

## Article

# “We’re Looking for Support from Allah”: A Qualitative Study on the Experiences of Trauma and Religious Coping among Afghan Refugees in Canada Following the August 2021 Withdrawal

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**Abstract:** In August 2021, the United States withdrew from Afghanistan after 20 years. The fall of the Afghan government to the Taliban resulted in the displacement of some Afghans. Canada committed to welcoming thousands of refugees. Research suggests that refugees tend to have higher rates of post-traumatic stress, and Afghan refugees, in particular, have among the highest rates. Another body of literature suggests that religious coping has positive effects. This paper presents qualitative data from interviews with 11 Afghan refugees who arrived in Ontario after August 2021 with the intent to combine these two findings. In so doing, we sought to understand how Afghan refugees described their experiences of displacement and the extent to which those experiences were traumatic, but also how they relied on Islam to cope with the traumatic effects of displacement. The interviews we conducted suggested that our participants experienced exposure to death, exposure to threat of death and/or injury, and described some of symptoms of the criteria for PTSD. The interviews also suggested that the participants coped using Islamic concepts, beliefs, and rituals. The qualitative data we present provide rich descriptions of the experiences of trauma in the face of displacement and religious coping.

**Keywords:** Islam; Afghan refugees; trauma; religious coping



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The humanitarian crisis in Afghanistan in 2021 following the withdrawal of the American military and the subsequent rise to power of the Taliban triggered a new wave of Afghani refugees to Canada. Many of these new refugees to Canada were forced to flee their home country with fear for their lives due to their past work or associations with the coalition forces or the newly fallen Afghan government (Vaze 2022). Canada committed to welcoming at least 40,000 Afghans as refugees and vulnerable immigrants in response to the crisis, and as of 28 June 2022, reported to having received 16,370 Afghan people as vulnerable immigrants or refugees since the start of the crisis in August 2021 (Immigration and Citizenship Canada 2022). According to the International Organization for Migration (2022) report, Afghanistan was already among the top 10 countries of origin for migration in 2020. In this same report, Canada was listed among the top 10 destination countries for migration.

## 1. Afghan Refugees Post-August 2021

In response to 9/11, the United States of America led an invasion into Taliban-controlled Afghanistan. During that time, the US remained at war with the Taliban and other forces, including Al-Qaeda, while training and establishing an Afghani government. While this 20-year period includes various conflicts with the Taliban, in September of 2020,

the US-backed Afghani government released approximately 5000 prisoners of war as part of a deal with the Taliban. In May 2021, eight months later, the Taliban began an insurgency which ultimately led to the fall of Kabul, Afghanistan's capital, and the withdrawal of the US from Afghanistan.

## 2. Mental Health among Refugees

Mental health concerns are high among refugee populations, with particularly high rates of depression and post-traumatic stress disorder, both of which can be conceptualized as the result of adversity, stress, and trauma experienced in the country of origin as well as the process of immigration itself (Ahmad et al. 2020; Henkelmann et al. 2020; Kartal et al. 2019; Li et al. 2016). In a large meta-analysis of mental health among refugees re-settling in high-income countries, refugees were found to have significantly higher prevalence rates of self-reported anxiety symptoms (42%; 13% diagnosed), depressive symptoms (40%; 30% diagnosed), and post-traumatic stress symptoms (37%; 29% diagnosed) (Henkelmann et al. 2020). These rates were not significantly related to age, gender, country of origin, country of resettlement, or even length of residence in the country of resettlement, suggesting that these symptoms did not tend to abate with the passage of time. Research has shown, however, that post-migration factors such as language acquisition, family unification, and community support do tend to predict fewer symptoms, whereas unemployment, discrimination, and long-lasting resettlement procedures tend to predict worse mental health outcomes (Kartal et al. 2019; Li et al. 2016). This generally points to the importance of post-migration care with attention to the specific practical and social/emotional needs of the refugees. It is relevant to the specific needs of Afghan refugees as well, especially with the prevalence rates of anxiety, depression and post-traumatic symptomatology being very high, even relative to the typical rates among refugee populations.

The rates of PTSD among Afghan refugees tend to be very high across Europe (34–35%; Bronstein et al. 2012), Australia (46%; Yaser et al. 2016), and North America (50%; Malekzai et al. 1996) in the past decades. In a Canadian population of Afghan refugees, 53% showed symptoms of PTSD (Ahmad et al. 2020).

Studies examining the risk factors for PTSD among refugees have found that these generally include the number of traumatic events experienced, older age, being separated from family, being female, having lower levels of education and lower levels of language skill in the new country, unemployment, and a lower sense of coherence/meaning (Braun-Lewensohn and Al-Sayed 2018; Bronstein et al. 2012; Hecker et al. 2018; Malekzai et al. 1996; Matheson et al. 2008; McGregor et al. 2015). PTSD symptoms were found to be higher among refugees who were unemployed, reported less social support, and tended to report lower physical health in a Canadian sample of Afghan refugees (Ahmad et al. 2020).

In a systematic review of the studies on the mental health of war refugees from various countries, Bogic et al. (2015) found a high degree of variance in the rates of PTSD (4.4–86%), depression (2.3–80%), and anxiety disorders (20.3–88%). Much of the variation between the studies appeared to be related to the rates of pre-migration traumatic exposure in the country of origin and post-migration stress. This seems to suggest that both trauma exposure in the country of origin and post-migration coping are significant factors related to refugee mental health.

