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Resource loss and coping strategies used by internally displaced women in Georgia

A qualitative study

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Thesis submitted for the Degree of Doctor of Philosophy (Ph.D.)
of the University of London

May 2016

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No funding received
Statement of originality

I, Maureen L. Seguin, confirm that the work presented in this thesis is my own. Where information has been derived from other sources, I confirm that this has been indicated in the thesis.

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Abstract

**Background:** There is a lack of research on loss and coping among conflict-affected populations, especially on women specifically. Moreover, this topic has yet to be explored in the Republic of Georgia. The overall aim of the thesis is to explore resource loss and coping strategies among internally displaced women in Georgia.

**Methods:** A systematic literature review on coping strategies amongst conflict-affected persons in low- and middle-income countries was completed, followed by qualitative field research in Georgia during which 40 semi-structured interviews with internally displaced women were conducted. Hobfoll’s Conservation of Resources Theory (1989) and Skinner et al. (2003)’s coping typology were drawn upon to guide the analysis and interpretation of information gleaned on losses and coping respectively.

**Findings:** The systematic review revealed that gender and exposure to trauma influenced coping efforts. The relationship between coping and mental health outcomes was nuanced, with support seeking and problem solving showing mostly protective effects. Displacement and the loss of property it entailed led to the loss of livelihood, which lead to the loss of social networks, as well as mental and physical health losses. The women reported a range of coping strategies, including problem solving techniques, seeking support from friends, family, and neighbours, escape-avoidance techniques, distraction strategies, and cognitive restructuring approaches. Key differences in the coping behaviours of men and women in the areas of problem solving, support seeking, and escape-avoidance and distraction were evident.

**Conclusion:** Initial losses due to conflict and displacement may lead to subsequent losses unfolding over time, rendering internally displaced persons potentially vulnerable to the effects of conflict years after the formal cessation of hostilities. The participants in this study reported a plethora of strategies employed to offset such losses. A number of research and policy recommendations are provided based on the thesis findings.
# Table of contents

Statement of originality ........................................................................................................... 2  
Abstract ..................................................................................................................................... 3  
Table of contents .......................................................................................................................... 4  
List of tables and figures ............................................................................................................ 11  
Acknowledgements ...................................................................................................................... 12  
List of acronyms ......................................................................................................................... 13  

## Chapter 1: Introduction

1.1 Trauma-focused and psychosocial approaches to mental health .............................................. 15  
1.2 Loss, dispossession, and coping .............................................................................................. 18  
1.3 Loss and coping in post-Soviet space and Central and Eastern Europe ................................. 22  
   1.3.1 Loss and coping in post-Soviet Georgia ........................................................................... 25  
      1.3.1.1 Loss and coping among Georgian Internally Displaced Persons ......................... 29  

## Chapter 2: Background

2.1 Internal displacement ............................................................................................................. 32  
2.2 Conflict, displacement, and mental health ............................................................................. 33  
2.4 Theories on coping ............................................................................................................... 41  
   2.4.1 Early research on defense mechanisms ......................................................................... 41  
   2.4.2 Folkman and Lazarus’s transactional theory of stress and coping ................................. 42  
      2.4.2.1 Appraisal ............................................................................................................... 42  
      2.4.2.2 Coping ................................................................................................................. 43  
   2.4.3 Parker and Endler’s Coping Inventory for Stressful Situations (CISS) ......................... 46  
   2.4.4 Skinner’s Taxonomy ...................................................................................................... 47  
      2.4.4.1 Coping and gender ............................................................................................... 51  
   2.4.5 Hobfoll’s Conservation of Resources (COR) theory ..................................................... 52  
      2.4.5.1 Resource caravans and caravan passageways ...................................................... 53  
      2.4.5.2 Loss spirals .......................................................................................................... 54  
2.5 Thesis Rationale .................................................................................................................... 55  
2.6 Thesis aim and objectives ..................................................................................................... 57  

## Chapter 3: Systematic literature review on coping strategies among conflict-affected persons

3.1 Methods for systematic literature review ............................................................................... 58  
   3.1.1 Inclusion and exclusion criteria .................................................................................... 58  
   3.1.2 Data search ................................................................................................................. 60  
   3.1.3 Study screening, selection and analysis ....................................................................... 60  

3.2 Results of the systematic literature review .................................................. 61

Figure 1: Results from the screening process ..................................................... 62

3.2.1 Quality assessment .................................................................................... 62
3.2.2 Coping strategies used by conflict-affected civilians ................................. 63
3.2.3 Factors associated with coping strategies ................................................ 64
3.2.4 The relationship between coping strategies and mental health .................. 67

Table 1: Relationship between coping domains and mental health outcomes
(protective [✓], non-protective [X], and neutral [ ].............................................. 67

3.2.4.1 Support seeking and mental health ....................................................... 70
3.2.4.2 Positive cognitive restructuring and mental health ............................... 72
3.2.4.3 Problem solving and mental health ....................................................... 73
3.2.4.4 Escape-avoidance and mental health ................................................... 74
3.2.4.5 Distraction and mental health ............................................................... 75

3.3 Discussion of systematic literature review findings ...................................... 76
3.4 Limitations of the systematic literature review ............................................ 78
3.5 Conclusion of systematic literature review .................................................. 79

Chapter 4: Study context ................................................................................. 79

4.1 Pre-Soviet Georgia ...................................................................................... 85
4.2 The Georgian Soviet Socialist Republic ....................................................... 86
4.2.1 Gender roles ............................................................................................ 93
4.2.1.1 The New Soviet Woman ...................................................................... 94
4.2.1.2 The New Soviet Man .......................................................................... 95
4.2.2 Education and work .................................................................................. 96
4.2.3 Health ...................................................................................................... 99
4.2.3.1 Alcohol use ......................................................................................... 100

4.3 Post-Soviet Georgia .................................................................................. 101
4.3.1 Post-Soviet gender roles ......................................................................... 102
4.3.2 Healthcare ................................................................................................ 105
4.3.3 Economic environment .......................................................................... 108
4.3.3.1 Cows-and-kin .................................................................................... 111

4.4 Civil unrest and conflict in Georgia 1990-2008 ......................................... 112
4.4.1 The first South Ossetian war 1991-1992 and aftermath ............................ 112
4.4.2 The Rose Revolution and aftermath ....................................................... 119
4.4.3 Russo-Georgian war, 7-12 August 2008 .................................................. 125

Figure 2: Map of Georgia including the disputed territories ............................ 125
4.4.4 The impact of war on Georgians................................................................. 128
4.5 Selected vignettes ....................................................................................... 132
  4.5.1 Latavri........................................................................................................ 132
  4.5.2 Guranda...................................................................................................... 134
  4.5.3 Lali............................................................................................................. 136
  4.5.4 Isidore ....................................................................................................... 136
4.6 Chapter summary ......................................................................................... 137

Chapter 5: Methodology ................................................................................. 138
5.1 Critical realism ........................................................................................... 139
  5.1.1 Critical realist approach to causality and ‘rich data’.............................. 140
  5.1.2 Critical realist approach to validity ...................................................... 140
5.2 Research design and fieldwork process ..................................................... 141
  5.2.1 Phase 1: Project set-up (November 14 – December 3, 2012)............... 141
  5.2.2 Phase 2: Respondent sampling approach and piloting of interviews and audio diaries (December 4 - 17, 2012) ................................................. 146
  5.2.3 Phase 3: Initial data gathering (December 18, 2012 – January 14, 2013) ...... 150
  5.2.4 Phase 4: Final phase of data gathering (January 15 – February 16, 2013)...... 151
  5.2.5 Phase 5: Informal interviews with GIP-T staff and research associates (February 24, 2013) .................................................................................. 151
  5.2.6 Ethical considerations ............................................................................ 152
5.3 Data analysis ............................................................................................... 153
  5.3.1 Coding process ....................................................................................... 153
5.4 Reflexivity .................................................................................................... 156
  5.4.1 Positionality ............................................................................................ 159
    5.4.1.1 Research Associate/respondent dynamics ........................................ 160
    5.4.1.2 Myself/respondent dynamics ............................................................ 162
    5.4.1.3 Myself/research associate dynamics ............................................... 165
  5.4.2 Field work vignettes .............................................................................. 166
    5.4.2.1 Vignette #1: ‘The water distribution is unfair’ ................................. 166
    5.4.2.2 Vignette #2: ‘Word has spread that we are in the settlement’ .......... 166
5.4.2.3 Vignette #3: ‘Won’t you have a drink?’................................................................. 168
5.5 Respondent characteristics.................................................................................. 170
Table 2: Demographic and interview details of the sample...................................... 171
Chapter 6: Results on resource losses faced by internally displaced women in
Georgia.................................................................................................................. 173
6.1 Life before the 2008 war...................................................................................... 174
6.2 Traumatic events ............................................................................................... 177
  6.2.1 Separation from family members ................................................................. 180
  6.2.2 Deaths of loved ones .................................................................................. 181
  6.2.3 Food and shelter challenges ...................................................................... 182
6.3 Initial losses........................................................................................................ 183
  6.3.1 Loss of property (object).............................................................................. 183
    6.3.1.1 Loss of homes ...................................................................................... 183
    6.3.1.2 Loss of appliances, furniture and housewares .................................... 185
    6.3.1.3 Loss of car and transport ................................................................... 187
    6.3.1.4 Loss of farmland ................................................................................ 187
  6.3.2 Loss of property (condition) ....................................................................... 189
  6.3.3 Loss of mental health due to traumatic events (condition) ....................... 191
6.4 Losses due to displacement................................................................................ 193
  6.4.1 Loss of physical health (condition) .............................................................. 193
  6.4.2 Loss of livelihood (energy) ......................................................................... 194
  6.4.3 Loss of mental health (condition) .............................................................. 198
  6.4.4 Loss of social networks (condition) ........................................................... 200
6.5 Sustained losses due to previous losses ............................................................. 204
  6.5.1 Further losses of social networks (condition) ........................................... 204
  6.5.2 Further losses of mental health due to loss of livelihood (condition) ........ 205
  6.5.3 Further losses of physical health (condition) ............................................ 205
6.6 Chapter summary .............................................................................................. 207
  Figure 9: Visual representation of resource losses resulting from war and
  displacement......................................................................................................... 209
Chapter 7: Results on coping strategies used by internally displaced women in
Georgia.................................................................................................................. 211
7.1 Description of coping strategies........................................................................ 212
  7.1.1 Problem solving ....................................................................................... 212
  7.1.2 Support seeking ....................................................................................... 212
  7.1.3 Escape-avoidance .................................................................................... 212
8.1 Men’s and women’s roles in Georgia .................................................. 246
8.2 Divergent coping strategies .............................................................. 249
  8.2.1 Support seeking among women .................................................. 249
  8.2.2 Problem-solving among women .................................................. 250
    8.2.2.1 Adopting new roles and responsibilities ............................. 251
  8.2.3 Differing distraction techniques: Housework and childcare versus alcohol use, wishful thinking, and ‘hanging around’ ................................. 253

Figure 1: Coping strategies of Georgian IDP women ............................. 245

Chapter 8: Results on women’s understandings of the impact of displacement on men’s and women’s roles .................................................. 246

7.1.4 Distraction ................................................................................ 213
7.1.5 Cognitive restructuring ............................................................ 213
7.2 Findings ...................................................................................... 214
  7.2.1 Problem solving ....................................................................... 214
    7.2.1.1 Seeking employment and working .................................... 214
    7.2.1.2 Budgeting ......................................................................... 217
    7.2.1.3 Seeking alternative sources of income .............................. 219
  7.2.2 Support seeking ........................................................................ 220
    7.2.2.1 Neighbours ....................................................................... 220
    7.2.2.2 Family .............................................................................. 224
    7.2.2.3 Friends, co-workers, and priests ........................................ 227
  7.2.3 Escape-avoidance ..................................................................... 228
    7.2.3.1 Giving up/resignation ....................................................... 228
    7.2.3.2 Physical and emotional isolation ....................................... 229
    7.2.3.3 Physical escape, crying and wishful thinking .................... 231
  7.2.4 Distraction ................................................................................ 232
    7.2.4.1 Seeking employment and working as distraction .............. 233
    7.2.4.2 Gardening as distraction .................................................. 234
    7.2.4.3 Housework ...................................................................... 235
    7.2.4.4 Reading and watching TV ................................................. 236
    7.2.4.5 Visiting others for distraction .......................................... 237
  7.2.5 Cognitive restructuring ............................................................ 237
    7.2.5.1 Faith ................................................................................. 237
    7.2.5.2 Focus on mental strength .................................................. 239
    7.2.5.3 Downplaying losses and focusing on the positive ............ 240

7.3 Chapter summary .......................................................................... 243
8.3 Making sense of coping: How women explain differences in coping ................. 259
  8.3.1 Roles during the war ................................................................................. 260
  8.3.2 Men’s ancestral ties to the land ............................................................... 261
8.4 Roles in flux or more of the same? ............................................................... 262
8.5 Instances of challenges to traditional roles for men and women ............... 265
8.6 Chapter summary ......................................................................................... 267

**Chapter 9: Discussion of research findings** .................................................... 267
9.1 Resource loss amongst IDP women in Georgia ........................................... 269
9.2 Coping strategies of IDP women in Georgia ............................................... 273
  9.2.1 Problem solving ..................................................................................... 273
  9.2.2 Support seeking ...................................................................................... 274
  9.2.3 Escape-avoidance and distraction ......................................................... 275
  9.2.4 Cognitive restructuring ......................................................................... 276
9.3 Differences in coping between men and women and shifting roles ............ 278
  9.3.1 Problem solving ..................................................................................... 278
    9.3.1.1 The pervasiveness of women’s double bind ....................................... 280
    9.3.2 Escape-avoidance, distraction, and support seeking ............................. 281
9.4 Reflection on frameworks ............................................................................. 283
9.5 Limitations .................................................................................................... 285
9.6 Contributions of thesis ................................................................................ 286
9.7 Recommendations ....................................................................................... 288
  9.7.1 Mental health and psychosocial support interventions for Georgian IDPs
      should target both the individual and the group ........................................... 288
  9.7.2 Mental health and psychosocial support interventions for Georgian IDPs
      should foster resources to support livelihood initiatives ............................. 290
  9.7.3 Expand health supports for IDPs ............................................................. 291
  9.7.4 Introduce interventions to address harmful alcohol use among men ......... 292
  9.7.5 Research recommendations ................................................................... 293
9.8 Conclusions ................................................................................................... 294

Appendix A: Publications, conference presentations, and invited lectures arising
from the thesis .................................................................................................... 295
  Publications under review ............................................................................... 295
  Accepted publications ..................................................................................... 295
  Conference presentations and invited lectures ............................................... 295
Appendix B: Sample and location, coping classification scheme, and findings for the
selected studies ................................................................................................ 298
Appendix C: RATS and STROBE checklists .......................................................... 309
  RATS checklist for qualitative studies .......................................................... 309
  STROBE checklist for quantitative studies.................................................... 311
Appendix D: Findings organized by coping domain ........................................ 313
Appendix E: Factors associated with coping domains...................................... 325
Appendix F: Associations between coping types and mental health outcomes .... 332
Appendix G: Early draft topic guide for IDP women........................................ 359
Appendix H: Interview participant information sheet and consent form ............ 362
Appendix I: Audio diary participant information sheet and consent form .......... 364
Appendix J: Audio recording instructions .......................................................... 366
Appendix K: Topic guide for IDP women ......................................................... 367
Appendix L: Simplified audio recording instructions ......................................... 369
Appendix M: Georgian National Council on Bioethics ethical approval .............. 370
Appendix N: London School of Hygiene and Tropical Medicine ethical approval .... 372
References ............................................................................................................ 374
List of tables and figures

Table 1: Relationship between coping domains and mental health outcomes (protective ✓ non-protective [X], and neutral [-]).................................................................68
Table 2: Demographic and interview details of the sample.......................................173

Figure 1: Results of the screening process .................................................................63
Figure 2: Map of Georgia including the disputed territories....................................127
Figure 3: Location of Shavshvebi, Skra, and Karaleti IDP settlements.....................144
Figure 4: Shavshvebi IDP settlement........................................................................146
Figure 5: Bee farm at Shavshvebi IDP settlement....................................................146
Figure 6: Skra IDP settlement....................................................................................147
Figure 7: Tandoor oven at Skra settlement...............................................................147
Figure 8: Karaleti IDP settlement............................................................................148
Figure 9: Visual representation of resource losses resulting from war
and displacement..................................................................................................211
Figure 10: Coping strategies of Georgian IDP women.........................................247
Acknowledgements

First, I would like to acknowledge the women who participated in the study, without whom this thesis would not have been possible. Thank you for opening your homes and sharing your experiences.

I also extend gratitude toward my supervisor, Dr. Bayard Roberts, for his guidance, input, and fastidious attention to detail throughout the research. Thanks also to the members of my advisory committee, comprised of Dr. Nino Makashvili, Dr. Ruth Lewis, and Dr. Nicki Thorogood, for assisting in the project. I would also like to thank Maia Khundadze, Mariam Razmadze, and Tiko Amirejibi for their crucial support during the field work.

Finally, thank you to my friends and family for their encouragement and support not only over the course of my PhD programme, but also over the twists and turns which led me here.
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CBO</td>
<td>Community-based organization</td>
</tr>
<tr>
<td>CIS</td>
<td>Commonwealth of Independent States</td>
</tr>
<tr>
<td>CISS</td>
<td>Coping inventory for stressful situations</td>
</tr>
<tr>
<td>CMD</td>
<td>Common mental disorder</td>
</tr>
<tr>
<td>COR</td>
<td>Conservation of resources</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>GIP-T</td>
<td>Global Initiative on Psychiatry – Tbilisi</td>
</tr>
<tr>
<td>IASC</td>
<td>Inter-agency standing committee</td>
</tr>
<tr>
<td>IDP</td>
<td>Internally displaced person</td>
</tr>
<tr>
<td>LMIC</td>
<td>Low- and middle-income country</td>
</tr>
<tr>
<td>LSHTM</td>
<td>London School of Hygiene and Tropical Medicine</td>
</tr>
<tr>
<td>MeSH</td>
<td>Medical subject headings</td>
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<tr>
<td>NATO</td>
<td>North Atlantic Treaty Organization</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
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<tr>
<td>PTSD</td>
<td>Posttraumatic stress disorder</td>
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<tr>
<td>SPMH</td>
<td>State Program for Mental Health</td>
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<tr>
<td>SSR</td>
<td>Soviet Socialist Republic</td>
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<td>USD</td>
<td>United States dollars</td>
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<td>USSR</td>
<td>Union of Soviet Socialist Republics</td>
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Chapter 1: Introduction

The aim of this thesis is to explore resource loss and coping strategies among internally displaced women in the Republic of Georgia (hereafter referred to as Georgia). This focus is motivated by the following research problems: though there has been much attention paid to prevalence of certain mental diagnoses such as post-traumatic stress disorder (PTSD) and depression after war (De Jong, Komproe, & van Ommeren, 2003; Steel et al., 2009), there has been little exploration of the losses experienced by war-affected groups beyond the area of mental health. Moreover, much of the existing literature focused on mental health status amongst populations in conflict and post-conflict areas employs a narrow definition of mental health using a trauma-focused orientation (De Jong et al., 2003; Miller & Rasmussen, 2010; Steel et al., 2009). A paucity of research also appears to exist in understanding how conflict-affected populations cope in response to exposure to trauma and loss. Moreover, much of the existing research on coping among conflict-affected persons focuses on refugees residing in high-income countries (J. Arnetz, Rota, Arnetz, Ventimiglia, & Jamil, 2013; Baird & Boyle, 2012; Phillimore, 2011), even though most conflict-affected persons live in low- and middle-income countries (LMICs). In addition, among persons forcibly displaced by armed conflict globally, there are substantially higher numbers of internally displaced persons (IDPs) than refugees but they remain neglected in research on this topic (UNHCR, 2015). IDPs are defined as persons who have been forced to flee their homes as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters (Kälin, 2008). IDPs differ from refugees as the latter cross state borders, though they leave their homes for the same reasons as refugees.

To address these research problems, the following research questions direct the thesis: What are the losses experienced by internally displaced women in Georgia? How does this group cope with these losses? How should losses and coping be conceptualised for this group? This thesis frames these questions from a psychosocial approach in examining both the losses experienced by and the coping strategies of Georgian women internally displaced in Georgia due to the conflict between Russia and Georgia in 2008. Such a project lends itself to a psychosocial approach to mental health, by focusing on agency rather than victimhood and on the wide social context which shapes both losses suffered
and reactions to loss amongst internally displaced persons. Below, I distinguish between trauma-focused and psychosocial approaches to mental health conceptions.

