides it and how it is provided—are

often mediated in the migratory setting.

Indeed, traditional Parsonian perspectives on the family such as the convergence theory of family structure (Goode, 1963) and the modernization theory of aging (Cowgill, 1972) have predicted that urbanization, advances in education, and economic and industrial technology, and the shrinking of households will lead to a disintegration of intergenerational ties and familism and loss of status for older adults in the family (Chen et al., 2011). And, as a result of these changes, it is predicted that feelings of insecurity and ambivalence about the future will rise among the older generation, particularly given increasing life expectancies and the epidemiological transition to degenerative diseases and chronic conditions among older adults (ibid).

More recently, Beck and Beck-Gernsheim (2002) have argued that migration and globalization have led to a loosening of traditional bonds; in this fluid and malleable world, they posit, the lives of individuals are no longer defined and shaped by the traditional institutions of family and religion. It is expected, therefore, that the agents of modernity will gradually erode the informal agreement vis-à-vis care provision and support between generations – the 'intergenerational contract' (Bengtson, 2007).

And yet, these changes and predictions notwithstanding, intergenerational bonds and solidarity remain resilient in South Asian societies, primarily because women's increasing participation in the labour force has given rise to new structural challenges in the form of limited availability of quality childcare and affordable domestic help (Chen et al., 2011). In response to these changes, and as a resourceful adaptive strategy, the older generation has stepped in to fill this chasm by assisting with child-rearing and helping with domestic chores, resulting in less hierarchical and more reciprocal patterns of mutual help and support between generations and

genders (Bhattacharya and Schoppelrey, 2004). Indian mothers-in-law in Chennai (formerly known as Madras) who co-reside with their daughters-in-law, for example, provide essential non-economic support (child care, and household chores such as cooking and cleaning) in exchange for a 'guarantee' to be 'taken care of' in their old age (Vera-Sanso, 1999).

Canadian research (e.g., Dasgupta 2007; Spitzer et al. 2003) has also suggested that within immigrant families, women typically shoulder the responsibility of inculcating and fostering cultural values in their offspring; however, the inability to successfully juggle the demands of the workplace with their caregiving duties implies that often mid-life South Asian women pass on this additional responsibility of cultural transmission to their older relatives (Acharya and Northcott, 2007). Thus, in lieu of security and comfort in their old age, older relatives, usually mothers/mothers-in-law, take it upon themselves to "teach" cultural values to their grandchildren. In addition, as previously mentioned, they provide essential support at home, particularly with regard to childcare, cooking, and cleaning (Dossa, 2017). Indeed, such adaptive strategies on behalf of the older generation may enhance their sense of well-being, as "the inability to reciprocate rather than the need for assistance undermines the morale of the older person" (Stoller, p.1985, p. 341). Further, co-residence in a multigenerational household often results in the strengthening of the grandparent-grandchild bond, and provides grandparents with opportunities to not only share child-rearing responsibilities with their adult children, but also to connect to Western cultural norms, values, and beliefs via their acculturated grandchildren (Kalavar and Van Willigen, 2005). These shifts point to a gradual revision and not necessarily an erosion of the cultural code, as pointed out by Beck and Beck-Gernsheim. The shifts also highlight the fact that these revisions are occurring for both older adults and adult children simultaneously – not always, but with increasing frequency.

Leung and MacDonald (2007) have underscored such benefits of multigenerational living in their study on immigrant Chinese women in Toronto. “Caregiving and care receiving experiences”, maintain the authors, “can involve a high level of reciprocity, particularly if the elderly parents are able and healthy” (p. 19). Indeed, Keefe and Fancey (2002) have pointed out that the caregiving literature tends to focus more on the care provided to older adults than on the often quite significant support that older adults provide to their families. Thus, as Lamb (2009) has suggested, intergenerational exchanges in immigrant South Asian households are multidirectional, demonstrating a reversal of “the expected direction of transactional flows and extending their [older parents’] phase of giving into old age” (p. 217).

Aging parents in South Asian immigrant families today are an important part of their children’s lives, not so much because of what traditional values around filial obligation and duty dictate, but primarily because of what they contribute to the family (Treas, 2008). The interdependence, interconnectedness, and importance of shared familistic norms and values within such families suggests a high degree of, what Bengtson and Schrader (1982) referred to as normative solidarity, albeit one brought about by a renegotiation and restructuring of traditional familial roles and expectations. In particular, parents acknowledge the everyday struggles and challenges faced by the younger generation in the process of migration and settlement, and, in response, traditional expectations around filial duty and gender roles may be adjusted (ibid.). As a male participant in Sudha’s (2014) study expressed: “it’s very important for parents to be nice to their children ... Everyone should be treated on the same footing, whether it’s a daughter or son ... how do they interact with people living in the house, not just their son or grandchildren, but what about their daughter-in-law”? (p. 97).

These findings are echoed in Treas's (2008) pioneering work on intergenerational support exchanges in mid- to late-life immigrant families in the US. Treas debunks several "myths" surrounding multigenerational immigrant families. First, she disputes the idea that immigrant families are necessarily "traditional" even though at times immigrants themselves may re-enforce this stereotype:

> We often think of immigrants as traditional. They often think of themselves as traditional. Criticizing "American" families, an undergraduate student from an immigrant household pronounced, "My family is very traditional. We take care of *our* [author's emphasis] grandmother." This South Asian family was not really traditional. In the U.S., the grandmother lived with the family of her married daughter. In India, she would have been expected to live with her son… [similarly] a Pakistani widow lived near her sons in England, but she traveled for most of the year to spend time with each of three daughters. During autumn in Canada, winter in Southern California, and spring in Australia, she pitched in to help around the house and teach religion to her grandchildren (p. 41).

Second, Treas contends that although older immigrants do depend on family members for support (e.g., housing, companionship, transportation), they "give as well as they get" (p. 42) by helping out with cooking, cleaning, childcare, and other household responsibilities.

Third, the author argues that although older kin in multigenerational families are respected and their wishes catered to for the most part, their authority may be undermined due to limited resources and low degree of acculturation. For example, an immigrant grandmother, the author points out, may feel more at home in an ethnic enclave where others speak her language, but she may have to move, sometimes against her wishes, to a distant, more suburban neighborhood with better schools for her grandchildren if the younger kin decided to do so.

To summarize, in multigenerational immigrant South Asian households, the new environment that migration brings with it may result in: 1) a questioning of long-held beliefs and values (such as those around women's participation in the workforce and traditional gender

roles); and 2) the replacement of old norms and attitudes with new ones (e.g., like their counterparts in many South Asian urban centres, less active or hands-on involvement of immigrant mid-life women at home). In response to these changes, the meanings attached to traditional cultural values such as filial piety and obligation may be reinterpreted, revised and transformed to adapt to the new reality, a process Beck and Beck-Gernsheim (2002) refer to as 'detraditionalisation'. Indeed, as they persuasively argue, detraditionalisation does not imply that traditions no longer matter; rather, "traditions must be chosen and invented and they have force only through the decisions and experience of individuals ... those who live in this post-national, global society are constantly engaged in discarding old classifications and formulating new ones" (pp. 25-26). In a diasporic context, detraditionalisation may be manifested in the ways in which reciprocity, mutual support, and interdependence gradually revise the norms of reverence and strict obedience that traditionally characterized filial expectations in intergenerational relationships.

The preceding discussion clearly demonstrates that the intergenerational contract and the meanings attached to filial piety in South Asian societies are being renegotiated – from an unyielding, patriarchal mandate, to, as per social exchange theory, one that privileges reciprocity, mutual gratitude, and negotiated exchanges and benefits, whereby taking care of grandchildren and other domestic household duties can be seen as a "bargaining strategy" that guarantees support in later life to parents and grandparents (Croll, 2006). In sum, although pragmatic concerns appear to be replacing the traditional element of spirituality and reverence accorded to older relatives, the renegotiated intergenerational contract in South Asian families "remains resilient and robustly intact" (Whyte, 2003, p. 890). Further, even in the relative absence of formalized social care for older adults, large networks of extended family and fictive kin, which

persist despite the forces of urbanization and modernization, continue to sustain the shared culture of care (Ko et al., 2019) which uniquely characterize many Asian cultures.

What is less understood, however, are the ways in which this shift is manifested in immigrant Muslim families, particularly around organized religion and concomitant beliefs and practices. As pointed out earlier, there has been an exponential increase in this population sub-group in the US, a demographic trend which necessitates that closer attention be paid to how care and support exchanges are understood and experienced in South Asian Muslim families in order to better meet their unique needs. One might ask, for example, how exactly are these intra-familial dynamics enacted and expressed in diasporic South Asian Muslim families, particularly in the context of faith and tradition and evolving gender roles that accompany migration? Or, how might the experiences of South Asian Muslim women in the US differ from the immigrant women in Predelli's (2004) Norwegian study, given the marked differences in access to publicly available health and social care services between the two countries? My research attempts to answer these questions by exploring how key lifecourse transitions such as migration may lead to a renegotiation of the intergenerational contract, and that the meanings attached to internalized norms around filial duty and obligation may be actively reconstructed by immigrant South Asians Muslims in the face of shifting socio-economic, socio-political, environmental, and cultural realities and exigencies. Specifically, one of the goals of my research was to advance understandings of the roles and enclosures of religious and cultural beliefs, norms, values, and behaviors that condition and shape the lives of immigrant South Asian Muslim women living in multigenerational households in the US.

In order to explore these micro-level processes of meaning-making and perceptions of the self, however, it is important to foreground the everyday lived experiences of immigrant Muslim

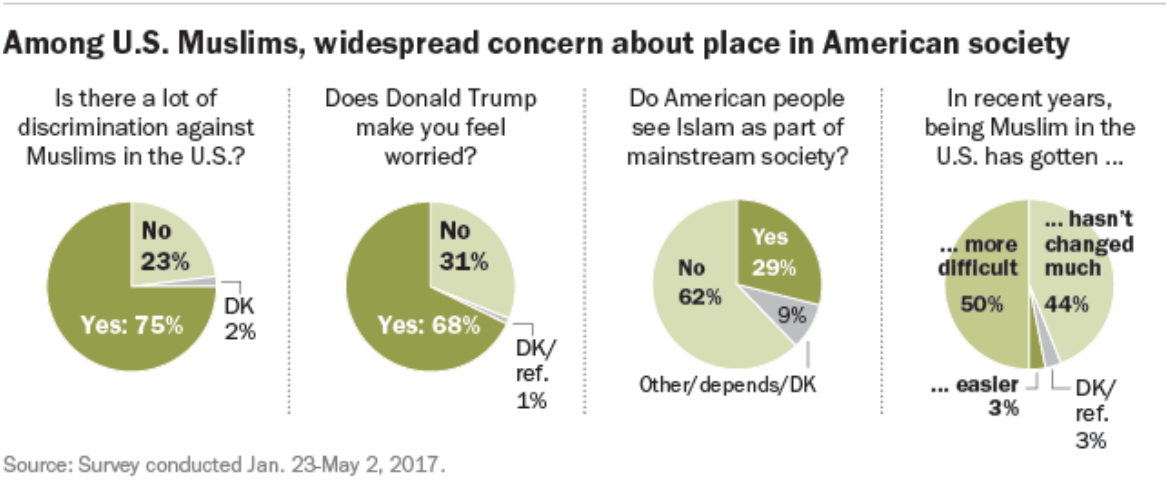
families in the context of a discussion on broader structural factors such as the larger discourse around Islam. This will be discussed next.

Islamophobia

Islamophobia, defined as the unfounded fear, negativity, and hostility towards Muslims (Haque et al., 2018), and the sum of misconceptions around Islam being inherently incongruent with the Western way of life (Johnston, 2016), is on the rise since the tragic events of September 11, 2001. Indeed, hate crimes against Muslims have increased exponentially over the past two decades (Lichtblau, 2016) and more so after the election of Donald Trump in 2016 (Kishi, 2017; Calfano 2018). A recent report from the Pew Center (2017) suggests that assault crimes, including intimidation and vandalism, against Muslims have surpassed the post September 11, 2001 levels in the US.

As Figure 2.2 demonstrates, according to a 2017 Pew report, close to 75% of Muslims felt that there is "a lot" of discrimination against Muslims in the US. Further, 50% of Muslim American adults reported that it has become more difficult to be a Muslim in the US, with nearly 10% attributing this to discrimination, prejudice, and racism. 62% reported that Americans do not see Islam as a part of mainstream society, and 68% had concerns about the Trump presidency.

Figure 2.2: Perceptions on discrimination and racism among US Muslims



Source: Pew Research Center (2017)

Lajevardi and Oskooi (2018) have also noted that compared to other religious groups, Muslims are perceived more negatively, a finding supported by the increasing prevalence of community-level opposition towards mosque-based projects (Hijaz, 2019). Further, in their study on Arab and Muslim Americans, Hobbs and Lajevardi (2018) found that Donald Trump's inflammatory rhetoric against Muslims as well as his administration's prejudiced policies such as the executive order on banning immigration from primarily Muslim countries (the so-called 'Muslim travel ban') had a deleterious impact on this group, resulting in discrimination and segregation to the extent that many withdrew from public view.

And recent research suggests that Islamophobia, compounded by xenophobia, or the fear of "foreigners", may result in worsening mental health outcomes and a toxic cycle of cumulative disadvantages that negatively impact individuals and communities (Younis and Jadhav, 2019). In fact, Abu-Ras and Abu-Badr (2008) found that due to everyday microaggressions and systemic racism and discrimination, Muslim families in the US are increasingly seeking professional help for their mental health and well-being.

In addition, the "visible stigma" (Goffman, 1963) associated with the colour of one's skin, accented or limited proficiency in "mainstream" languages, and wearing religious attire like the *hijab* and *abaya*, may culminate in worsening feelings of marginalization and distress among South Asian Muslim immigrants, particularly older women who may not be as acculturated to a 'Westernized' lifestyle. As Padilla and Perez (2003) posit, stigmatized individuals are often keenly aware of 'othering' processes and negative connotations attached to their social identity in the eyes of others, which, in turn, may lead to them feeling disempowered and having low personal and/or collective self-esteem.

Relatedly, evidence from the UK suggests that Muslim women who conform to a modest, "Islamic" style of dressing may face discrimination in the workplace (Tariq and Syed, 2017). The following example from a news report underscores this finding:

> Ms. Farrah (employee) brought a claim forward for unfair dismissal and direct religious discrimination against her former employer, Global Luggage Co, because when she started to wear the *hijab*, the company moved her to a different store to maintain its "trendy" image. A couple of months later, she was forced to resign after she took an extended lunch break. The employment tribunal ruled that the company had seized an incident of misconduct as a pretext for dismissing her and that the real reason for her forced resignation was that she wore the *hijab* to work (Furness, 2012, as cited in Tariq and Syed, 2017, p. 512).

Judith Butler (in Murray, 2007) and Saba Mahmood (2011), however, have argued that the Islamic veil may, in fact, be a symbol of agency and empowerment among racialized Muslim women, and a way of resisting compulsory assimilation to Western norms. For Butler, wearing the *hijab* may be a form of "liberation" for Muslim women, allowing them to move more freely in public spaces while at the same time, honoring and maintaining religious and cultural ties that are central to a community's norms. For Mahmood, the *hijab* has a broader meaning, deeply conditioned by power relationships and socio-political and socio-cultural forces wherein the

decision to veil or not to veil involves a process of incessant internal dialogue and an emergent social conception of agency (Chapman, 2016).

Likewise, in their Canadian study on the phenomenological experience of head covering, Litchmore and Safdar (2016) reported that the interpretations and meanings attached to the practice of wearing (or not wearing) the *hijab* are often both individual and also deeply embedded within the larger socio-political context. In fact, van Es (2019) found that the Dutch Muslim women in her study often considered themselves as 'ambassadors' of their religion. The author highlights how the stigmatizing public discourse around Islam shapes performativity and perceptions of the self in the complex interplay between stereotyping and self-representation, the 'traditional' and the 'modern', and the 'emancipated' and the 'oppressed' in the everyday interactions of Dutch Muslim women. Taking on the ambassador role, these women actively sought to dispel negative perceptions of Muslim women in several ways. The *hijab*, according to the author, was a key aspect of this strategy:

> It made these women immediately recognizable as Muslims, and the combination of the hijab (perceived by many as a symbol of Islam) with particular, non-stereotypical behaviour was thought to have strong potential to subvert the dominant image. Sometimes it was about the very fact of having a paid job. In other instances, it was a matter of casually telling non-Muslim colleagues about the tasty dinner that the husband had cooked the evening before, or about last weekend's trip to a theme park. In again other instances, it was about subtle practices such as making small jokes or meeting people with an upright and confident posture (p. 381).

In another study on the Islamic veil, the authors examined the relationship between body image and disordered eating in 450 French Muslim women (Kertechian and Swami, 2016). Controlling for religiosity and perceived support from *Allah* (God), results from an online survey revealed that although women who wore the *hijab* reported higher levels of perceived discrimination, they also reported significantly lower anxiety about their physique, body dissatisfaction, and pressure

to conform to a Westernized ideal of beauty. The authors conclude that the *hijab* may, in fact, act as a protective element for some Muslim women. Clearly, the meanings attached to certain artefacts of the Islamic religion are multifarious – they may be deeply personal, yet publicly expressed and experienced.

To encapsulate, the discussion above underscores the need to address these contradictions and nuances in perceptions and explore the ways in which immigrant South Asian Muslim women—those who immigrated in early to mid-life as well as their older female relatives—negotiate and respond to questions around identity, faith, change, and continuity and rupture of norms, familial bonds, and representations of the family in the context of the broader discourse around Islam and immigration. This study situates these everyday attitudes and behaviors within the framework of support exchanges and barriers to accessing available health and social care services. The following discussion provides a brief synopsis of some key barriers to access among racialized immigrants, as outlined in the ethno-gerontological literature.

Barriers to Access

Gender

Gender is a crucial organizing element of social life that shapes economic and power relations (Estes and Linkins, 2000). Indeed, as Vissandjee and colleagues (2004) have argued, the label, "immigrant woman", refers not merely to a legal status but rather, encompasses a range of intricate and complex realities and experiences borne out of everyday lived experiences:

> [...] when viewed as a social construct, the term "immigrant woman" usually refers to women of colour, women who do not speak English (or French), and women who occupy lower positions in the occupational hierarchy (p. 3).

Racialized immigrant women disproportionately face a number of adverse consequences such as poverty, discrimination, low social status, and violence. Not surprisingly, they are at greater risk

of adverse mental health outcomes (Astbury, 2001, as cited in Hyman et al., 2011). Further, they face greater risk of interpersonal violence and are more likely to delay seeking help (Hyman et al., 2011). Research also suggests that often, the burden of care for young children as well as older adults falls disproportionately on women in immigrant families (Spitzer et al., 2003). Immigrant women tend to disregard their health-related needs, thereby making gender a significant barrier to the uptake of health promotion practices, particularly those related to preventive health screening such as routine pap smears and mammograms (Ahmad et al., 2004).

Evidence from South Asia indicates that SES, educational attainment, and place of residence are significant determinants of health among Muslim women (Rai, 2015). In addition, lifecourse events such as gender segregation, patriarchal protection, and preparation for marriage and family life in their early years in their birth country may prevent older immigrant women from accessing available health and social support services that do not align well with internalized traditional and cultural health-seeking norms (Weerasinghe and Numer, 2010). Indeed, research suggests that American Muslim women have one of the lowest rates of healthcare utilization across a range of services compared to all other groups (Vu et al., 2016; Hasnain et al., 2011; Abu-Ras and Abu-Bader, 2008). Padela and colleagues (2015), however, in their quantitative study on breast-cancer screening among American Muslim women in the Greater Chicago area, found that Islamic modesty was not associated with screening practices; rather, perceived institutional discrimination resulted in lower rates of biennial mammography. All of these complex, contradicting, and intersecting factors may adversely affect health outcomes among immigrant South Asian Muslim women and their health-seeking behaviours.

Socio-economic Status

Socio-economic status (SES) or class is a critical social determinant of health (Mikkonen and Raphael, 2010). In the US, where family sponsorships tend to represent a significant proportion of immigrant entries every year, immigrants are generally less educated than the native-born population (Siddiqi et al., 2009) and are disproportionately represented in low-paying jobs in the service sector (Castaneda et al. 2010). This troubling over-representation of immigrants, particularly women, in low-wage jobs in sectors such as food service, health care delivery, and housekeeping, is reflective of the continued racialization and gendered nature of the labour market (Saraswati, 2000). The immigrant experience, therefore, is often characterized by precarity in employment, underemployment and even poverty (Zuberi and Ptashnick, 2011; Hyman, 2004). Immigrants who live in poverty may also encounter specific economic barriers to adopting health promoting behaviours, such as those related to good nutrition and physical activity (Rusch et al., 2015). Economic and financial issues, including lack of health insurance, are also reported as significant barriers to healthcare access among Muslim American women (Hasnain et al., 2011). In addition, mid-life immigrant women may be caught between managing the stressors of a competitive labour market with the demands of care provision for their older relatives at home (Spitzer, 2003), constraints that may take a toll on their physical and mental health, and result in even greater difficulties in accessing health and social care services. Indeed, as DeMaio (2010) maintains, greater attention needs to be paid to the ways in which inequality, poverty, and class intersect to influence health transitions of immigrant populations.

Language Proficiency and Health Literacy

Language proficiency is another key barrier to access. The lack of English language skills, compounded by limited availability of translator services, particularly those with expertise in cultural interpretation, and the poor quality of clinical interactions due to language barriers, may

result in limited resource use (Koehn et al., 2014). Bierman and her colleagues (2012), found that adults who did not speak English or French at home were less likely to be satisfied with their experience of getting an appointment for a regular check-up than those who spoke only English or French. The authors also highlight the reinforcement of power hierarchies in the ways that certain racialized immigrants encounter longer waiting times in order to receive primary care for urgent, but non-emergency conditions. South Asian and Arab women with limited English language proficiency, in particular, reported difficulties accessing care to monitor health problems as compared to less than one in five white women. Consequently, foreign-born older adults with low levels of linguistic proficiency may turn to informal and sometimes unauthorized and potentially harmful sources for health care and management such as traditional and complementary medicine practitioners (Zhang and Verhoef, 2002). Pakistani Muslim immigrants in the UK, for example, may navigate plural systems of healthcare such as homeopathic and *unani* medicine, and often decisions around seeking ethnomedical alternatives are made at the level of the family and not by the individual (Rhodes et al. 2007). Linguistic capability may also affect the ability of immigrants to become effective advocates of their needs in the healthcare domain. For example, despite the availability of information-seeking avenues such as health information hotlines in California, immigrant older adults may be unable to coherently express their health-related needs over the telephone due to limited linguistic proficiency, often resulting in a communication breakdown between the patient and the provider (Blair, 2012).

With regard to health literacy, or the capacity to make informed and appropriate decisions about their health, immigrants in general score significantly below the national average in the US (Soto Mas et al, 2015). Tackett and colleagues (2018) in their narrative review of the literature on barriers to healthcare access among Muslim women, found that low levels of health literacy

along with limited linguistic capability may result in lower uptake of health-related resources and may present significant roadblocks in chronic disease management among this group. Likewise, Choi and Smith (2008) found that immigrant older adults with chronic conditions often have limited knowledge/information or misinformation about their condition, resulting in a lack of trust in the formal health care system. Further, Fryer and colleagues (2012), in their study on the relationship between English language proficiency and falls risk and falls prevention, point out that linguistically diverse patients from minority groups may report worse gait and balance ability, greater need for assistance with activities of daily living (ADL's), and may actually return home frailer than patients who are proficient in English.

Cultural Beliefs and Practices

Several qualitative studies have examined the role of cultural beliefs and practices in shaping perceptions around health and illness in immigrant communities. For example, research suggests that the comparatively lower rates of participation in cervical cancer screening among older South Asian immigrant women in Canada can be largely attributed to their holistic views on health (Grewal, 2004; Weerasinghe and Numer, 2010). Further, given the 'collectivistic' orientation of certain ethnic minority groups, an ambiguity of boundaries may exist between one's own health and the health of close family members, resulting in a situation where certain family members (particularly women in the family) end up placing their own health needs last (Ahmed et al., 2004). Likewise, becoming less active is often depicted as a normal part of aging in some ethnic communities, an attitude that may be compounded by a fatalistic approach towards health and illness (Horne and Tierney, 2012). In Padela and Zaidi's (2018) search for potential explanations for differences in health outcomes between Muslim and non-Muslim groups, the authors found that adverse exposures due to having a Muslim identity, interpretations

of health based upon Islamic theology, ethical and cultural challenges to clinical practices due to Islamic beliefs and/or practices, lack of cultural accommodation, and concerns around modesty and propriety shaped health-seeking behaviours in powerful ways, particularly among older Muslim women.

Age

Older adults, particularly those who immigrated later in life, are perhaps one of the most vulnerable of immigrant groups. Immigrant older adults often encounter challenges such as the cold weather, transportation issues, and administrative barriers when they arrive in North America (Lai and Surood, 2013). In the case of financially dependent older adults, families are often unable to provide for their members due to resource constraints, and not all older immigrants have children in North America to take care of their health-related needs (Koehn et al., 2010), factors that may adversely impact health outcomes in this vulnerable group.

As previously discussed, ethnic older adults may experience multiple challenges when they enter a health care setting given their poor health status and limited linguistic proficiency in a mainstream language (Mullings and Gien, 2013). Likewise, Spence and Koehn (2010), in community consultations with Punjabi seniors in the province of British Columbia, Canada, found that depression was a "substantial but hidden problem" among immigrant Punjabi seniors. The authors added racism, poverty, immigrant status, language barriers, and economic and physical dependence on sponsors to the list of potential determinants of ethnic older adults' mental health.

Social Isolation

Social isolation is also an important determinant of health among older adults. North America's older adults are increasingly lonely and isolated, so much so that health and social researchers

have recently referred to loneliness among older adults as a 'public epidemic' that may lead to depression, hypertension, sleep disturbances and dementia (de Jong Gierveld et al., 2015). Late-life immigrants of non-European descent are more likely to be lonely compared to their European counterparts for a number of reasons, including: 1) language and cultural barriers that may make forging new connections more difficult in the host country; and 2) the fact that the immigration experience oftentimes separates people from lifelong networks of family and friends (ibid.). These factors may have adverse effects on the health of immigrant older adults. For older immigrants who co-reside with their sponsors (usually adult children), social isolation and a sense of indebtedness may encourage them to downplay their symptoms in an effort to remain inconspicuous and to not be a burden to their children (Koehn, 2009). Indeed, social isolation and role reversal or loss of role in the family may result in a "double barreled social debilitation" (Blair, 2012, p. 1772) among older immigrants, a finding that is supported in Ajrouch's (2008) study on the health of older Arab American immigrants. The author found that compared to their American-born counterparts, older immigrants reported more feelings of loneliness, smaller social networks, and were less acculturated.

The barriers identified and discussed above are by no means exhaustive; yet clearly, they are salient, complex and often intersect with one another, shaping the health of immigrant populations in myriad ways.

The current study explores: 1) the dynamics of multigenerational living and the everyday lived experiences of kin-work and intergenerational exchanges in mid- to late-life diasporic South Asian Muslim families, a rapidly-growing family form in the US; 2) the (re)negotiation of familial bonds and the enactment of religious beliefs and practices such as those around filial expectations; and 3) how categories of gender, age, and religiosity influence the ways in which

attitudes, behaviours, and meaning-making processes related to kin-work and intergenerational exchanges of support are constructed within the broader framework of Islamophobia, xenophobia, and salient structural barriers to accessing available health and social support services for immigrant South Asian Muslim women. Guided by an overarching objective to contribute to our knowledge and understanding of how to enhance the well-being and quality of life of diasporic South Asian Muslim women and their older female relatives in the US, several research questions emerge.

Research Questions

1. What is the nature of intergenerational support exchanges in immigrant South Asian Muslim families in the US?
2. How do religious beliefs, cultural practices, generational status, age, gender, and immigrant status intersect and shape the everyday lived experiences of immigrant South Asian Muslim women?
3. What are the perceptions of health among immigrant South Asian Muslim women?

In the chapter that follows, I outline the theoretical and methodological framework that will help answer these questions.

Chapter III: Methodology

In this chapter, I provide a description of the research process, namely, the 'theoretical toolbox' I have drawn from to structure the analysis and interpretation of my participants' narratives, the contextual circumstances in which this research took place, methods employed, sampling and recruitment, research instruments, methods of data analysis, issues of authenticity and coherence, and ethical considerations that guided this study.

The 'Theoretical Toolbox'

A Life Course Perspective (LCP)

In June 2010, the Committee on Migration and Immigration of the Population Change and Lifecourse Strategic Knowledge Cluster met at the University of Montreal, Canada, to brainstorm central questions for migration analysis (Edmonston, 2013). Making a strong case in favor of the lifecourse perspective, Barry Edmonston, in a special issue of *Canadian Studies in Population* that showcased papers from the 2010 meeting, writes that migration has several unique features that make it suitable for the lifecourse perspective (LCP): 1) migration does not occur in a vacuum and affects not only the migrant, but families and community members, both in the country of origin as well as the host country; 2) migration is influenced by multiple social and economic factors in the communities of origin and destination; 3) migration is rooted in time, in a particular historical period that takes into account the social and economic conditions prevalent at the time; 4) migration may take place at different stages in one's lifecourse and affects a person over his/her lifetime; and 5) the potential of a future migration may also shape a person's current actions and behavior as they may be influenced by their plans for the future. Given this, the fundamental principles of the life course perspective (LCP), discussed below, provided a suitable theoretical framework to analyse and interpret the life stories of the

immigrant families in my study.

Tracing the historical development of LCP, Hutchinson (2015) writes that in the early 1960s, the sociologist Glen Elder Jr., analyzed data from three longitudinal studies of children conducted by researchers at the University of California, Berkeley. The debilitating impact of the Great Depression of the 1930s, states Hutchinson, had a profound effect on Elder, who began to contemplate the influence of seminal lifecourse events on individual and family pathways through time. Thus, the lifecourse perspective was born as Elder raised a call for developmental theory and research that explored the ways in which historical forces shape contemporary understandings of family, education, and work roles.

Over time, the popularity of LCP as a meaningful way to understand pathways of families has grown exponentially (ibid.). In the extant immigration literature, it has been effectively utilized to explore the relationship between human agency and health among Asian immigrants (Gong et al., 2011); mental health service use among Asian immigrants (Nguyen and Lee, 2012); migration processes of highly skilled Asian Indians (Kou and Bailey, 2014); the lived experiences of Asian Indian grandmothers (Weerasinghe and Numer, 2012); financial hardship in older immigrants (Liversage and Jakobsen, 2016); the relationship between pre-migration trauma exposure and psychological distress in Asian American immigrant families (Li and Anderson, 2016); dietary acculturation (Weisberg-Shapiro and Devine, 2019; McClain et al., 2019); and immigrant fertility (Kulu et al., 2019; Wilson, 2020).

As a theoretical framework, LCP accounts for the dynamic interaction of lived experience and socio-historical context and the intersections of subjective and shared meanings that shape lives over developmental and historical time (Cohler and Hostetler, 2003). Simply put, it explores the continuity and change of human lives brought about by interpersonal, structural,

and historical forces (Elder and Johnson, 2001). It includes chronological age and also addresses, as Worth and Hardill (2015) describe it, "individual and collective trajectories of experience in space, in place, and through time as these are shaped by events, roles, memory and retrospection (p. 2)". Some basic LCP concepts include: 'cohort', a group of persons who were born during the same time period and who, "experience particular social changes within a given culture in the same sequence and at the same age" (Hutchison, 2010, p. 11); 'transition', a change in role or status; 'trajectory', a long-term pattern of continuity and change, which includes several transitions; 'life event', a major incident or occurrence, which may be sudden and abrupt and which may have long-term consequences; and 'turning point', a life event or transition that results in significantly altering one's life course trajectory.

Jasso (2003) suggests that given the major changes associated with migration, immigration itself is an event that qualifies as a 'turning point'; for the first-generation South Asian Muslim women in this study, for example, immigration was a turning point in the lives of participants that altered their socio-cultural environment, familial relationships, perceptions of the self, and beliefs and expectations, such as those around filial obligations and responsibility.

LCP is also useful in understanding the ways in which people are embedded in multifaceted and dynamic intergenerational relationships (ibid.). Indeed, speaking of intergenerationality, Worth and Hardill (2015) maintain that identities are not fixed but dynamic and LCP allows us to consider how people and communities view themselves in relational terms through linked lives, systems of kinship, and cultural understandings of age and generations. For the current study, it offered a useful way to explore familial dynamics between different generations: the granddaughter and grandmother; the mother and daughter; the mother-in-law and daughter-in-law; the paternal grandmother and granddaughter; the maternal grandmother and

granddaughter; and the triad of grandmother-mother-granddaughter. I used LCP to compare and contrast competing narratives and the ways in which familial relationships, understandings of the roles and enclosures of faith-based values and beliefs, and processes of identity construction may have evolved in the context of migration.

Elder and Johnson (2001) identify five interrelated themes of the LCP: 1) 'the interplay of human lives and historical time', which implies that individual and family development ought to be understood in historical context; 2) 'timing of lives', which underscores the importance of biological age, psychological age, social age, and spiritual age, and the particular roles and behaviours associated with each; 3) 'linked lives and social ties with others', which indicates that human lives are interdependent; 4) 'human agency and personal control', which implies that individuals make choices based on the available opportunities and constraints within their social and historical circumstances; and 5) 'heterogeneity or variability', which indicates that there are significant variations in the life course pathways of individuals based on their diverse social and historical circumstances, cohort variations, social class, gender, culture, and individual agency. I used these five themes to contextualize the lived experiences of immigrant South Asian Muslim women and their older relatives, particularly as they related to dynamic socio-historical contexts, religious practices and belief-systems, pre-and post-migration socialization, internalized cultural values, and complex intra-familial negotiations.

