ABSTRACT

Title of Dissertation: PREDICTING PSYCHOLOGICAL ADJUSTMENT IN GRIEF: CROSS-NATIONAL DIFFERENCES AMONG KOREANS AND AMERICANS

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Grieving the death of a significant individual is a universal experience. However, the rituals, beliefs, and meanings surrounding death are shaped by one's cultural values. Recent scholars stressed the importance of recognizing cultural differences in bereavement, as Western-centric perspectives on grief in the bereavement literature could adversely affect clients with different cultural backgrounds (Rosenblatt, 2008). Prior research demonstrated that the constructs contributing to healthy grieving may differ across cultures. Specifically, continuing bonds, meaning-making, and social support have been identified as three constructs associated with bereaved individuals' psychological adjustment in several cultures (e.g., Gillies et al., 2015; Kim et al., 2008; Scholtes & Browne, 2015; Yang & Lee, 2020). Thus, the purpose of the present study was to examine the similarities and differences in the relations among psychological distress, salient grief-related variables (i.e., internalized/externalized continuing bonds, meaning-making, and implicit/explicit social support), and psychological adjustment among Koreans and Americans during their grieving process. The data were collected in the United States and South

Korea. The results indicated that psychological distress and one subscale of meaning-making (i.e., emptiness and meaninglessness) were associated with psychological adjustment for both US and Korean bereaved individuals. For US bereaved individuals, externalized continuing bonds and one subscale of meaning-making (i.e., being present) were positively associated with psychological adjustment, whereas one subscale of meaning-making (i.e., sense of peace) was negatively associated with psychological adjustment. For Korean individuals, implicit social support was positively associated with psychological adjustment. Overall, the results indicated that there may be both universal and culturally unique aspects of grieving. Clinical implications and future research considerations are discussed.

PREDICTING PSYCHOLOGICAL ADJUSTMENT IN GRIEF: CROSS-NATIONAL DIFFERENCES AMONG KOREANS AND AMERICANS

by

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Dedication

To grievers everywhere.

To my grandpa, my friends, and Soo who I dearly miss.

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The world is filled with things that cannot be done alone; pursuing a Ph.D. is certainly one of them.

First and foremost, I am extremely grateful to the participants who dedicated their time and energy to make this research possible. Participating in research is definitely not easy, especially when it involves a heavy topic like grief. It must have been even more challenging to do so, especially in the midst of COVID-19 when the whole world was experiencing and witnessing death and grief together. Thank you all once again for taking your precious time to share your grieving experiences.

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Finally, I want to express my deepest gratitude to my family–my dad, my mom, and my two brothers–the very roots and source of my being, whom I deeply love and appreciate. I am especially thankful to my mom and dad for allowing me to pursue this dream through their countless sacrifices. Mom and dad – I wouldn't be where I am today without your love, trust, and support. I am forever indebted to both of you, and no words can truly capture the immense love, admiration, and appreciation I hold for you. Love you both dearly.

Table of Contents

List of Tables

List of Figures

Predicting Psychological Adjustment in Grief:

Cross-National Differences among Koreans and Americans

Losing someone to death and grieving this loss is a universal experience. However, the rituals, meaning of death, and response to death is shaped by the values of one's culture (Hayslip & Peveto, 2005; Rosenblatt, 2008; Stroebe et al., 2003). Few cross-cultural studies related to the grieving process have been conducted (Rosenblatt, 2008); the constructs that contribute to healthy grieving likely differ across cultures, especially with regard to Eastern and Western cultures (e.g., Lalande & Bonanno, 2006; Splevins et al., 2010; Yang et al., 2015; Yang & Lee, 2020). In fact, three constructs have been shown to be related to psychological adjustment to loss in several cultures: continuing bonds, meaning making and social support (Bailey et al., 2013; Choi & Ahn, 2013; Huang et al., 2021; Kreicbergs et al., 2007; Lee & Kwon, 2015; Neimeyer, 2001; Yang & Lee, 2020). Maintaining continuing bonds (e.g., thinking of the deceased, visiting places that feel close to the deceased) often facilitates grieving (e.g., Field & Filanosky, 2010; Klass et al., 2014). Similarly, meaning making, which refers to the ability to seek personal meaning in challenging situations through a conscious process, was related to psychological adjustment in bereaved individuals (Holland et al., 2006; Van den Heuvel et al., 2009; Yang & Lee, 2020). Finally, social support (e.g., psychological and material resources from others) predicted psychological adjustment after loss (Kim et al., 2008).

The purpose of the current study was to investigate the similarities and differences in the relations between psychological distress, salient psychosocial grief variables (i.e., externalized/internalized continuing bonds, meaning making, and explicit/implicit social support), and psychological adjustment among Koreans and Americans during their grieving process. This cross-national study would advance understanding regarding the universal and

unique aspects of grieving across cultures. Findings from this study would enable therapists to provide culturally specific interventions to enhance psychological adjustment for bereaved individuals in South Korea and the United States.

Grieving

Grief refers to the emotional reaction that individuals experience after loss, including the death of a loved one (American Psychological Association, n.d.). Grief is prevalent; according to a recent US survey, 35% of Americans are grieving the death of loved ones over the last three years (Koenig, 2019). While the grieving process is unique, individuals often experience psychological distress immediately after experiencing the loss in addition to somatic, cognitive, emotional, and behavioral reactions (Holland et al., 2006; Nolen-Hoeksema & Larson, 2013). For example, grieving individuals experience physical (e.g., sleep disturbances, exhaustion, weight change, headaches), cognitive (e.g., memory loss, difficulty concentrating/making decisions, preoccupation with loss, suicidal ideation, emotional (e.g., shock, numbness, sadness, loneliness, denial, anger, guilt, yearning, irritability, feeling depressed/helpless), and behavioral (e.g., neglecting oneself, substance abuse, loss of interest in other activities) symptoms. Coping with loss takes time; in a recent survey, nearly 70% of Americans reported that grief was intense for 12 months after experiencing the death of a loved one (Koenig, 2019).

Grief Outcomes

The initial reactions to loss tend to subside over time, but some grieving individuals experience persistent elevated grief symptoms, including intense and prolonged grief, which sometimes has a negative impact on physical and mental health (Shear et al., 2013). These symptoms may include intense sadness and emotional pain, long-term functional impairment, yearning for or preoccupation with the deceased, lacking meaning and feeling that life is empty

without the deceased, strong denial of the loss, emotional numbing, and difficulty adapting to life without the deceased (Mughal et al., 2020; Prigerson et al., 2009; Shear & Shair, 2005; Shear et al., 2005). Conversely, some bereaved individuals ultimately experience positive outcomes from their experience of loss, such as appreciating the relationship with the deceased, maintaining continuing bonds with the deceased, gaining personal growth, realizing their strengths, and having a new view of their future (Calhoun et al., 2010; Gilles & Neimeyer, 2006).

Cultural Differences in Grieving

Culture plays a significant role in the way that loss is perceived, experienced, expressed, felt, understood, and processed ("New Philosopher Korea," 2020). Scholars stressed the importance of understanding cultures and traditions related to death and grief because they inform the way that people respond to death and influence their grieving process (Rosenblatt, 2008). In the grief literature, the ethnocentrism of focusing on Western practices of bereavement has been criticized because the assumption that Western perspectives on grief are universal can be highly detrimental (Ngo et al., 2019; Rosenblatt, 2008). Thus, cross-cultural studies are needed to understand the universal patterns and culturally unique aspects of grieving (Rosenblatt, 2008).

To understand grief within a cultural context, this present study focused on examining the differences in psychological processes during the grieving processes among Koreans and Americans. Specifically, the current study compared two cultures that varied on individualism-collectivism to uncover differences that may exist between individualistic cultures (i.e., the United States) and collectivistic cultures (i.e., South Korea; e.g., Walter, 2010). Previous studies indicated that individualism-collectivism may play a role in individuals' grieving process and values, particularly with regard to belief systems, perspectives on death, and ways of providing

support (Oyserman & Lee, 2008; Pearson et al., 2009; Walter, 2010). Individualism-collectivism also may influence bereaved individuals' meaning making, continuing bonds, and social support. Though there may be within group differences among bereaved individuals in the US based on their identities and cultural backgrounds (Clements et al., 2003; Laurie & Neimeyer, 2008; Schoulte, 2011; Rosenblatt & Wallace, 2013), differences also exist within any one racial group in the United States. Furthermore, the trend toward increasing individualism in the United States was associated with rising ethnic diversity in the United States, suggesting that individuals under the same sociocultural systems in the US might likely uphold individualistic values regardless of their cultural backgrounds (e.g., Huynh & Grossmann, 2020). Thus, the grief experiences of both Koreans and Americans were examined in this study.

Theory

This study drew upon three theoretical models related to the constructs of interest: the Continuing Bonds Theory, the Meaning Reconstruction Model, and the Stress-Buffering Model.

The Continuing Bonds Theory

The Continuing Bonds Theory posits that having continuing bonds with the deceased is a natural and healthy aspect of grieving (Klass et al., 2014). Influenced by Bowlby's Attachment Theory (Bowlby, 1969, 1980), this theoretical model postulates that grieving individuals are naturally drawn to seek proximity to the deceased and maintain bonds with the deceased, including both externalized and internalized continuing bonds (Klass et al., 2014; Scholtes & Browne, 2015; Stroebe et al., 2010). The theoretical model asserts that maintaining continuing bonds during the grieving process may facilitate adaptation (Klass et al., 2014).

The Meaning Reconstruction Model

The Meaning Reconstruction Model (Gillies & Neimeyer, 2006; Neimeyer, 2001) posits that psychological distress increases after the death of a loved one, which leads some grievers to engage in a meaning-making process. While going through the meaning-making process, bereaved individuals often question or challenge their pre-loss meaning structures. If grieving individuals make or reconstruct meaning, they experience better psychological adjustment. The proposed steps of the meaning-making process are as follows: (a) Pre-loss meaning structures, (b) Increased psychological distress after losing someone to death, (c) Engagement in the meaning-making process, (d) Post-loss – developing new meaning structures, and (e) Decreased distress (better psychological adjustment).

The model proposes that grieving individuals may initiate sense making, benefit finding, and identity change after the death of a loved one. Sense making refers to the process of finding or creating a sense of understanding the loss (e.g., "making sense" of the loss). Benefit finding refers to finding some positive to stem from the loss. Finally, identity change refers to the positive or negative reconstruction of self. Going through the meaning-making process may facilitate adjustment (Gillies & Neimeyer, 2006).

Stress-Buffering Model

The Stress-Buffering Model proposes that social support protects or buffers individuals from the harmful effects of stress on health and well-being in two ways (Cohen & Wills, 1985; Rodriguez & Cohen, 1998). First, perceived social support can influence appraisals of the stress associated with an event by enhancing perceptions about the ability to cope with the demands imposed by an event. Consequently, the negative event may be seen as less stressful and less potentially harmful. Second, perceived social support may reduce stress by enhancing coping efforts to deal with the emotional consequences of the event. Thus, based on this theoretical

model, it was anticipated that high levels of social support would be associated with psychological adjustment.

Continuing Bonds, Meaning Making, and Social Support

In the following sections, the main variables of the current study (i.e., internalized/externalized continuing bonds, meaning-making, and implicit/explicit social support) and the cultural comparisons of research findings related to these variables were reviewed.

Continuing Bonds

Although some prior literature proposed that severing the relationship with the deceased helped grieving individuals' adjustment, recent scholars contended that continuing bonds with the deceased can facilitate psychological adjustment after loss (Klass et al., 2014).

Continuing bonds refer to the presence of an ongoing relationship with the deceased by grieving individuals (Field et al., 2003; Klass et al., 2014). Specifically, there are two types of continuing bonds: externalized continuing bonds and internalized continuing bonds. Externalized continuing bonds refer to external experiences that grieving individuals engage in to connect with the deceased (e.g., Field et al., 2013). For example, keeping possessions that belonged to the deceased and telling others that they miss the deceased would be some examples of externalized continuing bonds. In contrast, internalized continuing bonds refer to internal experiences that grieving individuals engage in to connect with the deceased (Black et al., 2020; Field & Filanosky, 2010; Field et al., 2013; Scholtes & Browne, 2015). For example, having a belief that they have an ongoing connection with the deceased and feeling comforted by memories of the deceased are examples of internalized continuing bonds. In the past, measures of externalized continuing bonds included experiencing illusions and hallucinations of the deceased and

maintaining bonds with the deceased was considered to reflect unresolved grief (e.g, Field & Filanosky, 2010). More recently and in the current study, externalized continuing bonds are not perceived as including illusions and hallucinations, but rather external experiences that grieving individuals engage in to maintain continuing bonds with the deceased (e.g., keeping the deceased's possessions, participating in funeral and death anniversary traditions; Klass, 2001; Lee & Kang, 2020; Yu et al., 2016a). Furthermore, thanatology scholars no longer consider externalized continuing bonds as solely being reflective of "unresolved" stages of grief (Klass et al., 2014; Valentine, 2009).

Interestingly, empirical research demonstrated that the two types of continuing bonds showed different results with regard to psychological adjustment. For example, in some studies, internalized continuing bonds were associated with psychological adjustment, while externalized continuing bonds were associated with poor adjustment (e.g., Field & Filanosky, 2010; Scholtes & Browne, 2015) for some individuals.

Continuing Bonds Related to Distress and Adjustment – Findings from the US/Other Western Countries. Empirical findings suggested mixed results on the relation between continuing bonds and psychological adjustment, especially when the studies did not distinguish between internalized and externalized continuing bonds. Bereaved individuals reported that maintaining continuing bonds with the deceased helped them have a positive mood, less blame toward the deceased, and inner strength and personal motivation for a better adjustment (Field & Friedrichs, 2004; Meert et al., 2015). However, other studies found that continuing bonds were associated with greater grief intensity, negative distress, negative grief symptoms, and prolonged grief (Currier et al., 2015; Field et al., 2003; Neimeyer et al., 2006). Higher levels of continuing bonds with unexpected loss or during an early grieving phase were

associated with negative moods and poor adjustment (Field & Friedrichs, 2004; Lalande & Bonanno, 2006; Stroebe et al., 2012).

Interestingly, research that distinguished between internalized and externalized continuing bonds yielded different findings related to psychological adjustment. For example, internalized continuing bonds were associated with less grief intensity and higher personal growth (Gamino et al., 2000; Field & Filanosky, 2010; Scholtes & Browne, 2015), while externalized continuing bonds were associated with more negative grief outcomes (Boelen et al., 2006; Field & Filanosky, 2010; Scholtes & Browne, 2015).

Continuing Bonds Related to Distress and Adjustment – Findings from South Korea/East Asia. Empirical research on continuing bonds is scarce in South Korea. Among Korean bereaved individuals, one study found that continuing bonds were associated positively with personal growth and deeper relations with others (Kim et al., 2016). Furthermore, maintaining externalized continuing bonds with the deceased, such as keeping the deceased's possession, was associated with psychological adjustment among Korean bereaved women (Lee & Kang, 2020).

In addition, cultural differences were found regarding how individuals maintained continuing bonds, especially in the Western and Eastern cultures (Valentine, 2009). For instance, Japanese bereaved individuals engaged in externalized continuing bonds (e.g., rituals often rooted in Buddhism), while bereaved individuals in Western countries such as the United Kingdom and the United States engaged in internalized continuing bonds (Klass, 2001; Valentine, 2009). Although there may be differences in the way people engage in maintaining continuing bonds, the similarity of the inner state of the grieving process was recognized for Japanese and North Americans (Klass, 2001). Similarly, in a cross-cultural study, Chinese

bereaved individuals who initially engaged in higher levels of continuing bonds had better psychological adjustment (Lalande & Bonanno, 2006).

Yet, mixed results were found in the relations between externalized and internalized continuing bonds and psychological adjustment among East Asians. For example, similar to Western empirical studies, internalized continuing bonds were positively associated with psychological adjustment among Chinese and Hong Kong grieving individuals (Ho et al., 2013; Yu et al., 2016b). On the other hand, externalized continuing bonds were negatively associated with grief symptoms and psychological adjustment among Hong Kong and Mainland Chinese bereaved individuals (Ho et al., 2013; Yu et al., 2016a), but also positively associated with psychological adjustment among Chinese bereaved individuals (Yu et al., 2016b).

Similarities/Differences. Based on previous research, it was expected that internalized continuing bonds facilitated better psychological adjustment in both cultures, whereas externalized continuing bonds might have inconsistent associations with psychological adjustment, particularly in Eastern cultures. Further investigation was needed to examine how externalized continuing bonds play a role in Korean bereaved individuals' psychological processes, as mixed results have been found among other East Asians. Moreover, studies that examined externalized continuing bonds among Chinese and Hong Kong bereaved individuals used a scale that assessed externalized continuing bonds as including illusions and hallucinations (e.g., Field & Filanosky, 2010; Ho et al., 2013; Yu et al., 2016a; Yu et al., 2016b), as well as East Asian cultural context influences on continuing bonds (e.g., engaging in external experiences to maintain continuing bonds with the deceased like annually making offerings at the graves of the deceased; Ho et al., 2013; Yu et al., 2016a). Thus, it would be critical to assess continuing bonds using a broad definition of externalized continuing bonds and understand how

different types of continuing bonds may play a role in grieving individuals' psychological adjustment in different cultural contexts.

Meaning Making

Meaning making refers to a process whereby grieving individuals construct meaning about their loss (Gillies & Neimeyer, 2006). According to the Meaning Reconstruction Model, grieving individuals construct and/or reconstruct the following meaning structures, which may facilitate psychological adjustment: New activities and re-examined priorities, new self/personal growth, new relations with living and continuing bonds with dead, new view of the future, new outlook, and new faith and spirituality (Gillies & Neimeyer, 2006).

Meaning Making Related to Distress and Adjustment – Findings from the US

Bereaved individuals often seek meaning after experiencing the death of a loved one. For example, bereaved individuals whose children died from cancer sought meaning to explain the death (Barrera et al., 2013). Similarly, in one study, 70 to 80% of grieving individuals either sought meaning or were concerned with the issue of the meaning after the death of their loved one (Davis et al., 2000). Grieving individuals constructed new meaning during the later phase of their grieving process, which suggested that meaning may be a crucial component for coping with loss (Nolen-Hoeksema & Larson, 2013). Meaning making also may alleviate psychological distress as studies found that meaning making helped overall adjustment among grieving individuals (Currier et al., 2006; Davis et al., 2000; Holland et al., 2006; Lichtenthal et al., 2010). Moreover, those who made little to no sense of their loss reported greater intense and enduring grief symptoms than those who scored higher on meaning-making (Keesee et al., 2008). Those who did not find meaning reported intense suffering (Murphy et al., 2003).

Meaning Making Related to Distress and Adjustment – Findings from South Korea. Few studies have been conducted on meaning-making and psychological adjustment in South Korea. For example, college students whose parents died and found meaning after going through the grieving process had high levels of posttraumatic growth (Yoon et al., 2013). In another study, meaning making was associated negatively with grief symptoms, while it was associated positively with personal growth and other healthy coping variables including problem-centered coping among Korean individuals (Choi & Ahn, 2013; Yang & Lee, 2020).

Similarities/Differences. Although empirical studies conducted in South Korea and the United States showed some similar results regarding the associations between meaning-making and psychological adjustment, several differences were found. With regard to similarities, meaning making was associated negatively with grief symptoms and prolonged grief but was associated positively with personal growth among Korean and American grieving individuals (Choi & Ahn, 2013; Gillies et al., 2015). However, these studies used different research instruments (e.g., including a single-item measure to assess level of meaning-making) and covered different types of losses (e.g., focusing on traumatic loss, specific populations). Thus, further research was needed to assess how meaning-making is associated with grieving individuals' psychological adjustment across cultures.

Social Support

Social support refers to the psychological and material resources available to individuals through their social networks (Rodriquez & Cohen, 1998). There are two types of social support: explicit social support and implicit social support. Explicit social support refers to interactions involving active disclosure and discussion of problems and request for assistance (Kim et al., 2008). For example, emotional/information support (i.e., emotional support and guidance or

advice) and tangible support (i.e., material aid or assistance) are examples of explicit social support. On the other hand, implicit social support refers to the emotional comfort one obtains from social networks which sometimes occurs without disclosing or discussing problems about specific stressful events (Kim et al., 2008). For example, positive social interaction (i.e., provided by individuals with whom it is fun to do things) and affectionate support (i.e., the degree to which individuals receive affection and the feeling of being loved from others) are examples of implicit social support (Yang et al., 2015).

Social Support Related to Distress and Adjustment – Findings from the US. Mixed results were found related to grieving individuals' social support and psychological adjustment. Social support has been considered a protective factor for mental health, especially for those who experienced sudden losses (Bailey et al., 2013; Lakey & Orehek, 2011). Furthermore, previous studies showed that social support facilitates the grieving process (Kreicbergs et al., 2007). For instance, among parents whose child died from cancer, those who sought social support and had access to psychological support were more likely to have coped with their grief (Kreicbergs et al., 2007). Social support also was associated negatively with prolonged grief disorder among adults and predicted low levels of depression among bereaved women (Boulware & Bui, 2016; Stroebe et al., 2005), suggesting that social support may buffer negative impact of psychological distress. Yet, social support did not have a buffering or a recovery effect in other studies (Stroebe et al., 2005), which called for further investigation about the impact of social support on bereaved individuals' psychological processes.

Social Support Related to Distress and Adjustment – Findings from South Korea. Overall, the presence of social support was associated negatively with Korean grieving individuals' psychological distress. Grieving individuals expressed their frustrations with social

isolation, which sometimes led to emotional distress and depression (i.e., Lee et al., 2005). Social support decreased suicidal ideation among older Korean bereaved individuals (Lee & Kwon, 2015), suggesting that social support play a critical role in alleviating bereaved individuals' psychological distress and facilitating adjustment.

With regard to the types of social support, Korean bereaved individuals who lost their loved ones to death due to the Sewol Ferry disaster experienced social support in the form of other people enduring challenging times with them, which helped them cope with their grief. These bereaved individuals found it helpful when they received implicit social support; having people who listened to them by their sides without providing any tangible support helped alleviate psychological distress. Isolated individuals (i.e., both due to intrapersonal and interpersonal reasons) were at-risk for negative psychological outcomes such as depression and suicidal ideation (Lee et al., 2017), demonstrating that social support was a crucial component in the grieving process.

Recently, researchers proposed that there were cultural differences in psychological outcomes based on types of social support, i.e., implicit versus explicit social support (Kim et al., 2008). Koreans utilized both explicit/implicit social support, but explicit social support was associated with negative emotions among Koreans (Kim et al., 2008). This could indicate that explicit social support may hinder psychological adjustment among Koreans.

Similarities/Differences. In the grief literature, the relation between social support and psychological well-being differed by race/ethnicity (Laurie & Neimeyer, 2008). There also were cultural differences in terms of seeking different types of social support (e.g., explicit/implicit social support). Koreans relied heavily on implicit social support to cope with daily stressors compared to Americans, while Americans relied predominantly on explicit social support

compared to Koreans (Kim et al., 2008). Americans' daily life satisfaction was predicted by explicit social support, while Koreans' daily life satisfaction was predicted by both implicit and explicit social support. Interestingly, Koreans' explicit social support was associated with negative emotion (i.e., regret, shame), while this was not true for Americans. Some researchers proposed that cultural differences with respect to social support may be due to differences in preferences for using different communication styles (e.g., Kim et al., 2008). For example, previous research noted that Asians tend to prefer utilizing high-context communication styles (e.g., inferring meaning) due to collectivistic cultures, whereas European Americans tend to utilize low-context communication styles (e.g., precise and direct communication; Kim et al., 2008; Park & Kim, 2008).

A Rationale for the Proposed Model

Grounded in three theoretical models (i.e., the Continuing Bonds Theory, the Meaning Reconstruction Model and the Stress-Buffering Model), a model was developed to explain the relations among psychological distress, continuing bonds, meaning making, social support and psychological adjustment in grieving individuals (see Figure 1). The current study included two types of continuing bonds because the literature and previous empirical studies indicated that each type of continuing bond plays a different role in bereaved individuals' psychological adjustment. Moreover, the current study included meaning-making because previous empirical research indicated that meaning-making facilitated psychological adjustment among bereaved individuals. Finally, two types of social support were included because previous studies indicated that each type of social support played a different role in bereaved individuals' psychological adjustment in different cultural contexts.

To compare the model fit indices of the proposed model between two different groups, measurement invariance was assessed to test the assumption that the instruments measured the same psychological constructs in all groups. If this assumption was supported, differences and similarities between both groups would be interpreted (Milfont & Fischer, 2010). Detailed information regarding the findings related to measurement invariance in this study is delineated in the data analyses section.

Prior research demonstrated that high levels of psychological distress were associated with considerable engagement in internalized and externalized continuing bonds among bereaved individuals in both cultures (see Figure 1; paths a & c; e.g., Choi & Ahn, 2013; Klass et al., 2014; Lalande & Bonanno, 2006; Lee & Kang, 2020; Scholtes & Browne, 2015; Yu et al., 2016a). Accordingly, the paths from psychological distress to internalized and externalized bonds in the proposed model were hypothesized to be positive for both Korean and American bereaved individuals. Moreover, based on previous research, the current study predicted that high levels of internalized continuing bonds would be associated with high levels of psychological adjustment among Koreans and Americans (see Figure 1; path d; e.g., Ho et al., 2013; Klass, 2001; Lalande & Bonanno, 2006; Scholtes & Browne, 2015; Yu et al., 2016b). Also, it was hypothesized that internalized continuing bonds would mediate the relations between psychological distress and psychological adjustment for Koreans and Americans. Based on the previous literature and research findings, high levels of externalized continuing bonds were expected to be associated with low levels of psychological adjustment among Americans (see Figure 1; path b; e.g., Scholtes & Browne, 2015), whereas the relations between externalized continuing bonds and psychological adjustment remained unclear for Koreans (e.g., Ho et al., 2013; Klass, 2001; Kim et al., 2016; Lalande & Bonanno, 2006; Yu et al., 2016b).

Accordingly, this study investigated the direction of the relation between externalized continuing bonds and psychological adjustment for Koreans. In addition, the current study investigated if externalized continuing bonds mediated relations between psychological distress and psychological adjustment for Koreans. For Americans, it was hypothesized that externalized continuing bonds would mediate relations between psychological distress and psychological adjustment.

In terms of the relations among psychological distress, meaning making, and psychological adjustment, empirical investigations demonstrated that high levels of psychological distress were positively associated with meaning making (see Figure 1; path e; e.g., Gillies & Neimeyer, 2006; Stroebe & Schut, 2001; Yang & Lee, 2020). Thus, the paths from psychological distress to meaning making were expected to be positive among Korean and American bereaved individuals. Based on the Meaning Reconstruction Model and previous empirical studies, high levels of meaning making were expected to be associated with better psychological adjustment among Koreans and Americans (see Figure 1; path f; e.g., Choi & Ahn, 2013; Currier et al., 2006; Davis et al., 2000). Moreover, it was hypothesized that meaning making would mediate the relations between psychological distress and psychological adjustment for Koreans and Americans.

