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# Adaptive religious coping with experiences of sexual and gender-based violence and displacement

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#### Abstract

This article examines the religious coping strategies among forced migrant women survivors of sexual and gender-based violence (SGBV). While it is acknowledged that faith and religion help people to survive crises, the patterns of religious coping with SGBV and displacement are little understood. I explore how displaced women use their faith and religious resources to cope with SGBV and migration-related daily stressors. Using qualitative methods and data collected in Turkey and Tunisia with thirty-eight Levantine and African women, I introduce the concept of adaptive religious coping, which they deployed over time and place as one main coping mechanism in experiences of SGBV and displacement. Survivors used cognitive, behavioural and spiritual/emotional religious coping strategies, drawing on their available religious coping in supporting displaced populations emotionally and spiritually, and offers implications for mental health responses in forced displacement contexts.

**Keywords:** religious coping, sexual and gender-based violence, displaced women, forced migrant, religion, resilience

### Introduction

Global forced displacement has reached unprecedented levels, with more than 110 million people affected (UNHCR 2023). Forced migrants are subjected to increased risks and incidents of sexual and gender-based violence (SGBV), including structural and interpersonal violence along forced migration routes (Freedman 2016; Pertek and Phillimore 2022). The number of forced migrants experiencing SGBV remains unknown and varies depending on context (Gonçalves and Matos 2016) but has been estimated to affect up to 69.3 per cent of women and 28.6 per cent of men (Keygnaert *et al.* 2012). Confronting perilous journeys and uncertainty in countries of refuge with insufficient protection and support means that displaced people rely on their own resources and inherent coping mechanisms. With many migrants maintaining a religious affiliation (PEW Research Center 2012) and loss of social connections and socio-economic resources in forced

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migration processes, religion often remains the only available resource in displacement (Ní Raghallaigh 2011). Goździak and Shandy's (2002) special issue on 'Religion and Forced Migration' in the *Journal of Refugee Studies* highlighted the importance of studying religion, faith and spirituality in resilience of refugees, and that there was an absence of such studies. Subsequently, over the last two decades, this has inspired a considerable body of knowledge on the usefulness of religion in exile, as a source of comfort, hope, and psychological strength (e.g. Goździak 2002; Parsitau 2011; Shaw et al. 2019).

Although extensive evidence on religion and resilience in forced migration is available, much less is known about gender specific patterns of religious coping, especially among displaced women survivors of SGBV, which this paper focuses on. Forced migration experiences are recognized as gendered (Freedman, 2007; Fiddian-Qasmiyeh 2014) with women and men reacting to crises and engaging with religion differently (Goździak and Main 2023). Scholarship on gender, religion and forced migration nexus and examines the role of faith, faith communities and secular responses (e.g. Fiddian-Qasmiyeh *et al.* 2017). Further understanding of religious coping mechanisms specific to displaced women and survivors of SGBV is vital for developing adequate gender and trauma-sensitive interventions. This paper, therefore, proposes a heuristic framework for analysing religious coping patterns in displacement.

Using data collected with displaced women in Turkey and Tunisia, I argue that religion emerged as a primary coping mechanism, fortifying their resilience by drawing upon religious resources from their spiritual capital. The analysis aims to expand knowledge about religious coping with SGBV and forced migration by addressing the question, 'How does religion enable women to cope with SGBV and displacement experiences?'. Evidence herein contributes to gender, religion and forced migration studies and builds the theory of religion, resilience and religious coping in displacement by introducing the original analytical concept of 'adaptive religious coping'. It refers to a mechanism whereby displaced women draw on their available religious resources to cope with SGBV and displacement through adaptation to challenging circumstances. SGBV is widely defined as 'any harmful act that is perpetrated against one person's will and that is based on socially ascribed (gender) differences between males and females' (UNHCR 2011: 6) and can include sexual, physical, psychological and structural violence. In forced migration, SGBV incidents are multiple and occur across the continuum from conflict and transit to refuge (Krause 2015; Pertek and Phillimore 2022). This article begins by discussing relevant literature on resilience, religion and forced migration, SGBV and coping, which frames this paper, followed by a methodology, findings and discussion with conclusions.

### Background: resilience and religion in forced migration

There is much debate around the meaning of resilience. The term 'resilience' originated from the Latin word 'resiliere'—meaning to 'bounce back'—and was first introduced by Holling (1973) in ecology. Social resilience, which this paper refers to, can be defined as the coping, adaptive and transformative capacity to return to one's original functioning and successful adaptations after exposure to stressful/traumatic events (Keck and Sakdapolrak 2013). Trauma research focuses on resilience as a process of emerging strengths and vulnerabilities across a lifespan and periods of stress (Cicchetti and Garmezy 1993), in which people develop multiple and sometimes unexpected pathways to resilience (Bonanno 2004: 20–21). An ecological approach to resilience, inspired by Bronfenbrenner's (1979) ecological system theory, examines resilience factors at inter-personal, community and societal levels. Recognizing the interdependence between individuals and environments they evolve and manifest resilience in, it considers a person's social context and cultural beliefs as protective and risk factors (Harvey and Tummalanarra 2007).