The merits of LCP notwithstanding, I discovered that by itself, this perspective does not adequately capture processes of identity formation and meaning making in immigrant South Asian Muslim women. For example, for some older grandmothers in this study who had immigrated later in life to re-unite with their loved ones, immigration was accompanied by social isolation and loss of status in the family despite living in a multigenerational household. One

participant claimed that although she was “happy overall”, she felt “lost” and “confused”, and unsure about her “place in the family” and her “place in America” given her limited mobility and social interactions with the outside world. As a child, she went on to say, she had seen her own grandmother in Pakistan being revered and respected in the family, particularly after the death of her grandfather, childhood days she looked upon with fondness and also a sense of envy. It was important, therefore, to contextualize the lived experiences of my participants within a framework that acknowledged aspects of social difference and identity and the co-construction of familial roles in the context of migration. The theoretical framework of intersectionality provided a useful lens to capture these nuances, as presented below.

Intersectionality

A key architect of intersectionality theory, Patricia Hill Collins maintains that the history of intersectionality cannot be neatly compartmentalized into specific time periods or geographical locations (Collins and Bilge, 2016). Although many contemporary scholars assume that the concept of intersectionality came into existence when Kimberle Crenshaw coined the term in the late 1980s to highlight the oppression of African American women, Collins contends that the core elements of intersectionality—social inequality, power, social justice, social context, and relationality—emerged as early as the social reform movements of the 1960s. This debate notwithstanding, the intersectional perspective remains a powerful means to critically analyse and understand the multiple axes of social differences and divisions. As Hankivsky (2014) writes:

> Intersectionality promotes an understanding of human beings as shaped by the interaction of different social locations (e.g., ‘race’/ethnicity, Indigeneity, gender, class, sexuality, geography, age, disability/ability, migration status, religion). These interactions occur within a context of connected systems and structures of power (e.g., laws, policies, state governments and other political and economic unions, religious institutions, media).

> Through such processes, interdependent forms of privilege and oppression shaped by colonialism, imperialism, racism, homophobia, ableism and patriarchy are created.

As a "metaphor for the entanglement and interaction of multiple and complex identity categories" (Hulko, 2011, p. 236), the intersectional approach enabled an understanding of the "interlocking oppressions" (Collins, 2015, p. 9) and simultaneous intersections and interconnectedness between aspects of social difference and identity, as they related to ethnicity, gender, social class, geography, age, migration status, and nationality (Dhamoon and Hanskivsky, 2011), that affected the lives of members in immigrant South Asian Muslim families. For example, some older South Asian Muslim women in the current study— those who immigrated later in life as well as some who aged in the US—felt that they were disadvantaged due to limited access to available health and social care services in a system that did not cater to their unique linguistic, cultural, social, and physical needs.

Further, the intersectional perspective suggests that identities and roles are continuously co-constructed in interaction with diverse socio-historical contexts and significant others (Heyse, 2011). Not only are identities constructed, intersectionality acknowledges that that they are multiple, as persuasively argued by Collins and Bilge (2016) in the passage below:

> Essentialism conceptualizes individuals as having unchanged, fixed, or 'essential' identities that they carry around with them from one situation to the next. In contrast to these essentialized, individual identities, [intersectionality sees individuals] as having multiple "subjectivities" that they construct from one situation to the next…Much intersectional scholarship supports this perspective on human subjectivity: individuals typically express varying combinations of their multiple identities of gender, sexuality, race, ethnicity, and religion across different situations. Social context matters in how people use identity to create space for personal freedom (p. 125).

This approach to identity formation as a fluid, relational, and subjective process proved useful in acquiring deeper insights into reciprocal exchanges, ambivalences, and contradictions inherent in intra-familial relationships and the transnational spaces inhabited by diasporic South

Asian women as they made sense of their lives as Muslim immigrants of colour, mothers, daughters-in-law, daughters, grandmothers, granddaughters, spouses, caregivers, professionals and so on in rapidly shifting social spaces.

Intersectionality also recognizes that while being attentive to power relationships that produce social inequality is paramount, it is also important to acknowledge the exercise of personal agency within those very constraints (ibid.). To illustrate, in their study on the ways in which social class, gender, sexuality and immigrant status intersect and shape the lives of an immigrant South Asian family in Vancouver, Canada, Walton-Roberts and Pratt (2005) found that immigrants creatively deploy the categories of 'traditional' (manifested in patriarchal beliefs and practices) and 'modern' (advocating a more egalitarian worldview) as a resource to negotiate gender and class identifications that the process of migration may have destabilized. In order to effectively capture the nuances, complexities, and fluidity inherent in these everyday negotiations, the authors maintain that:

> [...] we need a far richer understanding of the geographies of gender relations, one that exceeds easy binaries that equate modernity and gender equality with 'the West' and traditional patriarchal authority with 'the Rest'. Such an approach would encompass the specificity of place, actual movement across space, and imaginative geographies that circulate within and between them.

As Hall (1990) has also persuasively argued, the immigrant identity is 'framed' by oppositional yet simultaneously operational vectors – of similarity and difference, and contiguity and rupture. An intersectional approach allowed insights into these ambivalences in the ways in which immigrant South Asian Muslim families renegotiated their sense of place and identity relative to evolving social contexts, changing realities, environmental exigencies, and 'Westernized' views of gender and culture.

Thus, with the theoretical perspectives of lifecourse and intersectionality in my

metaphorical toolbox, I decided to utilize an intersectional lifecourse approach that takes into account both the shortcomings as well as inherent complementarity of the two perspectives (Brotman et al., 2019) to explore and understand the storied lives and everyday experiences of the participants in my study.

An Integrated Approach

As a theoretical framework, an integrated lifecourse and intersectionality approach proved useful in understanding the many ways in which diasporic South Asian Muslim families adapt to the changing realities brought about by migration and the challenges of settlement and acculturating to a North American 'way of life'. Specifically, it was helpful in establishing linkages between the various stages along the life-trajectories of three generations of immigrant South Asian Muslim women; it also effectively captured how individual experiences intersect with multiple social categories as related to immigrant status, health, age, language, education, religious beliefs, and geographic location.

Several scholars have used an integrated life course and intersectionality framework in their research. Tyson Brown (2013; 2012), for example, has employed this approach in his study of cumulative disadvantage and race and gender disparities across the life course in the US. Heyse (2011), in her study on how migration transforms experiences of the self in Russian and Ukranian women living in Belgium, also used a retrospective life course perspective to analyze how personal goals, aspirations and experiences of the self are renegotiated in the process of migration, and in interaction with the social environment. In Canada, Clark and Hunt (2011) have examined how gender, life course events and circumstances, and the special health needs of young adolescent girls residing in rural areas intersect to produce conditions of marginalization and isolation. Similarly, Kobayashi and Prus (2011) have used this approach to examine the

'healthy immigrant effect' (HIE) in mid-to-later life Canadian immigrants. Indeed, as Heyse (2011) points out, important life course events and changes in a person's social environment, such as the changes caused by migration, can transform the content and distribution of power dimensions and serve to foreground salient intersections (p. 202).

More recently, Ferrer et al. (2017) and later Ferrer along with Brotman and colleagues (2019) have proposed a more robust theoretical model of the intersectional lifecourse perspective. The authors point out that such an approach helps us better understand and situate everyday lived experiences of racialized and marginalized individuals within broader structural and institutional forces. An intersectional lifecourse approach, the authors posit, allows us to identify and consider mutually reinforcing categories of: 1) seminal life events, timing of events, and structural forces; 2) lives that are linked locally and globally; 3) multiple identities and processes or categories of difference; and 4) power relationships, agency, and resistance. To illustrate, in the current study migration was a significant (sometimes disruptive) life event for several women who immigrated later in life, yet the process of immigration and related experiences could not be fully understood without considering US immigration policies and related systems of settlement, discrimination, acculturation, and relocation. Simultaneously, the transnational lives of late-life immigrant women in this study allowed them to establish and maintain linkages locally with immediate and extended family members and also globally via social media tools such as WhatsApp and Skype. Relatedly, the process of aging for these women was not an isolated experience; rather, it was simultaneously experienced and 'lived' by their loved ones. And while these lived experiences were shaped by power differentials, social differences and divisions, the late-life immigrant women in this study exercised personal agency by actively seeking out the assistance of their grandchildren in navigating life in a 'foreign' land.

Thus, an intersectional lifecourse approach facilitated a more nuanced appreciation of the matrix of structural, personal, and relational processes experienced by South Asian Muslim families over time. And in order to acquire a deeper and more holistic understanding of these processes, an overarching interpretive approach served as a suitable vehicle for data collection, analysis, and interpretation, as outlined in the following section.

Qualitative Inquiry: Making the case

Morrow and Smith (2001) suggest that the purpose of qualitative research is to understand and explain participant meaning. It is a process based on distinct methodological traditions of inquiry that explore a social or human problem (Creswell, 1998), an art that involves aesthetic and intuitive decisions about rendition − what needs to be told, how it is to be told and how much to tell (Fischer, 1994). Research suggests that qualitative inquiry is particularly useful in the study of ethnocultural groups. According to Morrow and Smith (2001, pp. 582-583), there are several reasons as to why qualitative research methods are appropriate for ethnocultural research: 1) qualitative research is attentive to the context; 2) it is able to effectively capture the unique meanings that participants may attach to their lived experiences; 3) concurrently, it deals with the researcher's own self-reflection and self-awareness; and 4) its interpretive, engaged approach to data collection and analysis provides an opportunity for previously unheard 'voices' to be heard by bringing them to the forefront. To expand upon this, consider the following excerpt from my interview with Sehr, a 42-year old mother of two teenage girls who immigrated to the US twenty years ago and lives in the same household as her mother-in-law:

> So basically Ammi [Urdu for mother/mother-in-law] moved to America in 2015, after Abbu's [Urdu for father/father-in-law] *inteqal* [death]. Like I was not very sure, like she would be leaving everything behind, like literally everything, friends, her whole life, right? Here it was only me. But Moin [Sehr's husband; name changed] was just like this is how it is. He said in Islam, Ammi could not stay alone without a *mahram* [permissible male relative like a husband or son] and *muhafiz* [protector] after Abbu's death. And I

agreed. What could I do, he is right, that's my religion and I have to follow it.

First, the conversational, open-ended flow of the interview and the initial rapport I had built with her during the recruitment process allowed Sehr to talk freely about an important turning point in her life course – her mother-in-law's immigration to the US. Second, careful engagement with her words allowed me to hear not only the voice of a daughter-in-law concerned about co-residing with her mother-in-law, but also the voice of an empathetic woman, an immigrant who was well aware of the challenges of relocation, and a wife who did not question her husband's decision, internalizing it as the right thing to do from a faith-based perspective. Third, Sehr's words made me reflect on my own positionality as a South Asian Muslim woman who lives with her older parents. Fourth, her reference to the concepts of *mahram* and *muhafiz* allowed me to contextualize Sehr's words within the framework of traditional Islamic beliefs.

The discussion above serves as one such example where the interpretive nature of qualitative methods facilitated the research process. Overall, qualitative methods were helpful in interrogating and unpacking the everyday negotiations involved in multigenerational living, the dynamics of intergenerational support exchanges, and the subjective meanings attached to faith and cultural values of filial obligation in South Asian Muslim diasporic families, the nuances of which are difficult to capture via large-scale surveys or questionnaires with close-ended questions.

Ethical Considerations

Prior to conducting the study, ethics approval was obtained from the Human Research Ethics Board (HREB) at the University of Victoria. The protocol follows the guidelines set by the Tri-Council Policy Statement (TCPS, 2017) on the ethical conduct of research involving human subjects. Details such as the characteristics of the target population, steps in the recruitment

process, data collection methods, location of participation and possible inconveniences, and risks, benefit or harm to participants were provided to the HREB. I also informed the Board that I would obtain participants' permission to use the data collected for analysis, but should they not be willing, I would destroy the data collected during the interview.

Participants met the criteria for minimal risk research requirements: they were 19 years of age or older and capable of voluntary informed consent. I also informed the Board that the potential benefits from the study outweighed any emotional or psychological harm to the participants.

Given the COVID-19 pandemic, the informed consent process was split into two stages: 1) I delivered the consent form with a stamped, self-addressed envelope to the participant's home; 2) participants reviewed the form, and either signed and sent it back or called me if they had any questions. A key concern among participants was around their anonymity. I explained to them the steps I would take to ensure their confidentiality and anonymity, even asking participants to 'choose' the name that would be their pseudonym in the study reports. Before the start of the interview, I again ensured that participants were fully aware of the nature of my research and that they gave permission for me to digitally record the interview. I guaranteed anonymity and confidentiality by 1) using pseudonyms for all participants; and 2) by ensuring that all relevant data and study documents were stored in a secure location at all times in a password-protected personal computer for electronic files or in a locked cabinet in my home-office – steps, which Baez (2002) refers to as the 'convention of confidentiality'. I was also cognizant of the fact that a study related to an easily identifiable group—in this case, immigrant South Asian Muslim women living in a mosque community—often carries with it the risk of 'deductive disclosure' (Tsai et al., 2016). In other words, deductive disclosure occurs when the

traits of individuals or groups make them identifiable in research reports (Sieber, 2006); therefore, I took all possible measures to ensure that potential identity-revealing information, such as a description or name of the neighbourhood or even the city and state the participant resided in, are not present in the final report.

In addition, I was prepared for the possibility that certain 'ethically important moments' (Guillemin and Gillam, 2004) may arise during the interviews. In other words, I was aware that during my interaction with the participants in this study, "difficult, often subtle, and usually unpredictable situations" (p. 262) might occur that may require a certain amount of emotional labour on my end. Indeed, as Dhillon and Thomas (2019) have pointed out:

> Issues of anonymity, confidentiality, and informed consent are usually carefully addressed and reported on in published research outputs but more complex aspects of engagement, such as trust, reciprocity and emotional reactions are less frequently analysed.

I was, therefore, reflexive, reciprocal, and acutely attuned to the needs and comfort of the participants throughout the interviews, offering them a chance to halt/end the interview if they so desired without any adverse consequences. One such ethically important moment presented itself when Mahrukh, a second-generation immigrant who lived with her parents was overcome with emotion as she talked about the sense of debt she felt towards her parents and the sheer strength of support—emotional as well as physical—that she continued to receive from them. I quietly listened as Mahrukh sobbed while she shared her feelings, offering to end the interview and resume at a later date should she so desire. However, Mahrukh preferred to continue, remarking that she felt better after expressing her feelings.

Sampling and Recruitment

Non-probabilistic methods, namely purposive and snowball sampling, which are congruent with the inductive and interpretive nature of qualitative research, were used to recruit participants for

the study. With regard to the study site, Killawi and colleagues (2015) have noted that not only does the local mosque satisfy the function of fulfilling the religious needs of the Muslim community, it also functions as a community centre offering educational and social services, and acts as a trusted setting to interact with this population. The authors also point out that analogous to health collaborations with churches in African American and Latino communities, mosque communities may act as a site for establishing trust-based relationships and advancing health equity. Further, research from the Pew Center (2017) suggests that close to 43% of the American Muslim population attends a local mosque at least once a week. With these factors in mind, I approached a mosque community in a large culturally diverse city in the Midwest, the members of which are primarily of South Asian origin. Approximately 4000 households belong to this mosque community (ICN, 2019).

I had originally intended to send emails to the local imams (religious heads of the mosque) informing them about the purpose and nature of this study and requesting them to reach out to members of the community during daily prayer services; however, with the outbreak of the COVID-19 pandemic in March 2020, congregational prayers were prohibited and all places of worship in the state were under lockdown, a situation that continues at the time of writing this dissertation. Given this contingency, I reached out to members of the executive boards, who are primarily community-based volunteers involved in organizing outreach and educational events, requesting them to 'spread the word' about this study (see Appendix A). I also attached the letter of invitation (see Appendix B) containing details about the study, as well as my contact information to the emails, requesting members to either forward it to community members, or to inform them by word-of-mouth. These members, therefore, acted as 'broadcasters' who facilitated my access to the population of interest. I had also originally intended to post

recruitment posters (see Appendix C) on community bulletin boards and local ethnic grocery stores and restaurants, but the ongoing social distancing guidelines prevented me from doing so; therefore, I therefore attached a copy of the poster to the emails I sent to members of the executive board. The following inclusion criteria was used to select study participants:

1. Identify as a South Asian Muslim woman.
2. Over the age of 19.
3. Live in a multi-generational household (i.e., more than two generations living in the same household).
4. Born in a South Asian country (first generation) OR having at least one parent or grandparent who was born in a South Asian country (second-generation/third-generation).

Given my ability to comprehend and converse in the four main South Asian dialects, namely Hindi, Urdu, Punjabi, and Bengali, the selection criteria was not limited to participants who could speak English. Further, although no direct incentives were offered to participants given budgetary constraints, I informed them of indirect benefits of participation, e.g., raising awareness about the unique priorities of aging South Asian Muslim families and potentially informing public health interventions that are congruent with those needs.

Recruiting participants

Originally, 40 South Asian Muslim women were recruited for this study; of this, 10 women declined to participate citing scheduling conflicts and time constraints. Eventually, I conducted individual interviews with 30 South Asian Muslim women representing three generations between June and August 2020: five family triads, five family dyads, and five interviews with immigrant South Asian women who were not part of a triad or dyad yet expressed interest in the

study and wanted to share their perspectives. Two of these women were first-generation immigrants and three were second-generation immigrants. All five lived in a multi-generational household. Of the triads and dyads, five granddaughters had first expressed interest in the study and they actively helped in recruiting their mothers and grandmothers for the interview. For further details on participants, see Figure 4.1 in the chapter that follows.

Data Collection

I had originally intended to conduct in-person, narrative interviews at locations chosen by the participants. With the COVID-19 outbreak and the subsequent 'shelter at home' directive by the state government, meeting participants in-person was not feasible. I therefore requested them to participate in a telephone interview with me on the specific date and time chosen by the participant. In making this request, I was cognizant of the limitations of telephone interviews for qualitative research and data analysis, namely, the inability to capture non-verbal cues and gestures such as a shrug or smile (Garbett and McCormack, 2001; Creswell, 1998) and the potential lack of privacy given that these interviews were to take place at a location where other members of the family could also be present. I could have postponed the interviews to a time later in the year but for pragmatic reasons related to the completion of my doctoral program and the fact that the social distancing guidelines in the state appeared set to continue well into the beginning of the next year, I decided to go ahead with data collection after consulting with my dissertation committee. I utilized the following strategies to offset these limitations: 1) I followed Burke and Miller's (2001) advise and established rapport with my participants by engaging in 'small-talk' before the interview. Sometimes, especially for the older women in this study, the grandmothers, this involved multiple conversations leading up to the day of the interview; 2) I drew upon Ward et al.'s (2015) and Drabble et al.'s (2016) research on the benefits of

conducting in-depth interviews over the telephone. These authors found that although it is not possible to observe non-verbal cues in a telephone interview, it is nevertheless an exercise in active and more engaged listening as those very cues may sometimes act as distractions for the interviewer. Indeed, from the perspective of the 16 participants in Ward et al's study, it was easier to establish rapport and participants were able to concentrate on the voice of the interviewer rather than on their face (p.118), facilitating a non-intimidating interview environment. Further, the authors state that often participants may speak more freely about sensitive issues (in my study, about religious beliefs and intergenerational relationships) when they are not face-to-face with the interviewer; 3) I informed participants of the potential limits to privacy given that most of the interviews would take place at their homes where other family members could possibly overhear the conversation. This information was included in the study consent form; and 4) given concerns about privacy, many participants proactively suggested days and times when they could talk in private; thus the interviews took place across a wide range of time – as early as 7am to as late as 9pm, with some participants opting for late afternoons because most of the household, especially young children and in some cases, older relatives, were taking a nap after lunch and they would not be disturbed during the interview. A key advantage of this data collection strategy was that since all women who worked outside the home were working remotely due to the pandemic, they had greater flexibility and it was easier to schedule and conduct interviews within a short timeframe. Further, I was able to take notes unobtrusively during the interviews, another advantage of telephone interviews, also pointed out by Smith (2005). Finally, the interview process itself was greatly facilitated by the fact that all 30 participants were 'phone savvy' and all had access to a personal cellphone.

Most interviews were conducted in English; two with older participants were conducted in Urdu, a language commonly spoken in Pakistan and India. Kang (2012) has pointed out that unique challenges regarding interpretation and communication may arise in interview situations where the two languages being used are typologically different (for example, Korean and English). In this regard, my ability to converse in and understand Urdu helped me establish rapport with my participants. Further, my status as a cultural insider enabled me to be reflexive to certain words and phrases typically used in the Urdu language. For example, I was attentive to the use of the Urdu word '*achcha*', which has multiple cultural connotations. The literal meaning of the word in Urdu is 'good'; however, it can also be used to emphasize or underscore a particular point. Or it could be a way of seeking affirmation from the listener. To illustrate, note the following statements from the interviews and the usage of the word '*achcha*':

"*Accha hai* its very nice here" – synonymous with good or nice.

"I was very new in this country, no relatives were here, and then I got pregnant, so I'll say I was very frightened, *achcha*, very scared and nervous" – here the word is being used to underscore a young immigrant mother's trepidation.

"I will tell you about how it all happened, you know, how we moved to America, I don't know, 35 years ago I'm thinking, and you tell me if it is a too long story, tell me if I should stop if it is not relevant, *achcha*?" – here the participant is seeking affirmation from me, asking me to let her know if she went off-topic.

Thus, overall, the interviews were informal, free-flowing, and conversational, wherein I invited the 30 South Asian Muslim women in my study to tell me the story of their lives, as discussed next.

Narrative Interviews

Clandinin and Connelly (2000) have indicated that narratives are stories, which become a way of understanding experience, both personal and social. An individual must be understood both in terms of their subjectivity as well as their experiential relations with the social world. Experiences produce and reproduce themselves, building upon one another and, therefore, "wherever one positions oneself in that continuum − the imagined now, some imagined past, or some imagined future − each point has a past experiential base and leads to an experiential future" (p. 2). The authors suggest that since "people live stories, and in the telling of these stories, reaffirm, modify them, and create new ones", that "stories lived and told educate the self and others, including ... researchers who are new to their communities" (p. xxxvi). Defined thus, the narrative interview becomes a strategic vantage point from where researchers can develop a point of reference upon which they can ground the lived experiences of their participants, as well as their own experiences of the research process.

The narrative interview is uniquely suited to ethnocultural research. As Patton (2015) maintains, narrative inquiry allows the researcher to answer questions such as: “how can this narrative (story) be interpreted to understand and illuminate the life and culture that created it? What does this narrative or story reveal about the world from which it came?” (p. 98). In research on diasporic South Asian Muslim families, via the tools of language, text, analysis, and interpretation, the narrative proved to be a valuable means to draw out the life experiences of three generations of women within corresponding social, spatial, cultural, institutional, place, and people contexts.

Further, the narrative interview is much more than a mere exercise in 'telling a tale'− it is in fact a collaborative process of knowledge construction, highlighted by the lived experiences of both the researcher and the participant, and the practical applicability of the findings to institute

change/transform/interpret a social situation (Reissman, 2003). Pragmatically, while it privileges an interpretive understanding of the narrated lived experiences of individuals (including the researcher through an exercise in self-reflexivity as discussed later in this chapter) as the ultimate source (and site) of the validation of knowledge, it forges connections to the broader social, cultural, and political structures within which those experiences are situated (O'Reilly, 2012) and was, therefore, congruent with my theoretical framework of an intersectional lifecourse approach. For research on multigenerational South Asian Muslim families, the use of the narrative interview effectively captured the unique lived experiences of South Asian immigrants and their older relatives vis-à-vis co-residence by inviting them to narrate the story of their lives. To this end, the interview questions were broad and open-ended, often reduced to mere prompts in the interview process in order to allow participants to relate their story (Reissman, 2003). And while the approach was "slow and painstaking", requiring attention to subtleties, nuances of speech and responses, and social and historical contexts, it yielded big dividends in the form of rich data (Reissman, 2003, p. 342). Building upon the research questions identified previously, the loosely structured 'interview guide' in this study corresponded to four broad themes and attempted to capture key aspects of the storied lives of my participants. These included stories of 1) immigration; 2) living arrangements; 3) *deen* (faith); and 4) health (see Appendix D).

Patton (2015), however, cautions against equating the story with the narrative. For researchers, the story is the data, and the narrative, the analysis. Further, he points out that while the story tells us about what happened, the narrative goes beyond that – it tells us how what happened (the story) was told, and the way it was structured and scripted "within some context for some purpose" (p. 128). The narrative interview, then, is the medium through which participants provide "texts of identity" (Drzewiecka, 2001, p. 250), which reveal the multiple

ways in which they locate themselves in relationship to "cultures, communities, and others" (ibid.). Such an approach provided insights into the complex process of identity construction and renegotiation of familial ties by tracing the continuities as well as vicissitudes across the life course in diasporic South Asian Muslim families. By inviting immigrant South Asian Muslim women and their older relatives to tell the stories of their lives, I tried to capture significant turning points, the course of their life trajectory, and the dynamics of linked lives, as well as their everyday lived experiences as they navigated the complex dimensions of social life as related to religious beliefs and spirituality, ethnicity, gender, age, health, immigrant status, and class.

Data Analysis

The recorded interviews were transcribed line-by-line and verbatim. During this process, I followed the advice of Bird (2005) who posits that transcription should be regarded as a key step in interpretive qualitative research, contributing an experiential context which adds to the richness and rigor of the research. Although it was a time-consuming and somewhat messy process, I chose to transcribe each interview by hand rather than utilize a transcribing software. This enabled a deep immersion in the data through repeated careful and attentive listening, allowing me to situate the interview within the particular social context in which it occurred, as well as initiate a dialogue between the spoken text and my own mind. This deeply reflective process also allowed me to assess and critique my skills as an interviewer, including considerations on eliciting responses, suitable probes, and such for subsequent interviews. Finally, it provided a preliminary sense of some of the emergent themes, which I noted down in the margins and revisited to triangulate with the findings upon completion of data analysis, thereby enhancing study rigor. Another consideration in the interest of time was to use a qualitative software such as NVivo to organize and manage the data; however, I found that the

experiential process of color-coding the handwritten interview transcripts and immersing myself in the text facilitated a deeper engagement with the data and the meanings attached to the stories of my participants, as previously discussed. In the analysis of data, I followed the iterative process of 'analytical hierarchy' described by Ritchie and Lewis (2013), presented below.

First, in data management, the raw data were tagged and synthesized into emergent themes. To organize the raw data, I first identified initial themes and codes (e.g., "respect and obey parents") and created an index (see Appendix E). I then labeled and synthesized data by categorizing key elements and dimensions (e.g., the category of "Islamic values"). The next step involved the detection of patterns primarily through associative analysis and identification of clustering. Patterns were detected on the basis of recurring themes or themes with shared meaning. During this process, common themes across participants' narratives emerged, including, for example, the spiritual conceptualization of filial obligation through the notion of *sawaab* (reward in the afterlife) and the moral duty of a Muslim. I also made a note of data that did not seem to 'fit' into a particular pattern (by jotting down memos in the margins), such as differences in perceptions of filial obligation among those who immigrated in the late 1970s and early 1980s and those who immigrated in the late 1990s and early 2000s. These data accounted for much of the heterogeneity inherent in the lived experiences of my participants.

I synthesized the analysis by organizing the clusters, themes, and patterns by hand, which allowed me to begin establishing connections between the emergent themes and facilitated the interpretation of the data significantly. I then developed a descriptive account where the data were organized into key dimensions of the phenomenon being studied (e.g., "Islam as a way of life") and patterns in the data were explained on the basis of interconnections across emergent themes (e.g., "utilization of faith and spirituality to impart meaning in a diasporic context"). This

process involved revisiting the transcripts to address the 'how' and 'why' questions emerging from the analysis. I also used the observational notes from the interviews to establish links between the words spoken by the participants and my own observations. To illustrate, consider the following excerpt from one of the interviews:

> It feels safe, I mean [laughs], what can I say, I don't have any issues [pauses]. I feel like there is definitely more liberty and religious freedom for Muslims here in the US, so, what I am trying to say [laughs], I mean, it's very safe here, yes.

Here, Zoya, a first-generation immigrant woman from India, is talking about the freedom to practice religion freely in the US. At first glance, she appears to associate this broad, constitutional right to a perceived sense of safety and security, yet I noticed that I had made the following memo as Zoya was speaking: "P. seems reluctant to discuss. Nervous laughter? Sounds hesitant. Keeps repeating herself". As I continued with the data analysis process, I noticed that this reluctance to discuss experiences of Islamophobia or religious discrimination was inherent in the accounts of first-generation immigrant women who were born and raised in India. I discuss this theme in more detail in the chapter that follows, but briefly, this reluctance could be attributed to an internalization of their minority-status as Muslims in the predominantly Hindu country, India, that precluded them from being critical of the system for fear of persecution.

In the presentation of my findings, I also used a typology to help structure the themes. Typologies, defined as the "specific forms of classification that help to describe and explain the segmentation of the social world or the way that phenomena can be characterized or differentiated" (Spencer et al., 2003, p. 214), can be emergent from the data, or conceptually derived from relevant literature. Here, it was important to capture the lived experiences of each generation of South Asian Muslim women in my study; hence, I organized my findings in

relation to the stories of my participants as they were told by each generation – the grandmothers, daughters/daughters-in-law, and granddaughters as well as their experiences of multigenerational living. These key findings are presented in Chapter IV.

Finally, in the explanatory account, emergent themes were considered in relation to the theoretical lenses of an intersectional lifecourse perspective, and the findings were contextualized within the broader literature on intergenerational support exchanges in immigrant families and the research questions guiding this study. Chapter V provides a discussion of the key findings, implications of this study, and suggestions for future research.

Reflexivity

Authenticity and Coherence

Mantzoukas (2004) has pointed out that the representation of the qualitative researcher in qualitative inquiries is inevitable. In an effort to enhance the trustworthiness of the qualitative findings (Creswell and Miller, 2000), here I disclose my own positionality as an immigrant South Asian Muslim woman who was born and raised in India but immigrated to the US in the late 1990s. The data collection and data analysis processes were enhanced by my own life experience as an immigrant South Asian Muslim woman who co-resides with her older parents. My lived experiences equipped me with unique insights not available to a cultural 'outsider'. Indeed, as was presented in the opening pages of this dissertation, my interest in this research topic stemmed partly from my own lifecourse trajectory and social location as an immigrant Muslim woman of colour. My positionality in terms of faith, culture, experience, and gender provided a basis for building rapport with my participants, and also served as a platform to enhance the interpretation of my participants' life experiences. These two factors helped establish the credibility and authenticity of my findings. That stated, although my identity as a member of the

South Asian Muslim community assisted in building trust with the participants during the interview process, I was also cognizant of my positionality as an 'insider'. As Gearing (2004) recommends, I made every effort to ensure that my personal thoughts or opinions do not influence my role as a researcher or impact my participants. This was even more salient during two interviews where I knew the participants socially. Further, in the interpretation of the findings, I was aware of Drake's (2010) words that cautioned that "the validity of insider research requires reflexive consideration of the researcher's position" (p. 85), and therefore, one needs to be alert to the motivations, interpersonal relationships, and emotions guiding the researcher throughout each stage of the research.

Concomitantly, I was also aware of my 'outsider' role as an academic. I made a conscious effort to create a non-intimidating and relaxed interview environment and upon completion of the interview, I jotted-down field notes on the interview process in order to provide an audit trail for reflexivity during the data analysis phase. I also tried to make my participants comfortable by using cultural references; for example, in South Asian cultures, it is common to refer to an older female as 'auntie', and I actively used the term to establish rapport with the grandmothers in my study. I also used colloquial terms that denoted shared cultural background and understanding, such as *desis* for diasporic South Asians, or *gore log* for 'mainstream' (white) Americans. This process created a climate of trust conducive to the production of in-depth and finely nuanced accounts of experience. This, in turn, allowed me to include in the findings section "thick and rich descriptions" (Denzin, 1989) of the participants' lived experiences as immigrant South Asian women. Dhillon and Thomas (2019), however, maintain that there is a need for a more nuanced understanding of the insider-outsider status, a

conceptualization that captures and reflects the fluidity inherent in these positions at different stages of the project:

> […] the same person can move between differing degrees of insider-outsiderness during the phases of a research project, from design to implementation, analysis and evaluation, which has implications for co-construction of situated knowledge.

With this in mind, I made an effort to stay away from the binaries of insider and outsider status during the research process; rather, I recognized the multiplicity of positions that I occupied at any given time and noted these down accordingly.

Another key aspect that I was aware of during the research process was related to the issue of coherence. Tracy (2010) lists the following criteria for achieving quality and meaningful coherence in qualitative research:

> Meaningfully coherent studies (a) achieve their stated purpose; (b) accomplish what they espouse to be about; (c) use methods and representation practices that partner well with espoused theories and paradigms; and (d) attentively interconnect literature reviewed with research foci, methods, and findings (p. 848).

These criteria align with Holloway and Todres' (2003) suggestion that the researcher needs to be context-sensible "as well as considerate of the inner consistency and coherence that is needed when engaged in qualitative research" (p. 345). I, therefore, ensured that the various sections in my study, namely the research questions, literature review, theoretical and methodological frameworks, and conclusions were logically consistent and congruent.

In conclusion, this chapter provided an overview of my research methods, including the theoretical framework guiding this study, and the specific methods used for data collection and analysis. In the following chapter, I present the key findings of my research by sharing the stories of the three generations of women in who participated in this study – the grandmothers, the daughters/daughters-in-law, and the granddaughters.

Chapter IV: Findings

My grandmother puts her feet in the sink
of the bathroom at Sears
to wash them in the ritual washing for prayer,
wudu,
because she has to pray in the store or miss
the mandatory prayer time for Muslims
She does it with great poise, balancing
herself with one plump matronly arm
against the automated hot-air hand dryer,
after having removed her support knee-highs
and laid them aside, folded in thirds,
and given me her purse and her packages to hold
so she can accomplish this august ritual
and get back to the ritual of shopping for housewares

Respectable Sears matrons shake their heads and frown
as they notice what my grandmother is doing,
an affront to American porcelain,
a contamination of American Standards
by something foreign and unhygienic
requiring civic action and possible use of disinfectant spray
They fluster about and flutter their hands and I can see
a clash of civilizations brewing in the Sears bathroom

My grandmother, though she speaks no English,
catches their meaning and her look in the mirror says,
I have washed my feet over Iznik tile in Istanbul
with water from the world's ancient irrigation systems
I have washed my feet in the bathhouses of Damascus
over painted bowls imported from China
among the best families of Aleppo
And if you Americans knew anything
about civilization and cleanliness,
you'd make wider washbins, anyway
My grandmother knows one culture—the right one,

as do these matrons of the Middle West. For them,
my grandmother might as well have been squatting
in the mud over a rusty tin in vaguely tropical squalor,
Mexican or Middle Eastern, it doesn't matter which,
when she lifts her well-groomed foot and puts it over the edge.
"You can't do that," one of the women protests,
turning to me, "Tell her she can't do that."
"We wash our feet five times a day,"

my grandmother declares hotly in Arabic.
"My feet are cleaner than their sink.
Worried about their sink, are they? I
should worry about my feet!"
My grandmother nudges me, "Go on, tell them."