Based on previous literature and empirical studies (e.g., Kreicbergs et al., 2007; Kim et al., 2008; Lee et al., 2017; Yang et al., 2015), the relations among psychological distress, explicit/implicit social support, and psychological adjustment were hypothesized to differ among Koreans and Americans. Specifically, it was hypothesized that explicit social support would moderate the relations between psychological distress and psychological adjustment for Americans but not with Koreans (see Figure 1; paths g & h), while implicit social support would

moderate the relations between psychological distress and psychological adjustment for Koreans but not for Americans (see Figure 1; paths g & i). Finally, although this was not part of the original hypotheses, group differences in the use of high- and low-context communication styles were assessed, as previous research highlighted cultural differences in the use of different communication styles and their associations with social support (e.g., Kim et al., 2008; Park & Kim, 2008).

Method

Procedure

First, flyers with an invitation to participate in the study were distributed via email (e.g., personal contacts), listservs (e.g., UMD, American Psychological Association, Association for Death Education and Counseling), professional network website boards (e.g., Korean Counseling Psychological Association, Korean Counseling Association), and social network websites (e.g., Reddit, Facebook, Instagram) relevant to grief and bereavement. Second, US participants were recruited from a research company, *Cloud Research*, and Korean participants were recruited from a research company, *Invight*. Both *Cloud Research* and *Invight* were paid to obtain data for this investigation. Both companies are committed to maintaining data integrity in the data collection process in the United States and South Korea, respectively. The data were collected between November 2021 and July 2022. Specifically, the data obtained through personal recruitment were collected between November 2021 and March 2022, while data collection through research companies occurred between June 2022 and July 2022.

The survey included three screening questions to ensure that the participants met inclusion criteria, i.e., they were (a) 18 years or older, (b) either American or Korean, and (c) experienced the death of a significant individual in the past year (see Appendix B). If participants

met study criteria, they were provided with informed consent documents. Individuals who were interested in the study clicked a survey link to review the informed consent form. Those who provided consent could continue to the online survey. The informed consent form included a statement that participants could feel discomfort or distress as a result of answering the grief-related questions in the survey. After providing consent, participants could continue to the pre-demographic survey. Then, measures of psychological distress, continuing bonds, meaning making, social support, and psychological adjustment were presented in counterbalanced order. Finally, participants completed the post-demographic survey (see Appendix E).

After participants completed the survey, contact information for the researchers and resources related to grief and grief counseling were provided. Finally, participants who participated in the study through flyers clicked a link after completing the survey, which directed them to a different survey that asked them to provide their contact information if they wanted to be eligible to win one of 15 $50 gift cards. Those who participated through the flyer recruitment also were asked if they are willing to be contacted to participate in future research related to this study. Individuals who were recruited through the research companies received $8 after completing the survey.

Participants

Participants of the current study were Americans (n = 446) and Koreans (n = 433), for a total sample of 879 individuals who were 18 years old or older and experienced the death of a significant individual in the past year.

For the US, 835 individuals accessed the survey. 319 individuals accessed the survey recruited by the researcher, and 516 individuals accessed the survey through the research company. Among them, 729 participants provided consent to participate in the study. 36

individuals were removed from the analyses as they did not provide the correct answer for the screening question, and 178 participants failed to answer the validation questions correctly and thus were removed from the analyses. Another 69 participants were removed (63 due to completing the survey in less than 10 minutes; 4 due to suspicious responses that had the same start and end date, IP addresses, and identical demographic data; two due to completing less than 80% of the survey). As a result, 446 participants (i.e., 82 from the researcher recruitment, 364 from the research company recruitment) were included in the final US sample.

The US participants' ages ranged from 18 to 80 years, with a mean age of 38.52 (*SD* = 12.21). Participants included cisgender female (57.6%), cisgender male (40.6%), genderqueer/gender nonbinary (1.6%), trans female (0.2%), and other (0.2%). US participants included White/European American (74.3%), Black/Afro Caribbean/African American (14.3%), Latino/Hispanic American (9.4%), Asian/Asian American (5.4%), American Indian/Alaska Native/Native Hawaiian/Other Pacific Islander (3.6%), and other (0.6%). Participants' generation status was as follows: 3rd or higher generation (76.0%), 2nd generation (16.6%), 1st generation (3.6%), 1.5 generation (2.0%), do not know (1.1%), and other (0.7%). In terms of sexual orientation, 359 reported as straight or heterosexual (80.5%), bisexual (12.1%), gay, lesbian, or homosexual (2.7%), asexual (1.8%), other (1.8%), and prefer not to say (1.1%). Participants' religious/spiritual identify was as follows: Christian (38.6%); agnostic (19.3%); Catholic (13.2%), atheist (11.4%), spiritual (8.7%), other (4.0%), Buddhist (1.3%), Jewish (1.1%), Deist (0.9%), Hindu (0.7%), and Muslim (0.7%).

For the Korean survey, 565 individuals accessed the survey. 115 individuals accessed the survey recruited by the researcher, and 450 individuals accessed the survey through the research company. Among them, 515 participants provided consent to participate in the study. Forty-four

participants failed to answer the validation questions correctly and were removed from the analyses. Another 38 participants were removed (37 due to completing the survey in less than 10 minutes; 1 due to completing less than 80% of the survey). As a result, 433 Korean participants (i.e., 38 from the researcher recruitment, 395 from the research company recruitment) were included in the final Korean sample.

Korean participants' ages ranged from 19 to 77 years, with a mean age of 54.40 (*SD* = 10.37). Participants included cisgender male (57.7%), cisgender female (41.8%), genderqueer/gender nonbinary (0.2%), and trans male (0.2%). All 433 Korean participants identified as Korean (100%), where one participant identified as biracial White Korean (0.2%). Participants' sexual orientation was as follows: straight or heterosexual (89.4%), bisexual (4.6%), asexual (2.8%), other (2.8%), and prefer not to say (0.5%). Participants' religious/spiritual identify was as follows: Atheist (44.3%), Christian (24.5%), Buddhist (16.6%), Catholic (11.3%), other (1.4%), agnostic (0.9%), and spiritual (0.9%). More detailed information about the demographics of the participants is listed in Table 1 and Table 2.

Descriptive statistics related to the experience of loss for the US participants were as follows. With respect to the person who died in the past year, participants reported that they lost other family members (40.6%), their close friends (27.4%), fathers (16.4%), mothers (13.0%), siblings (7.0%), unmarried romantic partner (4.7%), others (4.3%), and married or engaged partner (2.5%). The cause of the death was as follows: cancer (19.7%), COVID-19 (18.6%), other (17.5%), heart disease (11.9%), accidents (i.e., unintentional injuries; 10.3%), stroke (4.9%), do not know (4.5%), intentional self-harm (i.e., suicide; 4.3%), chronic lower respiratory diseases (2.7%), Alzheimer's disease (1.8%), diabetes (1.6%), influenza and pneumonia (1.3%), and nephritis, nephrotic syndrome, and nephrosis (0.9%).

The majority of participants (86.4%) felt very close (62.6%) or moderately close (23.8%) to the deceased prior to the loss, and over 70% reported that they currently feel very close (46.4%) or moderately close (24.2%) to the deceased. In terms of the intensity of their feelings after experiencing the loss, roughly 90% of the participants felt very intense (69.5%) or moderately intense (20.0%). At the time of completing the survey, the intensity of their feelings related to their loss seemed changed over time; participants responded that they were feeling moderately intense (28.0%), somewhat intense (24.4%), very intense (23.1%), a little intense (20.2%), and not intense at all (4.3%).

Descriptive statistics related to the experience of loss for the Korean participants were as follows. With respect to the person who died in the past year, participants reported that they lost their close friends (33.0%), other family members (26.8%), others (18.9%), mothers (12.0%), fathers (10.9%), siblings (6.9%), married or engaged partner (0.9%), and unmarried romantic partner (0.2%). The cause of the death was as follows: cancer (27.9%), other (15.5%), accidents (i.e., unintentional injuries; 10.2%), heart disease (9.7%), COVID-19 (7.4%), stroke (6.0%), do not know (6.0%), intentional self-harm (i.e., suicide; 4.4%), Alzheimer's disease (3.5%), chronic lower respiratory diseases (3.0%), influenza and pneumonia (2.8%), nephritis, nephrotic syndrome, and nephrosis (2.3%), and diabetes (1.4%).

The majority of participants (67.2%) reported that they felt very close (37.9%) or moderately close (29.3%) to the deceased prior to the loss, and over 60% reported that they currently feel moderately close (34.9%) or very close (27.7%) to the deceased. In terms of the intensity of their feelings after experiencing the loss, more than half of the participants felt moderately intense (30.0%) or very intense (27.3%); 105 participants (24.2%) felt somewhat intense. At the time of completing the survey, participants responded that they were feeling

somewhat intense (33.0%), a little intense (26.1%), moderately intense (22.4%), very intense (11.5%), and not intense at all (6.9%).

Measures

Demographics

Screening Questions. Three screening questions asked participants' age (whether they are 18 years of age or older), their race/ethnicity (whether they identify as American, Korean, or other), and if they experienced the death of a significant individual in the past year (see Appendix B). A significant individual is defined as someone who is important or has a profound influence on another person (American Psychological Association, n.d.), and this definition was provided below the question. This term was selected among other terms describing the deceased (e.g., a loved one) so that potential participants who experienced the death of a significant individual (but may not identify the deceased as their loved one) would be eligible for inclusion in this study.

Validity Questions. Two validity check items (e.g., "Please select *strongly agree* for this item," "Please select *strongly disagree* for this item") and the Qualtrics check item (e.g., "I am not a robot" checkbox) were included to ensure active engagement in the survey (see Appendix C).

Pre-Demographic Questions. The pre-demographic questions consisted of eight questions regarding the death of a significant individual (i.e., the relationship with the deceased, who they would think of when completing the survey, the cause and the intensity of their feelings regarding the loss, when the death occurred, the levels of closeness with the deceased before their death and now, the intensity of their feelings immediately after the loss and now; see Appendix D).

Post-Demographic Questions. The post-demographic questions consisted of general demographic questions including age, date of birth, gender, race, ethnicity, generation status, marital status, socioeconomic status, sexual orientation, educational background, religion, and religious/spiritual identity, and religiosity. In addition, the questionnaire included an optional open-ended question asking the following question: "We are interested in your grief experiences. Would you like to tell us about your grief journey? This can be related to your meaning-making process, maintaining continuing bonds with your deceased loved one(s), receiving/providing social support, or anything that is salient to you" (see Appendix E).

Reimbursement Questions. The reimbursement questions asked for date of birth, email address, and their interest in participating in a follow-up study (see Appendix F).

Translation. All of the aforementioned demographic questions went through a translation and back-translation process (Maneesriwongul & Dixon, 2004). First, the questions were translated from English to Korean by the author of this dissertation. Then, a bilingual counseling psychology doctoral student back-translated the translated scale into English. Then, a third bilingual researcher and the author compared the original items and the translated items and check the level of congruence, using the 5-point Likert scale which ranges from 1 (*the meaning of the item is not congruent*) to 5 (*the meaning of the item is congruent*). Only the items that received a score of 4 or 5 in this process were accepted, while the items that scored 3 or below went through the translation and back-translation process again until the level of congruence received a score of 4 or 5.

Psychological Distress

The Kessler Psychological Distress Scale (K10; Kessler et al., 2002; see Appendix G) was used to measure level of psychological distress. The scale consists of 10 items on a 5-point

Likert scale ranging from 1 (*none of the time*) to 5 (*all of the time*). Example items include: "During the last 30 days, about how often did you feel so nervous that nothing could calm you down?," "During the last 30 days, about how often did you feel hopeless?," and "During the last 30 days, about how often did you feel that everything was an effort?." A total score was calculated by adding scores on the items, with high scores relating to severe psychological distress. Reliability estimates were adequate in the original study (α = .93; Kessler et al., 2002). Support for validity was demonstrated in prior studies as scores on the K10 were correlated positively with anxiety, depression, and post-traumatic stress (Blanc et al., 2015). In the current study, the reliability estimate for the American sample was .94.

The Korean version of the Kessler Psychological Distress Scale was used for Korean participants (Kim, 2011; see Appendix H). Adequate internal consistencies were found with the Korean samples (α = .92~.94; Kim, 2011; Min & Lee, 2015). Support for validity was demonstrated in prior studies as scores on the K10 were positively correlated with suicidal ideation (Kim et al., 2016). In the current study, the reliability estimate for the Korean individuals was .94.

Internalized/Externalized Continuing Bonds

The Internalized and Externalized Continuing Bonds Scale (Scholtes & Browne, 2015; see Appendix I) was used to measure level of internalized and externalized continuing bonds. The scale consists of three scales with a total of 25 items on a 5-point Likert scale ranging from 1 (*never*) to 5 (*very often*). Two of the subscales were used in this study: Internalized continuing bonds and externalized continuing bonds. Example items include: Internalized bonds (11 items; e.g., "I believe that I have an ongoing connection with the deceased"), externalized bonds (9 items; e.g., "I have inner conversations with the deceased"). One item (i.e., "I find comfort in

looking at pictures/videos/DVDs of the deceased") was changed to "I find comfort in looking at pictures/videos of the deceased" because DVDs are considered obsolete. In addition, one additional item (i.e., "I partake in rituals such as candle lighting, balloon or butterfly releasing in remembrance of the deceased") was changed to be more inclusive and reflect more culturally diverse examples of maintaining continuing bonds with the deceased: "I partake in rituals (e.g., candle/incense lighting, balloon/butterfly releasing, displaying photos of the deceased, practicing special rituals during the holidays, offering food to the deceased) in remembrance of the deceased" (e.g., Castle & Phillips, 2003; Lee & Kang, 2020; Sas & Coman, 2016; Sas et al., 2016).

A total score was calculated by adding scores on the items. High scores on the measure indicated that individuals had high levels of continuing bonds with the deceased. Specifically, high levels of externalized continuing bonds indicated that individuals engaged in concrete actions or activities in the external world to connect with the deceased, whereas high levels of internalized continuing bonds indicated that individuals engaged in internal mental processing to connect with the deceased. In the current study, the reliability estimates for American individuals were as follows: Internationalized continuing bonds: $\alpha = .90$; externalized continuing bonds: $\alpha = .83$.

Reliability estimates in prior research with bereaved individuals in Western countries were adequate: Internalized continuing bonds ($\alpha = .85$) and externalized continuing bonds ($\alpha = .72$; Scholtes & Browne, 2015). Support for validity was demonstrated in the prior study with grieving individuals as the externalized continuing bonds subscale was positively associated with grief intensity but negative correlated with personal growth, while the internalized continuing

bonds subscale was vice versa, indicating that internalized continuing bonds are associated with positive grief adaptation but not externalized continuing bonds (Scholtes & Browne, 2015).

The current scale is available in English but not in Korean. Thus, a translation and back-translation process was used to translate the scale (see Appendix J; Maneesriwongul & Dixon, 2004). The procedure was described in the demographics section. In addition, a confirmatory factor analysis was conducted in the current study to verify the factor structure for the Korean sample (e.g., Kline, 2015). In the current study, the reliability estimates for Korean individuals were as follows: Internationalized continuing bonds: $\alpha = .93$; externalized continuing bonds: $\alpha = .91$.

Meaning Making

The Grief and Meaning Reconstruction Inventory. The Grief and Meaning Reconstruction Inventory (GMRI; Gillies et al., 2015; see Appendix K) was used to measure level of meaning making. The scale consists of 29 items on a 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). The five factors include: Continuing bonds (e.g., "The time I spent with the deceased was a blessing"), personal growth (e.g., "Since this loss, I'm more self-reflective"), sense of peace (e.g., "I've been able to make sense of this loss"), emptiness and meaninglessness (reverse coded; e.g., "I feel empty and lost"), and valuing life (e.g., "Whenever I can, I seize the day. I live life to the fullest"). The term "my loved one" in each item was changed to "the deceased" so that each item is inclusive of significant individuals who died and might not be considered a loved one. A total score was calculated by adding scores on the items, with high scores relating to higher levels of meaning made in the death of a loved one.

Reliability estimates in prior research with American bereaved individuals were adequate (continuing bonds: $\alpha = .85$; personal growth: $\alpha = .83$; sense of peace: $\alpha = .79$; emptiness and

meaninglessness: α = .76; valuing life: α = .76; Gillies et al., 2015). Support for validity was demonstrated in prior studies with bereaved individuals given that the GMRI was negatively correlated with scores on the Inventory of Complicated Grief–Revised (Gillies et al., 2015), suggesting that having made meaning of a loss was associated with an adaptive grief reaction. In the current study, the reliability estimates for American individuals were as follows: Total: α = .83; continuing bonds: α = .78; personal growth: α = .84; sense of peace: α = .77; emptiness and meaninglessness: α = .80; valuing life: α = .68. The subscale valuing life was not included in this study due to a low reliability of less than .70.

The scale is available in Korean (Choi, 2011; see Appendix L). Reliability estimates with Korean grieving individuals were adequate (Continuing bonds: α = .66; personal growth: α = .79; emptiness and meaninglessness: α = .62; valuing life: α = .60; Choi & Ahn, 2013). The researchers excluded one subscale, "Sense of Peace," because they included grieving individuals who went through non-death losses. 47.4% of participants experienced a death of a loved one, 36.2% experienced the relationship loss, and others experienced other physical or psychological losses. Support for validity was demonstrated with Korean grieving individuals as the GMRI was positively correlated with posttraumatic growth and negatively correlated with the Brief Symptom Inventory (which measures depression, anxiety, and somatization), suggesting that having made meaning of a loss was associated with an adaptive grief reaction. In the current study, the reliability estimates for Korean individuals were as follows: Total: α = .79; continuing bonds: α = .82; personal growth: α = .82; sense of peace: α = .73; emptiness and meaninglessness: α = .74; valuing life: α = .54. The subscale valuing life was not included in remaining analyses due to the low reliability estimate of less than .70.

Meaning Making in Grief Scale. Furthermore, the Meaning Making in Grief Scale (MMGS; Yang & Lee, 2020; see Appendix M and Appendix N) was used to assess meaning making. The scale consists of 21 items on a 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*), and there are three factors: Meaning of the significant other (α = .88), being present (α = .93), coping and growth (α = .89). Example items include: Meaning of the significant other (e.g., "I realized how precious that person is to me"), being present (e.g., "I became more focused on the present moment than on the future"), and coping and growth (e.g., "I was able to recall the value of life"). A total score was calculated by adding scores on the items, with high scores relating to higher levels of meaning made in the death of a loved one.

All three factors showed adequate internal consistency in the original study with Korean bereaved individuals (Meaning of the significant other: α = .88; being present: α = .93; coping and growth: α = .89; Yang & Lee, 2020). Support for validity was demonstrated in the prior study with grieving individuals as the MMGS was positively associated with meaning-making and problem-centered coping (Yang & Lee, 2020), indicating that meaning-making was associated with an adaptative coping strategy. The scale is available in Korean and English; however, the scale has not been used with American bereaved individuals. In the current study, the reliability estimates for American individuals were as follows: Total: α = .93, meaning of the significant other: α = .80; being present: α = .85; coping and growth: α = .89. The reliability estimates for Korean individuals were as follows: Total: α = .94, meaning of the significant other: α = .93; being present: α = .88; coping and growth: α = .89.

Implicit/Explicit Social Support

The Medical Outcomes Study (MOS) Social Support Survey (Sherbourne & Stewart, 1991; see Appendix O) was used to assess explicit and implicit social support. The scale consists

of 19 items on a 5-point Likert scale (1 = *none of the time*, 5 = *all of the time*). There are four factors on the current scale: emotional/information support (8 items; e.g., "someone you can count on to listen to you when you need to talk"), tangible support (4 items; e.g., "someone to prepare your meals if you were unable to do it yourself"), positive social interaction (4 items; e.g., "someone who shows you love and affection"), and affectionate support (3 items; e.g., "someone to do something enjoyable with"). A total score was calculated by adding scores on the items. High scores on the measure indicated that individuals received high levels of social support from others.

All four factors showed adequate internal consistency in the original study with British individuals (Sherbourne & Stewart, 1991): Emotional/information support ($\alpha = .96$), tangible support ($\alpha = .92$), positive social interaction ($\alpha = .94$), and affectionate support ($\alpha = .91$). Support for validity was demonstrated in that social support was associated negatively with psychological impact of stressful live events among individuals with cancer (Kornblith et al., 2001), indicating that social support is associated with psychological distress among those who experience a critical life event or loss.

Based on previous research findings that there are cultural differences in seeking social support between Eastern and Western cultures (Kim et al., 2008; Yang et al., 2015), explicit and implicit social support were categorized as follows: Explicit social support (emotional/information support and tangible support) and implicit social support (positive social interaction and affectionate support). In the current study, the reliability estimates for American individuals were as follows: Total: $\alpha = .97$, explicit social support: $\alpha = .96$ (emotional/information support: $\alpha = .96$; tangible support: $\alpha = .94$); implicit social support: $\alpha = .96$ (affectionate support: $\alpha = .94$; positive social interaction: $\alpha = .96$).

The Medical Outcomes Study (MOS) Social Support Survey is available in Korean (Lim et al., 2003; see Appendix P). Reliability estimates with Korean individuals were adequate (emotional/information support: .96, tangible support: .90, positive social interaction: .81, and affectionate support: .87; Lim et al., 2003). Support for validity was demonstrated in that low levels of social support were predictive of depression among Korean individuals (Park, 2011), indicating that social support was associated with psychological adjustment. In the current study, the reliability estimates for Korean individuals were as follows: Total: $\alpha = .97$, explicit social support: $\alpha = .95$ (emotional/information support: $\alpha = .96$; tangible support: $\alpha = .92$); implicit social support: $\alpha = .96$ (affectionate support: $\alpha = .93$; positive social interaction: $\alpha = .95$).

Psychological Adjustment

The Psychological Well-Being Scale (PWBS; Ryff, 1989; Ryff & Keyes, 1995; see Appendix Q) was used to measure psychological adjustment. The scale consists of 42 items on a 7-point Likert scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). There are six factors in this scale: Autonomy (e.g., "I have confidence in my own opinions, even if they are different from the way most other people think"), environmental mastery (e.g., "I am good at managing the responsibilities of daily life"), personal growth (e.g., "I think it is important to have new experiences that challenge how I think about myself and the world"), positive relations with others (e.g., "Maintaining close relationships has been difficult and frustrating for me"), purpose in life (e.g., "Some people wander aimlessly through life, but I am not one of them"), and self-acceptance (e.g., "When I look at the story of my life, I am pleased with how things have turned out so far"). A total score was calculated by adding scores on the items, with high scores relating to high levels of psychological well-being.

Adequate internal consistencies were found in the original study (autonomy: α = .86; environmental mastery: α = .90; personal growth: α = .87; positive relations with others: α = .91; purpose in life: α = .90; self-acceptance: α = .93; Ryff, 1989). A recent cross-cultural study conducted in the US and Japan also showed adequate internal consistency coefficients (autonomy: α = .71; environmental mastery: α = .78; personal growth: α = .75; positive relations with others: α = .78; purpose in life: α = .70; self-acceptance: α = .84; Curhan et al., 2014). Support for validity was demonstrated in that psychological well-being was related negatively to depression but positively to personal growth (Ayub & Iqbal, 2012; Phetrasuwan & Miles, 2009). In the current study, the reliability estimates for American individuals were as follows: Total: α = .95; autonomy: α = .78; environmental mastery: α = .86; personal growth: α = .78; positive relations with others: α = .81; purpose in life: α = .81; self-acceptance: α = .88.

The current scale is available in Korean (Kim et al., 2001; see Appendix R). The Korean version of the scale consists of 46 items; four additional items were included from the original 54-item PWBS to adapt to cultural differences and yield better factor loadings (Kim et al., 2001). Adequate internal consistency was found for the subscales with Korean individuals (autonomy: α = .69; environmental mastery: α = .66; personal growth: α = .70; positive relations with others: α = .72; purpose in life: α = .73; self-acceptance: α = .76; Kim et al., 2001). Interestingly, the subscale positive relations with others, which was not salient in studies in Western cultures, was important in explaining psychological well-being among Koreans (Kim et al., 2001). Support for validity was demonstrated in that psychological well-being was associated positively with positive emotion and life satisfaction (Kim et al., 2001). In the current study, the reliability estimates for Korean individuals were as follows: Total: α = .93; autonomy: α = .71;

environmental mastery: α = .77; personal growth: α = .71; positive relations with others: α = .83; purpose in life: α = .80; self-acceptance: α = .86.

High-and Low-Context Communication Styles

The Survey of Asian American Communication (SAAC; Gudykunst, 2001; see Appendix S) was used to assess high- and low-context communication styles. Similar to the previous study that examined cultural differences in communication styles (e.g., Park & Kim, 2008), the following subscales were chosen based on the current study's research goals and communication styles related to social support: contentious (5 items), openness (4 items), inferring meaning (5 items), and indirect (5 items). The scale consists of 19 items on a 7-point Likert scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). High scores on each subscale indicated that individuals had high levels of either high- or low-context communication styles. Example items include "When I disagree with someone, I am quick to challenge them" (contentious), "As a rule, I generally express my feelings or emotions" (openness), "I catch on to what others mean even if they do not say it directly" (inferring meaning), and "I communicate in an indirect fashion" (indirect).

The reliability estimates for each subscale from the original study were as follows: .65 for contentious, .60 for openness, .77 for inferring meaning, and .68 for indirect (Gudykunst, 2001). In the study with Asian Americans and European Americans, the reliability estimates for each subscale were as follows, respectively: contentious (α = .80, α = .75), openness (α = .66, α = .88), inferring meaning (α = .88, α = .87), and indirect (α = .74, α = .77; Park & Kim, 2008). Support for validity was demonstrated in the prior study in that Asian Americans used indirect messages (e.g., high context communication) more often than European Americans, while European Americans used openness (e.g., low context communication) more often than Asian Americans

(Park & Kim, 2008), suggesting that cultural differences were associated with communication styles. In the current study, the reliability estimates for American individuals were as follows: Total: $\alpha = .74$; low-context (i.e., contentious and openness): $\alpha = .76$; high-context (i.e., inferring meaning and indirect): $\alpha = .78$.

The current scale is available in English but not in Korean. Therefore, a translation and back-translation process was used to translate the scale (see Appendix T; Maneesriwongul & Dixon, 2004). The same procedure was used as described in the demographics section. In the current study, the reliability estimates for Korean individuals were as follows: Total: $\alpha = .70$; low-context (i.e., contentious and openness): $\alpha = .74$; high-context (i.e., inferring meaning and indirect): $\alpha = .71$.

Results

Descriptive Statistics and Correlations

SPSS 28 was used to calculate descriptive statistics, correlations, means, standard deviations, ranges, and reliabilities (see Tables 1, 2, 3, and 4).

