



Religious Help-Seeking in Survivors of Intimate Partner Violence

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Abstract

Purpose Help-seeking in survivors of intimate partner violence (IPV) is a thoughtful and iterative process that consists of defining the problem, deciding to seek help, and selecting a source of support. Religion plays an important role in the process of help-seeking for IPV survivors, but there is little quantitative evidence demonstrating this role. This study filled that gap.

Methods We gathered data from 486 Christian, Muslim, and Jewish individuals who had experienced significant relationship conflict.

Results Results revealed 33.9% of individuals experiencing relationship conflict sought help from people in their religious communities (e.g., leaders, community members and elders), with 82.6% rating their experiences as helpful and 23.6% rating them as harmful. Nature of the relationship conflict (e.g., fear, stress, and sources of stress) was an important factor in prevalence, helpfulness, and harmfulness of religious help-seeking. More specifically, 39.1% of the sample reported experiencing fear in their relationship, indicating presence of abuse, and were more likely to seek help from people in their religious communities, and rate them as harmful. Religious group played a role in religious help-seeking: those in the Christian group sought religious help more often than the Muslim and Jewish groups. However, the difference between the Christian and Jewish groups was due to religiosity; those who self-identified as more religious were more likely to seek religious sources of help.

Conclusions This study provides empirical evidence for the prevalence and impact of religious help-seeking for individuals experiencing relationship conflict in a religiously diverse community sample.

Keywords Intimate partner violence · Religion · Help-seeking · Helpfulness · Harmfulness

For survivors of intimate partner violence (IPV), experiences with potential sources of support have a strong impact on the iterative process of deciding whether and how to seek help (e.g. Goodman et al., 2003; Liang et al., 2005). Research has shown that religion can be an important source of support to survivors in this process, but there is much more to learn about how it is used, and the ways that it helps and harms. To build on the extant research, this study aims to describe the nature of religious help-seeking in a sample of individuals experiencing relationship conflict. We explore the self-reported frequency, helpfulness, and harmfulness

of religious help-seeking, broadly defined, with the aim of informing religious communities' response to IPV. Before describing this study, we review the scholarship on organized religion and help-seeking for IPV.

Literature Review

The Role of Organized Religion in Survivors' of IPV Help-Seeking

For many, religious institutions fulfill fundamental needs, including connectedness to community and a higher being, and a sense of purpose in life. As a result, during times of difficulty, people may turn toward religion as a source of help more readily than other institutions (Pargament, 2011). Intimate relationships are particularly intertwined with religious institutions: Religious doctrine guides actions in relationships, religious leaders play the role of marriage

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officiants and relationship counselors, and couples may be closely acquainted with religious community members. Perhaps because of these connections, one study showed that after spiritual concerns, marital concerns were the most common reasons congregants sought support from religious leaders (Ali et al., 2005). It is therefore unsurprising that when these concerns extend to the level of IPV, survivors may lean on religious institutions for support. Paradoxically, the literature is clear that these efforts to gain support are not always fruitful and may even increase help seekers' distress. To maximize the likelihood of effective support, more needs to be understood about these interactions.

Theoretical frameworks of help-seeking among survivors of IPV underscore the idea that the process is iterative, with sociocultural influences, such as religion, making an impact in a variety of ways (Liang et al., 2005). Kennedy and colleagues (2012) highlight the role of accumulated experiences with sources of help. Further, they note that social location, including religious group, impacts the entire help attainment process: the individual's experience of violence, perceived availability of help, the effectiveness of help and resulting mental health outcomes. Broadening beyond formal help sources, Goodman and colleagues (2003) established categories of strategies individuals utilize in the aftermath of abuse including private strategies (those carried out in isolation), informal network strategies (family and friends), and public strategies (formal institutions and public agencies). Religious institutions intersect with each of these categories: Survivors may seek support through public strategies by directly seeking help from clergy and other formal community leaders (Rizo & Macy, 2011; Rotunda et al., 2004), from the informal network within the religious community, and through private strategies such as prayer and reflection. Because all these strategies are influenced by religious institutions, whether directly through agents of those institutions or indirectly through values and teachings, they all need to be included in explorations of religious help-seeking.

The Frequency and Nature of Religious Help-Seeking

Survivors may seek help directly from religious leaders who can offer support through listening, believing, validation, offering advice, connecting to resources and advocating for survivors (Neergaard et al., 2007). However, the research on the frequency of survivors of IPV seeking help from religious leaders varies and is limited in a number of specific ways. A study of 476 Christian survivors of IPV seeking assistance from domestic violence centers found 25% of participants contacted a religious leader for help (Neergaard et al., 2007). Since this sample consisted of help-seeking survivors, this rate may be higher than the general population

of IPV survivors because individuals who seek help from one source are more likely to seek help from other sources (Cattaneo et al., 2007). Data from the 1999 Canadian General Social Survey found that 11.5% of 922 female survivors talked to a religious or spiritual advisor (Barrett & Pierre, 2011). A more recent study of 505 Black women in the U.S. who experienced IPV reported that 6.8% sought help from clergy (Lacey et al., 2021). While these are more accurate representation of religious leader help-seeking in IPV survivors generally, they are limited in their definition of abuse as only physical and sexual abuse, and low religiosity of the sample. In sum, the literature on implies religious leaders can be a source of support for survivors of IPV, but due to methodological limitations, it is difficult to quantify prevalence of this support.

Beyond religious leaders, survivors may rely on other religious community leaders (e.g. clergy spouses, lay leaders, youth leaders, etc.), community elders and community members for support (Akinsulure-Smith et al., 2013; Choi et al., 2016). One study found that in a sample of 76 Jewish survivors of IPV, 41% received resources from Jewish community organizations including food, shelter/housing, financial assistance, and counseling (Cares & Cusick, 2012). Other studies have identified sense of belonging as an important contribution from religious communities for survivors of IPV (Anderson et al., 2012; Giesbrecht & Sevcik, 2000). In sum, religious communities offer many kinds of support to survivors of IPV, but it is unclear how often survivors of IPV seek out these sources rather than or in addition to religious leaders.