Standing between the door and the mirror, I can see
at multiple angles, my grandmother and the other shoppers,
all of them decent and goodhearted women, diligent
in cleanliness, grooming, and decorum
Even now my grandmother, not to be rushed,
is delicately drying her pumps with tissues from her purse
For my grandmother always wears well-turned pumps
that match her purse, I think in case someone
from one of the best families of Aleppo
should run into her—here, in front of the Kenmore display

I smile at the midwestern women
as if my grandmother has just said something lovely about them
and shrug at my grandmother as if they
had just apologized through me
No one is fooled, but I

hold the door open for everyone
and we all emerge on the sales floor
and lose ourselves in the great common ground
of housewares on markdown.

- Mohja Kahf, "My Grandmother Washes Her Feet in the Sink of the Bathroom at Sears" from *E-mails from Scheherazad*.

These lines by the Syrian American poet, Mohja Kahf (2003), render a simple and evocative yet powerfully effective account of the ruptures, nuances, continuities, negotiations, and processes of identity construction in immigrant Muslim women, as seen through the eyes of a granddaughter. It speaks of the everyday struggles of the immigrant grandmother to reconcile traditional rituals and values with 'Westernized' norms of decorum and behavior, her embrace of her Muslim identity, and her seemingly defiant expression of agency. It also highlights the conundrum of the granddaughter, straddling two different worlds, an unwitting conduit, with empathy for her

grandmother, and sympathy for the hapless and perplexed Midwestern women trying to make sense of this apparent breach in the Western code of civilized behavior. And all of this, juxtaposed against the background of everyday American life—the department store, the hunt for bargains on housewares, and the matching pumps and purse and knee highs—representing a shared if somewhat discordant harmony between cultures. I chose to begin this chapter with Kahf's poem because it perfectly captures the themes that emerged from my own narrative interviews with three generations of South Asian Muslim women – 30 women who generously shared their stories and experiences with me, stories of immigration, faith, and family, as well as the challenges and everyday negotiations that threaded different aspects of their life together to create, what Dossa (2009) calls, a rich and colorful tapestry of narratives.

The Participants

Each woman's story was unique and deserved singular mention; however, in order to preserve the anonymity of my participants, I refrained from linking their story to an explicit descriptive profile. Rather, I chose to provide a more general overview of the sample characteristics and used pseudonyms to disguise their identity. As mentioned in the preceding chapter, this was imperative given the risk of deductive disclosure by inadvertently revealing information that would make my participants easily identifiable (Kaiser, 2009), particularly in the context of the strong social ties within the South Asian Muslim community in the city where this research was conducted.

The 30 participants in this research were South Asian Muslim women who either currently lived or had lived in a multigenerational household in the US. 17 participants were of Indian origin, 11 were Pakistani, and two participants were of Bangladeshi and Afghani origin, respectively. 15 women were part of a grandmother-daughter/daughter-in-law-granddaughter

triad (nine Indian and six Pakistani[2]); and ten women were part of a mother/mother-in-law-daughter/daughter-in-law dyad (six Indian and four Pakistani). Additionally, I have included the stories of five women from different families who reached out to me and expressed interest in participating in the study (two from India, one from Pakistan, one from Bangladesh, and one from Afghanistan). The accounts of these five women and their experiences of multigenerational living served as a useful measure to validate, compare, and contrast the themes emerging from the other 25 interviews.

Of the grandmothers in the triads, Aiman from the Khan family and Noor from the Ahmed family were first-generation immigrants who had migrated with their spouses in the late 1970s and early 1980s and now lived with their adult children. Fahmida from the Abrar family, Shehnaz from the Husain family, and Mahfuza from the Ansar family were late-life immigrants who had migrated after the age of 65 to re-unite with their adult children. Of the middle generation, the daughter or daughter-in-law, Sehr from the Abrar family, Imrana from the Husain family, and Zoya from the Ansar family were first-generation immigrants who had accompanied their spouses to the US in the late 1990s. Razia from the Khan family and Rehmat from the Ahmed family were born in the US (second generation). Of the granddaughters, Fiza from the Abrar family, Afreen from the Husain family, and Mahira from the Ansar family, were all born in the US to immigrant parents (second-generation). Mehr from the Khan family and Sumbul from the Ahmen family were third generation.

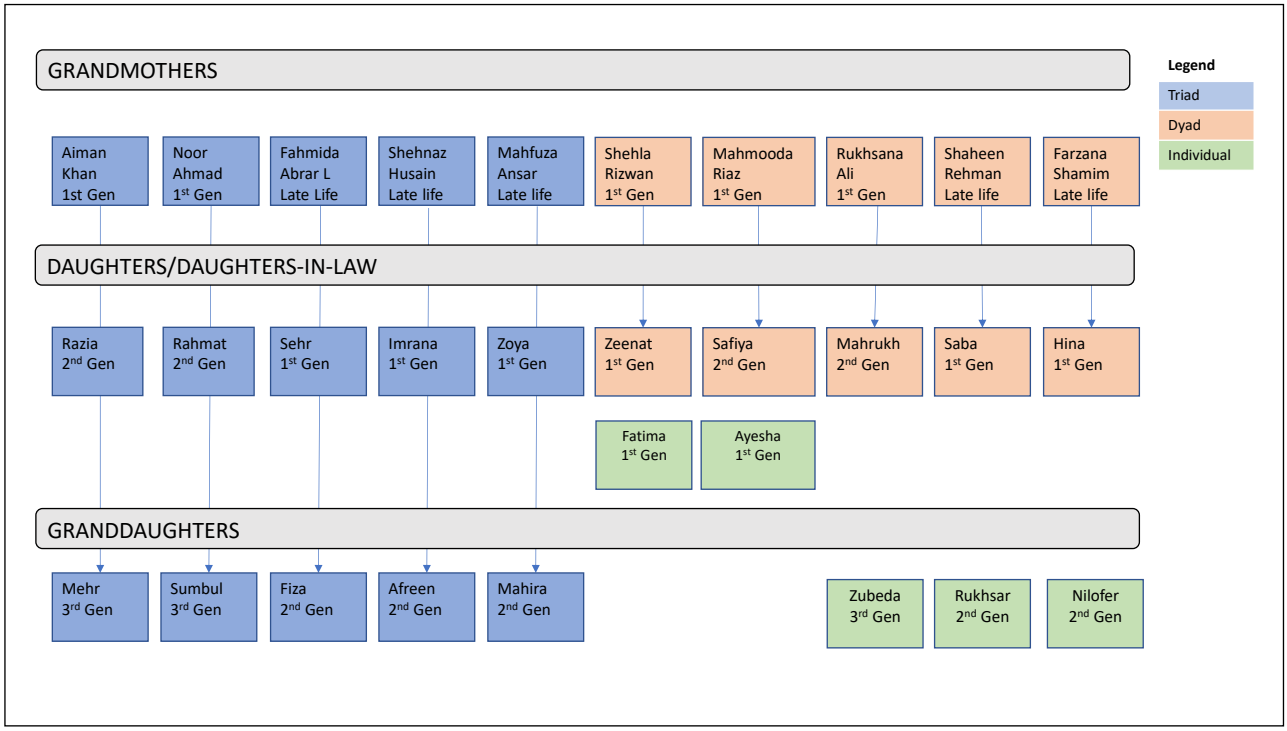
Of the grandmothers in the dyads, Shehla from the Rizwan family, Mahmuda from the Riaz family and Rukhsana from the Ali family had migrated to the US in the late 1970s, Shaheen from the Rehman family and Farzana from the Shamim family were late-life immigrants who

[2] Note that 30 separate, individual interviews were conducted; dividing them into three groups is for organizational purposes only.

had migrated to the US after the age of 65 to re-unite with their adult children. Of the daughters/daughters-in-law, Mahrukh from the Ali family and Safiya from the Riaz family were all born in the US (second-generation). Saba from the Rehman family and Hina from the Shamim family were first-generation immigrants who had arrived in the US in the early 2000s. Zeenat's (Rizwan family) case was unique in that she was a first-generation immigrant who had arrived in the US twenty years ago after marrying Shehla's son. Thus, both mother-in-law and daughter-in-law were first generation immigrants.

Finally, of the five women from different families, Fatima and Ayesha were first-generation immigrants who had migrated in the late 1990s. Nilofer and Zubeda, both born in the US, were second-generation and third-generation Americans, respectively. Rukhsar's case was somewhat unique. She was born in Canada but had immigrated to the US four years ago after her marriage to a US citizen. Rukhsar's story added to the richness of the data given her unique perspectives having lived in both Canada as well as the US. Figure 4.1 presents a snapshot of the grandmothers, daughters/daughters-in-law, and granddaughters in this study along with their generation status, i.e., first generation immigrant (born outside the US), second generation immigrant (born in the US with at least one immigrant parent), third generation immigrant (born in the US to at least one second generation immigrant), and late-life immigrant (immigrated after the age of 65 to re-unite with adult children).

Figure 4.1: Study Participants



The age of participants ranged from 19 years to 76 years. All participants with the exception of three either had a university degree or were working towards the same. Of the 30 participants, 16 participants were married, eight were widowed, and six had never married. All participants were citizens (naturalized or by birth) with the exception of two late-life immigrants who were Green Card holders (permanent residents). All first-generation immigrant women had either immigrated as spouses of economic immigrants (under the H4 or L2 visa category) or under the family sponsorship category as immediate relatives.

Overall, even within this small group of 30 women, there was considerable heterogeneity with regard to age, generational status, time of arrival, and country of origin, to name a few. In the discussion that follows I make an honest and humble attempt to present the diverse lived experiences of these women and uncover the continuous negotiation of identities (re)constructed in the context of migration, faith, intergenerational support exchanges, and kin-work.

It must be pointed out at the outset, however, that the focus of these interviews was on the symbolic, emotional, and sometimes material aspects of the lived experiences of each participant in this study. Participants were asked to tell their stories, and they were the ones who controlled the narrative and flow of these loosely structured interviews. Thus, they spoke about their past, their present, and their future in ways that were congruent with their experiences and the meanings and interpretations that they attached to those experiences. The findings presented here reflect those aspects of their lives that were the most salient for the three generations of women in this study – the grandmothers, the daughters/daughters-in-law, and the granddaughters. For the grandmothers, it was their stories of immigration; for the middle generation, the daughters and daughters-in-law, it was their stories of settlement; for the granddaughters, it was their stories of the diaspora and citizenship. In all of these accounts, however, their Islamic faith was central to their identity, and is discussed as such for each group. The chapter concludes with a separate discussion of the dynamics of multigenerational living, as reported by the 30 women I interviewed.

Stories of the Grandmothers

Narratives of immigration

There was considerable heterogeneity in the migratory experiences of the grandmothers in this study. Aiman, Noor, Shehla, Mahmuda, and Rukhsana were first-generation immigrants who had migrated with their spouses in the late 1970s and early 1980s, while Fahmida, Shehnaz, Mahfuza, Shaheen, and Farzana had immigrated later in life to re-unite with their adult children. Thus, for the grandmothers, their settlement experiences varied by time and age of arrival in the US, as discussed below.

"Like a body part taken away from you": First-generation grandmothers crossing territorial and social borders

For those women who had immigrated in the late 1970s and early 1980s, migration sometimes came with a heavy emotional cost. This excerpt from my conversation with 72-year old Aiman who immigrated in 1977 with her spouse, illustrates the pain and sense of loss that accompanied immigration:

> I think I will call it a very tough journey for me. In those days if someone was going to America or England the relatives would come and tell their parents that ok, now your son and daughter will become *pardesi* [foreigner] and *pardesi log wapas nahin aate* [foreigners never come back]. So there was a lot of sadness about our leaving, you can say like someone in the family has died and we are giving them funeral. But we were lucky that our parents understood that this is good for our future. So they did not put pressure on us to stay. But I can remember my *Dadi Amma* [paternal grandmother], she was crying and crying for many days. I was very attached to her. All she would say is *ab kabhi nahin dekhoongi*, *ab kabhi nahin dekhoongi* [I will never see her again, I will never see her again]. And you know, she was right. I came to the US, we could not go back for six years, and she passed away with that pain in her heart. She never saw my children. That is one huge regret I have.

Aiman's words seem to imply that the decision to immigrate was a difficult one, receiving considerable pushback from friends and extended family members. She equates the send-off process to a funeral, an occasion of mourning shrouded in gloom and despair, and steeped in a sense of finality and a severing of ties with loved ones. When I requested Aiman to elaborate upon the feeling of regret she had spoken about, this is what she said:

> How to describe something like this? It's so deep, even after thirty/forty years. My *Dadi Amma* was the last one in that generation. When I went to say *Allah Haafiz* [goodbye, may God protect you], I still remember where she was sitting on her *chowki* [bed], with *tasbih* [prayer beads], doing *dua* [prayer]. I even remember the white sari with blue border she was wearing [laughs] and the smell of Margo soap she always used. The ceiling fan was on and it used to make that *ghirr ghirr* (whirring) sound [laughs]. You know, she didn't say a word, just kept doing *dua*. Even today it feels like so much pain. I am used to it now, but it is there. How do you say it, like a body part taken away from you?

Similar feelings were expressed by Rukhsana, a 69-year old who had immigrated in 1982. Here, she describes the death of her father and how she received the news:

> In those days we were still struggling to settle. We didn't have money for flight tickets. No phones, no internet and Facebook [laughs]. And I think I was so busy, looking after the kids, and cooking, cleaning, laundry, so much work always. Then I started working in I don't know if you remember those days there was one store called *Marshall Fields*. And days went by so fast, there was no time to miss my parents. Then one night I was upstairs in my room and a collect call came. My husband picked up from the kitchen and I also picked up [the extension phone]. My heart was beating so fast, I cannot tell you. It was my brother saying that *Abbi* [father] was gone, he had heart attack and I just collapsed. Only two days ago I had received his [her father's] letter. I still have it. Worst part was that nowadays you can just get a flight and go but then we did not have money. I could not see him [her father] for the last time. And *Amma* [mother] needed me but I could not go.

Aiman and Rukhsana's stories embody the profound sense of loss and the extended periods of separation from loved ones that accompanied their migration. Aiman's grief and regret over the death of her grandmother was etched into her memory in vivid and excruciating detail as is evident by her comparing it to the physical pain of losing a body part, the image of her grandmother sitting on the bed in her room, the colour of the sari she was wearing, and the familiar sounds (the noisy ceiling fan) and smells (her favorite soap) that she associated with her grandmother. For Rukhsana, her grief was embodied in the last letter her father had written to her, a treasured and precious possession, an artefact and memory that she held on to. Her description of her "beating heart" when the telephone rang also seems to imply that she lived in the shadow of a constant fear of receiving some bad news from the homeland. Further, underlying both Aiman and Rukhsana's narratives was a strong undercurrent of guilt, of having failed to perform their filial obligation towards a beloved elder. For Aiman, it was the painful acknowledgment that her grandmother died longing to meet her. For Rukhsana, it was the fact that she could not provide emotional support to her mother after the death of her father.

For Shehla and Mahmuda, however, the death of a parent was a key life event in their lifecourse that shaped their decision to initiate the process of immigration for their surviving parent. Shehla's mother and Mahmuda's father (both deceased) re-united with their families soon after the death of their spouses. As Shehla described it:

> After *Abba's* [father's] death, we decided that *bas* [enough]. Oh my God, *Amma* [mother] was so stubborn about it. She first refused. *Nahin, nahin, nahin* [no, no, no]. Finally, I did a lot of emotional blackmailing [laughs]. See she was alone now, and we three sisters were all living abroad. There was no one to care for her there. I was very clever, you know. I used her own grandchildren to put pressure on her. Then she agreed to move here [laughs].

Shehla's words suggest that although her mother was reluctant to immigrate, Shehla's sense of filial duty superseded her mother's personal choice and, negotiated by the strength of familial ties (here, the love for a grandchild), resulted in her mother's immigration to the US.

I probed Shehla on how her mother felt about immigrating:

> How did she feel? Good question [laughs]. Frankly speaking, she was never happy here. She was always missing her brothers and sisters. And she was already quite old when she came. I don't know, yes, she was not happy. The thing that makes me very sad is that she always wanted to rest [after her death] next to *Abba*, and sometimes I feel that we stole that from her. I don't know.

Shehla's words highlight the ambivalence and contradictory emotions that accompanied her decision to re-unite with her widowed mother. They convey her sense of guilt at this disruption of her mother's lifecourse trajectory and her desire to age-in-place, to grow old amidst cherished social networks of extended family and friends, and eventually be buried next to her husband's grave. Mahmuda, whose parents-in-law (now deceased) were living with her at the time she sponsored her father's immigration, shared this ambivalence when she described how lonely her father was after the death of her mother and although he "tried so hard" he always "felt like an outsider in his own *beti's* [daughter's] house". As she described it:

> I used to feel so sorry. So guilty. My father and my in-laws never got along. There was this *samdhi* [in-law] tension. And sometimes I feel they may have made him feel like *aap to beti ke ghar mein rehte hain* [you live in your daughter's house]. My father started smoking a lot. I think due to that stress. His health really fell afterwards.

Thus, it appears that for Mahmuda's father, multiple stressors of social isolation brought about by a negative personal event – the death of his spouse, adjustment challenges in the context of immigration, and the stigma of living with his daughter's family, an apparent breach in tradition in many patrilineal South Asian families, resulted in smoking initiation as a coping mechanism to offset these stressors.

Overall, it is evident from the discussion above that for the first-generation grandmothers in this study, the emotions associated with migration were complex and nuanced and were often associated with time, age, and reason to immigrate. Below, I present salient aspects of the settlement process as shared by the grandmothers I interviewed.

"It was work, work, work": Settlement challenges for first-generation grandmothers

A key theme that emerged from my interviews with first-generation immigrant grandmothers was that they had to overcome multiple cultural, linguistic, economic, and social barriers to make a life for themselves in the US when they arrived in the 1970s and 1980s. Most were economically disadvantaged and had to work at odd jobs to make ends meet. Further, limited access to information about available support services forced them to seek out informal sources of knowledge; for example, for Aiman it was her spouse's older cousin in New York, who had migrated a couple of years earlier. For Rukhsana, it was a distant relative who lived three hours away. This, accompanied by household responsibilities and child-rearing duties was often overwhelming for them, as described in the excerpt below by Aiman who used to work at a local grocery store:

> Not one second of rest. It was work, work, work. Wake up at 5am, make kids breakfast, husband's breakfast, all lunches, get kids ready for school, then get ready, walk to the grocery store, bag groceries all day, then back home to cook and clean. And the only TV was American TV [laughs]. You people [referring to me] are very lucky. You have come when life in America is so much easier. Oh and I forgot, I have a bachelor's in Math, so I also helped the kids with homework. I felt dead by nighttime. And imagine when the kids were just born, when they were babies, of course, I was not working then, but still I wish I had somebody to help me. If I was in India, you cannot imagine how pampered I would be when I was pregnant. Like a queen [laughs].

Aiman's words above paint a vivid portrait of the everyday struggles that she had to overcome in the process of settlement. She describes the frantic pace of her daily life, attending to household chores and childcare responsibilities, hectic to the point that she felt "dead" with exhaustion by the end of the day. The simple joy of relaxing by watching a favorite television show was precluded by the non-availability of multicultural entertainment. Her referring to me (and others like me who had immigrated much later in the late 1990s) as "lucky" because American society is far more diverse and culturally aware these days conveys a certain wistfulness and longing as she recalls her days of struggle as a new immigrant. This sense of longing is also evident when she talks about the tremendous help and support that she would have received had she lived in India during her pregnancy. Further, that she had a college degree and yet was under-employed speaks to the unique structural challenges recently-arrived immigrants encounter despite high levels of educational attainment. When I asked her to elaborate upon this, though, Aiman's response was surprising:

> Oh yes, yes, I did apply here and there for accounting jobs and all when we came to America. See I had a degree from a very good Indian university, and I was very proud. But I don't think I tried very hard. The grocery store was just next door, just 5 minutes to walk. And the children were so young, this was a new culture for us, and the role of mother is very important. To teach them right values, how to behave, what is right and wrong, *tehzeeb* [decorum]. So I decided to do the grocery job to be near the kids.

Aiman's words are impactful and merit careful consideration. That her educational achievement meant a lot to her and was a source of pride is evident, and yet, advancing her own career did not

appear to be a priority. Rather, pragmatic concerns and cultural expectations around motherhood appeared to guide her decision to seek employment at the nearby grocery store. Further, cognizant of raising her children in a culture that was noticeably dissimilar from her country of origin, she assumed the role of the 'cultural custodian' of the family, taking on the responsibility of socializing her children into culturally-expected behaviors. Rukhsana, a psychology graduate from Pakistan, who worked at a department store as a sales representative for nearly 20 years, echoed this sentiment:

> In those days in middle-class Indian and Pakistani families women did not do job. Our *dadi-nani* [collective word for family elders] used to say *ki mard bahar kaam karte hain, aur agar aurat ghar se bahar jaati hai to bachhche bigar jaate hain* [the men work outside the home, and if the woman steps outside the home for work, her children become wayward]. I always remembered this. But I did job only for the money, *majboori thee* [it was a necessity] not to make my career. And that too because the mall was near my house.

Rukhsana underscores traditional beliefs around the role of women as caregivers and moral guardians of the family. It appears that she had internalized culturally-prescribed gender roles about paid and unpaid work, and therefore, her decision to work outside the home was out of economic necessity. Like Aiman, her choice of workplace was based upon proximity to her house, and by extension, her children, as opposed to a desire to advance her career.

Yet in both of these accounts, conspicuously absent is any indication of whether these women received instrumental or affective support from their spouses, be it in household chores or child rearing. Nor was it evident in the stories of the other first-generation immigrant grandmothers in this study. Clearly, for these women, the socially-prescribed boundaries of gender roles that privileged patriarchy were clearly defined and delineated, boundaries not to be blurred by potentially 'muddying' the status-quo. For the most part, if these women worked outside the home, it was purely out of economic necessity.

For example, economic necessity propelled Noor to seek paid employment at the local Burger King outlet:

> I have suffered so much. My English was bad, I hated to drive the car, the snow was bad, the job was hard. And the culture was totally opposite of Pakistan, you know, wearing pants for job – that was so hard for me [laughs]. In Pakistan my father-in-law had factory, shoe factory, now my husband was worker in factory and his father always thought he was in America, my son must be an officer [laughs]. Then school was not good, all the time I was frightened that my children will become bad with bad influence. It was not safe there. We had very little money. I was washing Ziploc bags, plastic straws, plastic spoons to use again and again. Getting clothes from Goodwill. It was just save, save, save.

Noor describes how her limited proficiency in English, culture shock, the cold North American weather, her fear of driving, and the rigorous demands of a service industry job acted as barriers to the settlement process – barriers also identified by nearly all first-generation immigrant grandmothers I interviewed. And because money was scarce, she developed the habit of carefully recycling and re-using, be it household supplies or clothing for the family. Further, because her husband initially had a low-paying job at a local factory, her family lived in a low-income, high-crime neighborhood for several years where access to good schools for her children was difficult. The fact that she was always "frightened" for her children's safety underscores the precariousness and uncertainty of her fragmented life during the initial settlement years. Also salient is Noor's apparent embarrassment about their low socio-economic status and her spouse's job as a 'worker' in a factory. It appears that her family members back in Pakistan were not aware of the nature of her spouse's employment, believing that the family was doing very well for themselves, financially and otherwise, in the so-called 'land of opportunity' – the US.

This chimeric front and illusion of prosperity was carefully constructed and maintained in front of friends and family in their countries of origin by several first-generation immigrant grandmothers in this study. Aiman, for example, described how she hunted for bargains at local

garage sales a few months before traveling to meet her friends and family back in India to keep this illusion alive:

> My cousins and friends they all wanted foreign lipstick and foreign perfume and purse. When they heard we were coming to visit they would send long, long lists in letters. [They wrote] we want American bedsheets and makeup and goggles [sunglasses]. But that time money was so tight. Then I heard about something wonderful called garage sale [laughs]. So I bought everything my cousins wanted, only from garage sale. Many times these people [at the garage sale] sold brand new makeup and all. In the end, we had suitcases and suitcases full of American gifts to give everyone [laughs].

Aiman's account suggests that her friends and family back in the homeland were clearly unaware of their difficult economic circumstances and she creatively deployed the material artefacts of American culture (purchased at a fraction of the price at garage sales) to maintain the illusion of living the American dream each time she traveled back to her country of origin. For Noor, this process involved meticulous planning, putting away "one dollar here, one penny there" to save enough money to purchase gifts for loved ones. For Shehla, it involved the careful wrapping and labeling of each item to be given away. The emotions underlying these intricate negotiations around gift-giving appeared largely based on the desire to "save face" and preserve the symbolic capital generated by their achieved status as successful migrants, but Rukhsana's comment below gives us pause:

> *Kya hum itna bhi nahin karte*? [Isn't it the least we could do]? We were so far away, going back once after 4, 5, 6 years, and our brothers and sisters were taking care of parents and elders and the house. They were doing their duty and we were nicely living here.

It appears that part of the gift-giving process was a means to assuage the guilt of not being able to "go back", almost an apology for their supposed invisibility in the lives of the loved ones they had left behind. In the words of Aiman, "this whole shopping and packing and giving of presents…we had come so far, there [in the country of origin] life was going on, for us time had stopped on the day we left". This statement presents an interesting paradox: as discussed earlier,

Aiman had provided a vivid description of her busy life as a recently-arrived immigrant in the US, of her struggles and challenges in the settlement process as she juggled competing demands of the workplace and home. Surely, in those early days, minutes and hours must have moved at a frenetic pace for her. And yet, she talks about a suspension of time, a metaphorical clock that had stopped when she immigrated. It appears that used thus, the notion of time expands beyond a material, livable, concrete concept; rather, it is an amorphous feeling symbolizing a critical turning point in Aiman's lifecourse. It is associated with a sense of loss and separation, nostalgia, the inability to fulfill culturally-mandated filial obligations, and a sense of debt to family members, mainly siblings, who were left behind to take care of family elders in their old age. It is hardly surprising, then, for the five first-generation grandmothers in this study, 'home' was still in India or Pakistan, despite having lived in the US for as long as 40 years. Further, this statement ties back to the initial discussion around the sense of loss, guilt, ambivalence, and contradictions that accompanied the migratory journey for the first-generation immigrant grandmothers in this study as was evident in the stories of Aiman and Rukhsana.

"We are one family again": Late-life grandmothers re-uniting with loved ones

In sharp contrast to the narratives of guilt and the sorrow of separation from loved ones inherent in the accounts of the first-generation immigrant grandmothers, however, the late-life immigrant grandmothers in my study, Fahmida, Shehnaz, Mahfuza, Shaheen, and Farzana presented a very different perspective – the joy of re-uniting with family. Consider the following excerpt from my interview with Fahmida:

> *Alhumdulillah hum bahut khush naseeb hain. Meri aulad aankh ke saamne hai, din raat, Allah ka karam hai, hum phir se ek ho gaye. Budhape mein aur kya chahiye? Aulad ki Khushi, unke bachchon ki Khushi* [Praise Allah I am very fortunate. My children are in front of my eyes, day and night. We are one family again with the mercy of God. What else does one want in old age? Your children's happiness, your grandchildren's happiness].

Similar sentiments were expressed by Mahfuza:

> *Jaanti ho, wahan India mein meri zindagi qiston mein bati thee? Jab mere bacche chhuttiyon mein India aate the, main zinda ho jaati thee. Ek maah baad who jab chale jaate the, meri ghari dobara chalne lagti, meri zindagi ki saari planning unke agle saal aane ki tayyariyon mein lag jaati. Ab muhje sukoon hai. Main inhe rozana dekh sakti hoon, inki har Khushi, har gham mein shamil hoon* [Do you know, when I lived in India, my life was divided into episodes? I would live for the day when my children came to visit during their vacation. They would leave after a month, and my countdown to their next visit would begin. As soon as they left I would start planning for their visit next year. Now I am at peace. I am able to see them every day, share in my children's happiness and joy].

Clearly, for both Fahmida and Mahfuza, re-uniting with their adult children had brought a sense of peace in their lives, ameliorating the pain of physical separation from their loved ones. For Fahmida, it was a gift from God. For Mahfuza, it brought a sense of completeness to her pre-migration fragmented life which was organized around brief moments spent with her adult children and grandchildren when they visited her in India. Shehnaz, Farzana, and Shaheen, who had other adult children left behind in their countries of origin, frequently visited them, sometimes as often as every six months. As Shehnaz described it:

> *Sab khush hain* [Everyone is happy]. I go to meet my children and grandchildren in Pakistan. You will not imagine their excitement when I go. It is so special. And I am sad when it is time to return, then I think of the grandchildren waiting for me here and I am happy again.

Here, although Shehnaz's family is split between Pakistan and the US, it appears that she is able to have the "best of both worlds" given her ability to travel back and forth between the two countries. Her statement, however, highlights a certain economic privilege as not all late-life immigrants may have enough disposable income to spend on expensive flight tickets and other travel-related expenses. Further, her ability to travel long distances could progressively decline with old age, potentially impacting her current sense of well-being and feeling connected to family back in Pakistan.

A few participants also expressed initial reluctance about immigrating to re-unite with their adult children. For Farzana and her spouse, it was because of an unspoken agreement that they would never sell their ancestral home, choosing instead to age-in-place surrounded by friends and extended family members. Farzana's spouse, who was a university professor in India, planned to continue his teaching engagements even after retirement to keep himself busy. As she described it:

> *Mere khayal mein unke liye zyaada diqqaten then. Unka kaam, unka makaan, sab kuchh India mein tha. Mujhe bhi apne ghar se bahut pyaar tha. Main shaadi kar ke ussi ghar mein aayee, mere sasur ne armaanon se banwaya tha, buzurg saare khatam ho gaye, magar yaaden abhi bhi taaza hain* [I think the decision to migrate was more difficult for him. His work, his house, everything was in India. Actually, for me it was the house that was very dear to me. I had entered that house as a bride. My father-in-law built it with a lot of love and pride. My in-laws and other elders are now no more, but their memories are still fresh in my mind].

Farzana's statement above suggests that their ancestral home was the locus around which she and her spouse had planned to build a quiet life after retirement. The house embodied collective memories and a sense of pride in their ancestral history. After their immigration to the US, Farzana informed me, the house was left unoccupied for several years until it was sold. When I probed Farzana on why she and her spouse decided to immigrate if they had planned to age-in-place, she described how her spouse suffered a mild stroke and her son who was now an American citizen, initiated the immigration process out of concern about the health and rapidly advancing age of his parents. Clearly, for Farzana, her husband's stroke was a seminal event, a turning point that altered her lifecourse trajectory, culminating in her migration to the US.

For Shaheen, her daughter's decision to pursue higher education was the turning point. In her words:

> I never planned about moving to America. My one son was in Pakistan, and I was living with him. My other daughter was in Dubai. Just four hours from Pakistan. Then Saba [her daughter; name changed] called and said *Ammi* I am going to do MBA and I want you

> here [laughs]. So I came. *Budhape mein bachhon ke kaam aa sako use bari kya khushnaseebi hai*? [what greater joy there is than to be useful to your children even in old age]?

Shaheen's words illustrate that although she had never planned on immigrating to the US, her love for her daughter and the sense of purpose her daughter's decision to pursue higher education gave her shaped her decision to migrate. It also reflects the strong bonds of familial ties and intergenerational support exchanges that remained resilient even in Shaheen's old age.

To encapsulate, the discussion above underscores the nuanced negotiations involved in the migration process for late-life immigrant grandmothers in my study and how these experiences differed from the first-generation grandmothers. In the discussion that follows below, I present salient challenges and barriers to settlement in late-life immigrant women and compare these with the experiences of first-generation immigrant grandmothers.

"Sometimes I forget my own name": Barriers to settlement for late-life grandmothers

Unlike the first-generation immigrant grandmothers who had to contend with multiple socio-economic, cultural, and structural barriers to settlement as new immigrants, for the late-life immigrant grandmothers who participated in this study, the private space of the home that they inhabited somewhat shielded them from the rigors of settlement and challenges of acculturating to an unfamiliar, Westernized life, with their adult children and grandchildren acting as a conduit between the 'inside' and 'outside' world. This is discussed in greater detail later on in this chapter when I explore the nature of intergenerational support exchanges within the family. Here, I discuss the perceived loss of independence and social isolation as a significant challenge to settlement for late-life immigrant grandmothers. Consider this excerpt from my interview with Shaheen, who immigrated six years ago:

> It is very nice here. My daughter and grandchildren are here. I have no problem. All in the family take care of me. I am happy, *Alhumdulillah* [praise God]…Just that when I

> first came here it was hard because here if you cannot drive you are helpless. I used to have a very busy, active life. *Shakkar nahin hai, koi baat nahin, main khud hi bazaar chali jaati thee* [if there was no sugar in the house, no problem, I would run to the grocery store to pick it up]. Now I have to tell my daughter or son-in-law one week before so they can plan to pick up when they have time. So that was something that was frustrating.

Here, Shaheen is underscoring the point that she is happy to be with her children and grandchildren, and that she is well taken care of. Yet, a key challenge was her inability to drive a car, having to depend upon her adult children for everyday needs such as grocery supplies – a significant departure from the independent lifestyle she was used to back in the homeland. Her statement that often she needed to alert her adult children if she needed them to pick up an item of grocery a week in advance speaks to the contrast between the 'ad-hoc' lifestyle she was used to (e.g., running to the grocery store on an as-needed basis) in her country of origin and the more structured, routinized aspect of everyday North American life. That stated, Shaheen expanded upon this thought by saying that this feeling of "frustration" was transient, and with advancing age and challenges to mobility, she no longer missed the ability to enter and leave the house at will.