An examination of average scores for the samples indicated the following. On average, US bereaved individuals reported feeling psychological distress between "some of the time" and "most of the time," whereas Korean bereaved individuals reported feeling psychological distress between "a little of time" and "some of the time." In terms of continuing bonds, US bereaved individuals maintained internalized continuing bonds with the deceased "occasionally" to "often," and Korean bereaved individuals kept internalized continuing bonds with the deceased "occasionally." Furthermore, US bereaved individuals maintained externalized continuing bonds with the deceased "occasionally" to "often," and Korean bereaved individuals kept externalized continuing bonds with the deceased "rarely" to "occasionally."

On average, with respect to meaning-making on the GMRI, US bereaved individuals endorsed between “agree” and “strongly agree” regarding constructing meaning through continuing bonds with the deceased, and Korean bereaved individuals indicated between “neither agree nor disagree” and “agree.” Both US and Korean bereaved individuals indicated between “neither agree nor disagree” and “agree” in terms of gaining personal growth through meaning making. Similarly, both US and Korean bereaved individuals indicated between “neither agree nor disagree” and “agree” in terms of experiencing a sense of peace regarding the death of the deceased through meaning making. Furthermore, US bereaved individuals indicated between “disagree” and “neither agree nor disagree” regarding experiencing emptiness and meaninglessness after experiencing the death, and Korean bereaved individuals indicated between “neither agree nor disagree” and “agree.” Also, US bereaved individuals indicated between “agree” and “strongly agree” in terms of experiencing valuing their lives after going through the meaning making process, and Korean bereaved individuals indicated between “neither agree nor disagree” and “agree.”

On average, on the MMGS, US bereaved individuals endorsed between “somewhat agree” and “strongly agree” when asked if, after the death, they reflected on what the deceased significant individual meant to them, while Korean bereaved individuals indicated between “neither agree nor disagree” and “somewhat agree.” Both US and Korean bereaved individuals indicated between “neither agree nor disagree” and “somewhat agree” regarding being more present in their lives after the death. Similarly, both US and Korean bereaved individuals endorsed between “neither agree nor disagree” and “somewhat agree” on experiencing coping and growth after the death.

On average, in terms of social support, both US and Korean bereaved individuals reported that implicit social support was available "some of the time" and "most of the time" since the death, and both US and Korean bereaved individuals indicated that explicit social support had been available "some of the time" and "most of the time" since the death. Both US and Korean bereaved individuals reported between "neither agree nor disagree" and "a little agree" with respect to experiencing psychological adjustment. In terms of communication styles, both US and Korean bereaved individuals reported between "neither agree nor disagree" and "a little agree" on using low-context communication styles. In addition, US bereaved individuals reported between "neither agree nor disagree" and "a little agree" on using high-context communication styles, whereas Korean bereaved individuals reported between "a little disagree" and "neither agree nor disagree" on using high-context communication styles (see Tables 3 and 4).

Confirmatory Factor Analysis for the Continuing Bonds Scale

Given that the factor structure for the Internalized and Externalized Continuing Bonds Scale had not been validated for the Korean sample, two confirmatory factor analyses (CFA) were conducted using R 4.2.2 to examine the factor structure of the Internalized and Externalized Continuing Bonds Scale for the Korean and US samples, respectively, prior to investigating the main hypotheses.

Both theoretical and statistical issues were considered when running the CFAs. The initial model tested was the original model, which consisted of 11 items on internalized continuing bonds and nine items on externalized continuing bonds based on the Internalized and Externalized Continuing Bonds Scale (Scholtes & Browne, 2015). Given that the model fit of the initial model was inadequate (US: CFI = .78, TLI = .76, RMSEA = .11, SRMR = .08; Korea:

CFI = .89, TLI = .89, RMSEA = .09, SRMR = .05), the following steps were taken to remove items from each subscale to improve the model fit. Specifically, items were deleted if the factor loading was less than .5 on any factors and if they loaded more than .3 on more than one factor. Items loading less than .5 on any factor were deleted one at a time starting with lowest factor loading. When two items loaded more than .3 on more than one factor, items were deleted sequentially beginning with the item that had factor loadings with the least difference. Iterative steps were taken until all the items loaded at least .5 on only one factor. In addition, model fit indices for the final model were examined. Model fit indices, including RMSEA, CFI, TLI, and SRMR, for both groups were assessed (e.g., Muthén & Muthén, 2009). If CFI and TLI were higher than 0.9, RMSEA was lower than 0.10, and SRMR was lower than .08, the results would indicate good model fit. A total of eight items in the Internalized (four items) and Externalized (four items) Continuing Bonds Scales showed adequate factor loadings and model fit (US: CFI = .95, TLI = .92, RMSEA = .09, SRMR = .04; Korea: CFI = .97, TLI = .95, RMSEA = .09, SRMR = .04; see Table 5).

The following four items were included on the Internalized Continuing Bonds subscale for subsequent analyses: 1. I imagine the deceased as watching over me; 4. I believe that I have an ongoing connection with the deceased; 5. I experience the deceased as continuing to live on through their impact on who I am today; and 7. My dreams about the deceased bring me comfort.

The following four items were included on the Externalized Continuing Bonds subscale for subsequent analyses: 12. I have kept objects/possessions that belonged to the deceased because they comfort me; 14. I visit the cemetery and memorial site to see and be close to the deceased; 16. I partake in rituals (e.g., candle/incense lighting, balloon/butterfly releasing, displaying photos of the deceased, practicing special rituals during the holidays, offering food to

the deceased) in remembrance of the deceased; and 18. I have inner conversations with the deceased.

Multi-Group Structural Equation Modeling

The multi-group SEM analysis examined if and how the proposed model differed across different groups (Bollen, 1989). First, multigroup confirmatory factory analysis (CFA) was used to evaluate invariance between two groups (i.e., Koreans and Americans) prior to comparing the equivalence of the factor structure for both groups (Kline, 2015). While some scholars argued that invariance testing was a critical step in conducting the multi-group SEM analysis and comparing direct and indirect pathways between variables of each group (Kline, 2015; Xu & Tracey, 2017), others raised a concern that a mismatch between the imposed constraints and the true state of invariance in the population may lead to inaccurate invariance assessments regarding latent means and covariance (Hancock et al., 2009). Thus, invariance testing should be interpreted with caution, especially when examining different groups (Hancock & Curran, 2020; Selig et al., 2008).

The goal of the multi-group CFA was to establish whether a set of indicators showed measurement invariance across groups (Kline, 2015). In other words, establishing measurement equivalence before comparing direct and indirect pathways between the variables for each group was critical to avoid confounding group differences in measurement properties (Lee, 2018). Invariance testing in CFA involved (a) configural invariance, (b) metric invariance, and (c) scalar invariance. Thus, preliminary steps were critical to assess the psychometric equivalence of each construct across groups before examining the hypotheses in a given study (Kline, 2015; see Appendix A).

Configural Invariance. First, configural invariance was examined by specifying a single baseline factor model across groups (Kline, 2015). All parameters were freely estimated, while the number of factors and the correspondence between factors and indicators remained the same. The model was evaluated using maximum likelihood estimation simultaneously for both groups. One group (i.e., Americans) was assigned as the reference group, meaning that the factor mean and variance of this group were fixed to 0 and 1, respectively. Then, the factor variance in a different group (i.e., Koreans) was estimated as the proportional differences in the common variance of the indicators explained by the factor (Little et al., 2006).

Afterward, the model fit indices of the model for both groups were evaluated. Given that the chi-square different test is sensitive to sample size (Cheung & Rensvold, 2002), other model fit indices, such as RMSEA, CFI, TLI, and SRMR, were examined. If CFI and TLI were higher than 0.9, RMSEA was lower than 0.10, and SRMR was lower than .08, the results would indicate good model fit. A good model fit would suggest that configural invariance was supported, and thus the overall factor structure was equivalent across groups. Once there is a good model fit, the next steps–metric invariance and scalar invariance–could proceed. If neither of these analyses indicated measurement invariance, then the structural equation modeling analyses would be conducted separately for the Korean sample and the US sample, respectively.

Mplus 8.8 was used to conduct a multi-group Structural Equation Modeling (SEM) analysis. The 8-item Internalized and Externalized Continuing Bonds Scale was used to measure continuing bonds, which was produced after conducting the confirmatory factor analysis. Notwithstanding that configural invariance between the two groups was expected to be supported based on previous theoretical and empirical research, the model fit was inadequate in the current study: RMSEA = 0.08; CFI = 0.58; TLI = 0.57; SRMR = 0.18. Given that model fit was poor,

the model was tested separately for the US and Korean samples. Model fit remained inadequate when the model was run separately for each group (US: RMSEA = 0.07; CFI = 0.64; TLI = 0.63; SRMR = 0.10; Korea: RMSEA = 0.07 CFI = 0.52; TLI = 0.51; SRMR = 0.14). Because the model fit was inadequate when checking configural invariance, the invariance analyses were not calculated, including metric invariance and scalar invariance. Moreover, given that measurement invariance is a prerequisite for conducting a multi-group analysis, the two groups were not compared using multi-group SEM analysis. Thus, post hoc analyses were conducted to further explore the data.

Post-Hoc Analyses

Exploratory and Confirmatory Factor Analyses

The following steps for exploratory and confirmatory factor analyses were conducted on the scales that did not show invariance (i.e., continuing bonds, meaning-making, and psychological adjustment) to identify items that operate similarly across both countries with a plan to test the proposed model with the entire sample using the revised measures. The Korea and US samples were randomly divided in half to conduct an exploratory factor analysis on one half of the data, and then a confirmatory factor analysis on the second half. SPSS 28 was used to assess skewness, kurtosis, the Kaiser-Meyer-Olkin (KMO), and the Bartlett's test, and Mplus 8.8 was used to conduct exploratory and confirmatory factor analyses. The Internalized and Externalized Continuing Bonds Scale underwent factor analyses again to be consistent with the process of using the split sample for exploratory and then confirmatory analyses for the scales that did not show measurement invariance. Both theoretical and statistical aspects were considered when running the EFA.

Internalized and Externalized Continuing Bonds. Skewness and kurtosis of the first halves of the Korean and US samples indicated that the items were normally distributed, as the values were not greater than 2 for skewness or 7 for kurtosis (e.g., Curran et al., 1996). Thus, none of the items were deleted. Then, the KMO and the Bartlett's Test of Sphericity of the Korean sample was assessed, given that the Korean sample was used as a reference group. The KMO and the Bartlett's test for the Korean sample suggested that the data were factorable, as the KMO value was over 0.5 and a p-value for the Bartlett's test was below 0.05 (Pett et al., 2003).

The EFA began by examining items on factors whose eigenvalues were greater than 1. Items were deleted if the factor loading was less than .5 on any factors and if they loaded more than .3 on more than one factor. Items loading less than .5 on any factor were deleted one at a time starting with lowest factor loading. When two items loaded more than .3 on more than one factor, items were deleted sequentially beginning with the item that had factor loadings with the least difference. Iterative steps were taken until all the items loaded at least 0.5 on only one factor. A total of ten items were deleted through these steps using the first half of the Korean sample. Two factors were supported, and no parameters were added. The model fit for the EFA was adequate for the Korean sample: $\chi^2(26, 217) = 71.43$, $p < .01$; RMSEA = .09; CFI = 0.97; SRMR = .034.

Skewness and kurtosis of the second half of the Korean and US samples were normally distributed. The KMO and the Bartlett's test suggested that the data were factorable (Pett et al., 2003). Model fit indices of CFA for both the Korean and US samples were adequate. Thus, no parameters were added (Korea: $\chi^2(34, 216) = 58.39$, $p < .01$; CFI = 0.98; TLI = 0.98; RMSEA = 0.06; SRMR = 0.03; US: $\chi^2(34, 223) = 97.65$, $p < .01$; CFI = 0.93; TLI = 0.91; RMSEA = 0.09; SRMR = 0.05).

A total of ten items were included on the measure (i.e., six items for Internalized Continuing Bonds and four items for Externalized Continuing Bonds). The following six items were finalized for the Internalized Continuing Bonds: 1. I imagine the deceased as watching over me; 2. I am aware of the positive influence of the deceased on who I am today; 3. At times I have a real sense of presence of the deceased; 4. I believe that I have an ongoing connection with the deceased; 5. I experience the deceased as continuing to live on through their impact on who I am today; and 6. Doing things that show my ongoing love for the deceased brings me comfort.

The following four items were finalized for the Externalized Continuing Bonds: 12. I have kept objects/possessions that belonged to the deceased because they comfort me; 14. I visit the cemetery and memorial site to see and be close to the deceased; 16. I partake in rituals (e.g., candle/incense lighting, balloon/butterfly releasing, displaying photos of the deceased, practicing special rituals during the holidays, offering food to the deceased) in remembrance of the deceased; and 19. I wear jewelry that belonged to the deceased and/or I have purchased in remembrance of the deceased.

Meaning Making. For meaning making, the Grief Meaning Reconstruction Inventory (GMRI) and the Meaning Making in Grief Scale (MMGS) were used for the EFA and CFA. Skewness and kurtosis of the first half of the Korean sample indicated that the items were normally distributed, whereas skewness and kurtosis of the first half of the US sample were normally distributed for except one item (GMRI18), which was deleted. The KMO and the Bartlett's test for the Korean sample suggested that the data were factorable, as the KMO value was over 0.5 and a p-value for the Bartlett's test was below 0.05 (Pett et al., 2003).

The EFA began by examining items on factors whose eigenvalues were greater than 1. Items were deleted if the factor loading was less than .5 on any factors and if they loaded more

than .3 on more than one factor. Items loading less than .5 on any factor were deleted one at a time starting with lowest factor loading. When two items loaded more than .3 on more than one factor, items were deleted sequentially beginning with the item that had factor loadings with the least difference. Iterative steps were taken until all the items loaded at least 0.5 on only one factor. As a result, two factors were supported, and no parameters were added. 22 items were deleted from the GMRI, and 9 items were deleted from the MMGS while conducting the EFA. A total of 19 items comprised the final measure, where 8 items were associated with meaning of the deceased and 11 items were associated with growth. The model fit for the EFA was adequate for the Korean sample: $\chi^2(134, 217) = 302.58$, $p < .01$; RMSEA = .08; CFI = 0.93; SRMR = .05.

The skewness and kurtosis of the second half of the Korean and US samples were normally distributed; thus, none of the items were deleted. The KMO and the Bartlett's test suggested that the data were factorable (Pett et al., 2003). Model fit indices for the CFA for both the Korean and US samples were not adequate. Accordingly, one parameter was added for the Korean sample, and 9 parameters were added for the US sample. The final model fit indices were as follows: Korea: $\chi^2(150, 216) = 353.94$, $p < .01$; CFI = 0.91; TLI = 0.90; RMSEA = 0.08; SRMR = 0.07; US: $\chi^2(142, 223) = 286.63$, $p < .01$; CFI = 0.92; TLI = 0.91; RMSEA = 0.07; SRMR = 0.08.

The following eight items were finalized for the first subscale, meaning of the deceased: GMRI11. The deceased was a good person; he/she/they lived a good life; GMRI21. I cherish the memories of the deceased; MMGS1. I realized what that person meant to me; MMGS2. I recalled good memories I had with that person which I didn't know before; MMGS5. I realized how precious that person is to me; MMGS9. The grateful feelings I wasn't able to express towards that person came up; MMGS12. I have begun to give more importance to the memories

with that person; and MMGS21. Even though I cannot see my loved one, I think the person is always with me.

The following 11 items were finalized for the second subscale, growth: GMRI8. Since this loss, I'm a stronger person; GMRI13. Since this loss, I've changed my lifestyle for the better; GMRI22. Since this loss, I value friendship and social support more; GMRI25. Since this loss, I'm a more responsible person; GMRI29. Since this loss, I've pursued new avenues of knowledge and learning; MMGS4. I was able to recall the value of life; MMGS8. I was able to see life with a bigger lens; MMGS14. It has become the base of my endurance for future loss and sadness; MMGS15. The experience of the loss allowed me to change my actions in life; MMGS17. I was able to grow mentally mature; and MMGS19. The experience of the loss helped me grow and mature.

Psychological Well-Being. The original Psychological Well-Being Scale contained 84 items, and then shortened (Ryff & Keyes, 1995); the revised 42-item scale was validated and used for the US sample. Similarly, the validated measure for the Korean sample was shortened to 46 items in prior research; however, while the same six factors were included in the final scales for both countries, different items from the original 84 items were retained on the scales due to cultural differences (Kim et al., 2001). Given that it is necessary to have the same items for each scale to conduct multigroup structural equation modeling, the 33 items that were included on both the US and Korean scales were used for the EFA and CFA.

Skewness and kurtosis of the first halves of the Korean sample indicated that the items were normally distributed, as the values were not greater than 2 for skewness or 7 for kurtosis (e.g., Curran et al., 1996). However, skewness and kurtosis of the first half of the US sample were normally distributed except for one item (PWB2), which was deleted. The KMO and the

Bartlett's test for the Korean sample suggested that the data were factorable, as the KMO value was over 0.5 and a p-value for the Bartlett's test was below 0.05 (Pett et al., 2003).

The EFA began by examining items on factors whose eigenvalues were greater than 1. Items were deleted if the factor loading was less than .5 on any factors and if they loaded more than .3 on more than one factor. Items loading less than .5 on any factor were deleted one at a time starting with lowest factor loading. When two items loaded more than .3 on more than one factor, items were deleted sequentially beginning with the item that had factor loadings with the least difference. Iterative steps were taken until all the items loaded at least .5 on only one factor. Starting with 33 items, items were deleted until only five items with one factor remained. The further steps were not taken because all the items had factor loadings above .5 on one factor. Model fit indices for the EFA were inadequate: $\chi^2(5, 217) = 46.44$, $p < .01$; CFI = 0.83; TLI = 0.66; RMSEA = 0.20; SRMR = 0.10. The single factor was not supported based on the original research (e.g., Ryff & Keyes, 1995). In addition, the model fit indices did not improve after including parameters.

Given that the exploratory and confirmatory factor analyses results did not yield results that would allow invariant measures to be included in multigroup structural equation modeling analyses to test the proposed model, additional post hoc analyses were conducted.

Hierarchical Multiple Regression Analyses

Two hierarchical multiple regression analyses predicting psychological adjustment for the US and Korean samples were conducted using SPSS 28 based on the theoretical frameworks proposed in the dissertation. The assumptions for multiple regression analysis were met for the US and Korean data. The design of the study implies independence of observations (no autocorrelation). Scatterplots showed a linear relationship between the dependent and

independent variables. Residuals were normally distributed confirming multivariate normality. No multicollinearity was identified as VIF values were below 10. There was homoscedasticity, as assessed by visual inspection of a plot of studentized residuals versus unstandardized predicted values.

Considering the theoretical frameworks for this study, psychological distress was entered in Step 1, implicit and explicit social support were entered in Step 2, internalized and externalized continuing bonds were entered in Step 3, and the subscales of the meaning making scales (i.e., The Grief and Meaning Reconstruction Inventory and the Meaning Making in Grief Scale) were entered in Step 4. To reduce false-positive results, a Bonferroni correction was used. Accordingly, the p-value 0.05 was divided by the number of independent variables, or 12; p-values smaller than 0.0042 were considered significant.

Hierarchical Multiple Regression Analysis for the US Sample

Table 6 provides a summary of the hierarchical regression analysis predicting psychological adjustment for the US sample. The entire regression model, consisting of psychological distress, implicit and explicit social support, internalized and externalized continuing bonds, and subscales of meaning making scales, accounted for 61% of the variance in psychological adjustment, $F(7, 433) = 55.16$, $p < .001$; $R^2 = .61$ ($R^2_{Adj} = .59$). Psychological distress accounted for variance in psychological adjustment, $F(1, 444) = 275.00$, $p < .001$; $R^2 = .38$ ($R^2_{Adj} = .38$). Implicit and explicit social support contributed variance to the prediction of psychological adjustment, R^2 change = .12, $p < .001$; F change (2, 422) = 53.39, $p < .001$; $R^2 = .50$ ($R^2_{Adj} = .50$). Internalized and externalized continuing bonds also explained variance in psychological adjustment, R^2 change = .02, $p < .001$; F change (2, 440) = 7.60, $p < .001$; $R^2 = .52$ ($R^2_{Adj} = .51$). Finally, the addition of meaning making contributed variance to psychological

adjustment, R^2 change = .09, $p < .001$; F change (7, 433) = 13.34, $p < .001$; R^2 = .61 (R^2_{Adj} = .59). When all variables were entered into the regression equation, five variables predicted psychological adjustment for US bereaved individuals: Psychological distress (β = -.45, $p <$ 0.0042), Externalized Continuing Bonds (β = .17, $p < 0.0042$), GMRI: Sense of peace (β = -.10, $p < .0042$), GMRI: Emptiness and meaninglessness (β = .22, $p < 0.0042$), and MMGS: Being present (β = .26, $p < 0.0042$).

Hierarchical Multiple Regression Analysis for the Korean Sample

Table 7 provides a summary of the hierarchical regression analysis for variables predicting psychological adjustment for the Korean sample. The entire regression model, consisting of psychological distress, implicit and explicit social support, internalized and externalized continuing bonds, and subscales of meaning making scales, accounted for 43% of the variance in psychological adjustment, $F(7, 420) = 26.29$, $p < .001$; R^2 = .43 (R^2_{Adj} = .41). Psychological distress accounted for variance in psychological adjustment, $F(1, 431) = 64.98$, $p < .001$; R^2 = .13 (R^2_{Adj} = .13). Implicit and explicit social support contributed variance to the prediction of psychological adjustment, R^2 change = .20, $p < .001$; F change (2, 429) = 63.63, $p < .001$; R^2 = .33 (R^2_{Adj} = .33). However, internalized and externalized continuing bonds did not explain variance in psychological adjustment, R^2 change = .01, $p = 0.52$; F change (2, 427) = 2.97, $p < .001$; R^2 = .34 (R^2_{Adj} = .33). Finally, the addition of meaning making contributed variance to their psychological adjustment, R^2 change = .09, $p < .001$; F change (7, 420) = 9.45, $p < .001$; R^2 = .43 (R^2_{Adj} = .41). When all variables were entered into the regression equation, three variables predicted psychological adjustment for Korean bereaved individuals: Psychological distress (β = -.20, $p < 0.0042$), implicit social support (β = .23, $p < 0.0042$), and GMRI: Emptiness and meaninglessness (β = .34, $p < 0.0042$).

Multivariate Analysis of Variance (MANOVA)

A preliminary one-way multivariate analysis of variance (MANOVA) was conducted using SPSS 28 to assess group differences in mean scores on the variables, including psychological distress, implicit and explicit social support, internalized and externalized continuing bonds, subscales of the meaning making scales (i.e., The Grief and Meaning Reconstruction Inventory and the Meaning Making in Grief Scale), psychological adjustment, and low-context and high-context communication styles between US and Korean bereaved individuals (see Table 8). It is important to acknowledge that this analysis is preliminary given the lack of invariance on the measures included in this analysis.

Prior to reviewing the results of MANOVA, Levene's test was conducted to assess the homogeneity of variance assumption in the MANOVA. Furthermore, a Bonferroni correction was used to reduce false-positive results. Accordingly, the p-value 0.05 was divided by number of dependent variables, or 12; p-values smaller than 0.0042 were considered significant. If the p-value of the Levene's statistic was not significant, the variance across the two groups were similar and an MANOVA was conducted to examine the mean differences between the two groups. If the test of homogeneity of variances was significant, meaning that the p-value of the Levene's statistic was significant, then Welch's ANOVA was conducted to consider unequal variances and continue examining the mean differences between the two groups. If the p-value of Welch's F was statistically significant, it indicated that the means of the two groups differed from each other.

The results of MANOVA examining the differences between US and Korean bereaved individuals reached statistical significance, Wilks' Lambda = .52, $p < 0.0042$, $F(16) = 49.75$, $p < 0.0042$. Given that the Levene's statistics of internalized continuing bonds, externalized

continuing bonds, and the subscale continuing bonds of the GMRI were not significant, there was no difference in variance between the groups for these variables. Thus, the mean differences of these variables were examined.

Test of between-subjects effects indicated that the groups differed on the following variables: Internalized continuing bonds: $F(1, 862) = 110.09$, $p < 0.0042$, $\eta^2 = .11$, where the US sample ($M = 3.09$, $SD = 0.84$) had higher means compared to the Korean sample ($M = 2.50$, $SD = 0.84$); externalized continuing bonds: $F(1, 862) = 202.73$, $p < 0.0042$, $\eta^2 = .19$, where the US sample ($M = 3.10$, $SD = 0.86$) had higher means compared to the Korean sample ($M = 2.29$, $SD = 0.84$); GMRI: Continuing bonds: $F(1, 862) = 201.02$, $p < 0.0042$, $\eta^2 = .19$, where the US sample ($M = 4.14$, $SD = 0.66$) had higher means compared to the Korean sample ($M = 3.49$, $SD = 0.71$); and GMRI: Valuing Life: $F(1, 862) = 20.66$, $p < 0.0042$, $\eta^2 = .02$, where the US sample ($M = 4.01$, $SD = 0.70$) had higher means compared to the Korean sample ($M = 3.81$, $SD = 0.58$).

The following variables showed statistical significance in the Levene's statistics, suggesting that there was a difference in variance between two groups: psychological distress, implicit and explicit social support, some subscales of the meaning making scales (i.e., personal growth, sense of peace, emptiness and meaninglessness, meaning of the significant other, being present, and coping and growth), psychological adjustment, and low-context and high-context communication styles. As a result, the Welch's ANOVA was examined to assess if there was a significant difference between the means of two groups when equal variances between two groups could not be assumed.

Test of between-subjects effects indicated that the group differed on the following variables: Psychological distress: *Welch's F* $(1, 780.47) = 184.09$, $p < 0.0042$, $\eta^2 = .17$, where the US sample ($M = 2.62$, $SD = .97$) had higher means compared to the Korean sample ($M =$

1.87, *SD* = .65); GMRI: Emptiness and meaninglessness: *Welch's F* (1, 865.02) = 92.56, $p <$ 0.0042, η^2 = .10, where the Korean sample (*M* = 3.18, *SD* = .71) had higher means compared to the US sample (*M* = 2.68, *SD* = .83); MMGS: Meaning of the significant other: *Welch's F* (1, 844.55) = 62.02, $p < 0.0042$, η^2 = .07, where the US sample (*M* = 4.12, *SD* = .70) had higher means compared to the Korean sample (*M* = 3.71, *SD* = .83); and psychological adjustment: *Welch's F* (1, 832.51) = 34.94, $p < 0.0042$, η^2 = .04, where the US sample (*M* = 4.84, *SD* = .92) had higher means compared to the Korean sample (*M* = 4.51, *SD* = .70). High-context communication styles: *Welch's F* (1, 877) = 54.24, $p < 0.0042$, η^2 = .06, where the US sample (*M* = 4.26, *SD* = .90) had higher means compared to the Korean sample (*M* = 3.87, *SD* = .69).