Depressive symptoms, which are common among refugee populations, can be conceptualized relative to stress and trauma during pre- and post-migration. In a qualitative study based on interviews with Afghan refugees, depressive symptoms were commonly reported among the participants interviewed and these symptoms were understood by the participants as being related to the pre-immigration trauma they experienced, separation from family in the course of migration, and post-migration stressors in the socio-economic and cultural domains (Alemi et al. 2016). Socio-economic status post-migration appears to be the most significant in predicting the symptoms of depression among war refugees (Bogic et al. 2015). A recent study of Afghan refugees ( $N = 66$ ) in Australia found that almost half of the participants met the criteria for PTSD (Hamrah et al. 2021). The likelihood

of meeting the criteria for a PTSD diagnosis was significantly higher among those who indicated language difficulties and separation from family. Most indicated an awareness of their symptoms, but fewer than half indicated that they had sought mental health services, which may be related to the various barriers, such as availability, accessibility, appropriateness of services, or culturally based conceptualizations of mental health and coping that may not be addressed by mainstream mental health services (Hamrah et al. 2021).

### 3. Religion, and Mental Health among Afghan Refugees

Religious-based coping is common among people when facing a range of stressful life experiences (Ano and Vasconcelles 2005). Religion is a source of complex meaning structures that impact coping in complex ways, often conceptualized by researchers as a ‘double edged sword’ in that it can be a source of resilience while also informing or being informed by negative beliefs about the self, others, and the community that play a role in PTSD symptomatology (Pargament 2002). This complexity was reflected among Afghan trauma survivors, the majority of whom described themselves as Muslim (Ghorbani et al. 2021).

In general, religious coping tends to be associated with a lower risk of depression and includes seeking spiritual support, connectedness, receiving support from the religious community, reframing stressful events in positive ways, and the experience of a collaborative relationship with a higher power (Harrison et al. 2001). On the other hand, the harmful aspects of religious coping that appear to make depressive symptoms more likely include the negative reframing of stressful events and interpersonal conflict within the religious community (Harrison et al. 2001). Although religiosity itself can play a positive role in coping, in certain contexts, it appears to be more likely to have the opposite effect, though the contextual contributors are unclear (Harrison et al. 2001). That is, the effects of religion and religious coping on mental health appear to be highly contextualized and nuanced. There appear to be significant differences between religious coping in Christian samples versus Islamic samples. For example, in the Islamic samples, positive and negative religious coping strategies seemed more likely to co-occur than in Christian samples, with positive coping strategies being more common than among Christians (Abu-Raiya and Pargament 2015). In general, people are more likely to use religious coping if they have higher religiosity, are of a lower socio-economic status, older in age, female, and following a stressful life event characterized by loss or trauma (Abu-Raiya and Pargament 2015). Among Islamic refugee populations, religion, spirituality, and faith are often found to play an integral role in coping with adversity, stress, and trauma (Hasan et al. 2018). In the current context, Muslim Afghan refugees are in the unique position of facing adversity and trauma that has been justified by an Islamic extremist group while also holding their own experience of their Islamic faith. The unique experiences of this new wave of Afghan refugees would be important to understand so that their unique mental health needs and resiliency factors may be responded to appropriately. One such unique aspect of Afghan refugee experiences is the role of religion, spirituality, and faith in how they experience and cope with their recent experiences. The current study aims to explore the role of religion, spirituality, and faith in coping with recent stressful and traumatic experiences due to the recent Afghan crisis among Afghan refugees in Canada in a qualitative study. This is the first study, to the authors’ knowledge, that explores the role of religion in coping among refugees from Afghanistan following the rise of the Taliban in 2021.

### 4. The Present Study

We hope to add to the broader literature by exploring the questions about how Islam figured in the experiences of war and displacement among Afghan refugees 20 years after the post-9/11 US-led invasion in 2001. To our knowledge, this is the first study that looks at refugees following the US withdrawal in August 2021 and we hope to provide insight into a new generation of Afghan refugees fleeing war and displacement from their native country.

## 5. Methodology

Accordingly, we had the following research objective: to understand the role Islam plays in dealing with the trauma of war and displacement among recently arrived Afghan refugees in Canada. In order to meet this objective, we had two broad research questions. The first was to understand these experiences with a particular focus on the elements of the experience that were traumatic. The second research question was to understand if and how these participants relied on Islam to cope with the potentially traumatic experiences of displacement.

There is one theoretical consideration to mention here that the reader might have discerned already from the literature review: should we use the term trauma—an English word with a connection to Western clinical psychology—when discussing the experience of war and displacement with largely Pashto-speaking Afghan refugees, few of whom were fluent in English? We were aware of this problem and sought to address it in two ways. First, we asked the participants to describe their experiences in open terms with the first interview question. Therefore, we didn't lead with a concept such as "trauma" and we didn't use any of the clinical language in the interview. Second, the third author co-facilitated the interviews, many of which were conducted in both English and Pashto. Though this question and its larger implications is one that certainly interests us, these two measures meant we could approach the study with some degree of confidence that we weren't asking questions that might be conceptually oblique or peripheral to the worldviews of our participants. In fact, that those reading this are doing so in English represents the same challenge, though inverted.