For Fahmida, who immigrated to live with her son and daughter-in-law after the death of her spouse, it was social isolation rather than a loss of independence that affected her sense of well-being:

> *Koi shikayat nahin hai, magar akelapan hai. Sab khayal rakhte hain. India mein bhi main ghar per rehti thee, bachhon ke abbu ya phir kaam waale bahar jaate the. Ekraunaq rehti thee milne julne waalon ki. Yahan saara din main akeli rehti hoon, kisse baatein karoon? Thori der TV dekhti hoon, kitchen mein jaati hoon, telaawat karti hoon, bacchhe chhote the to unke saath waqt guzar jaata tha, ab to bare ho gaye hain, Kamron mein band rehte hain.* [I have no complaint, but I am lonely. Everyone takes care of me. In India also I would stay inside the house mostly, my husband would go outside or the domestic help would do all the work. A lot of people used to stop by to say hello. It was so lively. Here I am alone all day. Who do I talk to? I watch a little bit of TV, cook dinner, pray. When the grandchildren were young I used to spend so much time with them. Now they are older, they are always behind closed doors in their room].

Fahmida's words seemed to indicate that her life in India was bound by traditionally-defined, gendered boundaries around the public and the private sphere. Her spouse or household help usually took care of outside chores, so it is likely that a loss of autonomy or independence post-migration was not as salient to her sense of well-being. However, it appears that although she felt cared for living with her children and tried to keep herself busy with household chores and meditating, she missed her social network of friends and extended family and was acutely aware of this erosion in her social capital. Further, there is an interesting juxtaposition in her words. In India, the doors were always open for friends and family to drop in. In the US, she misses the time she spent with her grandchildren when they were younger, stating that now that they were older their doors were always closed – literally, and metaphorically. It appears, then, that for Fahmida, it was difficult to reconcile the impromptu and informal socialization practices inherent in collectivistic societies with the more structured and individualized approach of the West.

Conversely, some of the social isolation experienced by late-life immigrant grandmothers I spoke to was offset by their proximity to members of their extended families who sometimes lived just a few miles away in the same city. Although they were dependent upon their children for transportation should they desire to visit their friends and family, they cherished those opportunities and made an effort to stay connected via telephone and social media.

For others, like Shaheen, Shehnaz, and Farzana, involvement in the local mosque community events such as bake sales and fundraising events, attending *Juma'a* (Friday) and *taraweeh* (Ramadan) prayers at the mosque, and monthly *dars* (intimate monthly or weekly gathering of Quranic study and prayer sessions among Muslim women) allowed an opportunity to develop and enhance their social networks.

Not all women, however, had a social network of their own. For Mahfuza, who often attended social events with her adult children, it was the realization that although she was able to participate in social gatherings, all of her contacts were through her daughter's network of friends and not her own:

> Everyone knows me as Zoya's [her daughter; name changed] *Ammi*. Always Zoya's *Ammi*. Or Auntie. Or *Ammi* or *Nani Ammi*. There is no one who calls my name. Sometimes I forget my name [laughs]. I remember one time my granddaughter, so her friend's mother had come to the house. And she saw me and said hello. Then she asked me my name. And you will not believe, I had to think for two seconds before I could answer. I think I forgot my own name! [laughs].

It appears, then, that Mahfuza's identity was reduced to her relationship with a significant other – a mother or grandmother. That she felt like she had lost some of her personhood is evident from the poignant anecdote of her being taken aback when an outsider asked her what her name was, and she could not remember it for a brief moment. Mahfuza's words speak to the somewhat disjointed sense of self and potentially, low self-worth, that some late-life immigrant women may experience post-migration given the supposed erosion in the social capital that they had accumulated across the lifecourse.

The section above provided an in-depth account of the migration process and settlement challenges experienced by the grandmothers in this research – those who were first generation immigrants as well as those who immigrated later in life. Next, I discuss the role of their Muslim faith and how it served as a coping mechanism for the grandmothers in my study.

Narratives of *Deen*

A common theme running across all my interviews with the South Asian Muslim women in this study was that for them, their Islamic faith or *deen* was "a way of life", the fulcrum around which their everyday life was organized. Here, I discuss what it meant for the grandmothers in this study.

For the first-generation immigrant grandmothers, their attitude towards faith and spirituality evolved over time. During the initial years post-migration, their focus was not so much religious, as it was to preserve cultural ties to their countries of origin. Thus, religion and faith were often conflated with cultural beliefs and practices. Aiman described how her family drove for hours to shop at the solitary ethnic grocery store in the region at the time:

> We laugh when we think about this today, but that time we did not have Indian/Pakistani stores at every corner like today. So every month we drove three hours just to buy *daal* [lentils] and *chawal* [rice]. If it was up to my children we would only eat macaroni and cheese and pizza [laughs], but my husband wanted good *desi* [Indian/Pakistani] food. Plus, it was one way to remember home and also for kids to know our culture. That's why we also stressed on eating halal [Islamically permissible] meat. But the kids could eat McDonald's and all, we were not very strict for that, but at home, only halal.

Here, note how Aiman relates the consumption of Islamically permissible food with cultural rather than religious considerations. She made a concerted effort to procure and cook ethnic meals in order to evoke a sense of nostalgia and connection to her country of origin, which she refers to as 'home', ostensibly to preserve a sense of continuity in her diasporic life. Home-cooked food with ethnic recipes for *daal* and *chawal* was also a way to socialize her children into South Asian culture. And yet, the rules around eating were lax enough to allow children to acculturate to a Western diet (e.g., they could get non-halal food from fast food outlets; they were familiar with quintessentially American foods like macaroni and cheese and pizza).

Along with food, cinema was another medium for cultural preservation. To illustrate, Shehla described how her family made it a point to drive ten hours to New York City each year to watch an iconic Indian movie star or singer perform in a concert. For Aiman, this was a way to "stay connected to our roots". To cite another example, Mahmuda's family bought videotapes and audio cassettes of popular Indian and Pakistani movies and songs each time they visited their country of origin:

> We bought so many [audio and video] tapes our basement was full of them [laughs]. Every Sunday, without fail, I would make *pakoras* [fritters] and *chai* [tea] and we would all sit down and watch one Indian movie together. You know in the movies they show so much about our culture, the dress, food, how we treat our elders, what is right and wrong, all that. So we were not able to go home very much, *achcha*, so movie was the best way for kids to learn about our culture.

Mahmuda's words paint a vivid picture of the ritualistic consumption of cinema—watching a favorite Indian movie with ethnic food and drink—as a carefully orchestrated weekend activity designed to bridge the gap between the modernity of the West and the traditionalism of the homeland. It was also a creative way to socialize her children into salient aspects of Indian culture, especially around morality, decorum, and social behavior.

Further, as Aiman described it, growing up, her children were more aware of Indian culture via the medium of cinema than they were about Islamic beliefs and practices, which were ritualistic for the most part (e.g., celebrating the holidays of *Eid-ul-Fitr* and *Eid-al-Adha* annually; fasting sporadically during Ramadan). She admitted that she herself was not very observant with performing the mandatory five daily prayers or visiting the local mosque, but this gradually changed once her children entered their teenage years. Concerned that her sons may "go in the wrong direction" and become deviant, she actively sought out the counsel of the *imam* at her local mosque to provide religious training and guidance to her two children. Mahmuda recalled having similar concerns when her daughter started high school. To offset the risks of her daughter becoming "too Western", Mahmuda's family moved to a Midwest city with a sizeable Muslim population, despite the limited economic opportunities available in that region at the time due to a failing automobile industry.

Another strategy adopted to prevent the perceived threat of Western influence was to find a suitable match for their daughters and get them married as soon as they reached adulthood. Often the matrimonial matches were made within a close-knit circle of friends, but sometimes,

consanguineous arrangements, which are permitted in Islam, were made with sons of siblings in the country of origin. Aiman's daughter Razia, for example, got married to her maternal aunt's son from India and Rukhsana's daughter Mahrukh to her second cousin from India. In both these cases, the respective spouses of Razia and Mahrukh immigrated to the US, an apparent breach in South Asian tradition wherein the bride typically moved in to live with her in-laws.

Overall, the first-generation immigrant grandmothers in this study reported that an active engagement with Islamic scriptures, beliefs, and values came much later in life, when their children were older. For some, like Aiman and Rukhsana, performing the *Hajj* pilgrimage [mandatory religious journey to the city of Mecca in Saudi Arabia] was a turning point in their lifecourse. As Aiman, who donned the *hijab* after performing *Hajj*, stated:

> Once you visit such a pure, such a blessed place [Mecca], you are just transformed. It's like a new life. I think that Hajj really changed me. I started wearing *hijab* and praying more than before. And I also wanted to learn more. So, then I started going to mosque and Friday *khutbas* [sermons]. So now I try to be a better Muslim and better person.

For Aiman, it appears that not only was performing the *Hajj* pilgrimage a seminal event that enhanced her sense of spirituality, it also became a ritualistic and embodied means of identity construction and expression evidenced by her decision to wear the *hijab*. Indeed, for many first-generation grandmothers in this study, religious identity was performed via ritualization practices such as *salaat* (five daily prayers), fasting (during Ramadan), and *hajj*, and also through their active involvement in the mosque community as leaders of outreach efforts such as the 'Open Mosque Day' where the doors of the local mosques are opened to people from all faiths or in fundraising events such as monthly dinners and bake sales.

For the late-life immigrant grandmothers practicing their faith in the US was a liberating experience. Consider this excerpt from my conversation with Fahmida:

> *Yahan Ramadan ki raunaq alag hai. Itne saare log, taraweeh, Jume ki nemaz, eid ki nemaaz, dars. India mein aurtein kabhi shamil nahin ho sakti. Yahan meri bahu mujhe saath le jaati hai, bahut sukoon mehsoos hota hai* [the joy of Ramadan feels different here. It is so lively. So many people, the *taraweeh* prayers, the *Juma* prayers, *Eid* prayers, Quranic study sessions. Back in India women cannot be a part of any of this. Here my granddaughter takes me to the mosque. I feel at peace here].

For Fahmida, the ability to attend and participate in mosque activities was a blessing considering the cultural taboos placed on Muslim women in many South Asian countries to publicly express their faith (e.g., setting foot inside a mosque or performing the daily prayer in public). And as she mentions, being able to participate freely in mosque activities gave her a sense of peace and contentment.

For several late-life immigrant grandmothers, the mosque was not just a place of worship; rather, it was a site of cultural maintenance and socialization that offset some of their social isolation. To illustrate, Mahfuza looked forward to the summer months when the mosque community ran its annual program for older women like herself. She enjoyed meeting new people, visiting local places of interest, and sampling food from different cultures. Shehnaz, who called herself a "crazy cook" actively participated in monthly bake sales organized by the mosque community.

In addition to the mosque, the easy availability of cheap *halal* meat was another source of joy for several late-life immigrant grandmothers. Mahfuza, who likes to search and try out new recipes, loved the fact that it was relatively easy to buy different cuts of halal meat that her recipes called for. "In India", she stated, "meat was costly and not of good quality".

Further, for many grandmothers, and especially those who were first-generation, traditionally American holidays such as Thanksgiving were celebrated with great enthusiasm in the family with considerable effort put into not only the preparation of the Thanksgiving feast,

but also to procure *halal* turkey, usually the responsibility of the men in the family. On the surface, it would appear that the celebration of host country holidays was a mark of acculturation and assimilation into American society, yet consider this statement from Shehla's interview:

> In Islam, everything is about showing thanks to Allah. Our each and every breath, all the good that happens, is all Allah's will. And we are always thankful. So Thanksgiving also we celebrate in the Muslim spirit, you know? Like again, its thanks to Allah for our good life.

Clearly, for Shehla, the Western holiday of Thanksgiving was adapted and rationalized in the context of her Islamic faith. It appears, then, that traditionally-American holidays such as Thanksgiving may occupy a similar salience in South Asian Muslim families as they do in the mainstream population, yet, the observance of such holidays goes beyond being merely indicative of assimilation; rather, it may be internalized and negotiated within a framework of Islamic beliefs and values.

The preceding section provided an overview of the stories of the grandmothers in this study. It presented a glimpse into their migration journeys and the unique challenges they experienced and continue to experience in the context of immigration. It also discussed the salience of the Islamic faith in their lives, and how it served as the mechanism around which they centered their everyday lives. In the discussion that follows, I now turn to the stories of the middle-generation of women in this study – the daughters and daughters-in-law.

Stories of the Middle Generation: The Daughters and Daughters-in-law

The middle generation, also referred to as the sandwich generation in the literature, was the most diverse group in this study by place of birth and/or time of arrival in the US. Sehr, Imrana, Zoya, Saba, Fatima, Hina, and Ayesha were first-generation immigrants who had accompanied their spouses to the US during the late 1990s and early 2000s. Zeenat's case was slightly different as

she immigrated after her marriage to Shehla's (one of the first-generation grandmothers in this study) son. Rehmat, Mahrukh, Razia, and Safiya were second-generation immigrants, born to immigrant parents in the US. Given this diversity in this sub-sample, it is hardly surprising that the stories of the middle-generation women in this study were informed by a vast range of everyday lived experiences, as presented below.

Stories of immigration and diaspora

"It was like a wonderland": the journey of first-generation immigrant daughters/daughters-in-law

For the eight women in this sub-sample who had immigrated after marriage, the decision to migrate and the journey itself was, for the most part, filled with wonder and excitement:

> I remember it was almost midnight when my plane was about to land in New York. I could see the city below me. I had never in my life seen so many twinkling lights! It was like a wonderland!

Imrana's words capture the essence of what most of the women in this sub-sample expressed – how they were struck by the sheer beauty and majesty of the US topography when they first landed. Zoya, who had never flown in an airplane before, laughingly recalled how she was a little nervous when her plane was about to land in San Francisco: "I honestly thought the plane would end up in the gigantic [San Francisco] Bay!" For Fatima, it was the "pure air" and the "clean roads". Ayesha recalled the "beautiful" snow when she first arrived in the US:

> So when I came here, I think in November, around Thanksgiving, we had just had our first snow. I could see it from the plane, you know, like Allah had dusted icing sugar over everything [laughs]. It was so beautiful. I had only seen this in pictures before. I was so excited!

Apart from the vivid, almost poetic imagery of powdered snow inherent in her words, Ayesha's excitement about traveling to the US is evident, a sentiment shared by most first-generation immigrant women in this sub-sample. This is in contrast to the feeling of sorrow, sense of loss,

and tone of mourning that came across in the migration stories of the first-generation immigrant grandmothers previously discussed. The following excerpt from my interview with Fatima captures this stark difference in tone:

> Everyone came to the airport to see me off. My parents, brothers and sisters, all uncles and aunts who lived in that city, friends and neighbors, even my *Nani Ammi* [grandmother] in her wheelchair [laughs]. My god, it was such a sight! Everybody was making *duas* [prayers], talking and joking and giving me suggestions – do this on the flight, don't drink soda, drink water or you will swell up like a balloon when you land [laughs]. My younger cousins even got balloons and flowers, of course I had to give it back because how could I carry balloons on the plane [laughs]? I'm sure people thought I was a Bollywood [Indian movie industry] star.

Clearly, Fatima was given a loud and boisterous send-off, with loved ones eagerly offering gifts, suggestions, and well-wishes for a safe journey. The overall tone, as is evident from her words, was celebratory. Comparing this to Aiman, the first-generation immigrant grandmother's story, recall that the tone was one of mourning, almost funereal. Aiman's grandmother was upset that her granddaughter was leaving the country and that she would never see her again; in contrast, Fatima's grandmother, her immobility notwithstanding, made a visit to the airport to give her blessings to her granddaughter as she embarked on what the family seemed to consider, was an exciting journey. Similarly, friends and extended family members in Aiman's story discouraged her from leaving, but in Fatima's story, they gave her a celebratory farewell. I probed Fatima on what she was feeling at the time of departure:

> What was I feeling? Wow, good question, I never thought about it. Hmm. Was I feeling sad? My God, now that I think about it, I don't remember feeling sad [laughs]. Should I have felt sad? If anything, I just remember feeling excited and a little bit nervous because I was flying alone, and my husband had already left six months ago.

Fatima's words merit careful consideration. That she was struggling to recall her feelings at the time of departure stand in sharp contrast to the vivid memories of sorrow and regret shared by several first-generation immigrant grandmothers in this study. Indeed, for several first-generation

women in this study who immigrated in the late 1990s and early 2000s, migrating to the US was a dream come true, actively harbored and pursued. Consider these words from Zoya:

> So listen, my parents knew I wanted to settle [down] in the US. It was very clear. So when they were looking for a *Rishta* [proposal], I had only one condition, the guy [groom] should be settled in the US, or he should be planning to go [immigrate].

That Zoya's marriage was traditionally arranged is evident from the fact that it was her parents who looked for a suitable groom for her – a custom still popular in many South Asian Muslim families. What stands out is the fact that Zoya had unequivocally expressed her ambition to settle abroad, and her parents respected her "condition" and actively sought a matrimonial alliance that would honor her wishes.

Sehr expanded upon this ambition: "See for me, and I think most families like mine, settling in the US was a prestige issue, almost like a status symbol". Sehr's words highlight how, for many middle-class South Asian families, migration to the US may not just be a process of self-actualization, as Zoya seemed to suggest; rather, it may be a symbol of success and upward social mobility.

Further, according to the women in this sub-sample, a good part of the fascination with Western, particularly American culture, was due to the influence of media. In Hina's words:

> I think for us growing up in Pakistan in the eighties and nineties, we were so aware of American culture. We all listened to Madonna and Michael Jackson songs on our Walkmans, we watched *Top Gun* and *Titanic*. Tom Cruise was my all-time favorite [laughs]. Then there were all these American shows, like *Friends.* Even many Pakistani dramas [TV shows] were shot in New York or LA. So definitely, compared to the older generation, the exposure was there. And this huge desire to actually experience all that was also there [laughs].

Here, Hina's words paint a vivid picture of, what the life course perspective recognizes as a 'cohort effect', i.e., the sharing of distinct formative experiences at the same point in the life. For Hina and others belonging to her generation, access to the material artefacts of Western

culture—popular movies, TV shows, and music—was acquired easily via media consumption. And not only was this cohort exposed to Western culture, the desire and ambition to experience it first-hand was paramount.

Another factor that fuelled this desire was stories heard from members of the extended family who had previously immigrated. As Ayesha described it:

> When we were growing up, there was so much awareness [about American culture]. I think all of us had that one *Phoopho* [paternal aunt] or *Mamu* [maternal uncle] who was settled in America and American cousins who would visit us in the summer vacations, right? We would hear their stories, and then they got all those gifts, so that was always exciting. I remember I was a huge fan of Hershey's chocolates and my *Phoopho* used to bring them especially for me.

Ayesha's statement exemplifies how her generation lived vicariously through the stories of the diaspora, listening and learning about American culture that ultimately shaped their decision to immigrate. It is also interesting to note how welcome gifts from abroad were. Although not generalizable, it does appear to corroborate the stories of gift-giving described earlier by the first-generation immigrant grandmothers in this study and how eagerly friends and family members back in the homeland waited for them. The second-generation immigrants in this sub-group, the daughters who were born to the first-generation grandmothers, also shared fond memories of the gift-giving ritual. Safiya described how her mother Mahmuda would always carry in her purse a running list of items requested by her family back in the homeland, meticulously checking off items as they were purchased. Mahrukh recalled helping her mother wrap-up and label the gifts. Razia fondly remembered the excitement with which her young cousins back in India received the gifts.

What is even more interesting is that this practice of carefully curating gifts to be given to friends and family members left behind as shared by the first-generation grandmothers, appears to lose some of its appeal in the next generation as Ayesha goes on to say: "we really don't do a

lot of gift shopping now. What's the point? Everything you get here [in the US] is available in Pakistan. Even the milk cartons with red caps [laughs]". Ayesha's statement seems to point to: 1) a structural shift with an increasingly global economy, where borders are fluid and permeable with a more porous exchange of goods and commodities; 2) how these structural changes may shape everyday behaviors and practices among diasporic communities; and 3) how the ritual of gift-giving as an act of preserving and maintaining kinship bonds as was previously discussed, a collective event, was given up in favor of a more individualistic approach. As Imrana concluded: "we had finally come to America, and we were happy, now it was time to make our life here".

"My first reaction was to cry and cry": stories of challenges faced by the middle generation

The initial excitement of moving to the US, however, faded quickly for some women in this sub-group. While they did not encounter some of the challenges faced by the previous generation of immigrants such as language barriers and access to information on available settlement services given: 1) their relatively higher level of education; 2) their status as economic immigrants with stable jobs; 3) a strong network of friends and extended family; and 4) easy access to information via informal networks as well as the internet and social media, it was salient lifecourse events that adversely affected their sense of well-being. Ayesha described how she learned she was expecting her first child two months after arriving:

> I had been feeling down, a little weak and tired all the time. And we thought that it was because, you know, this was a new country, different climate, food. Anyway, turns out I was pregnant. And it was like Boom! [laughs]. I still feel so bad, because my first reaction was to cry and cry. And then the morning sickness started and oh! It was so terrible. My husband would cook breakfast and set it on a table next to my bed, you know, and all day I would try nibble something. Then in the night he would come home and cook.

For Ayesha, her pregnancy was a turning point in her relationship with her husband:

> You know, I always thought he is so spoiled and pampered. He is the typical *desi* [South Asian] guy, cannot take care of himself, how will he take care of me [laughs]? But when I got pregnant and with the [baby's] delivery right to this day, he has been so helpful, it was a sort of new-found respect.

Ayesha's words point to a potential re-negotiation of traditionally-prescribed gender roles within the family, a finding corroborated by Razia, a second-generation immigrant who married her second cousin from India:

> Honestly, I didn't know what to expect. From what I had seen and heard, Indian Muslim men were very tough that way, you know, very patriarchal and all. Like even my own *Abbi* [father] and other men from his age-group, even though he had moved to the US at a very young age, he was like that. Very strict and really hopeless in household work [laughs]. But boy, was I pleasantly surprised! My husband was nothing like that. He was always helping with household chores. He knew how to cook. Even with the kids he is so invested in their upbringing. So yes, that was a very pleasant surprise.

Here, Razia's impressions of patriarchy being normative stems from her own lifecourse experiences having observed the everyday behaviors of her father and other men belonging to his generation. That she was pleasantly surprised with her own spouse's egalitarian approach to housework solidifies Ayesha's statement above.

For Zeenat, who was born and raised in Pakistan and moved to the US after marrying Shehla's US-born son, a key turning point in her lifecourse was her spouse losing his job right after she arrived. Financial constraints forced the couple to move into the walk-out basement of her in-laws' house. Further, although Zeenat was welcomed with warmth and love by her in-laws, it was a struggle for her to get used to her spouse's "American lifestyle":

> It wasn't anything crazy, you know, but we really had nothing in common. He did not speak Urdu, he did not enjoy Pakistani food, he was a health freak, so he only had salads. What else, yes, he did not watch *desi* movies! He only watched American sports. I was so miserable all the time. That I think was the phase in my life that I used to cry for my mom [back in Pakistan] every night. Now of course, he has changed and I have also changed. And you know, his sister is so different. She was also born here, but she is more like me, we like the same things. We watched movies and dramas [on TV] together. So

> sometimes I used to share my frustration with her and she would try to make her brother understand.

Several important themes stand out here. First, Zeenat was coerced by exigent circumstances to share living space with her in-laws, the family's basement which she described as a "cold and rather nasty place". Second, there was a significant acculturation gap between her US-born spouse and herself, a gap that added to her sense of despair and misery, making her long for emotional support. Third, that Zeenat's US-born sister-in-law was more socialized into South Asian cultural practices than her brother speaks to the potentially gendered dimensions of cultural socialization in diasporic families. Finally, it also reflects the emotional labour that women in diasporic families perform – in this case, Zeenat's sister-in-law acting as both an informal counselor to Zeenat as well as a conduit between Zeenat and her own brother in an effort to improve their interpersonal relationship.

Juggling between the demands of home and personal ambition and aspiration was another key barrier described by the women in this sub-group. Most women in this sub-group had been encouraged to cultivate personal ambition and drive during their adolescent years by their older relatives. For Zeenat, who quickly received a Green Card as the spouse of a US citizen, handling the pressures of a competitive workplace and her household responsibilities was a challenge:

> My mother-in-law helped a lot with childcare. Like she had raised her own children here, so she knew more than I did about all that. So, I was very comfortable leaving the kids in her care when I went to work. But then when I came home, I would feel so guilty because she looked so tired. It's not easy to run after kids all day. So, I would tell her, no, no, you go and rest, I will take care of the cooking and cleaning. So basically, I would do all that [housework] then my daughter was just a baby and she was a colicky baby. So, she would keep me up all night. I don't know how I managed. My husband helped but he was not, how should I say it, very efficient [laughs]. Many times, I thought I will just quit my job. But then I stopped because all my education would go to waste, right?

Here, it is evident that although Zeenat received support from her mother-in-law with childcare, and she respected her years of experience, particularly having raised her own children in North America, Zeenat often felt overwhelmed by the demands of work and home. And yet, her early years of being socialized into nurturing career goals and ambition precluded her from leaving the paid workforce.

To cite another example, Imrana, who had a bachelor's degree in Computer Science and worked at a prestigious IT firm back in Pakistan, draconic and archaic US laws around work permits for spouses of economic class immigrants (on an H4 visa) were a significant barrier to career advancement. She described how spending the initial five years post-migration at home pushed her back several years in terms of knowledge and skills acquisition given the rapidly shifting IT career landscape. When she went back to work after rules around the H4 visa were relaxed, she discovered that she did not have the updated skill-set to get a job that was commensurate with her education and prior work experience. She therefore decided to pursue a master's degree in business:

> So, let me describe what it looked like. All my classes were in the evening, ok? So, every evening I would take the 4:30 train to the city with my two young kids. Then my husband, who worked in the city, he would wait at the train station. I would hand over the kids to him, and rush to my classes. He would take the kids home, feed them dinner, which by the way, I had cooked and everything [laughs] and then put them to bed. And I would take the train back home in the night. And crash into bed! My god, even talking about it is making me tired, I don't know how I did it back then! [laughs].

Imrana's detailed account of her daily routine provides a clear picture of the everyday struggles she had to overcome to keep her dreams of a successful career alive. It is also noteworthy that although her spouse stepped up to help with childcare duties, cooking was still Imrana's responsibility. To cite another example, when Saba decided to pursue higher education, as was earlier discussed, she turned to her mother Shaheen in Pakistan, requesting her mother to co-

reside with her to take care of her grandchildren, Saba's two daughters. Similarly, Mahrukh, a second-generation immigrant, moved into her parents' home with her children when she was preparing for medical school entrance exams in order to offset some of the burden of childcare.

These examples underscore an important difference between the professional aspirations of the grandmothers and the middle-generation women (the daughters and daughters-in-law) in this study. Recall that for many first-generation immigrant grandmothers, professional aspiration and career advancement was often contingent upon what they believed was better for their families. Thus, their involvement in the workforce was often out of economic necessity. For the middle-generation, however, it appears that personal ambition and career advancement goals, and not economic contingency necessarily, drove their desire to work outside the home. Part of this contrast can be explained by a generational shift towards a more egalitarian distribution of household responsibilities between genders, as is evident from some of the examples presented above.

Apart from career advancement and related challenges, some of the second-generation immigrant women in this sub-group spoke about feeling "caught between two worlds" while growing up. Most women had grown up in very 'white' suburbs with little diversity. For these women, it was difficult to reconcile the traditional environment at home with a more westernized outside world, particularly when they were in high school. As Rehmat described it:

> Those were difficult days. All my friends were going steady at the time, and I felt so awkward. There were so many rules at home, you know, don't stay out late, your brother will accompany you, don't wear certain kinds of clothes. It was a lot. It's different for my daughter, right, and I'm so glad, because for her there are so many other girls who are just like her, you know what I mean? Then I got married straight out of high school, which is honestly not such a big deal here, but my friends were like, what! You are marrying a stranger you don't know anything about. Like literally their eyes popped out of their heads! [laughs].

Here, Rehmat speaks about the internal struggle she faced trying to fit between two cultures. She talks about how restricted her own life was compared to other young girls of her generation, particularly around marriage and dating. And yet, when she speaks about her daughter having an easier life given that "there are other girls just like her" it seems to suggest that growing up, it was not so much the rules and restrictions that she had to struggle with as much as it was the feeling of being an outlier from a Westernized lifestyle perspective. Similar thoughts were expressed by Mahrukh, Razia, and Safiya, the other second-generation immigrant women in this sub-group. And part of this is attitude could be explained by their views around faith and spirituality, as discussed next.

"My *deen* is everything to me": Perspectives on faith and spirituality

For both the second-generation immigrant as well as the first-generation immigrant women in this sub-group, their *deen* or faith was an intrinsic part of their lives. Indeed, Islam was a fundamental marker of identity in these women who embraced their "Muslim-ness" unapologetically. Most women considered themselves as a part of the global Muslim community (the *Ummah*) and, despite their professional and familial commitments, actively participated in mosque-based events such as Friday prayers, Ramadan *tarawihs*, and women's *Dars* groups. Indeed, the *Dars* sessions, which were typically organized in informal spaces such as a friend's home, were held on a weekly or monthly basis and served as a site of religious and cultural reproduction. As both Ayesha and Sehr described it, the *Dars* session allowed for an uninhibited space where women could discuss Quranic verses and Islamic scriptures and (re)interpret them in a diasporic context. Further, these sessions also served as a site for socialization and fostered the creation of strong and enduring friendships with the sharing of food, tales from the diaspora, and even personal problems.

Several first-generation immigrant women who arrived in the late 1990s and early 2000s claimed that they had "re-discovered" Islam in a diasporic context. Consider this excerpt from my conversation with Sehr who grew up in India:

> My *deen* is everything to me. It teaches me how to eat, how to take care of my health, how to behave with others, how to be a good mother, a wife, a daughter, how to be a good citizen, how to be a good human being. It is who I am. And I will also admit this, growing up in India, I was not very religious. It was more about the rituals. I did do *nemaaz* [daily prayers], but maybe not five times a day. I did keep *roza* [fasting] during Ramadan, but all of this was more because everybody was doing it, so I should also do it. See, in India, access to Islamic knowledge and places of worship is for the men only. Here [in the US] there is more equality that way. I really try to seek out the knowledge, and what I am learning has made me a better Muslim, a better person.

It appears that for Sehr, her Muslim identity is central to her and all other roles, be it that of the mother, the spouse, the daughter, all stem from that fulcrum of being a Muslim. Another salient point in this excerpt that was brought up by all first-generation immigrant women in this sub-sample was that in their past, their *deen* was not as central to them as it now was in a diasporic context. This was partly because, as Sehr stated, access to religious knowledge and places of worship like mosques in South Asian countries is gendered and often restricted to women. Fatima expanded upon this point by providing a poignant example from her recent visit to India where she felt marginalized and discriminated against because of her gender:

> So last year when we were visiting India, in Delhi, actually, we had gone shopping. And then it was time for Friday prayers. So, we thought ok, let's do the prayers at the *Jama Masjid* [prominent mosque in India]. And I am now so used to praying in the mosque here in the US that I completely forgot all about how women cannot enter the mosque in India. Or maybe because I was not very religious minded when I lived in India, whatever it may be. So ultimately, my husband and son were allowed to go inside, and I was waiting for them outside on the street. I just felt so undervalued, you know. Like somehow my prayer is not as important. That's just plain wrong.

For Fatima and several other women in this sub-sample, their *deen* was being re-interpreted and transformed in a transnational context to the extent that they had acquired a new awareness and internalized a more egalitarian view of Islam, one that privileges both men as well as women.

Thus, they now viewed the more regressive and gendered practices of Islam in their countries of origin with disapproval, despite having spent a good part of their early lives entrenched within that system.

Another key theme that emerged from my interviews with this sub-sample of women, the middle generation, those that were born in the US as well as those who immigrated in the early 2000s, was that more progressive interpretations of Islamic thought were being used to re-define and re-negotiate familial support exchanges between genders. Consider Saba's words below:

> There is more than one *hadith* (story of the Prophet Muhammad's life) about how the Prophet used to help with household chores like cooking and cleaning. I had never heard this in India. And another interpretation I heard in one of the *Dars* [Quranic study and interpretation groups for women] here was that whatever a woman earns from outside work, so her wages, salary, whatever you want to call it, is hers alone. She is not responsible for the economic situation at home, the man is. But yes, she is responsible for raising good children, that's very clear. So just a couple of examples, but very liberating, no?

The excerpt above is yet another example of how the South Asian Muslim women in this study turned to Islamic scriptures and religious discussion groups like the *Dars* for examples from the life of the Prophet Muhammad to establish a more egalitarian division of labor at home, as well as equitable access to income; and yet all of this was constructed and enacted within clearly-defined boundaries around motherhood and raising children – considered within the purview of women, generally speaking. And not only childcare, the re-interpretation of Islamic thought was applied to eldercare as well. As Imrana described it:

> In Indian and Pakistani culture, we always say that oh the daughter-in-law has to take care of in-laws, not her parents, maybe in Hindu culture it is like that. But in Islam, you have to take care of all elders, whether it's your parents, who do have more rights, but also all older relatives. And so, the husband also has to take care of his parents. And the wife has to take care of her parents. It's not by gender. So, I take care of my parents because it is my duty as a daughter, and I take care of my in-laws because it is my duty as a Muslim. Same with my husband.

This statement is an interesting shift from the gendered nature of filial care work in many South Asian families. In the excerpt above, Imrana makes an effort to explain what Islamic scriptures say about caring for a parent and seeks to disrupt the myth that religious traditions mandate that filial responsibilities lie solely with the women in the family – men are equally responsible.