Discussion

The purpose of the current study was to investigate the similarities and differences in the relations among psychological distress, salient psychosocial grief variables (i.e., internalized/ externalized continuing bonds, meaning-making, and implicit/explicit social support), and psychological adjustment for Koreans and Americans during their grieving process. However, due to measurement invariance, the originally proposed multigroup structural equation modeling analysis could not be conducted. Accordingly, post-hoc analyses were conducted to understand the data. Specifically, exploratory and confirmatory factor analyses were conducted as post-hoc analyses with the scales that showed invariance with a plan to test the proposed model with the entire sample using the revised measures. However, the factor analysis results for the psychological well-being scale did not lead to meaningful results. Accordingly, two hierarchical multiple regression analyses were conducted with the US sample and the Korean sample respectively. The results of the hierarchical multiple regression analyses indicated that some of the same factors were associated with psychological adjustment for both US and Korean

bereaved individuals (i.e., psychological distress, one meaning making subscale: emptiness and meaninglessness), while some factors were uniquely associated with psychological adjustment for either US (i.e., externalized continuing bonds, two meaning making subscales: sense of peace and being present) or Korean bereaved individuals (i.e., implicit social support). While the results need to be interpreted cautiously due to measurement invariance, the findings overall suggest that there are overlapping factors that are associated with psychological adjustment for both groups and distinctive factors that are associated with psychological adjustment for each respective group.

Sample Characteristics

It is critical to contextualize the research findings in light of the current sample to comprehend and interpret the results. The total sample consisted of 879 bereaved individuals (i.e., 446 Americans and 433 Koreans) who were 18 years old or older and experienced the death of a significant individual in the past year. With the US sample, the majority of the sample identified as White, 3rd generation, heterosexual, cisgender females in early middle age with Christian backgrounds. The majority of the US sample reported that family members, close friends, fathers, and mothers died from cancer, COVID-19, other illnesses, heart diseases, and accidents. Many of them reported feeling close to the deceased prior to the loss and still feeling close to the deceased. Although most of them reported having intense feelings after the loss, the intensity of their feelings subdued over time.

With the Korean sample, the majority of the sample identified as Korean, heterosexual, cisgender males in late middle age with atheist backgrounds. The majority of the Korean sample reported that close friends, family members, others, mothers, and fathers died from cancer, other illnesses, accidents, and heart diseases. Many of them reported feeling close to the deceased prior

to the loss and still feeling close to the deceased. Although more than half of them had intense feelings after the loss, the intensity of their feelings subdued over time. It is worth noting that two groups showed salient differences in their identities, especially in terms of age, gender, and religious identity. Specifically, the US sample was predominantly female, Christian, and relatively younger, whereas the Korean sample was predominantly male, atheist, and relatively older.

The Analysis Process for the Current Study

The multigroup structural equation modeling analysis was not conducted due to inadequate model fit regarding measurement invariance. Researchers noted that meeting assumptions of invariant factor structures across different cultural groups in cross-cultural research can be challenging due to cultural differences (Selig et al., 2008). Furthermore, the operationalization and cultural understandings of certain variables may vary, which may influence the validation of the measures (e.g., Hancock et al., 2015). Accordingly, it is plausible that the model fit of the overall model was inadequate because some validated scales did not show good model fit in the first place. In addition, while some of the scales underwent translation-back translation processes, further validation of these measures may be needed to conduct cross-cultural research.

Post-hoc analyses, exploratory and confirmatory factor analyses were initially conducted with the scales that showed invariance, with the intention of testing the proposed model. Although exploratory and confirmatory factor analyses were performed for continuing bonds and meaning-making, an exploratory factor analysis of psychological adjustment was not possible, as the results yielded a single factor with inadequate model fit. Recently, scholars have recommended more novel and robust approaches, such as exploratory structural equation

modeling (ESEM), over exploratory factor analysis (EFA) when developing psychometric measures, especially for cross-cultural comparisons (van Zyl & ten Klooster, 2022). ESEM encompasses the benefits of EFA and structural equation modeling, including tests of multiple group and longitudinal invariance, to advance measurement quality beyond what EFA offers (Morin et al., 2013; Ockey, 2013). Accordingly, recent scholars have implemented ESEM when developing the psychometric measures that have shown inconsistent factor structures between groups and contexts and seemed culturally biased (van Zyl & ten Klooster, 2022).

Factors Accounting for Variance in Psychological Adjustment in US and Korean Samples

The findings of the hierarchical multiple regression post-hoc analyses demonstrated that psychological distress was negatively associated with psychological adjustment, whereas one subscale of the GMRI, emptiness and meaninglessness (reverse-scored), was positively associated with psychological adjustment for both Korean and US bereaved individuals. While the current study did not assess the variables over time, it is important to note that the findings are consistent with the Meaning Reconstruction Model (Gillies & Neimeyer, 2006), as individuals experienced psychological distress and meaning making processes after experiencing the loss. With respect to psychological distress, which refers to nonspecific symptoms of stress, anxiety, and depression (Kessler et al., 2002), experiencing psychological distress and the negative association between psychological distress and psychological adjustment was consistent with previous research (e.g., Onrust et al., 2007). Bereaved individuals' reduced psychological distress may be associated with better psychological adjustment. Given that psychological distress has been associated with negative emotions that can negatively impact psychological well-being (Nolen-Hoeksema & Larson, 2013), alleviating psychological distress may promote better psychological adjustment. For example, assisting bereaved clients with processing intense

feelings of grief and other emotions, helping them identify and access social support, and providing psychoeducation about coping mechanisms and strategies may be effective in alleviating psychological distress.

In addition, it is interesting to note that the Korean sample reported less psychological distress as compared to the US sample. While it is important to acknowledge that the current study had limited representation of gender identities as most participants identified as cisgender males or females, it is critical to note that there were age and gender differences between the US and Korean samples. Specifically, the majority of the Korean sample identified as cisgender male and were relatively older, whereas the majority of the US sample identified as cisgender female and were relatively younger than the Korean sample. Although there are mixed findings with respect to age and gender differences in grief and psychological distress due to the complex nature of grief, some researchers found that bereaved females reported higher levels of depression, anxiety, and grief than males while grieving (Chiu et al., 2011) and older adults managed the loss of their loved ones more effectively compared to younger adults (Hayslip & Hansson, 2003). Furthermore, previous researchers found that bereaved women often reported experiencing more psychological distress and grief reactions compared to men, and that some men avoid sharing their psychological distress (e.g., Thimm et al., 2020). This perhaps elucidates the level of psychological distress reported among US versus Korean bereaved individuals in this study.

Furthermore, there may be cultural considerations that contributed to low scores on psychological distress. Considering that the Korean sample in the current study was relatively older and that the majority had experienced the death of close friends, they may have considered the death of the deceased as *Ho-Sang*, which refers to the idea that the deceased had a *blessed*

life or death (e.g., An & Lee, 2014; Kim, 2008). While further investigation is needed to understand the cultural implications, previous research highlighted that Korean elderly people tend to consider a good death as a blessing; specifically, they believe that a good death would cause less emotional pain for their loved ones after their passing (Han et al., 2002). This concept may help Korean bereaved individuals experience less complex grief, especially when elderly loved ones die, which could alleviate psychological distress related to their loss.

Moreover, the findings demonstrated that feelings of emptiness and meaninglessness, which refers to the sense of a void and loss of meaning, may be salient variables in the meaning making process across different cultures. Specifically, the emptiness and meaninglessness subscale, which was reverse-scored, captured existential angst, confusion, and a sense of isolation and hopelessness (Gillies et al., 2015). Feelings of emptiness and meaninglessness can lead to detachment and disconnection from the world, hindering psychological adjustment (Neimeyer, 2016). Therefore, alleviating these aspects with regard to meaning making may be associated with better psychological adjustment among bereaved individuals. Moreover, it is conceivable that psychological adjustment may be associated with feeling less empty and more meaningful. Accordingly, the findings should be interpreted with caution and should be investigated further to deepen understanding of how these variables play a role in bereaved individuals' psychological adjustment.

Factors Accounting for Variance in Psychological Adjustment in the US Sample

For US bereaved individuals, externalized continuing bonds and two subscales of meaning-making (i.e., sense of peace and being present) were predictive of psychological adjustment. Interestingly, contrary to previous research findings and hypotheses, externalized continuing bonds were positively associated with psychological adjustment. Prior research found

that externalized continuing bonds were associated with negative psychological symptoms (e.g., Black et al., 2020; Field & Filanosky, 2010). However, it is important to highlight that there were discrepancies in terms of the definitions of externalized continuing bonds in prior research (e.g., Field & Filanosky, 2010; Scholtes & Browne, 2015). For example, some scholars discussed externalized continuing bonds with respect to experiencing illusions and hallucinations with the deceased, whereas other scholars discussed externalized continuing bonds with respect to maintaining continuing bonds by taking actions such as visiting the memorial site and keeping the deceased's possessions (Klass et al., 2014; Scholtes & Browne, 2015). Given that bereaved individuals in the current study experienced the death in the past year, engaging in actions to feel connected with the deceased (i.e., partaking in rituals and wearing possessions that belonged to the deceased) after experiencing the death in a short period of time might have enabled these bereaved individuals to feel connected to the deceased and gave them opportunities to honor the deceased, which may have been associated with their psychological adjustment (e.g., Klass et al., 2014). Inconsistent with prior research (e.g., Sholtes & Browne, 2015) and our hypotheses, internalized continuing bonds did not predict psychological adjustment in the current study. It is conceivable that the timing of the loss may contribute to the types of continuing bonds that bereaved individuals engage in, which may be associated with psychological adjustment. Previous researchers construed continuing bonds theory using tenets of attachment theory (e.g., Bowlby, 1980; Klass, 2006), which suggested that bereaved individuals seek to maintain physical proximity with the deceased, especially in the initial phase following the death. Given that the participants in the current study experienced the death within the past year, it is plausible that they relied primarily on externalized continuing bonds to maintain a connection with the deceased (e.g., Field & Filanosky, 2010).

Additionally, consistent with the theoretical model, previous research findings and our hypotheses, the being present MMGS subscale (i.e., the degree to which individuals focus on being present, mindful, and more engaged and responsible in life after a death) emerged as a positive predictor of psychological adjustment for US bereaved individuals (Yang & Lee, 2022). Prior researchers noted that grief allows individuals to search for meaning in the present moment to fill a void (e.g., Frankl, 1959; Schimmoeller & Rothhaar, 2021), and thus, grieving individuals strive to live in the moment or become more mindful after the death of the deceased (e.g., Kumar, 2005; Nolen-Hoeksema & Larson, 2013). Facilitating bereaved individuals' meaning making process, especially in the context of being in the present moment, may support US bereaved individuals' psychological adjustment.

Contrary to the theoretical model and hypotheses, the GMRI sense of peace subscale, which refers to making sense of loss, feeling prepared for death or loss, and the belief that the death brought peace to the deceased (Gillies et al., 2015), was negatively associated with US bereaved individuals' psychological adjustment. Based on the Meaning Reconstruction Model (Gillies & Neimeyer, 2006), US bereaved individuals are still in the process of making meaning related to their loss. Given that the participants in this study experienced the death of their significant individuals within a year, it is possible that these bereaved individuals struggled to comprehend their loss and still may be actively grieving the deceased (e.g., Iglewicz et al., 2019). Considering that they are still in early stages of grief, these bereaved individuals may feel resistant to finding peace related to their loss or perhaps they may be working to manage their painful emotions. Accordingly, the direction of the relationship between a sense of peace and psychological adjustment may evolve over time, as the time plays a salient role in the meaning-making process (Shear, 2012). Specifically, it is conceivable that the aforementioned relationship

may shift toward a positive association as bereaved individuals make sense of their loss during the bereavement process. Furthermore, considering that the majority of US bereaved individuals lost their deceased to death due to cancer or COVID-19, and that the subscale could be sensitive to those who experienced unexpected or traumatic deaths (Milman et al., 2019; Neimeyer, 2016), it is plausible that US bereaved individuals struggled with making sense of the deaths. This aligns with previous research that showed that sudden and painful death may hinder psychological adjustment (Carr, 2003; Carr et al., 2001; Sasson & Umberson, 2014).

Finally, in contrast to the hypotheses, explicit social support was not associated with psychological adjustment for US bereaved individuals. It is interesting to note that previous research also found mixed results related to the association between social support and psychological adjustment, with some studies finding a beneficial effect while others did not (e.g., Bailey et al., 2013; Burke et al., 2010; Kreicbergs et al., 2007; Stroebe et al., 2005). Given that the participants in the current study experienced the death within the past year, the findings suggested that bereaved individuals in the US may engage in the grieving process by themselves through maintaining continuing bonds with the deceased and focusing on the meaning-making process in the early stages of grief rather than relying on social support to work through their grief. Additionally, considering that previous research found racial/ethnic differences with respect to the relations between social support and psychological adjustment (e.g., Burke et al., 2010; Laurie & Neimeyer, 2008), exploring the roles of social support in the context of race/ethnicity might provide a clearer picture of social support.

Factors Accounting for Variance in Psychological Adjustment in the Korean Sample

Consistent with previous research and hypotheses, psychological adjustment was associated with implicit social support for Korean bereaved individuals. Implicit social support is

valued in Korean and other East Asian cultures and is often facilitated through social gatherings and preparation for rituals (e.g., Franco & Yang, 2020; Park et al., 2020; Pearson et al., 2009). Previous researchers found that Koreans and Asian individuals experienced alleviated psychological distress after receiving implicit social support in stressful situations (e.g., Taylor et al., 2007; Yeh et al., 2006). Moreover, previous research demonstrated that implicit social support could aid Korean bereaved individuals in coping with their grief (Lee et al., 2017). The findings of the current study provided additional support that implicit social support is critical for Korean bereaved individuals' psychological adjustment during the grieving process.

Interestingly and contrary to the hypotheses, internalized continuing bonds was not a predictor of psychological adjustment for Korean bereaved individuals. Furthermore, while the current study posed a research question with respect to the relations between externalized continuing bonds and psychological adjustment, the findings did not corroborate prior research, which found a positive correlation between externalized continuing bonds and posttraumatic growth among Asian bereaved individuals (e.g., Yu et al., 2016b). It is worth noting that many Koreans engage in *Jesa* or memorial rituals on the anniversary of the deceased's death as part of their cultural practices, which may be considered a way of maintaining continuing bonds. Therefore, it is possible that the current psychometric measure did not fully capture the ways in which Korean bereaved individuals maintain externalized continuing bonds with the deceased. Furthermore, as such memorial rituals are deeply rooted and highly valued in Confucianism and thus are perceived as obligatory practices and an opportunity to demonstrate respect for the deceased (Park & DeLong, 2014), it is plausible that bereaved individuals may not seek to maintain continuing bonds with the deceased during such rites but rather focus on fulfilling their responsibilities.

It is crucial to highlight the unique demographics of the Korean participants when discussing cultural customs and relevant practices. Given that the majority of the Korean participants were late-middle-aged, cisgender, heterosexual Korean males, it is likely that they may be primarily responsible for salient roles or duties in grieving rituals. Furthermore, although Korean women have begun taking on the role of *Sangju* in Korean funerals (i.e., those who represent the bereaved family and fulfill important duties for three days during the funerals), Korean men traditionally fulfill these duties (Oh & Oh, 2022). These cultural expectations and practices may have led Korean male participants to feel that they were not given the opportunity to process their grief during or after funerals since their duties to lead rituals continue throughout their lifetime. Additionally, considering that the data were collected within a year of experiencing the death of loved ones, such responsibilities may have felt prominent for them, as they were fulfilling such duties within a year after experiencing the loss. For example, after the three-day funeral, Koreans hold a 49th day rite and *Charye*, a memorial service observed during traditional Korean holidays such as *Seollal* (Lunar New Year's Day) and *Chuseok* (Korean Thanksgiving Day).

Furthermore, scholars have noted that discussing death and expressing sorrow are discouraged in Korean culture (Yoon, 2018), and death is often a taboo subject in Korean society (Kim, 2001). Therefore, while further investigation is needed, it is plausible that such cultural aspects may hinder bereaved individuals from maintaining continuing bonds with the deceased.

Comparisons among Korean and US Participants

Despite the measurement invariances observed in the measures assessing the constructs of interest in this study, analyses comparing mean scores on these measures, although highly preliminary and in need of replication, were conducted with the aim of informing future research.

Continuing Bonds

Although the results should be interpreted with caution, the finding that the US sample had higher mean scores on continuing bonds might suggest that US bereaved individuals more deliberately engage in maintaining continuing bonds when compared to Korean bereaved individuals. Although previous researchers highlighted that bereaved individuals from different cultures prefer to use different forms of continuing bonds, with Western individuals engaging in internalized continuing bonds and Asian individuals maintaining externalized continuing bonds (e.g., Valentine, 2009), other factors, such as the impact of religious identities or cultural customs related to grieving and funerals on maintaining continuing bonds with the deceased, were not further explored. Given that the majority of US bereaved individuals in the current study held religious identities whereas the majority of Korean bereaved individuals identified as atheists, other factors, such as religious and spiritual identity or worldviews and beliefs related to death (e.g., Benore & Park, 2004; Chan et al., 2005), might influence the use of continuing bonds with the deceased. Moreover, funeral traditions and customs in South Korea are geared towards using rituals to solace the spirits or send the deceased to the "other world," which may provide less motivation for bereaved individuals to develop continuing bonds with the deceased (e.g., Seong, 2017; Song, 2018; Yoon, n.d.).

Furthermore, the scale used to assess continuing bonds might not have captured culturally unique ways of maintaining continuing bonds with the deceased. Specifically, some items on the Internalized and Externalized Continuing Bonds Scale may not be relevant for Koreans. For example, in South Korea, bereaved individuals are more accustomed to burning the deceased's possessions, including their clothes, at the end or after funerals as a way to send them on their journey or ensure their peace (e.g., Ko, 2020; Koo, 2012). Considering such cultural customs and

expectations, some Koreans may feel resistant to keep possessions of the deceased. Accordingly, they may not consider one of the items of the Internalized and Externalized Continuing Bonds Scale (i.e., "I have kept objects/ possessions that belonged to the deceased because they comfort me") as reflecting their way of maintaining externalized continuing bonds with the deceased. Thus, measurement considerations may explain why the internalized and externalized continuing bonds subscales were not correlated with psychological adjustment for the Korean sample.

Meaning Making

In addition, the mean scores on the meaning of the significant other MMGS subscale were higher for US bereaved individuals when compared to Korean bereaved individuals. While the results should be interpreted cautiously, it is plausible that US bereaved individuals were more likely to reflect on what the deceased individual meant to them. This is consistent with prior research indicating that Korean society may be less encouraging of talking about and reflecting on death (e.g., Kim, 2021; Lim, 2016; Park, 2010). Furthermore, the Korean sample showed higher mean scores on the emptiness and meaninglessness GMRI subscale when compared to the US sample. This finding might have occurred because Korean bereaved individuals in the current study were relatively older than US bereaved individuals. Prior research suggested that older adults may cope better with death than younger people due to having more experience with grief (e.g., Richardson, 2014). Thus, older individuals may feel less isolation and less loss of meaning while experiencing more emotional acceptance of the death (e.g., Gillies et al., 2015; Tomarken et al., 2012).

Social Support and Communication Styles

It is worth noting that there were no correlations between low- and high-context communication styles and implicit and explicit social support for both US and Korean bereaved

individuals. Specifically, prior research noted that those from collectivistic cultures may prefer using high-context communication styles, while those from individual cultures were more likely to use low-context communication styles (Park & Kim, 2008). Also proposed was that the use of different communication styles would be associated with different types of social support since providing social support is connected to the way individuals communicate with others (Kim et al., 2008). Based on this research, it was expected that there would be a positive correlation between low-context communication styles and explicit social support for US bereaved individuals and a positive correlation between high-context communication styles and implicit social support for Korean bereaved individuals. In addition, it was expected that US individuals would have higher levels of explicit social support, whereas Korean individuals would have higher levels of implicit social support. However, the current study found no differences in the mean scores of both implicit and explicit social support among US and Korean bereaved individuals. Furthermore, there were no correlations among these variables for both US and Korean bereaved individuals. The findings implied that cultural differences in communication styles may not correspond to the types of social support that individuals provide or receive in bereavement.

Furthermore, in contrast to prior research findings (e.g., Park & Kim, 2008; Kim et al., 2008), the mean score of high-context communication styles was higher among the US sample when compared to the Korean sample. Although the results of this study need to be interpreted with caution, it might be plausible that other factors, such as gender, may have played a role in the mean score findings regarding high-context communication styles among US bereaved individuals. For example, given that the majority of the US sample identified as cisgender female, whereas the majority of the Korean sample identified as cisgender male, gender

differences in communication styles could partially explain the high mean score on high-context communication styles in the US sample, as previous research has shown that females tend to exhibit characteristics of high-context communication styles (e.g., Chlopicki, 2017; Hall & Gunnery, 2013).

Psychological Distress and Psychological Adjustment

Interestingly, the mean scores for both psychological distress and psychological adjustment were higher in the US sample as compared to the Korean sample. While the results should be interpreted with caution, similar patterns were found in previous research, where it was highlighted that individuals from Western cultures report higher levels of psychological distress and well-being, while individuals from Eastern cultures report lower levels of psychological distress and well-being due to differences in the way they think about and respond to emotions (De Vaus et al., 2018; Ludden, 2017). Although the findings should be further replicated, cultural differences may explain the mean differences.

Additionally, the mean scores of the autonomy subscale on the Psychological Well-Being Scale was higher among US bereaved individuals when compared to Korean bereaved individuals. Although further investigation is needed, the constructs that comprise psychological well-being may differ depending on cultural factors. For example, prior research found that autonomy predicted US individuals' psychological well-being, whereas the relatedness factor predicted Korean individuals' psychological well-being (De Leersnyder et al., 2015). In addition, one study noted that there may be generational factors that contribute to psychological needs and emotional well-being; specifically, research found that autonomy was the most salient for young Korean adults, whereas self-actualizing-meaning was one of the most important aspects for older Korean adults (Hahn & Oishi, 2006).

Clinical Implications

If replicated, the findings from this study could have implications for therapists. First, alleviating psychological distress as well as emptiness and meaninglessness could possibly contribute to both US and Korean bereaved individuals' psychological adjustment. Thus, it would be critical for therapists to provide grief counseling and appropriate interventions, such as meaning-centered grief therapy, group psychotherapy, holding rituals and letter writing (e.g., Castle & Phillips, 2003; Larsen, 2022; Lichtenthal et al., 2017; Park & Cha, 2023) to closely work with their bereaved clients and help reduce psychological distress and hopelessness and facilitate their sense of meaning (e.g., Lichtenthal et al., 2019). Furthermore, addressing not only clients' negative emotions but also their existential concerns with meaning-centered therapy could facilitate their meaning-making processes and reduce feelings of emptiness and meaninglessness (Keshen, 2006; Vanhooren, 2019; Wong, 2010). Additionally, therapists could recommend that their bereaved clients join online grief support communities to reduce their psychological distress and receive social support from others (Hartig & Viola, 2016). Above all, it is imperative for therapists to educate themselves and feel confident in providing grief counseling. Using the 3-Factor Grief Counseling Model could assist therapists in supporting their bereaved clients and accommodating their needs related to grief (O'Brien et al., 2023).

Second, helping US bereaved individuals maintain externalized continuing bonds as well as work through processing two aspects of the meaning-making processes (i.e., sense of peace and being present) could be helpful to promote psychological adjustment when grieving. With regard to externalized continuing bonds, for example, therapists may encourage bereaved clients to develop or engage in rituals, keep objects/possessions that belonged to the deceased, and visit the cemetery or memorial site to remember and commemorate the deceased (e.g., Klass et al.,

2014; Scholtes & Browne, 2015). Providing psychoeducation around the meaning of engaging in externalized continuing bonds may help clients understand the purpose of engaging in these activities and normalize their desires to feel connected with their deceased loved ones (Klass et al., 2014). Furthermore, given that sense of peace, which comprises items that assess the sense-making aspect of the loss, preparedness for death or loss, and whether the death brought peace to the deceased (Gillies et al., 2015), was a negative predictor of psychological adjustment, therapists perhaps could process grief and loss in the context of sense making. For example, if individuals experienced painful and sudden deaths, therapists could create a safe space for clients to process their memories, thoughts, and feelings related to their grief and loss, thereby contributing to their perceived sense of peace.

Additionally, the being present subscale of the MMGS was a positive predictor of psychological adjustment, suggesting that adjustment correlates with the death of the deceased allowing bereaved individuals to focus on being more present in their lives, appreciate their lives more, and strive to have good moments in their lives (Yang & Lee, 2022). Therapists may facilitate exploration in terms of helping bereaved clients being present in each moment or help them engage in mindfulness meditation to facilitate emotion regulation, strengthen resilience and promote psychological adjustment (Hofmeyer et al., 2020; Klimecki et al., 2014; Sagula & Rice, 2004).

In addition, it is worth noting that only implicit social support predicted Korean bereaved individuals' psychological adjustment. Thus, therapists might consider encouraging Korean bereaved individuals to connect with others and seek emotional comfort during the grieving process. For instance, bereaved individuals may benefit from identifying and spending meaningful time with those who care about them (e.g., Taylor et al., 2007). In addition, therapists

could raise awareness about the value of emotional support that does not involve discussing grief, which could assist in coping with loss and ultimately promote psychological adjustment.

Finally, when discussing clinical implications, it is salient to consider that the majority of participants in this study identified as older Korean males. Prior research highlighted the importance of enhancing social support for elder Korean males who have experienced bereavement, as males tend to receive less support as they age (Lim et al., 2010). In light of these findings as well as prior research, therapists might emphasize the importance of implicit support for clients who identify as older Korean males and have lost a source of social support in their lives. Furthermore, given that males often are expected to conduct *Jesa* or memorial rituals as part of their cultural practice, their obligations to practice these duties might hinder them from engaging fully in the grieving processes. Thus, therapists may want to encourage older Korean male clients to reflect on their relationship with the deceased, maintain continuing bonds, and allow themselves permission to grieve.

Limitations

Despite several strengths, there are a number of limitations in this study including the lack of measurement invariance in the psychometric measures for participants in South Korea and the US. Although some of the scales were validated previously, further validation and replication as well as improvement of already-developed measures was necessary to advance cross-national research in grief. For example, the Grief and Meaning Reconstruction Inventory (Choi, 2011; Gillies et al., 2015) and the Psychological Well-Being Scale (Kim et al., 2001; Ryff, 1989; Ryff & Keyes, 1995) exhibited measurement invariance despite being validated in both South Korea and the US. Furthermore, the Internalized and Externalized Continuing Bonds

Scale (Scholtes & Browne, 2015) and the Meaning Making in Grief Scale (MMGS; Yang & Lee, 2020) required further validation in South Korea and the United States for future grief research.