In the context of forced migration, the term 'resilience' is contested. With the focus largely on trauma, stressors and risk factors, studies report a range of resilience factors among migrants, such as personal qualities, friendships, and religious faith/spirituality (Hutchinson and Dorsett

2012; Raghavan *et al.* 2019). However, resilience has been criticized for normalizing wider socio-political injustice against migrants (Raghavan *et al.* 2019) and overburdening and 'responsibilising' marginalized groups to endure hardship, disregarding wider systems of oppression that weaken their capability to bounce back (Hart *et al.* 2016). While this article shifts focus to religion as a personal resilience factor, its purpose is not to attempt to reconceptualize resilience but to link it with religious coping.

Substantial literature reports that religion sustains forced migrant populations (Whittaker et al. 2005; Dorais 2007; Eppsteiner and Hagan 2016; Knott 2016; Khawaja et al. 2008; Babatunde-Sowole et al. (2016). Religiosity and personal religious practices (e.g. prayers, reading scriptures, mediations) are known for helping migrants find meaning, comfort and hope, and organized religious practices (participation in communal activities) for trauma recovery (Goździak 2002; Adedoyin et al. 2016). In other words, 'faith resilience' is an everyday coping tool among diverse migrant communities (Ögtem-Young 2018). This article is particularly located in the studies of refugee women's resilience which indicate displaced women draw strength from religion over time and place (e.g. Ghafournia 2017). For example, during resettlement and high psychological distress, the Somali women resettled to Melbourne in Australia strongly relied on their religious beliefs and practices as a lifeline (McMichael 2002). They drew upon Islam to access emotional support and repeatedly emphasized that their religion was the most important coping resource. Similarly, Shia Muslim refugee women in the US increased their reliance on religious faith in war and exile; trusted God for problem solving and relied on prayers to cope (Shaw et al. 2019).

A systematic qualitative review of resilience in refugee women by Hawkes *et al.* (2020) reveals religion is the most important factor contributing to their resilience, alongside culture, children and social support. Yet, they argued religion remains unacknowledged in resilience frameworks, indicating a potential transposition of Western conceptualizations of resilience to other cultural settings, less applicable in religious contexts. Secularization trends in mental health practice were made evident earlier by Goździak (2002) in the study with ethnic Albanians fleeing Kosova, who relied on Islam to recover from war trauma, as the interventions secularized their suffering and unmet spiritual needs put their health at risk. According to Goździak, Western psychotherapy, centred on individualism, rarely considered religious worldview in tackling trauma. Thus, she argued for understanding the religious context of refugees' suffering. Recent studies also illustrate that humanitarian practitioners tend to avoid religion in mental health and psychosocial service provision (Rutledge *et al.* 2021; Pertek 2022).

## SGBV, coping, and religion

Coping refers to cognitive and behavioural reactions to stressors exceeding one's individual resources, including problem-focused (active) coping and emotion-focused coping (Lazarus and Folkman 1984). Active coping is associated with controllable situations whereas emotional strategies concern less controllable events. Turning to religion has been recognized as a form of emotion-focused coping and links to the central concept framing this paper—'religious coping'. Religious coping refers to managing stress through one's religious/spiritual beliefs, with both positive and negative patterns of coping (Pargament *et al.* 1998). By definition, it describes the application of cognitive and behavioural strategies to handle stress with the help of spirituality and religious beliefs (Pargament 1997). These provide people of faith with a religious framework from which they can derive sacred meaning in their lives (Pargament 1997).

There is a well-recognized body of knowledge on the psychology of religion and mental health among general populations, demonstrating functions of religion in coping processes (Pargament 1997; Pargament *et al.* 1998), especially among people experiencing adversity or terminal illness (Harrison *et al.* 2001). For instance, protective and healing functions of religion were found to mediate people's reactions to life stressors (Harrison *et al.* 2001) and a perceived sense of control to buffer against emotional distress and mental disorders (Deangelis and Ellison 2017). Conversely,

some studies suggest that spirituality and religious coping can, in some circumstances, lead to hopelessness and increased probability of psychopathology (Pargament *et al.* 1998).

In addition, research has been conducted on the functions of religion among forced migrants, highlighting the importance of religious coping in countries of immigration (Adam and Ward 2016; Adedoyin *et al.* 2016; Shaw *et al.* 2019; Maier *et al.* 2022). Positive religious coping and negative religious coping among migrants was found to often coincide, with positive religious coping mediating negative religious coping linked with greater spiritual needs (Maier *et al.* 2022). Also, quantitative studies show religious coping coincides with high levels of psychological distress and acculturation stress (Benson *et al.* 2012). Although most studies on religious coping in displacement are not specific to SGBV experience, it can be assumed they include the survivors, as SGBV is very prevalent in forced migration (Freedman 2016; Pertek and Phillimore 2022). Some studies illustrate explicitly that displaced survivors draw strength from their religious resources to build resistance to SGBV (e.g. Ghafournia 2017). This paper further explores the intersection between SGBV, religion and forced migration to theorize religious coping among displaced women.

Studies of general populations found that religious coping supports recovery from sexual assault (Smith and Kelly 2001) and intimate-partner violence (Mahoney *et al.* 2015). For example, religious beliefs help survivors make sense of their experiences (Ahrens *et al.* 2010) and take decisions and appraise their situations through the spiritual and religious lens in many ways (Mahoney *et al.* 2015). While survivors sometimes experience spiritual struggles, which can hinder them from leaving abusive relationships, religious coping also enables potential 'turning points' in their lives (Mahoney *et al.* 2015). For instance, spiritual resources can help facilitate women's healing, acceptance, reconciliation and ability to move forward through spiritual/religious reappraisal.