Private faith-based practices are another potential avenue of religious support for survivors of IPV. While these strategies do not require seeking support from an institution directly, because they are taught, encouraged, and often practiced (e.g., congregational prayers, Bible study) within the religious institution, they are another means for institutions to interact with survivors of IPV. Based on qualitative literature, survivors of IPV engage in such practices as coping strategies, including reading religious texts, prayer, repeating religious phrases (*dhikr*), and seeking help and guidance from God (Hassouneh-Phillips, 2003; Nash & Hesterberg, 2009; Oyewuwo, 2020; Yick, 2008), but the frequency of their utilization remains unclear. The effectiveness of these strategies has also received limited attention – we turn to this topic next.

The Impact of Religious Help-Seeking

While religion has the potential to help survivors of IPV in many ways, the evidence is mixed on whether this potential is actualized. Much of the literature highlights the positive impact of religious help-seeking on survivors of IPV.

Neergaard et al. (2007) found that 79% of IPV survivors who confided in religious leaders perceived them as helpful. Support provided by the religious community may act as a protective factor for the mental health of survivors, as one study found that a higher sense of belonging was associated with reduced depression in a sample of women seeking help for IPV (Suvak et al., 2013). A qualitative study found that spiritual well-being reduced the adverse impact of IPV on psychological distress and parental stress in low-income African American survivors of IPV (Mitchell et al., 2006). Spiritual practices (e.g. Bible reading and prayer) have been found to assist survivors of IPV in gaining the self-efficacy to make changes and heal (Drumm et al., 2014). Taken together, these findings suggest religious help-seeking, from both people and practices, can have positive impacts on survivors of IPV.

On the other hand, much research also shows the negative impact of religion, primarily in the form of religious leaders, on survivors of IPV. One study of Muslim women experiencing IPV in Australia articulated harmful responses such as advice to be patient and tolerate the abuse, or accept the abuse as a part of their fate (Ghafournia, 2017). In a qualitative study of Jewish Orthodox survivors, all participants agreed the rabbi could play a significant role in situations of IPV in their congregation, but they generally described that role as negative, ranging from untrained, helpless and ineffective, to unsupportive, not understanding and in some cases, blaming the survivor or advising them to keep silent (Ringel & Bina, 2007). Similarly, Gezinski et al. (2019) found that religious leaders lacked training to respond to cases of IPV in a trauma-informed manner and were generally unhelpful to survivors of IPV. Choi, Elkins and Disney (2016) highlighted components of religious communities that have an impact on survivors of IPV including lack of clergy training, and community-level beliefs such as stigma of mental illness and stigma of divorce. Altogether, the literature on religious help-seeking in survivors of IPV demonstrates both the possibility of help and harm for survivors of IPV, but there is a need to know more about the prevalence of these impacts, and how they relate to the breadth of religious help-seeking strategies.

Current Study

The literature supports the idea that religious institutions play an important role in supporting individuals experiencing IPV; however, this role appears to be complex, with both the potential for facilitating and inhibiting healing. This paradox may be explained by the complex nature of religious institutions, communities, and individuals, but our current understanding of religious help for IPV is still vague. In

order to improve the encounters between help seekers and help providers and minimize harm to religious communities, we need to better understand the process of religious help-seeking. To that end, we explored the following questions:

- RQ1: What is the prevalence of religious help-seeking in people experiencing relationship conflict? Does this prevalence vary by (a) type of help-seeking and (b) nature of conflict?
- RQ2: Above and beyond religiosity and nature of relationship conflict, does religious group predict caused them significant distress. Houstonprevalence of religious help-seeking?
- RQ3: How commonly do participants find religious help-seeking strategies to be helpful or harmful? Does perceived helpfulness or harmfulness of religious help-seeking differ by (a) religious group and (b) nature of conflict?

The current study explores these questions in a way that addresses gaps in the literature that have limited the understanding of religious help-seeking to date. First, we surveyed a broad sample of individuals experiencing relationship conflict, rather than those self-identifying as experiencing IPV, to capture individuals who experience abuse but may not identify it as such. Next, the present study aims to expand our definition of religious help-seeking to multiple sources in religious communities, beyond the typical focus on clergy. Finally, we incorporate an added layer of complexity in religious beliefs and practices by including individuals from different religious groups and varying levels of religiosity. Much of the literature is based on data from Christian communities, neglecting the wider population of religious individuals. In response to this gap, we included participants who endorsed membership in any of the three most common religions in the United States: Christianity, Judaism, and Islam.

Method

Participants and Procedure

All procedures for the present study were approved by the Institutional Review Board at George Mason University. Participants were recruited from Prolific, an online crowd-sourcing marketplace that has been shown to yield high-quality data (Peer et al., 2017). Prolific members who identified as Christian, Jewish, or Muslim¹ were

¹ The genesis of the current project came from a panel conversation hosted by a domestic violence organization (API-GBV) on religious leaders' role in domestic violence prevention and intervention. The

invited to participate in the study and if they expressed interest, they were taken to a Qualtrics survey in which they were provided greater detail. Participants who consented were directed to an online survey, where they completed all measures, and were compensated with a small financial incentive upon completion. The total amount of time needed to complete the online survey was no more than 10 min.

Of 732 individuals who consented to participate in the study, 242 did not meet eligibility criteria (131 had never been in a committed relationship and 111 participants had never experienced relationship conflict that caused them significant distress). Of the 490 eligible participants, responses from 4 participants were removed before data analysis due to invalid data, as defined by inconsistent patterns of responses or majority responses missing. The present study thus includes 486 participants.