1.1 Trauma-focused and psychosocial approaches to mental health

Though mental health is increasingly recognized as a key public health issue in post-conflict regions, significant debate has occurred between advocates of trauma-focused and psychosocial approaches to addressing this need (Kienzler, 2008; Miller & Rasmussen, 2010; Silove, 2005b; van Ommeren, Saxena, & Saraceno, 2005). These opposing positions stem from fundamentally different assumptions about conceptions of mental health and the factors that most influence mental health.

A psychosocial approach involves examining the economic, social and cultural influences on mental health and how they may have been disrupted by conflict. There are affinities between this approach and the concept of ‘social suffering,’ which addresses conditions resulting from health, welfare, legal, and religious issues, explicitly linking personal and societal problems (Kleinman, Das, & Lock, 1997a). A psychosocial approach values local patterns and understandings of distress, and the long-term (rather than short-term) impact of conflict on mental health (Pedersen, 2002). For example, the psychosocial approach focuses on the daily stressors caused by the effect of conflict on income, housing, education, social and cultural networks and practices, rather than focusing on the impact of trauma alone (Miller, Fernando, & Berger, 2009; Miller, Omidian, Rasmussen, Yaqubi, & Daudzai, 2008; Miller & Rasmussen, 2010; Miller, Worthington, Muzurovic, Tipping, & Goldman, 2002; Rasmussen & Annan, 2010; Summerfield, 1999). Recognizing that not all refugees suffer from mental health problems such as depression and PTSD, those adhering to the psychosocial paradigm view these individuals as agents possessing skills and strengths rather than as victims (Miller & Rasco, 2004; Tribe & Family Rehabilitation Centre, 2004). This orientation favours non-medical interventions for mental health problems, based on the assumption that the mental health impact of armed conflict is largely or completely mediated by the stressful social and material conditions it creates (Miller et al., 2008; van Ommeren et al., 2005). Measures such as providing jobs, reuniting families, and creating effective justice and education systems are viewed as appropriate treatment responses for populations affected by war (Silove, 2005a).
Importantly, the psychosocial approach involves a deeper cultural understanding of how the affected population define mental health causes, symptoms, and appropriate responses (Miller & Rasco, 2004).

The psychosocial model is vulnerable to the criticism that it underestimates the adverse impact that exposure to conflict has on mental health. Others argue that western conceptualizations of mental health (though an imperfect ‘fit’ in non-western settings) can at least provide a proxy of the emotional impact of hardships faced by traumatized groups (Welsh & Brodsky, 2010). Moreover, interventions based on the psychosocial approach, which target daily stressors, may ignore the needs of people with serious or severe conditions who are in need of specialized mental health treatment (Miller & Rasmussen, 2010).

Those adhering to the trauma-focused paradigm focus on exposure to violence associated with war (sexual assault, destruction of one’s home, etc.) and negative mental health outcomes, most notably, PTSD (Ingleby, 2005). This approach is characterized by a universalist understanding of mental health and disorders based on the categories of and criteria for mental disorders which compose the Diagnostic and Statistical Manual of Mental Disorders (DSM), and related treatment options. This perspective places relatively little emphasis on cultural-specific understandings of mental health and treatment, or the social and economic needs of the population under study.

Critics of the trauma-focused approach question the relevancy of ‘western’ mental health diagnoses, such as PTSD, in non-western settings, arguing that the application of such concepts has resulted in an overestimation of PTSD prevalence among populations affected by war (Kienzler, 2008; McHugh & Treisman, 2007; Summerfield, 1999). Further, critics contend that the trauma-focused paradigm operationalizes distress solely in terms of psychiatric symptoms, an approach which yields prevalence rates of CMDs in post-conflict areas yet does not indicate actual needs of war-affected populations (Miller et al., 2002; Silove, 2005a). Moreover, it is argued that a trauma-focused approach pathologizes reactions to stress and hardship (for instance, distress and suffering), when perhaps such reactions could be conceived as normal and natural responses to hardship.
which may subside without the need for external intervention (Malkki, 1995; Summerfield, 2000). Conventional psychiatric measurement tools tend to frame distress in time-limited ways, by focusing on symptoms at a particular point in time without an appreciation of people’s lives prior to displacement (Miller et al., 2002). This is an important point, as displaced groups view life prior to displacement as a reference point in the evaluation of later circumstances (Eisenbruch, 1988; Miller, 1999). Even repeated cross-sectional surveys quantitatively measuring mental health symptoms cannot capture the historical and comparative aspects of the experiences of war-affected groups (Miller et al., 2002).

Silove (2005a) argues that the debate between trauma-focused and psychosocial approaches risks confusing donors, United Nations agencies and non-governmental organizations (NGOs) involved in providing services to war-affected populations, which may have the unintended result of weakening their capacity to contribute meaningfully in post-conflict areas. Perhaps in response to such cautions, a movement toward synthesis is noted in recent literature (Kienzler, 2008). For instance, Miller and Rasmussen (2010) and Fernando, Miller, and Berger (2010) focus on the role of daily stressors in mediating the relationship between exposure to trauma and mental health outcomes and psychosocial functioning. It is pertinent to recognize that most mental health professionals take a nuanced approach, recognizing the importance of cultural differences in the presentation of mental distress. Patel (2012) suggests that core features of mental disorders such as depression may be transferable across cultures, yet the expression of such disorders is mediated by social and cultural environments.

Synthesis between psychosocial and trauma-focused approaches is promoted in guidelines on mental health and psychosocial support in emergency settings from the Inter-Agency Standing Committee (IASC) (2007). The guidelines recognize that individuals are affected by emergencies in diverse ways; while some may develop mental health disorders such as PTSD, others may retain good mental health or only require limited support. The guidelines suggest a layered system of support to meet the needs of different groups, to be implemented concurrently. Layers include ‘basic services and security’ (targeted at all individuals), ‘community and family supports’ (targeted at those who are able to maintain mental health and psychosocial well-being with assistance in
accessing key support), ‘focused, non-specialised supports’ (targeted at individuals who require focused interventions) and ‘specialised services’ (targeted at individuals who require psychological or psychiatric supports due to significant difficulties in basic daily functioning). Each layer targets progressively fewer people as the activities become more specialised.

1.2 Loss, dispossession, and coping

Forcibly displaced persons such as IDPs and refugees and those displaced by natural disasters and technological development can suffer a range of losses including tangible materials such as property and personal belongings, along with intangible assets such as social support networks, socio-cultural practices, and identities connected to the social and physical spaces they have left behind (Colson, 1971; J. Davis, 1992). As T. Kaiser (2008) notes, persons who are forcibly displaced experience an disruption in their understanding, interpretation, construction, and representation of the physical, socio-cultural, political, and spiritual landscapes from which they have fled. A loss of identity and feeling of belonging to a particular state have also been observed among groups forcibly displaced by conflict (Daniel, 1997).

Rather than viewing pain, suffering and loss as aberrations, J. Davis (1992) argues that suffering is a regular part of many lives. Moreover, there is no great gulf between ‘exceptional’ and ‘routine’ suffering; the experience of suffering is best conceived as a continuum. He notes,

[H]urricanes and plagues, famines and earthquakes, wars and floods are continuous with the private pains of love or bereavement and with the more public ones of unemployment or explosions or exploitation (1992: 150).

As an example, J. Davis (1992) draws upon A. de Waal (1989) study on the famine in Darfur in the mid-1980s. A. de Waal (1989) argues that famines were a necessary and routine event among the Darfur; farmers expected to be hungry in the regular periods of scarcity between harvests. Famine which caused death occurred occasionally, and were consistent with the routine experience of scarcity. As J. Davis (1992) notes, what outsiders categorised as a cataclysmic event was, for the Darfuri, an extreme form of a recurrent condition. Famine did not represent a breakdown of social experience, rather, famine was part of ordinary social life (J. Davis, 1992).
J. Davis (1992) suggests that a similar point can be made about people’s experiences with war. For many social groups,

[W]ar is a part of social experience and is embedded in social life [...] not an exceptional horror, but a continuing and embedded indecency; sufferings are part and parcel of social conditions generally, alongside unemployment and other sources of pain (1992: 152).

Just as pain, suffering, and loss are ‘normal,’ so too are the ways in which people cope with loss. J. Davis (1992) again draws upon the work of A. de Waal (1989), who studied how the Darfur responded to famine in the mid-1980s. A. de Waal (1989) noted that the people of Darfur knew what to do in a famine – keep stocks of seeds, take refuge during severe hunger, and return to lands as soon as drought ended to resume agricultural activities.

In a similar vein, Vigh (2008) critiques the concept of crisis as an aberration. Rather, he argues that crisis is an endemic part of many people’s lives. He states,

For most of us crisis is an experience of temporary abnormality primarily related to traumatic events such as violence, disease or bereavement. We experience crisis when a traumatic event fragments the coherence or unity of our lives, which we otherwise take for granted, leaving us to reconfigure the pieces before we normalise our social being and once again go about our lives. Yet, for many people around the world – the chronically ill, the structurally violated, socially marginalised and poor – the world is not characterised by peace, prosperity and order but by the presence and possibility of conflict, poverty and disorder (p. 7).

From this perspective, wars are not necessarily exceptional events, and the suffering and loss resulting also become ‘normal.’ As Das (2006) also notes, over a period of chronic crisis conflict, violence, and poverty become embedded in the social fabric. Those persons caught up in prolonged crisis must make lives in fragmented and unstable circumstances, as waiting for stability is unfeasible. A ‘normalisation of crisis’ occurs, signifying the endemic and prolonged nature of crisis if not the recognition that circumstances are acceptable.

Notwithstanding the ‘stable instability’ endemic in some parts of the world (and the degree of embeddedness in social fabric) it remains worthwhile to observe how people in such situations experience loss and dispossession, and how they structure and make sense of their lives. Colson (1971) observed that displaced Gwembe were concerned with the impact of displacement (and resultant dispersal of kin) on traditional practices such as funereal rituals. These concerns caused an increase in reliance on kin in the immediate
period prior to resettlement, as the kinship network was threatened. However, these networks were severely weakened after the resettlement due to the dissipation of the crisis, paired with divergent ambitions and interests between clans (Colson, 1971). Interaction within the family unit was also became strained, due to resettlement altering the context within which the family was situated. For instance, the heavy labour burden associated with establishing new farms was placed mostly on fathers and sons, which strained relationships. Youths felt unfairly disadvantaged and exploited in their newly-settled communities. Women lost land rights as a consequence of resettlement and also suffered due to the greater workload associated with rebuilding their communities.

T. Kaiser (2008) also emphasized the salience of the loss of funeral rituals, focusing on the loss of ancestral burial plots for Sudanese refugees in Uganda. Traditionally, these Acholi buried family members on the family compound, also maintaining a nearby shrine to other ancestors. Though these practices were no longer possible for the Sudanese refugees, other aspects of the burial ritual became more pronounced in exile. For instance, it is tradition for the family of the deceased to hold a 24-hour event approximately 1 year after their loved-one’s death, composed of prayers, speeches, a large feast, and music and dancing. This part of the funeral ritual has become more developed and lavish in exile.

Suffering due to the loss of access to agricultural land is also frequently reported amongst displaced groups. T. Kaiser (2008) observed that Sudanese refugees in Uganda were provided with small plots of land (one per nuclear family), which were insufficient to allow refugees to practice crop rotation as they would have done in their home land. This loss has been addressed somewhat by refugees developing social relations in their new environment, which has enabled them to enlarge their lands by borrowing or renting additional plots. This has allowed some measure of crop rotation and mitigation of risk in the case of crop failure affecting part of the lands.

The allocation of plots of land by nuclear family formed another hindrance to Sudanese refugees in Uganda, as land had been farmed by clans (not nuclear families) in Sudan (T. Kaiser, 2008). Before displacement, clans lived communally on extended family compounds, a living arrangement not replicated in the exile period. The nuclear-family living arrangement presented a barrier to traditional farming practices; labour-intensive
tasks such as land clearance used to extend to the clan rather than the nuclear family. These refugees have adapted to the new circumstances by forming agricultural work groups based not on clan membership, but on convenient groupings of people, for instance, neighbours and/or church members.

Loizos (2008) too stresses the importance of access to lands for well-being, focusing on Greek Cypriots displaced from their homes. He provides the example of a father who left his farm, due to concerns over his family’s safety during frequent attacks in the mid-1960s. The father decided to return, living in a small cave near his ruined farm. He was arrested and imprisoned, and attempted suicide but was saved via several operations. He continued to suffer from depression whilst in exile. The family was permitted to return to the farm in the early 1970s. According to his son, the father was “cured as soon as he returned to his farm […] I realised that he was his old self; joyful and hardworking” (Loizos, 2008, p. 119). Other protective factors against poor mental health amongst this displaced group included having a strong support network, possessing a ‘strong character,’ starting a business, saving money, writing about traumatic and/or challenging experiences, and focusing on children.

Focusing on the impact of the decline of the copper industry in Zambia from the mid-1970s, Ferguson (1999) observed that formerly comparatively well-off residents of towns and cities along the copper belt faced serious economic deprivation with the decline of the copper industry, along with the hunger and malnutrition. Ferguson (1999) cites a World Bank (1996) report which demonstrated that the prevalence of poverty in urban Zambia increased from 4 percent in 1975 to just under 50 percent in 1994. Life expectancy declined, and under-five and infant mortality increased between 1980 and 1990, though he acknowledges factors beyond poverty such as the AIDS epidemic which would have also contributed to these trends. Other impacts of the decline of the copper industry included changes in social interaction, configurations of identity, the meanings people attached to their lives, an overwhelming sense of despair, and a strong belief that life would continue to worsen (Ferguson, 1999). A similar sentiment is noted by Vigh (2008) in his study on the residents of Bissau who face chronic crises. Chronic disorder and disruption to life are the norm, which causes a “dense feeling of deterioration related to social, economic, political and even identificatory decay” (Vigh, 2008, p. 6).
1.3 Loss and coping in post-Soviet space and Central and Eastern Europe

The notion of loss has also been applied in post-Soviet space and in Central and Eastern Europe after the collapse of communism. C. Humphrey (2002) suggests that Soviet life was dismantled as the communist regime came to an end in Russia and the states which constituted the former Soviet Union. As Hartman (2007), Greenberg (2011) and Fehervary (2002) discuss, the very concept of normality became altered as a result of this fundamental societal shift. For instance, Fehervary (2002) argues that a tendency in many post-Soviet states toward the construction of extravagant houses and accumulation of luxury goods perceived to align with Western standards indicates a search for a new ‘normal.’ In a similar vein, Hartman (2007) observed a trend in Romania toward new architectural projects which were “always under construction, its completion continuously deferred” (pp 188). Normality is always an impending utopia; never actually arriving. These observations are particularly relevant to Georgia, where new skyscrapers and novel constructions have been introduced into many of the main cities and towns as the symbol of a new era, though remain incomplete and empty in many cases (Frederiksen, 2013). Youth in Serbia identified material goods and economic and social status markers as indicative of normality: possessing a car, a good job, and being able to travel (Greenberg, 2011). Conversely, other studies have found that post-Soviet citizens viewed life as ‘normal’ under communism, compared to the difficult economic situations brought on by the capitalist market (Jansen, 2014).

Drawing on Kracauer (1995) and Verdery (1999), Frederiksen (2008) contends that understandings of time became altered in many post-Soviet after the breakup of the Soviet Union. The Soviet system was based on a vision of a steady progression toward a communist future, a vision which was irrevocably demolished when the Soviet Union disintegrated. Instability and uncertainty became the norm, which tended to discourage long-term planning both at the individual governmental levels in Georgia and other post-Soviet states (Frederiksen, 2008; Greenberg, 2011). Such a short-term outlook was a reaction to the lack of predictable reality in which material, personal, and political aspirations could be realised, in Georgia and elsewhere (Greenberg, 2011; Nazpary, 2002). Along with short-term outlooks, a sense of stagnation has also been noted in the post-Soviet sphere and Central and Eastern Europe (Jansen, 2014).
Nazpary (2002) has argued that the chaotic social environment characterising post-Soviet Kazakhstan was exemplified by Kazakhs by the metaphor of ‘bardak,’ which literally means brothel. He explains,

[Bardak] was used to describe different elements of the current situation such as corruption, cynicism, violence, the mafia, lawlessness and arbitrariness of state officials, the dissolution of the welfare state, the dispossession of a wide range of people from economic and social rights, alcoholism, prostitution, ethnic conflicts, despair, suicide and fear of the future. [...] It generally connotes the extreme legal and moral disorder in the social life. When it is used to describe a field of social relations it means that the interaction between people is based on illegal and immoral ways such as chicanery, corruption and use of force. The very arbitrariness inherent in the current situation is described as an absolute disorder (chaos). It is used to describe disorder and lack of control in a person’s mind or life as well. (p. 2).

Nazpary (2002) argues that as state property was expropriated at the end of the Soviet era in Kazakhstan, a small proportion of the population grew very wealthy (creating a ‘new rich’ class) while the majority grew poorer and became dispossessed. Thus, a significant polarisation of society occurred in the wake of the disintegration of the USSR. Dispossession in the former Soviet Union is also discussed by C. Humphrey (1996) to describe those excluded from society through deprivation from property, work, and entitlements. It includes marginalized persons such as refugees, the unemployed, poor, and/or homeless, pensioners and invalids.

Nazpary (2002) argues that the people of Kazakhstan coped with the chaos by developing and relying on reciprocal networks composed of workplace, friendship, kinship, and marriage linkages. He notes that through marriage, the families of the couple create new channels for accessing goods and favours. Reciprocal exchange was already strongly rooted in post-Soviet countries, due to the tendency to demonstrate power through status rather than wealth, and to the shortage of goods (C Humphrey, 1983). Nazpary (2002) warns that the networks to which people turn to cope are weakened by features of chaotic post-Soviet Kazakhstan, including ethnic tensions, the general atmosphere of mistrust, fear and suspicion, and the indifference of the wealthy toward the poor.

Dispossession, loss and coping has also been studied amongst mothers of Russian soldiers killed in the war against Afghanistan (Oushakine, 2006). In many cases, mothers were given very little information on the circumstances of their son’s deaths and were not able to view the body. The pain of losing a child was compounded by the seeming lack of accountability and justice provided by the military authorities. A group of mothers
founded an organisation consisting of mothers of deceased soldiers, providing the opportunity to give and receive support, and bring attention to their son’s military sacrifices through the construction of memorials and other places of remembrance (Oushakine, 2006).

Across the post-Soviet sphere in the wake of the fall of the iron curtain, the high hopes for a better economic future with the fall of the iron curtain were replaced quickly by “anger, resignation and selective nostalgia for the socialist era” (Hann, 2002, p. 94). As it became apparent that the new economic system would not benefit much of the populace, persons became disillusioned with the capitalist system and the influx of consumer goods (C. Humphrey, 1995).

Greenberg (2011) notes how striving for a consumer lifestyle within the context of very limited financial means was a defining experience for much of Serbia’s urban youth. Focusing on consumption patterns in Bulgaria, Creed (2002) observed that rural Bulgarians have sought to minimise consumer purchases. These villagers were wealthier in the socialist era, as state-subsidised consumer necessities yielded discretionary income which was noticeably lacking in the capitalist era. Their circumstances have changed from having money but no goods (in the socialist era), to having goods but no money (in the capitalist era), contributing to a nostalgic attitude toward the communist years (Creed, 2002). Nostalgia for the communist era is noted as well by Jansen (2014) and Nazpary (2002) who found that residents of the former Yugoslavia and Kazakhstan respectively yearned for the stable employment, comparatively higher living standards, and social safety net of the communist system.

Though nostalgia has been noted amongst post-Soviet populations, Merl (2011) warns against over-emphasising this phenomena. He argues that the transition away from the communist system lead to an improvement in the living standards of some segments of the population, notably younger generations who had a better chance than their older counterparts of adapting to the new order. On the tendency for some interviewees to omit the negative features of the communist order, he states, “people construct their past as they would like it to have been” (p. 38).
1.3.1 Loss and coping in post-Soviet Georgia

The character of dispossession and loss in former Soviet states has been an uneven process, with the unique histories, social structures, and geographies of these states shaping problems and opportunities. Most Georgians during the Soviet era enjoyed a modest but secure lifestyle (Pelkmans, 2006). A Georgian man who had been the chairman of a collective farm in Western Georgia during the Stalinist era remembers,

> At that time [the Stalinist era] everyone worked on the collective farm. People were honest; it was unthinkable that someone would take even one kopeck as a bribe. Everyone contributed and that is why we prospered. Look at what we have now. The tea plantations have turned into forest, no one buys our fruits, and we do nothing about it. Then we lived well, we had a life. Now, we merely exist (Pelkmans, 2006, p. 39).