When asked about practicing their faith outside the home or the mosque, the first-generation immigrant women in this sub-sample unanimously agreed that it was easier to practice Islam in the West. For those who grew up in India, especially, the ability to practice one's faith freely was welcomed, as expressed by Sehr:

> Muslims were a minority in India, so growing up I was very aware of being that token Muslim in a class of 53 people. And sometimes, like the teacher would talk about, say Aurangzeb [a Mughal king] was very barbaric, and all eyes would turn to me as if somehow as a Muslim I should be able to explain why Aurangzeb did all those violent things five hundred years ago [laughs]. So that's something I was used to. Here [in the US] no one questions you.

Sehr's words seem to be carefully chosen. She discusses the discrimination she experienced as a Muslim in India, yet when I probed her on her thoughts on how Islam is viewed in the West, she chose not to answer. Other first-generation immigrant in this sub-sample also seemed very careful with their words particularly when it came to Islamophobia. The second-generation immigrant women, however, were more vocal, citing examples of several friends who had to stop wearing the *hijab* either because of a hate crime or discrimination in the workplace. These women were also actively involved in social justice causes associated with Muslims as well as more generally with racial justice and equality issues. It appears, then, that religious activism and the ability to discuss it freely was related to the degree of acculturation to a more Westernized worldview on free expression of speech.

The discussion above presented the stories of the daughters and daughters-in-law in this study. It explored the migration experiences of the first-generation women in this sub-sample,

aspects of the family life of the daughters and daughters-in-law, particularly with regard to a re-negotiation of the more traditional gender roles within the family, and the centrality of their Islamic faith in their lives. Further discussion on the lived experiences of this group vis-à-vis intergenerational support exchanges is presented in the section on multigenerational living. What follows next are the stories of the granddaughters in this study.

Stories of the Granddaughters

Of the eight granddaughters in this study, Sumbul, Mehr, and Zubeda were third-generation immigrants – those who were born in the US and had at least one parent who was also born in the US. Fiza, Afreen, Mahira, Nilofer, and Rukhsar were second-generation immigrants whose parents were born outside the US, and their grandparents had immigrated later in life. All granddaughters either currently lived or used to live in the same household as their parents and grandparents. While this sub-sample of granddaughters was homogenous with regard to country of birth (i.e., the US or Canada in Rukhsar's case) and not as diverse as the group of grandmothers and the daughters/daughters-in-law, there were some differences in the lived experiences within the group based upon their generational status, as discussed below.

"We are really lucky here. We take so much for granted as women": Granddaughters introspect on the diaspora

Several women in this sub-sample had limited knowledge about their family's immigration history per se; nevertheless, they actively sought out stories that informed their understandings of the diaspora. As Mehr described it:

> Honestly, I cannot speak to that [her family's story of immigration]. I mean, I know that our family is originally from India, and my grandparents migrated sometime in the 1980s, but how they came here and why, I have no idea. But like there are pictures that my *Nani* has, actually a lot of pictures, of her wedding and her parents, so like my great-grandparents, and all that. We really like to look at those together. And I ask so many questions, like who is the lady in the *saari* in this picture, or like, oh my god this is funny, why is nobody smiling in this picture? It's supposed to be a wedding, right? [laughs].

Mehr's words seem to suggest that although the older generations may choose not to share their stories of migration with their younger relatives, transgenerational transfer of memories of seminal lifecourse events (such as a grandparent's wedding day in the example above) may occur via the family album. It also serves to consolidate and preserve important emotions associated with an old photograph. For example, Mehr mentioned that she was intrigued by that one picture from her grandmother's wedding day in which there were no smiling faces, despite it being an ostensibly happy occasion. But as she went on to say, she understood the complex dynamics of a South Asian wedding when her grandmother explained that the picture was taken on the day of her *rukhsati* [bridal send-off], a bittersweet ceremony in the bride's family that symbolized the formal 'exit' of the bride from her birth family and her entry into her 'new' family – that of her in-laws. This example demonstrates one of the ways in which treasured memories documented in family photographs may create a shared cultural understanding of the past between generations.

Photographs and video recordings from a bygone era may also serve as an important medium through which the material aspects of diasporic culture and family traditions are re-constituted. Consider Mahira's words below:

> I think we watched my mom's wedding video like fifty times to get a sense of what she was wearing, you know her bridal dress, the jewelry, the make-up. I wanted to look just like her, she is so pretty. And luckily here there are so many desi clothing stores, so I think I managed to pull of that ethnic, traditional Muslim bride look [laughs]. My *Nani* was like, oh, you look just like her. That was so special!

As the example above suggests, not only did the wedding video serve as a way to recreate stories and relics from the past, it was also a way to solidify bonds between generations as evident in Mahira's desire to 'look as pretty' as her mother, and her grandmother's approval of it.

Further, for some granddaughters, family jewelry was symbolic of their ancestral and diasporic identity, through which they narrated stories of their mother, grandmothers, even great-

grandmothers. For example, Sumbul talked about a family pendant that had been in her family for four generations and would be handed over to her on the day she got married.

> So that's the tradition in my family. That pendant was my great-grandmother's who gave it to my grandmother on her wedding day, and then she gave it to my Mom who wore it on her wedding. And I will also wear it on my wedding day when my Mom gives it to me. Actually, I am not allowed to wear it until, you know, the *nikaah* [Muslim wedding ceremony]. I mean, there's so much history there, in just this one piece of jewelry. Like my great-grandmother was Indian and they went to Pakistan after the Partition, right. So, this pendant is very global. Made in India, went to Pakistan, and then ended up in the US [laughs].

Sumbul's words show that the handing over of jewelry between generations is a means to keep the stories of previous generations alive for the generations that follow. But the meanings attached to that one piece of jewelry are multi-faceted: 1) it marks a seminal life course event (a wedding); 2) there is a distinct ritualistic component to it (it is first worn by the recipient on her wedding day); 3) there are a set of rules attached to its possession (e.g., it cannot be worn by the recipient until she acquires a new achieved status – that of a married woman); 4) it is symbolic of pride in one's ancestry; and 5) it also epitomizes the family's migratory journey, diasporic history, and the persistence of ethnic identification.

For Zubeda, diasporic history came alive in the stories she heard from her grandmother about the latter's childhood growing up in Pakistan. As a young girl, she reflected, listening to her grandmother's stories she often imagined what life was like back in those days. She recalled her grandmother telling her about how she was the first woman in her family to go to college and the pushback she received from extended family members – a story that, as Zubeda confessed, made her value the freedom she enjoyed as a young woman in the US.

> My *Dadi* [paternal grandmother] told me about her fighting to go to college because, you know, it was not normative for women to pursue higher education. And I respect and value that so much. Like we are really lucky here. We take so much for granted as women, you know.

Another key point brought up by several third-generation granddaughters in this group was that how, despite the fact that close to four decades had passed since their migration, their grandmothers still referred to their country of origin as 'home'. This corroborates a salient theme of nostalgia that emerged from my interviews with the first-generation grandmothers in this study, as discussed previously. Further, as they grew older, the sense of nostalgia and longing for the past appears to intensify. As Rukhsar narrated:

> My *Nani* is so funny you know, she has this way of invoking the past on the weirdest of occasions. Like I am getting late for my classes, I'm trying to stuff my face with food, I have to catch the train to get to [college] campus, and she wants to start a conversation about the good old days when she was a little girl in some unpronounceable place in Pakistan. Like she'll spot a bird or something outside the window, and she'll go off into how it reminded her of her pet bird she used to have in Pakistan. And how that bird got sick and she nursed it back to life. And I swear it's getting worse as she's aging [laughs], but if that makes her happy, you know, who are we to complain?

Although Rukhsar sounded indulgent about her grandmother's reminiscing, it does speak to the fact that for the older generation women, fond recollection of bygone days seems to be a way to preserve memory and also to consolidate their sense of self-worth and self-esteem.

The examples above point to the ways in which intergenerational transmission of cultural artefacts, both material and intangible, as well as support exchanges shape the grandparent-grandchild relationship, a theme that is discussed in greater detail in the section that follows. In the remaining part of this section, I discuss the creation of a Muslim identity as shared by the young women in this study.

"I'm as American as you are": Stories of being American Muslims

For most granddaughters in this study, their Muslim identity was paramount to them. As was evident in the narratives of the grandmothers and the middle generation, Islam was a way of life

for these women. Several women recalled participating in mosque events during the month of Ramadan as a favorite childhood memory. As described by Sumbul:

> Every year during Ramadan we girls would fast all day and then spend the night at the *masjid* [mosque] with our families. My *Nani* is such an amazing cook and she would whip up so many goodies for *Iftar* [when the fast is broken at dusk]. So, at the *masjid*, we would pray together, and just hang out, and then a group of us would go to McDonald's or IHop for *suhoor* [meal taken right before the fast commences at dawn]. This was like 3am or 4am in the morning [laughs], sounds crazy, but here nobody really cares. You just do your thing with your group.

This vivid description of a favorite annual activity is in sharp contrast to the feeling of being an outsider among peers as expressed earlier by the second-generation immigrant mothers who grew up in less diverse neighborhoods. Here, Sumbul's words symbolize the strength of community ties and social networks and how they may serve as a protective mechanism cultivating a strong sense of identity and self-worth in young diasporic women.

For some women, going to college was a key turning point in their lifecourse as they turned to their faith as a means of coping with the stressors of college life and being away from loved ones. As expressed by Mehr:

> I had never been away from my family, and it was so scary initially. And then everyone was doing their thing, chilling, and I am not into all that, so I remember I would miss my mom and dad so much, I'd cry sometimes. Then I started reading *Surah Yasin* [a verse from the Quran] that my grandma had given me. That's when I really started to try and understand what my religion says. And it gave me so much peace.

For Fiza, witnessing a hate crime on the local train prompted her to become more vocal and expressive about her Muslim identity: "I was like ok, it's time to say something, I'm not afraid of who I am. I'm going to wear *hijab*, and I'll do it without fear". Not only was Fiza more drawn to her *Deen* after this event, she also acquired a new-found sense of justice:

> You know, in Islam if you witness an injustice and stay quiet, you are complicit. There is so much that's wrong, you know, people are suffering in so many ways. And I think it is our duty to do something, as Muslims and as Americans. And I'm like don't think of me as helpless. So, I've been volunteering at a local organization for victims of domestic

> violence. And I've been taking part in all sorts of marches. You name it, I was there [laughs]. You have to counter the Islamophobia, take charge of the narrative, you know. Islam asks you to do charity and help others in need, no matter their religion, or color, or whatever.

Fiza's sense of agency is evident from her words as she actively seeks to assert her Muslim identity through a re-negotiated, more progressive view of Islamic beliefs. The presidential election of 2016 and Donald Trump's victory, in particular, was a critical turning point in her life that resulted in a more focused engagement with social justice causes such as participating in the 2017 Women's March in Washington, D. C.

Zubeda, who wears the *hijab* in public, talked about the discrimination she occasionally experienced, not only given her visible identity as a Muslim woman, but also as a racialized one:

> Growing up here, you know, we are such a strong community and we do a lot of inter-faith outreach, so this is a very open and welcoming part of the city. But I've had times elsewhere when even before I start to speak, people assume that I cannot speak English because of how I look, right? So, when I start to talk, they are really taken aback, and then they'll say, oh, you speak very good English, and I'm like yeah, what did you expect? I'm as American as you are.

Here, Zubeda is exercising her agency, not only embracing her Muslim identity but also actively claiming her American one.

A similar example was given by Nilofer who recalled an incident with a colleague at work:

> So, I had just given a presentation and this colleague who I had never spoken to, you know, just bumped into in the hallway or the lunchroom, she came up to me and said, you know I was pleasantly surprised. I didn't expect you to sound so forceful, you look so different, the way you dress. That was really offensive, and I know she was trying to give me a compliment. And you know, I told her. I said I know you are being nice and all, but I am offended. And she was so apologetic. So you've got to speak up for yourself.

Nilofer's words highlight some of the stereotypes surrounding women in Islam, feeding into the idea that women who dress in an Islamic way are bound to be docile, dismissive, and oppressed.

Further, often such assumptions are made by people who do not necessarily mean to cause trouble. And yet, although she was offended, Nilofer exercised agency and initiative by vocally expressing her feelings.

That Mehr, Fiza, Nilofer, and others in this sub-group were more vocal about Islamophobia is in sharp contrast to the narratives of some of the first-generation immigrant women I talked to, as previously discussed. Part of the reason for this could be attributed to a lower degree of acculturation and their awareness of their immigrant identity as opposed to an American one. Further, for some of the women who grew up in India, internalized views about their minority status in a primarily Hindu country and living in the fear of retaliation if they were vocal about perceived injustices could have added to their reluctance to speak about this issue. Conversely, this reluctance could have also stemmed from a deep appreciation of the more liberal Western society which allowed them to practice their faith freely as previously discussed (such as praying inside the mosque).

Yet, even within this sub-sample of granddaughters, there were some young women who felt threatened by their visibility as a Muslim woman and had to take extreme measures to safeguard themselves. Consider this example provided by Rukhsar, a second-generation PhD student who grew up in Canada:

> I grew up in Toronto, and I do not recall, not a single incident when I felt like my wearing a *hijab* was a problem. Like I used to take public transportation all the time and I never, ever felt out of place. But that's Canada for you, right? When I moved to the US after marriage, I would take the bus or train to school or to work and I'd always feel like people were staring at me. All the time. And this is such a diverse city, right? And then a few times I had somebody harass me. So now I am spending tons of money taking the Uber to work and to school, and it is killing me financially, but I feel safer.

Rukhsar's words underscore the ruptures, uncertainties, and difficult everyday negotiations that define the lives of some Muslim women who wear the *hijab*. For Rukhsar, it was having to take

the extreme measure of avoiding public spaces to protect herself from Islamophobia, the financial costs notwithstanding. Further, that she reported never having experienced discrimination as a Muslim woman in Canada speaks to the possibility that the rampant stereotypical rhetoric and vitriolic discourse around the Islamic faith in the US in recent years may have been partly responsible for the threat to her safety.

To sum up, the granddaughters in this study were more expressive about their Muslim identity in public spaces, often taking on an activist role. At the same time, they were cognizant of their ethnic heritage as South Asian Muslims and looked to their older relatives for transmission of cultural values. This is further explored in the discussion that follows.

Linked Lives: The Dynamics of Multigenerational Living Arrangements

Findings from my interviews with three generations of South Asian Muslim women reveal a robust and reciprocal system of support exchanges in the family. Although participants reported multiple challenges to co-residence, they organized their lives around the inevitability of multigenerational living and the sharing of lives, often using Islamic beliefs as well as cultural norms as a means to internalize their living arrangements. It must be noted, however, that in sharing their stories and understanding familial dynamics we need to be appreciative of both similarities as well as the variability of experiences within and across generations as related to early-life socialization, immigrant status, time since and time of immigration, education, and degree of acculturation.

"One's grandchild is more precious than one's child": grandmothers on multigenerational living

For the most part, the grandmothers in this study provided functional support, instrumental as well as affective, to their daughters/daughters-in-law and grandchildren. For the first-generation immigrant grandmothers, those who had immigrated in the late 1970s and early 1980s, the

support they provided was more hands-on, having raised their own children in the US. Further, they were more acculturated to Western culture as compared to those grandmothers who joined the family later in life. Consider the following example shared by Aiman:

> My daughter and son-in-law used to leave the kids [grandchildren] with me when they went on job. It was just like the old days. So, I would teach them [her grandchildren] how to count, and you know the ABC song? I taught them how to sing. And then Elmo and Barney, my children loved Barney so much when they were little. You can say that I was like a preschool teacher for all my grandchildren, because when it was time for kindergarten, they were ready to go [laughs].

Aiman's pride at having been a part of her grandchildren's early childhood education is evident from her words. Her references to the "old days" and the TV shows that her own children liked to watch suggests that spending time with her children gave her a sense of purpose likely similar to what she must have experienced as a mother. This sense of purpose is also evident in Shehla's words:

> Zeenat [her daughter-in-law] had her job and Nabeela [her granddaughter] was just a baby. So, I told Zeenat, you go to work, I can manage. She is my daughter-in-law, but more like my daughter. And she was trusting her baby with me. So, it was a good arrangement. You must have heard that old saying *mool se sood zyaada payara hota hai* [one's grandchild is more precious than one's child]. And one big plus [advantage] was that I could drive, so I was able to do school drop-off, picking up also when Nabeela started her school. One time she was sick, I took her to Urgent Care also.

Recall that an earlier discussion touched upon Zeenat's comments on this childcare arrangement and how she and her spouse moved into her in-laws' basement when her spouse lost his job; Shehla's words validate Zeenat's story. And here again, the advantage that first-generation immigrant grandmothers had in terms of degree of acculturation is evident especially with regard to mobility and the added benefit of being able to contribute in exigent situations such as Shehla's taking her granddaughter to the doctor when she was sick. It also reflects the sense of

joy that Shehla experienced as a grandmother and her feeling of being a trusted and valued member of the family.

The contributions of the late-life immigrant grandmothers, on the other hand, was primarily in the private sphere with cooking and cleaning, and occasionally, childcare. Fahmida, for example, liked to try out new recipes and the easy availability of assorted halal meats and ethnic grocery was a source of great surprise for her:

> *Maine socha nahin tha, yahan har tarah ka samaan itni aasani se mil jaata hai. Jo bhi recipe chahti hoon, bacche samaan le aate hain aur main banati hoon. India mein itna aasan nahin tha. Ghar pe sabhon ko khane ka shauq hai, aur mujhe hamesha se banane ka. Accha lagta hai jab sab saath baith kar khaate hain. Who mera khayal rakhte hain aur mein unka* [I had not imagined that everything is so easily available here. Whatever I want for my recipes, the children get it for me. It was not so easily available in India. Everyone in this family is fond of eating and I have always been fond of cooking. It feels so nice when we all sit down together to eat. They all take care of me, and I take care of them].

Fahmida's comments indicate that food preparation for her was not only a cherished leisure activity, it was also a reciprocal arrangement wherein she showed her appreciation for being 'taken care of' by cooking the family's favorite foods. Thus, while cooking was being used as a means to fulfil a perceived moral obligation and a traditional cultural duty towards the family, it was also a form of gift-giving, associated with the joy of planning (e.g., looking for a recipe and ingredients); preparation (i.e., the actual process of preparation); and commensality (e.g., enjoying the meal together as a family). Further, recall that Fahmida's spouse had recently passed away, a turning point in her life which initiated the migration process. Her stating that she had always liked to cook may indicate that cooking for her family in the diasporic context provided a sense of continuity and a link to her past life back in India.

Food preparation was also used as a means to maintain family traditions. For example, Aiman, who had immigrated in the 1980s had this to say:

> I have been doing this every year since I came to America. Every *Ramadan* and *Eid* I cook all the traditional food that my *Amma* [mother] used to make in India. It was very hard when I was also working, but now I have time, so all days of Ramadan I cook the traditional food for *suhoor* and *iftar*. My children were anyway used to it, but now my grandchildren are also looking forward to it every year. That is also one way of teaching our culture, no?

For Aiman, the traditional foods from her country of origin evoked a sense of nostalgia as she tried to recreate what her own mother used to cook back in the homeland. Further, it was an important way to reinforce ethnic identity and to preserve and pass on cultural traditions by associating them with ethnic or religious holidays such as *Ramadan* and *Eid*. And as Fahmida's statement earlier suggested, the increased availability of ethnic foods such as *halal* meats made the process of planning, procuring, and preparing of these foods much easier and more convenient.

In addition to cooking, the grandmothers in this study performed the important task of cultural and religious transmission across generations. A major part of this occurred during evening hours, particularly over the weekends when the grandmothers would put their young grandchildren to bed. They shared stories from their own childhood as well as the stories of their children with their grandchildren. They also narrated stories from the Islamic tradition (e.g., stories about the Prophets in Islam and the Quran). In addition, some grandmothers taught their grandchildren how to read the Quran, a task that brought them, as Rukhsana described it, "a lot of *sukoon* [peace]". For Aiman, it was her "responsibility" to make sure her granddaughter read the Quran: "My daughter is so busy at work, she won't have time to teach Quran, so as the elder of the house, I have to do it". Thus, for the grandmothers in this study, it appears that they took on an active role in the religious training of their grandchildren, often due to the absence of the mother who was busy with professional pursuits.

And yet, the intergenerational relationship between the grandmothers and granddaughters in this study was multi-directional. It was informed by cultural transmission and it was also transactional. Language is one such example. For the late-life grandmothers in this study, speaking to their young grandchildren in Urdu was a means to transmit and preserve the language of their home country. But as the children grew older, the grandmothers' self-assigned linguistic tutelage was gradually replaced by that of their granddaughters who now took it upon themselves to "teach" English to their immigrant grandmothers. Thus, grandmothers practiced their English-speaking skills with their grandchildren who were now also reasonably fluent in speaking Urdu.

Further, the grandmothers turned to their granddaughters for assistance with technology, for example, setting up a Skype call with a cousin in Pakistan, as Shehnaz described it, or looking up a recipe on YouTube, as Mahfuza mentioned in her interview. For some late-life immigrant grandmothers, a key turning point in their life came when their granddaughters were legally able to drive. As Shehnaz described it:

> My life changed! Before that if I needed to go out or buy something, I did not ask my son or daughter-in-law. They are very busy. But with my granddaughter it is different. She is my *bachchi* [beloved child]. Any time I can say to her, take me to masjid or take me to mall, and she is ready. I feel like a free bird now [laughs].

Clearly, for Shehnaz and some other grandmothers, it was easier to approach their grandchildren to offset their social isolation because of the strong bonds of affection and easy camaraderie between the two generations. Indeed, that Shehnaz felt as 'free as a bird' once her granddaughter received her driver's license, indicates the extent of her prior social isolation and perception of immobility. Thus, an important milestone in the life of the granddaughter (i.e., receiving her driver's permit) was equally important for the grandmother's sense of well-being.

While most grandmothers enjoyed a close and harmonious relationship with their granddaughters, there was some ambivalence about their relationship with the middle generation – their daughters and daughters-in-law. Fahmida mentioned how she did not approve of the fact that her son helped with cleaning-up after dinner: "*achcha nahin lagta hai, mardon ko kitchen mein dekh kar* [it does not feel right to see men in the kitchen]". She described how she would try to help him with the dishes after dinner, but her daughter-in-law did not approve of it. Although Fahmida stopped trying to intervene, she felt as if an important tradition was being broken. For Aiman, a first-generation immigrant grandmother, it was her perceived loss of role in the family that affected her. She described how she had always been the one making important decisions in her family, but now that she had moved in with her daughter, she had to "take a backseat and just watch". Shehnaz, who had immigrated later in life was more concerned about her spouse's sense of well-being given his new status as, what Shehnaz called it, "a guest" in her son's household.

> It's difficult. He [her spouse] always had a very tight routine [in India]. Breakfast at 7, lunch at 1, *chai* at 4, dinner at 7 [laughs]. But here [in the US] it is more easygoing. Like weekends they [her son's family] get up so late, and its ok. They only get one day to relax. But my husband he gets very impatient. So earlier he would start waking up the kids in the morning, but I told him don't do that otherwise they will get angry. Then other things like sometimes there is a party in the night, and I like all the noise, but my husband gets angry because he cannot sleep. So just little things like that. Nothing major [laughs].

It is evident from Shehnaz's words above that co-residence with her son's family required considerable everyday negotiations on her part. On the one hand, she was sympathetic to the younger generation's active and busy lifestyle and their desire to relax on their own terms, and on the other, she tried to reason with her spouse in order to avoid conflict in the family. That she laughed off the sheer emotional labor involved in this process of intricate everyday negotiations

as “nothing major” points to her internalization of the ‘counseling’ and ‘peacekeeping’ role that is often the purview of the woman in many families, regardless of ethnicity or nationality.

“If your parents are in front of your eyes in their old age, it is the biggest blessing of all”: The daughters and daughters-in-law on multigenerational living

Intricate everyday negotiations were also highlighted in the stories of the daughters and daughters-in-law in this study as they often found themselves struggling to manage the demands of a competitive workplace and the dual challenges of providing care to an older relative as well as raising children in a diasporic context. Several women in this sub-group expressed their gratitude to their older relatives for the support they provided at home with cooking, childcare, and other household chores. Zeenat, for example, mentioned that she “would not be where I am [professionally] today if *Amm*i [her mother-in-law, Shehla] had not supported me at every step [of the way]”. Saba was overcome with emotion as she described how her mother “just dropped everything in her life” and traveled across the continent to support her as she pursued higher education. Rehmat described how grateful she was to her mother for taking on her children’s socialization into Islamic beliefs and values: “It is technically my job as the mother, but I have no time. Ammi takes care of Quran teaching and also stories of our prophets. That is a huge favor to me”. Apart from the note of gratitude, Rehmat’s words underscore her guilt at not being able to participate in her children’s religious and spiritual education, again, highlighting the gendered nature of intergenerational transmission of cultural and religious values in South Asian Muslim families.

Nearly all women in this sub-sample mentioned that co-residence with their older relatives was inevitable and even religiously mandated. As Ayesha discussed:

> It is our religion. We have to respect and care for our parents. Everything we are today, right to the breath we take, they have made it possible. And when a home has *buzurg* people [respected elders] that home has a *raunaq* [radiates happiness]. *Uss ghar mein*

> *farishte aate hain aur Allah ki rehmat bikherte hain* [angels visit that home and spread blessings from Allah]. If your parents are in front of your eyes in their old age, it is the biggest blessing of all.

Evidently, for Ayesha and others like her, filial care work and responsibility was mandated by religion and indebtedness and was a non-negotiable aspect of their Muslim identity. It is hardly surprising, then, that several women in the middle-generation expressed a strong sense of guilt at not being able to give back to their older relatives due to the competing demands of work and raising children. Consider Imrana's words below:

> Some days I feel so guilty. Like my mother-in-law has arthritis and some days she is in a lot of pain, but she won't tell me. And I come home from job the food is cooked, everything is done. I get busy with kids' homework and all. Then when I go to her room to say goodnight, I see her rubbing some ointment or something on her knees. That's when I know that she was having pain all day. I feel so bad. Why did she not tell?

The feelings of guilt and frustration that Imrana describes were also evident in my conversation with other women in this sub-sample. Imrana's narrative paints a poignant picture of how older women may put their own health aside to provide care for their younger relatives. It also captures the ambivalence that some younger women may feel about their older relative's reticence on their health. Ayesha expands upon this emotion: "it makes me angry, frankly, when she [her mother] does not take care of her health. Of course, I love her and care about her, but if she falls sick, who will take care? I feel responsible for her, you know?"

Part of the frustration expressed by Ayesha stemmed from the fact that the women of the middle-generation, the daughters and daughters-in-law, often acted as a conduit between their older relatives and their healthcare providers, particularly those older women who had immigrated later in life. For example, Saba described how she had once taken her mother, who is diabetic, on a routine doctor's visit:

> So, we are in the doctor' office, ok, and my mother suddenly starts telling me in Urdu to tell the doctor that a few days ago her sugar levels had dropped and she almost fainted, and I'm looking at her and saying why did you not tell me? And the doctor is looking at both of us and thinking what's going on in this family! And I'm trying to smile at him to reassure him that all is ok while also shouting at my Mom in Urdu! Of course, I did translate all that she was telling me because her doctor has to know, right?

Here again, ambivalence and frustration about her mother's poor health behaviors is evident from Saba's description of what should have been a routine medical appointment. It also highlights the struggles of the middle-generation women who take on caregiving responsibilities of their older relatives, often having to perform intricate and sometimes potentially awkward, as in Saba's anecdote, everyday negotiations in public spaces.

For Hina, who had a medical degree from Pakistan but had to take up a job as a clinical research coordinator in the US due to the difficult re-credentialing process, it was the stress of acting as the 'informal family doctor' that often overwhelmed her. In her words:

> It's so draining. First, they [her parents] won't follow what I'm telling them like take a low-sodium diet or less fried foods, and then when they fall sick or their BP goes up, they start taking all kinds of *Unani* [Islamic complementary] medicines and all. They have no concerns about side-effects or medication interactions. Then when nothing works, and now they want me to treat them. They won't go to a doctor. And I am so tired of explaining that look I cannot prescribe medication. I am not even a doctor here!

For Hina, frustration at not being able to practice as a medical doctor despite her formal training and the inability of her older relatives to understand her situation was a source of constant stress. Her words also highlight how, for many late-life South Asian Muslim immigrants, distrust in the formal healthcare system may make them turn to traditional forms of Islamic medication with potentially harmful side-effects.

All of this frustration notwithstanding, nearly all women in this sub-sample confessed that although they were worried about their older relative's health and would like them to practice healthy behaviors, they unequivocally stated that if needed, they would quit their careers

to stay at home and provide care to their older relatives. As Saba clearly expressed, “there is no question about it. It is our parents, and this is our duty as Muslims”. Recall that many women in this sub-sample had previously stated that professional achievement and ambition was very important in their lives, yet the fact that they were willing to give it up to fulfil their caregiving responsibilities speaks to the strength of filial obligation inherent in diasporic South Asian Muslim families.

Concern about their older relative’s health was often accompanied by worrying about their own children’s socialization into traditional notions about gender roles and behaviors. As Safiya, a second-generation immigrant woman, described it: “see if my daughter is learning from her grandmother that women always run after their husbands like maids and they always have to sacrifice to keep everyone happy…my daughter has to learn that she is not the happiness custodian of the family, right?” Safiya’s words merit careful consideration as this may indicate that her own status as a second-generation immigrant had resulted in her becoming acculturated to a more egalitarian view on the division of labor in the household – physical as well as emotional. And yet, she contradicted herself when she went on to say that it was the mother’s duty to make sure that her daughters “turn out to be good persons, good Muslim women”. The contradiction and ambivalence is evident in these words – although Safiya felt strongly about the potentially negative influence her own mother’s supposedly subservient behavior may have on her daughter, she herself appears to have internalized the idea that the socialization of children, be it cultural or religious, is the sole responsibility of the mother.

Some of the other challenges of co-residence as described by the middle generation women in this study were related to privacy and space. Some women admitted to feeling as if their personal space was being invaded especially during the weekends when they wanted to

spend time with just their spouses and children. As Ayesha described it: “Sometimes when we are watching a movie and some awkward scene comes, like you know, a kiss or something, we are cool, but if the parents are there in the room, it’s very embarrassing”. Ayesha’s words convey her sense of discomfort about crossing traditional boundaries around modesty and decorum when her older relatives were around. Indeed, Ayesha went on to say that she was looking for a larger house that would accommodate her older relatives and at the same time give her a sense of privacy. To cite another example, Imrana was frustrated by her mother-in-law’s propensity to invite out-of-town guests such as members of the extended family, to visit them over the weekend without consulting her. For Saba, it was the fact that her mother was always on the home phone talking to a distant relative or friend because of which they often missed important calls such as from the children’s pediatrician. To solve this problem, Saba got her mother her own mobile phone. As she laughingly described: “She is happy. Problem solved. Now she can talk as much as she wants on her own mobile without keeping the home phone busy”.

For several women in the middle generation, although they accorded the highest respect to their older relatives and even called them “the head of the family”, this title was ceremonial or nominal for the most part. Some women admitted that they respected the wisdom and lived experiences of their mothers/mothers-in-law but did not really seek their counsel on important matters such as buying a new house or career moves. This, they attributed to a perceived generation gap between them and their older relatives given the vast differences in their life trajectories. Interestingly, this was refuted by the narratives of some granddaughters as discussed below.

“That’s my grandmother for you. Never one to back down”: Granddaughters on multigenerational living

Findings from my interviews with the granddaughters in this study reveal that they were the metaphoric 'glue' that held the three generations together. They shared a strong, affectual bond with their grandmothers, describing them variously as their "buddy", "best friend", "counselor", "teacher", and "partner-in-crime". Several granddaughters reported that they often sought the advice of their grandmothers on matters ranging from choice of color to wear at a social event to handling disagreements with friends. Afreen spoke fondly of her grandmother Shehnaz:

> Oh she is my buddy. She is so chill, but when you look at her you see this frail old lady in *salwar kameez* [outfit worn by Indian/Pakistani women]. But you can talk to her about literally any topic under the sun.

Similarly, Mahira mentioned how whenever she felt low, she would sleep in her grandmother Mahfuza's room as it gave her peace. Clearly, not only did Afreen and Mahira love and respect their grandmother, unlike their mothers, they also turned to their grandmothers for counsel on important matters. Afreen's grandmother, Shehnaz, was also her "partner-in-crime". Afreen recalled how she would enlist her grandmother's support every time she wanted her parents to agree to something, such as allowing a sleepover at a friend's house or attending a concert in the city.

Like the older generations, the granddaughters in this study were also involved in complex everyday negotiations, particularly when in the public sphere with their grandmothers. Consider the following anecdote from Mahira:

> So my grandmother has these weird quirks. Like even in the snow, she always refuses to wear a shoe. And why? Because she is not used to wearing shoes. So I remember this one time I took her grocery shopping, and there's my dear *Nani*, wearing socks and slippers in freezing cold, walking through the aisles of Costco. I swear I've never felt more embarrassed! I was trying to cover her as we walked. But she was unfazed. Doing her own merry thing [laughs].

Although Mahira sounded indulgent when she told me this story, the example above underscores the assimilation challenges faced by Mahira's late-life immigrant grandmother on the one hand,

and on the other, the potentially awkward social situation that her acculturated granddaughter experienced by her grandmother's purportedly deviant behavior.

And yet, there were examples of how some grandmothers did not allow their supposedly low levels of acculturation to prevent them from making connections with the outside world. One such story was shared by Afreen whose grandmother, Shehnaz, is a late-life immigrant:

> I remember we were driving to Florida one time and we stopped somewhere in Indiana. And I still recall my grandmother, *salwar kameez* and all, standing up to do *nemaz* [prayer] on the grass next to our car. And this family in the car next to ours couldn't stop staring. And I was thinking, what is she doing! They'll think we are freaks! Then I go to the restroom inside the building and when I come outside, what do I see? There she is having this cheerful conversation with the family that was staring at her before. Like, she can hardly speak English, but did that stop her? No. That's my grandmother for you. Never one to back down. Like even on Open Mosque Day when we have people from different faiths tour the mosque, she is always there, chatting with everyone. I think I get all my feistiness from her [laughs].