Participants (see Table 1) identified as Christian ($N=172$), Jewish ($N=189$) and Muslim ($N=125$). The majority (60.7%) of the participants were female and ranged widely in age ($M=31.6$ years; $SD=12.0$). The majority of sample identified as White (60.9%), but the racial grouping was significantly different by religious group ($p<0.01$), with majority of the Christian and Jewish groups identifying as White (62.2% and 87.3%, respectively) and the Muslim group most commonly identifying as Asian (40%). Most of the sample was highly educated, with close to half of the participants having completed a Bachelor's or at least some graduate work (46.9%).

Measures

Religiosity We measured religiosity to account for the complexity of religious beliefs and practices beyond religious group identification. The Centrality of Religiosity Scale captures 5 domains of religiosity: public practice, private practice, religious experience, ideology and intellectual, and its validity has been supported in student and international religious samples (Huber & Huber, 2012). Participants are presented a statement for each domain of religiosity, and they respond on a 5-point Likert scale, producing a mean score. The Centrality of Religiosity Scale had strong internal consistency in this sample ($\alpha=0.88$).

Nature of Relationship Conflict Because of our eligibility criteria, all participants endorsed relationship conflict that

caused them significant distress. Houston-Kolmi We further assessed the nature of relationship conflict in two ways. First, to assess for abuse, we implemented a one-question screen developed by Signorelli et al. (2022) in which participants were asked whether they ever felt frightened by what their partner said or did (yes/no). In three separate samples ranging from 1,246 to 2,581 participants, this question was found to have reasonable specificity (ranging from 82.0 to 92.6%) when compared to a more rigorous measure of abuse. Accordingly, we used this screen to indicate the presence of abuse in the relationship conflict.

Second, we created a set of questions to capture the source and severity of the conflict. We asked how stressed participants felt about their relationship with this person at the time they sought support on a 5-point Likert scale from 1 (*not at all*) to 5 (*extremely*), with respect to: physical wellbeing, emotional wellbeing, safety of their loved ones and financial wellbeing. Finally, participants were given the option to qualitatively describe their relationship conflict.

Help-Seeking Strategies To assess the use of specific help-seeking strategies and their impact, we adapted the IPV Strategies Index (IPVSI; Goodman et al., 2003). In its original form, the IPVSI includes 39 strategies across six categories (formal network, legal, safety planning, informal network, resistance, and placating) that survivors use to respond to violence in their relationships and assesses the perceived helpfulness of these strategies. We modified the index to fit the focus of the study in several ways. We removed the individual strategies that did not relate to seeking help (e.g., resistance and placating categories), we collapsed legal and police help-seeking strategies to reduce participant burden ("Sought help from police and/or other legal aid"), and we expanded the list of religious strategies beyond the single item in the original ("tried to get help from a clergy"). After mining the literature and consulting with Jewish, Christian, and Muslim religious leaders, we added 4 strategies: "tried to get help from religious community leader (a leader in your faith community other than the religious leader)," "tried to get help from community elder/member (someone part of the same community as you but not in formal leadership role)," "tried to get help from prayer," and "tried to get help from religious texts." We categorized the list of religious help-seeking strategies as "interpersonal strategies" in which participants sought help from another person from the religious community (i.e., religious leader, community leader, community member/elder) and "practice strategies" in which participants sought help from some religious practices (i.e., prayer, reading sacred texts; see Table 2). We calculated prevalence by strategy (percent of participants who

lead author continued these conversations with Christian, Jewish, and Muslim religious leaders, DV advocates, and community members to inform the study questions and design. While it is beyond the scope of this paper to describe the development and progress of these community-based relationships, it does contribute to the decision to focus specifically on these three religious groups.