An elderly Georgian man also reminisces, “During Communism we had more freedom; we still had our own lives. Now, we are losing everything” (Pelkmans, 2006, p. 121).

Nazpary (2002)’s concept of absolute disorder resonates with the Georgian context, especially in the chaotic period as the USSR disintegrated and the Republic of Georgia first gained independence. Post-Soviet Georgia was characterised by a ‘chaotic mode of domination,’ which made it impossible for the populace to discern or understand who was in control of the country, or the political intentions of its leaders. Since becoming independent in 1991 (as described more fully in Chapter 4), widespread poverty rapidly set in, and the gap between rich and poor Georgians increased dramatically (Dudwick, 2003; Pelkmans, 2006). Though the fall of the Soviet Union ushered in a flow of people and goods across newly-opened borders, the expected economic benefits largely did not materialize across Georgia. Rural areas especially considered to suffer from poor infrastructure, and a lack of economic opportunities and access to national media sources (Mekhuzla & Roche, 2009). The low levels of fluency in the Georgian language disadvantaged minority groups such as Azeris and Armenians, who previously were able to access resources such as the media and the higher educational sector due to knowledge of the Russian language (Mekhuzla & Roche, 2009). Moreover, the modest economic benefits which did occur (notably evident especially along the border region with Turkey) were judged by some Georgians a price too high to pay for the negative impacts. For instance, the liberalization of borders were viewed by some Georgians as causing the spread of disease, chaos in their local markets, and a decline of local values (Pelkmans, 2006). Most Georgians experienced a drastic decline in their standard of living with the dissolution of the Soviet Union. An elderly Georgian man interviewed in Pelkmans
(2006) stated, “[A]fter the disintegration of the Soviet Union we expected that life would become better, but unfortunately that didn’t happen” (p. 178). Moreover, some Georgians challenge the assumption that trade and access to goods had been limited during the Soviet era. Another interviewee in Pelkmans (2006) explained,

We used to have European goods over here, from Czechoslovakia, Yugoslavia, and even from the Netherlands and England. The government exchanged oil and metal for cloth and other products, so that we could buy coats and trousers. [...] You could get everything, although you had to put some effort into it. Back then you needn’t worry about most things. You could always buy bread, tea, food, and clothes. Maybe it was difficult to obtain luxury goods, but that was not too serious a problem. And once you got it you were happy (p. 185).

Manning and Uplisashvili (2007) notes that industrial production of food commodities virtually disappeared after the fall of socialism, leading to a large proportion of the populace relying on subsistence strategies, small-scale food production and selling excess production in markets.

A qualitative study on income distribution and poverty in Georgia in 1996 revealed that the poorest respondents, irrespective of location within Georgia, struggled to maintain physical sustenance. Common worries amongst heads of the poorest households included securing adequate food, maintaining property, affording heating throughout the cold winter months, and providing clothing for children (Dudwick, 2003). The lack of food was dire in some cases, with rural and urban families alike reporting frequently going without food for several days at a time. Food was slightly easier to come by in rural areas, due to the availability of small plots of land upon which fruits and vegetables could be sown. Hunger in rural areas followed a cyclical pattern, peaking in the spring when the previous year’s food stock had been depleted and the current year’s harvest months away. Possessing a cow was reported to make a life-or-death difference, as the dairy products could be consumed or sold. A Georgian respondent in Dudwick (1997) stated, “wealth is measured by the absence or presence of cattle” (p. 215).

Inadequate access to water was another frequently-mentioned difficulty faced by rural Georgians in the 1996 study (Dudwick, 2003). In 1989, only 40% of rural households had piped water. This percentage only decreased in the years following, due to a lack of maintenance and overloading of existing infrastructure. The situation in South Ossetia was particularly bad with respect to water access and quality. Even prior to independence, the water supply was plagued with problems, as evidenced by a 1988 typhoid epidemic
linked to contaminated water supply. Villages near Tskhinvali, the capital of South Ossetia, had their water supply interrupted in 1991 due to damage sustained to water pipes via war and earthquake.

The Georgian respondents in Dudwick (2003)’s 1996 study also reported that the health of family members had worsened since independence in 1991. They cited high prices for treatment and medicine as the major barrier to good health. Services which had been covered during the Soviet era, including home visits, ambulance transfers, and even vaccinations were considered out of reach. Moreover, the Soviet-era imperative to make informal payments to medical staff for treatment was an additional perceived impediment to seeking health care, even if these informal payments were no longer demanded. Alcohol use among youth also rose in the post-Soviet era, which was frequently excused by the older generations who felt that the youth had no prospects for a better future (Dudwick, 2003). South Ossetia suffered an increase in tuberculosis following independence, with the high cost of treatment discouraging access to a health care system which was barely functioning. Tuberculosis was especially a problem for IDPs in South Ossetia, where it spread quickly due to the cold, overcrowded, and sometimes unhygienic conditions in which IDPs were forced to live. Rates of vaccine coverage also dropped in South Ossetia, though NGOs offered free childhood vaccination in this area in the 1990s.

The poor state of homes and property was another area commented on by Dudwick (2003)’s respondents. Poor families struggled with deteriorated and dangerous housing, in many cases damaged through civil conflicts and natural disasters such as earthquakes. Moreover, furnishings and other belongings were non-existent as they were commonly sold to cover basic living expenses.

As described in Chapter 4, displays of hospitality and generosity are part of Georgian culture, and Caucasian society more generally. Displays of wealth through hosting lavish feasts are a mechanism for families to maintain self-respect and social standing within their community. Pelkmans (2006) who studied loss amongst Georgians living alongside the Georgian-Turkish border, found that social relations were severed by the closure of this border from 1937 to 1988. The re-opening of the border was initially met with many happy reunions for those families who had the misfortune of being separated by the
border. However, these relations soon soured. The Georgians reported that their relatives had changed and become more Turkish; these Turkish relatives no longer heeded the imperative to demonstrate hospitality and generosity to the degree demonstrated by those who lived on the Georgian side of the border. Thus, the loss of social relations due to a physical barrier imposed in 1937 was perpetuated many decades after the physical barrier had been removed, with Georgians expressing dissatisfaction with their relative’s shortcomings in reciprocating their hospitality. Pelkmans (2006) notes, “although the two sides had physically drawn closer in the years after 1988, this softening of the physical divide was accompanied by a hardening of cultural boundaries” (p. 81).

As discussed in greater depth in Chapter 4, funerals are extraordinarily important events in both Georgian and Ossetian culture. They provide an opportunity for the family of the deceased to display their solidarity, pride, and prosperity to the community, and for the family’s community network to provide tangible support to offset the financial burden of the funeral. The widespread poverty following independence hampered such rituals, along with other socially-prescribed rituals such as giving and receiving gifts. The inability to afford a lavish funeral for a family member was reported as causing a decrease of social status, and feelings of shame (Dudwick, 2003). Dudwick (2003) notes that poor Georgians now avoid being either a host (due to having nothing to serve) or a guest (due to having nothing to give to the host). The result has been an increase in isolation amongst Georgian families, who have traditionally been hospitable.

Dudwick (2003)’s 1996 study also shows how Georgian children have been affected by these losses. Poor children suffer due to poor nutrition, insufficient clothing and inadequately heated homes. Children in IDP families show behavioural and psychological disturbances resulting from the civil wars of the 1990s and following displacement. Some have discontinued their education in order to assist their parents in making an income. Poor children also tended to drop out of school after ninth grade, after which a fee paid to the school is necessary to continue to the tenth and eleventh grades. In addition to the fees, parents struggle to pay for necessary school supplies. University-age children also encountered financial barriers to continuing their studies, even though IDPs were in some cases offered a 50 percent discount on University fees. Teachers at Universities and other educational institutions were poorly remunerated, often months late. At a University in
Tskhinvali, the majority of faculty members migrated to Russia due to war and natural
disasters. The lack of teacher retention and resulting deterioration of the educational
system is all the more striking considering that the Georgian population was once among
the most educated of the Soviet Union.

The arrival of goods from the West in the transition from socialism to postsocialism
caused a ‘crisis of values,’ as citizens could directly compare socialist brands to Western
ones concretely (C. Humphrey, 2002). The penetration of Western goods was correlated
with the disappearance of socialist brands. These disappearing brands later became the
focus of nostalgia; indeed some have been resurrected in the capitalist era (Manning &
Uplisashvili, 2007). The introduction of new ‘brands’ has relied on combining images of
traditional Georgia with new capitalist motifs. For example, the industrial production of
beer in Georgia is now often presented as following ‘traditional’ methods, even though
Georgian wine making has a much longer tradition. Nonetheless, the socialist imagery of
traditional production assuages Georgian consumer’s anxieties, misunderstandings, and
general suspicion toward branded consumer goods (Manning & Uplisashvili, 2007). New
beer brands in Georgia have appropriated Georgian scenes of traditional consumption and
reference traditional brewing methods, whilst simultaneously represent their products as
linked to European modernity and possessing the desirable properties of Western firms
(Manning & Uplisashvili, 2007). This signifies a linkage between nationalist imagery of
a Georgian nation which has existed since time immemorial, and a progressive nation
moving forward into European modernity (Manning & Uplisashvili, 2007).

Due to the losses detailed above, in the mid-1990s poor Georgians in Dudwick (2003)
expressed nostalgia for the paternalistic Soviet period, when they were guaranteed
financial security. Many Georgians expected the government to step in and solve the
unemployment crisis by creating jobs for citizens.

1.3.1.1 Loss and coping among Georgian Internally Displaced Persons

The data for Dudwick (2003)’s work were collected in 1996. As of 1995, there were
approximately 250,000 IDPs in Georgia (an additional estimated 100,000 refugees had
also fled from Georgia to Russia), due to the civil conflicts of the 1990s (as described in
Chapter 4). Approximately half of the 250,000 within Georgia lived in collective centres
including kindergartens, hostels, hospitals, and other public buildings in unhygienic and overcrowded conditions. The humanitarian assistance they received in some cases caused resentment among the (non-displaced) local populations, who saw their own circumstances just as worthy of intervention. The local population also viewed IDPs as unwanted competition for local resources, including job opportunities.

Despite the desperate situations of many Georgians in the years after independence, Dudwick (2003) argues that IDPs are a group particularly vulnerable to poverty. Amongst those areas with high numbers of IDPs (resulting from the civil wars of the 1990s, as discussed in Chapter 4), loss of homes and property was explained as leading to poverty. As such, the loss of property suffered by IDPs compounded the losses experienced by many Georgians. Though many suffered financial losses with the end of the Soviet era, internally displaced Georgians suffered further through displacement off their land which could have provided at least subsistence farming opportunities.

Throughout the 1990s, IDPs and other poor Georgians coped with economic hardship through subsistence farming, reducing expenditure (including expenditure on health care, transportation, home repair, and basic utilities such as heating), forgoing social and recreational activities, and selling assets, such as personal property (jewellery, clothing), furniture, cars, and homes. Borrowing in order to invest in entrepreneurial endeavours and cover daily expenses was also common. Poor families also engaged in gardening to grow as much food as they could, selling any excess. In South Ossetia, people who could not work their land leased it to others, in exchange for some money and a share in the harvest (Dudwick, 2003). Finally, many families sent members abroad for work, surviving on remittances sent home. This practice was notably prevalent in South Ossetia, where high unemployment even before the dissolution of the Soviet Union caused approximately half of the population to relocate to North Ossetia in Russia. This large-scale migration facilitated trade between North and South Ossetia, as residents of the latter could depend on family and friends in North Ossetia to accommodate them and assist in other ways.
Dudwick (2003) found that many IDPs from Abkhazia had worked as professionals prior to displacement. After becoming displaced, they found themselves even more cut off from professional opportunities than the local ‘host’ population, who were also struggling to obtain and maintain employment. IDPs who fled without any possessions were unable to sell property for profit. Their only means of subsistence in the immediate post-war period came in the form of humanitarian relief distributed by the United Nations or international non-governmental organizations (NGOs). The Government of Georgia also provided modest relief to IDPs. IDPs within South Ossetia suffered from overcrowding, not only due to buildings damaged by war but also to buildings damaged by the 1991 earthquake.

Poor mental health was commonly reported by Georgian IDPs in the 1990s (Dudwick, 2003). Those who had settled in urban areas lacked access to land, and so were unable to grow their own food. Many turned to beggars, which they found humiliating. Many respondents in Dudwick (2003) reported a deep sense of insecurity about the future, along with isolation from their host populations.

The literature discussed above represent a significant body of work which assists in understanding how persons experience loss and cope within post-Soviet contexts, including Georgia. This thesis aims to contribute to coping typologies and loss frameworks which may have a wider applicability, thereby contributing to these areas of research. Therefore, in later empirical chapters I draw upon the Conservation of Resources theory (Hobfoll, 1989) along with a coping typology developed by Skinner, Edge, Altman, and Sherwood (2003) to organize and interpret loss patterns and coping responses respectively reported by the internally displaced Georgian women included as participants in this thesis.

Chapter 2 encompasses a thorough discussion and rationale for selecting the loss and coping frameworks, the effects of conflict and displacement on mental health, theories of coping in the face of exposure to stress, and the overall aim and objectives of the thesis. Chapter 3 presents a systematic review on coping strategies among conflict-affected persons. This is followed by Chapter 4 describing the research context framing the thesis, which is followed by Chapter 5 providing the methodology of the field research used for the thesis. The methodology Chapter is followed by three empirical findings Chapters (6-
Chapter 2: Background

In this Chapter, I first discuss internal displacement. This is followed by an overview on the effects of conflict and displacement on mental health. Next, I present theories of coping in the face of exposure to stress. The Chapter ends with the overall objectives of the thesis.

2.1 Internal displacement

Internally displaced persons (IDPs) are defined as persons who have been forced to flee their homes as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border (Kälin, 2008). As of the end of 2011 (the starting period of this thesis), there were approximately 26.4 million IDPs worldwide (Albuja et al., 2012). IDPs differ from refugees as the latter cross state borders, though they leave their homes for the same reasons as refugees. While refugees are entitled to protection and assistance from host national governments and the United
Nations High Commission for Refugees (UNHCR), there is no legal obligation for the extension of such rights to IDPs due to issues of national sovereignty. As a result, IDPs were historically marginalised from international humanitarian relief and support (Stites & Tanner, 2004; United Nations, 2005). While efforts have been made to improve the protection and care of IDPs over the past decade (OCHA, 2004), including an expanded role for UNHCR with IDPs (UNHCR, 2008), they still generally experience less protection and social support than refugees (Hampton, 2002). IDPs often live in precarious areas characterized by lack of access to health services, poverty, poor living conditions, uncertainty, destruction of cultural and social capital, discrimination, and marginalization (De Jong, 2002; IDMC, 2015a, 2015b, 2015c; Inter-Agency Standing Committee, 2007; Miller & Rasco, 2004; Silove, 2005b).

2.2 Conflict, displacement, and mental health

Mental health is recognized as a key public health issue for populations affected by war and conflict (Inter-Agency Standing Committee, 2007; L. Jones et al., 2009; Mollica et al., 2004). Much of the research on mental health of war-affected populations focuses on the negative impact of exposure to traumatic events (De Jong et al., 2003; De Jong et al., 2001; Lopes Cardozo, Kaiser, Gotway, & Agani, 2003; Lopes Cardozo, Vergara, Agani, & Gotway, 2000; Mollica et al., 1993; Porter & Haslam, 2005; Priebe, Bogic, Ashcroft, et al., 2010; Shrestha et al., 1998; Steel et al., 2009; van Ommeren et al., 2001). Causes of poor mental health outcomes among war-affected populations include traumatic events such as mass violence (Mollica, McInnes, Poole, & Tor, 1998), torture (Steel et al., 2009), rape (Baelani & Dunser, 2011; Kelly, Betancourt, Mukwege, Lipton, & Van Rooyen, 2011; Loncar, Medved, Jovanovic, & Hotujac, 2006; Longombe, Claude, & Ruminjo, 2008; Schalinski, Elbert, & Schauer, 2011), the abduction, murder, or disappearance of family members and friends, as well as the loss of social support networks, social roles, livelihoods, employment, and assets (Miller & Rasco, 2004; Roberts & Browne, 2011).

Numerous studies provide evidence that women carry a higher burden of common mental disorders (CMDs) than men in post-conflict settings although this is inevitably very context specific (Steel et al., 2009). For example, conflict-affected women reported significantly elevated symptoms of depression compared to their male counterparts in
Southern Sudan (Roberts, Damundu, Lomoro, & Sondorp, 2009) and Sri Lanka (Senarath, Wickramage, & Peiris, 2014). Higher rates of depression have also been noted among IDPS in Nepal (Thapa & Hauff, 2005) and Mexico (Sabin, Lopes Cardozo, Nackerud, Kaiser, & Varese, 2003), as well as Cambodian refugees near the Thai border (Mollica, Cui, McInnes, & Massagli, 2002).

A review focusing on posttraumatic stress disorder (PTSD) prevalence among survivors of war trauma and torture found some evidence that females are at greater risk than males to develop PTSD (H. Johnson & Thompson, 2008). Female gender was linked to symptoms of PTSD amongst conflict-affected persons in southern Sudan (Ayazi, Lien, Eide, Swartz, & Hauff, 2014; Karunakara et al., 2004), Iraqi Kurdistan (Dworkin et al., 2008), Algeria and Cambodia (though not in Ethiopia or Gaza) (De Jong et al., 2001), Albanian refugees in Kosovo (Fernandez et al., 2004), and war-affected residents in Lebanon (Farhood & Dimassi, 2012). Female sex was associated with symptoms of anxiety amongst Bhutanese refugees in Nepal (Shrestha et al., 1998; van Ommeren et al., 2001), IDPs in Lebanon (Yamout & Chaaya, 2011), war-affected residents in five Balkan countries (Priebe, Bogic, Ajdukovic, et al., 2010), and returnee Guatemalans (Sabin, Sabin, Hyoung, Vergara, & Varese, 2006).

Female sex was associated with both PTSD and depression amongst IDPs in Uganda (Roberts, Ocaka, Browne, Oyok, & Sondorp, 2008) and Columbia (Richards et al., 2011), with depression and anxiety amongst IDPs in Indonesia (Turnip & Hauff, 2007) and North Korean refugees in China (Yu & Jeon, 2008), and with depression, anxiety, and PTSD amongst conflict-affected Afghans (Lopes Cardozo et al., 2005; Scholte et al., 2004), and with depression, anxiety, and somatisation amongst conflict-affected persons in northern Sri Lanka (Somasundaram & Sivayokan, 1994). Internally displaced female participants in Darfur showed more somatic symptoms than their male counterparts in the study by Hamid and Musa (2010), though there were no differences observed regarding PTSD, depression, or anxiety. Female sex was strongly linked with general poor mental health amongst IDPs in Uganda (Roberts, Ocaka, Browne, Oyok, & Sondorp, 2009), Serbians in Kosovo (Salama, Spiegel, van Dyke, Phelps, & Wilkinson, 2000), and war-affected Afghanistan residents (particularly widows) (Miller et al., 2006) Similarly Sachs, Rosenfeld, Lhewa, Rasmussen, and Keller (2008) found that Tibetan refugee women in
India reported significantly higher symptoms of anxiety, depression, PTSD, and somatization than their male counterparts.

Paralleling these trends, conflict-affected women who have fled to high-income countries also report elevated mental health problems than their male counterparts. For instance, a study on asylum seekers in Australia found an association between high anxiety scores and female sex (Silove, Sinnerbrink, Field, Manicavasagar, & Steel, 1997). Amongst refugees from the former Yugoslavia in Germany, Italy, and the UK, female gender was associated a higher odds of mood disorders (including major depression dysthymia, hypomania, and mania), whilst male gender was associated with substance use disorder (Bogic et al., 2012). Studies on Kosovar and Bosnian refugees in the United States found that female refugees had higher levels of PTSD and depression than their male counterparts (Ai, 2004; Vojvoda, Weine, McGlashan, Becker, & Southwick, 2008). Female tortured refugees in Finland from a variety of locations had higher rates of PTSD and depressive symptoms than their male counterparts in Schubert and Punamaki (2011). The prevalence of somatization and anxiety was significantly higher among female North Korean refugees in South Korea than their male counterparts (H. Kim et al., 2011). Finally, a study on mental health of Afghan, Iranian and Somali refugees in the Netherlands found an association between female gender and symptoms of PTSD, depression, and anxiety (Gerritsen et al., 2006). However, not all studies on mental health of refugees in high-income countries show poorer outcomes for women. For instance, a study on Burmese refugees in Australia found no association between mental health outcomes and sex (Schweitzer, Brough, Vromans, & Asic-Kobe, 2011). Renner and Salem (2009) found that women refugees and asylum seekers from Chechnya, Afghanistan, and West Africa reported significantly higher somatic symptoms than their male counterparts, though no sex-based differences were reported concerning levels of PTSD, anxiety, or depression.