Moreover, although the objective of this cross-national study was to investigate the universal and unique aspects of grieving across cultures, it is worth noting that studying two cultures resulted in unanticipated challenges. Particularly with participants from the United States, funeral traditions and customs may vary depending on deceased/bereaved individuals' cultural backgrounds, generation status, and religious/spiritual identities, and the complexity may persist even within the same identities. Moreover, given that various religious and spiritual beliefs offer differing interpretations of death and the afterlife (e.g., Garces-Foley, 2014), individuals' religious and spiritual identities and beliefs can influence their perspectives on death, dying, and grieving (e.g., Doka & Morgan, 2016).

Additionally, differing sample characteristics with respect to identities such as gender, age, and religious identity between these two groups might have contributed to the participants' responses and attitudes towards grief. For example, US participants predominantly identified as female, whereas Korean bereaved individuals predominantly identified as male. Given that previous researchers found that females were more willing to express psychological distress than males (e.g., Thimm et al., 2020), gender differences may have accounted for reported differences in psychological distress in the two samples.

In addition, the age difference between US and Korean bereaved individuals might have played a role in how they responded to questions about their grieving processes. The average age of US bereaved individuals in this study was 38.52 (SD = 12.21), while the average age for Korean bereaved individuals was 54.40 (SD = 10.37). Previous studies have shown varying opinions about the impact of age on grieving. For instance, while some researchers have

mentioned that older adults still grieve heavily and struggle with handling these experiences despite having multiple death experiences compared to younger individuals (Lekalakala-Mokgele, 2018), others noted that older adults cope better with death than younger adults because they have more experience with death and coping with loss (Hayslip & Hansson, 2003; Richardson, 2014).

Furthermore, in terms of religious identity, given that the majority of US bereaved individuals identified as Christian and that Christians often hold the belief that they will reunite with their deceased loved ones in the afterlife (Segal, 2010), it is plausible that they may be more accustomed to the concept of continuing bonds and more willing to maintain continuing bonds with the deceased (Chapple et al., 2011), as opposed to Korean bereaved individuals who identified as atheists. Previous research suggested a positive association between bereaved individuals' religious beliefs and their retention of ongoing connections with the deceased, as religious individuals have hope for a reunion (e.g., Benore & Park, 2004; Hussein & Oyebode, 2008). However, while atheists may hold diverse worldviews and beliefs related to death, some researchers found that atheists either believe in reincarnation or hope that the deceased would have a better life in their next life (e.g., Chan et al., 2005). Considering these aspects, it is conceivable that this sample of Korean bereaved individuals may not have felt the need to maintain continuing bonds with the deceased (e.g., Karrel, 2015).

Moreover, the cross-sectional study design of the current study may not provide a comprehensive understanding of bereaved individuals' grieving processes, as individuals' grief responses may vary due to differences in the time at which they completed the survey. Given that grief comes in waves, capturing data at a single point in time may not reflect the dynamic nature

of grieving process. In addition, a causal relation cannot be established in cross-sectional studies. Therefore, the results of the current study should be interpreted with caution.

In addition, the recruitment mechanisms used to collect data are a limitation of this study. While some data were collected through personal recruitment, others were recruited through research companies. This difference in recruitment methods may have introduced a sampling bias because participants recruited through research companies may differ from those who were recruited personally. For example, given that those recruited through research companies regularly participate in research studies to receive compensation, they may have been more likely to be interested in participating in research studies compared to those who were personally recruited. Therefore, the recruitment methods used in this study should be taken into consideration when interpreting the findings.

Finally, the findings of the current study may have been influenced by the COVID-19 pandemic, as several variables could be associated with social and other external factors that were restricted due to COVID-related measures. For example, bereaved individuals experienced restrictions in receiving social support because COVID-related restrictions discouraged in-person interactions with others (Breen, 2021). Such restrictions might have deprived bereaved individuals of obtaining the social support that they would have received from others prior to and after the pandemic. Furthermore, these restrictions may have affected the way bereaved individuals maintained continuing bonds with the deceased, particularly externalized continuing bonds. Mechanisms for externalized continuing bonds with the deceased were limited due to physical distancing and other COVID-related restrictions. For example, many individuals and families were unable to hold in-person funerals due to policies prohibiting public gatherings (Johnson, 2020; O'Rourke, 2020). Moreover, in the United States, some families had to wait for

months to bury or cremate the deceased due to the death toll surge (Johnson, 2020; Levin, 2021). In South Korea, during the early stages of the COVID-19 pandemic, bereaved individuals were compelled to cremate the deceased before holding a proper funeral and were only allowed to gather with a limited number of individuals due to the government policies, thus losing the opportunity to practice meaningful traditional practices and mourn with others (Lee, 2022). Hence, it is crucial to consider the unique circumstances of the COVID-pandemic and relevant restrictions that influenced bereaved individuals' grieving processes when interpreting the findings.

Future Research

It is hoped that the current study will lay the groundwork for future research. Given that research delving into the cultural aspects of grieving is scarce, further research should be conducted in the context of culture to deepen the understanding of how culture influences bereaved individuals' beliefs, perspectives, and processes with regard to grieving and the factors that contribute to psychological adjustment. Specifically, future studies could investigate how bereaved individuals' understanding of their cultural rituals, traditions, and beliefs related to the death may impact their attitudes towards coping with the death of significant individuals. Understanding these aspects would deepen our comprehension of how bereaved individuals decide to utilize certain grief-related variables (e.g., continuing bonds, meaning-making, and social support) and how these constructs relate to psychological adjustment. Furthermore, future studies also should consider examining to what extent bereaved individuals' prior experiences with death and their ability to cope with loss contribute to their grieving and psychological adjustment.

Additionally, the findings suggested that psychological distress as well as emptiness and meaninglessness were associated with bereaved individuals' psychological adjustment in both the US and South Korea. Future researchers could expand this research to assess if these two variables would be considered universal aspects that are associated with bereaved individuals' psychological adjustment across different populations and/or different cultural backgrounds. In addition, further research is needed to identify additional factors that promote psychological adjustment of bereaved individuals across cultures, including, but not limited to, bereaved individuals' worldviews related to death and its associations with their grieving processes, the impact of cultural rituals, traditions, and expectations on the grieving processes and adjustment, effective therapeutic approaches for different cultural contexts, and access to mental health support.

In addition, future researchers should consider conducting longitudinal research to examine how grief-related variables such as continuing bonds, meaning making, and social support, change over time and influence bereaved individuals' psychological adjustment. Given that grief comes in waves, this cross-sectional research design may have not adequately captured how these variables change over time. For example, the provision of social support may change over time, as previous research noted that bereaved individuals in early bereavement receive more support than those in late bereavement (Balaswamy et al., 2004). Furthermore, it would be imperative to explore how these variables interact with one another and bereaved individuals' psychological adjustment over time, as some variables may work simultaneously as bereaved individuals grieve their deceased loved ones. Thus, a longitudinal approach would offer greater insight into the role of these variables during the grieving process.

Furthermore, future researchers in the field of grief research should consider developing and validating psychometric measures using advanced statistical approaches, such as exploratory structural equation modeling (ESEM), to enhance measurement quality and advance the research (e.g., Morin et al., 2013; van Zyl & ten Klooster, 2022). Since one of the primary reasons the originally proposed model could not be run was due to measurement invariance, utilizing ESEM would enable future research to explore more complex and nuanced factor structures, allowing to provide more reliable and valid psychometric measures.

In addition, exploring complexity with respect to the interactions of social identities and cultural backgrounds may provide clearer insight into how intersecting identities play a role in bereaved individuals' grieving processes. For example, 1st or 1.5 generation Korean Americans who are more accustomed to Korean funeral traditions and ways of dealing with grief may grieve differently than 2nd or 3rd generation Korean Americans who are more accustomed to US funeral traditions and ways of handling grief. Similarly, exploring how differences in race/ethnicity, gender identities, sexual orientation, age, generation status, and religious/spiritual identities contribute to grieving individuals' psychological adjustment might serve to identify protective and risk factors for specific groups of individuals.

Moreover, considering that the majority of US bereaved individuals in the current study identified as White, heterosexual, cisgender females in early middle age, it would be imperative to explore the role of social support with more individuals with diverse intersecting identities and backgrounds within the US context. For example, while previous research questioned the role of social support in bereavement (Stroebe et al., 2005), other researchers highlighted that Latino/a, Asian and Black individuals value social support to cope with loss (e.g., Burke et al., 2010; Pearson et al., 2009; Schoulte, 2011).

Relatedly, given that the majority of Korean bereaved individuals in the current study identified as cisgender, heterosexual Korean males in late middle age, assessing gender differences in grief in future research would be critical to deepen the understanding of the way gender plays a role in bereaved individuals' grieving process as well as their psychological adjustment. Prior research has shown that Korean females experienced more post-traumatic stress symptoms, depression, somatization, and acute depressive symptoms immediately after the death when compared to males (Cha et al., 2018; Lee & Lee, 2018; Yoo & Kim, 2022). Hence, future studies should investigate gender differences in bereaved individuals' psychological symptoms and grieving processes to inform targeted interventions that address the unique needs of bereaved individuals.

Furthermore, future studies should consider assessing the quality of the relationship individuals had with the deceased. Although the participants of the current study experienced the death of a significant individual, the current study did not address the quality of their relationship with the deceased (e.g., closeness, depth or conflicts) prior to the loss. Given that prior research found that quality of relationship with the deceased was associated with complicated grief and depression among bereaved individuals (Mash et al., 2014), it is crucial that future studies assess the quality of the relationship with the deceased when conducting research on the bereaved.

Finally, future research also should investigate the relation between externalized continuing bonds and psychological adjustment, particularly among US individuals, to understand the role of externalized continuing bonds in the grieving process in specific cultural contexts (e.g., Horlyck & Pettid, 2014). The current study found a positive correlation between externalized continuing bonds and psychological adjustment among US bereaved individuals, whereas previous research demonstrated that externalized continuing bonds were negatively

associated with psychological symptoms (e.g., Black et al., 2021; Field & Filanosky, 2010). However, it is important to note that previous studies have used varying definitions of externalized continuing bonds (e.g., Field & Filanosky, 2010; Scholtes & Browne, 2015). Therefore, future researchers should work towards reaching consensus on the definition of externalized continuing bonds and further investigate the relations between externalized continuing bonds and psychological adjustment.

Conclusion

The present study sheds light on factors that predict psychological adjustment among bereaved individuals in South Korea and the US. The results of the current study demonstrated that there were shared and culturally-specific factors that predicted psychological adjustment among bereaved individuals in South Korea and the US. For both groups, psychological distress and feelings of emptiness and meaninglessness were inversely associated with psychological adjustment. These findings underscored the importance of addressing unpleasant emotions and existential concerns in the context of grief with clients regardless of cultural backgrounds. In terms of culturally unique aspects of grieving, externalized continuing bonds and meaning making (i.e., sense of peace and being present) facilitated psychological adjustment for US bereaved individuals, whereas implicit social support facilitated psychological adjustment for Korean bereaved individuals. Focusing on these aspects for clients from these cultural backgrounds may facilitate psychological adjustment during grieving. This novel cross-national study provided insights into the shared and unique aspects of grieving and may assist therapists in offering culturally-informed interventions to bereaved clients.

To conclude, this study serves as a call to action to increase the understanding of shared and culturally unique aspects of grieving to support bereaved individuals. Given that everyone

experiences the death of loved ones at some point in their lives and that almost all therapists will work with grieving clients at some point during their careers, it is critical to deepen the understanding of how grieving individuals from different cultural backgrounds and identities respond to and adjust to their losses. Thus, psychologists should acknowledge the diverse cultural factors that shape the grieving experience and how such diversity may influence psychological adjustment to provide effective support for individuals from diverse cultural backgrounds. We advocate for more culturally inclusive and sensitive approaches to supporting grieving individuals to alleviate psychological suffering during the grieving processes.

Table 1

Descriptive Statistics

	Variable	Response	US (n = 446)		Korea (n = 433)	
			n	*%*	*n*	*%*
1	Marital Status	Single	139	31.2	66	15.2
		In a committed relationship	95	21.3	0	0
		Married	170	38.1	326	75.3
		Separated	3	0.7	5	1.2
		Divorced	31	7.0	24	5.5
		Widowed	8	1.8	12	2.8
2	Gender Identity	Female	257	57.6	181	41.8
		Male	180	40.4	250	57.7
		Genderqueer / Gender Nonbinary	7	1.6	1	0.2
		Trans Female	1	0.2	0	0
		Trans Male	0	0	1	0.2
		Prefer not to say	0	0	0	0
		Other	1	0.2	0	0
3-1	Race/Ethnicity: US	Black, Afro Caribbean, African American	64	14.3	-	-
		Latino, Hispanic American	42	9.4	-	-
		White, European American (Non-Hispanic)	333	74.3	-	-
		Asian, Asian American	24	5.4	-	-
		American Indian, Alaska Native, Native Hawaiian, Other Pacific Islander	16	3.6	-	-
		Other	3	0.6	-	-
3-2	Race/Ethnicity: Korea	Korean	-	-	433	
		Chinese	-	-	0	0
		Japanese	-	-	0	0
		Indian	-	-	0	0
		Mongolian	-	-	0	0
		Filipino	-	-	0	0
		Vietnamese	-	-	0	0
		Biracial/multiracial	-	-	1	

		White, European American	-	-	1	
		Black, Afro Caribbean, African American	-	-	-	-
		Latinx, Hispanic American	-	-	-	-
		Other	-	-	-	-
4	Generation Status	1st generation	16	3.6	-	-
		1.5 generation	9	2.0	-	-
		2nd generation	74	16.6	-	-
		3rd or higher generation	339	76.0	-	-
		I do not know	5	1.1	-	-
		Other	3	0.7	-	-
5	Sexual Orientation	Asexual	8	1.8	12	2.8
		Bisexual	54	12.1	20	4.6
		Straight or Heterosexual	359	80.5	387	89.4
		Gay, Lesbian, or Homosexual	12	2.7	0	0
		Prefer not to say	5	1.1	2	0.5
		Other	8	1.8	12	2.8
6	Highest Level of Education	Less than high school	1	0.2	4	0.9
		Some high school	4	0.9	0	0
		High school diploma/GED	49	11.0	70	16.2
		Community college	0	0	41	9.5
		Some college	133	29.8	7	1.6
		Bachelor's degree	175	39.2	239	55.2
		Master's or professional degree	57	12.8	57	13.2
		Doctorate degree	15	3.4	15	3.5
		Other (Please specify)	12	2.7	0	0
7	Socioeconomic Status	Lower class	47	10.5	30	6.9
		Working class	169	37.9	152	35.1
		Middle class	182	40.8	205	47.3
		Upper-Middle class	46	10.3	43	9.9
		Upper class	2	0.4	3	0.7

8	Religious/Spiritual Identity	Agnostic	86	19.3	4	0.9
		Atheist	51	11.4	192	44.3
		Buddhist	6	1.3	72	16.6
		Catholic	59	13.2	49	11.3
		Christian	172	38.6	106	24.5
		Deist	4	0.9	0	0
		Hindu	3	0.7	0	0
		Jewish	5	1.1	0	0
		Muslim	3	0.7	0	0
		Sikh	0	0	0	0
		Spiritual	39	8.7	4	0.9
		Other	18	4.0	6	1.4
9	Perceived Importance of Religious/Spiritual Identity	Not at all important	115	25.8	143	33.0
		A little important	67	15.0	110	25.4
		Somewhat important	68	15.2	79	18.2
		Moderately important	87	19.5	39	9.0
		Very important	109	24.4	62	14.3
10	The Degree of Engaging in or Practicing Religious/Spiritual Identity	Not at all	138	30.9	203	46.9
		A little	80	17.9	117	27.0
		Somewhat	67	15.0	44	10.2
		Moderately	106	23.8	44	10.2
		Totally	55	12.3	25	5.8

Table 2

Descriptive Statistics Related to The Experience of Loss

Variable		Response	US (n = 446)		Korea (n = 433)	
			n	*%*	*n*	*%*
1-1	The Person They Lost in the Past Year (multiple)	Father	73	16.4	47	10.9
		Mother	58	13.0	52	12.0
		Sibling	31	7.0	30	6.9
		Other family member	181	40.6	116	26.8
		Close friend	122	27.4	143	33.0
		Married or engaged partner (e.g., spouse, significant other)	11	2.5	4	0.9
		Unmarried romantic partner (e.g., partner, boyfriend, girlfriend, significant other)	21	4.7	1	0.2
		Other	19	4.3	82	18.9
1-2	The Person They Selected for the Research	Father	10		40	
		Mother	8		48	
		Sibling	5		25	
		Other family member	21		90	
		Close friend	16		122	
		Married or engaged partner (e.g., spouse, significant other)	2		4	
		Unmarried romantic partner (e.g., partner, boyfriend, girlfriend, significant other)	1		1	
		Other	1		69	
2	The Cause of The Death	Heart disease	53	11.9	42	9.7
		Cancer	88	19.7	121	27.9
		Accidents (unintentional injuries)	46	10.3	44	10.2
		Intentional self-harm (suicide)	19	4.3	19	4.4
		COVID-19	83	18.6	32	7.4
		Influenza and pneumonia	6	1.3	12	2.8
		Chronic lower respiratory diseases	12	2.7	13	3.0

		Stroke (cerebrovascular diseases)	22	4.9	26	6.0
		Alzheimer's disease	8	1.8	15	3.5
		Diabetes	7	1.6	6	1.4
		Nephritis, nephrotic syndrome, and nephrosis	4	0.9	10	2.3
		I do not know	20	4.5	26	6.0
		Other (please specify)	78	17.5	67	15.5
3	Perceived Closeness to the Deceased Prior to the Loss	Not at all close	4	0.9	10	2.3
		A little close	17	3.8	52	12.0
		Somewhat close	40	9.0	80	18.5
		Moderately close	106	23.8	127	29.3
		Very close	279	62.6	164	37.9
4	Current Perceived Closeness to the Deceased	Not at all	28	6.3	19	4.4
		A little close	46	10.3	64	14.8
		Somewhat close	57	12.8	79	18.2
		Moderately close	108	24.2	151	34.9
		Very close	207	46.4	120	27.7
5	The Intensity of Their Feelings After Experiencing the Loss	Not intense at all	1	0.2	8	1.8
		A little intense	12	2.7	72	16.6
		Somewhat intense	34	7.6	105	24.2
		Moderately intense	89	20.0	130	30.0
		Very intense	310	69.5	118	27.3
6	The Intensity of Their Current Feelings Related to the Loss	Not intense at all	19	4.3	30	6.9
		A little intense	90	20.2	113	26.1
		Somewhat intense	109	24.4	143	33.0
		Moderately intense	125	28.0	97	22.4
		Very intense	103	23.1	50	11.5

Table 3

Means, Standard Deviations, Reliability Estimates, and Intercorrelations for US Participants (n = 446)

	Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
1.	Psychological Distress	-																					
2.	Internalized Continuing Bonds	.26***	-																				
3.	Externalized Continuing Bonds	.32***	.84***	-																			
4.	GMRI: Continuing Bonds	-.10*	.54***	.49***	-																		
5.	GMRI: Personal Growth	.09	.38***	.37***	.28***	-																	
6.	GMRI: Sense of Peace	-.07	.12*	.04	.15**	.13**	-																
7.	GMRI: Emptiness and Meaninglessness	-.55***	-.26***	-.38***	-.04	-.09	.27***	-															
8.	GMRI: Valuing Life	-.05	.38***	.36***	.48***	.68***	.09	.01	-														
9.	MMGS: Meaning of the Significant Other	.00	.57***	.52***	.65***	.46***	.04	-.21***	.53***	-													
10.	MMGS: Being Present	-.15**	.38***	.30***	.41***	.69***	.07	.06	.71***	.60***	-												
11.	MMGS: Coping and Growth	.00	.39***	.34***	.36***	.78***	.10*	-.05	.66***	.59***	.82***	-											
12.	Implicit Social Support	-.26***	.17***	.16***	.20***	.25***	.10*	.29***	.34***	.24***	.41***	.30***	-										
13.	Explicit Social Support	-.27***	.20***	.16***	.20***	.29***	.15***	.30***	.33***	.24***	.41***	.36***	.84***	-									

14.	Psychological Adjustment (PWBS)	-.62***	.04	.01	.26***	.23***	.05	.48***	.35***	.19***	.45***	.30***	.48***	.48***	-							
15.	PWBS: Autonomy	-.38***	-.13**	-.13**	.03	-.02	-.01	.27***	.03	.00	.08	.01	.09	.09	.58***	-						
16.	PWBS: Environmental Mastery	-.61***	.09	.04	.22***	.23***	.05	.42***	.32***	.18***	.43***	.29***	.41***	.44***	.89***	.39***	-					
17.	PWBS: Personal Growth	-.42***	-.09	-.10*	.18***	.20***	-.02	.39***	.29***	.14**	.32***	.23***	.32***	.28***	.78***	.48***	.55***	-				
18.	PWBS: Positive Relations with Others	-.45***	.11*	.11*	.34***	.19***	.04	.38***	.34***	.23***	.40***	.26***	.56***	.57***	.79***	.28***	.65***	.56***	-			
19.	PWBS: Purpose in Life	-.55***	.02	-.02	.23***	.22***	.04	.44***	.34***	.15**	.41***	.29***	.41***	.40***	.85***	.35***	.75***	.69***	.64***	-		
20.	PWBS: Self-Acceptance	-.55***	.13**	.09	.21***	.25***	.09	.40***	.31***	.18***	.45***	.32***	.46***	.47***	.87***	.34***	.85***	.51***	.64***	.73***	-	
21.	SAAC_Low	.30***	.16**	.17***	-.06	.14**	.03	-.19***	.07	.05	.05	.05	.06	.05	-.05	.04	-.08	-.04	-.08	-.09	-.01	-
22.	SAAC_High	.21***	.20***	.17***	.02	.17***	-.01	-.13**	.08	.11*	.14**	.17***	-.01	.00	-.09	-.09	-.05	-.15**	-.14**	-.10*	.05	.15***	-
	Mean	2.62	3.10	3.10	4.14	3.46	3.14	2.68	4.01	4.11	3.79	3.75	3.72	3.50	4.84	5.11	4.49	5.27	5.06	4.88	4.39	4.22	4.26
	SD	.97	.84	.86	.66	.76	.95	.83	.68	.70	.77	.82	1.10	1.00	.92	1.08	1.35	1.09	1.16	1.25	1.42	.96	.90
	Actual Range	1~5	1~5	1.22 ~5	1.29 ~5	1~5	1~5	1~5	1.75 ~5	1.29 ~5	1~5	1~5	1~5	1~5	1.43 ~ 6.81	1~7	1~7	1~7	1~7	1~7	1~7	1.78 ~ 6.56	1.10 ~ 6.60
	Possible Range	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~7	1~7	1~7	1~7	1~7	1~7	1~7	1~7	1~7
	Cronbach's Alpha	.94	.9	.83	.78	.8	.77	.80	.68	.80	.85	.89	.96	.96	.95	.78	.86	.78	.81	.81	.88	.76	.78

Note. GMRI = The Grief and Meaning Reconstruction Inventory; MMGS = The Meaning Making in Grief Scale; PWBS = The Psychological Well-Being Scale. SAAC = The Survey of Asian American Communication. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Table 4

Means, Standard Deviations, Reliability Estimates, and Intercorrelations for Korean Participants (n = 433)

	Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
1.	Psychological Distress	-																					
2.	Internalized Continuing Bonds	.36***	-																				
3.	Externalized Continuing Bonds	.40***	.84***	-																			
4.	GMRI: Continuing Bonds	.14**	.69***	.70***	-																		
5.	GMRI: Personal Growth	.17***	.44***	.45***	.55***	-																	
6.	GMRI: Sense of Peace	-.04	.21***	.20***	.29***	.18***	-																
7.	GMRI: Emptiness and Meaninglessness	-.53***	-.44***	-.50***	-.35***	-.27***	.05	-															
8.	GMRI: Valuing Life	.09	.32***	.31***	.43***	.69***	.14**	-.10*	-														
9.	MMGS: Meaning of the Significant Other	.15**	.71***	.68***	.82***	.53***	.22***	-.43***	.38***	-													
10.	MMGS: Being Present	.06	.32***	.29***	.42***	.70***	.19***	-.07	.65***	.46***	-												
11.	MMGS: Coping and Growth	.10*	.38***	.36***	.46***	.76***	.20***	-.16***	.61***	.51***	.87***	-											
12.	Implicit Social Support	-.17***	.07	.09	.15**	.24***	.06	.14**	.26***	.13**	.24***	.23***	-										
13.	Explicit Social Support	-.20***	.06	.06	.15**	.24***	.03	.19***	.29***	.12*	.23***	.19***	.80***	-									
14.	Psychological Adjustment (PWBS)	-.36***	.01	.01	.12*	.22***	.15***	.38***	.23***	.10*	.25***	.22***	.50***	.48***	-								

15.	PWBS: Autonomy	-.14**	.00	.00	.02	-.01	.14**	.15***	.02	.02	.04	.01	.04	-.01	.53***	-						
16.	PWBS: Environmental Mastery	-.33***	.03	.03	.06	.14**	.12*	.34***	.17***	.07	.22***	.17***	.34***	.36***	.84***	.41***	-					
17.	PWBS: Personal Growth	-.23***	.02	.04	.15**	.27***	.12*	.24***	.24***	.12*	.24***	.26***	.39***	.35***	.75***	.24***	.50***	-				
18.	PWBS: Positive Relations with Others	-.34***	-.03	-.02	.14**	.17***	.08	.30***	.16***	.12*	.14**	.13**	.58***	.62***	.73***	.18***	.51***	.49***	-			
19.	PWBS: Purpose in Life	-.25***	.02	.05	.15**	.28***	.12*	.33***	.32***	.09	.29***	.26***	.38***	.40***	.87***	.37***	.69***	.68***	.59***	-		
20.	PWBS: Self-Acceptance	-.36***	-.01	-.04	.06	.16***	.13**	.36***	.15***	.04	.22***	.17***	.43***	.44***	.85***	.35***	.73***	.55***	.54***	.65***	-	
21.	SAAC_Low	-.01	.00	-.03	-.01	.10*	.03	-.01	.15**	-.01	.07	.09	.07	.08	.19***	.32***	.08	.10*	.10*	.16***	.15**	-
22.	SAAC_High	.25***	.14**	.16***	.09	.13**	.01	-.23***	.03	.05	.00	.04	-.04	-.03	-.15**	-.14**	-.10*	-.11*	-.15**	-.16***	-.06	.08	-
	Mean	1.87	2.50	2.29	3.49	3.36	3.34	3.18	3.81	3.71	3.88	3.70	3.71	3.56	4.51	4.47	4.71	4.25	4.52	4.69	4.46	4.13	3.87
	SD	.65	.84	.84	.71	.67	.81	.71	.58	.83	.65	.67	.92	.79	.70	.77	.83	.84	1.03	.99	1.03	.74	.69
	Actual Range	1.0 ~ 4.8	1.18 ~ 4.82	1 ~ 4.89	1~5	1~5	1~5	1~5	2~5	1~5	1.43 ~ 5.0	1~5	1~5	1~5	1.83 ~ 6.35	1~7	1.88 ~ 6.88	1.75 ~ 6.88	1.43 ~7	1.43 ~7	1.38 ~ 6.88	1.89 ~ 6.22	1.80 ~6
	Possible Range	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~5	1~7	1~7	1~7	1~7	1~7	1~7	1~7	1~7	1~7
	Cronbach's Alpha	.94	.93	.91	.82	.82	.73	.74	.54	.93	.88	.89	.96	.95	.93	.71	.77	.71	.83	.80	.86	.74	.71