Table 1 Demographic Statistics by Religious Group

Variable	Total Sample (<i>N</i> = 486)	Christian (<i>n</i> = 172)	Jewish (<i>n</i> = 189)	Muslim (<i>n</i> = 125)	<i>F</i> or χ^2
Age^a	31.6/29 (19/21)	31.0/31.0 (32/34)	33.7/28.0 (21)	29.1/25 (19)	14.82***
Race					409.50***
White	296 (60.9%)	107 (62.2%)	165 (87.3%)	24 (19.2%)	
Hispanic/Latinx	23 (4.7%)	15 (8.7%)	5 (2.6%)	3 (2.4%)	
Black/African American	59 (12.1%)	38 (22.1%)	1 (0.5%)	20 (16.0%)	
Native Am.	2 (0.4%)	1 (0.6%)	1 (0.5%)	1 (0.8%)	
Asian	65 (13.4%)	10 (5.8%)	5 (2.6%)	50 (40%)	
Middle Eastern/North African	34 (7.0%)	0 (0%)	8 (4.2%)	26 (20.8%)	
Native Hawaiian/Pacific Islander	2 (0.4%)	1 (0.6%)	0 (0%)	1 (0.8%)	
Not Listed	5 (1.0%)	1 (0.6%)	4 (2.1%)	0 (0%)	
Gender					58.34***
Genderqueer	3 (0.6%)	0 (0.0%)	3 (1.6%)	0 (0.0%)	
Man	176 (36.2%)	81 (47.1%)	47 (24.9%)	48 (38.4%)	
Non-binary	8 (1.6%)	0 (0%)	8 (4.2%)	0 (0.0%)	
Transgender	2 (0.4%)	0 (0.0%)	2 (1.1%)	0 (0.0%)	
Woman	295 (60.7%)	91 (52.9%)	128 (67.7%)	76 (60.8%)	
Not Listed	2 (0.4%)	0 (0.0%)	1 (0.5%)	1 (0.8%)	
Education					48.63***
Some High School	4 (0.8%)	3 (1.7%)	0 (0%)	1 (1.0%)	
Completed High School/GED	44 (9.1%)	16 (12.0%)	13 (8.5%)	15 (14.6%)	
Some College	84 (17.3%)	26 (19.5%)	36 (23.5%)	22 (21.4%)	
Technical Degree/Certificate	1 (0.2%)	0 (0.0%)	1 (0.7%)	0 (0%)	
Associate degree	25 (5.1%)	10 (7.5%)	4 (2.6%)	11 (10.7%)	
Bachelor's Degree	128 (26.3%)	40 (30.1%)	60 (39.2%)	28 (27.2%)	
Some Graduate Work	17 (3.5%)	2 (1.5%)	10 (6.5%)	5 (4.9%)	
Master's Degree	71 (14.6%)	34 (25.6%)	21 (13.7%)	16 (15.5%)	
Doctoral Degree	12 (2.5%)	2 (1.5%)	5 (3.3%)	5 (4.9%)	
Other	3 (0.6%)	0 (0.0%)	3 (2.0%)	0 (0.0%)	
Relationship Status					36.04***
Single	103 (21.2%)	32 (18.6%)	39 (20.6%)	32 (25.6%)	
Dating	169 (34.8%)	48 (27.9%)	78 (41.3%)	43 (34.4%)	
Married	195 (40.1%)	86 (50.0%)	64 (33.9%)	45 (36.0%)	
Separated	5 (1.0%)	2 (1.2%)	2 (1.1%)	1 (0.8%)	
Divorced	12 (2.5%)	4 (2.3%)	4 (2.1%)	4 (3.2%)	
Widowed	2 (0.4%)	0 (0.0%)	2 (1.1%)	0 (0.0%)	
Religiosity	3.29 (0.97) ^b	3.67 (0.76) ^b	2.68 (0.93) ^b	3.68 (0.85) ^b	78.648**
Non-religious	61 (12.6%)	7 (4.1%)	49 (25.9%)	5 (4.0%)	
Religious	268 (55.1%)	89 (51.7%)	117 (61.9%)	62 (49.6%)	
Highly Religious	157 (32.3%)	76 (44.2%)	23 (12.2%)	58 (46.4%)	

Note. Any variable without a superscript includes the number (%). a mean/median (mode); b mean (SD); * $p < 0.05$. ** $p < 0.01$, *** $p < 0.001$

endorsed each item) and category (percent of participants who endorsed any item within the category).

The IPVSI assessed the perceived helpfulness of each strategy with a single Likert scale. In the current study, we expanded this to assess both helpfulness and harmfulness of help-seeking strategies. Participants rated the helpfulness of each strategy in dealing with the conflict on a 5-point Likert scale (1-not at all, 5-extremely). They were then given the option to qualitatively describe how this strategy was helpful to them. Next, they rated the harmfulness of

this strategy in dealing with the conflict on a 5-point Likert scale (1-not at all, 5-extremely). They were then given the option to qualitatively describe how this strategy was harmful to them. Consistent with the IPVSI, a strategy was categorized as helpful or harmful if the participant endorsed 2 (slightly), 3 (moderately), 4 (very) or 5 (extremely) as a response choice.

Table 2 Prevalence and Perceived Helpfulness and Harmfulness of Strategies to Deal with Relationship Conflict

Strategy	Prevalence (%)	Percent Helpful	Helpfulness <i>M(SD)</i>	Percent harmful	Harmfulness <i>M(SD)</i>
Any Help-Seeking	89.0	94.1	3.06(1.02)	27.0	1.25(0.53)
Interpersonal Religious Help-Seeking	33.9	82.6	2.71(0.09)	23.6	1.20(0.58)
Help from a religious leader	17.1	83.8	2.95(1.20)	21.3	1.38(0.86)
Help from a religious community leader	10.4	80.0	2.90(1.27)	18.0	1.34(0.80)
Help from a community member/community elder	19.3	79.6	2.62(1.19)	25.8	1.51(0.98)
Religious Practice Help-Seeking	57.8	89.8	3.22(1.23)	7.3	1.13(0.56)
Turned to prayer	52.6	86.8	3.17(1.30)	6.0	1.14(0.63)
Used wisdom from a religious/sacred text	34.1	92.0	3.51(1.23)	4.9	1.11(0.55)
Secular Help-Seeking	84.9	93.5	3.14(1.07)	24.3	1.24(0.55)
Formal Help-Seeking	49.5	85.4	2.85(1.17)	22.7	1.30(0.72)
Tried to get help from employer or coworker	17.4	85.5	2.55(0.93)	18.1	1.33(0.81)
Talked to a doctor or nurse	13.0	83.9	3.16(1.32)	12.9	1.24(0.78)
Sought mental health or substance use help	34.7	82.6	3.06(1.33)	21.1	1.39(0.87)
Talked to someone at a IPV program, shelter or hotline	3.6	82.4	2.88(1.32)	11.8	1.24(0.75)
Sought help from police and/or other legal aid	4.0	68.4	2.63(1.46)	57.9	2.21(1.40)
Informal Help-Seeking	77.2	94.2	3.33(1.10)	17.5	1.23(0.59)
Sought help from friends	71.6	92.2	3.30(1.14)	12.6	1.19(0.56)
Sought help from family	36.1	88.1	3.41(1.34)	18.5	1.37(0.86)