Here, Afreen's grandmother was a positive role model for her, teaching her how to overcome stigma and a potentially awkward social situation by being innovative and confident.

Not all granddaughters, however, had positive stories to share about co-residence, describing the multiple challenges of multigenerational living that sometimes resulted in conflict. Some of them reported having disagreements with their grandmothers over issues like having male friends visit their home or the grandmother's supposed "bias" in affection for their male grandchildren. This was more common in those families where the grandmothers had migrated later in life and were likely to be less acculturated than their first-generation immigrant counterparts. One such example provided by Nilofer highlights the delicate everyday negotiations that South Asian Muslim youth, and women in particular, may have to engage in as they navigate culturally opposite social spaces:

> So prom turned out to be this huge deal. My grandma was like really livid that I was thinking of attending. There was so much tension in the house, the arguments, and fights. But I was like, no way am I missing it. But then I respect where she [her grandmother] is

> coming from, right? So I did go to the prom, but with a bunch of girlfriends, and guess what, everyone was happy, including me [laughs].

Further, a few granddaughters complained about the sheer number of visitors and overnight guests, usually members of the extended family, who stopped by over the weekends to meet their grandparents. Zubeda described how she disliked giving up her bedroom to accommodate visitors, particularly if she had an important test coming up.

Another area of disagreement in the family, as pointed out by several granddaughters, was the patriarchal division of labor in the family. Sumbul mentioned how her grandfather, now deceased, appeared "clueless about how my *Nani* managed the house". He was busy pursuing professional aspirations, and Sumbul felt that her grandmother, Noor, disproportionately shared the burden of childcare and household responsibilities. Nilofer was frustrated by how her grandmother was always the last one in the family to eat. Similarly, Fiza did not like how her grandmother, Fahmida, served food to her son, Fiza's father, at dinner. As previously discussed, these sentiments mirrored the concerns of their mothers who had a more egalitarian point of view on the division of labor at home. But often when the granddaughters tried to speak up in support of their grandmothers, it was the grandmothers themselves who stopped them by saying that it was improper decorum on the part of the granddaughters if they argued with their older relatives. It appears, then, that the grandmothers in this study held steadfast to traditional beliefs around household division of labor and the granddaughters challenged the status quo and advocated for equality between genders, yet the granddaughters were also being socialized to traditional values around decorum and behavior.

Similarly, Nilofer mentioned how her parents had to share a home with their grandparents and uncle's family for several years when they first immigrated. She recalled how sometimes her grandmother appeared to favor her aunt over her mother and how that distressed Nilofer and

placed considerable strain on the grandmother-granddaughter relationship. As Nilofer described it: “I used to stay away from her [her grandmother], until, I think I was 15 or 16. She changed a lot by then and she was a lot nicer to my mom. I think that’s when we grew really close”. Nilofer went on to say that her mother was always deferential and respectful towards her grandmother despite the strained relationship, which, in turn, taught her to respect the elders in the family. Similar thoughts were expressed by Afreen who described how she never saw her mother, Imrana, argue with her mother-in-law, Shehnaz, Afreen’s grandmother, choosing instead to either keeping quiet or asking Afreen’s father to intervene and resolve the issue. Thus, for many granddaughters, the family was a site of primary socialization wherein traditional values around filial obligation and respect for elders were learned, enacted, and (re)negotiated.

The disagreements notwithstanding, most granddaughters in this study reported having close and intimate relationships with their grandmothers. They were aware of their grandmother’s social isolation, and often actively sought to engage them in different activities. Mahira, for example, made it a point to have her afternoon tea with her grandmother, Mahfuza, whenever she was at home from college. She also tried to keep in touch by calling her grandmother every other day when she was away. Afreen talked about how empty her house felt whenever her grandparents went away on a vacation to India, and how when they came back, she would try to keep them busy so that they did not “miss all the hustle and bustle of India”. A favorite activity for Sumbul was watching TV shows like *Wheel of Fortune* and *Food Network Star* with her grandmother, Noor. Mehr shared a love of shopping with her grandmother, Aiman, and fondly recalled going to early morning ‘Black Friday’ sales with her. Afreen talked about listening to Islamic podcasts with her grandmother, Shehnaz, often taking on the role of the translator. Several granddaughters also acted as translators for their grandmothers with limited

English language proficiency during the Friday *khutbahs* [sermons] at the mosque, which they lamented, were almost always in English. All of these examples highlight the ways in which routinized, everyday activities consolidated the grandparent-grandchild bond.

The granddaughters in this study also expressed concerns about the health of their older relatives – both their mothers and grandmothers. Sumbul recalled how, one year during *Ramadan,* her grandmother, Noor, had sprained her wrist and walked around with it for days without seeking medical help. This, despite multiple requests from the family to consult a healthcare professional. Mehr complained about how both her grandmother, Aiman, as well as her own mother, Razia, always put their health last:

> I cannot tell you it makes me so angry. What is it with the women in our culture? Like my *Nani* doesn't like to see the doctor. My mom never goes for her annual check-ups. They claim they are being selfless, but honestly, I think it's a little selfish. Like if you don't take care of yourself, how will you take care of others? Right? And who will take care of you when you are sick? The same people you so valiantly try to take care of! [laughs]. And even in Islam, you are responsible for your body, you are supposed to take care of it. So, I keep hounding them [her older relatives] to drink water, cut down on all that salt, more fruits, less meat, and all that. I've put reminders on their phones, I check their blood pressure and sugar levels. I'm quite annoying that way [laughs]. Like even during *Ramadan*, I tell them yes, it is spiritual, but also think of the many health benefits, like intermittent fasting is so popular these days, when you think that Muslims have been doing this for centuries during *Ramadan*. So it's a win-win.

Mehr's words demonstrate a generational shift in attitudes around self-care and healthy behaviors, which could be partly attributed to the third generation being more acculturated to an individualistic, 'Westernized' perspective about health and illness, and partly to a more progressive interpretation of Islamic beliefs. It also highlights how, despite their frustration at their mother/mother-in-law's supposedly careless approach to their health, the middle generation, i.e., the daughters and daughters-in-law, appeared to follow a similar pattern by putting their health last. And most importantly, it underscores the key role of the granddaughters as custodians of their family's health, encouraging them to follow healthy behaviors.

Living with an older grandparent also fostered empathy and a sense of volunteerism in some granddaughters. Mahira, for example, took up a volunteer position in a nearby nursing home. She shared her concerns about her own grandmother's declining health and how her role as a volunteer made her aware of multiple challenges to accessing culturally-congruent care in the formal healthcare system:

> It was an eye-opener, really. Like Alzheimer's runs in our family, and if God forbid, my *Nani* were to get dementia, I really don't think we as a system are ready for it. Like there is one Syrian Muslim lady with MCI [mild cognitive impairment] at this location. One day she was very distressed, and no one could figure out why. Then I saw that one of the care workers had brought her therapy dog to interact with the residents. I was like, oh, this poor lady, the Syrian woman, she is not used to dogs because in Islam dogs are not allowed in spaces where you pray. And this dog was walking over her prayer mat. So, I told them and there were like, wow! We never knew that.

Mahira's story reveals how her everyday interactions in the outside world made her more cognizant of some of the ways in which the current system of health and support services fails to recognize the unique needs of an increasingly diverse US population. Similarly, Fiza shared a story of how, on a doctor's visit, she saw her grandmother, Fahmida, struggling to explain her symptoms to her healthcare practitioner because of her limited ability to speak English. While Fiza took on the role of the translator, she confessed that she "felt burdened" and was not very comfortable that she was able to effectively translate and relay all of the information that her grandmother wanted her to. Relatedly, Mehr described how her grandmother, Aiman, avoided getting routine mammograms because, as Mehr described it, "she dreads the fact that a male technician will run the test". Mehr shared her fears about her grandmother's health and her supposedly "careless" approach to preventive care given the family's history of breast cancer. And while Mehr tried to educate her grandmother on the potential risks of not getting routine mammograms, she felt that too often, Aiman dismissed these concerns with a fatalistic approach,

that is, health and illness were ordained by the will of *Allah*. Thus, while the granddaughters in this study tried to address some of the barriers to accessing available services, they admitted to feeling concerned and ambivalent about future caregiving arrangements for their older relatives.

To sum up, co-residing in a multigenerational household was a source of joy as well as complex everyday negotiations for the women in this study. For the most part, while intergenerational relationships were reciprocal and marked by strong ties of affection and duty, there was a certain ambivalence in the construction, performance, and maintenance of intergenerational ties. For the grandmothers, providing instrumental and affective support gave them a sense of purpose, yet for some it was accompanied by a sense of loss of status in the family; for the daughters and daughters-in-law, filial obligation was religiously and culturally-mandated, yet it was being re-negotiated in a transnational sense; for the granddaughters, living with their older relatives brought a sense of security even as they navigated complex everyday situations that accompanied the sharing of space. And for all three generations in this study, these intricate negotiations occurred within their social location as Muslim women. Thus, the findings presented in this chapter capture the sense of familial duty, the dilemmas of everyday life, challenges to identity construction and meaning-making in a diasporic context, and the ways in which their *deen* or faith shaped the lives of the 30 women who shared their stories with me. In the chapter that follows, I interrogate these findings and situate them in the broader literature on intergenerational support exchanges and diasporic South Asian Muslim families.

Chapter V: Discussion and Conclusions

In employing an intersectional lifecourse perspective, I have sought to explore the dynamics of multigenerational living and intergenerational support exchanges in immigrant South Asian Muslim families living in the US. This chapter summarizes the key findings from narrative interviews with three generations of South Asian Muslim women (n=30) who live in a multigenerational household and situates these findings within the extant literature. I argue that for the women in this study, their Islamic faith imparted a sense of continuity, and was an agentic means to preserve and sustain personal and collective identity resulting in the creation of a multi-layered 'transnational Muslim identity'. Further, given this, familial bonds and the enactment of religious beliefs and practices such as those around filial expectations were being re-negotiated in a transnational Islamic context and categories of gender, age, time of and time since immigration, and degree of religiosity shaped attitudes, behaviors, and meaning-making processes related to kin-work and exchanges of support between generations in powerful ways. I then discuss the dual and competing themes of invisibility and hyper-visibility that emerged from my interviews with the South Asian Muslim women who participated in this study. I conclude with a discussion on the implications of these findings for policy and practice, the limitations of this study, and possible directions for future research.

A transnational Muslim identity

The findings from the interviews suggest that for the women who participated in this study, their Islamic faith was central to their identity. Across the three generations, faith and spirituality formed the locus around which their lives were centered – it dictated the clothes they wore, the foods they ate, how and when they prayed, how they celebrated holidays, and how they

interacted with others, both in the private sphere of the family, as well as in public spaces, a finding that is well-supported in the literature (see, for example, Haddad et al., 2006; Roald, 2003; Mohammad-Arif, 2000). In the diasporic context, their Islamic faith imparted a sense of continuity, resilience, and a means to preserve and sustain personal and collective identity. While some of the women who arrived in the 1970s and 1980s may not have had the time to devote to religious activities during the initial years of settlement, they nevertheless practiced some aspects of Islamic living such as fasting during *Ramadan* and respecting prohibitions on food, as also noted by Mohammad-Arif (2000) in her study on South Asian Muslims in New York. The *Dars* or weekly Quranic study group, in particular, provided a social space wherein stories of faith and family were shared as were aspects of their South Asian culture such as food and clothing. This finding is supported by Khan (2015) who, in her study on a woman's *Dars* group in Philadelphia, found that a deeper understanding of folklore practices such as the *Dars* is essential to challenging stereotypical assumptions around Muslim women as being passive and submissive. Indeed, like the women in Khan's study, for the women I interviewed, participation in the *Dars* was an agentic expression of their identity as South Asian Muslim women making sense of their lives in a diasporic context.

Further, several women who had immigrated in the late 1970s and 1980s stated that they turned to religion when their children entered their teenage years, a finding supported by Fenton (1988) in his study on Indo-American families in Atlanta, Georgia. For the women in this study their Islamic faith also acted as a coping mechanism during emergent and contingent circumstances such as a loved one's illness or a seminal lifecourse event such as going away to college. Several women in this study who were raised in India stated that they were not observant Muslims back in their country of origin, and post-migration, they were grateful for the

easy access to sources of Islamic knowledge that allowed them to understand their religion better. For the grandmothers in this study, their Islamic faith was important for their health in late life, particularly as it related to prayer and religious behavior, a finding supported by McFadden et al. (2008) in their study on the role of religion and spirituality as a source of coping with the challenges of aging. And while the granddaughters in this study who were born and raised in the US had adjusted fairly well into the milieu of American life, they retained and enthusiastically embraced aspects of their Muslim identity such as wearing the Islamic veil or the *hijab* in public spaces as an expression of agency (see also Litchmore and Safdar, 2016; Chapman, 2015).

Yet, the women in this study were also actively (re)interpreting Islamic tradition and scriptures to impart meaning into their lives. For the middle-generation (the daughters and daughters-in-law) as well as the granddaughters, the family functioned as a site of pursuing a more progressive and egalitarian view of Islam, one that privileged men and women equally, and was used to justify the blurring of gendered boundaries around kin-work and household division of labor. Part of this shift in thinking could be attributed to greater exposure to a more Westernized and liberal attitude towards social issues. Indeed, Roald (2001) in her research on immigrant Muslim women in Europe found that like ethnic identity, religion was not static either, and in the cultural encounters between 'Islam' and the 'West', their Muslim identity allowed women the flexibility to develop interpretations in the new cultural and diasporic context. I take Roald's assessment a step further by arguing that this process of re-interpretation is more complex and nuanced and goes beyond the binaries of Western and Islamic thinking. If acculturation to Western thought was the sole factor driving this shift towards a more progressive view on Islam, the first-generation immigrant grandmothers in this study—those who arrived thirty, forty, even fifty years ago—would have wholeheartedly championed the 'progressive

turn' in Islamic thought. But what emerged from my interviews with them was a tacit resistance to challenging the status-quo, particularly in the realms of household responsibilities and kin-work. It appears, then, that along with acculturative processes, early-life socialization, lifecourse events, cohort effects, and internalized traditional thinking around gender roles and behaviors are equally salient in shaping these attitudes.

Unpacking this thought, recall that a key distinction between those women who had immigrated in the late 1970s and 1980s and those who had immigrated later, in the early 2000s, was that the decision to work outside the home was guided by professional aspirations in the latter group. This could be attributed to, what Elder and Johnson (2001) refer to as a cohort effect, wherein young middle-class women who grew up in South Asia during the 1980s and 1990s were actively encouraged to pursue higher education, personal ambition, and professional growth. For the previous generation, however, South Asian women who were raised in the 1960s and the 1970s, there was a stigma attached to women who worked outside the home, an internalized value that was transferred to the diasporic context. Thus, for the previous generation, the grandmothers in this study, working outside the home in the US was not driven by personal ambition but rather, economic necessity, a finding supported by Rane et al. (2015) in their study on multigenerational Muslim communities in Queensland, Australia. It appears, then, that for the women in this study, these attitudes were shaped, not so much by Islamic values as they were by their early socialization in the country of origin. Given this, for the daughters and daughters-in-law who had immigrated in the late 1990s and early 2000s, re-interpretation of Islamic thought and beliefs and the move towards a more 'progressive' or egalitarian view of Islam was a creative way to foreground and even rationalize their current attitudes and behaviors. For example, as previously discussed, instead of turning to 'Westernized', supposedly more liberal

views on gender roles in the family, some first-generation immigrant daughters and daughters-in-law quoted from the *ahadith* [stories from the Prophet Muhammad's life] to support their push for a more equitable division of labor at home to enable them to effectively juggle between the demands of a competitive workplace and household responsibilities. And some of this shift in gender roles is reflected in the stories of the daughters and daughters-in-law who reported that their spouses were a source of great support in exigent circumstances such as pregnancy and childbirth, actively helping out with household chores and childcare duties.

Consider another example. As discussed earlier, several women who had immigrated in the 1990s and 2000s stated that they were not very religious growing up in their countries of origin and immigrating to the US had changed that. Yet, when I asked them if they would have co-resided and provided care to their older relatives had they not migrated and still lived in South Asia, all women in this group unequivocally stated that they would have, here, interestingly, citing cultural norms and traditions, as opposed to Islamic beliefs and values. Past research has pointed to the degree of religiosity and early religious socialization (Silverstein et al., 2019) as strong predictors of caring for a parent in their old age. The findings from this study, however, indicate that in attempting to understand the nature of filial obligation in South Asian Muslim families, there is a need to account for the collectivistic orientation of South Asian culture and society that privileges collective goals and family values over individual autonomy; in other words, the family is a part of the understanding of the individual, and adult children may make choices influenced by parents and siblings as opposed to rational calculation. Thus, there is a need to distinguish between religion and tradition given that not only religious values, but also internalized traditional norms from the country of origin are, arguably, equally salient in shaping caregiving behaviors. And often, the aforementioned turn to a more progressive interpretation of

Islam is deployed to challenge the perceived dogmatism of those same cultural and traditional beliefs – for example, several women who co-resided with their older parents and not their in-laws, a supposed breach in the more normative patrilineal family arrangement of South Asia, turned to Islamic scriptures to validate their decision to break from tradition. A frequently-cited example was from the life of the Prophet Muhammad, who had no male offspring and his lineage was carried on by his daughters resulting in a kinship system in which ancestral descent was traced through maternal lines.

That stated, one might be tempted to question why did the second and third-generation women in this study, the granddaughters and some daughters/daughters-in-law who were born in the US, actively seek to re-interpret Islamic beliefs and values? Surely, this points to them being more acculturated to Western liberal thought? The answer to this question is complex and requires an understanding of, what Elder and Johnson (2001) refer to as 'historical time'. Over the past three decades or so, there has been a historic growth in Islamic religiosity across the globe, encouraging Muslims, particularly youth, to become more observant (Mohammad-Arif, 2000). A parallel structural development has been the porosity and permeability of borders such that thoughts and ideas flow freely from one part of the world to another via traditional sources such as television, and also, more increasingly, social media and social networking sites. Indeed, as Torres (2006) contends, the worldwide dispersion of mass media has created global transformations and, "the transnational actors, communities, social spaces and structures that these transformations imply, have brought about a variety of worldwide exchanges that have made the transcendence of traditional boundaries possible (p. 231)". This transcendence of boundaries is reflected in the global appeal of Islamic scholars in Saudi Arabia and around the world, Hamza Yusuf, Noman Ali Khan, Zakir Naik, and Omar Suleiman to name a few, who

have advocated for a more egalitarian and progressive view of Islam over the past several decades – a worldview that encourages social justice issues, equality between genders, interfaith dialogue, and outreach. Thus, the rights accorded to women in historic Islamic law, the *Shariah*, such as those around inheritance, divorce, mate selection, widow re-marriage, and so on, rights that were often obscured over time by the cultural beliefs of the patriarchal societies that adopted Islam (India, Pakistan, and Bangladesh, to cite a few examples) have begun to re-emerge in the popular discourse. This perspective has found tremendous support among the younger generation across the globe who are actively seeking out reliable sources of Islamic knowledge, thereby resulting in the creation of what Bowen (2006) refers to as 'transnational Islam'. As Bowen maintains:

> This sense of Islam's transnational character is diffuse but powerful, and it derives its power from the ways in which rituals reproduce, and histories remind Muslims of, the shared duties and practices of Muslims across political boundaries (p. 882).

It could then be argued that for the second and third-generation women in this study, their re-interpretation of Islamic values was a product of their North American upbringing as well as the aforementioned global trend towards a more interpretive understanding of Islamic scriptures. Indeed, most women in this research, as was also reported in a recent Pew (2017) study, identified with a global Muslim *Ummah* [community of Muslims], constructed via communal prayers, everyday practices around praying and fasting, the standardization of the Quran, Arabic as the mandatory language for praying, and a common code of conduct and behavior. Several women also reported on how they were struck by the social justice aspect of Islam when they performed the *Hajj* pilgrimage, describing a virtual sea of humanity, with millions praying together regardless of the color of their skin, class, gender, age, or ability.

For the women in this research, then, all of these factors coalesced to create an overarching transnational Muslim identity that connected the local to the global and was mediated by, in the words of Mand (2006), gender, generation, and geography – an 'umbrella' identity that encompassed the lived experiences and everyday negotiations of the participants in my study as Muslim women, immigrants, persons of color, grandmothers, daughters, granddaughters, spouses, and mothers. And as the accounts of the three generations of South Asian women indicate, this transnational Muslim identity was constructed and sustained through a dynamic interplay of everyday religious and cultural practices – for example, emphasis was placed on the consumption of *halal* food, but the cuisine could be North American or South Asian; participation in social activities like high school prom was important, yet performed within the boundaries of Islamic rules around interaction between genders; the *hijab* was worn as an expression of their Muslim identity, but the choice of clothing could be Western or South Asian; the five daily prayers (*salaat*) were mandatory, but could be adjusted according to work schedules.

From a structural perspective, discrimination and Islamophobia presented a threat to their transnational Muslim identity, especially as reported by the granddaughters in this study. This threat could be personally experienced (e.g., a hate crime that was directed at them or a loved one) or in solidarity with the global *Ummah.* Conversely, some granddaughters also reported feeling burdened by the constant need to act as "ambassadors" of Islam in public spaces, for example, having to act as advocates for the actions of others in their *Ummah*, a finding that contradicts van Es's (2019) research on Dutch Muslim women who often embraced the ambassador role as they actively sought to dispel myths around Islam. For some women who grew up in India during the rise of Hindu nationalism and communal riots in the 1990s, it was

the burden of being labelled as being representative of a more radical and extremist form of Islam, a label they took great pains to avoid. For these women, the fact that they were also a minority in the US, resulted in the creation of, what Mohammad-Arif (2000) refers to as a marginalized "double minority" status and they actively chose to settle down in heavily Muslim-populated communities that acted as a protective factor. Indeed, the mosque community was a safe haven and social space for all three generations of Muslim women in this study that offered not only religious and spiritual, but also social, cultural, and sometimes economic support (for example, with the loss of a job). For the late-life immigrant grandmothers, in particular, several challenges of migration and settlement such as culture shock and language barriers to name just a few, were offset first, by their sharing of space with adult children and grandchildren, and second, by the religious and cultural enclave in which they lived.

The re-negotiation of filial obligation in a transnational Islamic context

The second key theme that emerged from my interviews with the South Asian Muslim women in this study—the grandmothers, daughters/daughters-in-law, and granddaughters—was that the flow of intergenerational support was reciprocal and multi-directional, a theme that finds support in the literature on the dynamics of multigenerational living in the diasporic context (Dossa and Coe, 2017; Brown, 2013; Lamb, 2009; Leung and McDonald, 2009; Cliggett, 2005; Ikels, 2004). An important contribution of this study, however, is that it fills a small gap in a wider chasm in the extant literature on immigrant South Asian Muslim families – a rapidly increasing population sub-group. The findings from this study provide a nuanced look into immigrant family life and the ways in which the ruptures, continuities, struggles, and expressions of agency resonate with the experiences of other immigrant women. The grandmothers in this study provided, what

Franks and colleagues (1993) refer to as "a thread of intergenerational continuity … a sense of self, family history, tradition, and roots" (p. 265).

Past research (Dasgupta, 2007; Spitzer et al., 2003) has suggested that within immigrant families, women typically shoulder the responsibility of inculcating and fostering traditional values in their children. The findings from this study indicate that given the active participation of mothers in the paid workforce, it was the grandmothers who took on the responsibility of cultural transmission; thus, they were the custodians of culture, bringing ancestral history to life through stories whispered at bedtime, family albums depicting a bygone era, recipes passed down through generations, and heirlooms gifted to commemorate important milestones such as a wedding. They also provided instrumental and affective support to their grandchildren, helping with household chores as well as acting as counselors and religious teachers to them. Indeed, several granddaughters in this study felt confident in their grandmothers' ability to give advice, a finding supported by Seponski and Lewis (2009) in their research on the grandmother-granddaughter relationship. Their important contributions notwithstanding, the older women in the family were hardly regarded as authority figures, a finding supported by Koehn (2009) and Treas (2008), resulting in a sense of loss of status and position in the family.

The granddaughters in this study played an equally important role as recipients as well as providers of support. They assisted in the acculturation of their grandmothers, as also noted by Cila and Lalonde (2015) and Kalavar and Van Willigen (2005) by acting as 'language brokers' and helping them practice their English-speaking skills, especially for seminal lifecourse events such as citizenship interviews. They also provided companionship to their older relatives, offsetting some of their social isolation. They advocated for the female relatives in the family, particularly in matters pertaining to health and the household division of labour. Further, their

experiences in the public space, such as volunteering at nursing homes, provided them with a nuanced understanding of the salient cultural, religious, economic, and social barriers to healthy aging in South Asian Muslim families. For example, some granddaughters were concerned about their family's history of dementia and anxious about their older relatives receiving culturally-congruent care in the formal healthcare system should the need arise. They also identified language barriers and their female relatives' fatalistic approach towards health and illness as key impediments to accessing available health and social support services. Thus, while they considered the multigenerational living arrangement as normative and appreciated the fact that their mothers would take care of their grandparent(s) as their health deteriorated and they became more dependent, the granddaughters shared concerns about what that carework would look like given the limited availability of formal health and social support services. This underscores Funk and Kobayashi's (2009) argument that filial carework needs to be understood contextually as involving family and relationship dynamics, as well as broader, macro-level factors at the social, political, economic, and cultural levels.

For the daughters and daughters-in-law or the "sandwich generation" in this study, co-residence with their older relatives was a source of great joy and was also seen as integral to everyday family support negotiations. For this group of women, the traditional value of filial obligation was being actively re-negotiated in a diasporic context. They were grateful for the instrumental and affective support provided by their older relatives, allowing them to freely pursue their professional aspirations. Yet, they experienced some ambivalence especially around feelings of guilt at not doing nearly enough to support their older relatives, emotionally and physically. This ambivalence was compounded by the burden of raising children, managing the demands of a competitive workplace, and simultaneously attending to the physical and emotional

needs of their older relatives, such as taking them to medical appointments. Past research has suggested that adult children who simultaneously provide support to dependent children and aging parents, the provision of care can be viewed as both a joy and a burden (Igarashi et al., 2013). Several women in this sub-group shared their concerns about the health of their older relatives, and were uncertain about future caregiving arrangements, although most stated that they would stay at home to care for their aging relative should the need arise, despite the adverse effects they knew their decision would potentially have on their professional life. This points to the strong sense of filial duty to care for the physical and emotional well-being of their older relatives among the middle generation of daughters and daughters-in-law. Salaff and Greve (2004) have also noted in their study on Chinese immigrant mothers in the US, that on occasions when the health care needs of their relatives required attention, it was usually the women who took time-off from work, often compromising and sacrificing their own career trajectories to fulfill the demands of care provision at home.

A key sub-theme that emerged from the interviews with three generations of women in this study was that the grandmother-granddaughter relationship was more spontaneous and intimate, as was evident in the accounts of some granddaughters who mentioned that they were more comfortable sharing certain aspects of their lives with their grandmothers instead of their own mothers. In the literature, Underwood and Dorfman (2006) have also pointed out the keen sense of understanding and empathy that elders in the family may have of and towards other generations, including a propensity to provide positive reinforcement and enhancing their grandchildren's sense of self-worth and self-esteem. Yet, in South Asian Muslim families, conflicts may arise, especially between late-life immigrant grandmothers and their US-born granddaughters. over matters of modesty in clothing and interactions with male friends, for

example. That stated, the grandmother-granddaughter relationship was, for the most part, defined by strong bonds of love and affection. This was reflected in the easy flow of support exchanges between the two generations.

The relationship between the grandmother and daughter/daughter-in-law, however, appeared less spontaneous, especially on the part of the middle generation. Past research (Koehn, 2009) has pointed to conflict in the mother-in-law/daughter-in-law relationship in immigrant South Asian families, yet in my interviews, no such distinction emerged as both daughters as well as daughters-in-law expressed similar feelings of gratitude and guilt towards their older relatives. The sharing of space was a key source of discomfort, as was their older relative's supposedly careless health behaviours. For the older generation, it was their perceived loss of status in the family, especially when it came to decision-making, as was also pointed out in Blair's (2012) study on late-life immigrants in California and Weerasinghe and Numer's (2010) research on widowed South Asian women in Canada. The conflict notwithstanding, the daughters and daughters-in-law in this study valued the presence of their older relatives in the household and were grateful for their support.

Overall, the findings from this study point to a re-negotiation of the value of filial obligation, wherein care and support for a parent or grandparent was understood and enacted within the framework of a transnational Muslim identity, while simultaneously, for the older relatives, it was re-interpreted within shifting local and global realities, such as the increasing participation of the middle generation, the daughters and daughters-in-law, in the paid workforce. Thus, the nature of care and support across generations was multi-directional and reciprocal.

Competing narratives of invisibility and hyper-visibility

A third key finding that emerged from the stories of my participants was the dual and competing themes of invisibility and hyper-visibility. For example, at the micro-level, the affectual and instrumental support provided by the grandmothers in this study was appreciated by their younger relatives; yet, much of the emotional labour they performed, for example, engaging in intricate everyday negotiations with their spouses on the one hand and their adult children and grandchildren on the other to avoid familial conflict, appeared to go unnoticed and was, for the most part, 'behind the scenes' and invisible. This finding echoes the results from Aggarwal and Das Gupta's (2012) research on the invisibility of the unpaid work of Punjabi Sikh grandmothers in their Canadian study on immigrant families in Toronto. From a structural perspective, the unpaid work of grandmothers, particularly those who immigrated later in life and have, therefore, not contributed to the formal economy, remains largely invisible in the limited availability of social support provisions such as access to Social Security benefits (Kim and Subramanium, 2019). And, more recently, the unpaid contribution of immigrant grandmothers as caregivers of their grandchildren and their help and support with household chores which enable their adult children (usually daughters and daughters-in-law) to contribute to the formal economy, has been rendered invisible by the limits to family re-unification policies and the 'public charge' rules (wherein the use of public benefits such as Medicaid and the Supplemental Nutrition Assistance Program (SNAP) may disqualify an immigrant from obtaining permanent residency) under the Trump administration (ACLU, 2020). The implications of this invisibility, both at the interpersonal and macro-level, may culminate in family conflict, caregiver burden, and deleterious health outcomes in aging South Asian Muslim families.

Building upon the theme of invisibility, that there were limited formalized health and social care services tailored to suit the unique needs of aging South Asian Muslim families in this

study has been previously pointed out and discussed; here I link this finding to the broader literature on ethnic minority communities which addresses the intersecting invisibility of racialized immigrants in US health and social policies. Indeed, in the US, comparative health assessments of immigrants and their native-born counterparts are limited, and systematic monitoring of health, mortality, and morbidity patterns among immigrant populations of various ethnic and national origins remains uncommon, rendering them by and large invisible (Singh et al., 2013). The scant data that is available suggests that although immigrants have higher life expectancy, better overall health, and lower mortality rates, they tend to fare substantially worse than the US-born with regard to accessing health insurance coverage and preventive services (ibid). For the women in this study, their gender, immigrant status, Muslim faith, degree of acculturation, linguistic proficiency, and early-life socialization intersected to produce conditions of inequality, and yet there is limited research that acknowledges and addresses this invisibility (with the exception of Aasim Padela's work on barriers to accessing health and social support services among Muslim women; see, for example, Padela et al., 2018; 2017; 2016; Padela and Qureshi, 2017).

The narratives of the women in this study also suggest that even within this small group of 30 South Asian Muslim women, there was considerable heterogeneity, not only in their individual lived experiences, but also with regard to country of origin, generational status, time of and time since immigration, and degree of acculturation. Further, as the opening chapters of this dissertation outlined and as Chowdhury and Okazaki (2020) also point out, South Asian Muslims originate from a region that is ethnically, linguistically, culturally, and religiously diverse – a fact that is also reflected in the diasporic composition in the United States. And yet, the extant literature tends to confer an overarching, monolithic Arab identity to the Muslim

population with little regard for diverse lived experiences and the heterogeneity inherent within this group (Haddad and Smith, 2002). The unique lived experiences of South Asian Muslim families are often invisible and lumped together with the broad, Arab-centric Muslim population, thus failing to capture the unique transnational lives of South Asian Muslim families and the "blend of Hindu cultural artifacts, Islamic knowledge, and British etiquette with American tastes" (McCloud, 2006, p. 57) that uniquely characterize this immigrant group.

The invisibility notwithstanding, paradoxically, the theme of hyper-visibility was equally salient in the narratives of the women in my study. At the micro-level, the Islamic headdress or the *hijab* was a salient marker of Muslim identity in public spaces, with several women reporting that they were keenly aware of the 'othering gaze' when they stepped beyond the boundaries of the religious and cultural enclaves in which they lived. This hyper-visibility often served to re-enforce negative stereotypes of observant Muslim women as being passive and submissive – a notion that the women in my study, particularly the granddaughters, actively sought to dispel. At the structural level, racism and media-perpetuated Islamophobic discourse sometimes culminated in hate crimes and workplace discrimination against those women who wore the *hijab*. And yet, this hyper-visibility also acted as an expression of agency, especially for several granddaughters in this study who embraced their Muslim identity in public spaces and challenged stereotypical assumptions around women in Islam, a finding supported by Litchmore and Safdar (2016).

This dual theme of invisibility and hyper-visibility has also been pointed out by Arat-Koc (2012) in her Canadian study wherein she argues that while Canadian policy is increasingly accommodating the needs of white and Canadian-born women in general, for racialized and immigrant women, the discourse is largely selective and reduced to policy discussions around culture and multiculturalism. As she maintains:

> The direction of policy debates and policy making has moved simultaneously and increasingly to invisibilizing and/or individualizing issues for white and Canadian-born women and culturalizing issues facing immigrant and racialized women. It seems that policy discourse and policy making under neoliberalism treat gender inequality as a problem solved for white Canadian women, and an ongoing, cultural (baggage) problem for immigrant and racialized/culturalized women.

Thus, racialized and immigrant women are often invisible in policy, yet hyper-visible in aspects related to their culture – in this research, for example, it was wearing the *hijab* or conforming to culturally-mandated norms around the care and support of older relatives within the context of connected systems and structures of power.