To structure the analysis, I use **Ter Haar's** (2011) conceptualization of religious resources—religious ideas, practices, experience and organization—but focus on the first three which were frequently mentioned by women in relation to generating coping methods in displacement. This framework enables me to explore orderly how a specific religious resource enables different coping strategies in displacement. Religious ideas refer to religious beliefs, including on SGBV and displacement. Religious practices relate to rituals and behaviours which may be gendered. Religious experience refers to metaphysical experiences specific to gendered forced migration experience. I, therefore, conceptualize cognitive coping was enabled by religious ideas, behavioural coping by religious practices and spiritual coping by religious experience. This framework enables to account for subjective and personal experiences of religion. Although there is no one universal definition of religion, herein, *religion* is understood as an institutionalized system of beliefs or practices regarding a supernatural power, while *faith* includes various types of belief or trust in some form of transcendent reality (Lunn 2009). Meanwhile 'spirituality' is used to describe a broad quality that can also exist without religion (Solomon 2002: 24). The next section outlines the methods used.

#### Methods

This article offers an original analysis of data collected in my PhD research project with thirtyeight displaced women survivors of SGBV. It explores the influence of religion on women subjected to intersecting forms of violence along the continuum from countries of origin, conflict and transit, to refuge. I adopted a qualitative approach aligning with the constructivist framework of my research to explore experiences and meanings of participants (Creswell and Plano-Clark 2018). I draw on in-depth semi-structured interviews with twenty-one Syrian and two Iraqi women in Turkey (Ankara), and five Nigerians, three Congolese, two Ivorians, and one each from Eritrea, Ghana, Guinea, Sierra Leone, and Sudan in Southern Tunisia (Medenine and Zarzis) in 2019. Twenty-seven were Muslim and eleven were Christian with ages ranging from 20 to 58. The respondents were survivors of multiple incidents of violence: war-related violence, family violence, spousal violence, sexual violence, harassment and trafficking, and structural violence, such as racism. Although religiosity was not a selection criterion, the sample represented religious women: all but two women declared they practised their religion and all but one stated they believed in God and religion was important in their life. The majority (34 women) prayed every day and more than a third would fast weekly. Twenty-three women read the Qur'an or Bible daily and eight had never read a religious scripture. Most relied on personal and communal religious resources pre-migration for coping with difficult/traumatic experiences. All respondents were forced to flee their home countries due to external circumstances, such as war, religious and political persecution, economic deprivation, social marginalization, but also due to experiences of SGBV, such as female genital mutilation (Sierra Leone) and forced marriage (Cameroon). Most faced multiple migration-related stressors such as lack of and inadequate accommodation, food insecurity, unemployment, and aid dependency.

I deployed a non-probabilistic, purposive and convenience sampling method. I relied on direct recruitment in the refugee communities with support of refugee-led organizations and a mainstream NGO leading national refugee response. The local branches of the latter enabled me to recruit participants during their vocational training in Ankara, and connected me with refugee women outside of migrant shelters in Medenine. Snowball sampling was also used to access hard-to-reach groups, whereby respondents introduced me to their peers. I provided potential respondents with written information in Arabic, English and French directly or via a WhatsApp message from a research phone number and sent information via a voicenote to illiterate participants to ensure they could also participate. I first explained the study objectives and interview content, and how these could generate potential emotional risks during interview. This study included women aged above 18 of various backgrounds and immigration statuses. The interview commenced after informed consent was obtained. Respondents participated voluntarily and were informed that they could withdraw up to four weeks after the interview, prior to data processing for analysis. None of the participants withdrew during and beyond this period. All women were interviewed in safe locations of their choice-their homes, NGO and pharmacy offices, and a hotel meeting room. The safety of participants, researchers and interpreters was prioritized in adherence with a security protocol and ethical approval obtained from the University of Birmingham's Humanities and Social Sciences Ethical Review Committee. Interviews followed a survivor-centred approach with a sensitive interview procedure. Respondents who required psychosocial and/or material support were referred to local service providers. For emotional safety of the researcher and interpreters, a maximum of three interviews were conducted each day, followed by daily debriefs. Clinical supervision was available to the researcher.

In-depth semi-structured interviews enabled a flexible approach and helped build rapport. The length varied from 60 to 120 minutes. Twenty-four interviews were conducted in Arabic and six in French with experienced and trusted interpreters. Eight interviews with English-speaking respondents were conducted by the researcher alone. Two skilled interpreters in each location, one each from the refugee community and the host community, were involved in the interview process. Four bilingual transcribers assisted remotely with verbatim transcriptions, verifying the accuracy of material translated from Arabic or French to English. Interpretation processes involved diverse epistemological positions-of the interpreters, transcribers and mine. Interpreters played an important role in producing the data. Upon critical reflection, it is fair to say epistemological diversification strengthened the research process because it allowed different voices and epistemologies to come forward. According to feminist social constructionists 'giving voice to women's perspectives means identifying ways women create meaning and experience life from their particular position in the social hierarchy' (Riger 1992: 734). Respondents' meanings and experiences informed the way I interpreted the data and conducted my analysis. The study was, therefore, grounded in multiple experiences of oppression with 'triple subjectivity'-the interrelations between researcher, respondents and interpreter-shaping the research process and outcomes (Temple and Edwards 2002: 6).

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All data were anonymized and securely stored. Systematic thematic analysis was carried out with the support of NVIVO 12 in which data were coded manually to derive key themes. The themes were then also manually re-examined multiple times to achieve robust data triangulation. The analysis developed over time with the help of thematic maps. Exploring the social construction of religion, I focused on the analysis of religious expressions in relation to participants' social context and factors associated with their occurrence, shared meaning, patterns of conduct and emotions (Beckford 2003). I discuss research findings next.