Note. GMRI = The Grief and Meaning Reconstruction Inventory; MMGS = The Meaning Making in Grief Scale; PWBS = The Psychological Well-Being Scale. SAAC = The Survey of Asian American Communication. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Table 5

Standardized Loadings of the Revised Internalized and Externalized Continuing Bonds Scale: US and Korean Participants

	US		Korea	
	Factor 1 (Internalized Continuing Bonds)	Factor 2 (Externalized Continuing Bonds)	Factor 1 (Internalized Continuing Bonds)	Factor 2 (Externalized Continuing Bonds)
1. I imagine the deceased as watching over me.	0.75		0.80	
2. I believe that I have an ongoing connection with the deceased.	0.81		0.85	
3. I experience the deceased as continuing to live on through their impact on who I am today.	0.67		0.83	
4. My dreams about the deceased bring me comfort.	0.63		0.75	
5. I have kept objects/possessions that belonged to the deceased because they comfort me.		0.60		0.74
6. I visit the cemetery and memorial site to see and be close to the deceased.		0.59		0.78
7. I partake in rituals (e.g., candle/incense lighting, balloon/butterfly releasing, displaying photos of the deceased, practicing special rituals during the holidays, offering food to the deceased) in remembrance of the deceased.		0.65		0.68
8. I have inner conversations with the deceased.		0.76		0.82

Table 6

Hierarchical Multiple Regression Analysis Predicting Psychological Adjustment for US Bereaved Individuals (n = 446)

Variable	*B*	*SE B*	β	T	R^2	R^2_{Adj}	ΔR^2	*F*	ΔF	*df*
Step 1					.38	.38***	.38	275.00***	275.00	1, 444
Psychological Distress	-.58	.04	-.62***	-16.58						
Step 2					.50	.50***	.12	148.89***	53.39	2, 422
Psychological Distress	-.49	.03	-.52***	-14.90						
Implicit Social Support	.18	.05	.21***	3.43						
Explicit Social Support	.15	.06	.17	2.71						
Step 3					.52	.51***	.02	95.04***	7.60	2, 440
Psychological Distress	-.54	.04	-.58***	-15.44						
Implicit Social Support	.16	.05	.20***	3.25						
Explicit Social Support	.12	.06	.14	2.23						
Internalized Continuing Bonds	.05	.07	.05	.80						
Externalized Continuing Bonds	.11	.07	.10	1.58						
Step 4					.61	.59***	.09	55.16***	13.34	7, 433
Psychological Distress	-.42	.04	-.45***	-11.18						
Implicit Social Support	.08	.05	.10	1.75						
Explicit Social Support	.09	.05	.10	1.69						
Internalized Continuing Bonds	-.08	.07	-.07	-1.20						
Externalized Continuing Bonds	.19	.07	.17***	2.87						
GMRI: Continuing Bonds	.13	.06	.09	2.10						
GMRI: Personal Growth	.09	.06	.08	1.52						
GMRI: Sense of Peace	-.10	.03	-.10***	-3.06						
GMRI: Emptiness and Meaninglessness	.25	.05	.22***	5.30						
MMGS: Meaning of the Significant Other	-.11	.07	-.08	-1.67						
MMGS: Being Present	.31	.07	.26***	4.33						
MMGS: Coping and Growth	-.03	.07	-.03	-.46						

Note. GMRI = The Grief and Meaning Reconstruction Inventory; MMGS = The Meaning Making in Grief Scale. The adjusted significance level after Bonferroni correction was 0.0042.

Table 7

Hierarchical Multiple Regression Analysis Predicting Psychological Adjustment for Korean Bereaved Individuals (n = 433)

Variables	*B*	*SE B*	β	T	R^2	R^2_{Adj}	ΔR^2	*F*	ΔF	*df*
Step 1					.13	.13***	.13	64.98***	64.98	1, 431
Psychological Distress	-.39	.05	-.36***	-8.06						
Step 2					.33	.33***	.20	70.37***	63.63	2, 429
Psychological Distress	-.30	.04	-.28***	-6.84						
Implicit Social Support	.19	.05	.25***	3.83						
Explicit Social Support	.20	.06	.22***	3.37						
Step 3					.34	.33	.01	43.80***	2.97	2, 427
Psychological Distress	-.35	.05	-.32***	-7.26						
Implicit Social Support	.19	.05	.24***	3.66						
Explicit Social Support	.19	.06	.22***	3.28						
Internalized Continuing Bonds	.01	.06	.01	0.17						
Externalized Continuing Bonds	.08	.06	.10	1.28						
Step 4					.43	.41***	.09	26.29***	9.45	7, 420
Psychological Distress	-.21	.05	-.20***	-4.14						
Implicit Social Support	.18	.05	.23***	3.67						
Explicit Social Support	.12	.06	.14	2.13						
Internalized Continuing Bonds	-.04	.06	-.04	-0.60						
Externalized Continuing Bonds	.13	.06	.15*	1.97						
GMRI: Continuing Bonds	-.04	.07	-.04	-.52						
GMRI: Personal Growth	.18	.07	.17	2.72						
GMRI: Sense of Peace	.04	.03	.05	1.21						
GMRI: Emptiness and Meaninglessness	.33	.05	.34***	6.54						
MMGS: Meaning of the Significant Other	.07	.06	.08	1.07						
MMGS: Being Present	.05	.08	.05	.64						
MMGS: Coping and Growth	-.03	.09	-.03	-.38						

Note. GMRI = The Grief and Meaning Reconstruction Inventory; MMGS = The Meaning Making in Grief Scale. The adjusted significance level after Bonferroni correction was 0.0042.

Table 8

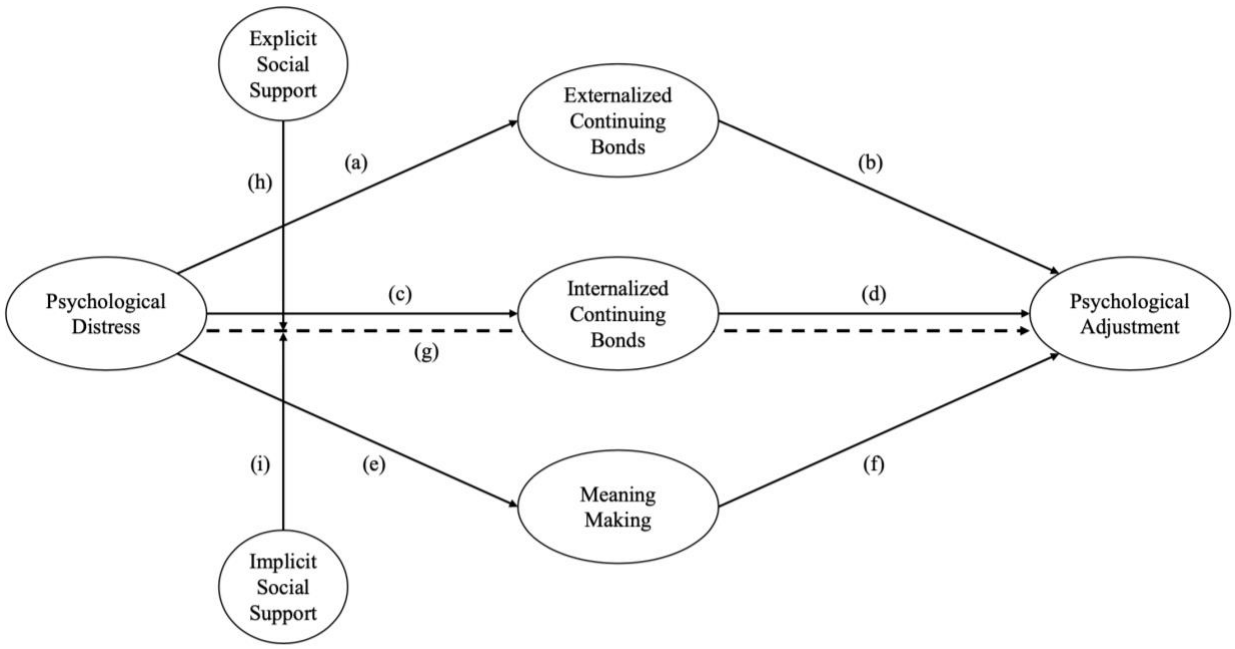
Means, Standard Deviations, and MANOVA for Psychological Distress, Implicit and Explicit Social Support, Internalized and Externalized Continuing Bonds, and Subscales of Meaning Making Scales, and Psychological Adjustment across US and Korean Bereaved Individuals

	US		Korea		Between Subjects			Between Subjects		
	M	*SD*	*M*	*SD*	*F*	*p*	η_p^2	*Welch's F*	*p*	η_p^2
Psychological Distress	2.62	0.97	1.87	0.65	182.03	0.00	0.17	184.09	0.00	0.17
Implicit Social Support	3.72	1.10	3.71	0.92	0.07	0.79	0.00			
Explicit Social Support	3.50	1.01	3.56	0.79	0.96	0.33	0.00			
Internalized Continuing Bonds	3.09	0.84	2.50	0.84	110.09	0.00	0.11			
Externalized Continuing Bonds	3.10	0.86	2.29	0.84	202.73	0.00	0.19			
GMRI: Continuing Bonds	4.14	0.66	3.49	0.71	201.02	0.00	0.19			
GMRI: Personal Growth	3.46	0.76	3.36	0.67	4.25	0.04	0.01			
GMRI: Sense of Peace	3.14	0.95	3.34	0.81	11.26	0.00	0.01			
GMRI: Emptiness and Meaninglessness	2.68	0.83	3.18	0.71	92.16	0.00	0.10	92.56	0.00	0.10
MMGS: Meaning of the Significant Other	4.12	0.70	3.71	0.83	62.33	0.00	0.07	62.02	0.00	0.07
MMGS: Being Present	3.79	0.77	3.88	0.65	3.34	0.07	0.00			
MMGS: Coping and Growth	3.75	0.82	3.70	0.67	1.12	0.29	0.00			
Psychological Adjustment	4.84	0.92	4.51	0.70	34.68	0.00	0.04	34.94	0.00	0.04

Notes. Multivariate analysis of variance (MANOVA) Wilkes' lambda = .53, $p < .0001$. US group $n = 446$; Korean group $n = 433$. GMRI = The Grief and Meaning Reconstruction Inventory; MMGS = The Meaning Making in Grief Scale.

Figure 1

The Relations among Psychological Distress, Externalized Continuing Bonds, Internalized Continuing Bonds, Meaning Making, Explicit Social Support, Implicit Social Support, and Psychological Adjustment



Appendix A

Literature Review

The current study investigated the similarities and differences in the relations between psychological distress, salient psychosocial grief variables (i.e., externalized/internalized continuing bonds, meaning-making, and explicit/implicit social support), and psychological adjustment among Koreans and Americans during their grieving processes. In the following sections, research on grief, cultural perspectives of grief, externalized/internalized continuing bonds, meaning-making, and explicit/implicit social support were reviewed.

Grief and Cultures

Grief

Grief refers to a personal response to loss that encompasses emotional, physical, cognitive and behavioral reactions (Buglass, 2010). Immediately after experiencing the death of a loved one, the majority of bereaved individuals often experience acute distress and depression, and some bereaved individuals even suffer from psychological pain that entails chronic distress and depression, fatigue, feelings of hopelessness, and suicidal ideation (Bonanno et al., 2008; Gillies & Neimeyer, 2006; Nolen-Hoeksema & Larson, 2013; Stroebe et al., 2005). In addition, this painful experience also impacts bereaved individuals' daily lives, including loss of appetite, fatigue, difficulty sleeping, difficulty concentrating and poor memory (Clayton, 2007).

Although grief reactions gradually subside over time, some grievers may suffer from more complicated grief reactions and experience a sense in which grief is a never-ending, ever-evolving process (Berzoff, 2003; Bonanno et al., 2007; Prigerson et al., 2009; Worden, 2018). For example, a recent survey showed that nearly 20% of bereaved individuals who lost their

loved ones to death in the past three years reported that they still grieve intensively (Koenig, 2019). As Freud (1929) once mentioned:

> We know that the acute sorrow we feel after such a loss will run its course, but also that we will remain inconsolable, and will never find a substitute. No matter what may come to take its place, even should it fill that place completely, it yet remains something else. And that is how it should be. It is the only way of perpetuating a love that we do not want to abandon. (p. 196)

This illustrates how grief demands considerable effort to move toward psychological adjustment, suggesting the need for identifying factors related to the adjustment of bereaved individuals.

Cultural Perspectives of Grief

Cross-cultural studies capture universality and variability in a psychological phenomenon (Berry et al., 2002). While there has been disagreement as to whether grief is a unitary and universal psychological phenomenon (Klass, 2000; Parkes, 2000), there is no doubt that customs and beliefs regarding death and bereavement differ across cultures, which may potentially affect grieving processes (Klass, 2001; Parkes et al., 2015). For example, explicit social support is widely used in an Irish American Catholic wake, whereas implicit social support is widely used in a Korean funeral (Franco & Yang, 2020; Pearson et al., 2009).

Understanding cultural aspects of grief is crucial for physicians and clinicians to provide culturally appropriate treatments to patients. For example, several researchers pointed out that attitudes towards death, dying and bereavement among East Asians differ from Westerners' attitudes; patients and bereaved individuals rooted in East Asian cultural values may experience different psychological processes when encountering death, dying, and bereavement (Lee, 2009; Morita et al., 2015; Yick et al., 2002).

Despite researchers' demands to conduct cross-cultural studies on grief (Klass, 2000; Rosenblatt, 2008), cross-cultural studies in the grief literature are still scarce as this literature revolves around Western perspectives of grief (Ngo et al., 2019; Rosenblatt, 2008). Thus, additional research was needed to understand grieving processes across cultures.

A Conceptual Framework

Continuing Bonds

In the early twentieth century, there was a prevalent notion in the grief literature that bereaved individuals must emotionally detach themselves from the deceased for better psychological adjustment (Freud, 1917). This belief has changed. In 2014, Klass et al. introduced the concept of *continuing bonds* and postulated that it is natural and healthy to form a new relationship or maintain continuing bonds with the deceased. Researchers later identified two types of continuing bonds: internalized and externalized continuing bonds. Internalized continuing bonds refer to engaging in internal experiences to connect with the deceased (e.g., feeling comforted by memories of the deceased), whereas externalized continuing bonds refer to engaging in external experiences to connect with the deceased (e.g., visiting the cemetery to see and be close to the deceased; Field et al., 2013; Scholtes & Browne, 2015). Previous empirical findings showed mixed findings with regard to maintaining continuing bonds with the deceased.

US/Western Literature. Empirical research conducted in the US and other Western cultures supported the idea that there are distinctive outcomes related to externalized and internalized continuing bonds for Western bereaved individuals. Specifically, empirical studies found that internalized continuing bonds were positively associated with psychological adjustment, whereas externalized continuing bonds were linked with poor psychological adjustment for Western bereaved individuals (e.g., Field & Filanosky, 2010; Scholtes & Browne,

2015). For example, in one study with 502 bereaved individuals, internalized continuing bonds were positively associated with personal growth and negatively associated with risk factors, while externalized continuing bonds were positively correlated with higher levels of complicated grief (Field & Filanosky, 2010). However, it is important to note that hallucinations and delusions were considered externalized continuing bonds in this study; other aspects of externalized continuing bonds were overlooked (e.g., keeping belongings of the deceased, visiting the cemetery and memorial site). Given that externalized continuing bonds are not limited to hallucinations and delusions and also include funeral customs and traditions in some Asian cultures, including Koreans (Klass et al., 2014; Lee & Kang, 2020; Yu et al., 2016a), the current study used a measure that assesses externalized continuing bonds in a comprehensive manner.

Recently, Scholtes and Browne (2015) developed the Internalized and Externalized Continuing Bonds Scale to identify different types of continuing bonds among bereaved parents and study associations with grief outcomes. In contrast to the scale developed by Field and Filanosky (2010), their scale reflected broader aspects of externalized continuing bonds (e.g., "I have kept objects/possessions that belonged to my child because they comfort me," and "I visit the cemetery and memorial site to see and be close to my child"). With this scale, the findings were similar to prior studies for Western bereaved individuals, i.e., internalized continuing bonds were associated with lower levels of grief intensity and higher levels of personal growth and externalized continuing bonds were associated with higher levels of grief intensity and lower levels of personal growth (Scholtes & Browne, 2015).

Previous empirical findings illustrate that internalized continuing bonds are a critical factor for Western bereaved individuals' psychological adjustment, while externalized

continuing bonds hinder their psychological adjustment. Yet, additional research was needed to understand how different types of continuing bonds play a role in the relations among psychological distress, meaning making, social support, and psychological adjustment for bereaved individuals.

Korean/East Asian Literature. Empirical research on continuing bonds is scarce in the Korean grief literature. Prior to the research that differentiated between internalized and externalized continuing bonds, one cross-cultural study found cultural differences in the way individuals in collectivistic and individualistic cultures maintain continuing bonds with the deceased. For example, Chinese bereaved individuals who engaged in higher levels of continuing bonds at four months of bereavement had better psychological adjustment at 18 months of bereavement, while the opposite was found among Americans; Americans who engaged in high levels of continuing bonds at four months of bereavement had poor psychological adjustment at 18 months of bereavement (Lalande & Bonanno, 2006). Interestingly, researchers speculated that rituals in China (e.g., the first 49 days of ritual, visiting the deceased on a few key occasions annually) might have allowed Chinese bereaved individuals to have better psychological adjustment at the initial stage of bereavement due to maintaining continuing bonds with the deceased.

Valentine (2009) also contended that cultural traditions and customs influence the way individuals maintaining continuing bonds with the deceased. For example, Japanese bereaved individuals focus on traditional rituals and ceremonies to maintain externalized continuing bonds with the deceased, while Western bereaved individuals primarily engage in internalized continuing bonds. Given that Koreans share similar funeral rituals and traditions as those in other East Asian cultures (Park et al., 2020), Korean bereaved individuals may show similar results

with regard to continuing bonds to other East Asian bereaved individuals in prior studies.

In fact, one qualitative study with Korean bereaved individuals found that Korean bereaved women strived to maintain continuing bonds with the deceased in their own personal ways, including feeling comforted by memories of the deceased, keeping the deceased's possessions, and preparing food for the death anniversary table (Lee & Kang, 2020). In one study of 293 Korean bereaved individuals, continuing bonds were positively associated with personal growth (Kim et al., 2016), which was consistent with other empirical studies conducted with Western bereaved individuals (e.g., Lalande & Bonanno, 2006; Scholtes & Browne, 2015). However, no research has been conducted examining whether and how different types of continuing bonds influence psychological adjustment with Korean individuals.

After the concepts of different types of continuing bonds were introduced, two empirical studies conducted in mainland China and Hong Kong showed similar results as Western empirical studies. In one study with 273 Chinese bereaved individuals who encountered the death of their significant family member an average of 7.81 years ago, externalized continuing bonds were positively associated with grief symptoms, while internalized continuing bonds were positively associated with posttraumatic growth (Yu et al., 2016a). Moreover, the studies with 247 Chinese bereaved individuals and 71 Hong Kong bereaved individuals also showed that externalized continuing bonds were positively associated with grief symptoms (Ho et al., 2013; Yu et al., 2016b), while internalized continuing bonds were associated with psychological adjustment (Yu et al., 2016b). In the study with 247 Chinese bereaved individuals, internalized continuing bonds mediated the relations between attachment styles and posttraumatic growth, and externalized continuing bonds mediated the relations between attachment styles and grief symptoms (Yu et al., 2016b). Interestingly, externalized continuing bonds also had a moderate

positive correlation with posttraumatic growth. Furthermore, these studies considered externalized continuing bonds as pathological and assessed maladaptive aspects of externalized continuing bonds (e.g., illusions and hallucinations), emphasizing the importance of capturing the general aspect of externalized continuing bonds.

Thus, it would be critical to use a psychometric measure that reflects the comprehensive nature of externalized continuing bonds. The current study promoted understanding of continuing bonds by using a comprehensive measure of continuing bonds, investigating how externalized and internalized continuing bonds were associated with psychological adjustment, and examining these relations across cultures.

Meaning Making

Although it is inevitable to avoid psychological distress after experiencing the loss, searching for meaning in the death of a loved one allows grieving individuals to endure emotional suffering (Kumar, 2005). Gillies and Neimeyer (2006) proposed a theoretical framework for highlighting the role of meaning making in grievers' psychological adjustment. According the Meaning Reconstruction Model, psychological distress decreases after going through the meaning-making process, which facilitates psychological adjustment. Specifically, this theoretical model posits that bereaved individuals who engage in the meaning-making process, including sense-making (e.g., making sense of the loss), benefit finding (e.g., finding positive aspects that stem from the loss), and identity change (e.g., reconstructing their identity), build new meaning structures, which alleviates psychological distress and then leads to better psychological adjustment.

US/Western Literature. A large body of US grief literature suggested that meaning making was a salient aspect of grieving and facilitated positive outcomes. Specifically, meaning

making helped the overall adjustment among grieving individuals (Currier et al., 2006; Holland et al., 2006; Lichtenthal et al., 2010). In one study with a sample of 1,022 bereaved college students who lost a friend or loved one to death in the past two years, sense-making was the most robust predictor of bereavement adjustment (Holland et al., 2006). Moreover, high levels of meaning-making predicted better grief outcomes among 506 bereaved individuals who experienced the death of their loved ones in the past two years (Neimeyer et al., 2006). Interestingly, strong continuing bonds predicted low levels of psychological adjustment among those were not able to find meaning in their loss, which suggests that meaning making could be a precursor to continuing bonds (Neimeyer et al., 2006). Moreover, low psychological distress and physical health were found among those who found meaning in the deaths of their loved ones (Murphy et al., 2003). This indicates that meaning making could help bereaved individuals' overall adjustment. Interestingly, those who attended a bereavement support group were four times more likely to find meaning compared to those who did not attend the support group, suggesting that social support may facilitate the meaning-making process.

Yet, it was also important to note that not all bereaved individuals search for meaning after losing their loved ones to death (e.g., Davis et al., 2000). For example, in one study of 138 bereaved parents who lost their children to violent death, 57% of these parents found meaning in their loss, while 43% did not (Murphy et al., 2003). In a different study, those who made little to no sense of their child's death reported greater intense and enduring grief symptoms than those who scored higher on meaning-making (Keesee et al., 2008).

Previous research illustrates that meaning making was a critical factor for bereaved individuals' psychological adjustment. Yet, additional research was needed to understand how

meaning making plays a role in the relations among psychological distress, continuing bonds, social support, and bereaved individuals' psychological adjustment.

Korean/East Asian Literature. Empirical research on meaning making is scarce in Korean grief literature. In one study with 323 college students who experienced various kinds of losses in which nearly half of participants experienced the death of a loved one, meaning making was related to psychological adjustment (Choi & Ahn, 2013). Interestingly, gender and religion difference also mattered in this study; cisgender females had greater psychological distress compared to cisgender males, and those who were religious had greater post traumatic growth compared to those who were not connected to a religion. However, further research is needed to understand Korean bereaved individuals' meaning making process, as this study removed one construct that measures meaning making because individuals who experienced different types of losses (e.g., relationship loss, physical/psychological loss) also participated in this study.

Based on these findings, the current study furthered our understanding of the meaning reconstruction model by investigating the role of meaning-making in the relations of continuing bonds, psychological distress, and psychological adjustment. Moreover, the current study aimed to examine the model by adding an interpersonal factor – social support. Finally, investigating these relations in two different cultural groups advanced our understanding of the meaning-making processes in two cultures.

Social Support

Social support refers to the various types of support that one receives through social networks (Rodriquez & Cohen, 1998). Cohen and Wills (1985) developed a framework postulating that social support buffers individuals from potential stressful events. A substantial body of research found that social support served as a protective factor against various stressful

events and promoted psychological adjustment (e.g., Crockett et al., 2007; Jasinskaja-Lahti et al., 2006; Wilson et al., 2006), including among bereaved individuals (e.g., Benkel et al., 2009).

US/Western Literature. Yet, mixed results were found in the Western bereavement literature. For example, some studies found that social support buffered bereaved psychological distress and facilitated psychological adjustment, while other research did not find this association (Bailey et al., 2013; Stroebe et al., 2005).

In one study with 48 bereaved mothers whose children died from gun violence, social support was negatively associated with both stressful live events and traumatic stress but was positively associated with resilience (Bailey et al., 2013). Furthermore, social support mediated the relations between traumatic stress and resilience, indicating that social support served as a protective factor for bereaved individuals. In another study with 54 homicidally bereaved individuals, the available support network was negatively associated with complicated grief, and grief-related social support was negatively associated with depression, which suggests that social support was a crucial factor for bereaved individuals' psychological adjustment (Burke et al., 2010). Social support also helped 449 parents (whose child died) process their grief, and even ongoing social support 4 to 9 years after loss was still beneficial for them (Kreicbergs et al., 2007). Interestingly, gender differences on seeking social support were found in this study; while mothers sought social support in various types of relationships (e.g., friends, other bereaved friends, family members), fathers only sought family members as their primary social support. Furthermore, high levels of perceived social support predicted low levels of prolonged grief disorder symptoms among 154 bereaved individuals (Boulware & Bui, 2016). In one study with 60 bereaved widows who were at risk of suicidal ideation compared to nonbereaved individuals,

high levels of social support were associated with decreased suicidal ideation (Stroebe et al., 2005).

Interestingly, one longitudinal study found an interaction between meaning and social support (Murphy et al., 2003). Five years after experiencing the death, bereaved individuals who attended a bereavement support group were more likely to find meaning than those who did not attend, and those who found meaning reported low levels of psychological distress and physical health, suggesting that social support promotes psychological adjustment through facilitating the meaning-making process. On the other hand, other studies found that social support did not buffer bereaved individuals from negative psychological outcomes. For example, social support did not have any effect on psychological distress either one or five years after loss among 261 bereaved parents who experienced a child's violent death (Murphy et al., 2003).