The variance in mental health by sex among conflict-affected persons (in low-, middle-, and high-income settings) reflect variances in stable settings, though a meta-analysis has revealed that refugees report poorer mental health than non-refugees (Porter & Haslam, 2005). Depression is frequently reported to be twice as common in women compared with men across diverse societies (Astbury, 2001). A sample drawn from the general
population in the United States revealed that the risk for PTSD following traumatic events was twofold higher in women than men (Breslau, 2002). Factors contributing to poorer mental health among women worldwide include discrimination, low educational status, low employment status and pay, single parent status, insecure housing, poor social support, and weak social capital (Astbury, 2001). There is evidence to suggest that violence against women at the hands of male intimate partners (Campbell, 2002; C. Clark, Bloom, Hill, & Silverman, 2009; Devries et al., 2013; Nilsson, Brown, Russell, & Khamphakdy-Brown, 2008; Tolin & Foa, 2006; WHO, 2013) and in-laws (Ali, Isar, Ali, & Janjua, 2009) contribute to women’s poor mental health vis-a-vis men, including elevated rates of depression (Scholle, Rost, & Golding, 1998), suicidal behaviour (Leenaars & Lester, 1999; Olson et al., 1999; E. Stark & Flitcraft, 1995), and PTSD (Astin, Lawrence, & Foy, 1993). Gender-based risk factors for mental disorders amongst perinatal mothers in stable low and lower-middle income countries include low socioeconomic status, unintended pregnancy, being younger, being unmarried, having an unsympathetic partner and/or hostile in-laws, experiencing intimate partner violence, and lacking sufficient emotional and practical support (Fisher et al., 2012). However, not all studies show that women are more likely to be victims of intimate partner violence than men, nor that violence has a larger negative impact on women’s than men’s mental health (see Fergusson, Horwood, & Ridder, 2005). Other literature explores the impact of war on families rather than on individuals. For instance, male alcohol use and parental (and child) exposure to war-related events are implicated in the increase in violence between adults, and between adults and children (Catani, Jacob, Schauer, Kohila, & Neuner, 2008; Catani et al., 2009; Ezard et al., 2011; Haj-Yahia & Abdo-Kaloti, 2003; Saile, Ertl, Neuner, & Catani, 2014).

Within societies affected by war and conflict, apparent gendered differences in mental health outcomes may be partially mediated by the cultural mores which dictate how women are treated. Men and women may face different types of hardships in the displacement era (following initial traumatic events). For instance, Miller et al. (2006) attribute the elevated mental distress among Afghanistan women (particularly widows) to Afghani cultural characteristics which emphasizes family honour, which in some cases entails damaging practices toward women including early marriage, violence in the home, and the failure to accord women legal and human rights. As the Taliban dictated that men
escort female relatives whenever they leave their home to access resources such as education, employment, and healthcare, widows and other women without male relatives are at considerable disadvantage which places them at elevated risk of mental illness including depression, PTSD, and anxiety (Rasekh, Bauer, Manos, & Iacopino, 1998; Shin, Kim, Liw, & Kim, 2009). Similar observations have been made elsewhere; in their study on war-affected Pakistanis and Afghani refugees in Pakistan, Husain, Chaudhry, Afridi, Tomenson, and Creed (2007) found that a greater proportion of women than men reported problems regarding housing, neighbours, lack of money, relationships with friends and family, and illness or deaths in the family. They attribute differences between men and women regarding mental health outcomes in post-conflict settings to these environmental differences, rather than to gender itself. These findings are part of a set of research which attributes gendered differences in mental health outcomes to differences in type of traumas experienced rather than to gender itself (H. Johnson & Thompson, 2008). Conflict-affected females frequently face challenges related to sexual assault (Liebling & Kiziri-Mayengo, 2002), along with the loss of spouse (and associated increased responsibility of single-handedly managing homes and looking after children) (Morina & Emmelkamp, 2012), while their male counterparts may deal with detention, abduction, and combat (Mollica, Wyshak, & Lavelle, 1987; Somasundaram, 1994).

However, other evidence suggests that the link between female gender and poor mental health persists even when controlling for trauma type (Eytan et al., 2004; Tolin & Foa, 2006). Moreover, war traumas are not strictly gendered, as demonstrated by research focused on the distress faced by girl soldiers (Stevens, 2014), and on instances of sexual violence committed against men during war (Loncar, Henigsberg, & Hrabac, 2010). A cross-sectional survey in post-conflict Liberia reported that just over 30% of combatants were female and one-third of male combatants experienced sexual violence (K. Johnson et al., 2008). Female combatants have been noted in Northern Uganda as well, though female and males were commonly given different tasks with men fighting more often than women (Annan, Blattman, Mazurana, & Carlson, 2011).

Conflict-affected women may be vulnerable to poor reproductive health outcomes (Al Gasseer, Dresden, Keeney, & Warren, 2004; Gagnon, Merry, & Robinson, 2002; Inter-Agency Working Group on Reproductive Health in Crisis, 2010; Jamieson et al., 2000).
The hardships associated with being pregnant in an instable setting present unique challenges to women, since they struggle to meet not only their family’s needs but their own physical needs within the context of fragile health systems (Akesson, 2008). Georgian women who were pregnant in whilst fleeing in 2008 faced a lack of access to reproductive health services and an increased risk of complications during pregnancy and delivery (UNFPA, 2008). A study on Syrian refugee women in Lebanon found high rates of gynaecologic conditions (including menstrual irregularity, severe pelvic pain, and vaginal infections), pregnancy and delivery complications, and poor birth outcomes (including low birthweight and preterm birth) (Masterson, Usta, Gupta, & Ettinger, 2014). Vaginal discharge, pelvic pain, and amenorrhea were commonly reported among women conflict-affected women in Bosnia-Herzegovina during the war in the former Yugoslavia (Frljak, Cengic, Hauser, & Schei, 1997). Lack of access to perinatal services and little control over contraceptive use and spacing of children were noted among internally displaced women in South Darfur, Sudan and war-affected Afghan women (G. Kim, Torbay, & Lawry, 2007; Rasekh et al., 1998, respectively). It has been suggested that increases in stillborn and neonatal mortality in Split during the wars in Croatia and Bosnia and Herzegovina were due to inadequate gynaecological care during war-time (Pavlinac et al., 2008). A significant rise in preterm, low-birth-weight and caesarean-section births were noted in Libya during the 2011 conflict (Bodalal et al., 2014). Among conflict-affected women located in high-income countries, reproductive health issues have been observed such as high parity, closely-spaced pregnancies, female genital mutilation (Harris, Humphries, & Nabb, 2006), high rates of stillbirths and low birthweight babies (B. Arnetz, Sokol, Drutchas, Kruger, & Jamil, 2012), and an increase in pregnancy-induced hypertension, pre-eclampsia, and miscarriage (Makhseed, Musini, Hassan, & Saker, 1999).

Issues around domestic violence amongst conflict-affected women have also been highlighted in the literature. Avdibegovic and Sinanovic (2006) observed that 75.9% of surveyed women (composed of conflict-affected, refugee, and women receiving psychiatric treatment) in Bosnia and Herzegovina experienced at least one type of abuse (including physical, sexual, psychological). Women who faced abuse had significantly higher rates of anxiety, depression, and somatization than those who were not abused. Qayum, Mohmand, and Arooj (2012) observed high rates of physical (perpetrated by
strangers), domestic, and emotional violence amongst IDP women in Pakistan, reported by 42%, 46%, and 56% of women respectively. Amongst refugees in Ethiopia, Feseha, Mariam, and Gerbaba (2012) found that 31% of women with intimate partners had experienced physical violence. Risk factors included having a farming background, knowing other women who experienced abuse, being a Muslim, and having an alcoholic partner. Finally, Al-Modallal, Hamaideh, and Mudallal (2014) found a significant association between spousal abuse and depression and anxiety symptoms amongst Palestinian refugees in Jordan.

Some researchers have observed an increase in violence against conflict-affected women in post-conflict settings (C. Clark et al., 2010; Falb, McCormick, Hemenway, Anfinson, & Silverman, 2014; McGinn, 2000; Saile, Neuner, Ertl, & Catani, 2013; Somasundaram & Sivayokan, 2013; L. Stark & Ager, 2011; Usta, Farver, & Zein, 2008; WHO, 2013). Thirty per cent of Syrian women refugees in Lebanon women disclosed exposure to conflict-related violence, abuse, and/or sexual violence, with many women reporting multiple types of violence (Masterson et al., 2014). Though the majority of these Syrian women who experienced violence reported suffering from psychological difficulties, less than 9% accessed mental health services. There is some evidence to suggest that refugee women in high-income countries also face an increase in violence in the home (Darvishpour, 2002; Nilsson et al., 2008).

Some researchers have linked violence against women in post-conflict settings to shifting gender roles which have occurred in some cases. Notably, conflict-affected women have been observed taking over the role of main earner for the household. For instance, Meffert and Marmar (2009) found that conflict between refugee Darfur couples in Egypt stem from gender role changes due to male unemployment, leading to violence against women and children. Similarly, Steel, Silove, Bird, McGorry, and Mohan (1999) found that the breakdown of Tamil society due to conflict in Sri Lanka caused women to take on more responsibilities, leading to elevated stress. Other research focusing on refugees and immigrants in the high-income countries has found that women may work longer hours and earn more than their partners, leading to conflict in the household (Menjivar, 1999; Menjivar & Salcido, 2002). In other research, women who have lost male family members have stepped into the breadwinner role to fill the void left behind (Welsh & Brodsky,
Some studies observe that displaced women work a double or even triple shift, participating in paid labour outside the home as well as reproductive labour in the home, in order to maintain the delicate balance of power with male relatives (Kudat, 1982; Menjivar, 1999).

The elevated rates of problematic alcohol use among displaced men (Ezard et al., 2011; Roberts, Ocaka, Browne, Oyok, & Sondorp, 2011; Somasundaram & Sivayokan, 1994; Weaver & Roberts, 2010) may be linked with these changing gender roles amongst displaced populations. In her study on Guatemalan and Salvadoran immigrant women in the United States, Menjivar (1999) related men’s drinking to their inability to fulfil the socially-expected ‘breadwinner’ role, which they mitigated by perpetuating a ‘macho’ image which included excessive alcohol use and victimizing women. One of her respondents related,

The Salvadoran man continues to be macho here….The man becomes dependent on the woman. The woman goes to work, not the man. But men bring machismo with them, and the woman takes on more responsibility….When men see themselves like that, they drink and that only brings a lot of problems at home….The women end up suffering a lot because the men let their frustrations out by beating the women.

Similarly, Lipson (1991) observed that substance use and family violence increased among refugee Afghani men in the United States, in response to their frustration over loss of status related to unemployment and shifting gender roles. Others link men’s alcohol use post conflict to their roles as combatants during war. An extensive literature exists examining this link, focusing on veterans from the United States (Boscarino, 1981; Jakupcak et al., 2010; Kulka et al., 1990; Shipherd, Stafford, & Tanner, 2005), Croatia (Karlovic, Solter, Katinic, & Potkonjak, 2004; Thaller, Breitenfeld, & Buljan, 1997; Zoricic, Karlovic, Buljan, & Marusic, 2003), Bosnia (Sakusic et al., 2009), the United Kingdom (Browne et al., 2008; Harvey et al., 2011; Hooper et al., 2008; Rona et al., 2010), Australia (McKenzie et al., 2006), and Canada (Herrmann & Eryavec, 1996).

Compared to the set of literature devoted to alcohol use amongst former combatants, many fewer studies focus on alcohol use amongst war-affected populations in low-income countries. In their study on alcohol disorder amongst internally displaced persons in northern Uganda, Roberts et al. (2011) found a pervasive influence of gender on
alcohol disorder, with men 7 times more likely than women to exceed the threshold level for alcohol disorder. The prevalence of alcohol dependence was 60.5% amongst male internally displaced Croatians, significantly higher than the 8.1% observed amongst their female counterparts in Kozaric-Kovacic, Ljubin, and Grappe (2000). Similarly, multi-country studies on war-affected persons have found an association between male sex and substance use disorder (Ezard et al., 2011; Priebe, Bogic, Ajdukovic, et al., 2010). Obstacles to addressing harmful alcohol use in post-conflict countries include the lack of priority given to the problem vis-à-vis other pressing issues, limitations in resources to mount and enforce effective policies, compounded by a powerful alcohol industry asserting a foothold in lucrative future markets (Wallace & Roberts, 2014).

### 2.4 Theories on coping

Coping is a contested concept which has been defined in a variety of ways. One commonly used definition by Folkman and Lazarus (1980) is an attempt to master, tolerate, or reduce internal or external stressors. The following section covers the major theorists and approaches to coping.

#### 2.4.1 Early research on defense mechanisms

Current research into coping mechanisms has its roots in Freud’s concepts of ‘defense’ and ‘repression’ (Frydenberg, 2002; Parker & Endler, 1996), the former designated as a general term for the ego’s struggle against unpleasant ideas and feelings, and the latter conceived as a special type of defense (S. Freud, 1959/1926). Freud’s concept of ‘defense’ was developed further by his daughter Anna Freud, who summarized 10 defense mechanisms put forth by her father across various writings (regression, repression, reaction formation, isolation, undoing, projection, introjection, turning against the self, reversal, and sublimation) and added a further 5 mechanisms (identification with the aggressor, ego restriction, denial in fantasy, intellectualization, and altruistic surrender) (A. Freud, 1946/1936). Anna Freud’s contributions to the study of defense mechanisms were significant in several aspects. Notwithstanding the widespread adoption of her typology by subsequent researchers, she promoted the stance that individuals tend to use only a select few defense mechanisms, despite the availability of many potential mechanisms (A. Freud, 1946/1936).
These early theoretical developments spurred innovations in the assessment of defense mechanisms. An early self-report measure of defense mechanisms, presented by Haan (1965), was developed using items from the Minnesota Multiphasic Personality Inventory (MMPI) (Hathaway & McKinley, 1943) and the California Personality Inventory (CPI) (Gough, 1957). This measure made an important distinction between coping mechanisms (conceived as adaptive activities) versus defense mechanisms (conceived as non-adaptive strategies), though the work was still within the realm of defense mechanism research. However, this was an important development as it treated the construct of coping as separate from the defense mechanism construct. Haan (1965) states:

> Coping behavior is distinguished from defensive behavior, since the latter by definition is rigid, compelled, reality distorting, and undifferentiated, whereas, the former is flexible, purposive, reality oriented, and differentiated (p. 374).

During the 1970s and 1980s, the distinction between coping and defense mechanisms was increasingly solidified as research into coping responses burgeoned, reflecting an increased interest to study conscious strategies employed by individuals facing stressful situations (Lazarus & Folkman, 1984; Parker & Endler, 1996).

2.4.2 Folkman and Lazarus’s transactional theory of stress and coping

The transactional theory of stress and coping, put forth by Folkman and Lazarus (1980; 1984) became a key theory in the area of coping responses. Their theoretical framework proposes a transactional relationship between the person and the environment. As described below, the recursive processes between appraisal and coping mediate this relationship.

2.4.2.1 Appraisal

Appraisal is a “cognitive process through which an event is evaluated with respect to what is at stake (primary appraisal) and what coping resources and options are available (secondary appraisal)” (Folkman & Lazarus, 1980, p. 223). They distinguish three types of primary appraisal: irrelevant, benign-positive, and stressful (Lazarus & Folkman, 1984). Irrelevant appraisal occurs when an encounter with the environment has no implications for a person’s well-being. If an encounter with the environment preserves or improves a person’s well-being, a benign-positive appraisal will occur along with positive emotions such as happiness or peacefulness.
Of most relevance to the concept of coping are stressful appraisals, which comprise three sub-types: harm/loss, threat, and challenge (Lazarus & Folkman, 1984). If a person has been injured or incapacitated in some way, such as a loss of loved one, physical or mental harm or illness, the harm/loss stress appraisal will occur. The threat appraisal, in contrast, occurs when such a loss or harm is not actual but anticipated. This appraisal is characterized by negative emotions such as fear, anxiety, and anger, and invokes anticipatory coping. Such coping involves preparing for expected harm. These emotions differ from those associated with the challenge stress appraisal, which is accompanied by pleasurable emotions such as eagerness, excitement, and exhilaration. Such emotions result from pitting oneself against the odds. Challenge appraisals arise when a person feels a sense of control over the stressful environment, which reveals the potential for growth should the person succeed. Threat appraisal, rather, arises out of a feeling of lack of control and the potential of further loss. Lazarus and Folkman (1984) advise that challenge and threat appraisals should be considered separate, yet often related concepts; it is common for persons facing stress to report both challenge and threat appraisals. Folkman, Schaefer, and Lazarus (1979) consider appraisal the most important determinant of the coping process, above situational/environmental factors or demographic factors such as gender or age.

2.4.2.2 Coping

Folkman and Lazarus define coping as an attempt to master, tolerate, or reduce internal or external stressors that an individual perceives as exceeding existing resources (Folkman & Lazarus, 1980, 1991). They argue that coping strategies fall into one of two domains: problem-focused and emotion-focused. These categories reflect the dual function of coping overall: “the regulation of distressing emotions [emotion-focused] and doing something to change for the better the problem causing the distress [problem-focused]” Folkman and Lazarus (1985, p. 152). If a situation is appraised as intractable or impossible to change, a person will employ emotion-focused modes of coping. Problem-focused modes are used when a person appraises a troubling situation as surmountable through action. Problem-focused coping entails an “attempt to solve, reconceptualise, or minimize the effects of a stressful situation,” while emotion-focused coping includes “self-preoccupation, fantasy, or other conscious activities related to affect regulation” (Parker & Endler, 1996, p. 9). This dichotomous coping typology became firmly established in the coping literature after the development of a coping assessment
scale in the 1970s called the *Ways of Coping Checklist* (WCC) (Folkman & Lazarus, 1980), followed by the *Ways of Coping Questionnaire* (WCQ) (Folkman & Lazarus, 1985).

Coping efforts are made in response to stress appraisals. However, this relationship is recursive; coping efforts stimulate re-appraisal. This happens because the coping efforts accomplish one of two things: they either change the person-environment relationship (through problem-focused coping), or they regulate emotional distress (emotion-focused coping). This changed relationship spurs a new appraisal, which then leads to new coping efforts if the situation is still viewed as stressful. While subject to critique, this fundamental coping dichotomy (and the associated theory) played a critical role in defining the parameters of the field of coping research (Parker & Endler, 1992; Skinner et al., 2003).

Critics of the Lazarus and Folkman (1984) model point out that it does not define demands or capacity to respond separately from the other: a demand exists only if an event is perceived to it overwhelm capacity to respond, and capacity to respond exists only relationally to a particular demand. It is alleged that this model is inherently tautological, stemming from the fact that it relies entirely on individual perceptions (Hobfoll, 1989). Moreover, the lack of any firm construct on what ‘demands’ entail makes it impossible to directly test the model.

Though the ‘capacity to respond’ part of the model gave rise to an influential coping typology, the ‘demand’ aspect of Lazarus and Folkman (1984)’s conceptual model is comparatively less developed. Applying such a concept to interview data would produce a compendium of demands, without a theoretical justification for the categorization of demands into a framework. Any reported demands would be viewed as stemming from individual perceptions of events and response capacities, with a comparative lack of consideration on the role of the objective environment in exacerbating demands. This reflects a common criticism of Lazarus and Folkman (1984)’s theory of stress; it relies too much on subjective cognitive processes, rather the social environment and networks within which individuals are embedded (Guribye, 2011). Shared social standards about
what constitutes a loss are not recognized, as stress is entirely based on individual appraisal (Hobfoll, 2011).

It should be noted that Folkman and Lazarus (1980) do take the position that coping is determined by the relationship between the person and the environment, a position which would appear to consider environmental circumstances into account when tracing the coping process. However, this relationship is based on perception; it is only if the individual perceives that a situation is stressful will coping efforts be made. This position leads to a lack of capacity to conceptualize what groups commonly view as stressful or upsetting. There can be no typology of stressors using Folkman and Lazarus’s (1980) model, as all stressors are individual-specific. Moreover, their conceptual framework does not account for the far-reaching consequences of a traumatic event over a long period of time (Kleber & Brom, 1992), albeit it does recognize the recursive nature of stress (with individuals engaged in a process of appraisal and re-appraisal as time passes and new demands emerge, often related to previous demands) (Lazarus and Folkman, 1984).