### Findings: adaptive religious coping

Respondents were asked about coping techniques with their experiences of SGBV and displacement. Most women described how they dealt with multiple incidents of SGBV and migration-related stressors, presented below, by drawing on their available religious resources and adapting their known ways of religious coping to their conditions of displacement—a mechanism which I term 'adaptive religious coping'. Many respondents actively practised their religion and reported reliance on different religious resources pre-migration. Details concerning religious coping methods in displacement were obtained upon probing in interviews and reflected respondents' dire circumstances. I begin by introducing their coping mechanisms before discussing adaptive religious coping strategies.

#### Coping mechanisms: overview

Respondents deployed various coping strategies involving active, behavioural and emotional techniques. While most participants mentioned religion as a main coping mechanism, many also relied on their inner strength to cope. Mothers commonly mentioned raising their children and working towards a better future for themselves and their children as a source of motivation. Some derived strength from parental teachings, while others remained in remote digital communication with family. Women strove to succeed against the odds. With transformed gender roles in displacement, working, learning new skills and a local language served as practical coping strategies for some respondents, which distracted them from intrusive memories of SGBV and negative feelings about their precarious situations.

Religious references were an integral part of survivors' narratives. The majority drew great strength from religious beliefs and practices, believing God helped them keep going. Some reported that traumatic experiences of violence made them stronger and led them to rely on religion. Religious coping and personal strength-based coping mutually shaped women's resilience outcomes. For instance, the combination of motherhood and religion helped women mobilize their inner strength, as described by one woman subjected to sexual harassment and destitution in refuge:

Because I have no husband some people try to take advantage of me, especially in the aid sector ... And yesterday, I was walking on the street and a bunch of Turkish kids threw stones at me ... My relationship with Allah [after fleeing Syria] has become stronger, and being a mother of five children requires from me to become stronger. And I always ask help from Allah to keep me strong and take care of my children ... He gives me strength. (Soraya from Syria, 30s, Ankara)

Similarly, some respondents relied on human instincts of survival, while also seeking help from God. Combining religious and personal strength-based coping was closely linked to expressions of respondents' agency. Women operated at different levels of agency. For many, the irregularity and messiness of migration deprived them of power and control to shape their family reunification, housing, and work outcomes. In addition, those who were trapped in abusive relationships experienced limitations in their decision-making powers. Therefore, most respondents entrusted their lives to a supreme power who they hoped controlled their affairs. They combined self-reliance with reliance on God in both decision-making and implementation of decisions. However, some women survivors described themselves as exhausted and gave control to God completely. For those who lost everything and were exposed to multiple forms of SGBV with little

and no support, religion was the only resource available to them, when everything and everyone else seemed to fail them. Interestingly, most respondents reported that their faith or religion was strengthened as a result of traumatic experiences, even though access to religious resources altered in displacement:

Right in front of me I saw people going down [drowning] and never coming up again ... God gave me another chance to live, so this led me to a stronger connection with Him ... when I was kidnapped, I did pray. I just prayed like that [without ablution]. I was very dirty, I couldn't wash ... I was weak and couldn't stand. I just sat and prayed towards my arms ... (Asia from Sierra Leone, 30s, Medenine)

#### Adaptive religious coping strategies

In this section, I unpack the three adaptive religious coping strategies in which women reflect their dire circumstances in SGBV and displacement experiences. I outline the distinctive nature of each coping method in Table 1 and begin the discussion by looking at cognitive strategies, followed by behavioural and spiritual/emotional strategies that were integral parts of women's coping mechanisms. The findings indicate that cognitive strategies were enabled by religious beliefs, behavioural strategies by religious practices and spiritual/emotional strategies by religious/spiritual experience. Although presented separately, these coping strategies and related religious resources are interconnected and combine to reinforce each other, and increase resilience.

#### Cognitive adaptive religious coping through religious beliefs

Religious ideas facilitated women's development of religious coping strategies by 'thinking' processes, using mental and cognitive resources invisible to outsiders. Religious ideas mean religious beliefs which stem from the articles of faith, memorized verses of religious scriptures, personal reflections and religious knowledge which travelled with women across borders. Religious ideas enabled women to find meaning, reappraise and reconcile their past, and build resistance to violence. Nearly all interviewees utilized their religious beliefs to make sense of SGBV experience, which allowed them to grasp a sense of purpose and move forward with their lives by accepting their reality. A religious framework of reasoning underpinned women's moral compass and fundamental beliefs about the world, with most believing their flight and hardship were destined and part of a 'bigger plan'.