Table 3 Nature of Conflict across Religious Groups

Variable	Total Sample <i>N</i> = 486	Christian <i>N</i> = 172	Jewish <i>N</i> = 189	Muslim <i>N</i> = 125	<i>F</i> or χ^2
Stress	4.27 (0.04)	4.15 (0.07)	4.42 (0.06)	4.19 (0.08)	4.758**
Fear ^a					0.032
Yes	190 (39.1%)	68 (39.5%)	73 (38.6%)	49 (39.2%)	
No	296 (60.9%)	104 (60.5%)	116 (61.4%)	76 (60.8%)	
Physical Wellbeing	2.38 (0.06)	2.46 (1.34)	2.32 (1.32)	2.35 (1.45)	0.578
Emotional Wellbeing	3.81 (0.05)	3.79 (1.15)	3.94 (1.13)	3.62 (1.26)	2.873
Safety	1.87 (0.05)	2.04 (1.23)	1.73 (1.17)	1.87 (1.30)	2.881
Financial Wellbeing	2.24 (0.06)	2.29 (1.30)	2.21 (1.48)	2.23 (1.42)	0.108

^a number (%)* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$

Analysis Plan

We calculated frequencies to answer our questions regarding prevalence of help-seeking strategies and perceived helpfulness and harmfulness (RQ1,3). We conducted paired samples t-tests and repeated measures GLM analyses to compare the prevalence rates of each type of help-seeking (RQ1a), chi-square tests of independence to examine the relationships among dichotomous variables (RQ1a,1b, 3a, 3b) and independent sample t-tests to examine relationships among continuous and dichotomous variables (RQ1b, 3b). We conducted logistic regressions to examine the impact of religious group on interpersonal religious help-seeking (RQ2).

Results

Sample Description

Based on the eligibility criteria, all participants in this sample were experiencing relationship conflict that caused significant distress. As is detailed in Table 3, participants on average were extremely stressed about this relationship conflict ($M = 4.27$, $SD = 0.04$). In terms of the sources of that stress, emotional wellbeing was the most severe and most frequent (95.5% reported at least some stress), followed by physical wellbeing (60.9%), financial wellbeing (54.5%), and safety of loved ones (41.4%). In open-ended responses, participants detailed a wide spectrum of relationship conflicts ranging from minor conflicts about decision-making, to infidelity, to emotional, physical, and sexual abuse and coercive control². The abuse screening question revealed

² A separate manuscript is in preparation delving into the qualitative analysis of these open-ended responses.

that 39.1% of the sample reported having ever been frightened by something their partner said or did, suggesting possible abuse. As expected, participants who reported fear endorsed higher stress ($M=4.49, SD=0.75$) than the participants who were not afraid ($M=4.12, SD=0.93$); $t(460.917)=4.910, p<0.001$). Religious group had a significant effect on reported stress, with the Jewish group reporting the highest score, but nature of conflict did not vary across religious groups (see Table 3).

Prevalence of Help-Seeking Strategies

In this sample of individuals experiencing varying levels of relationship conflict, the vast majority engaged in help-seeking of some type (89%; see Table 2). The most common type of help-seeking was from friends and family (77.2%), followed by religious practices (e.g., prayer, religious texts; 57.8%) and formal secular sources (49.5%). Individuals experiencing relationship conflict were less likely to seek help from interpersonal religious sources (e.g., religious leaders, community members) than secular sources, with only one-third (33.9%) of the sample doing so ($t(476)=19.359, p<0.001$). These findings demonstrate greater prevalence of religious help-seeking than the IPVSI sample in which 26% of participants sought help from a clergy member (Goodman et al., 2003). Within the religious help-seeking category, participants were significantly more likely to turn to religious practice (57.8%; e.g., prayer, religious texts) than interpersonal religious sources (33.9%; $t(480)=9.66, p<0.001$) for help. When we compared the prevalence of different interpersonal sources using a repeated measures GLM analysis, Mauchly's Test of Sphericity indicated that the assumption of sphericity had been violated, $\chi^2(2)=0.804, p<0.001$, leading us to use a Huynh-Feldt correction. Type of interpersonal religious help had a statistically significant effect on endorsement of help-seeking, $F(1.68, 805.22)=10.113, p<0.001$, such that more participants sought help from religious leaders (17.1%) and community elders or members (19.3%) than community leaders (10.4%).

Prevalence by Nature of Conflict Participants who felt frightened in their relationship were more likely to seek help from interpersonal religious sources (41%) than participants who did not feel frightened (29.4%; see Table 4). This difference persisted in use of religious practices (66% vs. 52.6%). On the other hand, secular sources of support were not significantly different in endorsement by those who were frightened compared to those who were not frightened (88.8% vs. 82.4%). These findings suggest that the presence of fear, and thus potentially abuse, in a relationship may be an important factor

Table 4 Bivariate analyses for Relationships Between Nature of Conflict and Prevalence of Help-Seeking

Variable	Fear		χ^2	Stress		Physical Wellbeing		Emotional Wellbeing		Financial Wellbeing		Safety	
	Yes (%)	No (%)		$M(SD)$	t	$M(SD)$	t	$M(SD)$	t	$M(SD)$	t	$M(SD)$	t
Prevalence													
IRH	41	29.4	6.865**	4.28(0.83)	0.285	2.65(1.41)	3.21**	3.89(1.08)	1.07	2.53(1.43)	3.36**	2.20(1.31)	4.42***
No	59	70.6		4.26(0.91)		2.24(1.31)		3.77(1.23)		2.08(1.36)		1.69(1.14)	
RPH	66	52.6	8.427**	4.23(0.90)	-1.02	2.52(1.41)	2.81**	3.78(1.22)	-0.57	2.38(1.38)	2.66**	2.04(1.27)	3.81***
No	34	47.4		4.31(0.87)		2.18(1.26)		3.85(1.13)		2.04(1.40)		1.63(1.12)	
SH	88.8	82.4	3.584	4.34(0.83)	3.68***	2.41(1.37)	1.09	3.92(1.12)	4.20***	2.26(1.43)	0.657	1.88(1.25)	0.657
No	11.2	17.6		3.85(1.07)		2.22(1.28)		3.22(1.32)		2.14(1.27)		1.85(1.15)	