Other approaches to assessing stress and loss include a framework developed by Miller and Rasco (2004), who considered war-affected groups specifically in the development of their model. Their model introduces a constellation of ‘displacement-related stressors’ and takes into account the effects of political violence and displacement on individuals, families, and communities. Displacement-related stressors pertain to the losses and adaptational demands which refugees (or IDPs) face post-displacement, and include (1) loss of social networks, leading to social isolation, (2) loss of social roles and role-related activities, (3) unemployment and poverty related stressors, (4) lack of environmental mastery, (5) discrimination, (6) separation from loved ones, and (7) intergenerational differences in the rates of acculturation (Miller & Rasco, 2004, p. 26).

The model proposed by Miller and Rasco (2004) has the strength of firmly defined losses and stressors, which makes it possible to directly apply and test the model. Also, it moves beyond the individual-level focus inherent in the Lazarus and Folkman (1984) theory of stress outlined above, by attempting to consider the impacts of stressors and losses on communities and families, as well as individuals. However, the typology of stressors does
not allow a basis upon which to examine the *interplay between* these stressors and losses, though each of these stressors indeed resonate with aspects of the narratives of loss imparted by the participants in this thesis. For instance, though discrimination and unemployment are both listed as types of stressors, this model does not consider the relationship between the two items; for instance, that discrimination can lead to unemployment, and/or vice versa. Like the Lazarus and Folkman (1984) model, this model does not provide a basis upon which to map out relationships between losses over a period of time. A similar critique could be made regarding the Multidimensional Loss Scale, which is composed of five aspects of loss yielded through factor analysis (loss of symbolic self, loss of interdependence, loss of home, interpersonal loss, and loss of intra-personal integrity) (Vromans, Schweitzer, & Brough, 2012).

2.4.3 Parker and Endler’s Coping Inventory for Stressful Situations (CISS)

Most of the early coping assessment scales and typologies developed in the 1980s built upon the problem- and emotion-focused domains suggested by Folkman and Lazarus (1980). Parker and Endler (1992) provide a critique of these early coping measures by reviewing 14 separate coping scales published from 1980 to 1990. They argue that the proliferation of scales measured different constructs, making it difficult to generalize the results obtained. However, one point of relative consensus was the near-universal inclusion of emotion-focused and problem-focused coping domains, which were explicitly identified (or functional equivalents included) in 12 studies (Amirkhan, 1990; Billings & Moos, 1984; Carver, Scheier, & Weintraub, 1989; Dise-Lewis, 1988; Endler & Parker, 1990a, 1990b; Epstein & Meier, 1989; Feifel & Strack, 1989; Folkman & Lazarus, 1980, 1985, 1988; Nowack, 1989; Patterson & McCubbin, 1987). The inclusion of avoidance as a coping dimension was also quite frequent across the studies (Amirkhan, 1990; Billings & Moos, 1981; Endler & Parker, 1990a, 1990b; Feifel & Strack, 1989; Nowack, 1989).

Based on the high usage of emotion-, problem-, and avoidance-focused coping domains in the 14 reviewed scales, Endler and Parker proposed a coping measure called the Coping Inventory for Stressful Situations (CISS) (1990a, 1994). They define avoidance-oriented coping as “activities and cognitive changes aimed at avoiding the stressful situation”
Avoidance is accomplished in two ways: through distracting oneself with other situations and tasks (task-oriented), or through social diversion (person-oriented). Task-oriented avoidance coping involves substituting a task of their choosing rather than engaging in a task to confront the stressor. Person-oriented avoidance coping involved ‘losing oneself’ by spending time with others rather than confronting a stressful situation (Parker & Endler, 1992). They draw upon the definitions of problem- and emotion-focused coping offered by Folkman and Lazarus (1980), conceptualizing the former as “purposeful task-oriented efforts aimed at solving the problem, or attempts to alter the situation. The main emphasis is on the task or planning, and on attempts to solve the problem” (Endler & Parker, 1999, p. no pagination). Emotion-oriented coping involves emotional reactions such as blaming oneself, becoming angry or tense, self-preoccupation, and fantasizing/daydreaming.

2.4.4 Skinner’s Taxonomy

The next major assessment of the state of coping typologies was published by Skinner et al. in 2003. Like Parker and Endler (1992) before them, Skinner et al. (2003) reviewed coping measurement scales and found little consensus on both the measurement and conceptualizations of coping. They note that this presents a problem in comparing and integrating results from different studies on coping, since such an endeavour would necessarily involve an item-by-item analysis of the varied subscales. The fundamental difficulty in identifying core categories of coping is the difficulty in readily observing and reporting it. Even if one manages to overcome this obstacle, another obstacle arises due to the ‘multifunctional’ nature of coping activities; a particular coping behaviour may meet several ‘ends’ or serve multiple functions. These nuances make the categorization of behaviours into coping domains difficult when one is simultaneously attempting to take motivations driving coping activities into account. Recognizing the rather nebulous character of coping, they suggest that it is best viewed as an “organizational construct used to encompass the myriad actions individuals use to deal with stressful experiences” (Skinner et al., 2003, p. 217).

Skinner et al. (2003) problematize Folkman and Lazarus (1980)’s distinction between problem-focused and emotion-focused coping, though they acknowledge that the dichotomy has been a foundational concept in the area of coping research. The first (of
three) criticisms is that the categories are not conceptually clear. This is evidenced by the variety of items included as problem- versus emotion-focused coping across various scales, with little consensus about what these items should be. Folkman and Lazarus (1980)’s *Ways of Coping Checklist* (composed 68 items in its original format) has been used in 8 analyses, each of which resulted in a different set of categories. In the original 1980 study, only problem-focused and emotion-focused coping emerged as domains through factor analysis. However, subsequent analysis produced typologies composed of 7 domains (problem focused, wishful thinking, growth, minimize threat, seeks social support, blamed self, mixed) (Aldwin, Folkman, Shaefer, Coyne, & Lazarus, 1980), two domains, one with two subcategories (general coping, specific coping [divided into direct coping and suppression]) (Parkes, 1984), five domains (problem focused, seeks social support, blamed self, wishful thinking, avoidance) (Vitaliano, Russo, Carr, Maiuro, & Becker, 1985), three domains, one with 6 sub-domains and one with one sub-domain (problem focused, emotion focused [composed of wishful thinking, distancing, emphasizing the positive, self-blame, tension reduction, and self-isolation], and mixed [composed of seeking social support]) (Folkman & Lazarus, 1985), eight domains (confrontive coping, distancing, self-controlling, seeking social support, accepting responsibility, escape-avoidance, planful problem solving, and positive reappraisal) (Folkman, Lazarus, Dunkel-Schetter, DeLongis, & Gruen, 1986), eight domains (escapism, cautiousness, instrumental action, minimization, support mobilization, self-blame, negotiation, and seeking meaning) (Aldwin & Revenson, 1987), and five domains (seek and use social support, cognitive escape-avoidance, distancing, focus on the positive, and behavioural escape-avoidance) (Dunkel-Schetter, Feinstein, Taylor, & Falke, 1992). The wide variety in coping typologies springing from just one scale is representative of the state of the field of coping research more generally; a lack of consensus exists over what components actually comprise coping.

The second criticism articulated by Skinner et al. (2003) against Folkman and Lazarus (1980)’s problem- and avoidance-focused coping taxonomy is that the domains are not mutually exhaustive. There exist ways of coping which do not fit into either problem- or emotion-focused types. For instance, diverting one’s attention away from a problem does not seem to fit into either domain, which suggests that the problem- and avoidance-focused categories do not sufficiently cover the range of coping strategies.
Third, Skinner et al. (2003) contend that the categories are not mutually exclusive. For instance, attending church could be considered problem-focused if the reason for a visit is to gain insight on how to approach a problem. However, if the objective of attending church is to distract oneself from a problem, attendance could be considered emotion-focused. In fact, Lazarus (1996) admits that virtually any coping act can fit into either problem- of emotion-focused coping, though it is tempting to assign thoughts or acts to one or the other domain. He warns, “treating [problem-focused and emotion-focused categories] as if they were distinctive types of coping actions, has led to an oversimplified conception of the way coping works and is measured in much research” (1996, p. 292).

With the aim of developing a coping taxonomy composed of “conceptually clear, mutually exclusive and exhaustive categories” (p.217), Skinner et al. (2003) analysed approximately 100 coping category systems developed from the 1980s to 2000. This represents a marked increase from the 14 reviewed by Parker and Endler (1992). In total, the authors identified approximately 400 ways of coping contained in the 100 category systems. This increase reflects the explosion of interest in the concept of coping, which has become one of the most studied concepts in psychology. From the 1980s to 2013, there were 881,436 peer-reviewed journal articles produced on the topic (Frydenberg, 2014).

From the list of over 400 separate coping strategies within the 100 coping taxonomies in their review, Skinner et al. (2003) deduced that the most common coping domains in existing categorization schemes were problem-solving, support seeking, avoidance, direct action, and distraction. Other common categories were aggression, self-blame, escape, social withdrawal, religion, positive cognitive restructuring, emotional expression, cognitive, information seeking, acceptance, wishful thinking, emotional social support, and worry. Out of the over 400 coping strategies, approximately 40 appeared in only one coping scale and had no counterpart in any other measure. This indicates the lack of consistency and consensus across the field on the composition of the coping construct.
An important part in creating a structure of coping, according to the authors, is to identify a set of higher order categories which can accommodate the lower-order categories (actual coping strategies). They suggest three principles which could guide this process. First, one can organize ways of coping according to function. This has been attempted multiple times; the most well-established function-based approach has been the dichotomy of problem-focused and emotion-focused proposed by Folkman and Lazarus (1980). As outlined above, this approach is flawed since all ways of coping can have multiple functions. The second way to create a taxonomy is to base distinctions on topographies, such as avoidance versus approach, and engagement versus disengagement. However, this approach is also flawed since all coping strategies have multiple topological features. For instance, ‘venting’ is sometimes classified as an avoidance technique, though the focus of venting is toward the stressor. ‘Focusing on the positive’ is frequently classified as an approach-oriented strategy, when in fact it may be a way to avoid thinking or doing something about a stressor. Thus, Skinner et al. conclude “orientation [toward or away from the stressor] alone is not a sufficient dimension for capturing the topology of coping” (2003, p. 228).

The third method one can follow to classify coping strategies is according to action categories. Skinner et al. (2003) argue that action refers not only to observable behaviour, but also to thoughts and goals. They six review coping taxonomies which have focused on actions types, four of which have been empirically tested (Ayers, Sandler, West, & Roosa, 1996; Connor-Smith, Compas, Wadsworth, Thomsen, & Saltzman, 2000; Tobin, Holroyd, Reynolds, & Wigal, 1989; Walker, Smith, Garber, & van Slyke, 1997) and two of which are based on comprehensive reviews, theory, and the rational classification of ways of coping (Ryan-Wenger, 1992; Skinner & Wellborn, 1994, 1997). These taxonomies contain a total of 13 coping types, of which five emerged as ‘core’ categories due to their presence in at least three of four empirical systems and both rational systems, as well as in 25%-50% in their larger review outlined above. These core categories have been used in scales with children, adolescents, adults, with regard to specific stressors (for instance, coping with health problems/pain) and general stressors, suggesting the wide applicability of these categories across ages and contexts. The core categories are: problem solving, support seeking, avoidance, distraction, and positive cognitive restructuring (Skinner et al., 2003).
Because these core categories are the best-supported domains in the literature on coping, they form the framework which I use to organize and interpret the coping strategies reported by the respondents in this study (See Chapter 7). Though it is unlikely that field-wide agreement will ever be reached on nomenclature and categorization of coping types, moving beyond the problem-focused and motion-focused dichotomy of coping types is considered an advancement in coping literature (Frydenberg, 2014).

2.4.4.1 Coping and gender

There is some evidence that men are more likely to engage in problem-focused coping (coping efforts aimed at directly addressing stressful problems), whilst women are more likely to engage in emotion-focused coping (coping efforts aimed at managing emotional responses to stress) (Billings & Moos, 1984; Endler & Parker, 1990a; Stone & Neale, 1984). Women may also use distraction, catharsis, and relaxation coping techniques more than men (Stone & Neale, 1984). Additionally, some studies have shown that women are more likely than men to engage in support-seeking behaviour (Carver et al., 1989; Endler & Parker, 1990a; Etzion & Pines, 1981; Greenglass, 1993, 2002; Hobfoll, Dunahoo, Ben-Porath, & Monnier, 1994; Norcross, DiClemente, & Prochaska, 1986). In their study on full- and part-time undergraduate psychology students in the Midwestern US, Hobfoll et al. (1994) found that women were more ‘prosocial’ than men in their coping strategies, commonly engaging in support-seeking behaviour. Men were more likely to use antisocial and aggressive strategies than women, who were more likely to choose assertive strategies.

These differences may stem from the different demands faced by women and men. For instance, in their initial work developing the Ways of Coping Checklist, Folkman and Lazarus (1980) found that men were more likely to use problem-focused coping than women. However, when the authors took the context (work, health, or family) in which coping occurred into account, they found a strong link between the work context and problem-focused coping. They reasoned that the observed gendered differences in problem-based coping may result from gender-based differences in jobs, with men more
likely than women to be in positions which provide opportunities to engage in problem-solving behaviours. Thus, they conclude that the apparent sex-based differences in problem-focused coping are due to work differences, rather than a general disposition on the part of men to use more problem-focused coping than women. Hobfoll et al. (1994) contends that women are more likely than men to encounter stressful situations which offer little possibility of control, which may lead the former to invoke emotion-focused coping over problem-focused. Thus, settings in which men and women find themselves may influence coping patterns. Such gender differences may also stem from the way that coping behaviours are commonly conceptualized.

2.4.5 Hobfoll’s Conservation of Resources (COR) theory

An analysis of coping strategies requires consideration of the difficulties which prompt a coping response. Therefore, this thesis explores stress and resource loss. Hobfoll (1989)’s stress model, called the Conservation of Resources (COR) theory, provides a vantage point from which challenges and losses can be interpreted. Hobfoll (1998) builds upon Lazarus and Folkman (1984) theory of stress and coping (outlined in section 2.4.2), which defined stress as “a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being” (Lazarus & Folkman, 1984, p. 19).

Hobfoll’s COR theory was used as a framework for this research because it provides a theoretical basis to conceive of unfolding losses over time, with initial losses in one resource type typically leading to subsequent losses of other resources. Moreover, the theory recognizes the impact of environmental circumstances on resources; difficult circumstances may threaten or actually deplete resources, aside from one’s perception of the environment. The central tenant of COR theory is that “people strive to retain, protect, and build resources and that what is threatening to them is the potential or actual loss of these valued resources (Hobfoll, 1989, p. 516). Stress results from the real loss of resources according to COR theory, as opposed to an appraised imbalance between resources and challenges. Resources can take the form of objects, personal characteristics, conditions, or energies that are of value in and of themselves, or are valuable in attaining additional resources. Stress is a reaction to the threat of a loss of
resources, the actual loss of resources, or a lack of gain following the investment of resources (Hobfoll, 1989).

Object resources are of value because of their physical nature or because of the potential of the object to acquire status for the owner. They are concrete things essential for basic survival. Examples include houses and other material belongings. Condition resources are sought-after states of being. Examples may include the status of being married, having a supportive social network, possessing status, membership in organizations, and having steady employment. Personal resources include one’s orientation toward the world; for instance, seeing events as predictable or in one’s best interest. It can also include possessing confidence and a positive sense of self. Social support can either foster or deteriorate such characteristics. Finally, energy resources include time, money, and knowledge. Though these have little intrinsic value, they are valuable insomuch as they facilitate the acquisition of additional resources (Hobfoll, 1989).

Both the Hobfoll (1989) and Lazarus and Folkman (1984) stress theories focus on the role of resources in impacting the relationship between stress and coping. The two schools of thought differ in the weight ascribed to subjective and objective resources in mediating this relationship (Schwarzer & Taubert, 2002). According to the transactional theory of stress and coping (described in section 2.4.2 above), objective resources may have only an indirect effect on coping, whereas subjective resources (appraisals of resources) directly trigger a coping response perceived by the individual as appropriate. In contrast, the COR theory places much more emphasis on the role of objective resources in the coping process (Schwarzer & Taubert, 2002). It is the threat or actual loss of resources which leads to stress, in the Hobfoll (1998) model.

2.4.5.1 Resource caravans and caravan passageways

Object, condition, personal, and energy resources do not operate independently of one another according to Hobfoll’s COR theory. Rather, they tend to develop or decrease in aggregate in what Hobfoll (2012) has called ‘resource caravans.’ Because resources tend to cluster in ‘packs,’ the loss of an important resource has a comprehensive, multilevel impact on other resources. Conversely, the gain of resources is usually associated with a gain in other resources. Whether a pack of resources increases or decreases is dependent
on ‘caravan passageways.’ These are the external factors that “support, foster, enrich, and protect the resources of individuals, families, and organizations, or that detract, undermine, obstruct, or impoverish people’s resource reservoirs” (Hobfoll, 2012, p. 229). The degree to which individuals and families can develop resource caravans is largely out of their control. For instance, disasters such as war undermine the presence of institutions such as schools, recreational facilities, and hospitals, the availability of employment, as well as the cleanliness, safety, and vitality of neighbourhoods. Each of these factors external to individuals impacts upon their ‘resource caravan,’ insofar as they form a facilitative or obstructive caravan passageway. Persons and families without access to effective resource passageways may suffer negative impacts on mental health and other resources (Hobfoll, 2011).

2.4.5.2 Loss spirals

COR theory predicts that sudden losses associated with traumatic events usually have a severe initial impact, followed by resource loss and psychological distress, both of which make the other worse over time (Heath, Hall, Russ, Canetti, & Hobfoll, 2012; Hobfoll et al., 2009). People affected by traumatic events invest what few resources they have into coping strategies, which may only decrease resource levels. This results in a loss spiral as individuals lack the resources to offset loss (Hobfoll, 1989). The individuals who lack resources are the most vulnerable to continued resource loss. In settings where an entire group has faced trauma or disruption, aggregated individual resource losses can manifest as a loss of social capital across an entire community (Ritchie, 2012).

The loss spiral concept in COR theory has proved a helpful tool in a number of studies exploring the sequelae resulting from traumatic events. For instance, Palinkas (2012) employed the construct to identify three levels of social and psychological impacts which are likely to unfold as a result of the 2010 Deepwater Horizon oil spill in the Gulf of Mexico, based on a retrospective analysis of observed losses in the aftermath of the 1989 Exxon Valdez spill. This spill led to a series of losses which formed consecutive ‘tiers’: the oil spill and contamination of the physical environment led to biopsychosocial impacts (tier 1), which led to interpersonal impacts (tier 2). Both of these impacts then led to intrapersonal or psychological impacts (tier 3). He suggests that the impact of the Deepwater Horizon oil spill may follow a similar chain of losses.
Heath et al. (2012) empirically tested the loss spiral construct among Palestinian adults by modelling the effects of trauma exposure on both resource loss and psychological distress, and on the reciprocal effects of resource loss and psychological distress. They found that resource loss and psychological distress predicted each other over time: distress significantly predicted resource loss across 6-month time-waves, and resource loss predicted stress across 12-month intervals.

Betancourt et al. (2014) qualitatively explored the dynamics related to resettlement and acculturative stress among Somali refugee families in Boston using COR theory as a framework. More specifically, the authors set out to assess the influence of resource losses and gains on family functioning (child rearing and parent-child relationships) among this group of refugees. They found that resettlement had led to profound poverty, discrimination, and loss of status, which in turn led to situations in which caregivers struggled to maintain influence over children. Many Somali parents felt that their choice to flee the war and resettle in America had led to a cascade of loss, including alienation from the very children they fled to protect. Resettlement meant a substantial loss in financial resources, leading to poverty and living in impoverished neighbourhoods. Parents cited these circumstances, along with poor adaptation into American schools, as leading their children and teenagers to make poor choices, perpetuating the cycle of loss.

Similar to Betancourt et al. (2014), Guribye (2011) also focused on refugees who had resettled to a high-income country, drawing upon COR theory to document the impact of crises in the ‘home country’ on refugees. The author found that Tamils in Norway reported losses in conditions (threats to the security of family members in Sri Lanka, threats to integration into Norwegian society, loss of social support) and losses in cultural characteristics (threats to collective cause and loss of self-reliance).