## 6. Data Collection

The sole method of the data collection was the use of a semi-structured interview, which consisted of three main questions:

1. Can you briefly describe your experience of war and displacement?
2. During this experience, did you rely on your religious faith and practice to cope? If so, in what ways?
3. Do you use your faith to cope with your trauma? If so, in what ways?

Each interview also consisted of two concluding questions:

4. Is there anything you would like to share that we haven't talked about yet?
5. Do you have any questions for me?

The interviews were conducted online or in person, as determined by the participant. All the interviews were conducted by the first author and third author and were conducted primarily in English but supplemented with Pashto upon the participant's request. The third author speaks Pashto. These interviews lasted from approximately 60 to 120 min and were conducted in July 2022, less than a year after the fall of Kabul.

## 7. Recruitment and Sample

With the recruitment materials, including an email and telephone script, the participants were recruited through the Thunder Bay Masjid. The potential contacts were then forwarded to the first author and an interview was scheduled. After the information letter and the consent form were signed, the interview progressed. In total, we interviewed 11 people. A twelfth person declined the interview after reading the information out of fear of consequence due to the high political position this person had—despite the fact the confidentiality was guaranteed. Out of the 11 interviewees, 10 consented to an audio recording and one did not. For this one participant, notes were taken by the first and third authors and combined for the data analysis. All 11 interviewees were male. We attempted to recruit men and women, but unfortunately, we failed. We did not collect any demographic information to protect the identities of the interviews and such information was not theoretically or empirically pertinent to the data analysis.

## 8. Data Analysis

To analyze the data, we used NVivo as the qualitative data analysis software and Thematic Analysis as the method for analyzing the interviews. Braun and Clarke (2006) listed six steps that we used as a coding framework for the first research question. Braun and Clarke (2006) also listed six steps for the data analysis: (1) familiarization with the data; (2) generating the initial codes; (3) searching for the themes; (4) reviewing the themes; (5) defining and naming the themes; and (6) producing the report. For the most part, all six of these steps were followed with one variation between the first and second research questions, a variation consistent with Braun and Clarke's (2006) distinction between inductive analysis and deductive analysis related to a theoretical lens. Since the first question pertained to trauma, we developed an initial coding framework from the DSM in order to obtain clinical parameters for coding the manuscripts. This was significant and useful for one major reason: it permitted us to keep the coding focused, as closely as possible, on the clinical definition of trauma. An inductive approach to coding the manuscripts for the first research question, rich in stressful and difficult experiences, threatened our desired commitment to focus on a clinical definition of trauma. Having said that, we want to be clear that this paper was not intended to be clinical; it was an exploratory qualitative study that simply used clinical parameters and the expert knowledge of the second author to ground the study's focus on trauma. We explore the potential clinical implications in the discussion below.

The second research question was analyzed, again using Braun and Clarke's (2006) six steps, relying on an inductive approach. We did not develop a coding framework in advance. The relative breadth of religious practice in Islam meant that we had considerable latitude to approach this question. In fact, approaching this question inductively was the best choice given the breadth.

Thus, from start to finish, each transcript was generated from an audio recording. Then the transcripts were uploaded to NVivo. The first author conducted the primary analysis by following the first five steps of Braun and Clarke's (2006) approach. For the first research question, the DSM-derived coding framework was used to generate the codes and themes, while the codes and themes for the second were generated inductively. The codes and themes were reviewed (step 4) and defined and named (step 5) by the whole research team, including the two domain experts in clinical psychology and Islamic studies. Once the themes were agreed upon, we approached step 6—writing the results.

## 9. Results

Below we present two subsections, each of which responds to one of the two research questions. Under each section, the reader will find the themes, their explanation or definition, and excerpts from the interviews that demonstrate or support that theme. Each presentation of a theme concludes with a brief comment on what we believe the theme suggests about the research question.

### 10. Research Question 1: Traumatic Responses to Displacement

With the first research question, we sought to understand people's experiences of displacement in order to understand if and which traumatic elements existed regarding displacement. As we noted in the methodology, we used a coding framework for this research question, and therefore, our themes below roughly mirrored the language in the DSM-V. In fact, we provided references to the DSM-V to a context for the themes.

In total, we provided four themes: (1) the reported exposure to threatened injury or death; (2) the reported exposure to actual death; (3) the negative alterations in cognition and mood; and (4) the alterations in arousal and reactivity. Our original coding framework included avoidance symptoms and intrusive symptoms, neither of which yielded significant results from our coding, but we did include some information on them toward the end of this section.

**Theme 1: Reported Exposure to Threatened Death or Injury.** All the participants reported an exposure to threatened death or injury. This theme was inspired by category A of the DSM-V criteria, which contains four criteria, three of which we adapted to be relevant here. Those were (a) a direct exposure to a threat to oneself, (b) witnessing a threat to others, and (c) learning of a threat to a close family member or friend. The excerpts below all fell into category A and referred to one of the three criteria. Participant 2 conveyed how he travelled at night from one city to another and had to cross multiple Taliban checkpoints.

“There [were] checkpoints of the Taliban somewhere and they stopped us and asked, ‘Who are you?’ We told them that we were going . . . for some [medical] treatments, for some rehab. [They let us go, but] there were many checkpoints . . . when we travelled at night from [city 1] to [city 2]. I cannot say that the Taliban told me that ‘we will kill you’ [but] I thought like this because I [was] afraid.”