Note. IRH = Interpersonal Religious Help-Seeking; RPH = Religious Practice Help-Seeking; SH = Secular Help-seeking

* $p<0.05$. ** $p<0.01$, *** $p<0.001$

Table 5 Prevalence, Helpfulness and Harmfulness of Help-seeking across Religious Groups

Strategy	Christian (%)	Jewish (%)	Muslim (%)	<i>F</i> or χ^2
Prevalence				
IRH				11.48**
Yes	43.5	27.0	31.2	
No	56.5	73.0	68.8	
RPH				109.22***
Yes	78.1	28.3	74.4	
No	21.9	71.7	25.6	
SH				2.96
Yes	85.1	87.6	80.5	
No	14.9	12.4	19.5	
Helpfulness^a				
IRH	2.87(1.07)	2.47(1.22)	2.70(1.21)	1.80
RPH	3.26(1.16)	2.61(1.27)	3.50(1.21)	13.50***
SH	3.29(1.01)	2.99(1.14)	3.19(1.00)	3.13*
Harmfulness^a				
IRH	1.18(0.60)	1.20(0.48)	1.24(0.62)	0.35
RPH	1.14(0.60)	1.08(0.33)	1.16(0.60)	0.37
SH	1.22(0.52)	1.24(0.58)	1.27(0.56)	0.17

^a M(SD)* $p < 0.05$. ** $p < 0.01$, *** $p < 0.001$

in an individual's decision to seek help from religious sources, but not necessarily secular ones.

Participants who sought help from interpersonal religious sources did not differ significantly in their endorsement of stress overall from those who did not seek help from these sources (See Table 4). Source of stress did differentiate prevalence of help-seeking: those who sought help from interpersonal religious sources endorsed significantly greater stress about their physical wellbeing, financial wellbeing, and the safety of their loved ones. However, stress from emotional wellbeing did not differ across those who sought interpersonal religious

help-seeking and those who did not. These findings were consistent with help-seeking from religious practices; stress from physical wellbeing, financial wellbeing and safety of loved ones was significantly greater in participants who sought help from religious practices compared to those who did not, but stress overall and stress from emotional wellbeing did not differ. On the other hand, source of stress had a different relationship with secular help-seeking: those who sought help from secular sources endorsed greater stress overall and stress from their emotional wellbeing than those who did not, while stress from physical wellbeing, financial wellbeing, and safety of loved ones did not differ.

Prevalence by Religious Group Chi-square analyses showed that the Christian group was more likely to seek help from interpersonal religious sources (43.5%) than the Muslim (31.2%) and Jewish (27.0%) groups (See Table 5). Regarding religious practices, the Christian (78.1%) and Muslim (74.4%) groups were more likely to seek help from religious practices than the Jewish group (28.3%). Religious groups did not differ in help-seeking from secular sources.

We conducted a logistical regression to examine the effect of religious group on the likelihood that participants would use interpersonal religious strategies, above and beyond the effects of nature of conflict and religiosity (see Table 6). While religious group had a significant effect, once religiosity was added to this model, the difference between the Jewish and Christian groups was no longer significant. This suggests that the likelihood that the Christian group would seek help from interpersonal religious sources more than the Jewish group could be attributable to religiosity. However, the significant difference between the Christian and Muslim groups persisted

Table 6 Logistic Regression Analysis for Prevalence of Interpersonal Religious Help-seeking by Religious Group, Nature of Conflict and Religiosity

Variables	Model 1 ($R^2 = 0.03^{**}$)		Model 2 ($R^2 = 0.19^{***}$)		Model 3 ($R^2 = 0.22^{***}$)	
	OR	95% CI	OR	95% CI	OR	95% CI
<i>Religious Group (Ref = Christian)</i>						
Jewish	0.48**	[0.31-0.75]	1.10	[0.66-1.85]	1.06	[0.62-1.81]
Muslim	0.59*	[0.36-0.96]	0.54*	[0.32-0.90]	0.54*	[0.32-0.92]
Religiosity			2.59***	[1.99-3.38]	2.42***	[1.84-3.16]
<i>Nature of Conflict</i>						
Fear					1.17	[0.74-1.86]
Stress					1.05	[0.81-1.38]
Physical Wellbeing					1.04	[0.87-1.25]
Emotional Wellbeing					0.98	[0.79-1.22]
Financial Wellbeing					1.12	[0.96-1.31]
Safety					1.21*	[1.01-1.44]

* $p < 0.05$. ** $p < 0.01$, *** $p < 0.001$

suggesting that there may be other factors driving the differences between these two groups. Religiosity significantly predicted religious help-seeking such that the odds of endorsing interpersonal religious help-seeking increased by 2.42 with a one unit increase in religiosity. Adding nature of conflict to the model, stress related to safety was the only predictor of interpersonal religious help-seeking. The odds of seeking help from an interpersonal religious source increased by 1.21 with a one unit increase in stress about safety.

Helpfulness of Religious Help-Seeking

Descriptive statistics of the helpfulness of help-seeking strategies by type are presented in Table 2. Almost everyone (94.1%) rated their help-seeking strategies as at least slightly helpful. Seeking help from family and friends was most helpful for individuals experiencing relationship conflict (94.2%), followed by religious practices (89.8%), formal services (85.4%) and finally, interpersonal religious sources (82.6%).

Helpfulness by Nature of Conflict While fear did not differentiate helpfulness of interpersonal religious sources, religious practices, or secular sources (see Table 7), amount and type of stress predicted helpfulness in complex ways. Higher stress from the relationship conflict overall and with respect to emotional wellbeing were associated with lower helpfulness of interpersonal religious sources and religious practices. Religious practices were more helpful when stress was higher from financial wellbeing and safety of loved ones. The helpfulness of secular sources was not related to stress or any source of stress.