Although some researchers contended that social support did not have a buffering or recovery effect (Stroebe et al., 2005), it was unclear which aspects of social support were helpful or not, as previous research using different kinds of social support measures (e.g., a number of available social network, perceived social support, grief-specific support). Thus, further research was needed to investigate which types of social support were helpful for psychological adjustment and to examine these relations in cultural contexts.

Korean/East Asian Literature. Pearson et al. (2009) contended that Asians and Asian Americans seek different types of social support compared to European Americans when coping with stressful events, including bereavement. Specifically, they argued that bereavement rituals demonstrate how individuals from different cultures provide or seek social support (Pearson et al., 2009). For example, remembering the deceased by gathering with family and community and focusing on expressing the loss of the loved one, or explicit social support, is widely used in an

Irish American Catholic wake. On the other hand, gathering with family and community for rituals but focusing more on the journey of the deceased and less on the emotional experience of the bereaved, or implicit social support, is widely used in both Korean and other East Asian cultures (Franco & Yang, 2020; Park et al., 2020; Pearson et al., 2009).

Another study showed that individuals in collectivistic cultures preferred implicit social support but avoided seeking explicit social support. After experiencing the death of loved ones as a result of the 9/11 attacks, Asian Americans not only coped with their loss by seeking the comfort and company of others but also avoided disclosing their emotions to others because they did not want to burden others with their feelings or issues regarding their loss (Yeh et al., 2006). Similarly, research shows that implicit social support also helped Korean bereaved individuals' psychological adjustment. For example, bereaved individuals who lost someone to a tragic disaster reported that implicit social support helped them work through their grief (Lee et al., 2017). Yet, those who experienced social isolation reported that they struggled with depression and suicidal ideation, and similar results were found in other empirical studies (Lee et al., 2005; Lee & Kwon, 2015).

In addition, social support was negatively associated with depressive symptoms while depressive symptoms were positively associated with bereavement stress among 104 Korean bereaved individuals (Kim et al., 2007). Moreover, both social support and health condition explained 65.2% of total variance of their depressive symptoms, which suggests that social support is a crucial factor for these bereaved individuals' psychological adjustment. This finding was similarly replicated in a different study, such that suicidal ideation increased as grief symptoms increased among 303 Korean elderly bereaved individuals, but high levels of social support decreased suicidal ideation (Lee & Kwon, 2015).

To examine this phenomenon cross-culturally, Taylor et al. (2007) introduced the concept of implicit and explicit social support and investigated how Asians/Asian Americans and European Americans use these types of social support and its associations with daily life satisfaction. Interestingly, use of explicit social support predicted daily life satisfaction among European Americans, while use of both explicit and implicit social support predicted daily life satisfaction among Koreans. For Koreans, explicit social support was associated with negative emotions, such as regret and shame, suggesting that seeking explicit social support comes at a price. This may explain why bereaved Asian Americans avoided seeking explicit social support (Yeh et al., 2006). One study expanded this concept and investigated the use of explicit and implicit social support and its associations with mental health among Chinese HIV positive patients. Implicit social support was a reliable predictor for mental health outcomes among Chinese HIV patients, while explicit social support was not (Yang et al., 2015).

Overall, a substantial body of literature suggested that implicit social support served as a protective factor for bereaved individuals in collectivistic cultures.

Summary Statement

Most individuals experience grief after losing their loved ones (Nolen-Hoeksema & Larson, 2013), however little was known about how salient psychosocial variables were related to psychological adjustment and the degree to which cultural backgrounds played a role in these relations. Previous theoretical work conceptualizes that variables such as externalized/ internalized continuing bonds, meaning-making, and explicit/implicit social support facilitate psychological adjustment after grieving (Cohen & Wills, 1985; Gillies & Neimeyer, 2006; Klass et al., 2014). The extant research yielded mixed results regarding cultural variability with regard to continuing bonds and social support.

Drawing upon the Continuing Bonds Theory, the Meaning Reconstruction Model, and the Stress-Buffering Model (Cohen & Wills, 1985; Gillies & Neimeyer, 2006; Klass et al., 2014), as well as results from systematic reviews of the literature, the purpose of this study was to investigate the similarities and differences in the relations among psychological distress, externalized/ internalized continuing bonds, meaning-making, explicit/implicit social support, and psychological adjustment among Koreans and Americans while grieving. If supported, the model could be used to advance the understanding of universal and culturally unique aspects of grieving and develop culturally attuned interventions to enhance psychological adjustment for grieving individuals in South Korea and the United States. The hypotheses and research question for the current study were as follows:

Overall Model

1. The proposed model would demonstrate good overall model fit for Koreans and Americans, respectively (see Figure 1).

Direct Paths (Psychological Distress to Grief-related Variables and Psychological Adjustment)

2. Psychological Distress → Externalized Continuing Bonds (Path a): Psychological distress would be positively associated with externalized continuing bonds for Koreans (+) and Americans (+).
3. Psychological Distress → Internalized Continuing Bonds (Path c): Psychological distress would be positively associated with internalized continuing bonds for Koreans (+) and Americans (+).
4. Psychological Distress → Meaning Making (Path e): Psychological distress would be positively associated with meaning making for Koreans (+) and Americans (+).

5. Psychological Distress → Psychological Adjustment (Path g): Psychological distress would be negatively associated with psychological adjustment for Koreans (-) and Americans (-).

Direct Paths (Grief-related Variables to Psychological Adjustment)

6. Externalized Continuing Bonds → Psychological Adjustment (Path b): This study examined the research question: What was the relation between externalized continuing bonds and psychological adjustment for Koreans?
7. Externalized Continuing Bonds → Psychological Adjustment (Path b): Externalized continuing bonds would be negatively associated with psychological adjustment for Americans (-).
8. Internalized Continuing Bonds → Psychological Adjustment (Path d): Internalized continuing bonds would be positively associated with psychological adjustment for Koreans (+) and Americans (+).
9. Meaning Making → Psychological Adjustment (Path f): Meaning making would be positively associated with psychological adjustment for Koreans (+) and Americans (+).

Mediated Relations

10. Psychological Distress → Externalized Continuing Bonds → Psychological Adjustment (Path a-b): This study investigated the research question: Was the relation between psychological distress and psychological adjustment mediated by externalized continuing bonds for Koreans?
11. Psychological Distress → Externalized Continuing Bonds → Psychological Adjustment (Path a-b): Externalized continuing bonds would mediate the relations between psychological distress and psychological adjustment for Americans.

12. Psychological Distress → Internalized Continuing Bonds → Psychological Adjustment (Path c-d): Internalized continuing bonds would mediate the relations between psychological distress and psychological adjustment for Koreans and Americans.
13. Psychological Distress → Meaning Making → Psychological Adjustment (Path e-f): Meaning making would mediate the relations between psychological distress and psychological adjustment for Koreans and Americans.

Moderated Relations

14. Explicit Social Support on the Relation between Psychological Distress and Psychological Adjustment (Path g-h): Explicit social support would moderate the relations between psychological distress and psychological adjustment for Americans but not for Koreans.
15. Implicit Social Support on the Relation between Psychological Distress and Psychological Adjustment (Path g-i): Implicit social support would moderate the relations between psychological distress and psychological adjustment for Koreans but not for Americans.

Appendix B

Screening Questions

1. What is your age?
    - Under 18 years old
    - 18 years old or older

2. What is your nationality?
    - American
    - Korean
    - Other

3. Have you experienced the death of a significant individual(s) in the past year?
    - YES, I have experienced the death of a significant individual(s) in the past year
    - NO, I have NOT experienced the death of a significant individual(s) in the past year

Note. A Significant individual is defined as someone who is important or has a profound influence on another person (American Psychological Association, n.d.).

Appendix C

Validity Questions

<Validity Check Items>

1. Please select *strongly agree* for this item.
2. Please select *strongly disagree* for this item.

<Qualtrics Check Item>

☐ I am not a robot.

Appendix D

Pre-Demographic Questions

1. Please identify the person(s) you lost to death in the past year (select all that apply):
    - Father
    - Mother
    - Sibling
    - Other family member (Please specify) _____
    - Close friend
    - Married or engaged partner (e.g., spouse, significant other)
    - Unmarried romantic partner (e.g., partner, boyfriend, girlfriend, significant other)
    - Other (Please specify) _____

2. (The question will appear if participants selected more than two options in Question 1)

    You are seeing this question because you identified more than two people in Question 1. The survey will ask you a series of questions about one person you lost to death in the past year. Please identify the person that you will think of when you respond to this survey.
    - Father
    - Mother
    - Sibling
    - Other family member (Please specify) _____
    - Close friend
    - Married or engaged partner (e.g., spouse, significant other)

- Unmarried romantic partner (e.g., partner, boyfriend, girlfriend, significant other)
- Other (Please specify) _____

3. What was the cause of their death?
    - Heart disease
    - Cancer
    - Accidents (unintentional injuries)
    - Intentional self-harm (suicide)
    - COVID-19
    - Influenza and pneumonia
    - Chronic lower respiratory diseases
    - Stroke (cerebrovascular diseases)
    - Alzheimer's disease
    - Diabetes
    - Nephritis, nephrotic syndrome, and nephrosis
    - I do not know
    - Other (please specify)

4. When did you experience this loss?
    - Month / Year (drop-down menu)

5. How close did you feel to this person right before their death?
    - Not at all close

- A little close
- Somewhat close
- Moderately close
- Very close

6. How close do you feel to this person NOW?
    - Not at all
    - A little close
    - Somewhat close
    - Moderately close
    - Very close

7. Rate the intensity of your feelings immediately after the loss.
    - Not intense at all
    - A little intense
    - Somewhat intense
    - Moderately intense
    - Very intense

8. Rate the intensity of your feelings related to this loss at this moment.
    - Not intense at all
    - A little intense
    - Somewhat intense

- Moderately intense
- Very intense

Appendix E

Post-Demographic Questions

1. What is your age?

2. What is your marital status?
    - single
    - in a committed relationship
    - married
    - separated
    - divorced
    - widowed

3. Please select the gender with which you identify:
    - Female
    - Male
    - Genderqueer / Gender nonbinary
    - Trans female
    - Trans male
    - Prefer not to say
    - Other (please specify) _____

4. Please enter your race/ethnicity (check more than one if applicable).

- Black, Afro Caribbean, African American
- Latino, Hispanic American
- White, European American (Non-Hispanic)
- Asian, Asian American
- American Indian, Alaska Native, Native Hawaiian, Other Pacific Islander
- Other (please specify) _____

5. Please identify your generation status.
    - 1st generation (i.e., born outside the US and immigrated to the US as an adult)
    - 1.5 generation (i.e., born outside the US and immigrated to the US as children and adolescents)
    - 2nd generation (i.e., born in the US and had at least one parent born outside the US)
    - 3rd or higher generation (i.e., born in the US with both parents born in the US)
    - I do not know
    - Other (please specify) _____

6. Please select your sexual orientation:
    - Asexual
    - Bisexual
    - Straight or heterosexual
    - Gay, lesbian, or homosexual
    - Prefer not to say

- Other (please specify) _____

7. Highest level of education achieved:
    - Less than high school
    - Some high school
    - High school diploma/GED
    - Community college
    - Some college
    - Bachelor's degree
    - Master's or professional degree
    - Doctorate degree
    - Other (Please specify) _____

8. Please estimate your current socioeconomic status.
    - Lower class
    - Working class
    - Middle class
    - Upper-Middle class
    - Upper class

9. Which of the following best represent(s) your religious or spiritual identity?
    - Agnostic
    - Atheist

- Buddhist
- Catholic
- Christian
- Deist
- Hindu
- Jewish
- Muslim
- Sikh
- Spiritual
- Other (please specify) _____

10. How important is your religious/spiritual identity to you?

- Not at all important
- A little important
- Somewhat important
- Moderately important
- Very important

11. To what degree do you engage in or practice related to your religious/spiritual identity?

- Not at all
- A little
- Somewhat
- Moderately

- Totally

12. What is your date of birth?

    * NOTE: We will use your date of birth to match your data (without including your name) and provide reimbursement.

        - Date of Birth: Month / Date / Year (Drop-down menu)

13. Please confirm your date of birth.

        - Date of Birth: Month / Date / Year (Drop-down menu)

14. (Optional) We are interested in your grief experiences. Would you like to tell us about your grief journey? This can be related to your meaning-making process, maintaining continuing bonds with your deceased loved one(s), receiving/providing social support, or anything that is salient to you.

Appendix F

Reimbursement Questionnaire

Thank you very much for participating in our study! Please provide the information below to win a chance to receive one of 15 $50 Amazon gift cards. If you would like to receive 1 SONA credit, please enter your UID number (This survey is separate and not connected to your previous responses).

1. What is your date of birth?
    - Date of Birth: Month / Date / Year (Drop-down menu)

2. Please type your email address (if you are selected, you will receive an Amazon gift card via email)
    - Email Address

3. Please type your UID number if you would like to receive one SONA credit.
    - UID #: _____

4. Are you interested in participating in additional research related to this study? We would contact you three and six months from now and provide compensation for your participation. Participation is completely voluntary.
    - Yes
    - No

Appendix G

The Kessler Psychological Distress Scale (K10; Kessler et al., 2002)

Instructions: These questions concern how you have been feeling **over the past 30 days**. Click a box below each question that best represents how you have been.

	None of the time	A little of the time	Some of the time	Most of the time	All of the time
1. During the last 30 days, about how often did you feel tired out for no good reason?	1	2	3	4	5
2. During the last 30 days, about how often did you feel nervous?	1	2	3	4	5
3. During the last 30 days, about how often did you feel so nervous that nothing could calm you down?	1	2	3	4	5
4. During the last 30 days, about how often did you feel hopeless?	1	2	3	4	5
5. During the last 30 days, about how often did you feel restless or fidgety?	1	2	3	4	5
6. During the last 30 days, about how often did you feel so restless you could not sit still?	1	2	3	4	5
7. During the last 30 days, about how often did you feel depressed?	1	2	3	4	5
8. During the last 30 days, about how often did you feel that everything was an effort?	1	2	3	4	5
9. During the last 30 days, about how often did you feel so sad that nothing could cheer you up?	1	2	3	4	5
10. During the last 30 days, about how often did you feel worthless?	1	2	3	4	5

Appendix H

한국어판 K10 (Kim, 2011)

아래 질문은 지난 30 일동안 당신이 가졌던 감정에 대한 질문입니다. 각 질문을 읽고, 당신의 감정을 가장 잘 표현한 곳에 체크해주시기 바랍니다.

	전혀 없었다	한달 중 며칠	한달중 절반 정도	한달 중 대부분	한달 내내
1. 아무런 이유 없이 기운이 없던 적이 얼마나 됩니까?	1	2	3	4	5
2. 신경이 예민했던 날은 얼마나 됩니까?	1	2	3	4	5
3. 신경이 너무 예민해서 당신을 안정시킬 수 있는 것이 아무 것도 없다고 느낀 적이 얼마나 됩니까?	1	2	3	4	5
4. 희망이 없다고 느낀 적이 얼마나 됩니까?	1	2	3	4	5
5. 안절부절 못하거나 조바심을 냈던 적은 얼마나 됩니까?	1	2	3	4	5
6. 안절부절 못하거나 조바심을 내서 가만히 앉아있을 수 없다고 느낀 적이 얼마나 됩니까?	1	2	3	4	5
7. 우울했던 적은 얼마나 됩니까?	1	2	3	4	5
8. 매사가 힘들다고 느낀 적은 얼마나 됩니까?	1	2	3	4	5
9. 우울하여 기운을 북돋을 수 있는 것이 아무것도 없다고 느낀 적이 얼마나 됩니까?	1	2	3	4	5
10. 자신을 가치 없는 사람처럼 느낀 적은 얼마나 됩니까?	1	2	3	4	5

Appendix I

Internalized and Externalized Continuing Bonds Scale (Scholtes & Browne, 2015)

Instructions: Please think of the deceased who you indicated that you would be thinking about for the prior questions. Please indicate how often you do each of the following since this death.

	Never	Rarely	Occasionally	Often	Very Often
1. I imagine the deceased as watching over me.	1	2	3	4	5
2. I am aware of the positive influence of the deceased on who I am today.	1	2	3	4	5
3. At times I have a real sense of presence of the deceased.	1	2	3	4	5
4. I believe that I have an ongoing connection with the deceased.	1	2	3	4	5
5. I experience the deceased as continuing to live on through their impact on who I am today.	1	2	3	4	5
6. Doing things that show my ongoing love for the deceased brings me comfort.	1	2	3	4	5
7. My dreams about the deceased bring me comfort.	1	2	3	4	5
8. I find comfort in looking at pictures/videos of the deceased.	1	2	3	4	5
9. I dream about what the deceased might look like or what they might be doing.	1	2	3	4	5
10. I am comforted by memories of the deceased.	1	2	3	4	5
11. I find comfort in partaking in support groups for the bereaved.	1	2	3	4	5
12. I have kept objects/possessions that belonged to the deceased because they comfort me.	1	2	3	4	5
13. I believe that I could never let go of my ties with the deceased.	1	2	3	4	5

14. I visit the cemetery and memorial site to see and be close to the deceased.	1	2	3	4	5
15. Stories involving the deceased will continue in my family/friends.	1	2	3	4	5
16. I partake in rituals (e.g., candle/incense lighting, balloon/butterfly releasing, displaying photos of the deceased, practicing special rituals during the holidays, offering food to the deceased) in remembrance of the deceased.	1	2	3	4	5
17. I tell others I miss the deceased.	1	2	3	4	5
18. I have inner conversations with the deceased.	1	2	3	4	5
19. I wear jewelry that belonged to the deceased and/or I have purchased in remembrance of the deceased.	1	2	3	4	5
20. Knowing that I will eventually be reunited with the deceased again brings me comfort.	1	2	3	4	5

Factors	**Item numbers**
Internalized Expressions	1–11
Externalized Expressions	12–20

Note. Items were revised as the original scale was developed to measure continuing bonds with the deceased child. The current scale revised ‘my child’ to ‘the deceased’ and also included the term ‘friends’ on Item 15 to be more applicable. Some items (#11, 19, 20) did not load above .30 on any one factor and displayed little communality overall.

Appendix J

내면화 및 외재화된 지속 유대감 척도

앞 질문에서 선택했던 고인을 생각하며, 그 사람의 죽음을 경험한 이후 얼마나 자주 이러한 경험을 했는지 표시해주시기 바랍니다.

	전혀 그렇지 않다	거의 그렇지 않다	가끔 그렇다	종종 그렇다	자주 그렇다
1. 나는 고인이 나를 지켜준다고 믿는다.	1	2	3	4	5
2. 나는 오늘날의 내가 있기까지 고인이 미친 긍정적인 영향에 대해 알고 있다.	1	2	3	4	5
3. 나는 가끔 고인이 실제로 곁에 있는 것처럼 느껴진다.	1	2	3	4	5
4. 나는 고인과 내가 여전히 연결되어 있다고 믿는다.	1	2	3	4	5
5. 나는 고인이 오늘날의 내가 될 수 있도록 계속 영향을 미치면서 함께있음을 (살아있음을) 느낀다.	1	2	3	4	5
6. 고인에 대한 나의 애정을 표현할 수 있을 때 나는 마음의 위안을 얻는다.	1	2	3	4	5
7. 고인이 나온 꿈을 꾸면 마음이 편안해진다.	1	2	3	4	5
8. 나는 고인의 사진/영상을 보며 마음의 위안을 찾는다.	1	2	3	4	5
9. 나는 고인이 만약에 살아있다면 지금쯤 어떤 모습일지 혹은 무엇을 하고 있을지 상상하곤 한다.	1	2	3	4	5
10. 나는 고인과의 추억을 통해 위안을 얻는다.	1	2	3	4	5
11. 나는 사별을 당한 사람들을 위한 지지 집단에 참여하며 위안을 얻는다.	1	2	3	4	5
12. 나는 고인의 물건/소지품이 내 마음에 위안을 주기 때문에 간직하고 있다.	1	2	3	4	5
13. 나는 나와 고인과의 관계를 절대 놓지 못할 것 같다는 생각이 든다.	1	2	3	4	5

14. 나는 고인이 보고싶고 고인과 가까이에 있고 싶어서 고인의 묘지나 추모공원에 방문한다.	1	2	3	4	5
15. 고인에 대한 이야기는 가족 혹은 친구들 사이에서 계속 될 것이다.	1	2	3	4	5
16. 나는 고인을 추모하기 위해 의식(예: 촛불/등불 밝히기, 풍선/나비 놓아주기, 고인의 사진을 두기, 명절에 고인을 위해 특별한 의식을 진행하기, 고인을 위해 음식 만들기)을 행한다.	1	2	3	4	5
17. 나는 다른 사람들에게 고인이 그립다고 말한다.	1	2	3	4	5
18. 나는 내 마음 속에서 고인과 대화를 한다.	1	2	3	4	5
19. 나는 고인이 소유했던 보석이나 고인을 기리기 위해 구매한 보석을 착용한다.	1	2	3	4	5
20. 나는 언젠가 고인을 다시 만날 거라는 사실만으로 위안을 얻는다.	1	2	3	4	5

하위 요인	문항
내면화된 표현	1–11
외재화된 표현	12–20

Note. Items were revised as the original scale was developed to measure continuing bonds with the deceased child. The current scale revised ‘my child’ to ‘the deceased’ and also included the term ‘friends’ on Item 15 to be more applicable. Some items (#11, 19, 20) did not load above .30 on any one factor and displayed little communality overall.

Appendix K

The Grief and Meaning Reconstruction Inventory (Gillies et al., 2015)

Instructions: The following statements refer to thoughts, beliefs, feelings, and meanings some bereaved people experience following their loss. Please think of the deceased who you selected in earlier questions. Please check the box that rates the degree to which each of these experiences has been true for you **in the past week**, on a scale from Strongly disagree (1) to Strongly agree (5):

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
1. The time I spent with the deceased was a blessing.	1	2	3	4	5
2. I do not see any good that has come from this loss.	1	2	3	4	5
3. Since this loss, I'm more self-reflective.	1	2	3	4	5
4. I value family more.	1	2	3	4	5
5. I will see the deceased again.	1	2	3	4	5
6. Since this loss, I find myself more alone and isolated.	1	2	3	4	5
7. I've been able to make sense of this loss.	1	2	3	4	5
8. Since this loss, I'm a stronger person.	1	2	3	4	5
9. I can't understand this loss.	1	2	3	4	5
10. I was prepared for the deceased to die.	1	2	3	4	5
11. The deceased was a good person; he/she/they lived a good life.	1	2	3	4	5
12. I value and appreciate life more.	1	2	3	4	5
13. Since this loss, I've changed my lifestyle for the better.	1	2	3	4	5
14. Memories of the deceased bring me a sense of peace and solace.	1	2	3	4	5
15. This death brought the deceased peace.	1	2	3	4	5
16. I've lost my innocence.	1	2	3	4	5
17. This death ended the deceased's suffering.	1	2	3	4	5
18. I miss the deceased.	1	2	3	4	5
19. Since this loss, I make more effort to help others.	1	2	3	4	5
20. I feel empty and lost.	1	2	3	4	5
21. I cherish the memories of the deceased.	1	2	3	4	5

22. Since this loss, I value friendship and social support more.	1	2	3	4	5
23. The deceased was prepared to die.	1	2	3	4	5
24. Whenever I can, I seize the day. I live life to the fullest.	1	2	3	4	5
25. Since this loss, I'm a more responsible person.	1	2	3	4	5
26. I believe the deceased is in a better place.	1	2	3	4	5
27. I feel pain from regrets I have in regard to this loss.	1	2	3	4	5
28. I've come to understand that life is short and it gives us no guarantees.	1	2	3	4	5
29. Since this loss, I've pursued new avenues of knowledge and learning.	1	2	3	4	5

Factors	**Item numbers**
Continuing Bonds	1, 5, 11, 14, 18, 21, 26
Personal Growth	3, 8, 13, 19, 22, 25, 29
Sense of Peace	7, 10, 15, 17, 23
Emptiness & Meaninglessness (Reverse-coded)	2, 6, 9, 16, 20, 27
Valuing Life	4, 12, 24, 28

Appendix L

애도에 대한 의미 재구성 척도 (GMRI; Choi, 2011)

아래 문항들은 사람들이 상실 이후에 경험하는 생각, 믿음, 느낌, 그리고 의미를 나타냅니다. 앞 질문에서 선택했던 고인을 생각하며 아래 문항을 체크해주시기 바랍니다. 앞에서 표시한 가장 충격적인 상실 경험과 관련하여 **지난 일주일 동안**에 이러한 경험을 한 정도의 해당하는 칸을 선택해주시기 바랍니다.