Women who believed deeply in destiny, even after experiences of severe sexual exploitation in trafficking and detention, sometimes took risks that led them to near-death experiences, yet

Type of coping	Cognitive adaptive	Behavioural adaptive	Spiritual/emotional
strategy	religious coping	religious coping	adaptive religious coping
Religious resource Actions	<ul> <li>Religious ideas</li> <li>By thinking: <ul> <li>Believing in destiny and God's plan</li> <li>Expecting a reward hereafter</li> <li>Reflecting on lessons from religious scriptures</li> <li>Questioning God</li> <li>Resisting SGBV</li> </ul> </li> </ul>	<ul> <li>Religious practices</li> <li>By doing: <ul> <li>Praying for stress relief</li> <li>Praying for protection</li> <li>Praying at night</li> <li>Reading reli- gious scriptures</li> <li>Rituals (e.g. prayer beads) to relieve from anxiety</li> <li>Fasting</li> </ul> </li> </ul>	Religious experience By feeling: • Empowerment • Divine protection • God-enabled survival • Patience • Healing

**Table 1.** Adaptive religious coping strategies—specification.

they continued to have faith that it was not their time to die. A woman mistreated by smugglers in her journey recalled:

I believe in destiny, I can't say that a human being brought me to Tunisia, it is the will of God ... Many souls died ... They didn't put me on that boat, the boat capsized, and everyone died. God saved me. (Grace from Ghana, 20s, Medenine)

By trusting God, some found certainty in uncertainty, having hope that the best of their destiny was yet to come. Some stranded in the deserts continued to believe that 'where there is life, there is hope'. Reminders of God's mercy and the hereafter kept them going, despite the continued violence in their lives, with the expectation and reliance on a reward hereafter. For example, a Syrian widow subjected to multiple abusive incidents—child neglect, family violence and repeated sexual harassment in host communities—believed:

My life was very difficult, it would always make me feel sad and upset ... I told myself that every difficulty and problem that I had in my life, Allah had written that in my destiny, and for each difficulty, Allah would reward me for it. (Shamila from Syria, 30s, Ankara)

Religious beliefs also helped women to reconcile their past. Respondents took religious scripture as powerful tools of guidance and hope for rebuilding their lives. Some found an explanation for the gendered harms endured by drawing lessons from memorized scriptural narratives. For Gloria, a rape survivor, a biblical narrative of migration helped her to make sense of sexual exploitation she experienced across her refugee journey:

When we came across soldiers, there was violence, they hit us and if we didn't have papers, they raped us ... They sold us like goods ... we were always locked up ... If you take the example of the children of Israel, they had to leave their country, they had to suffer ... Even if we suffer, through our sufferance, we will find glory ... I always ask for God's help and forgiveness. I always ask for the suffering to be over. (Gloria from DRC, 30s, Zarzis)

Similarly, Levantine respondents thought that their exile was a will of God, already predicted in the Qur'an. Believing that God would be there for them regardless of what happens, helped those who had lost their belongings and relatives, to reappraise their losses. For example, Salma who fled war violence in Syria and faced racial discrimination in Turkey explained:

In Islam, whatever happens to the believer is good; we come here, that's good, we go back there, it's also good ... (Salma from Syria, 20s, Ankara)

Nonetheless, for some, spiritual struggles emerged from negative religious coping and were voiced in interviews mainly by African respondents who at times lost faith and timidly questioned God about their victimization. In particular, those exploited in Libya questioned whether God existed; some blamed themselves for their suffering, while pleading to God. Kanika whose asylum claim was rejected, said:

... the [asylum] result is still negative ... now they are sending us away from the camp ... they are not giving us food, nor medical treatment ... I got pregnant here but we have no pampers, no milk, no clothes, no blanket ... I ask God this question, I know it is not a good question for me to ask God ... But every day I am asking "why do you not want to help me? Why am I suffering?" (Kanika from Nigeria, 20s, Medenine)

In domestic violence experiences, religious beliefs and knowledge also enabled women to appropriate patriarchal religious interpretations and build mental resistance to SGBV. They imagined an alternative future free from violence. Some Levantine survivors of spousal violence reinterpreted the Qur'anic verses on their own terms using the Prophetic tradition:

The prophet said: "Take my advice with regard to women: Act kindly" ... then religion says:" (a woman) must be retained in honour or released in kindness". This is what should happen if we can no longer tolerate each other ... (Zainab from Syria, 20s, Ankara)

Survivors who felt literate in their faith also relied on orally-transmitted Islamic teachings to oppose mistreatment of women. They challenged scriptural references used to reinforce patriarchal norms pre-migration and in refuge by discussing egalitarian religious teachings which support women's rights.

This section indicates displaced women relied on their religious thinking framework, reflecting their situations and needs as survivors. Cognitive coping based on religious ideas enabled women to make sense of their experiences and envision a better future.

### Behavioural adaptive religious coping through religious practice

Behavioural adaptive religious coping refers to behaviours and rituals where participants actively engaged with their bodies. Here, I discuss how religious practices, i.e. the behaviours and rituals, interacted with SGBV in displacement. 'Coping by doing' characterized survivors' problem-focused/practical coping, where the 'doing' of religious activities kept women calm and provided a lifeline to the divine. Conducting obligatory and voluntary prayers at different times of the day and night provided survivors with comfort, relieved anxieties, and remained for many the only available tool to resist their oppression. Women prayed to God against their abusers and pleaded for a better future. Survivors forced at gunpoint to sex by guards and victims of domestic violence recalled:

In Libya, lots of girls get raped and I was also raped. I got pregnant after being raped ... and after birth, the child died ... It's so hard in detention centres ... any guard at any time can come and get you ... if you say no, he'll just shoot you ... It is necessary in Libya to make prayers daily and to pray daily, there's no other solution. (Zola from Eritrea, 20s, Medenine)

There is no justification for spousal mistreatment in the religion. But we understand religion according to what we want ... Praying gives me peace. We have no one than Allah to seek help from. (Sara from Syria, 20s, Ankara)