Helpfulness by Religious Group While religious group did not differentiate the helpfulness of interpersonal religious sources (See Table 5), it did distinguish the helpfulness of religious practices. Post hoc comparisons using the

LSD test indicated that the mean helpfulness of religious practices endorsed by Christian and Muslim groups were significantly greater than the Jewish group. Similarly, helpfulness of secular sources differed across religious groups. Post hoc comparisons using the LSD test indicated that the mean helpfulness of secular sources endorsed by the Christian group was greater than the Jewish group.

Harmfulness of Religious Help-Seeking

As detailed in Table 2, more than one quarter of the sample (27.9%) rated their help-seeking strategies as at least slightly harmful. Seeking help from interpersonal religious help-seeking sources (23.6%) and formal secular sources (22.7%) were most often found to be harmful for individuals experiencing relationship conflict, followed by informal secular help-seeking (17.5%) and finally, rarely, religious practices (7.3%).

Harmfulness by Nature of Conflict With few exceptions, results showed that participants experienced more harm when their distress was more intense. Participants who felt frightened in their relationship rated interpersonal religious sources and secular sources as more harmful than those who did not feel frightened (See Table 7). Further, harmfulness of interpersonal religious sources was positively correlated with stress overall and all sources of stress. Harmfulness of religious practices was positively associated with stress from physical wellbeing, financial wellbeing, and safety of loved ones. In comparison, the harmfulness of secular

Table 7 Bivariate analyses for Relationships Between Nature of Conflict, and Helpfulness and Harmfulness of Help-Seeking

Variable	Fear		<i>t</i>	Stress		Physical Wellbeing	Emotional Wellbeing	Financial Wellbeing	Safety
	<i>Yes</i> <i>M(SD)</i>	<i>No</i> <i>M(SD)</i>		ρ	ρ				
Helpfulness									
IRH	2.65(1.23)	2.76(1.08)	-0.57	-0.21**	0.01		-0.18*	-0.10	0.14
RPH	3.24(1.28)	3.20(1.20)	0.23	-0.19**	0.06		-0.06	0.15*	0.16**
SH	3.19(1.05)	3.11(1.08)	0.68	-0.05	0.04		-0.04	-0.01	0.05
Harmfulness									
IRH	1.31(0.68)	1.12(0.47)	2.77**	0.13*	0.20**		0.14*	0.21***	0.14*
RPH	1.20(0.67)	1.08(0.44)	1.70	0.07	0.19**		0.09	0.14*	0.20**
SH	1.36(0.71)	1.15(0.39)	3.40**	0.11*	0.13*		0.09	0.18***	0.10

Note. IRH= Interpersonal Religious Help-Seeking; RPH= Religious Practice Help-Seeking; SH= Secular Help-seeking

* $p < 0.05$. ** $p < 0.01$, *** $p < 0.001$

sources was positively associated with stress overall, and stress from physical and financial wellbeing.

Harmfulness by Religious Group We found no relationship between harmfulness and religious group, with respect to either religious or secular sources (see Table 5).

Discussion

While the IPV literature demonstrates the important role of religious sources of support in survivors' help-seeking strategies and both the possibility of help and harm for survivors from these sources, it does not capture the prevalence and nature of these impacts in a way that might inform efforts to strengthen those responses. In this religiously diverse community sample who varied widely in their religiosity and were experiencing relationship conflict, we found that while only 17.1% of participants sought help directly from a religious leader, one-third of participants sought help from interpersonal religious sources defined more broadly, and more than half used religious practices as a help-seeking strategy. These findings add to previous literature that has documented the prevalence of religious leader help-seeking in survivors of IPV ranging from 6.8% in a non-religious community sample of Black women reporting severe physical IPV to 25% in a Christian help-seeking sample (Lacey et al., 2021; Neergaard et al., 2007). The current findings suggest that expanding our scope in defining both help-seeking and relationship conflict reveals greater reliance on religious sources of help across the types of strategies outlined by Goodman and colleagues (2003); private strategies (prayer, religious texts), informal network strategies (community members and elders), and public strategies (religious leaders).

Like previous qualitative studies, participants reported experiencing both help and harm from religious help-seeking strategies (Ghafournia, 2017; Ringel & Bina, 2007). In terms of helpfulness, participants were more likely to report religious help-seeking as helpful (82.6%) than previous findings from the IPVSI (53.6%; Goodman et al., 2003). However, this difference may be due to the nature of these samples. Goodman et al. (2003) consisted of a non-religious help-seeking sample and thus may have found religious sources to be less helpful than the current sample which self-identified with a religious group. Neergaard et al. (2007) reported similar rates of helpfulness (79%) in a similarly religious sample of Christian women.

The present study expands on the IPVSI by assessing the harm caused by these strategies. While the majority of participants found interpersonal religious help-seeking to

be helpful, a quarter of participants found it to be harmful. Previous qualitative studies have explored the nuances that underly this dynamic by identifying factors that influence the effectiveness of religious help-seeking such as religious leaders' messaging. For instance, while messages of empathy and support can be helpful for survivors, advice to be patient and tolerate the abuse, or accepting the abuse as a part of their fate can be harmful for survivors (Gezinski et al., 2019; Ghafournia, 2017). In line with Kennedy and colleagues (2012) theory of help-attainment, this variable impact of help-seeking from religious sources, either from different sources or different impact from the same source, can accumulate over time and create barriers to effective help.