As is the case with almost all our participants, the fear was, in part, due to the fact that this participant’s occupation meant that he was more likely to be perceived as aiding the US and its allies. This person also further elaborated on this idea that, as a result of his work, he might die.

“In [city 1] and [city 2], I just heard by [the] news. I heard [from] my friends, the news [about] my relations. [I heard that] they killed this person, they killed [that] person. [That] was, how should I tell you, [that] was a terrible situation and I [hadn’t] heard [anything like that] before”.

When we probed and asked how he felt or what he thought when he heard about other government employees being killed by the Taliban, he said “I thought that maybe one day is my round. I thought maybe the Taliban will come to me . . . [and say that I am] their enemy”.

Here is another instance of an interpreter, who had previously been injured during an encounter with the Taliban. This man described the implied threat to this life after he had an encounter with the Taliban. It’s a long quote, but it is illustrative and rich with detail, painting a picture of a threat to his life that is more subtle than the ones presented above.

“I mean they were everywhere, and I was really scared . . . I was pretending to my wife and child that I [wasn’t] scare[d]. I mean, [I was] struggling. [At one point,] I was crossing a Taliban checkpoint, just walking and one of them . . . called me, ‘Hey come here!’ I just covered my face and head with a scarf. I didn’t [pay] any attention to his voice or whatever [and] I just kept going. He said, ‘Hey you with the white scarf’ and [so] I turned [around] . . . He said ‘Come here.’ I went there. He said, ‘Who are you?’ [which] meant are you working with the former government. I said ‘No, I’m just a shopkeeper.’ ‘Where’s your shop,’ [he asked]. I said, ‘In [an] other corner of the city’ [and] I told him an area . . . He was speaking in Pashto and I talked [sic] in Pashto. He said ‘You’re speaking really good Pashto.’ I said, I’m from [city 1]. He said ‘Where?’ I [named] a district. He said, ‘Which village?’ I think he was from the same area. ‘Trust me,’ I said ‘I’m from that village’. He said ‘Who’s your father?’. I made [up] a name for him [and] he said ‘I don’t know that person.’ I told him we [moved] out [from] there years ago. We came to [city 2]. He said, ‘Oh okay. Good job, buddy. You can go.’ I was really scared. Trust me, that was the first time [in my life] I was shaking.”

**Theme 2: Reported Exposure to Actual Death or Injury.** Theme 2 still pertained to section A referred to above. Here we include the experiences that pertained to exposure to *actual* death or injury as opposed to the threat of it. Again, the same three points under section A were relevant, which, when adapted to this paper, referred to (a) directly experiencing an injury, (b) witnessing, in person, a death or injury to others, and (c) learning that a close family member or friend was killed or injured. Unlike the first theme of threatened death or injury, not all of our participants experienced an injury or witness a death or injury in person of someone else, including family or friends. However, some did. Participant 3 described both the threats and exposure to death and injury.

“Things started much, much earlier in terms of our experiences to threats on our life, threats to our reputation, threats to our family. I was in the center of the city and I could see the chaotic situation. One part of this was ... seeing the war, people who are killed, injured [Another is the] different narratives on both sides of the war, justifying the war from a religious, political, [or] ethic lens, and you live with all of this”.

Another one of our participants described witnessing his father being injured during an encounter with the Taliban.

“The Taliban came to the [road] ... my father was [on]. They [shot] ... a big gun ... an RPG ... they [shot] ... [and] they look[ed] when they [shot] at my father, [who] didn’t get [hit but] he got [into an] accident [as a result]. [The RPG] was too powerful so ... the cars around [my father went up in the air]. He’s going really fast [at this point when] there’s an explosion, [and] the car [he was in] overturned. He [got] injured and [came] close to dying”.

Here is an example of someone who experienced a threat to himself and his family as a result of his father’s work with the government. His father was killed by the Taliban and he alludes to learning about it and the aftermath.

“So we moved from [city 1] to [city 2] ... and ... the Taliban ... wrote [on] a paper that ‘we will kill your family members.’ They said we will kill your family members. One by one ... after my father [was] killed ... the goal of the Taliban was that, when they ... see us, they will kill us. That was the goal [sic]. We [knew] that ... because I was the son of [some]one [in] the government. My father was in the army ... the Afghan army in the Afghan government ... [and] yes, they followed [my father] everyday [sic] so they [could] find a space for killing him. Like [when] no one was in the way or anything”.

**Theme 3: Traumatic Symptoms to the Exposure to Death and Injury.** Theme 3, though relatively broad, encompasses the variety of symptoms reported by our participants as a result of the exposure to the threat of death or injury or to actual death or injury. Therefore, for this theme, we included the symptoms from three of the four remaining sets of the criteria for PTSD in the DSM-V. The first of these was subset B, which referred to the presence of intrusive symptoms. The second was subset D, which referred to negative alterations in thoughts and emotions. The third was subset E, which referred to the reactivity associated with the exposure to threatened or actual death or injury. Since there were fewer references from the interviews in each of these sets of criteria—two, six, and six, respectively, we thought it more appropriate to include a broader theme that encompassed the symptoms generally. Having said that, the participants described the instances of each type of symptom without prompts and we coded them rather conservatively. We present an example of each below to support the overall theme.