	전혀 그렇지 않다	대체로 그렇지 않다	보통 이다	대체로 그렇다	매우 그렇다
1. 내가 상실한 대상과 보냈던 시간은 축복이었다.	1	2	3	4	5
2. 나는 이 상실로부터 어떠한 좋은 점도 찾아 볼 수 없다.	1	2	3	4	5
3. 이 상실 이후, 나 자신에 대해 더 많은 생각을 하게 되었다.	1	2	3	4	5
4. 나는 가족을 더 중요하게 여기게 되었다.	1	2	3	4	5
5. 나는 내가 상실한 대상을 다시 볼 수 있을 것이다.	1	2	3	4	5
6. 이 상실 이후, 나는 더 외롭고 혼자 있을 때가 더 많아졌다.	1	2	3	4	5
7. 나는 이 상실의 의미를 이해할 수 있었다.	1	2	3	4	5
8. 이 상실 이후, 나는 더 강해졌다.	1	2	3	4	5
9. 나는 이 상실을 이해할 수 없다.	1	2	3	4	5
10. 나는 고인의 죽음을 맞이할 준비가 되어 있었다.	1	2	3	4	5
11. 고인은 좋은 사람이었고, 괜찮은 삶을 살았다.	1	2	3	4	5
12. 이 상실 이후, 나는 삶을 더 가치있고 감사하게 여기게 되었다.	1	2	3	4	5
13. 이 상실 이후, 나는 내 생활 방식을 더 좋은 방향으로 바꾸었다.	1	2	3	4	5
14. 내가 상실한 대상과의 기억들은 나에게 평온함과 위로를 가져다 준다.	1	2	3	4	5
15. 죽음으로 인해 고인은 이제 평온해졌다.	1	2	3	4	5
16. 나는 더 이상 세상을 순진하고 천진난만하게 보지 않는다.	1	2	3	4	5
17. 이 죽음이 고인의 고통을 끝낼 수 있었다	1	2	3	4	5
18. 나는 내가 상실한 대상을 그리워한다.	1	2	3	4	5
19. 이 상실 이후, 나는 다른 이들을 돕는데 더 노력한다.	1	2	3	4	5

20. 나는 공허하고 도대체 어떻게 해야 할지 모르겠다.	1	2	3	4	5
21. 나는 내가 상실한 대상의 기억들을 소중히 간직한다.	1	2	3	4	5
22. 이 상실 이후, 나는 우정과 사회적 지지를 더 소중하게 여기게 되었다.	1	2	3	4	5
23. 고인은 죽음을 맞이할 준비가 되어 있었다.	1	2	3	4	5
24. 할 수만 있다면 최선을 다해 현재에 충실하려고 한다. 충만한 삶을 살고 있다.	1	2	3	4	5
25. 이 상실 이후, 나는 더 책임감이 강해졌다.	1	2	3	4	5
26. 나는 고인이 더 좋은 곳에 있다고 믿는다.	1	2	3	4	5
27. 나는 이 상실과 관련된 후회 때문에 고통을 느낀다.	1	2	3	4	5
28. 나는 인생은 짧고 아무런 확실성을 주지 못한다는 것을 이해하게 되었다.	1	2	3	4	5
29. 이 상실 이후, 나는 새로운 깨달음의 길을 추구 하게 되었다.	1	2	3	4	5

하위 요인	문항
지속 유대	1, 5, 11, 14, 18, 21, 26
개인적 성장	3, 8, 13, 19, 22, 25, 29
평온함	7, 10, 15, 17, 23
공허감 및 무의미함 (역문항)	2, 6, 9, 16, 20, 27
인생을 중요시함	4, 12, 24, 28

Appendix M

The Meaning Making in Grief Scale (MMGS; Yang & Lee, 2020)

Instructions: Please take a moment to think about the loss of the deceased (the person who you **indicated that you would be thinking about for the prior questions**). Please respond to the following questions as truthfully and accurately as you can, on a scale from *strongly disagree* to *strongly agree.*

After losing the deceased…	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
1. I realized what that person meant to me.	1	2	3	4	5
2. I recalled good memories I had with that person which I didn't know before.	1	2	3	4	5
3. I realized that everything I have in my life is precious.	1	2	3	4	5
4. I was able to recall the value of life.	1	2	3	4	5
5. I realized how precious that person is to me.	1	2	3	4	5
6. The joyful memories I had with that person became meaningful.	1	2	3	4	5
7. I thought about fully committing to the present moment.	1	2	3	4	5
8. I was able to see life with a bigger lens.	1	2	3	4	5
9. The grateful feelings I wasn't able to express towards that person came up.	1	2	3	4	5
10. I became more focused on the present moment than on the future.	1	2	3	4	5
11. I have begun to fill my moments with beautiful and happy memories.	1	2	3	4	5
12. I have begun to give more importance to the memories with that person.	1	2	3	4	5
13. I have experienced inner growth by overcoming the emotions I felt through the loss.	1	2	3	4	5

14. It has become the base of my endurance for future loss and sadness.	1	2	3	4	5
15. The experience of the loss allowed me to change my actions in life.	1	2	3	4	5
16. I felt responsible for my own life.	1	2	3	4	5
17. I was able to grow mentally mature.	1	2	3	4	5
18. I have begun to fill my daily life with happiness.	1	2	3	4	5
19. The experience of the loss helped me grow and mature.	1	2	3	4	5
20. I have begun to live life more actively.	1	2	3	4	5
21. Even though I cannot see my loved one, I think the person is always with me.	1	2	3	4	5

Factors	**Item numbers**
Meaning of the Significant Other	1, 2, 5, 6, 9, 12, 21
Being Present	3, 7, 10, 11, 16, 18, 20
Coping and Growth	4, 8, 13, 14, 15, 17, 19

Appendix N

애도 과정에서의 의미 만들기 척도 (MMGS; Yang & Lee, 2020)

잠시 시간을 내어 당신이 앞에서 선택한 고인을 떠올려보세요. 그 고인을 떠나 보내며 경험한 상실의 경험을 생각하며, 아래의 문항에 답변해주세요. 각 문항에서 1~5 점 중 해당하는 부분에 최대한 솔직하고 진솔하게 체크해주시기 바랍니다.

고인을 떠나 보낸 뒤 나는...	매우 그렇지 않다	약간 그렇지 않다	보통이다	약간 그렇다	매우 그렇다
1. 그 사람이 나에게 어떤 의미였는지 깨달았다.	1	2	3	4	5
2. 그때는 몰랐던 그 사람과의 좋은 기억들을 알아차릴 수 있었다.	1	2	3	4	5
3. 나에게 주어지는 모든 것이 소중하다는 걸 깨달았다.	1	2	3	4	5
4. 인생을 더 크게 볼 수 있게 되었다.	1	2	3	4	5
5. 그 사람이 나에게 얼마나 소중한 사람인지 알게 되었다.	1	2	3	4	5
6. 그 사람과의 즐거운 기억이 의미 있게 다가왔다.	1	2	3	4	5
7. 현재에 충실 해야겠다는 생각을 했다.	1	2	3	4	5
8. 삶의 가치를 되새길 수 있었다.	1	2	3	4	5
9. 그 사람에게 그동안 표현하지 못했던 감사한 감정이 떠올랐다.	1	2	3	4	5
10. 앞으로 있을 미래보다 현재에 더 집중하게 되었다.	1	2	3	4	5
11. 순간을 보다 더 아름답고 행복한 시간들로 채우고자 하게 되었다.	1	2	3	4	5
12. 그 사람과의 추억을 더 소중하게 여길 수 있게 되었다.	1	2	3	4	5
13. 상실을 통해 느끼는 감정을 극복하며 내적 성숙을 경험하였다.	1	2	3	4	5
14. 미래에 닥칠 상실이나 슬픔을 견딜 수 있는 밑거름이 되었다.	1	2	3	4	5
15. 상실의 경험이 나의 행동을 바꾸게 해주었다.	1	2	3	4	5

16. 정신적으로 한층 더 성장할 수 있었다.	1	2	3	4	5
17. 스스로의 인생에 책임감을 느꼈다.	1	2	3	4	5
18. 하루하루를 행복한 시간들로 채우고자 하게 되었다.	1	2	3	4	5
19. 상실의 경험은 나를 발전시키는 데에 도움이 되었다.	1	2	3	4	5
20. 인생을 더 적극적으로 살게 되었다.	1	2	3	4	5
21. 비록 보이지는 않지만 그 사람이 내 마음 속에 항상 존재한다고 생각한다.	1	2	3	4	5

하위 요인	문항
중요한 타인에 대한 의미	1, 2, 5, 6, 9, 12, 21
현재 집중	3, 7, 10, 11, 16, 18, 20
대처와 성장	4, 8, 13, 14, 15, 17, 19

Appendix O

The MOS Social Support Survey (Sherbourne & Stewart, 1991)

Instructions: People sometimes look to others for companionship, assistance, or other types of support after losing someone to death. How often has each of the following kinds of support been available to you since the death?

	None of the time	A little of the time	Some of the time	Most of the time	All of the time
1. Someone you can count on to listen to you when you need to talk	1	2	3	4	5
2. Someone to give you information to help you understand a situation	1	2	3	4	5
3. Someone to give you good advice about a crisis	1	2	3	4	5
4. Someone to confide in or talk to about yourself or your problems	1	2	3	4	5
5. Someone whose advice you really want	1	2	3	4	5
6. Someone to share your most private worries and fears with	1	2	3	4	5
7. Someone to turn to for suggestions about how to deal with a personal problem	1	2	3	4	5
8. Someone who understands your problems	1	2	3	4	5
9. Someone to help you if you were confined to bed	1	2	3	4	5
10. Someone to take you to the doctor if you needed it	1	2	3	4	5
11. Someone to prepare your meals if you were unable to do it yourself	1	2	3	4	5
12. Someone to help with daily chores if you were sick	1	2	3	4	5
13. Someone who shows you love and affection	1	2	3	4	5
14. Someone to love and make you feel wanted	1	2	3	4	5
15. Someone who hugs you	1	2	3	4	5

16. Someone to have a good time with	1	2	3	4	5
17. Someone to get together with for relaxation	1	2	3	4	5
18. Someone to do something enjoyable with	1	2	3	4	5
19. Someone to do things with to help you get your mind off things	1	2	3	4	5

Factors	**Item numbers**
Emotional/informational support	1–8
Tangible support	9–12
Affectionate support	13–15
Positive social interaction	16–19

Appendix P

MOS 사회적 지지 척도 (Lim et al., 2003)

사람들은 사별을 경험한 후에 다른 사람들로부터 때때로 우정, 지지, 혹은 여러 다른 형태의 도움을 받길 기대합니다. 당신이 도움을 필요로 할 때 아래 종류의 도움을 얼마나 자주 받으시나요?

	전혀 없다	거의 없다	약간 있다	대부분 있다	항상 있다
1. 당신이 대화를 나누고 싶을 때 말을 들어줄 수 있는 사람이 있다.	1	2	3	4	5
2. 당신이 어떠한 상황을 이해하는데 도움이 되는 정보를 주는 사람이 있다.	1	2	3	4	5
3. 당신이 어떤 위기에 닥쳤을 때 조언을 해 줄 사람이 있다.	1	2	3	4	5
4. 당신 자신이나 당신의 문제에 대해 얘기를 하거나 믿고 의논할 사람이 있다.	1	2	3	4	5
5. 당신이 진정으로 조언을 듣고 싶은 사람이 있다.	1	2	3	4	5
6. 당신의 가장 개인적인 근심과 두려움을 함께 나눌 사람이 있다.	1	2	3	4	5
7. 당신의 개인적인 문제를 해결하기 위한 조언을 구할 사람이 있다.	1	2	3	4	5
8. 당신의 문제를 이해해 주는 사람이 있다.	1	2	3	4	5
9. 당신이 병상에 누워 있을 때 도와줄 사람이 있다.	1	2	3	4	5
10. 당신이 아플 때 당신을 의사에게 데려갈 사람이 있다.	1	2	3	4	5
11. 당신이 직접 식사를 준비할 수 없을 때 대신 음식을 만들어 줄 사람이 있다.	1	2	3	4	5
12. 당신이 아플 때 일상의 집안 일을 도와줄 사람이 있다.	1	2	3	4	5
13. 당신에게 사랑이나 호감을 보이는 사람이 있다.	1	2	3	4	5

14. 당신을 사랑하고, 당신이 필요하다고 생각하는 사람이 있다.	1	2	3	4	5
15. 애정을 가지고 당신을 안고 등을 토닥거려줄 사람이 있다.	1	2	3	4	5
16. 당신과 함께 즐거운 시간을 보낼 사람이 있다.	1	2	3	4	5
17. 당신과 함께 휴식을 즐길 사람이 있다.	1	2	3	4	5
18. 당신과 즐거운 일을 함께 할 사람이 있다.	1	2	3	4	5
19. 당신이 근심을 잊을 수 있도록 도와줄 사람이 있다.	1	2	3	4	5

하위 요인	문항
정서적/정보적 지지	1–8
물질적 지지	9–12
애정적 지지	13–15
긍정적 상호작용	16–19

Appendix Q

The Psychological Well-being Scale (Ryff & Keyes, 1995)

Instructions: Click one response below each statement to indicate how much you agree or disagree.

	Strongly disagree	Somewhat disagree	A little disagree	Neither agree nor disagree	A little agree	Somewhat agree	Strongly agree
1. I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.*	1	2	3	4	5	6	7
2. For me, life has been a continuous process of learning, changing, and growth. *	1	2	3	4	5	6	7
3. In general, I feel I am in charge of the situation in which I live. *	1	2	3	4	5	6	7
4. People would describe me as a giving person, willing to share my time with others. *	1	2	3	4	5	6	7
5. I am not interested in activities that will expand my horizons.	1	2	3	4	5	6	7
6. I enjoy making plans for the future and working to make them a reality. *	1	2	3	4	5	6	7
7. Most people see me as loving and affectionate. *	1	2	3	4	5	6	7
8. In many ways I feel disappointed about my achievements in life.	1	2	3	4	5	6	7
9. I live life one day at a time and don't really think about the future.	1	2	3	4	5	6	7
10. I tend to worry about what other people think of me.	1	2	3	4	5	6	7
11. When I look at the story of my life, I am pleased with how things have turned out so far.*	1	2	3	4	5	6	7
12. I have difficulty arranging my life in a way that is satisfying to me.	1	2	3	4	5	6	7
13. My decisions are not usually influenced by what everyone else is doing. *	1	2	3	4	5	6	7
14. I gave up trying to make big improvements or changes in my life a long time ago.	1	2	3	4	5	6	7

15. The demands of everyday life often get me down.	1	2	3	4	5	6	7
16. I have not experienced many warm and trusting relationships with others.	1	2	3	4	5	6	7
17. I think it is important to have new experiences that challenge how I think about myself and the world. *	1	2	3	4	5	6	7
18. Maintaining close relationships has been difficult and frustrating for me.	1	2	3	4	5	6	7
19. My attitude about myself is probably not as positive as most people feel about themselves.	1	2	3	4	5	6	7
20. I have a sense of direction and purpose in life. *	1	2	3	4	5	6	7
21. I judge myself by what I think is important, not by the values of what others think is important. *	1	2	3	4	5	6	7
22. In general, I feel confident and positive about myself. *	1	2	3	4	5	6	7
23. I have been able to build a living environment and a lifestyle for myself that is much to my liking. *	1	2	3	4	5	6	7
24. I tend to be influenced by people with strong opinions.	1	2	3	4	5	6	7
25. I do not enjoy being in new situations that require me to change my old familiar ways of doing things.	1	2	3	4	5	6	7
26. I do not fit very well with the people and the community around me.	1	2	3	4	5	6	7
27. I know that I can trust my friends, and they know they can trust me. *	1	2	3	4	5	6	7
28. When I think about it, I haven't really improved much as a person over the years.	1	2	3	4	5	6	7
29. Some people wander aimlessly through life, but I am not one of them. *	1	2	3	4	5	6	7
30. I often feel lonely because I have few close friends with whom to share my concerns.	1	2	3	4	5	6	7
31. When I compare myself to friends and acquaintances, it makes me feel good about who I am. *	1	2	3	4	5	6	7
32. I don't have a good sense of what it is I'm trying to accomplish in life.	1	2	3	4	5	6	7

33. I sometimes feel as if I've done all there is to do in life.	1	2	3	4	5	6	7
34. I feel like many of the people I know have gotten more out of life than I have.	1	2	3	4	5	6	7
35. I have confidence in my own opinions, even if they are different from the way most other people think.*	1	2	3	4	5	6	7
36. I am good at managing the many responsibilities of my daily life. *	1	2	3	4	5	6	7
37. I have the sense that I have developed a lot as a person over time. *	1	2	3	4	5	6	7
38. I enjoy personal and mutual conversations with family members and friends. *	1	2	3	4	5	6	7
39. My daily activities often seem trivial and unimportant to me.	1	2	3	4	5	6	7
40. I like most parts of my personality. *	1	2	3	4	5	6	7
41. It’s difficult for me to voice my own opinions on controversial matters.	1	2	3	4	5	6	7
42. I often feel overwhelmed by my responsibilities.	1	2	3	4	5	6	7

Note. Items with an asterisk (*) are reverse-coded.

Factors	**Item numbers**
Autonomy	1, 10, 13, 21, 24, 35, 41
Environmental Mastery	3, 12, 15, 23, 26, 36, 42
Personal Growth	2, 5, 14, 17, 25, 28, 37
Positive Relations with Others	4, 7, 16, 18, 27, 30, 38
Purpose in Life	6, 9, 20, 29, 32, 33, 39
Self-Acceptance	8, 11, 19, 22, 31, 34, 40

Appendix R

심리적 안녕감 척도 (PWBS; Kim et al., 2001)

	Strongly disagree	Somewhat disagree	A little disagree	Neither agree nor disagree	A little agree	Somewhat agree	Strongly agree
1. 나에게 주어진 상황은 내게 책임이 있다고 생각한다.	1	2	3	4	5	6	7
2. 현재의 내 활동 반경(생활영역)을 넓힐 생각이 없다.	1	2	3	4	5	6	7
3. 살아온 내 인생을 돌이켜 볼 때 현재의 결과에 만족한다.	1	2	3	4	5	6	7
4. 남들과 친밀한 인간관계를 유지하는 것이 어렵고 힘들다.	1	2	3	4	5	6	7
5. 대다수의 사람들과 의견이 다를 경우에도, 내 의견을 분명히 말하는 편이다.	1	2	3	4	5	6	7
6. 매일매일 해야 하는 일들이 힘겹다.	1	2	3	4	5	6	7
7. 그저 하루하루를 살아가고 있을 뿐 장래에 대해서는 별로 생각하지 않는다.	1	2	3	4	5	6	7
8. 나 자신에 대해 자부심과 자신감을 갖고 있다.	1	2	3	4	5	6	7
9. 나의 고민을 털어놓을 만한 가까운 친구가 별로 없어 가끔 외로움을 느낀다.	1	2	3	4	5	6	7
10. 나는 무슨 일을 결정하는 데 있어 다른 사람들의 영향을 받지 않는 편이다.	1	2	3	4	5	6	7
11. 과거에는 나 자신이 혼자 목표를 세우곤 했으나 돌이켜보면 그것이 시간 낭비였던 것 같다.	1	2	3	4	5	6	7
12. 내가 아는 많은 사람들은 인생에서 나보다 더 많은 것을 성취하는 것 같다.	1	2	3	4	5	6	7
13. 가족이나 친구들과 친밀한 대화를 나누는 것을 즐긴다.	1	2	3	4	5	6	7
14. 매일의 생활에서 내가 해야 할 책임들을 잘 해내고 있다.	1	2	3	4	5	6	7

15. 나는 무슨 일을 결정하는데 있어 다른 사람들의 영향을 받지 않는 편이다.	1	2	3	4	5	6	7
16. 내가 해야 할 일들이 힘겹게 느껴질 때가 있다.	1	2	3	4	5	6	7
17. 나 자신과 인생살이에 자극을 줄 만한 새로운 경험을 하는 것이 중요하다고 생각한다.	1	2	3	4	5	6	7
18. 가끔 매일 하는 일들이 사소하고 중요하지 않은 것처럼 느껴진다.	1	2	3	4	5	6	7
19. 내 성격의 거의 모든 면을 좋아한다.	1	2	3	4	5	6	7
20. 정말 필요할 때 내 말에 귀를 기울여 줄 사람은 많지 않다.	1	2	3	4	5	6	7
21. 나는 강한 의견을 가진 사람으로부터 영향을 받는 편이다.	1	2	3	4	5	6	7
22. 지난 세월을 되돌아 보면, 내 자신이 크게 발전하지 못했다고 생각된다.	1	2	3	4	5	6	7
23. 내 인생에서 무엇을 성취하려고 하는지 잘 모르겠다.	1	2	3	4	5	6	7
24. 과거에 실수를 저지르기도 했지만, 전체적으로는 모든 일이 매우 잘되었다고 생각한다.	1	2	3	4	5	6	7
25. 나는 일반적으로 나의 개인 문제나 돈 문제를 잘 관리하고 있다.	1	2	3	4	5	6	7
26. 많은 면에서 내가 성취한 것에 대해 실망을 느낀다.	1	2	3	4	5	6	7
27. 대부분의 사람들이 나보다 친구를 더 많이 갖고 있는 것 같다.	1	2	3	4	5	6	7
28. 미래의 계획을 짜고 그 계획을 실현시키려고 노력하는 것을 즐긴다.	1	2	3	4	5	6	7
29. 내 의견이 비록 다른 여러 사람들의 의견과 반대되는 경우에도 나는 내 의견이 옳다고 확신한다.	1	2	3	4	5	6	7
30. 나는 시간을 잘 활용하여 해야 할 모든 일을 제 때에 잘 처리해 나갈 수 있다.	1	2	3	4	5	6	7

31. 그동안 한 개인으로서 크게 발전해 왔다고 생각한다.	1	2	3	4	5	6	7
32. 내가 세운 계획을 어떻게 해서라도 실천하려고 노력한다.	1	2	3	4	5	6	7
33. 논쟁의 여지가 있는 문제들에 대해서 내 자신의 의견을 내세우지 못한다.	1	2	3	4	5	6	7
34. 현재의 생활방식을 바꿔야 할 새로운 상황에 처하는 것을 싫어한다.	1	2	3	4	5	6	7
35. 나는 인생 목표를 가지고 살아간다.	1	2	3	4	5	6	7
36. 친구와 가족이 반대하는 경우에는 나의 결정을 쉽게 바꾸는 편이다.	1	2	3	4	5	6	7
37. 나에게 있어서 삶은 끊임없이 배우고, 변화하고, 성장하는 과정이었다.	1	2	3	4	5	6	7
38. 내 친구들은 믿을 수 있고, 그들도 나를 믿을 수 있다고 생각한다.	1	2	3	4	5	6	7
39. 과거를 돌이켜 보면 좋았던 때도 있었고 힘들었던 때도 있었지만 대체로 만족한다.	1	2	3	4	5	6	7
40. 생활을 만족스럽게 꾸려 나가는 것이 쉽지 않다.	1	2	3	4	5	6	7
41. 내 인생을 크게 개선하거나 바꾸겠다는 생각은 오래 전에 버렸다.	1	2	3	4	5	6	7
42. 내 자신을 친구나 친지들과 비교할 때면 내 자신에 대해 흐뭇하게 느껴진다.	1	2	3	4	5	6	7
43. 내 스스로 정한 기준에 의해 내 자신을 평가하지, 남들의 기준에 의해 평가하지 않는다.	1	2	3	4	5	6	7
44. 내 가정과 생활방식을 내 맘에 들도록 꾸려 올 수 있었다.	1	2	3	4	5	6	7
45. 이제껏 살아 온 삶의 방식을 뒤늦게 바꿀 수는 없다고 생각한다.	1	2	3	4	5	6	7
46. 다른 사람들과 다정하고 신뢰 깊은 관계를 별로 경험하지 못했다.	1	2	3	4	5	6	7

하위 요인	문항
자율성	5, 10, 15, 21, 29, 33, 36, 43
환경에 대한 통찰력	1, 6, 14, 16, 25, 30, 40, 44
개인적 성장	2, 17, 22, 31, 34, 37, 41, 45
긍정적 대인관계	4, 9, 13, 20, 27, 38, 46
삶의 목적	7, 11, 18, 23, 28, 32, 35
자아 수용	3, 8, 12, 19, 24, 26, 39, 42

Appendix S

The Survey of Asian American Communication (SAAC; Gudykunst, 2001)

Instructions: Click one response below each statement to indicate how much you agree or disagree.

	Strongly disagree (1)	2	3	4	5	6	Strongly agree (7)
1. Once I get wound up in a heated discussion, I have a hard time stopping myself.	1	2	3	4	5	6	7
2. In arguments I insist on very precise definitions.	1	2	3	4	5	6	7
3. I often insist that people present proof for what they are saying.	1	2	3	4	5	6	7
4. When I disagree with someone, I am quick to challenge them.	1	2	3	4	5	6	7
5. I am very argumentative.	1	2	3	4	5	6	7
6. I readily reveal personal things about myself.	1	2	3	4	5	6	7
7. I am an extremely open communicator.	1	2	3	4	5	6	7
8. Usually, I do not tell people very much about myself until I get to know them quite well.*	1	2	3	4	5	6	7
9. As a rule, I generally express my feelings or emotions.	1	2	3	4	5	6	7
10. I catch on to what others mean even if they do not say it directly. 11. I am able to recognize subtle and indirect messages.	1	2	3	4	5	6	7
12. I am very good at knowing the feelings other people are experiencing.	1	2	3	4	5	6	7
13. Even if I do not receive a clear and definite response from others, I can understand what they intend.	1	2	3	4	5	6	7
14. Usually, I can read another person ‘like a book.’	1	2	3	4	5	6	7

15. I am evasive when I communicate with others.	1	2	3	4	5	6	7
16. I communicate in an indirect fashion.	1	2	3	4	5	6	7
17. I am ambiguous when I communicate with others.	1	2	3	4	5	6	7
18. When pressed for an opinion, I respond with an ambiguous position.	1	2	3	4	5	6	7
19. Others have to guess what I mean when we communicate.	1	2	3	4	5	6	7

Note. Items with an asterisk (*) are reverse-coded.

Factors	**Item numbers**
Contentious	1–5
Openness	6–9
Inferring meaning	10–14
Indirect	15–19

Appendix T

아시아계 미국인의 의사소통 방식 설문 (SAAC; Gudykunst, 2001)

안내: 각 문항을 읽고 귀하께서 어느 정도 동의 혹은 동의하지 않는 지 해당하는 부분에 체크해주세요.

	매우 동의하지 않음	2	3	4	5	6	매우 동의함
1. 나는 열띤 논쟁을 하며 흥분을 하면 말을 멈추기가 어렵다.	1	2	3	4	5	6	7
2. 논쟁을 할 때 나는 매우 정확한 정의에 집중을 한다.	1	2	3	4	5	6	7
3. 나는 종종 사람들이 자신이 말하는 걸 실천해야 한다고 주장한다.	1	2	3	4	5	6	7
4. 누군가와 의견이 맞지 않을 때 나는 곧바로 그 사람에게 도전한다.	1	2	3	4	5	6	7
5. 나는 논쟁하는 걸 매우 좋아한다.	1	2	3	4	5	6	7
6. 나는 나의 사적인 면을 손쉽게 드러낸다.	1	2	3	4	5	6	7
7. 나는 굉장히 나의 의사를 굉장히 공개적으로 소통한다.	1	2	3	4	5	6	7
8. 보통 나는 다른 사람들과 꽤 친해지기 전까지 나에 대해 잘 이야기하지 않는다.	1	2	3	4	5	6	7
9. 나는 일반적으로 나의 느낌이나 감정을 표현한다.	1	2	3	4	5	6	7
10. 나는 다른 사람들이 직설적으로 말하지 않아도 그들이 어떤 뜻으로 말하는지 알아 듣는다.	1	2	3	4	5	6	7
11. 나는 미묘하고 간접적인 메시지를 인식할 수 있다.	1	2	3	4	5	6	7
12. 나는 다른 사람들이 느끼는 감정을 잘 파악한다.	1	2	3	4	5	6	7
13. 나는 다른 사람으로부터 명확하고 분명한 대답을 듣지 못하더라도 그 사람이 어떤 의도로 말하려고 한건지 이해할 수 있다.	1	2	3	4	5	6	7

14. 보통 나는 다른 사람의 마음을 '책처럼' 읽을 수 있다.	1	2	3	4	5	6	7
15. 나는 다른 사람들과 대화할 때 얼버무리는 편이다.	1	2	3	4	5	6	7
16. 나는 간접적으로 말하는 편이다.	1	2	3	4	5	6	7
17. 나는 다른 사람들과 대화할 때 애매모호한 편이다.	1	2	3	4	5	6	7
18. 누군가가 나의 의견을 원할 때, 나는 모호한 반응으로 답한다.	1	2	3	4	5	6	7
19. 대화를 할 때 다른 사람들은 내가 무슨 말을 하는 지 추측해야 한다.	1	2	3	4	5	6	7

하위 요인	문항
호전적인 측면	1–5
개방성	6–9
의미 유추	10–14
간접적인 측면	15–19

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