Similarly, across their journeys, women drew strength and relief from their prayers, seeking protection and material provision. Many made prayers before setting out on their journeys and some would pray using scriptural verses for protection throughout until their arrival. In transit, particularly in life-threatening situations, they intensified their prayers, and many believed that they received divine protection. For example, Halima, who fled ethnic cleansing and mass rape in Sudan, recalled her experience:

When we decided to come here [Tunisia], the first thing I did was to read the Surah Yasin, and I prayed to Allah that he would protect and save my family ... We walked for seven hours but we weren't talking; we were praying the whole time until we arrived ... Religion was the most helpful thing, and my faith in Allah was strong ... nothing would happen without Allah's will. (Halima from South Sudan, 30s, Medenine)

Upon arrival, women thanked God for their survival and prayed for forgiveness. They especially relied on talking and reporting abuse to God directly, often in prayers at night, through which they found strength. In prayers, women found space to reflect on their situations and relieve their pain. Lotifa, a mother of six, subjected to abuse by a mother-in-law and hardships in exile, including loss of a child and border violence during transit, said:

I was fleeing mistreatment in Syria, so I prayed that he would make it easier for me to arrive here in Turkey ... The greatest blessing is that I always pray to Allah. When I am in Sujūd I feel a connection to Allah, I always pray that he will protect me and my children. I often cry but by praying an extra prayer at night I feel so much better afterwards ... (Lotifa from Syria, 50s, Ankara)

Prayers helped survivors manage stress and recurring traumatic memories by distracting themselves from daily worries. A combination of different rituals served Levantine women as instant relief to anxiety. Some used prayer beads (*dhikr*—litany) and followed a daily routine of devotions and Qur'an recitation to pass time, which buffered the mental effects of domestic violence and migration-related daily stressors:

I read the Qur'an and Azkar a lot and my day passes so quickly! So, not even once do I feel anxious. When I feel nervous, I say, "O Allah, open for me my chest, and ease my task for me" and within seconds, my nervousness disappears ... (Mariam from Syria, 50s, Ankara)

To aid coping, survivors sought closeness and intimate relationships with God as their lifeline. They sought divine love and mercy through prayers, reading scripture, and fasting, to protect and provide for them:

... I can never forget [prayer] morning and night ... You feel like you are talking to someone who wants to hear you. (Gloria from DRC, 30s, Medenine)

When I am in Sujood [prostration] I make Duaa for my children to get well, and I also pray to Allah for Rizq [material provision] to come in an easy way, and to keep my honour [protection from prostitution]. (Jenah from Iraq, 30s, Ankara)

Most women felt their relationship with God was mutual, so they harnessed it by remembering him and hoping that through their remembrance of God, God would remember them. Seeking direct divine connection, they read, listened to, or expressed a desire to read, the sacred text. Levantine respondents, many of whom had memorized parts of the Qur'an and/or were subjected to religious persecution, expressed no need for external religious support. Conversely, African survivors wanted to read the Bible or Qur'an in their mother tongue and consult a religious leader to find reassurance in God's words. Such options were unavailable in Southerm Tunisia as Christian places of worship were remote and religious scriptures were not provided for migrants by service providers (Pertek 2022).

This section illustrates survivors relied on religious practices (their prayers and reading religious scriptures) enabling them to generate behavioural coping in which they reflected their situations. Women adapted religious practices for relief and protection. Both cognitive and behavioural coping, drawing on religious beliefs and practices respectively, enabled survivors' spiritual/emotional coping strategies, which will be discussed next.

# Spiritual/emotional adaptive religious coping through religious experience

Women felt God's 'doing' continued at different stages of migration through their religious experience. By religious experience I refer to the metaphysical experiences, spiritual events, feelings, and emotions that religion may incite in believers. Religious experience shaped survivors' lives through nightdreams, realization of their prayers, and feeling God's presence and support throughout migration in some of the most hopeless and dangerous situations. Holding tight to religious ideas and religious practices led some survivors to undergo intense religious experiences. Many shared their narratives of survival within a religious framework featuring God as their only saviour. They routinely conveyed that nobody helped them but God while attributing any help received to a godly act.

... I feel that Allah is always with me. And he always supports me, and he sends good people my way. (Faridah from Syria, 30s, Ankara)

It is God who has allowed me to escape from this violence [in Libyan detention] (Kissa from DRC, 30s, Zarzis)

Most respondents continued to entrust their lives to God in transit and refuge, believing that He would take care of them and felt empowered by God to continue their journeys to reach their destinations, despite persisting impacts of SGBV (e.g. physical injuries). Women believed that God empowered them to survive perilous journeys across seas, deserts and mountains, and escape trafficking, border violence, detention, and family violence. Intensively recalling sacred

texts and praying reinforced survivors' spiritual experiences in which they felt God's 'touch' in their lives. With trust in God and imagination of survival along forced migrant routes, respondents found 'power within' which they attributed to their faith. Continued prayers and invocations led to what they believed was 'God-enabled' survival.