Only two participants spoke directly about symptoms that were intrusive, though some certainly did allude to them—for instance, when referring to the process of displacement or family and friends who had passed. Here is the better of two examples, which came from Participant 6. He described thinking about the contrast between his life here in Canada and the people he knew in Afghanistan—e.g., access to food, healthcare, and exposure to violence and war. He then stated the following, pointing out that when he eats, drinks, or dresses in comfortable clothing, he thinks about the contrast.

“That’s when sometimes it can be stressful. But I control myself. I can control myself. Well, not even that things coming to my mind. Most bits coming. Coming. Keep coming to my mind, but I can keep myself working.”

A total of six of our participants made reference to some sort of alteration in cognition or mood—thought or emotion. Most of these seemed to be in mood and thoughts, but also gaps in memory, which we judged, not without some hesitation, to be a function of the event and not an incidental gap in the recall. There were more poignant examples, such as Participant 4 saying, “I mean to tell you that I’m broken. I can’t do anything.

It's ... very painful for me." We wanted to share a richer example that encompassed the complicated nature of displacement, the background against which any alteration of mood might take place. Here is an example of a change in mood, described by Participant 7 in which they felt guilty for leaving, a sentiment expressed or alluded to by others, but never in an uncomplicated way.

"It's a very similar kind of scene like the Hotel Rwanda. We were ... entering into the hotel ... and they were taking people into the hotel and then they were evacuating people from the hotel. Before getting in ... two Taliban ask[ed] me, they start[ed] speaking Pashto ... They said, 'Why are you leaving?' I said, 'I don't know why I'm leaving. Everyone else is leaving and I'm leaving.' He was a very intelligent person. He said that if [I] was leaving because of [the Taliban], [that] 'we are not very bad. We won't harm you.' At [that] same time, I was thinking that I was feeling very guilty at the time that I'm leaving. I was feeling guilty because of I'm leaving this, this whole mess behind me. I could have done something. Why we are leaving like this. The president left like this and everyone else left like this. We are leaving a country of some 30 to 40 million people in this kind of a mess. I mean it's kind of ... all indicators say that Afghanistan is a humanitarian crisis. We are leaving a country in crisis behind us for these people to run it. I was feeling kind of guilty. I didn't ... I had a bad feeling when he said, "we're not that bad." I knew that, I mean, the things they were doing was not that nice as well ... and during the insurgency I had that kind of feeling and because my idea was that if Afghanistan is suffering, everyone is a victim of the situation, including the Taliban. They are a victim of the situation. Probably a lot of those guys, they joined the insurgency because they didn't have anything else to do ... The humanitarian crisis will continue. People will suffer ... [and] 90+% of people are below the poverty [line]. Every day I'm thinking to go back."

A total of six of our participants made reference to some sort of alteration in arousal and reactivity. The following is a good illustration. This is a man who is now settled in Canada, and during Canada Day, the fireworks triggered a reaction he had to the sound of gunfire:

"When I hear [a] gun ... shot ... I'm going to lay down for 15–20 min. So you know, like the Canada [Day], we had that Canada Day and they used [fireworks]. On that night, I was close to cry[ing] because I remember[ed] that night [in Afghanistan] and that day [when my family member died]."

## 11. Research Question 2: Religious Coping and Displacement

When we analyzed the responses to the questions about the use of Islam in coping with the traumatic elements of displacement as we noted above, there were three themes that seemed to answer this second research question. The first two themes pertained directly to religious coping and they were that (1) the participants religiously coped with Islamic concepts and beliefs and (2) the participants religiously coped with Islamic rituals and practice. The third theme indirectly answered the question of religious coping by providing a more theoretical and less practice-oriented perspective on how the participants coped using their faith in Islam. We called this theme (3) the variations in the place.

**Theme 1. Religious Coping Using Islamic Concepts and Beliefs.** This first theme captures six concepts or beliefs that the participants reported using, of varying frequency, to cope with their experience of displacement. These six concepts are found in Table 1 along with a brief description of what they mean and some textual support.<sup>1</sup> It's important to note that not all the participants referred to using an Islamic concept or belief for coping and each the six concepts or beliefs were reported by one participant—a difference from the second theme below. Moreover, this theme was conceptually related to the third theme, which will become apparent when we discuss that theme. We discuss four of these concepts in the text to support the theme.

**Table 1.** The six Islamic concepts and beliefs used by the participants in our sample along with a brief definition and textual support.

Concept or Belief	Definition	Textual Support
Haqq	The literal meaning of Haqq is truth. There is a special reward for someone who speaks truth to power and it is considered a righteous struggle.	Sunan Abi Dawud: Book 39, Hadith 54
Hijrat	The meaning of Hijra is to emigrate. There is a reward in Islam for those who emigrate when facing oppression.	Quran (16:41)
Hope and Fear of God	There is a theme in in the tradition of Islam where a person’s relation with Allah should be a balance between hope and fear. This is drawn from the versus multiple verses of the Quran and hadith that speak to both hope and fear.	Quran (82:13–14) <a href="#">Sahih Muslim (n.d.):</a> Book 50, Hadith 27
Killing other Muslims	Killing anyone unjustly is a major sin in Islam. However, the Quran message to those who kill Muslims has an added emphasis as it is the most extreme violation of the concept of brother and sisterhood that many texts emphasize.	(4:93) <a href="#">Sahih Muslim (n.d.):</a> Book 1, Hadith 41
Taqdeer	Taqdeer is the concept of the absolute divine decree in Islam.	Quran (57:22–23) <a href="https://sunnah.com/muslim:2653b">https://sunnah.com/muslim:2653b</a> (accessed on 18 November 2022)
Protecting one’s life	Despite the absolute divine decree, Muslims are asked to do what is in their means. Protecting one’s life takes precedence over the other laws of Islam. For example, a Muslim could consume pork if it’s necessary to stay alive.	(2:173)