2.5 Thesis Rationale

Exploration into coping strategies is consistent with a psychosocial approach to mental health, by focusing on agency rather than victimhood and specialized mental health responses to distress. Further, an expert consensus exercise on research priorities for
mental health and psychosocial support in humanitarian settings identified the following priority queries: ‘What are the stressors faced by populations in humanitarian settings?’, ‘How do affected populations themselves describe and perceive mental health and psychosocial problems in humanitarian settings?’ and ‘What are the major protective factors (including individual [e.g., coping, hope] and contextual [e.g., justice mechanisms, religious practices]) for mental health and psychosocial problems in humanitarian settings?’ (Tol et al., 2011b). Stressors/loss and protective factors against poor mental health among populations who have fled humanitarian disasters and war to high-income countries, though certainly important topics to address, has received much more research attention (J. Arnetz et al., 2013; Baird & Boyle, 2012; Betancourt et al., 2014; Guribye, 2011; Phillimore, 2011; Steel et al., 2011) than the stressors, losses, and coping approaches of conflict-affected persons in LMICs, where the majority of conflict-affected persons live. It is likely that types of stressors, coping responses, and resources are different amongst conflict affected persons in LMICs compared to those in high-income countries. Moreover, differences between men and women regarding stress, loss, and coping are largely unexplored in existing literature. These gaps in the evidence base have prompted the research objectives directing this thesis.

This thesis builds upon an existing research collaboration between The London School of Hygiene and Tropical Medicine (LSHTM) and the Global Initiative on Psychiatry - Tbilisi (GIP-T), an international not-for-profit organization which promotes humane, ethical and effective mental health care throughout the world. GIP-T assists governments, international agencies, NGOs, and development institutions in the Caucasus and Central Asia to improve mental health care, and has notable expertise in the area of post-trauma care. The Director of GIP-T, Dr. Nino Makhashvili, is a recognized expert on mental health in Georgia. She has done extensive work in the field of psychosocial rehabilitation with refugees and IDPs. I visited the offices of GIP-T in June 2012 to gain input from GIP-T staff on specific research needs in Georgia. At this point, I was interested in topics including coping, resilience, and why it was that some people seemed to adjust well in post-conflict settings. Through various meetings and discussions with the staff at GIP-T, the challenges, needs, and coping strategies among IDP women was confirmed as an area requiring exploration. I was responsible for the design and implementation of the study, with advisory input from staff at GIP-T and research supervisors.
2.6 Thesis aim and objectives

The overall aim of the thesis is to explore resource loss and coping strategies among internally displaced persons women in Georgia. The specific objectives are:

1. To systematically examine how coping mechanisms are utilized by conflict-affected populations in low- and middle-income countries.
2. To explore the resource losses faced by IDP women in Georgia.
3. To explore the coping strategies used by IDP women in Georgia.
4. To explore Georgian IDP women’s understandings of how men’s and women’s roles have changed during displacement.
Chapter 3: Systematic literature review on coping strategies among conflict-affected persons

This Chapter draws upon the coping typology suggested by Skinner et al. (2003) to examine coping strategies among conflict-affected civilians in LMICs\(^1\). It addresses the first objective of the thesis, as outlined in section 2.6 in Chapter 2, namely to systematically examine how coping mechanisms are utilized by conflict-affected populations in low- and middle-income countries. To the best of my knowledge, this is the first systematic review on coping strategies among conflict-affected civilians in LMICs. The use of a systematic review methodology helps to ensure a comprehensive and transparent approach to synthesizing the literature on coping strategies, which was a necessary endeavour in order to understand the existing empirical findings on coping relevant to this thesis.

The specific objectives of the systematic literature review are to examine the evidence on: (1) the types of coping strategies used by conflict-affected civilians; (2) factors influencing coping strategies; and (3) the relationship between coping strategies and mental health outcomes.

3.1 Methods for systematic literature review

3.1.1 Inclusion and exclusion criteria

The outcomes of interest in this review are coping strategies in response to challenges arising from armed conflict and forced displacement, in the context of mental health as defined by the WHO (2015b). The definition of coping is described in Chapter 2 section

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\(^1\) This Chapter forms the basis for a paper published by Global Public Health and a poster presentation given at LSHTM. See Appendix A for a complete list of publications (accepted and submitted) and presentations arising from this thesis.
as an attempt to master, tolerate, or reduce internal or external stressors that an individual perceives as exceeding existing resources (Folkman & Lazarus, 1980). Armed conflict is defined as a “contested incompatibility which concerns government and/or territory where the use of armed force between two parties, of which at least one it the government of a state, results in at least 25 battle-related deaths (Wallensteen & Sollenberg, 2000, p. 648).

The population included was adult (aged 18 years or older) conflict-affected civilians. Studies exclusively focused on adolescents and children were excluded as their coping strategies are often very different to those of adults (see Makhoul, Ghanem, & Barbir, 2011; Reed, Fazel, Jones, Panter-Brick, & Stein, 2012). Only populations residing in LMICs were included, selected according to World Bank country classifications (World Bank, 2015). The exclusion of populations in high-income countries was based on the fact that the vast majority of conflict-affected persons globally live in LMICs which may offer more limited resources to support coping (such as strong social safety nets and health care systems) compared to high-income countries. Also excluded were studies exclusively focused on war veterans and combatants as their war experiences, resources and coping strategies may also differ significantly from conflict-affected civilians (Punamaki et al., 2008). Studies which focused exclusively on alcohol and/drug use in post-conflict settings were also excluded, unless such behaviours were explicitly framed as coping-related strategies. Finally, articles which explored the impact of formal professional mental health interventions (cognitive behavioural therapy, narrative exposure therapy, etc.) were excluded as they were deemed outside of the coping approach used in this review (and have previously been systematically reviewed elsewhere) (Tol et al., 2011a).

Four types of conflict-affected persons were included: (i) IDPs who have been forced to leave conflict areas and remain within their country’s borders (Deng, 1998); (ii) refugees who have been forced to leave their country due to conflict (UNHCR, 1951); (iii) former IDPs and refugees who have returned to their home areas (returnees), and (iv) populations living in an area where a conflict was either still occurring or had occurred within the previous 10 years (conflict-affected residents). English-language quantitative and qualitative studies were included.
3.1.2 Data search

A search of six bibliographic databases (Medline, PsycINFO, Embase, Global Health, Web of Science, and IBSS databases) was conducted. No limits were placed at the start publication date and the end publication date was 13 May 2014. The search terms were chosen by a preliminary review of relevant papers, and included common mental health disorder terms along with refugees and internally displaced persons. Where available, medical subject headings (MeSH) supplemented the search, including such terms as ‘mental health’ and ‘refugee’. Filters were used to select English-language empirical studies on adult populations in LMICs.

The term ‘coping’ was deliberately not entered in the search. The broad nature of coping meant that some authors may not have explicitly framed their studies about coping but they would nevertheless have incorporated key elements of coping which matched the definition and inclusion criteria of this systematic review.

3.1.3 Study screening, selection and analysis

The selection process followed five stages in accordance with the PRISMA guidelines which was followed for this review (Moher, Liberati, Tetzlaff, Altman, & Group, 2009). First, databases were searched based on the search terms and the articles yielded were downloaded into Endnote. Second, the titles and abstracts were reviewed against the inclusion/exclusion criteria. Third, the full texts of included articles were screened. Fourth, the reference lists of included studies were manually searched for additional relevant articles. Fifth, a final in-depth review of remaining studies was conducted.

Due to the heterogeneity of research designs and coping typologies, descriptive analysis was conducted rather than a meta-analysis and meta-synthesis. For each study, coping strategies were categorized into the taxonomy of Skinner et al. (2003) which includes the following core coping strategies: problem solving, support seeking, escape-avoidance, distraction, and positive cognitive restructuring. Categorization of items into one of these domains was accomplished through an examination of how each item was described in each study.
Findings are reported by: (i) the types of coping identified (based on Skinner’s categorization); (ii) factors influencing coping strategies and (iii) correlations between coping strategies and mental health outcomes (including general mental health, depression, anxiety, PTSD, and somatization) for the quantitative studies, along with descriptions and explanations of this relationship in qualitative studies.

The methodological quality of the studies was reviewed using the STROBE (Vandenbroucke et al., 2007) and RATS (J. Clark, 2003) checklists for quantitative and qualitative studies respectively. The STROBE checklist was modified to include an item on whether measures used to assess mental health had been validated for the study population. These assessments were not used to screen out studies, but to examine the overall quality of the evidence base.

### 3.2 Results of the systematic literature review

The results from the five-stage screening process are shown in Figure 1. A total of 8729 studies were yielded (Stage 1). Titles and/or abstracts were reviewed (Stage 2) and 8659 were excluded because they did not report on coping strategies, were in languages other than English, were duplicate publications, review articles, editorials, conference abstracts, or focused exclusively on children/adolescents, war veterans/combatants, populations in high-income countries, populations affected by a conflict over 10 years prior to data collection, or populations affected by natural disasters or economic crises or acts of terrorism. The remaining 70 articles were reviewed more thoroughly (Stage 3). Twenty-two studies were excluded at this stage due to insufficient focus on coping strategies.

There were 48 studies initially selected for the final in-depth review. A manual review of the reference lists of these studies yielded two additional studies (Stage 4). Of the 50 studies, 38 were quantitative, 11 qualitative, and one used mixed methods (Pedersen, Tremblay, Errazuriz, & Gamarra, 2008). Because the quantitative results from Pedersen et al. (2008) are the most relevant for this review, it is referred to and assessed as a quantitative article. Details for the selected studies are shown in Appendix B. The publication date ranged from 1986 to 2013 with a median publication year of 2008.
The studies focused on a very diverse range of conflict-affected populations. They resided in Eritrea, Kenya, Liberia, Mozambique, Ethiopia, Ghana, Uganda, the Democratic Republic of Congo (DRC), Sudan, Iran, Afghanistan, Pakistan, Nepal, India, Sri Lanka, Lebanon, the West Bank and Gaza Strip, Thailand, Indonesia, Peru, the former Yugoslavia, and the Russian Federation. Twenty-two studies focused on conflict-affected residents, eleven on refugees, six on IDPs, one on a (predominantly) returnee population, and eleven on a combination of these groups.

Figure 1: Results from the screening process

3.2.1 Quality assessment
Assessment of quantitative articles by the STROBE checklist revealed several common weaknesses across the quantitative articles, including unclear study designs, and a lack of reporting sources of bias, limitations, and generalisability (see Appendix C). Mental health assessment tools were rarely validated for the study populations. In general, definition of variables and measurement was quite strong, as was reporting of results.

Assessment of qualitative articles by the RATS checklist revealed significant problems in some of the articles (see Appendix C). Greater clarity is needed regarding the recruitment of samples. Additionally, the majority of studies did not include a limitations section. Common strengths were the relevance of research questions and the contextualization of research questions within theory and existing research.

3.2.2 Coping strategies used by conflict-affected civilians

The types of coping strategies used by conflict-affected citizens recorded in the studies are shown in Appendix B. The 39 quantitative studies use 34 unique scales to measure and categorize coping behaviors and strategies. The twelve qualitative studies each present a unique set of coping strategies arising from themes in interview data, with the exception of Thomas, Roberts, Luitel, Upadhaya, and Tol (2011) who drew upon a pre-existing schema. Some studies focused on just one component of coping, for instance, seeking social support, purposeful work, or avoidance, rather than exploring a range of coping strategies. These results illustrate the heterogeneity in the conception and measurement of coping across the studies.

Appendix D categorizes the coping strategies listed in Appendix B according to coping domain (Skinner et al., 2003). Thirty-four studies included items classified as support seeking, twenty-eight as positive cognitive restructuring, twenty-five as problem solving, twenty-five as escape-avoidance, and fourteen as distraction. Reaching out to friends, family members, and institutions such as non-governmental organizations, church groups, and support groups, and developing new support systems were classified as support-seeking. Positive cognitive restructuring included putting events into perspective, accepting circumstances, and finding meaning in events (most notably through reliance on religiously-framed explanations and outlooks). Problem solving coping included activities such as working, obtaining information, and engaging in political movements. Escape-avoidance included such items as passive appraisal, blaming others, isolating
oneself, ignoring problems, and drinking alcohol. Finally, various forms of recreation, such as walking and other exercise, spending time with children, and listening or playing music composed the distraction domain.

3.2.3 Factors associated with coping strategies

The key factors influencing coping strategies observed across the quantitative studies were gender and trauma exposure, while the qualitative studies explored cultural mores and religious beliefs in shaping coping strategies (see Appendix E). These are discussed in turn.

Regarding positive cognitive restructuring and gender, Araya, Chotai, Komproe, and De Jong (2007a) found that women reported more emotion-oriented coping than men. The same authors found, among women, that this type of coping was significantly associated with lower quality of life (Araya, Jayanti, Komproe, & De Jong, 2007b). In their study with Tibetan refugees in India, Hussain and Bhushan (2011) explored types of positive cognitive restructuring and found that females reported more positive refocusing, positive reappraisal, and acceptance than males, while males reported putting events into perspective more often than females.

Gender-based differences were also found regarding problem solving, with men more likely to report task-oriented coping than women in Araya et al. (2007a). Task-oriented coping increased the quality of life for men, but not women (Araya et al., 2007b). Among conflict-affected Afghans, women were more likely to choose ‘having more income’ as a problem-solving option than men, while men were more likely to choose ‘having better food security’ and ‘living in better housing’ (Lopes Cardozo et al., 2005). These findings are supported by Hussain and Bhushan (2011) who also observed gender differences pertaining to problem-solving, with a significantly higher frequency of Tibetan refugee men than women reporting ‘refocus on planning.’
Two quantitative studies focused on conflict-affected residents in Afghanistan found gendered differences regarding support-seeking coping behaviors. Lopes Cardozo et al. (2005) found that women were more likely than men to endorse ‘talking to family or friends,’ ‘receiving medical assistance,’ and ‘receiving humanitarian assistance,’ while men were more likely to endorse ‘receiving counselling.’ Scholte et al. (2004) also found women were more likely to turn to their in-laws for support than men.

Findings regarding escape-avoidance-based coping and gender are mixed. Though Araya et al. (2007a) and Morina, Ford, Risch, Morina, and Stangier (2010) found no gender differences regarding overall avoidance-based coping among Ethiopian IDPs and conflict-affected Albanian Kosovars respectively, Hussain and Bhushan (2011) found that women were more likely than men to report ‘self-blame,’ ‘rumination,’ and ‘catastrophisizing,’ while men were more likely to report blaming others. The findings of the latter are partially supported by Kellezi, Reicher, and Cassidy (2009) who found that ‘self-blame’ was negatively correlated with male sex. The only gender-based difference in the distraction domain was noted by Lopes Cardozo et al. (2005) who found that more women than men engaged in traditional ceremonies as a form of coping.

Araya et al.’s study of IDP women in Ethiopia found that gender-based differences in coping stemmed from differences in conflict-related vulnerabilities (with women being more vulnerable to abuse and rape, and men more likely to be exposed to combat activities), different rates of post-conflict mental disorders, different social roles in the population, and different degrees of perceived social support (2007a). The study also found that IDP women were more isolated, had poorer literacy rates, and perceived less social support than men, which may help explain differences in coping strategies used. Scholte et al. (2004) also point out that women’s coping strategies (in this case, drawing emotional support from Allah and family-in-law) are shaped by opportunities and resources available to them.

Qualitative articles also explored gendered differences in coping behaviours. Almedom (2004) found that internally displaced Eritrean men tended to report coping through finding meaning or purpose to displacement, in contrast to their female counterparts who reported that staying together with pre-displacement neighbours and seeking support from
church and traditional birth attendants helped them adjust to being displaced. Similarly, the Afghan refugee women in Kassam and Nanji (2006) tended to use support-seeking as a coping strategy, as evidenced by the formation of several informal support groups in their camp. Their male counterparts reported greater use of recreational activities, reflecting the cultural inappropriateness in Afghanistan of women engaging in sports and other recreational activities in the presence of men. Amongst conflict-affected populations in Kenya, Liberia, Uganda, Afghanistan, Pakistan and Thailand, Ezard et al. (2011) found that women engaged in alcohol production in refugee and IDP camps in order to generate income, while men typically consumed the alcohol as an escape-avoidance coping strategy. Amongst Afghan refugees in Pakistan, hashish was commonly used by men, whereas tranquilizers were more likely to be used by women (Ezard et al., 2011).

Trauma exposure emerged as a key factor associated with coping strategies in quantitative studies. A study on Tibetan refugees found that the higher the level of trauma experienced, the more coping strategies were used from all coping domains (Sachs et al., 2008). Morina et al. (2010) found that being displaced during the war was significantly positively associated with avoidance coping among Albanian Kosovars.

Three studies examined the relationship between positive cognitive restructuring and exposure to traumatic events, with two (Araya et al., 2007a; Hussain & Bhushan, 2011) finding a positive linear relationship between these factors. However, Pham, Vinck, Kinkodi, and Weinstein (2010) found that exposure to traumatic events was significantly negatively associated with a sense of coherence in their study on conflict-affected residents in the DRC. Exposure to more traumatic events, versus less exposure, was associated with a high level of problem solving coping among Tibetan refugees (Hussain & Bhushan, 2011). Araya et al. (2007a) noted a similar finding for women, but not for men. In studies in the Palestinian territories, Punamaki (1986) observed trauma exposure decreased women’s avoidance and withdrawal, while the opposite was observed for men with trauma exposure associated with a high level of avoidance and denial coping. The latter findings are supported by Hussain and Bhushan (2011) who found that some aspects of escape-avoidance coping (such as ‘self-blame,’ ‘rumination,’ and ‘catastrophizing’) were significantly associated with exposure to trauma amongst both men and women.
Qualitative studies reveal the influence of cultural mores in shaping coping strategies. Coping strategies of Eritrean refugees were framed by cultural and religious beliefs about grief: that it causes physical sickness, negatively impacts the well-being of the household, and damages one’s relationship to God (Nordanger, 2007). Due to these views, coping strategies focused on fending off sorrow through diverted thinking, distraction, and future investment. Afghan residents in Eggerman and Panter-Brick (2010) used coping strategies which were rooted in cultural values such as faith, morals, perseverance, family unity, service to others and to country, and seeking social prominence and honour. The strategies of Iranian conflict-affected residents were informed by religious sentiment and patriotism (Ebadi, Ahmadi, Ghanei, & Kazemnejad, 2009). The influence of cultural and religious beliefs on coping strategies are also reported for female Darfuri students in Sudan by Badri, Van den Borne, and Crutzen (2013), and Tibetan refugees in Ruwanpura, Mercer, Ager, and Duveen (2006) and Sachs et al. (2008).

3.2.4 The relationship between coping strategies and mental health

The relationship between coping strategies and mental health outcomes was examined in 32 quantitative articles and 10 qualitative articles. Table 1 presents the overall findings of the associations between each coping domain and the following mental health outcomes: PTSD, depression, anxiety, somatization, and general psychological distress. Appendix F reports more specific quantitative evidence on relationships between coping domains and the same mental health outcomes.

Table 1: Relationship between coping domains and mental health outcomes (protective [✓], non-protective [X], and neutral [-])

<table>
<thead>
<tr>
<th>Coping domain</th>
<th>PTSD</th>
<th>Depression</th>
<th>Anxiety</th>
<th>Somatization</th>
<th>General psychological distress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support seeking</td>
<td>✓ [Klaric]</td>
<td>✓ (Farhood &amp; Dimassi)</td>
<td>✓ (Pederson)</td>
<td>✓ (Pederson)</td>
<td>✓ [Farhood 1993]</td>
</tr>
<tr>
<td></td>
<td>✓ (Farhood &amp; Dimassi)</td>
<td>✓ (Farhood &amp; Dimassi)</td>
<td>✓ (Farhood 1993)</td>
<td>✓ (Pederson)</td>
<td>✓ (Farhood 1993)</td>
</tr>
<tr>
<td></td>
<td>✓ (sports club</td>
<td>✓ (Pederson)</td>
<td>✓ (Pederson)</td>
<td>✓ (Pederson)</td>
<td>✓ (Farhood 1993)</td>
</tr>
<tr>
<td></td>
<td>membership)</td>
<td></td>
<td></td>
<td></td>
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67
<table>
<thead>
<tr>
<th>Positive cognitive restructuring</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Problem solving</td>
<td></td>
</tr>
<tr>
<td>68</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- (Allden)</td>
</tr>
<tr>
<td>---------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>- ♂ (dispositional**)</td>
</tr>
<tr>
<td></td>
<td>- ♀ (Sousa)</td>
</tr>
<tr>
<td></td>
<td>X (Emmelkamp)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Escape-avoidance</td>
<td>- ♂ (dispositional**)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>X (Farhood 2012)</td>
</tr>
<tr>
<td></td>
<td>X (Hussain)</td>
</tr>
<tr>
<td></td>
<td>X (Morina 2010)</td>
</tr>
<tr>
<td></td>
<td>X (Morina 2008)</td>
</tr>
<tr>
<td></td>
<td>X ♀ (situational**)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Distraction</td>
<td>✓ (intrusion)</td>
</tr>
<tr>
<td></td>
<td>(Gavrilovich)</td>
</tr>
<tr>
<td></td>
<td>✓ (Kunovich)</td>
</tr>
<tr>
<td></td>
<td>- (avoidance)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>All coping domains</td>
<td>✓ ♀ (Khamis)</td>
</tr>
<tr>
<td></td>
<td>X (Sachs)</td>
</tr>
</tbody>
</table>

Qualitative findings are presented in *italicized* font

✓ = Protective for mental health
- = Non-significant association with mental health
X = Not protective for mental health
♀ = Women
♂ = Men

* Membership in political parties, arts and cultural societies, local associations, and non-governmental associations

69
Two quantitative studies examined the association between the sum of coping strategies together and mental health, rather than disaggregating the data by coping type (Khamis, 1998; Sachs et al., 2008). Khamis (1998) found that the greater use of coping responses was associated with lower psychological distress among Palestinian women. These findings contrast with those obtained with Tibetan refugees in which increased usage of coping strategies was associated with higher levels of psychological distress symptoms (Sachs et al., 2008).