The preceding discussion sought to capture the complexities and social dilemmas inherent in the dual themes of invisibility and hyper-visibility that shaped the lived experiences of the women in my study. In what follows, I present the contributions of this study, the implications of these findings, and limitations of my research. I conclude with recommendations and directions for future research.

Contributions

This study fills a gap in the existing state of knowledge on South Asian Muslim families in the US. Despite their growing numbers, little research exists on how observant South Asian Muslim women live their everyday lives. Using historical and contemporary evidence, this study captures the diversity and complexity, and the ruptures, continuities, and vicissitudes of their lives, making the case that South Asian Muslim women in the US are a dynamic and diverse group that is challenging stereotypical assumptions around Islam. Based on in-depth, narrative interviews with South Asian Muslim women across three generations (n=30), this study explored the nuances of multigenerational living and interpersonal relationships and how women in the family negotiate their everyday lives at the intersections of faith, culture, gender, age, and immigrant status. It highlights the important contributions of each generation of women in the family as

they actively maintain as well as re-interpret their Islamic faith and traditional beliefs and values. In particular, it highlights how traditional values around filial obligation and the intergenerational contract are being re-negotiated in the diasporic context, resulting in a more reciprocal system of support exchanges between generations.

This study also utilized an intersectional lifecourse perspective, an emergent theoretical approach, to explore the dynamics of multigenerational living and support exchanges, exercise of personal agency and structural constraints, life histories, processes of meaning-making, and the ways in which salient aspects of identity as they relate to gender, age, time of arrival, duration of immigration, education, socio-economic status, and their Muslim faith informed the everyday lived experiences of the women in my study. It allowed me to make connections between structure and agency in exploring intergenerational relationships in South Asian Muslim families as Worth and Harding (2015) have also discussed vis-à-vis intergenerationality – in spatial contexts of home (e.g., sharing a living space); neighborhood (e.g., in the mosque community); and policy and practice (e.g., in the barriers to accessing available health and social care services). To my knowledge, an intersectional lifecourse perspective has not yet been applied in research on immigrant Muslim families.

Further, this study makes a methodological contribution by inviting three generations of South Asian Muslim women, the grandmothers, the daughters/daughters-in-law, and the granddaughters, to share the stories of their lives through narrative interviews. Such an approach allowed participants to reconstruct socio-historical events, yielded thick, rich descriptive data, and was immensely helpful in comparing and contrasting narratives across generations, adding to the rigour of my findings. To my knowledge, the extant ethno-gerontological literature has not

examined the grandparent-daughter/daughter-in-law-granddaughter triad in South Asian immigrant families.

Limitations and future research directions

In interpreting the findings from this study, the following limitations must be taken into consideration. First, this research was limited to a purposive sample of 30 South Asian Muslim women who currently co-resided or had co-resided in a multigenerational household in the past. The participants in this study were not randomly recruited, and, therefore, are not representative of the South Asian Muslim population in the US. However, as Lincoln and Guba (1985) pointed out several decades ago, this 'trade-off' affords the researcher the advantages of acquiring deep and detailed understandings of social processes (Cuadrez and Uttal, 1999). The in-depth, narrative interviews I conducted with my participants, therefore, offered deep insights into the lived experiences of three generations of South Asian Muslim women.

Second, I recognize that the findings from this study are limited to the experiences of observant Muslim women who actively incorporate their Islamic faith into their everyday lives. Thus, the stories presented do not include the everyday lived experiences of South Asian Muslim women who may not necessarily be observant Muslims. That stated, questions around faith and religion in the context of Islam are not necessarily mutually exclusive. As stated elsewhere in this dissertation, *Shahada*, the very first pillar of Islam, entails an allegiance to the one God, Allah, and the acknowledgement that the Prophet Muhammad is Allah's Messenger. Thus, whether a Muslim is attentive to everyday religious rituals such as the five daily prayers may not necessarily indicate that they do not have faith in the Islamic context. The other distinction is around culture and religion. This is a more nuanced and complex discussion, which is beyond the scope of this research; briefly, however, given that there is a vast range of Islamic traditions,

schools of thought (e.g., Wahhabism and the Salafi movement, Sufism, etc.) and because understandings of Islam are informed by a diversity of interpretations (Mohammad-Arif, 2002), it is difficult to establish a well-delineated relationship between the cultural and the religious. Thus, for the women in my study, although they traced their ancestral origins to South Asia geographically, it is fair to say that their Islamic worldview was informed by local, global, and transnational experiences.

Third, given time constraints and the COVID-19 pandemic, this study was limited to a group of South Asian Muslim women who were mostly college-educated, relatively fluent in the English language, and were financially secure – an unintended embodiment of the model minority stereotype wherein South Asians, like other Asian Americans, are considered 'successful' given their high levels of education and economic attainment (Lee and Zhou, 2015). While future research should also explore the lived experiences of South Asian Muslim women along class lines, particularly those who are engaged in precarious employment and who also co-reside with their older relatives like the women in Spitzer et al.'s (2003) Canadian study on racialized immigrant women, the current study highlights how, in a post-9/11 world, the everyday lived experiences of South Asian Muslim women, regardless of social class, may be shaped by their Muslim identity in powerful ways, thereby disrupting the model-minority myth in this sub-group.

Fourth, this research is limited to South Asian Muslim women, and does not incorporate the experiences of men. Past research suggests that "men are vital to caregiving networks more often than is reflected in the literature or acknowledged by experts" (Thompson, 2002, p. 24), and attempts have been made to address this gap in the literature by examining the work that men do as caregiving sons (Campbell and Martin- Matthews, 2000), fathers (Essex et al., 2002),

and husbands (Ciambrone and Allen, 2002). The perspectives presented in this study, however, are only those of the women in the family, and we do not know if and how South Asian Muslim men are re-interpreting and re-negotiating faith and tradition-based values in the same manner as their female relatives. Despite some evidence that pointed to a more egalitarian division of labour within the household, further research is needed to interrogate this emergent finding. Relatedly, future research should also explore the grandson-grandmother dyad, given recent research on Asian cultures which suggests a strong preference for sons and grandsons in immigrant families (Duan et al., 2020; Carol and Hank, 2020; Howell et al., 2018).

Fifth, if time had permitted, it would have been interesting to hear the narratives of first-generation immigrant South Asian Muslim women whose older relatives such as parents and grandparents continue to live in their countries of origin and the ways in which these women negotiate caregiving across borders. Future research could look at the transnational caregiving experiences of these women and compare them with the findings from this study to explore similarities and differences.

Finally, emergent research suggests that although traditionally taboo and stigmatized topics such as the mental health concerns of American Muslims are gradually being addressed, little research exists on spousal and child abuse and homosexuality in South Asian Muslim families (a notable exception is Ahmad Afzal's (2014) work on the narratives of gay Pakistani men in Houston, Texas). My research provided an in-depth look at the everyday lived experiences of three generations of South Asian Muslim women and future research, as Haddad et al. (2006) also recommend, should explore some of these more sensitive, yet critical issues to better address the unique needs of these families and contribute to their overall well-being.

Implications for policy and practice

The population of South Asian Muslims is growing exponentially. This demographic trend added to a rapidly-aging population poses complex challenges in the formulation and implementation of health and social care policies to suit the diverse and unique needs of South Asian Muslim families. This study used an intersectional lifecourse approach to fill a gap in the literature on aging South Asian Muslim families. The findings from this study suggest that in order to address the unique needs of this population, and the nuances, contradictions, and ambivalences inherent in intergenerational ties, it is important to conceptualize culture-specific values around filial obligation as the subjective meanings attached to the idea of duty towards one's parents/ older relatives, and to explore the myriad ways in which the experience of duty and perceptions around Islamic faith may be re-aligned according to shifting contemporary realities and social circumstances among immigrant South Asian Muslim women and their older female relatives. As Lan (2002) maintains, ethnic culture (and the value-system) is not a static heritage; rather, it is fluid and dynamic and is constantly modified in response to changing institutional contexts. The same observation can be applied to faith and spirituality, as the findings from this study suggest.

Further, the findings from this study indicate that perceptions around health and illness may vary by generational status in South Asian Muslim families. For example, the grandmothers–both first-generation, as well as those who immigrated later in life–had a fatalistic approach towards illness, which adversely affected their health-seeking behaviors. The granddaughters, on the other hand, were more proactive, and as described previously, expressed frustration with the perceived ambivalence of their grandmothers with regard to their own health. Yet, as Padela and Curlin (2013) have also pointed out, in order to fully understand the

relationship between religion and health, we must also take into account structural barriers such as the lack of culturally-congruent care and support services available for Muslims – for several grandmothers (and also some daughters/daughters-in-law), the limited availability of female technicians for routine procedures such as mammograms and pap smears precluded them from effectively utilizing available preventative care screenings. These findings then may serve to facilitate the provision of more culturally-congruent support, through policies, programs, and services, by policymakers, stakeholders, i.e., community service providers, faith leaders such as *imams* of mosques, researchers, as well as family members, for members of South Asian Muslim communities.

Relatedly, key findings from the study could be presented at local mosques via informal '*Chai* (tea) and Chat' sessions. Through such events, community members could be encouraged to discuss the findings and propose novel and creative ways to address key barriers to practicing healthy behaviours in South Asian Muslim families. These discussions might then be compiled into a report and shared with local policymakers such as the mayors or congressional district representative. Such activities may also help resolve discrepancies between public attitudes and policy measures, ultimately serving to foreground important and complex social, cultural, and religious dimensions of South Asian Muslim family life. Such discussions could also inform cultural congruence and awareness training sessions for frontline care providers. Further, given the strong affectual bonds between generations, healthcare professionals and frontline workers may want to enlist the support of not only adult children but adult grandchildren in the decision-making process for their older relatives.

In addition, as the findings from this study suggest, it is important to acknowledge the heterogeneity inherent in the South Asian Muslim population, particularly as it relates to country

of origin, generational status, and time of, as well as time since immigration. This is critical given that the experiences of individuals may vary across time and space and shifting realities and contingencies. But perhaps most important is a need to address systemic inequities that arise out of Islamophobia, xenophobia, oppression and discrimination, and gender stereotypes that disproportionately affect Muslims in the US. Toning down the negative discourse around Islam and having engaged and inclusive conversations at the national and local levels would be a good first step towards supporting the health and well-being of Muslim families.

To conclude, as the socio-cultural and socio-religious landscape of the US becomes increasingly diverse, this research adds to our understanding of the everyday lived experiences of an understudied population sub-group – South Asian Muslim families. It presents the enclosures of faith and spirituality, identity formation and agentic expression, intergenerational support exchanges, and continuities and ruptures across the lifecourse of three generations of South Asian Muslim women as they make sense of their lives at the intersection of gender, immigrant status, race, and faith.

References

Abu-Ras, W., and Abu-Bader, R. H. (2008). The impact of September 11, 2001 attacks on the well-being of Arab Americans in New York City. *Journal of Muslim Mental Health,3*(2), 217–239.

Acharya, M. P., and Northcott, H. C. (2007). Mental Distress and the Coping Strategies of Elderly Indian Immigrant Women. *Transcultural Psychiatry*, 614-636.

ACLU (2020). "ACLU Comments on Public Charge Proposed Rule". Retrieved August 2020 from https://www.aclu.org/letter/aclu-comments-public-charge-proposed-rule

Addlakha, R. (2020). Kinship destabilized! disability and the micropolitics of care in urban India. *Current Anthropology*, 61(S21), S000-S000.

Afzal, A. (2015). *Lone star Muslims: Transnational lives and the South Asian experience in Texas*. NYU Press.

Aggarwal, P., and Das Gupta, T. (2013). Grandmothering at work: conversations with Sikh Punjabi grandmothers in Toronto. *South Asian Diaspora*, *5*(1), 77-90.

Ahmad, F. (2003). Still "In Progress?"—Methodological dilemmas, tensions and contradictions in theorizing South Asian Muslim women. *South Asian women in the diaspor*a, 43-65.

Ahmad, F., Shik, A., Vanza, R., Cheung, A., George, U., and Stewart, D. E. (2004). Popular health promotion strategies among Chinese and East Indian immigrant women. *Women and health*, *40*(1), 21-40.

Ahmed, Q. A., Memish, Z. A., Allegranzi, B., and Pittet, D. (2006). Muslim health-care workers and alcohol-based handrubs. *The Lancet*, 367(9515), 1025-1027.

Ajrouch, K. J., and Fakhoury, N. (2013). Assessing needs of aging Muslims: A focus on metro-Detroit faith communities. *Contemporary Islam*, 7(3), 353-372.

Akhtar, S., and Varma, A. (2012). Sacrifice: Psychodynamic, cultural and clinical aspects. *The American Journal of Psychoanalysis*, *72*(2), 95-117.

Albert, I., Trommsdorff, G., and Wisnubrata, L. (2009). Intergenerational transmission of values in different cultural contexts: A study in Germany and Indonesia.

Al Suwaidi, J., Bener, A., Hajar, H. A., and Numan, M. T. (2004). Does hospitalization for congestive heart failure occur more frequently in Ramadan: a population-based study (1991–2001). *International journal of cardiology*, 96(2), 217-221.

Arat-Koç, S. (2012). Invisibilized, individualized, and culturalized: Paradoxical invisibility and hyper-visibility of gender in policy making and policy discourse in neoliberal Canada. *Canadian Woman Studies*, *29*(3).

Armstrong, K. (2007). *Islam: A Short History*. New York: Random Publishing House.

Baez, B. (2002). Confidentiality in qualitative research: Reflections on secrets, power and agency. *Qualitative research, 2*(1), 35-58.

Beck, U., and Beck-Gernsheim, E. (2002). *Individualisation*. Los Angeles: Sage.

Bengtson, V., Giarrusso, R., Mabry, J. B., and Silverstein, M. (2002). Solidarity, conflict, and ambivalence: Complementary or competing perspectives on intergenerational relationships?. *Journal of Marriage and Family, 64*(3), 568-576.

Bengtson, V. L., and Oyama, P. S. (2007). *Intergenerational solidarity: Strengthening economic and social ties*. New York: United Nations Headquarters.

Bengtson, V. L., and Schrader, S. S. (1982). Parent-child relations. *Research instruments in social gerontology, 2*, 115-186.

Berry, J.W. (2008). Globalisation and acculturation. *International Journal of Intercultural Relations, 32*, 328-336.

Bierman, A.S., Shack, A.R., and Johns, A. (2012). "Achieving Health Equity in Toronto: Opportunities for Intervention and Improvement". In A.S. Bierman (Ed.). *Project for an Ontario Women's Health Evidence-Based Report*. Toronto.

Bird, C. M. (2005). How I stopped dreading and learned to love transcription. *Qualitative inquiry*, 11(2), 226-248.

Bhattacharya, G., and Schoppelrey, S. L. (2004). Preimmigration beliefs of life success, postimmigration experiences, and acculturative stress: South Asian immigrants in the United States. *Journal of immigrant health, 6*(2), 83-92.

Blair, R.W.T. (2012). "Community ambassadors" for South Asian elder immigrants: Late-life acculturation and the roles of community health workers. *Social Science and Medicine 75*(10), 1769–1777.

bin Abdullah, O., Shukri, A. S. M., and Othman, N. (2011). Filial piety in Confucianism and Islam: a comparative literary analysis of Qur'an, hadith, and four Chinese classics. *Islam and Civilisational Renewal*, *3*(1), 133.

Bowen, J. R. (2004). Beyond migration: Islam as a transnational public space. *Journal of Ethnic and Migration Studies*, *30*(5), 879-894.

Boyd, M. (2002). Educational attainments of immigrant offspring: Success or segmented assimilation? *International migration review*, *36*(4), 1037-1060.

Brotman, S., Ferrer, I., and Koehn, S. (2020). Situating the life story narratives of aging immigrants within a structural context: the intersectional life course perspective as research praxis. *Qualitative Research*, *20*(4), 465-484.

Brown, S.L., Nesse, R.M., Vinokur, A.D., and Smith, D.M. (2003). Providing social support may be more beneficial than receiving it: Results from a prospective study of mortality. *Psychological Science, 14* (4), 320 –327.

Brown, T. H. and Taylor, W. H. (2013). Multidimensional Approaches to Examining Gender and Racial/Ethnic Stratification in Health. *Women,Gender, and Families of Color, 1*(2), 180-206.

Brown, T. H. (2012). The Intersection and Accumulation of Racial and Gender Inequality: Black Women's Wealth Trajectories. *The Review of Black Political Economy, 39*, 239-258.

Burke, L. A., and Miller, M. K. (2001). Phone interviewing as a means of data collection: Lessons learned and practical recommendations. In *Forum Qualitative Qualitative Social Research* (Vol. 2, No. 2).

Calfano, B. (2018). *Muslims, Identity, and American Politics*. Routledge.

Campbell, L. D., and Martin-Matthews, A. (2000). Caring sons: Exploring men's involvement in filial care. *Canadian Journal on Aging*, *19*(1), 57-79.

Carol, S., and Hank, K. (2020). Natives' and immigrants' gender preferences for children in Germany. *European Journal of Population*, *36*(2), 235-246.

Castañeda, H., Kline, N., and Dickey, N. (2010). Health concerns of migrant backstretch workers at horse racetracks. *Journal of health care for the poor and underserved, 21*(2), 489-503.

Chen, F., Liu, G., and Mair, C. A. (2011). Intergenerational ties in context: Grandparents caring for grandchildren in China. *Social forces; a scientific medium of social study and interpretation*, *90*(2), 571.

Clandinin, D. J., and Connelly, F. M. (2000). *Experience and story in qualitative research*. San Francisco: Jossey-Bass.

Clark, N. and Hunt, S. (2011). "Navigating the crossroads: Exploring rural young women's experiences of health using an intersectional framework". In O. Hankivsky (Ed.), *Health inequities in Canada: Intersectional frameworks and practices* (pp.131-145). Vancouver: University of British Columbia Press.

Ciambrone, D., and Allen, S. M. (2002). Husbands caring for wives with cancer. *Men as caregivers: Theory, research, and service implications. New York: Springer*.

Cicirelli, V. G. (1990). "Family support in relation to health problems of the elderly". In T. H. Brubaker (Ed.), *Family relationship in later lif*e (pp. 212–228). Newbury Park: Sage Publications.

Cila, J., and Lalonde, R. N. (2015). Language brokering, acculturation, and empowerment: Evidence from South Asian Canadian young adults. *Journal of Multilingual and Multicultural Development*, *36*(5), 498-512.

Chapman, M. (2016). Feminist dilemmas and the agency of veiled Muslim women: Analysing identities and social representations. *European Journal of Women's Studies*, *23*(3), 237-250.

Choi, N. G., and Smith, J. (2004). Reaching out to racial/ethnic minority older persons for elderly nutrition programs. *Journal of Nutrition for the Elderly*, *24*(1), 89-104.

Chowdhury, T., and Okazaki, S. (2020). Intersectional complexities of South Asian Muslim Americans: Implications for identity and mental health. In *Mental and Behavioral Health of Immigrants in the United States* (pp. 179-200). Academic Press.

Cliggett, L. (2005). Remitting the gift: Zambian mobility and anthropological insights for migration studies. *Population, Space and Place*, *11*(1), 35-48.

Cohler, B. J., and Hostetler, A. (2003). Linking life course and life story. In *Handbook of the life course* (pp. 555-576). Springer US.

Collins, P. H. (2015). Intersectionality's definitional dilemmas. *Annual Review of Sociology*, *41*, 1-20.

Collins, P.H, and Bilge, S. (2016). *Intersectionality*. Cambridge: Polity.

Connidis, I. A., and McMullin, J. A. (2002). Sociological ambivalence and family ties: A critical perspective. *Journal of marriage and family*, *64*(3), 558-567.

Cowgill, D. O. (1972). *Aging and modernization* (pp. 1-14). D. O. Cowgill, and L. D. Holmes (Eds.). New York: Appleton-Century-Crofts.

Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five designs.* Thousand Oaks, CA: Sage.

Creswell, J. W., and Miller, D. L. (2000). Determining validity in qualitative inquiry. *Theory into practice*, *39*(3), 124-130.

Croll, E. J. (2006). The intergenerational contract in the changing Asian family. *Oxford Development Studies*, *34*(4), 473-491.

Cuadraz, G.H., and Uttal, L. (1999). Intersectionality and in-depth interviews: methodological strategies for analyzing race, class, and gender. *Race, Gender, Class*. *6*, 156-181.

Cuellar, I. (2002). *Mexican-origin migration in the U.S. and mental health consequences*. Latino Studies Series. East Lansing, MI: Julian Samora Research Institute, Michigan State University.

Dasgupta, S. D. (2007). *Body evidence: Intimate violence against South Asian women in America*. Rutgers University Press.

Denzin, N. K. (1989). *Interpretive interactionism*. Newbury Park, CA: Sage.

de Jong Gierveld, J., Van der Pas, S. and Keating, N. (2015). Loneliness of older immigrant groups in Canada: effects of ethnic-cultural background. *Journal of cross-cultural gerontology*, *30*(3), 251-268.

De Maio, F. G. (2010). Immigration as pathogenic: a systematic review of the health of immigrants to Canada. *International journal for equity in health*, *9*(1), 27.

de Valk, H. A. and Schans, D. (2008). They ought to do this for their parents': perceptions of filial obligations among immigrant and Dutch older people. *Ageing and Society, 28*, 49–66.

Dhamoon, R.K., and Hankivsky, O. (2011). "Why the Theory and Practice of Intersectionality Matter to Health Research and Policy". In O. Hankivsky et al. (Eds.) *Health Inequities in Canada: Intersectional Frameworks and Practices* (pp.16-52). Vancouver: UBC Press.

Dhillon, J. K., and Thomas, N. (2019). Ethics of engagement and insider-outsider perspectives: issues and dilemmas in cross-cultural interpretation. *International Journal of Research and Method in Education*, *42*(4), 442-453.

Diwan, S., Lee, S. E., and Sen, S. (2011). Expectations of filial obligation and their impact on preferences for future living arrangements of middle-aged and older Asian Indian immigrants. *Journal of cross-cultural gerontology*, *26*(1), 55-69.

Dossa, P. (2009). *Racialized bodies, disabling worlds: Storied lives of immigrant Muslim women*. University of Toronto Press.

Dossa, P., and Coe, C. (2017). Introduction: Transnational aging and reconfigurations of kin work. In *Transnational aging and reconfigurations of kin work* (pp. 1-22). Rutgers University Press.

Dossa, P. (2017). The Recognition and Denial of Kin Work in Palliative Care. *Transnational Aging and Reconfigurations of Kin Work,* 180.

Drabble, L., Trocki, K. F., Salcedo, B., Walker, P. C., and Korcha, R. A. (2016). Conducting qualitative interviews by telephone: Lessons learned from a study of alcohol use among sexual minority and heterosexual women. *Qualitative Social Work*, *15*(1), 118-133.

Drake, P. (2010). Grasping at methodological understanding: a cautionary tale from insider research. *International Journal of Research and Method in Education*, *33*(1), 85-99.

Drzewiecka, J. A. (2001). "Discursive construction of differences: Ethnic immigrant identities and distinctions". In M. J. Collier (Ed.), *International and Intercultural Communication Annual: Vol. 23. Constituting cultural difference through discourse* (pp. 241-270). Thousand Oaks, CA: Sage.

Duan, H., and Hicks, D. L. (2020). New evidence on son preference among immigrant households in the United States. *IZA Journal of Development and Migration*, *11*(1).

Dyck, I. (2005). Feminist geography, the 'everyday', and local–global relations: hidden spaces of place-making. *The Canadian Geographer/Le Géographe canadien*, *49*(3), 233-243.

Edmonston, B. (2013). Lifecourse perspectives on immigration. *Canadian Studies in Population [ARCHIVES]*, *40*(1-2), 1-8.

Elder, G. H., Jr., and Johnson, M. K. (2001). "The life course and human development: Challenges, lessons, and new directions". In R. A. Settersten (Ed.), *Invitation to the life course: Toward new understandings of later life*. Amityville, NY: Baywood.

Estes, C. L., and Linkins, K. W. (2000). Critical perspectives on health and aging. *The handbook of social studies in health and medicine,* 154-172.

Essex, E. L., Seltzer, M. M., and Krauss, M. W. (1999). Differences in coping effectiveness and well-being among aging mothers and fathers of adults with mental retardation. *American Journal on Mental Retardation, 104*, 545-563.

Fenton, J. Y. (1988). *Transplanting Religious Traditions: Asian Indians in America*. Greenwood Publishing Group.

Ferrer, I., Grenier, A., Brotman, S., and Koehn, S. (2017). Understanding the experiences of racialized older people through an intersectional life course perspective. *Journal of aging studies*, *41*, 10-17.

Fischer, L.C. (1994). "Qualitative Research s Art and Science". In Gubrium, J.F, and Sankar, A. (Eds). *Qualitative Methods in Aging Research* (pp. 3-14). Thousand Oaks: Sage.

Franks, L. J., Hughes, J. P., Phelps, L. H., and Williams, D. G. (1993). Intergenerational influences on Midwest college students by their grandparents and significant elders. *Educational Gerontology: An International Quarterly*, *19*(3), 265-271.

Fryer, C., Mackintosh, S., Stanley, M., and Crichton, J. (2012). Qualitative studies using in-depth interviews with older people from multiple language groups: methodological systematic review. *Journal of Advanced Nursing*, *68*(1), 22-35.

Funk, L. M., and Kobayashi, K. M. (2009). ‘‘Choice’’ in Filial Care Work: Moving beyond a Dichotomy. *Canadian Review of Sociology , 46*(3), 236-252.

Galyapina, V., Lebedeva, N., and van de Vijver, F. J. (2018). A three-generation study of acculturation and identity of the Russian minority in the Republic of North Ossetia–Alania. *Journal of Cross-Cultural Psychology*, *49*(6), 976-992.

Garbett, R., and Mccormack, B. (2001). The experience of practice development: an exploratory telephone interview study. *Journal of Clinical Nursing*, *10*(1), 94-102.

Gearing, R. E. (2004). Bracketing in research: A typology. *Qualitative health research, 14*(10), 1429-1452.

Gierveld, J. D. J., Van der Pas, S., and Keating, N. (2015). Loneliness of older immigrant groups in Canada: Effects of ethnic-cultural background. *Journal of Cross-Cultural Gerontology, 30(*3), 251-268.

George, U. (1998). “Caring and women of colour: Living the intersecting oppressions of race, class and gender”. In T. Baines, P. M. Evans, and S. Neysmith (Eds.), *Women’s caring: Feminist perspectives on social welfare*. Oxford, UK: Oxford University Press.

Goffman, E. (1963). Stigma and social identity. Englewood Cliffs, NJ: Prentice-Hall.

Gong, F., Xu, J., Fujishiro, K., and Takeuchi, D. T. (2011). A life course perspective on migration and mental health among Asian immigrants: The role of human agency. *Social Science and Medicine*, *73*(11), 1618-1626.

Goode, W. J. (1963). *World revolution and family patterns*. New York: Free Press.

Greenland, K. and Brown, R**.** (2005) Acculturation and Acculturative Stress Among Japanese Students in the United Kingdom. *Journal of Social Psychology, 145* (4), 373-389.

Grewal, S., Bottorff, J. L., and Hilton, B. A. (2005). The influence of family on immigrant South Asian women’s health. *Journal of Family Nursing*, *11*(3), 242-263.

Grewal, I. (2005). *Transnational America: feminisms, diasporas, neoliberalisms*. Duke

University Press.

Gupta, R., and Pillai, V. K. (2012). Elder caregiving in South-Asian families in the United States and India. *Social Work and Society*, *10* (2).

Gupta, R., and Pillai, V. K. (2005). Analysis of caregiver burden in South Asian families in the Dallas-Fort Worth metropolitan area: insights for social practice. *Journal of Applied Sociology*, (2), 35-54.

Guillemin, M., and Gillam, L. (2004). Ethics, reflexivity, and "ethically important moments" in research. *Qualitative inquiry, 10*(2), 261-280.

Guruge, S., Thomson, M. S., George, U., and Chaze, F. (2015). Social support, social conflict, and immigrant women's mental health in a Canadian context: a scoping review. *Journal of psychiatric and mental health nursing*, *22*(9), 655-667.

Haddad, Y. Y., Smith, J. I., and Moore, K. M. (2006). *Muslim women in America: The challenge of Islamic identity today*. Oxford University Press.

Hall, S. (1990). "Cultural identity and diaspora". Retrieved June 2020 from https://warwick.ac.uk/fac/arts/english/currentstudents/postgraduate/masters/modules/asiandiaspora/hallculturalidentityanddiaspora.pdf

Haque, A., Tubbs, C. Y., Kahumoku-Fessler, E. P., and Brown, M. D. (2019). Microaggressions and Islamophobia: Experiences of Muslims across the United States and clinical implications. *Journal of marital and family therapy*, *45*(1), 76-91.

Hasnain, R., and Rana, S. (2010). Unveiling Muslim voices: Aging parents with disabilities and their adult children and family caregivers in the United States. *Topics in Geriatric Rehabilitation*, *26*(1), 46-61.

Heyse, P. (2011). A Life Course Perspective in the Analysis of Self-experiences of Female Migrants in Belgium: The Case of Ukrainian and Russian Women in Belguim. *Migration, 27* (2), 199-225.

Hijaz, A. (2019). *Tolerance Uncovered: How Frequency of News Exposure and Contact Affects Tolerance of Groups* (Doctoral dissertation, UC Riverside).

Hobbs, W. and Lajevardi, N. (2019). Effects of divisive political campaigns on the day-to-day segregation of Arab and Muslim Americans. *American Political Science Review*, *113*(1), 270-276.

Hodgson, M. G. (2009). *The Venture of Islam, Volume 1: The Classical Age of Islam*. University of Chicago press.

Holloway, I. and Todres, L. (2003). The Status of Method: Flexibility, Consistency and Coherence. *Qualitative Research, 3* (3), 345-357.

Horne, M. and Tierney, S. (2012). What are the barriers and facilitators to exercise and physical activity uptake and adherence among South Asian older adults: a systematic review of qualitative studies? *Preventive medicine 55*, 4, 276-284.

Howell, E. M., Zhang, H., and Poston, D. L. (2018). Son preference of immigrants to the United States: Data from US birth certificates, 2004–2013. *Journal of immigrant and minority health*, *20*(3), 711-716.

Hulko, W. (2011). "Intersectionality in the Context of Later Life Experiences of Dementia". In O. Hankivsky et al. (Eds.) Health Inequities in Canada: *Intersectional Frameworks and Practices (pp.199-217). Vancouver: UBC Press. Hutchison, E. D. (2010). Dimensions of Human Behavior: The Changing Life Course*. Thousand Oaks, CA: Sage Publications, Inc.

Hutchison, E. D. (2010). *Dimensions of Human Behavior: The Changing Life Course*. Thousand Oaks, CA: Sage Publications, Inc

Hutchison, E. D. (2013). Social work education: Human behavior and social environment. In *Encyclopedia of Social Work*.

Hyman, I. (2004). Setting the stage: reviewing current knowledge on the health of Canadian immigrants. *Canadian Journal of Public Health*, *95*(3), I4-I8.

Hyman, I., Mason, R., Guruge, S., Berman, H., Kanagaratnam, P., and Manuel, L. (2011). Perceptions of factors contributing to intimate partner violence among Sri Lankan Tamil immigrant women in Canada. *Health care for women international*, *32*(9), 779-794.

ICN (2019). Islamic Center of Naperville. Retrieved April 2020 from https://islamiccenterofnaperville.org/

Igarashi, H., Hooker, K., Coehlo, D.P., and Manoogian, M. M. (2013). "My nest is full": Intergenerational relationships at midlife. *Journal of Aging Studies, 27*, 102–112

Ikels, C. (2004). "Introduction". In C. Ikels (ed.), Filial Piety: Practice and Discourse in Contemporary East Asia, pp 1-16. Stanford, Calif.: Stanford University

Inman, A. G., Howard, E. E., Beaumont, R.L., and Walker, J.A. (2007). Cultural Transmission: Influence of Contextual Factors in Asian Indian Immigrant Parents' Experiences. *Journal of Counseling Psychology*, *54* (1), 93-100.

Jasso, G. (2003). "Migration, human development, and the life course". In J.T. Mortimer and M.J. Shanahan (Eds.), *Handbook of the Life Course*. New York: Kluwer Academic/Plenum Publishers.

Johnston, D. M. (2016). Combating Islamophobia. *Journal of Ecumenical Studies*,51(2), 165–173.

Joseph, E.V. (2005). *Attitudes Towards the Elderly and Caregiving Among Asian Indian Immigrants Residing in Cincinnati* (Doctoral dissertation, University of Cincinnati).

Kaiser, L. (2009). What can binational studies reveal about acculturation, food insecurity, and diet? *Journal of the Academy of Nutrition and Dietetics*, *109*(12), 1997-2000.

Kahf, M. (2003). My Grandmother Washes Her Feet in the Sink of the Bathroom at Sears" from *E-mails from Scheherazad.* Retrieved August 2020 from https://www.poetryfoundation.org/poems/54253/my-grandmother-washes-her-feet-in-the-sink-of-the-bathroom-at-sears

Kamdar, M. (2018). *India in the 21st Century: What Everyone Needs to Know*. Oxford University Press.

Kang, Y. (2012). Transnational motherhood in the making of global kids: South Korean educational migrants in Singapore. In *Living intersections: Transnational migrant identifications in Asia* (pp. 149-166). Springer, Dordrecht.

Katbamna, S., Ahmad, W., Bhakta, P., Baker, R., Parker, G. (2004). Do they look after their own? Informal support for South Asian carers. *Health and Social Care in the Community, 12* (5), 398-406.

Kalavar, J. M., and Van Willigen, J. (2005). Older Asian Indians resettled in America: Narratives about households, culture and generation. *Journal of cross-cultural gerontology*, *20*(3), 213-230.

Keefe, J.M., and Fancey, P. (2002). Work and eldercare: Reciprocity between older mothers and their employed daughters. *Canadian Journal on Aging*, 21(2), 229 –241.

Kertechian, S. K., and Swami, V. (2016). The hijab as a protective factor for body image and disordered eating: a replication in French Muslim women. *Mental Health, Religion and Culture*, *19*(10), 1056-1068.