To begin with the first Islamic concept, *haqq* means truth in Arabic, but in this context the word referred to the moral righteousness of truth-telling from the vantage of Islam; in particular, truth-telling as a matter of principle and without contingency. Participant 3 elaborated on this concept when describing the “difficulty days” during which “one of the worst case situation[s] is that somebody would come and shoot you dead, or they will come and hurt you.” In fact, “they probably would come after your family members.” Yet, when I asked if this was what the participant thought about, he said, “of course, yes.” The justification for “speaking the truth” despite the fear of death or serious injury to himself and/or his family members, he explains, was that “if you speak the truth” in a situation and “expect the risks and the threats” that come along with truth-telling, it’s nonetheless a “good cause to receive threats for.” He goes to explain that his “belief was that speaking the truth” in this way was an expression of *haqq*—the divinely sanctioned duty to speak truth as an exercise of faith. In the case of this paper, it suggests that one way of reconciling the duty or inclination to say something in the face of a dangerous and traumatic experience was to rely on the notion that doing so was divinely sanctioned—that Allah was on his side.

The second concept reported by our participants was discussed by Participant 10 and was *hijrat*, which refers to the idea of emigrating in the face of oppression. Many of our participants discussed a sense of internal conflict about leaving Afghanistan, and, in my cases, their family. In some cases, as we discussed above, the conflict persisted as people worried about their country and members of their family who were still in Afghanistan. Yet in the case of Participant 10, the difficulties associated with leaving were attenuated by the use of this concept. It’s important to note that this participant planned to leave

Afghanistan for other reasons unrelated to displacement and that the fall of Kabul to the Taliban circumvented those plans. Experiencing some negative reaction to his new set of circumstances, he reasons that “when I was in that airplane leaving my country” he thought that a “piece of the puzzle” created by his circumstances “was solved” because “in our religion, whoever does *hijrat* will be in a good place. He will go forward, not backward”.

This concept is conceptually close to that of *taqdeer*, which refers to the divine decree or ordinance. The concept of *taqdeer* serves a similar function in the narrative of Participant 11, who stated that he believed “that Allah wrote my *taqdeer* to come to Canada.” Again, many of our participants discussed the conflicts of leaving, and in this case, the participant stated that he accepted it. “I said [to Allah], I accept. This is the answer . . . Allah gave me this opportunity [and] I respect it”.

Participant 9 discussed the theme in Islam that one’s faith must strike a balance between fear and hope. In this participant’s case, he described a situation when he was trapped in his basement when members of the were Taliban outside. The presence of the Taliban and others situations that might be difficult, such as an earthquake, was read by this participant, at least tentatively, as divinely ordained—hence, in this case, the fear of Allah and the possibility that the experience of having armed members of the Taliban outside might be a sign of divine anger. “If Allah is angry,” the participant said, “then one can expect something like an earthquake to occur.” Yet, fearing for his safety, he felt comfortable asking Allah for help—hence, the hope. “We have Allah to help us [with] anything.” It seems that this experience, characterized by fear of the Taliban and hope that he might escape danger, was easier to cope with because of the tradition in Islam of conceiving of one’s faith in Allah as a point between fear and hope. A similar dialectic is present in some interpretations of Christianity—fear and providence.

**Theme 2. Religious Coping Using Islamic Rituals and Practice.** This second theme captured eight rituals or practices that the participants reported using, again of varying frequency, to cope with their experience of displacement. Among these eight, three were reported by more than one person. The other three were reported by only one participant. These eight are shown in Table 2 along with a brief description and textual support. We present and elaborate on four of the rituals and practices to support this theme.

Unsurprisingly perhaps, the most common ritual was *salah*, which refers to a prayer ritual within Islam. A total of six participants referred to using *salah*. Here is a quote by a man who was forced to remain inside an airport as the Taliban advanced within the city. Inside the airport, while working, the man discussed finding time to pray along with his colleagues.

“Yeah, I have time to pray because we [were] around like 15 people working. So one by one, we [took a] break. We [were] doing our prayers. [The] only thing is the shock, headache, confusion. We are lucky.”. (P6)

Here is another quote by a man who discussed the calming effect of *salah* and its centrality in Islamic practice: “So, I told you before that in every difficulty we pray [to] Allah and we pray for our family and our country and, therefore, it gives us hope . . . and [makes us] calm [and] relax[ed].” (P4).

Three participants referred to going to a *masjid* to cope with displacement. There were obviously restrictions—self-imposed and external—on their mobility which reasonably limited this particular practice. Here is one participant who referred to going to *masjid* despite the potential danger: “Yeah. I went to the Masjid for pray[er]. The *masjid* was near . . . [but] it doesn’t matter if the *masjid* [is] near or far. Now [in Canada] the *masjid* is far.” (P9). Another participant also discussed going to the *masjid*, but discussed the manner in which going to the *masjid* was, in part, intended to convey piety to the Taliban.