Nature of conflict was an important factor impacting the prevalence, helpfulness, and harmfulness of religious help-seeking. While those who sought help reported greater physical, financial and safety stress, greater stress, particularly related to emotional wellbeing, was associated with less helpfulness of religious strategies. In fact, greater stress from any source was associated with greater harmfulness of interpersonal religious sources. These findings suggest that religious leaders and community members may not be well-equipped to respond to greater severity in conflicts resulting in harm.

The presence of fear emerged as an important factor in the help-seeking experience of individuals with relationship conflict. It increased the likelihood of seeking help from religious help-seeking strategies, consistent with previous literature that severity of violence is associated with greater help-seeking (Barrett et al., 2020). However, interpersonal religious help-seeking strategies were more harmful for individuals who experienced fear in their relationship than those who did not. Considering fear in a relationship is a valid indicator of abuse, this suggests that the religious communities' responses are more likely to be lacking effectiveness and causing harm in situations of abuse. Some factors that may contribute to the harmful impact of religious community responses on survivors of IPV may include lack of clergy training, and harmful responses to abuse such as victim blaming, stigma of divorce and IPV, and advice to stay in an abusive relationship (Choi et al., 2016).

Situational factors such as social location, the social identities people hold and the way their environment interacts with those identities, will inevitably impact their help attainment process (Kennedy et al., 2012). The present study expanded the previous literature by drawing from multiple religious communities. In this sample, we found that the Christian group was more likely to utilize interpersonal religious help-seeking than the Muslim and Jewish groups. However, the difference between the Christian and Jewish group was accounted for by different levels of religiosity.

Aside from religiosity, the greater utilization in the Christian group may be attributed to the ubiquity of and accessibility to Christian help-seeking sources in the United States due to its place as a majority religion, compared to minority religious groups such as Jewish and Muslim communities which may not be as widespread. In terms of the impact of religious help, the Christian group was also more likely to rate religious practice as helpful, but there were no differences in helpfulness of interpersonal religious strategies or harmfulness of religious sources by religious group. Overall, these findings suggest that the process of help-seeking looks similar in different religious groups, but the process may manifest differently depending on their unique social location and contextual factors. Beyond just identification with religious group, contextual factors such as religiosity act as barriers or enablers to help-seeking.

Limitations

There are several limitations that impact the interpretation of the current study findings. First, the sample demographics, while representative of their respective religious groups, did not have enough ethnic-racial representation of non-White participants to explore the role of race in survivors' help-seeking decisions. Race intersects with religion in important ways (Emerson et al., 2015), and an intersectional approach is necessary to understand the nuances of survivors' help-seeking decisions (Oyewuwo-Gassikia, 2020). Participants' ethnic-racial group, education attainment, gender, employment status, immigration status, and presence of children are all contextual factors that can add nuance to the process of religious help-seeking. However, exploring the compounded impact of these contextual factors on help-seeking in addition to religious group and religiosity is beyond the scope of the paper at this time. Given the significance of religious help-seeking for individuals who are struggling with relationship conflicts, future studies should explore the ways these contextual factors may shape the accessibility to and impact of religious help-seeking. Second, while the present study established a foundation of the prevalence of religious help-seeking and its impact, more research is needed to elaborate on what happens in these interactions with religious sources and its impact on survivors. Finally, all measures were self-report and retrospective, and therefore represent participants' memories of their experiences.

Implications for Research, Clinical Practice, and Policy

The results of this study support the idea that religion plays an important role in the help-seeking experience of individuals experiencing relationship conflicts, and that the

impact of this type of support is variable. Given that one-third of these individuals seek help from religious sources, it is crucial to understand the nature of these interactions and how they influence their wellbeing. First, future research is needed to understand the factors that predict whether religious help-seeking strategies will be helpful or harmful for help-seekers. Second, research is needed to explore the messages, both helpful and harmful, that religious communities and religious leaders communicate to survivors. Future research should explore messages and practices that are unique to religious communities, such as *get* refusal-refusal of providing a Jewish divorce document resulting in individuals remaining married religiously and unable to remarry- in Jewish communities (Starr, 2017), and those that cut across religious communities, such as the "holy hush" (Ghafournia, 2017; Houston-Kolnik et al., 2019; Ringel & Bina 2007).

Regarding community practices and policies, this study offers evidence for the importance of enhancing religious communities' response to IPV. Results suggest that religious leaders, community leaders, community members and elders are all important sources of support for survivors of IPV who have the potential to facilitate or inhibit survivors' wellbeing. These findings provide evidence for the need for increased training on IPV for not just religious leaders but also other members of the religious community. Further, it is crucial for these trainings to pay particular attention to the nature of the conflict which may cover a wide spectrum in which there is no clearcut line between typical relationship conflict and abuse. The presence of fear is a quick and helpful indicator of abuse that can be useful for religious communities to identify in order to respond more effectively to survivors and minimize harm by tailoring responses according to help-seekers unique experiences.

Regarding clinical practice and policy, these findings emphasize the need for partnership building and community collaborations between mainstream IPV services and religious communities. These partnerships can enhance practice of service providers by incorporating religious help-seeking such as prayer and religious texts as a source of support. For instance, domestic violence shelters may enhance their support of survivors by creating prayer spaces and making available religious materials (e.g., prayer mats, prayer beads, and religious texts) to highlight supportive messages such as domestic violence is not condoned in their religion, and survivors have the strength and power to heal.

Conclusion

This study provides empirical evidence for the prevalence and impact of religious help-seeking for individuals experiencing relationship conflict in a religiously diverse community sample. Religious help-seeking can include many strategies beyond help from a religious leader including community members and elders, but also religious practices that are used as a source of support and guidance such as prayer and religious texts. It is our hope that this study bolsters increased research and community work to embrace the important role of religion in supporting survivors of IPV and minimize the harmful impact of these avenues of support.

Declarations

Conflict of Interest The authors declare that they have no conflict of interest.

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