3.2.4.1 Support seeking and mental health

Findings on the relationship between support seeking and mental health are varied. Usta et al. (2008) and Sousa (2013) found that support seeking (specifically family support seeking in the latter) was linked to significantly lower negative mental health outcomes than groups using other coping strategies. In their study on conflict-affected residents in Lebanon, Farhood and Dimassi (2012) likewise found that social support had a protective effect against PTSD and depressive symptoms, and Klaric et al. (2008) found that social support, especially from coworkers, was protective against PTSD among conflict-affected women in Bosnia Herzegovina. Similarly, Allden et al. (1996) found lower depression and anxiety symptom scores among Burmese refugees who reached out to 'friends' than those who reported other strategies. Pedersen et al. (2008) and Maercker, Povilonyte, Lianova, and Pohlmann (2009) had similar findings in Peru and Chechnya respectively.

However, social support did not necessarily protect against poor mental health across all groups. Farhood et al. (1993) reported that social support was associated with significantly less depression and general psychological symptoms among fathers, but not mothers. Ahern et al. (2004) observed an opposite trend, with social support having a protective effect against PTSD symptoms for women only. Scholte et al. (2004) also found differing associations by gender, with men seeking support from health workers scoring higher on symptoms of depression and anxiety compared to men seeking support elsewhere; while support from family (direct and in-law), friends, and neighbour's had a protective effect against depression and anxiety for women. Social support was found to be protective against depression (Husain et al., 2007; Nelson et al., 2004) among male
and female conflict-affected Serbians and Afghans respectively, while Seino, Takano, Mashal, Hemat, and Nakamura (2008) found no association between social support and psychological symptoms among mothers in Afghanistan.

Some studies found a positive association between support seeking behaviours and elevated mental distress. For example, a positive association was found between seeking support and elevated symptoms of depression, anxiety, and somatic distress for Bhutanese refugees (Emmelkamp, Komproe, van Ommeren, & Schagen, 2002). Similarly, Punamaki et al. (2008) found significant positive associations between seeking social affiliation and somatoform symptoms and psychological distress, and between religious affiliation and psychological distress. These results are partially supported by Kunovich and Hodson (1999) who found that membership in church organizations and unions were significantly positively associated with PTSD symptoms. In their study, having close personal relationships was unrelated to PTSD symptoms. Some of the variety in results on support seeking and mental health may pertain to the specific source of support. Among Lebanese and Palestinian mothers, socially-oriented support, but not family-oriented, was significantly associated with depressive symptomatology (Bryce, Walker, Ghorayeb, & Kanj, 1989; Bryce, Walker, & Peterson, 1989). Mediating factors may also play a role in these disparate findings. Sousa (2013) observed that the relationship between religious support and mental health was mediated by political violence among women in the West Bank. For women who relied highly on religious support, mental health improved even as political violence increased, indicating that the benefits of religious support outweighed the negative impact of political violence.

Support seeking and mental health was examined in five qualitative studies. Badri et al. (2013) observed in Sudan that Darfuri university students tended to form bonds with other Darfuri students which created a protective buffer against isolation, distress, and despair, and helped them face challenges. Similarly, bonds amongst Pakistani and Somali refugee groups reduced anxiety (Thomas et al., 2011). Hardgrove (2009) found the support from religious communities provided a source of meaning and purpose, through the provision of roles within the church. In addition, church attendance yielded opportunities for social and emotional support and resulted in happy feelings. Tibetan refugees reported that support from family members was of primary importance in overcoming mental distress (Ruwanpura et al., 2006). Support consisted of personal advice, taking family members
to Lamas, and providing financial assistance. Similar findings were obtained by Almedom (2004) who found support from church and traditional birth attendants protected against ‘mental oppression,’ ‘too much thinking,’ and ‘sighing’ among female participants.

3.2.4.2 Positive cognitive restructuring and mental health

Quantitative studies were split on whether positive cognitive restructuring was associated with mental health symptoms. Some studies found that strategies under this coping domain were associated with elevated symptoms. For example, Araya et al. (2007b) found that emotion-oriented coping (classified as positive cognitive restructuring in this study was significantly positively associated with mental distress among IDPs in Ethiopia, especially among women. Emmelkamp et al. (2002) also found that certain types of positive cognitive restructuring (worshipping and accepting the situation) were significantly positively associated with symptoms of somatization, depression, and anxiety. Punamaki et al. (2008) similarly found significant positive associations between emotion-focused coping and PTSD and somatoform symptoms, and more general psychological distress. Symptoms of PTSD were significantly associated with positive cognitive restructuring amongst Tibetan refugees in India (Hussain & Bhushan, 2011).

However, this trend was not universal. In a study on conflict-affected residents in the Democratic Republic of Congo, Pham et al. (2010) found that a sense of coherence was inversely associated with PTSD and depression symptoms. Allden et al. (1996) found that one type of positive cognitive restructuring, ‘weria’ (resolve or confidence) was associated with moderately lower anxiety and depression scores among Burmese refugees in Thailand. Studies on conflict-affected persons in Lebanon (Bryce, Walker, & Peterson, 1989; Farhood, 1999) found no significant association between positive cognitive restructuring and mental health outcomes, as did the study on conflict-affected mothers in Afghanistan (Seino et al., 2008).

Overall, qualitative studies found that positive cognitive restructuring was beneficial for mental health. Iranian mustard gas victims of the 1980-88 war with Iraq felt that a patriotic outlook was an effective coping strategy, as it lessened regret and distress resulting from war injuries (Ebadi et al., 2009). Conflict-affected Eritreans and Ethiopians
felt that using ‘diverted thinking’ and forcing oneself to forget sorrow made one ‘feel better,’ and comparing one’s fate to others’ helped put events into perspective (Nordanger, 2007). Similar to Ebadi et al. (2009)’s respondents, interviewees in Nordanger (2007) took comfort by framing their sacrifice and burdens as contributing to a worthy cause of national independence. This finding resonated in other studies; male respondents in Almedom (2004) reported that viewing their displacement within Eritrea as a necessary result of defence of national territory helped them deal with feelings of anger over the loss of lives and assets due to the war.

Drawing on religious beliefs also featured strongly in the qualitative studies, as it was perceived by respondents as helpful in viewing challenging events and circumstances in a positive light. Conflict-affected Iranians turned to religious beliefs to find tranquillity and make sense of events (Ebadi et al., 2009). Tibetan respondents reported a reduction in anxiety due to Buddhist practices such as contemplation and prayer (Ruwanpura et al., 2006). Similarly, Thomas et al. (2011) found that prayer was cathartic and protective against anxiety and suicidal thoughts among Tibetan refugees in Nepal. Badri et al. (2013) found that conflict-affected female students in Sudan coped through strong religious practices and beliefs, and shifting focus to future wishes and aspirations.

3.2.4.3 Problem solving and mental health

Problem solving has a complex relationship with mental health outcomes. Punamaki (1986) observed significant associations between problem solving coping strategies (attack and confrontation, and social and political activity) and elevated psychiatric symptoms among Palestinian women. ‘Working’ as a coping strategy was significantly positively associated with symptoms of somatization, anxiety, and depression among Bhutanese refugees in Nepal (Emmelkamp et al., 2002).

However, the majority of quantitative findings found that coping through problem solving protected against mental distress. For instance, active participation in the agricultural work cycle was protective against PTSD and general psychological distress in a longitudinal study on conflict-affected residents in Mozambique (Igreja et al., 2009). Hussain and Bhushan (2011) found that ‘planning’ was significantly negatively associated with symptoms of PTSD. Similarly, problem solving decreased mental distress
for female IDPs in Ethiopia (Araya et al., 2007b) and male conflict-affected IDPs and returnees in the West Bank (Punamaki et al., 2008). These results are supported by Riolli, Savicki, and Cepani (2002) who found that low levels of control coping (coupled with a high number of stressful events) was related to greater psychological maladjustment (a composite outcome including somatization, obsessive-compulsive tendencies, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid tendencies, and psychoticism) among Kosovar refugees in Albania. However, other authors found little or no association between problem solving coping and mental health outcomes (Allden et al., 1996; Sousa, 2013).

Qualitative studies show a clear protective effect of problem-solving coping on mental health, yielding much more consistent results than those obtained across quantitative studies on this coping domain. The problem solving strategies of striving for educational opportunities (Hardgrove, 2009; Kassam & Nanji, 2006; Nordanger, 2007), working (Kassam & Nanji, 2006; Thomas et al., 2011), adapting to new host environments and cultures (Badri et al., 2013), and keeping track of the news (Almedom, 2004) were reported in qualitative articles as protective against poor mental health. Strategies related to education and work were linked to feelings of relief and hope, as well as a route out of poverty.

3.2.4.4 Escape-avoidance and mental health

On balance, the included studies show a link between escape-avoidance coping strategies and poor mental health outcomes. For instance, Emmelkamp et al. (2002) found that strategies such as drinking alcohol, ignoring problems and isolating oneself were significantly positively associated with symptoms of somatic distress, anxiety, depression, and somatization. Similarly, Kellezi et al. (2009) found that self-blame was significantly positively associated with symptoms of anxiety and depression. Morina (2007) found that Kosovars using avoidance as a coping strategy had significantly higher symptoms of PTSD, depression, anxiety, and somatization than those who did not use avoidance, findings which were largely supported in subsequent research on similar groups (Morina et al., 2010; Morina, Stangier, & Risch, 2008). A qualitative study on six post-conflict settings supports these findings, reporting a link between alcohol and drug use and perceived negative mental health impacts (Ezard et al., 2011).
Despite these consistent results, the relationship between escape-avoidance coping strategies and mental health is far from straightforward. Hussain and Bhushan (2011) observed a significant positive relationship between some escape-avoidance techniques and PTSD symptoms. Similarly, Punamaki (1986) found a significant relationship between most (but not all) aspects of escape-avoidance and psychiatric symptoms. The debate is deepened by Bryce et al. (1989; 1989), who found that some specific strategies of escape-avoidance coping (but not others) were significantly associated with symptoms of depression. Punamaki et al. (2008) found that usage of avoidance/denial was significantly negatively associated with PTSD and somatoform disorders, while others found no relationship between escape-avoidance and mental health (Riolli et al., 2002).

The influence of gender may partially explain these mixed results, though there is no consensus on how gender mediates the relationship between avoidance and mental health. Araya et al. (2007b) found that avoidance-oriented coping significantly reduced mental distress for women, but not for men. However, Usta et al. (2008) found that women who tried to forget about negative experiences had significantly higher negative mental health outcomes than those who used other coping strategies.

3.2.4.5 Distraction and mental health

Mixed findings were obtained on the relationship between coping through distraction and mental health. Emmelkamp et al. (2002) found that a variety of distraction techniques (playing with children, going for a stroll) were significantly positively associated with symptoms of somatic distress, anxiety, and depression. Further, Kellezi et al. (2009) found that humour was significantly positively associated with symptoms of anxiety and depression. However, Gavrilovic et al. (2003) found that participants who engaged in leisure activities as distraction had lower intrusion scores on a PTSD measure that those using other coping methods, but did not differ on other components of the PTSD assessment or on general psychological symptoms. Kunovich and Hodson (1999) observed a significant negative association between frequent participation in social activities (such as going to the cinema, or cafes) and PTSD symptoms, which suggests that such activities are protective against poor mental health for this group. Only one qualitative study explored distraction coping and mental health. In this study, Eritrean refugees drew a link between distraction and a reduction in sorrow (Nordanger, 2007).
3.3 Discussion of systematic literature review findings

To the best of my knowledge, this Chapter is the first systematic literature review on coping among conflict-affected civilians in LMICs. Support-seeking behaviour was the most commonly-reported coping strategy, followed by positive cognitive restructuring, problem-solving, escape-avoidance, and distraction respectively. The key influence on the use of coping appeared to be gender while the influence of trauma was more mixed. The evidence on the relationship between coping and mental health was largely unclear.

The contradictory findings suggests further exploration of the coping strategies used by conflict-affected populations and their influence on mental health is needed to establish a firmer evidence base upon which to base policy and programming decisions. The current evidence base is also limited by the cross-sectional design of almost all the quantitative studies (though the challenges of using alternative study designs in such contexts are fully recognized). This limitation means it is not possible to understand the temporal relationship between coping and mental health.

Despite these caveats, this review has identified some key findings. Support seeking has a mixed association with mental health outcomes, and may be more protective for women’s mental health than men’s. According to the qualitative findings, support seeking is especially protective for women against general psychological distress. The findings for positive cognitive restructuring showed an almost-complete split between qualitative and quantitative articles, with the former reporting a protective effect on mental health and the latter showing either no or a negative effect on mental health. The quantitative findings are consistent with studies on refugees (Matheson, Jorden, & Anisman, 2008) and immigrants (Jibeen & Khalid, 2010) in high-income countries. Finally, problem solving appeared protective against mental health problems, whilst escape-avoidance was associated with greater mental health problems. Studies on correlates of poor mental health amongst refugees in high-income settings largely show that support seeking and problem-focused coping are associated with lower levels of PTSD symptoms (Gorst-Unsworth & Goldenberg, 1998; Ozer, Best, Lipsey, & Weiss, 2003) and depression and anxiety (Schweitzer, Melville, Steel, & Lacherez, 2006; Taylor, 2007), while escape-avoidance is associated with higher levels of depression symptoms (Matheson et al.,
The results obtained in this review are largely consistent with these observations and support recommendations to improve support-seeking and problem-solving approaches for conflict-affected populations.

In several studies reviewed here, gender appeared to influence coping strategies, and also shaped the relationship between coping and mental health. These findings may relate to differing access to formal or informal resources by women and men which may then influence their coping activities (Araya et al., 2007a; Lopes Cardozo et al., 2005; Punamaki, 1986). Conflict-affected women and men experience war and displacement differently with women more likely to face structural barriers resulting in economic, social, and physical insecurity, including intimate partner violence (Annan & Brier, 2010; Feseha et al., 2012; Kottegoda, Samuel, & Emmanuel, 2008). The higher use of alcohol among men than women among conflict-affected populations may create yet another stressor for women (Okulate & Jones, 2006; Somasundaram, 2010; Weaver & Roberts, 2010). Additionally, mounting evidence suggests that women in post-conflict areas in LMICs frequently are confronted with expanded roles. Though this often implies the additional responsibility of financially supporting dependents due to poor employment opportunities for men (Almedom, 1992; Bennet, Bexley, & Warnock, 1995; El-Bushra, 2000; Sideris, 2003; Turnip & Hauff, 2007), it is important to recognize that conflict-induced disruption of gender roles can potentially challenge patriarchal relations that limit women in more stable times (Turshen & Twagiramariya, 1998; Willems, 2005). Another key explanation for this gender variance is differences in reporting mental health symptoms and coping behaviours between women and men. This gender difference in reporting may be particularly pronounced in populations where men feel particularly emasculated due to their loss of traditional roles as provider and protector. The findings from this review support the provision of gender-sensitive programming to support mental health in post-conflict areas.

The variety of coping strategies used and the differing, often contradictory, associations with mental health also stem from the extremely diverse populations and their conflict-related experiences which are interpreted in culturally-specific ways. For instance, a major source of trauma for Tibetan refugees was religious persecution, (Sachs et al., 2008), whilst other groups faced sexual violence (Pham et al., 2010). Each population
must be contextualized within cultural imperatives which form conceptions about appropriate forms of coping. The studies also varied in their fundamental conceptualizations of mental health, with different epistemological and methodological approaches unsurprisingly yielding diverse findings. Some authors, such as Nordanger (2007), took a highly sceptical view of concepts such as PTSD and associated assessment tools, instead following a much more culturally-specific approach by using inductive methods to determine coping strategies and related mental health effects. In contrast, quantitative studies regularly applied mental health measures developed originally for other, largely Western, populations.

The differing conceptualization of mental health across these articles is matched by a variety of coping conceptualizations. Though this rightfully respects the different ways in which people think about and address adversity, the diversity presents a challenge to synthesizing results to understand the larger picture of how conflict-affected persons cope in LMICs. This knowledge gap may impede the development of effective policy and programming interventions for this group, since it is difficult to improve mental health outcomes or bolster effective coping strategies if the evidence underpinning these topics represents discordant viewpoints. This necessitates the need for context-specific research on coping to inform local policy and programming decisions, rather than generalizing results between different settings and populations.

The findings were marked in their difference between qualitative and quantitative studies, with the former tending to highlight the positive influence of coping strategies on mental health and the latter more likely to highlight negative associations. While these studies were of different populations, this variance also reflects the different epistemological approaches, assumptions and tensions between individual perceptions versus quantified measures with regards to coping and mental health. Further exploration of these variances would be helpful to gain a deeper understanding on coping and its relationship with mental health.

3.4 Limitations of the systematic literature review
This review was limited to academic articles published in English. Because the data extraction, quality appraisal, and analysis were completed by only one person, potential for selection and extraction bias is present. Meta-analysis and meta-synthesis of quantitative and qualitative articles respectively were not completed due to the heterogeneity of outcomes, coping types, and methods. Therefore, it is recognized that generalization of the results to other contexts is constrained due to the highly context-specific nature of the included articles. The classification of coping strategies into domains was challenging given their varied nature which could result in different classifications by different researchers. I sought to offset this through detailed discussions with the PhD supervisor to reach consensus on the classification coping types.

3.5 Conclusion of systematic literature review

The need for research on protective factors against poor mental health has been identified as a key area of inquiry within the field of mental and psychosocial health research with conflict-affected populations (Tol et al., 2011b). This Chapter contributes to the knowledge base on coping strategies used by conflict-affected persons by reporting on the strategies used, factors influencing coping, and relationships between coping and mental health. Moreover, the Chapter highlights the current difficulties in synthesizing disparate literature on coping and mental health. The evidence base would benefit from more studies, including of a longitudinal study design, to better understand the relationship between coping and mental health.

In the next Chapter, I describe the study context within which the research was conducted, before moving on to the methodology Chapter.

Chapter 4: Study context

This Chapter provides the context for the research in the Republic of Georgia. It outlines recent and historical events which are critical to understanding and interpreting the lives
and backgrounds of the study participants. I begin with a short description of Georgian culture and identity and clarify the use of geographical terminology used in the study. The Chapter then describes Georgia prior to 1922, which marked the commencement of annexation into the Union of Soviet Socialist Republics (USSR) which lasted almost 70 years. The second section focuses on aspects of daily life during the Soviet era, specifically on gender roles, education and work, and healthcare. The final section outlines various aspects of post-communist daily life as Georgia gained independence from Russia. Within this section, the 2008 Russo-Georgian war, and its aftermath, are described. This section also contains four stories of women included as study participants.

Georgia is a strongly agricultural society, with almost half of the population living in rural areas and depending on subsistence and semi-subsistence farming for livelihood (European Union, 2013; Pelkmans, 2006). On the eve of the Soviet era, it is estimated that over 80 per cent of Georgian’s population was rural, depending on subsistence agriculture (Gachechiladze, 2014).

Literary contributions, most notably, the national poem ‘The Knight in the Panther Skin’ by Georgian’s national poet Shota Rustaveli form another touchstone of Georgian culture and identity (T. de Waal, 2010). The poem recalls the golden age of Georgia from the 11th to 13th centuries, and embodies Georgians’ self-attributed characteristics of loyalty to kin and heroism (S. F. Jones, 1994). Georgian writers became an important symbol of opposition to Russian annexation in the second half of the 19th century. The most famous writer of this era, Ilia Chavchavadze, was canonised in 1987 by the Georgian church for his service to the nation (S. F. Jones, 1994).