It’s important to note that this participant later discussed going to the *masjid* for the sole sake of practice—indicating to us that there might have been two functions for attending the *masjid*.

**Table 2.** The six Islamic rituals and practices used by the participants in our sample along with a brief definition and textual support.

Ritual or Practice	Definition	Textual Support
Dua	Dua is a supplication to God. As it is not a formal ritual, Dua can be performed at any time. While performing Dua, Muslims ask for their needs to be met.	Quran (2:186) Sunan Abi Dawud: Book 8, Hadith 64
Salah	Salah is a formal ritual prayer that is often used to reference the five daily prayers enjoined upon adult Muslims. However, Muslims can choose to pray outside of those five times. The Salah has physical movements and in every posture there are particular recital words.	Quran (17:78) <a href="#">Sahih Muslim (n.d.):</a> Book 5, Hadith 355
Zikr	The term Zikr is a reference to the remembrance of God. It can be an umbrella term that could include the recitation of the Quran, prayer, and Dua. It could also refer more specifically to reciting any phrase that praises God and at any place or time. Remembering God is said in the Quran to be a source of finding peace.	Quran (3:191) Quran (13:28)
Reading the Quran	The Quran is the sacred scripture of Islam. Muslims believe it contains the infallible word of God as revealed to Muhammad. There is great reward in reading the Quran.	Jami' at-Tirmidhi: Book 45, Hadith 36
Attending Masjid	Five daily prayers are performed in congregation at the Masjid. There is a special reward for praying the five daily prayers at the Masjid or in congregation as opposed to praying it alone.	<a href="#">Sahih Muslim (n.d.):</a> Book 5, Hadith 310
Funeral Rites	To take care of the funeral rites and rituals of a Muslim is a right they have toward the Muslim community they live in.	<a href="#">Sahih Muslim (n.d.):</a> Book 39, Hadith 6
Khayraat	A Pastho word that translates into charity. In the context of this research, charity is given in the name of a loved one who has passed away in hopes they receive the rewards.	Sunan Abi Dawud: Book 9, Hadith 126
Khatm	There is also textual evidence of a prayer after the completion of a Quran recital being accepted. Reading the entire Quran in a group setting and hoping the rewards are passed to the deceased is very common. This takes place in the Afghan tradition after someone has passed away.	Imam al-Darimi narrates that, "Anas ibn Malik, when he would complete a reading of the Qu'ran, would gather his family and his children and supplicate for them." [al-Darimi, al-Sunan] ( <a href="#">Misra 2011</a> ) <a href="https://seekersguidance.org/answers/hanafi-fiqh/are-supplications-made-after-the-entire-quran-has-been-recited-considered-accepted-by-allah/">https://seekersguidance.org/answers/hanafi-fiqh/are-supplications-made-after-the-entire-quran-has-been-recited-considered-accepted-by-allah/</a> (accessed on 18 November 2022)

Three participants discussed using *Dua*, which refers to a form of supplication before *Allah* wherein the faithful request help. Here is a quote from Participant 5, who discusses *Dua* when thinking of a memory:

“I still remember that night . . . I did my ablution. I did my ablution and after that I went for prayer and I did two *raka'a* of *nafl* and I pray[ed] for my brother and [for all] Muslims [that] they [might] find a good way to find *Jannah*. After [doing that], I [felt] well.”

**Theme 3. Mystical Expressions of Religious Coping.** Of the 11 participants, nine spoke about religious coping in a way that might be considered “popular”—i.e., the concepts, beliefs, rituals, and practices they relied on were common to many or even all Muslims. There were two participants who discussed religious coping in ways that could be considered “mystical. By definition, this was unpopular or not common. These two participants gave some very interesting responses to our questions. Here is a description by Participant 10 of the way that he used a more mystical interpretation of Islam (influenced by *sufism*) to understand what happened to him leading up to and following his displacement. The quote is rather long but necessary to convey the depth of this person’s insights.

“When you want something [and] reach for that [thing], [sometimes] in order to have that [thing] you [have to lose] it psychologically. You *should* [lose] that [thing] psychologically. So for example . . . you want this bottle of water. You could reach [for] this bottle of water. You have [a] desire and you have that longing in your heart. ‘Oh I’m so thirsty. I want this water.’ The moment you lose that belonging, that attachment to this bottle of water, that is the moment you get that water. When I was [in the process of displacement], it came [on] suddenly . . . [I] psychologically lost that desire for being that person in that moment . . . So, when I was in my hometown, when I lost everything. It was like from a spiritual point of view, I lost the desire for my dreams psychologically. I didn’t want to have to wish anymore, to have any dream anymore to pursue . . . in order that my shoulder could be lighter and I could [feel a sense of] relief. [I] intentionally let go of those dreams, as much as [I] can be intentional in a moment like [that]. I intentionally set apart all of those dreams and wishes. In that exact moment I got everything.”

This participant’s dreams and wishes pertained to studying abroad and working abroad. When the Taliban took control of his city and ultimately the country, those dreams became improbable. This improbability caused him distress (though perhaps not exactly traumatic) and to lighten the load on his shoulders, as he said, he let go of the ideas he had in his head and which he pursued for most of his life. Yet the moment he let them go, he found himself in Canada, and with the possibility of pursuing an education and work there. While there are no direct textual references from the *Quran* or *hadith* that connect with what this participant is saying, there are connections to *sufi* writing and other mystical traditions.