... I saw people die in front of me. I saw people suffer in front of me. I saw many things. But me again—to get life, to get peace ... It has been very difficult, but God has given me the strength. God gives me power every day... (Melanie from Cameroon, 30s, Medenine)

Similarly, Orisa, who fell pregnant in forced prostitution in Libya and was induced to early labour to expediate her return to exploitation, described her return to life in the medical emergency, as an act of God:

When I came to Libya [for work] my friend took me to a woman who said our work was to prostitute ... I told her "Madam, I am three months pregnant, I can't do prostitution" ... Next day they called three men to beat me. They locked me in one room. The next day they called three guys to come to sleep with me ... I was sick every day ... They gave me an injection [to invoke early birth], I was seven months pregnant, my tummy pained me, everything was just cut up ... I wasn't myself ... so they said 'it's time for you to deliver' ... it was God who helped me ... I was in labour for one week, it was God ... they took me to hospital, they did an operation ... I died already, it was God who returned me to life ... I thank God for everything. (Orisa from Nigeria, 30s, Zarzis)

Many respondents thanked God for sending people who helped them in transit to escape violence and access support. Some believed that God watched over them and facilitated their perseverance to reach their destination, viewing their survival as a gift from God. Most women came to terms with their experiences through faith-based patience, with some believing that God tested their patience. Three rape survivors said that faith-inspired patience and acceptance prevented them from suicide ideation by enabling them to find meaning in their struggles and strength to persevere.

Respondents of both faiths also believed that healing and health come only from God. In sickness some women made prayers to cure themselves and their children and recited the religious scripture while touching their injuries for healing. Muslim respondents believed in the Qur'an's healing properties and some read it to improve their physical health symptoms after incidents of domestic abuse:

I swear by Allah that the Qur'an heals better than doctors ... When I have physical health problems, I read the Qur'an and I feel better ... where he hit me, here, I put water and salt on it and I kept on saying "in the name of Allah" and it healed ... (Mariam from Syria, 60s, Ankara)

Several respondents described 'faith healing' in their prayers and scriptural recitation, attributing their cures to the potential of faith. Finally, a few survivors disclosed religious practices helped them to cope with mental health conditions. For example, one widow subjected to multiple SGBV, including human trafficking, described that hearing the Qur'an meant for her a grounding emotional support which enabled her to emerge from a state of altered consciousness:

When I fall unconscious; I'm still awake, but I'm not aware of my actions, and when this happens and the ambulance takes me to the hospital, the only thing that wakes me up is my aunt's call [in her subconsciousness]. She's back in Syria and she calls and recites the Qur'an for me and then I wake up and vomit. (Khadija from Syria, 30s, Ankara)

This section demonstrates how survivors' experiences of the invisible world and trust in divine protection incited in them metaphysical conditions in which they found empowerment and healing. A combination of beliefs and practices reinforced religious experiences in which feelings and dreams eventually enabled women's survival. These experiences led them to spiritual or emotional coping techniques, drawing on gratitude and patience.

### **Discussion and conclusions**

This article identified and centred on religion as an important personal resilience resource which enabled Levantine and African women to cope with stressful/traumatic events during displacement. It uncovered the religious and spiritual dimension of displaced women's fortitude and highlighted the significance of religion in coping mechanisms with SGBV and displacement. As demonstrated above, cognitive strategies helped survivors find meaning, reappraise their experiences and build resistance to SGBV. Behavioural strategies enabled women to keep calm and get closer to God, whereas spiritual/emotional methods led them to feel empowered, protected, and to heal. Theorizing the strategies of religious coping mechanisms among displaced survivors, the analysis offers empirical and theoretical developments at the intersection of gender, religion and forced migration. New evidence supports building a theory of religion, resilience and religious coping in displacement, by introducing the original concept of adaptive religious coping, while advancing scholarship on gender, religion and forced migration. The paper particularly expands an ecological approach to resilience by arguing that religious coping, enabled by personal religious resources, reinforces resilience at individual level. It contends with Adam's and Ward's assertion that 'religious coping operates more as a resilience mechanism, by enhancing more stable, positive measures of wellbeing and bolstering the psychological equilibrium of an individual' (2016: 17-18).

By coining 'adaptative religious coping', the article illustrated that using religious resources enabled forced migrant women to adapt multiple religious coping strategies to cope with SGBV and displacement in the absence of wider support. In doing so, they embodied their experiences, for instance by mentioning their hardships in prayers and seeking references to their situations in religious scriptures. Many respondents reported a strengthened faith during traumatic experiences and adaptation of available religious resources to deal with SGBV and migration-stressors, indicating their religious coping was adaptive. Relying on personal religious beliefs and practices, which travelled with them across borders, for many it meant holding tight to their known ways of (religious) coping.

A key limitation of this paper is that participants were not probed about using religious resources to cope before migration, although many noted they used religious resources premigration for coping with traumatic experiences. Some described how religion had supported their coping in their country of origin. During displacement, commonly experiencing losses (of family, finance and social connections) meant that women held tight to the resources that mattered and were available to them—religious beliefs, practices and experience—as part of their adaptation to stress. Conserving these religious resources meant for some a compensation for other losses, in accordance with the conservation of resources theory (Hobfoll 1989). I, therefore, argue religious coping was one of the main coping mechanisms available for adaptation in displacement, which supported women's psycho-social and spiritual survival.

Using Ter Haar's religious resources framework enabled me to identify the different influences of religion on displaced women's resilience and coping. In particular, the paper highlighted the interconnectivity between different strategies of adaptive religious coping that cut across personal religious resource domains. As demonstrated above, religious ideas, practices and experiences combined and supported displaced women's coping mechanisms. However, respondents rarely referred to religious organization, indicating another significant contextual finding—valuing non-institutionalized religion in coping processes in displacement. Most women relied on personal and non-organized religion, by drawing on resources from within their spiritual capital. The study, therefore, reveals the importance of non-institutionalized and personalized religion and spirituality in coping processes of displaced women, corroborating evidence from other studies (e.g. Sossou et al. 2008; Parsitau 2011; Adedoyin et al. 2016). In doing so, the article builds on Ter Haar's framework by conceptualizing personal religious resources as coping assets that strengthen women's resilience capacities across SGBV and displacement experiences.