Khan, F. (2015). The Dars: South Asian Muslim American Women Negotiate Identity. *The Journal of American Folklore*, *128*(510), 395-3411.

Khan, M.M. and Kobayashi, K.M. (2017). Dharma, Karma, and Migrant Hindu Women. In P. Dossa and C. Coe (Eds.). Transnational Aging and Reconfigurations of Kin work. New Brunswick: Rutgers University Press.

Khanna, G., and Morales, N. (2017). The IT Boom and Other Unintended Consequences of Chasing the American Dream. *Center for Global Development Working Paper*, (460).

Killawi, A., Heisler, M., Hamid, H., and Padela, A. I. (2015). Using CBPR for health research in American Muslim mosque communities: Lessons learned. *Progress in community health partnerships: research, education, and action*, *9*(1), 65.

Kim, S., and Subramanian, S. V. (2019). Income volatility and depressive symptoms among elderly Koreans. *International journal of environmental research and public health*, *16*(19), 3580.

Kishi, K. (2017). Assualts against Muslims in U.S. surpass 2001 level. Retreived December 2019 from: https://www.pewresearch.org/fact-tank/2017/11/15/assaults-against-muslims-in-u-s-surpass-2001-level/

Ko, H. J., Cheng, Y. P., Fox, P. A., Bleech, H. M., and Hooker, K. (2019). Self-Views of Aging and Well-Being Among Taiwanese Older Adults: The Context of Filial Piety and Living Arrangements. In *Asian Indigenous Psychologies in the Global Context* (pp. 277-309). Palgrave Macmillan, Cham.

Kobayashi K.M. and Prus S.G. (2011). "Adopting an Intersectionality Perspective in the Study of the Healthy Immigrant Effect in Mid- to Later Life," in O. Hankivsky (Ed.), *Health Inequities in Canada: Intersectional Frameworks and Practices.* Vancouver: UBC Press.

Kobayashi, K. M., and Funk, L. (2010). Of the family tree: Congruence on filial obligation between older parents and adult children in Japanese Canadian families. *Canadian Journal on Aging, 29*(01), 85-96.

Koehn, S. (2009). Negotiating Candidacy: Access to Care for Ethnic Minority Seniors. *Ageing and Society, 29*(4), 585-608.

Koehn, S., Spencer, C., and Hwang, E. (2010). "Promises, Promises: Cultural and legal Dimensions of Sponsorship for Immigrant Seniors". In D. Durst, and M. Maclean (Eds.). *Diversity and Aging Among Immigrant Seniors in Canada: Changing Faces and Greying Temples* (pp. 79-102). Calgary, Alberta: Detselig Enterprises Ltd.

Koehn, S. D., Jarvis, P., Sandhra, S. K., Bains, S. K., and Addison, M. (2014). Promoting mental health of immigrant seniors in community. *Ethnicity and Inequalities in Health and Social Care*.

Kõu, A., and Bailey, A. (2014). 'Movement is a constant feature in my life': Contextualising migration processes of highly skilled Indians. *Geoforum*, *52*, 113-122.

Kulu, H., Milewski, N., Hannemann, T., and Mikolai, J. (2019). A decade of life-course research on fertility of immigrants and their descendants in Europe. *Demographic Research*, *40*, 1345-1374.

Kwak, K., and Berry, J. W. (2001). Generational differences in acculturation among Asian families in Canada: A comparison of Vietnamese, Korean, and East-Indian groups. *International journal of psychology*, *36*(3), 152-162.

Lai, D. W., and Surood, S. (2013). Effect of service barriers on health status of aging South Asian immigrants in Calgary, Canada. *Health and Social Work*, *38*(1), 41-50.

Lajevardi, N. and Oskooi, K.A.R. (2018). "Old-Fashioned Racism, Contemporary Islamophobia, and the Isolation of Muslim Americans in the Age of Trump." *Journal of Race, Ethnicity and Politics, 3*, 112–152.

Lamb, S. E. (2009). *Aging and the Indian diaspora: Cosmopolitan families in India and abroad*. Indiana University Press.

Lan, P. C. (2002). Subcontracting filial piety: Elder care in ethnic Chinese immigrant families in California. *Journal of Family Issues*, *23*(7), 812-835.

Leung, H.H., and McDonald, L. (2007). Chinese women who care for ageing parents in three generational households: some immigrant experiences in Toronto. *Asian Journal of Gerontology and Geriatrics 2* (1), 15-22.

Li, M., and Anderson, J. G. (2016). Pre-migration trauma exposure and psychological distress for Asian American immigrants: Linking the pre-and post-migration contexts. *Journal of Immigrant and Minority Health*, *18*(4), 728-739.

Lichtblau, E. (2016). Hate crimes against American Muslims most since post-9/11 era. *The New York Times*, *17*.

Liebig, P., and Ramamurti, P. V. (2006). Living arrangements and social support for older adults in India. *Handbook of Asian Aging.* Amityville, NY: Baywood Publishing Company.

Lincoln, Y.S. and Guba, E.G. (1985). *Naturalistic Inquiry*. Newbury Park, CA: Sage Publications.

Litchmore, R. V., and Safdar, S. (2016). Meanings of the hijab: Views of Canadian Muslim women. *Asian Journal of Social Psychology*, *19*(3), 198-208.

Liversage, A., and Jakobsen, V. (2016). Unskilled, foreign and old: Poverty among Turkish immigrant pensioners in a life course perspective. *Geropsych-the Journal of Gerontopsychology and Geriatric Psychiatry*, *29*(2), 93-103.

Longino, C. F., and Bradley, D. E. (2006). Internal and international migration. *Handbook of aging and the social sciences*, *6*, 76-93.

Lui, F. (2019). "The Impact of Racial Microaggressions and Major Discriminatory Events on Mental Health" (2019). *CUNY Academic Works.*

Lüscher, K., and Pillemer, K. (1998). Intergenerational ambivalence: A new approach to the study of parent-child relations in later life. *Journal of Marriage and the Family*, 413-425.

Mand, K. (2006). Gender, ethnicity and social relations in the narratives of elderly Sikh men and women. *Ethnic and racial studies*, *29*(6), 1057-1071.

Mahmood, S. (2011). *Politics of piety: The Islamic revival and the feminist subject*. Princeton University Press.

Maizland, L. (2020). "India's Muslims: An Increasingly Marginalized Population". Retrieved August 2020 from https://www.cfr.org/backgrounder/india-muslims-marginalized-population-bjp-modi

Mantzoukas, S. (2004). Issues of representation within qualitative inquiry. *Qualitative health research*, *14*(7), 994-1007.

Masvie, H. (2006). The role of Tamang mothers-in-law in promoting breast feeding in Makwanpur District, Nepal. *Midwifery*, *22*(1), 23-31.

McClain, A. C., Dickin, K. L., and Dollahite, J. (2019). Life course influences on food provisioning among low-income, Mexican-born mothers with young children at risk of food insecurity. *Appetite*, *132*, 8-17.

McFadden, S., and Kozberg, R. C. (2008). Religious and spiritual supports for late-life meaning. *Generations*, *32*(2), 6-11.

Mikkonen, J., and Raphael, D. (2010). Social determinants of health: The Canadian facts.

Molina, J. A. (2015). Caring within the family: reconciling work and family life. *Journal of Family and Economic Issues*, 36, 1-4.

Mohammad-Arif, A. (2002). *Salaam America: South Asian Muslims in New York*. Anthem Press.

Morrow, S. L., and Smith, M. L. (2001). "Qualitative research for counseling psychology". In S. D. Brown and R. W. Lent (Eds.), *Handbook of counseling psychology (3rd ed.)* (pp. 119- 230). New York: Wiley.

Mullings, D. V., and Gien, L. (2013). Culturally competent (appropriate) health and longterm care services for older immigrants in a small urban center of Newfoundland. *International Journal of Humanities and Social Science Invention*, *2*(9), 81-89.

Murray, S. J. (2007, October). Ethics at the scene of address: A conversation with Judith Butler. In *Symposium* (Vol. 11, No. 2, pp. 415-445).

Nandan, M. (2005). Adaptation to American culture: voices of Asian Indian immigrants. *Journal of Gerontological Social Work*, *44*(3-4), 175-203.

Ng, C. F., Northcott, H. C., Abu-Laban, B., McIrvin, S. (2007). Housing and Living Arrangements of South Asian Immigrant Seniors in Edmonton, Alberta. *Canadian Journal on Aging 26* (3), 189-194.

Nguyen, D., and Lee, R. (2012). Asian immigrants' mental health service use: An application of the life course perspective. *Asian American Journal of Psychology*, *3*(1), 53.

O'Reilly, K. (2012). *Ethnographic methods*. Routledge.

Padela, A. I., and Curlin, F. A. (2013). Religion and disparities: Considering the influences of Islam on the health of American Muslims. *Journal of religion and health*, *52*(4), 1333-1345.

Padela, A. I., Murrar, S., Adviento, B., Liao, C., Hosseinian, Z., Peek, M., and Curlin, F. (2015). Associations between religion-related factors and breast cancer screening among American Muslims. *Journal of immigrant and minority health*, *17*(3), 660-669.

Padela, A. I., Vu, M., Muhammad, H., Marfani, F., Mallick, S., Peek, M., and Quinn, M. T. (2016). Religious beliefs and mammography intention: findings from a qualitative study of a diverse group of American Muslim women. *Psycho-oncology*, *25*(10), 1175-1182.

Padela, A. I., and Qureshi, O. (2017). Islamic perspectives on clinical intervention near the end-of-life: We can but must we?. *Medicine, Health Care and Philosophy*, *20*(4), 545-559.

Padela, A. I., and Zaidi, D. (2018). The Islamic tradition and health inequities: A preliminary conceptual model based on a systematic literature review of Muslim health-care disparities. *Avicenna journal of medicine*, *8*(1), 1.

Padilla, A. M., and Perez, W. (2003). Acculturation, social identity, and social cognition: A new perspective. *Hispanic journal of behavioral sciences*, *25*(1), 35-55.

Patton, M. Q. (2015). *Qualitative Research and Evaluation Methods (4th ed.).* Thousand Oaks: Sage.

Pew Research Centre (2009). “Mapping the global Muslim population”. Retrieved December 2019 from https://www.pewresearch.org/wp-content/uploads/sites/7/2009/10/Muslimpopulation.pdf

Pew Research Centre (2017a). "Why Muslims are the world's fastest-growing religious group". Retrieved December 2019 from https://www.pewresearch.org/fact-tank/2017/04/06/why-muslims-are-the-worlds-fastest-growing-religious-group/

Pew Research Centre (2017b). "US Muslims are religiously observant, but open to multiple interpretations of Islam". Retrieved December 2019 from https://www.pewresearch.org/fact-tank/2017/08/28/u-s-muslims-are-religiously-observant-but-open-to-multiple-interpretations-of-islam/

Pew Research Centre (2018). "Religion and Public Life." Retrieved December 2019 from: https://www.pewforum.org/essay/muslims-in-america-immigrants-and-those-born-in-u-s-see-life-differently-in-many-ways/

Pew Research Centre (2020). "Household Patterns by Age and Gender". Retrieved March 2020 from https://www.pewforum.org/2019/12/12/household-patterns-by-age-and-gender/

Population Reference Bureau (2020). "Fact Sheet: Aging in the United States". https://www.prb.org/aging-unitedstates-fact-sheet/

Predelli, L. N. (2004). Interpreting gender in Islam: A case study of immigrant Muslim women in Oslo, Norway. *Gender and society*, *18*(4), 473-493.

Prozorov, S. M (1991). *Islam: Collegiate Dictionary*. Moscow: Science. Home edition of oriental literature.

Rai, R. K. (2015). Utilization of maternal health-care services by Muslim women in India, Bangladesh, and Pakistan, 2005–2007. *Journal of Public Health*, *23*(1), 37-48.

Rane, H., Amath, N., and Faris, N. (2015). Multiculturalism and the Integration of Multigenerational Muslim Communities in Queensland, Australia. *Journal of Muslim Minority Affairs*, *35*(4), 503-519.

Rangaswamy, P. (1995). Asian Indians in Chicago: Growth and change in a model minority. *Ethnic Chicago: A Multicultural Portrait*, 438-462.

Riessman, C. K. (2003). Analysis of personal narratives. In James A. Holstein and Jaber F. Gubrium (Eds.), *Inside interviewing. New Lenses, New Concerns* (pp. 331–347). London: Sage Publications

Ritchie, J., Lewis, J., Nicholls, C. M., and Ormston, R. (Eds.). (2013). *Qualitative research practice: A guide for social science students and researchers*. Sage.

Rhodes, P. J., Small, N., Ismail, H., and Wright, J. P. (2008). The use of biomedicine, complementary and alternative medicine, and ethnomedicine for the treatment of epilepsy among people of South Asian origin in the UK. *BMC Complementary and Alternative Medicine*, *8*(1), 7.

Roald, A. S. (2003). *Women in Islam: The Western experience*. Routledge.

Rusch, D., Frazier, S. L., and Atkins, M. (2015). Building capacity within community-based organizations: New directions for mental health promotion for Latino immigrant families in urban poverty. *Administration and Policy in Mental Health and Mental Health Services Research*, *42*(1), 1-5.

Salaff, J. W., and Greve, A. (2004, June). Can women's social networks migrate? In *Women's Studies International Forum* (Vol. 27, No. 2, pp. 149-162). Pergamon.

Saraswati, J. (2000). Poverty and visible minority women in Canada. *Canadian Woman Studies 20*(3), 49-53.

Sawatzky, J. E., and Kerry, S. (2003). Impact of caregiving: Listening to the voice of informal caregivers. *Journal of Psychiatric and Mental Health Nursing, 10*(3), 277-286.

Schans, D., and de Valk, H. (2011). Filial obligations among immigrants and native Dutch: a comparison of perceptions and behaviour among ethnic groups and generations. *Gender, generations and the family in international migration*, 99-120.

Scharlach, A. E., Kellam, R., Ong, N., Baskin, A., Goldstein, C., and Fox, P. J. (2006). Cultural attitudes and caregiver service use: Lessons from focus groups with racially and ethnically diverse family caregivers. *Journal of gerontological social work*, *47*(1-2), 133-156.

Schwartz, S. J. (2007). The applicability of familism to diverse ethnic groups: A preliminary study. *The Journal of social psychology*, *147*(2), 101-118.

Schwartz, S. J., Unger, J. B., Zamboanga, B. L., and Szapocznik, J. (2010). Rethinking the concept of acculturation: implications for theory and research. *American Psychologist*, *65*(4), 237.

Sharma, R., Khosla, N., Tulsky, J. A., and Carrese, J. A. (2011). Traditional Expectations Versus US Realities: First- and Second-Generation Asian Indian Perspectives on End-of-Life Care. *J Gen Intern Med, 27*(3), 311-317.

Sharma, K., and Kemp, C. L. (2012). "One should follow the wind": Individualized filial piety and support exchanges in Indian immigrant families in the United States. *Journal of Aging Studies*, *26*(2), 129-139.

Seponski, D. M., and Lewis, D. C. (2009). Caring for and learning from each other: A grounded theory study of grandmothers and adult granddaughters. *Journal of Intergenerational Relationships*, *7*(4), 394-410.

Siddiqi, A., Zuberi, D., and Nguyen, Q. C. (2009). The role of health insurance in explaining immigrant versus non-immigrant disparities in access to health care: comparing the United States to Canada. *Social science and medicine*, *69*(10), 1452-1459.

Sieber, J. E. (Ed.). (2006). Introduction: Data sharing and disclosure limitation techniques. *Journal of Empirical Research on Human Research Ethics*, *1*(3), 47-49.

Silverstein, M., and Wang, R. (2015). Does familism inhibit demand for long-term care? Public policy implications of growing ethnic diversity in the United States. *Public Policy and Aging Report*, prv016.

Silverstein, M., Zuo, D., Wang, J., and Bengtson, V. L. (2019). Intergenerational religious participation in adolescence and provision of assistance to older mothers. *Journal of Marriage and Family*, *81*(5), 1206-1220.

Singh, G. K., Rodriguez-Lainz, A., and Kogan, M. D. (2013). Immigrant health inequalities in the United States: use of eight major national data systems. *The Scientific World Journal*, *2013*.

Shaw, A., Kreager, P., and Shroeder-Butterfill, E. (2005). British Pakistani elderly without children: An invisible minority. *Ageing Without Children: European and Asian Perspectives on Elderly Access to Support Networks. Berghahn, Oxford*, 198-222.

Sodhi, P. (2008). Bicultural Identity Formation of Second-Generation Indo-Canadians. *Canadian Ethnic Studies, 40*, 187-199.

Soto Mas, F., Ji, M., Fuentes, B. O., and Tinajero, J. (2015). The Health Literacy and ESL study: a community-based intervention for Spanish-speaking adults. *Journal of health communication*, *20*(4), 369-376.

Spencer, L., Ritchie, J., and O'Connor, W. (2003). Analysis: practices, principles and processes. *Qualitative research practice: A guide for social science students and researchers*, 219-262.

Spitzer, D., Neufeld, A., Harrison, M., Hughes, K., and Stewart, M. (2003, April). Caregiving in Transnational Context: "My Wings Have Been Cut; Where Can I Fly?". *Gender and Society, 17*(2), 267-286.

Stoller, E. P. (1985). Exchange patterns in the informal support networks of the elderly: The impact of reciprocity on morale. *Journal of Marriage and the Family*, 335-342.

Sudha, S. (2014). Intergenerational relations and elder care preferences of Asian Indians in North Carolina. *Journal of cross-cultural gerontology*, *29*(1), 87-107.

Tackett, S., Young, J. H., Putman, S., Wiener, C., Deruggiero, K., and Bayram, J. D. (2018, July). Barriers to healthcare among Muslim women: A narrative review of the literature. In *Women's Studies International Forum* (Vol. 69, pp. 190-194). Pergamon.

Tariq, M. and Syed, J. (2017). Intersectionality at work: South Asian Muslim women's experiences of employment and leadership in the United Kingdom. *Sex Roles*, *77*(7-8), 510-522.

Tienda, M. (2015). Multiplying Diversity: Family Unification and the Regional Origins of Late-Age US Immigrants. *International Migration Review*, 1-30.

Thanissaro, P. N. (2010). 'Heaven starts at your parents' feet': adolescent bowing to parents and associated spiritual attitudes. *International Journal of Children's Spirituality*, *15*(4), 295-305.

Thompson, R. (2005). The Hold Parents Have: How Asian American Students Negotiate Cultural Incompatibility. *East-West Connections*, 1-9.

Torres, S. (2006). Different ways of understanding the construct of successful aging: Iranian immigrants speak about what aging well means to them. *Journal of cross-cultural gerontology*, *21*(1-2), 1-23.

Tracy, S.J. (2010). Qualitative Quality: Eight "Big-Tent" Criteria for Excellent Qualitative Research. *Qualitative Inquiry, 16* (10), 837-849.

Treas, J., and Batalova, J. (2009). Immigrants and aging. In *International handbook of population aging* (pp. 365-394). Springer Netherlands.

Treas, J. (2008). Four myths about older adults in America's immigrant families. *Generations*, *32*(4), 40-45.

Tri-Council Policy Statement (2017). "Research Involving Humans". Retrieved April 2020 from https://www.uvic.ca/universitysecretary/assets/docs/policies/RH8105_1250_.pdf

Tsai, A. C., Kohrt, B. A., Matthews, L. T., Betancourt, T. S., Lee, J. K., Papachristos, A. V., ... and Dworkin, S. L. (2016). Promises and pitfalls of data sharing in qualitative research. *Social Science and Medicine*, *169*, 191-198.

Underwood, H. L., and Dorfman, L. T. (2006). A view from the other side: Elders' reactions to intergenerational service-learning. *Journal of Intergenerational Relationships*, *4*(2), 43-60.

U.N Data (2012). Composition of macro geographical (continental) regions, geographical sub-regions, and selected economic and other groupings. Retrieved from United Nations Statistics Division: http://millenniumindicators.un.org/unsd/methods/m49/m49regin.htm

U.N Department of Economic and Social Affairs (2019). "The number of international migrants reaches 272 million, continuing an upward trend in all world regions, says UN". Retrieved December 2019 from: https://www.un.org/development/desa/en/news/population/international-migrant-stock-2019.html`

van Es, M. A. (2019). Muslim women as 'ambassadors' of Islam: breaking stereotypes in everyday life. *Identities*, *26*(4), 375-392.

Vera-Sanso, P. (2005). 'They don't need it, and I can't give it': Filial support in South India. *Aging Without Children: European and Asian Perspectives on Elderly Access to Support Networks.* Oxford: Berghahn Books.

Vissandjee, B., Desmeules, M., Cao, Z., Abdool, S., and Kazanjian, A. (2004). Integrating ethnicity and migration as determinants of Canadian women's health. *BMC Women's Health*, *4*(1), S32.

Vu, M., Azmat, A., Radejko, T., and Padela, A. I. (2016). Predictors of delayed healthcare seeking among American Muslim women. *Journal of Women's Health*, *25*(6), 586-593.

Wall, K., and José, J. S. (2004). Managing work and care: a difficult challenge for immigrant families. *Social policy and administration*, *38*(6), 591-621.

Walton-Roberts, M. and Pratt, G. (2005). Mobile Modernities: A South Asian family negotiates immigration, gender and class in Canada, *Gender, Place and Culture, 12* (2), 173-195.

Ward, K., Gott, M., and Hoare, K. (2015). Participants' views of telephone interviews within a grounded theory study. *Journal of advanced nursing*, *71*(12), 2775-2785.

Watt, M. H., Perera, B., Østbye, T., Ranabahu, S., Rajapakse, H., and Maselko, J. (2014). Care-giving expectations and challenges among elders and their adult children in Southern Sri Lanka. *Ageing and society*, *34*(05), 838-858.

Weerasinghe S., Numer M. (2012). A life-course exploration of the social, emotional and physical health behaviours of widowed South Asian immigrant women in Canada: Implications for health and social programme planning. *International Journal of Migration, Health and Social Care 6*(4), 42-56.

Weisberg-Shapiro, P., and Devine, C. (2019). "Men like to Eat More Rice and Beans and Things like That": The Influence of Childhood Experience and Life Course Events on Dietary Acculturation. *Ecology of food and nutrition*, *58*(5), 413-429.

Whyte, M. K. (2003). China's Revolutions and Intergenerational Relations," and" The Persistence of Family Obligations in Baoding. *China's revolutions and intergenerational relations*.

Willis, R. (2010). “Informal support transfer with family members: a comparative study across different ethnic groups in England and Wales”. The Future Ageing of the Ethnic Minority Population - Centre for Policy on Ageing, United Kingdom, 2010-09-23.

Wilmoth, J. M. (2001). Living arrangements among immigrants in the United States. The Gerontologist, 41, 228–238.

Wilson, B. (2020). Understanding how immigrant fertility differentials vary over the reproductive life course. *European Journal of Population*, *36*(3), 465-498.

Wong, L., Satzewich, V. (2006). *Transnational Identities and Practices in Canada.* Vancouver: University of British Columbia Press.

World Population Review (2020). “Bangladesh Population”. Retrieved July 2020 from https://worldpopulationreview.com/countries/bangladesh-population

Worth, N., and Hardill, I. (2015). Researching the lifecourse: Critical Reflections from the Social Sciences. Bristol: Policy Press

Xu, L., Chi, I. and Wu, S. (2018). Grandparent–grandchild relationships in Chinese immigrant families in Los Angeles: Roles of acculturation and the middle generation. *Gerontology and Geriatric Medicine*, *4*, 2333721418778196.

Yeh, K. and Olwen B. (2003). A Test of the Dual Piety Model. *Asian Journal of Social Psychology, 6*, 215-228.

Younis, T., and Jadhav, S. (2019). Islamophobia in the National Health Service: an ethnography of institutional racism in PREVENT's counter-radicalisation policy. *Sociology of Health and Illness*.

Zhang, J., and Verhoef, M. J. (2002). Illness management strategies among Chinese immigrants living with arthritis. *Social science and medicine*, *55*(10), 1795-1802.

Zuberi, D. M. and Ptashnick, M. B. (2011). The deleterious consequences of privatization and outsourcing for hospital support work: the experiences of contracted-out hospital cleaners and dietary aids in Vancouver, Canada. *Social Science and Medicine*, *72*(6), 907-911.

APPENDIX A: Recruitment Email Script

Peace be Upon You [name of contact]

I am a Doctoral candidate at the University of Victoria, British Columbia, Canada. I am conducting a study on multigenerational immigrant South Asian Muslim families in the US as part of my doctoral research. I am reaching out to request you, as a member of [name of organization] to refer my project to members of the broader South Asian Muslim community for possible participation in a 60-90-minute, informal telephone interview. The interviews will be digitally recorded. The title of my project is- ' **Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families**'

This project has received approval from the Human Research and Ethics Board at the University of Victoria. South Asian Muslim women who meet the following selection criteria may be eligible:

- Are over the age of 19.
- Live in a multi-generational household (i.e., more than two generations living in the same household).
- Born in a South Asian country (first generation) OR having at least one parent who was born in a South Asian country (second-generation).

The following individuals are **not** eligible:

- Men
- Persons under the age of 19

My research will examine the intersections of faith, culture, gender, age, and immigrant status, as well as intergenerational care and support exchanges within the family, and the ways in which key life course events shape relationships and decision-making processes in immigrant South Asian Muslim families. The results from this study will add to the current knowledge surrounding the lived experiences of immigrant South Asian Muslim women and provide a better understanding of their everyday lives. Findings from this study may have important implications with regard to the kind of support services that are needed for the well-being of this population group.

Attached to this email is a study poster and a letter of invitation to participate in this study, which you can share with community members by word of mouth or electronically. Interested individuals can contact me directly via email or telephone, the details of which are provided in the attached letter. Please note that by assisting in the recruitment for this study you are not involved in this research project beyond helping me, the researcher, in broadcasting information about this study to the South Asian community. Please be assured that since the identity of participants will not be disclosed, any relationship you have with them will not be affected in any way.

Thank you for your consideration. Please contact me via email [redacted] or telephone [redacted] if you need further information on this study, and I will gladly try to answer your questions. I look forward to hearing from you.

Sincerely,
Mushira Khan
(Department of Sociology, University of Victoria)

APPENDIX B: Letter of Invitation

Peace be Upon You!

I am a Doctoral candidate at the University of Victoria, British Columbia, Canada. I am conducting a study on multigenerational immigrant South Asian Muslim families in the US as part of my doctoral research. The title for this project is- **'Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families'.**

Please contact me if you:

- Identify as a South Asian Muslim woman.
- Are over the age of 19.
- Live in a multi-generational household (i.e., more than two generations living in the same household).
- Were born in a South Asian country (first generation) OR have at least one parent or grandparent who was born in a South Asian country (second-generation/third-generation).

This project has received ethics approval from the Human Research and Ethics Board at the University of Victoria.

I would really appreciate the opportunity to talk to you about your life experiences. You can choose a time and date that suits you best for the interview. The interview will be conducted over the telephone. Please note that there might be some limits to privacy if there are other members of the household present during the time of the interview. Please let me know if you have any concerns in this regard. The interview will take up approximately 60-90 minutes of your time. Your name and other identifying details will not be disclosed in the study. I will give you a written consent

form, which will provide you with other relevant information about this study. This will be a great opportunity for you to tell your life-story and share your unique experiences as a South Asian Muslim woman living in the US. You will also be able to share your unique experiences of multi-generational living. The results from this study may have important implications with regard to determining the kind of support services that are needed in order to ensure the well-being of immigrant South Asian Muslim families.

Please note that the organizations assisting in the recruitment for this study are not involved in this research project beyond helping me, the researcher, in broadcasting information about this study to the South Asian community. Whether you choose to participate or not, any services or relationships that you have with these organizations will not be affected in any way. Information on whether you participated or not in this study will not be shared with these organizations/individuals.

Thank you for your consideration. Please contact me via email [redacted] or telephone [redacted] if you need further information on this study, and I will gladly try to answer your questions.

I look forward to hearing from you.

Sincerely,

Mushira Khan
(Department of Sociology, University of Victoria)

APPENDIX C: Recruitment Poster

Assalam-o-alaikum sisters!

- Are you over the age of 19?
- Do you live in a multi-generational household (i.e., more than two generations living in the same household)?
- Were you born in a South Asian country (first generation) OR have at least one parent or grandparent who was born in a South Asian country?

If you answered 'yes' to these questions, you have an exciting opportunity to talk about your experiences as a South Asian Muslim woman living in the US.

My name is Mushira Khan, a Doctoral student at the University of Victoria, Canada who, as part of her PhD dissertation, is conducting a study on the lives of immigrant South Asian Muslim families. The title for this project is- ' **'Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families'**. I would like to talk to you about your life as a South Asian Muslim woman who lives in a multigenerational household.

Please contact me via email [redacted]) or telephone [redacted] if you need further information on this study or wish to participate and I will gladly try to answer your questions. Thank you for your consideration!!

APPENDIX D: Interview Guide

I. STORY OF IMMIGRATION

Could you tell me your/ your family's story of immigration?

Sample probes:

- How long ago did you/your family immigrate?
- Can you tell me a little bit about your childhood? What was it like?
- Could you talk a little bit about some challenges you/your family may have faced in the process of migration?
- Can you share some memories of migration with me?

II. STORY OF LIVING ARRANGEMENTS

Can you talk about your experiences of living with your [older/younger] relatives?

Sample probes:

- What do you like the most about living with your [older/younger] relatives? Why?
- What do you not like so much about living with your [older/younger] relatives? Why?
- What does family mean to you?
- Can you describe what a typical day looks like for you?

III. STORY OF *DEEN* (FAITH)

Can you talk to me about your *Deen*?

Sample probes:

- What is it like to be a Muslim woman in the US?
- How do you practice your *Deen*?
- Can you talk about any challenges you face in the practice of your *Deen*?
- How do you reconcile your *Deen* with everyday life?

IV. STORY OF HEALTH

What does health mean to you?

Sample probes:

- How would you describe your health in general?
- How would you describe the health of your family members?
- What do you think are some challenges to good health?
- What do you think are some facilitators to good health?
- How can policymakers support aging Muslim families?

APPENDIX E: Organizing Raw Data

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  - 2.3.4.1. Lifestyle changes
  - 2.3.4.2. Appreciation of material aspects
  - 2.3.4.3. Appreciation of non-material aspects
  - 2.3.4.4. Daily routine
- 2.4. Other

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- 3.1.1. Way of life
- 3.2. Meanings of *Deen*
  - 3.2.1. 'Seeking knowledge'
    - 3.2.1.1. Podcasts
    - 3.2.1.2. YouTube
    - 3.2.1.3. Masjid and khutba
    - 3.2.1.4. Websites
  - 3.2.2. Shifting perceptions
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    - 3.4.1.1. Specific example
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- 4.5. Strategies
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    - 5.3.2.2. Facilitators
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    - 5.3.3.1. Specific examples
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  - 5.4.1. Long-term
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APPENDIX F: Participant Consent Form

University of Victoria

Project Title: Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families

You are invited to participate in a study entitled **Of Duty, *Deen* (faith), Diaspora, and Dilemma: Narratives of Care and Intergenerational Support Exchanges in Aging South Asian Muslim Families** that is being conducted by Mushira Khan.

Mushira Khan is a graduate student in the department of Sociology at the University of Victoria and you may contact her if you have further questions by phone at [redacted] or email at [redacted].

As a graduate student, I am required to conduct research as part of the requirements for a degree in Doctor of Philosophy (PhD). It is being conducted under the supervision of Dr. Karen Kobayashi. You may contact my supervisor at [redacted]

This research is being funded by the Social Sciences and Humanities Research Council (SSHRC) of Canada.

Purpose and Objectives
The purpose of this research project is to understand aging processes in immigrant South Asian Muslim families in the US.

Importance of this Research
Research of this type is important because it will help us understand: 1) what life in multigenerational South Asian Muslim families looks like; 2) the everyday lived experiences of immigrant South Asian Muslim women; and 3) the barriers and facilitators to healthy aging in South Asian Muslim families. Findings from this study may help inform public health interventions to better support the health and social care needs of this population.

Participants Selection
You are being asked to participate in this study because you:

- Identify as a South Asian Muslim woman
- Are over the age of 19
- Live in a multi-generational household (i.e., more than two generations living in the same household)
- Were born in a South Asian country (first generation) OR have at least one parent or grandparent who was born in a South Asian country (second-generation/third-generation)

What is involved
If you consent to voluntarily participate in this research, your participation will include a 60 to 90-minute telephone interview at a time chosen by you. The interview will be digitally recorded and transcribed for data analysis.

Inconvenience

Participation in this study may cause some inconvenience to you. For example, there is a possibility that you may not feel comfortable if the interview takes place in the presence of other family members at your home. You are free to pick a time and date of your choice, whenever you are most comfortable.

Risks
There are no known or anticipated risks to you by participating in this research.

Benefits
The potential benefits of your participation in this research include raising awareness about the unique priorities of aging South Asian Muslim families and potentially informing public health interventions that are congruent with these needs.

Voluntary Participation
Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study your data will be used only if you give permission.

Anonymity
In terms of protecting your anonymity, all data will be de-identified, and pseudonyms will be used for all participants to protect their identity.

Confidentiality
Your confidentiality and the confidentiality of the data will be protected by storing all relevant data in a password-protected file accessible only to the researcher and the supervisor.

Dissemination of Results
It is anticipated that the results of this study will be shared with others in the following ways: in the researcher's PhD dissertation; in presentations at scholarly meetings; in published articles; on UvicSpace, an online platform for theses and dissertations for University of Victoria students, and with community members in an informal Chai (tea) and Chat session.

Disposal of Data
Data from this study will be disposed of by erasing electronic data and shredding paper copies five years after study completion.

Contacts
Individuals that may be contacted regarding this study include:
1) Mushira Khan [redacted])
2) Karen Kobayashi [redacted])

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria (250-472-4545 or ethics@uvic.ca).

Your signature below indicates that you understand the above conditions of participation in this study, that you have had the opportunity to have your questions answered by the researchers, and that you consent to participate in this research project.

_____	_____	_____
Name of Participant	*Signature*	*Date*

A copy of this consent will be left with you, and a copy will be taken by the researcher.