Here is one final quote from the second participant in this theme—Participant 7—when asked about the language he used in response to our questions about Islam.

“I will answer [with] a memory of my childhood. Maybe you will get the answer [that way]. I was in fourth grade. [There was] this kind woman, who was our neighbor. She taught us . . . the subject of ethics. She said one sentence and that one sentence like change[d] my life until I graduated from high school. She said that in order to know God you should know yourself first. She demanded that you should first discover yourself and then go and pursue God. I noticed that my other classmates were . . . caught in procedures . . . rituals . . . they were so busy with practicing the procedures of rituals rather than the understanding what is the core of it [all]. What’s deep under these practices. This sentence helped me throughout my life. I start[ed] this journey to understand myself [and] who I am [thereafter]. That’s why I use [different languages].”

The reader might easily see that the religious form on which this participant relied in life stands in contrast with the popular form of *Islam* practiced by most of our sample.

## 12. Discussion and Implications

This paper attempted to discuss the experiences of displacement among Afghans following the withdrawal of the US in August 2021 by using the qualitative data from interviews with 11 male Afghans who recently sought refuge in Canada. More specifically, we sought to understand how trauma manifested in the narratives of the 11 men we spoke to as they came to terms with the major shift in political power in their native Afghanistan. The interviews suggested that the men had traumatic memories of death of others and traumatic memories of threat of injury and death of themselves as the two major forms of traumatic experience. In addition, several men noted symptoms associated with post-traumatic stress. We also sought to understand how these 11 men leaned on their Islamic faith to cope with their traumatic experience of displacement. Here we found that there were two main types of coping: religious coping using Islamic beliefs and concepts and religious coping using Islamic rituals and practice. A third theme we discussed was the way in which two participants leaned on a mystical interpretation of Islam.

Our study's findings seemed to support what others found regarding trauma among the refugee population—for instance, that refugee populations tend to have high rates of post-traumatic stress (Ahmad et al. 2020; Henkelmann et al. 2020) and that Afghan refugees, in particular, have shown high rates of PTSD symptoms (e.g., Ahmad et al. 2020; Bronstein et al. 2012; Malekzai et al. 1996; Yaser et al. 2016). We also found support for some of the broad strokes in the religious coping literature, namely that religious coping can have a positive effect on traumatic symptoms and experiences (Abu-Raiya and Pargament 2015), but also that Muslim refugees rely on religious coping (Hasan et al. 2018).

We hope to complement these studies with a qualitative dimension that provides texture to the traumatic experiences of displacement and the resulting symptoms as well as the nature of religious coping among Afghans who sought refuge in Canada. Although this is an exploratory study, we comment generally on a few potential implications.

## 13. Implications for Policy and Practice

The participants expressed diverse forms of religious coping in the face of extreme adversity, from their time living in Afghanistan, during the August 2021 Taliban takeover of the government, and upon resettlement in Canada. Understanding their diverse forms of religious coping in a wide range of circumstances can tell us a lot about the nature of humans to persevere in difficult (and in this context, terrible) situations. More practically, these expressions of religious coping—engaging in *salah*, attending *masjid*, using *dua*, etc.—could make a small contribution to the development of practices and policy guidelines that reflect and respond to the realities of the refugees' situations and have the potential to positively impact their everyday lives. For example, the practitioners working with refugee populations should consider these diverse forms of religious coping and religion-sensitive approaches when engaging in refugee support.

The data also underscore how religious coping can be used as a protective factor and a means to address traumatic stress. There are minimal data on the relationship between religious coping and refugee wellbeing. The present study adds to the growing body of literature showing the importance of religion and spirituality as a coping mechanism and a resource for refugees. As the participants in this study suggested, refugee populations might turn to religion to deal with hardships, losses, and changing life circumstances. Nevertheless, the relationship between religion coping and extreme life challenges, such as trauma, is complex and intersects with a range of different social, structural, and individual variables. Therefore, practitioners and policymakers should stay attuned to the singularly unique experiences of refugees when assessing and designing interventions to support these populations.

Finally, the data point to the importance of listening to the participants' stories and experiences of flight and resettlement. Through the telling of these challenging stories—evoking memories laced with sadness, loss, stress, violence, and trauma—the participants were empowered by a personal decision to participate, speak out, and share their experiences.

#### 14. Implications for Future Research

It is notable that, although we did not recruit the participants based on their reported exposure to trauma or the presence of post-traumatic symptoms per se, the entire sample reported a traumatic experience—that is, exposure to actual or threatened death or injury. Furthermore, more than half (six out of 11 participants) endorsed post-traumatic symptomatology in some form, especially physiological arousal and reactivity, without any prompting. The extent to which post-traumatic symptomatology would have been demonstrated in our sample had we investigated this in psychodiagnostics interviews is unclear. A future study might consider addressing this point.

However, the results provide a qualitative snap-shot of the presence of post-traumatic symptoms in this population. It is not clear whether the predominance of physiological arousal and reactivity in response to trauma—as opposed to the other categories of symptoms such as intrusive or avoidance symptoms—was an artefact of the interview situation or a true finding. However, this may be worth further investigation in clinical studies. Future research may also want to consider a longitudinal research design to better identify the changes over time in religious coping and perhaps other protective factors in a population of refugees.

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#### Note

<sup>1</sup> Providing all textual support seemed neither necessary nor possible given the space and focus of the journal.

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