Another key finding was that forced migrants' resilience is embedded in their faith (e.g. Shaw et al. 2019). Religious faith remained a significant lifeline amid the chaos of displacement and

operated as a driving force extending survivors' coping capacities. Respondents' reliance on their faith confirms *faith resilience* operates as an everyday coping strategy (Ögtem-Young 2018). Similarly, as previous research evidences, displaced women draw strength from religious resources, including religious texts, joint prayers and metaphors of survival (Parsitau 2011), this study confirms religiosity and spirituality enable coping mechanisms which buffer against potential mental disorders (Goździak 2002). The findings are also congruent with studies on SGBV that found women drew immense strength from their faith while facing multiple vulnerabilities to violence (e.g. Zakar et al. 2012). Similar to Ahrens et al. (2010), respondents subjected to sexual violence drew meaning and healing from their religion. My findings are distinct, however, in highlighting displaced survivors' religious coping strategies which integrate the cognitive, behavioural and spiritual domains. According to respondents, religion was one of their main coping mechanisms for dealing with psychological tolls and exploitation in their perilous journeys and daily stressors in refuge, such as racism, inadequate housing and unemployment.

Reflecting Pargament et al. (1998) and Harrison et al. (2001), this study identified various positive and negative religious coping strategies, also confirming that people tend to utilize religious coping mechanisms in situations where they have no and little control. Women's religious coping strategies were mainly positive, but also included some negative coping methods. For instance, some African participants who were unable to access religious scriptures and remote places of worship for pastoral care, could not resolve certain spiritual struggles. This finding indicates local context influences religious coping methods and outcomes. Respondents in Tunisia, instead, turned to negative religious coping (e.g. by feeling being abandoned by God) which coincided with high psychological distress, confirming the connection of negative religious coping with negative mental health outcomes (Pargament et al. 2011). As Maier et al. (2022) find, however, positive religious coping methods appear to mediate negative religious coping of women who use their religiosity for everyday coping.

The coping styles of women in this study were blurred, as they combined emotion-focused and problem-focused coping (Zakar *et al.* 2012), with many respondents frequently combining self-reliance (e.g. seeking work) with God-reliance. Respondents confronted their problems head-on by conversing with and cooperating with God—the only higher power they believed able to remove their stressors. They sought opportunities to connect with this power and relinquish their lack of control in a relationship over which they had full control (with the divine). Therefore, their turning to God involved an agential act of seeking help to better their conditions in the absence of other forms of power. Therefore, this study contributes to debunking the perception that religious coping is a passive strategy, as many respondents showed it was an agential process of gaining a sense of control.

Women's accounts emphasized the emotional, spiritual, physical, and mental effects of religious coping which was part of their adaptation strategy to trauma and loss. For many respondents, religion mediated their emotions, indicating a potential healing function of religious coping. Other studies have demonstrated the healing power of religious rituals in refugee experience, through enabling access to prayer services, pastoral care and prayer rooms (Goździak 2002; Janzen et al. 2005). The healing function of reading religious scriptures is also recognized with recitation of the Qur'an, among Muslim survivors, playing a vital role in facilitating healing (Adedoyin et al. 2016). The analyses illustrate that women's relationship with the transcendent realm mattered in facilitating their recovery and was an important protective factor in their experiences of SGBV and displacement (Pertek et al. 2023). Women associated religious beliefs and practices with positive emotions, buffering negative emotions and stress (Maton 1989). For example, the perception of being secured by God ('divine control') (Deangelis and Ellison 2017) helped women reappraise their situations and buffered stress. Similar to faith 'cushioning' Kenyan IDP survivors' emotional pain in Parsitau (2011), religious coping in this study sustained women psychologically, stabilized their emotions and relieved anxieties. However, the analysis herein suggests that trauma and daily stressors impact survivors' coping capacities and mental health. Respondents simultaneously exhibited strong resilience (through religious coping) and

psychological distress indicating that impairment and resilience are not opposite aspects of coping (Anderson *et al.* 2012) and can run in parallel. The key recurring themes indicated some level of generalizability to comparative forced migrant contexts, offered herein as potential themes for future research.

Several implications emerge from this study's framework where religious resources have been identified as a resilience resource. Bolder recognition of religion, faith, and spirituality, as well as faith sensitivity in research and practice, are needed to ensure interventions are socioecologically located and support migrant coping strategies effectively. As this study and others signify, the importance of religion as sometimes the only resilience resource in displacement means that service providers might support forced migrant populations to adapt their religious coping to relieve their psychological distress and strengthen capacities to rebuild their lives. Using a holistic approach, migration and public health policy makers might account for the role of religion in the lives of migrant populations and develop adequate strategies to support their resilience and recovery. New pathways to address positive and negative religious coping methods are needed, recognizing diverse resilience expressions and healing patterns. Mental health practitioners might develop religious literacy skills and religious/spiritual needs assessments to understand and address displaced survivors' holistic needs. Further research, with larger samples, gender and tempo-spatial sensitivity, might explore the effects of religion on the mental health of diverse displaced populations to adequately contextualize responses.

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## Data availability

The qualitative data presented in this article are not readily available because the data's sensitive nature means that there are ethical requirements stipulating data cannot be shared. Requests to access the datasets should be directed to the author.

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