Displays of generosity and hospitality are also important elements of Georgian culture. A Georgian respondent in Pelkmans (2006) remarks:

You know how much hospitality means to us in Georgia. We have our tradition of eating and drinking. When [relatives] visit us, we know how to treat them, how to receive them well. Even if a person has nothing in his home and is in a bad economic situation, he will tell his kids: “Sorry, you will have to go to bed early. We don’t have food for you; we have guests tonight.” And the kids won’t even complain because they know how important it is to have guests. As we say, “Guests are a gift from God” (Pelkmans, 2006, p. 74)
Practices such as feasts, toasts, and gift-giving are esteemed rituals which reinforce national values, and symbolize and reinforce individual and family social standing within communities (Goldstein, 1999; S. F. Jones, 1994; Muehlfried, 2007). The Georgian ‘supra’ (literally, tablecloth) is a well-known ancient tradition, which consists of a large feast and plenty of wine. This celebration can be held both for informal get-togethers and special occasions. A designated ‘toastmaster’ (called a ‘tamada’) leads the ritual by proposing various toasts in a specified order, after which guests clink glasses with the tamada and say ‘gamarǯveba’ (literally ‘to your victory,’ the equivalent to ‘cheers’) and a glass of wine or vodka is consumed (Frederiksen, 2013; Kotthoff, 1995). It is considered taboo to drink before the tamada proposes a toast. The amount of wine which is consumed by guests after the toast depends on the relevance or importance of the particular toast. The tamada is required to drink the entire contents of his drinking vessel (either a glass or a vessel made out of a bull horn) after each toast (Kotthoff, 1995). As such, tamadas are required to possess a high tolerance to alcohol. It is their responsibility to ensure that attendees leave the dinner with positive feelings, a goal highly valued by Georgians (Kotthoff, 1995).

The supra plays a central role in Georgian life and provides an occasion for the transmission of shared history, knowledge and values through ‘verbal art’ (Kotthoff, 1995). The tradition of toast-giving helps to establish and reinforce social bonds between attendees. Common toasts focus on the glories of Georgian history, Georgian mythology, the beauty of Georgia, and the reverence of ancestors (S. F. Jones, 1994). Toasts can also reference and integrate religious beliefs and prayer, which took on an importance especially during the suppression of religious practices under the Soviet regime. Rhetorical strategies such as are extravagant wording, repetition, dramatic climaxes, and/or citation of philosophers or esteemed poets, are employed. There are specified orderings of toasts depending on the occasion (weddings versus funerals, for instance), and whether a foreigner is present (Kotthoff, 1995). Despite the established patterns of toast-giving, a toastmaster’s ability to deliver the expected oration in a creative or novel way is valued, and subject to evaluation by guests later in the evening following dinner.

The tamada role is largely considered to be a male one, often a high-ranking man or the head of the host family (Kotthoff, 1995). Therefore, toasting reaffirms gender hierarchy
by placing men’s speech in the realm of the public, while assigning women’s speech to the private realm. During a toast, the men typically rise, while the women remain seated. Women can act as tamadas, but this deformatizes the supra. The more formal the supra, the more likely that a male will act as tamada, and that the toasts given will elaborate and complex. There also exists a parallel between the complexity of the speeches and the complexity of the food prepared, as well as between the complexity and eloquence of the toasts and the honour attributed to the host family. Every man present at a toast will be asked to propose a toast, in as a way to honour the host, other guests, and the moral values of Georgia (Kotthoff, 1995).

The supra sometimes features a toast competition between the men. It starts with the tamada talking about a specific topic, and the other men must then modify this topic in subsequent toasts (Kotthoff, 1995). At the end of the round, the tamada decides who will open the next round depending on which toast was considered the best based on the originality and formulation of the toast, and reaction of the other guests. The winner then takes the drinking horn from the tamada, and becomes the second tamada and the centre of attention of the dinner guests. The competition is an important sign of masculinity; those who cannot take part are considered unmanly (Kotthoff, 1995).

Singing patriotic songs and recitation of poetry are also part of the supra. There exists a persistent link between alcohol use and the tradition of hospitality for guests, reflecting Georgian pride over their home-made wine. An adult male respondent in Pelkmans (2006) states,

You know our customs, whenever a guest arrives you have to provide him a meal, and since we have a long tradition of wine drinking, you have to serve wine and drink together. People would think badly of you if you said that alcohol was prohibited in your house. It would be the same as saying that you are not Georgian (pp 128).

Christianity was introduced to Georgia by St. Nino in approximately 328 AD (Suny, 1994). The Georgian Orthodox faith is central to the identity of many Georgians, as demonstrated by frequent church attendance, the high status of the Georgian Orthodox patriarch, and the strict observance of various religious practices. Results from the 2002 Georgian census reveal that 83.9 percent of the population of Georgia overall and 94.7 percent of ethnic Georgians identify as Georgian Orthodox (Georgian State Statistical
Department, 2004). Funerals hold enormous social importance. A supra is held, featuring a set of highly-structured toasts in the following order:

1. To the tamada; 2. to the person who has died; 3. to his or her spouse (if dead); 4. to the person's parents (if dead); 5. to the person's grandparents (if dead); 6. to the person's other dead relatives; 7. to people from Georgia who died in the war; 8. to Georgians who died abroad; 9. to families who have no descendants and whose names are lost; 10. to the spouse of the deceased (if living); 11. to the children of the deceased (if living); 12. to the surviving parents; 13. to the surviving siblings; 14. to the surviving relatives; 15. to the surviving friends and neighbours; 16. to the other members of the supra; 17. to people who have been good to the family of the deceased (Holisky, 1988).

The funereal meal served must be abundant, as it is believed that this will ensure the deceased is similarly greeted with an abundant meal in the afterlife. A picture of the deceased is hung in front of their house for one year following the death. Especially in rural areas, women are expected to lament and wail during funerals, as it is believed that this intensifies their relations to the deceased in the hereafter (Kotthoff, 2001). The lamentations also exemplify gaining and paying respect and honour (Kotthoff, 2001). Rituals and additional lamentations are often performed on the 7th and 40th days after a death of a loved one (T. de Waal, 2010; Kotthoff, 2001), and families often gather at gravesides on the birthday of the deceased (Frederiksen, 2013). Kotthoff (1995) notes that the deceased are generally more integrated into everyday life than in the Western world. A surge of religiosity was observed after Georgia regained independence after the collapse of the Soviet Union (Clements, 1994; Kotthoff, 2001; Pelkmans, 2006). Broers (2008) suggests that Georgian adherence to the Orthodox Church symbolises an expression of cultural identity rather than a strict adherence to religious doctrines and practices.

Strong ties of ‘brotherhood’ are prevalent amongst groups of men, forming spiritual kinship which bestows benefits as well as obligations between members (Frederiksen, 2013). A sworn brother/sister must receive and offer hospitality to other brothers/sisters at any time, be willing to lend money, and provide support during difficult times, especially funerals (Dragadze, 1988). Georgian families encourage children to rely on kinship networks not only because this is tradition, but also because this support system is imperative in order to navigate and ‘get ahead’ in Georgian society, where permission and petitions are required in order to achieve amenities such as jobs and accommodation (Dragadze, 1988).
Georgia has long been ethnically heterogeneous, composed of a diversity of groups each with distinct traditions, manners, and languages (Pelkmans, 2006). The North and South Caucasus combined have the greatest density of distinct languages in the world (T. de Waal, 2010), with an estimated thirteen percent of the population of Georgia speaking a language other than Georgian as their mother tongue (Bachmann, 2006). A 2002 census revealed that out of the total population of Georgia (4,371,535, excluding the population in South Ossetia and Abkhazia), 3,661,173 (84%) were ethnic Georgian, followed by ethnic Azerbaijanis (284,761; 7%) and Armenians (248,929; 6%) (Geostat, 2002). The remaining 3% were composed (in descending order) of Russians, Ossetians, Yezids, Greeks, Kists, Ukrainians, and Abkhazians.

The Ossetians claim that they descend from the Scythians who lived in what is now called South Ossetia more than twenty-five hundred years ago (T. de Waal, 2010; R. J. Kaiser, 1994). Other accounts date Ossetian presence in northern Georgia to the 13th or 17th century (Souleimanov, 2013; Toft, 2001). Ossetians primarily live in North Ossetia, currently part of the Russian Federation (T. de Waal, 2010). South Ossetia is comprised of 3,900 square kilometres, amounting to 5.6% of the total area of Georgia. According to a 1989 census, the Ossete language is the primary language of 98 percent of Ossetians, and 60 percent can speak Russian as well (Henze, 1991). Economic indicators from 1998 reveal that South Ossetia’s economy was on par with the world’s poorest countries, with a Gross Domestic Product (GDP) equivalent to 15 million USD, and an average salary of 2,000 Russian Rubles per month (equivalent to 70 USD) (Parliamentary Budgetary Office of Georgia, 1998). Though economically poor, South Ossetia is blessed with rich farmland and abundant fresh mountain water. South Ossetia is situated on a strategic route across the Caucasus mountain range (T. de Waal, 2010).

The state of Georgia has long resisted (or denied the existence of) the very concept of ‘South Ossetia,’ as the term implies a link with North Ossetia in Russian territory. Most Georgians prefer the name ‘Shida (meaning ‘inner’) Kartli’ or ‘Samachablo’2 (T. de

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2 Despite Georgian’s preference for these terms, I use the term ‘South Ossetia’ in this study due to its wider use and recognisability outside of the region.
Despite tensions between ethnic Georgians and Ossetians, there has been a high rate of intermarriage over the centuries.

4.1 Pre-Soviet Georgia

The first traces of the Georgian nation (called ‘Sakartvelo’ by Georgians themselves, meaning ‘the place where the Kartvelis live’) date back to the 4th to 5th centuries (Souleimanov, 2013), with the establishment of the first Georgian church, language and alphabet (T. de Waal, 2010; IIFFMCG, 2009 V.II). Georgia enjoyed relative power in the Caucasus in the 11th to 13th centuries, but then split into smaller political entities and endured frequent attacks from large regional powers such as the Mongols, Ottomans, Iranians, and later, Russia, as their influence waned (S. F. Jones, 1994; Suny, 1994). Such attacks diminished international trade flowing through Georgia and damaged its economy and regional prominence (Tsereteli, 2014).

The Russian empire entered the South Caucasus in the second half of the 18th century. Similar to other colonial relationships, the attitude of many Georgians to Russia was ambivalent, as the relationship implied both benefits and burdens (Suny, 1994). The 1917 revolution in Russia created a power vacuum in Georgia, ushering in a brief period of independence from Russia, which lasted from 1918 to 1921 (Suny, 1994). Noe Jordania, prime minister of the Democratic Republic of Georgia, made clear Georgia’s pro-European stance in a speech to the Georgian Constituent Assembly in 1920. He stated, “Our life today and our life in the future is…indissolubly tied to the West, and no force can break this bond” (S. Jones, 2014, p. 4).

This period of independence was marked by three conflicts between Ossetians and Georgians in South Ossetia. At that time, landowners in South Ossetia tended to be Georgian nobles, while Ossetians tended to form the peasant class (Saparov, 2015). The first armed conflict, which occurred in 1918, was sparked due to economic policies which peasant Ossetians believed unjustly supported powerful aristocratic landowners, who

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3 Kartvelis was originally east Georgia, where the provinces Shida Kartli and Kvemo Kartli are currently. The term Kartli eventually expanded to refer to all of Georgia (Gahrton, 2010). Similar to the previous footnote, I use the term ‘Georgia’ rather than ‘Sakartvelo’ in this study due to the widespread use and recognisability of ‘Georgia’ outside of Georgia.
tended to be ethnically Georgian (Souleimanov, 2013). Ossetian peasants refused to pay taxes to Georgian nobility, and seized their lands. Georgian forces responded with ethnically motivated murders and ethnic cleansing of Ossetians. The Ossetian population requested assistance from Soviet Russia, which was provided due to the latter’s intent to regain control of Georgia and gain a strategic position linking the North and South Caucasus. Subsequent armed conflicts occurred in 1919 and 1920, with the South Ossetian side receiving covert support from the Soviet Union. On 31 May 1919, Bolsheviks in North Ossetia entered South Ossetia to assist in their comrade’s ‘sovietization’ (Welt, 2014). The arrival of these reinforcements yielded a victory for the South Ossetian side against the Georgian, with the former killing nearly 80 Georgian National Guardsmen and taking 500 prisoner (Welt, 2014). They entered and occupied Tskhinvali and declared the area under Soviet power. In November 191, the Georgian forces responded by executing 13 rebels, conducting ethnic cleansing of South Ossetians, killing thousands, burning Ossetian villages, and causing approximately 20,000 to flee to Soviet Russia (T. de Waal, 2010; Souleimanov, 2013; Welt, 2014). It is estimated that 5,000 died in the conflict, mostly refugees succumbing to starvation and illness (Welt, 2014). The Georgian government also forcibly relocated Ossetians who had resided in the Java area north of Tskhinvali. This disaster is remembered bitterly by generations of Ossetians, who frequently refer to the events as genocide (Saparov, 2015). Only months later, in February 1921, the Red Army invaded Georgia and many of the South Ossetians forced to flee to Russia returned and occupied those areas from which they had been driven out. Due to their experiences with Georgian rule, many South Ossetians welcomed the Russian Red Army as a saviour which granted them a degree of protection and autonomy from Georgia (Welt, 2014).

4.2 The Georgian Soviet Socialist Republic

Georgian independence was brought to an end in 1921 when the Soviet Red Army (which Ossetian volunteers had joined in large numbers in retribution against the Georgians) occupied the nation, designating the territory (along with Armenia and Azerbaijan) the Transcaucasian Socialist Federative Soviet Republic (TSFSR). In 1936, the TSFSR was dissolved and the Georgia Soviet Socialist Republic (SSR) became a Republic in its own right. As a concession to the Ossetians, the South Ossetian Autonomous Region was created in 1922, with expanded borders to include several communities comprised
primarily of ethnic Georgians (Souleimanov, 2013). The specific degree of autonomy bestowed upon the region varied over the course of the Soviet era (Rayfield, 2012). The separate status granted to South Ossetia was viewed by many Georgians as a strategy to limit Georgian power and influence over the territory (IIFFMCG, 2009 V.II).

Only one year after the Red Army entered Georgia, an uprising was organized by the Committee for the Independence of Georgia, a conglomeration of several anti-Bolshevik parties. In late August 1924, Soviet authorities in a number of (mostly Western) Georgian cities were arrested by the armed bands (Suny, 1994). However, the majority of the Georgians people did not rally to their cause and the uprising was quickly and brutally suppressed by Soviet forces (Ramishvili & Chergoleishvili, 2014). Nearly four thousand Georgians were killed, and many more imprisoned or sent to labour camps in Russia’s far north (Suny, 1994). The failure of the uprising silenced opposition to the communist party, facilitating the acquiescence of the population to Soviet rule and the integration of Georgia into the Soviet sphere. Further, the lack of aid from the West to support the uprising signified the lack of political will among the European leaders to protect Georgia from Soviet power (Gachechiladze, 2014).

Compared to peasants in Russia, those in Transcaucasia (encompassing modern-day Georgia, Azerbaijan and Armenia) were poorer, holding less land, livestock, and tools. It is estimated that peasants composed 85.5 per cent of the population of Georgia at the time of the Red Army invasion. The agricultural sector was reorganised in the early 1920s, with estates and large land holdings confiscated (Suny, 1994). The confiscated land was put into a state fund and redistributed by local soviets to landless peasants. By 1923, the last large estates of the Georgian nobility had been seized and transferred to the poorest peasants. Georgia in the mid-1920s were a time of recovery, stabilisation, and gradual economic growth. The economic recovery was accompanied by a revival of Georgian culture (S. F. Jones, 1994; Suny, 1994). Educational institutions were established, Georgian publication was encouraged, and opera, theatre, and film flourished. Georgians benefited from policies of affirmative action (S. F. Jones, 1994). Such measures further lessened opposition among Georgians, particularly among the intelligentsia, to the Soviet regime.
The gradual economic growth of the early 1920s was followed by stagnation at the end of the decade as the amount of grain collected from peasants steadily declined (Suny, 1994). There were riots in Tbilisi in 1928 over the scarcity of bread. As the shortage became acute, party leaders introduced a variety of measures to force grain out of the peasants. A shift toward the collectivisation of peasant land gained momentum. The percentage of collectivised farms in Georgia rose from 3.5 in October 1929 to 63.7 in March 1930. In South Ossetia the increase was even more striking, with the percentage of collectivised farms rising from almost zero to 92 over the same time frame (Lomashvili, 1972, as cited in Suny, 1994). The forced collectivisation was met with resistance by Georgian peasants, with protests and demonstrations breaking out in areas such as Kakheti in eastern Georgia. Other forms of resistance also occurred, such as the slaughter of livestock. It is estimated that the sheep population of Georgia halved from 1929 to 1930 (Lomashvili, 1972, as cited in Suny, 1994). Despite the resistance to the collectivisation of agriculture, Georgia emerged as a major supplier of wine, tea, tobacco, and citrus fruits to the rest of the Soviet Union.

The mid-1930s in Georgia were marked by Stalin’s Great Terror, which involved an extensive purge of the Communist Party, widespread repression of ‘enemies of the people,’ ‘show trials’ for those accused of being against the state, and arbitrary banishments and executions. The toll of the Great Terror in Georgia and Transcaucasia was extraordinarily high. For instance, in 1937, the Ajarian communist leadership was found guilty of being agents for foreign intelligence services and most were executed (Suny, 1994). Abkhazian communist leaders too were found to be counterrevolutionaries and almost a dozen shot. The last show trial in Georgia occurred in 1938, which resulted in five employees of the Georgian Animal Husbandry Research Institute shot for alleged sabotage (Suny, 1994). Party leaders were unable to protect anyone from the Terror, and those tasked with purging the party tortured and killed men and women with whom they had worked only months before. The purges and reorganisation of the party in Georgia opened up positions for those staunchly loyal to Stalin. A new elite emerged, composed of men and women intimately tied to the Stalinist system which had provided them with employment, education, and power (Suny, 1994).
World War II increased patriotism among Georgians as the entire society was mobilized in the war effort. Though the Soviet Union was initially allied with Nazi Germany, this alliance fell apart when the latter invaded Soviet territory on 22 June, 1941 (Suny, 1994). Though the Germans did not make it into the Southern Caucasus, Georgia was close to the front and played an important role in supplying manpower, textiles, munitions, and other materials. The war and victory over a common enemy brought the Georgian nation and the Soviet government together. Georgian losses were heavy, with the population decreasing by over 300,000 during the war (Suny, 1994).

The 25-year period between 1928 and 1953 (when Stalin died) was a period of extraordinary change for Georgia. Suny (1994) argues that Georgia was transformed more fundamentally during this quarter-century than at any other point in its three-thousand year history. The population increased from approximately 2.7 million to just over 4 million (even accounting for the 300,000 lost in World War II), the capital had grown from less than 300,000 to over 700,000, urbanization had decreased substantially the number of rural peasants and increased the number of industrial workers, and women made up almost half of the workforce (Suny, 1994).

The post-Stalin years in Georgia were characterised by a reduction in Moscow’s interference in the economy of Georgia and a general cultural ‘thaw.’ Concessions on language and education were granted to various minorities including Abkhaz, Ossetian, and Armenians, and hopes were raised for additional political reforms. Folklore societies and museums were supported, and national literature nurtured (S. F. Jones, 1994). Soviet policies subsidised various institutions such as film studios, theatres, newspapers, publishing houses, and universities which not only facilitated the transmission of communist ideology, but also nationalist ideas. This arrangement ultimately led to the subversion of Soviet messages in favor of nationalist values and narratives which ran counter to Soviet propaganda (S. F. Jones, 1994). Thus, a rich counterculture flourished in Georgia from the 1960s onward.

The thaw and general de-Stalinisation caused confusion and unrest amongst some Georgians, uneasy at the power vacuum left by Stalin’s death (Suny, 1994). In 1956,
Nikita Khrushchev (who had replaced Stalin) had denounced Stalin during his ‘secret speech’ in February. On the third anniversary of Stalin’s death on 5th March 1956, no official ceremony was held. However, an impromptu demonstration took place at a statue of Stalin on the banks of the Kura River in Tbilisi, which involved reading poems and speeches commemorating Stalin’s deeds (Suny, 1994). Protestors and demonstrators continued to gather every day until 9th March, when Georgian officials approved a celebration of the anniversary. When protestors moved through the central streets, the police and army fired on the group, killing dozens and wounding hundreds. Rumours circulated that many more were actually killed and secretly buried by the authorities (S. F. Jones, 1994). The episode increased Georgian distrust toward Moscow, especially toward Khrushchev specifically. The protest can be read as either as a revival of Stalinism, or of an expression of Georgian nationalism.

A nascent dissident movement was noticeable in the 1970s, though it was easily isolated and repressed. Dissidents Zviad Gamsakhurdia and Merab Kostava uncovered the systematic pillaging of Georgian religious treasures, and brought attention to the forced relocation of Meskhian Turks from the Mekheti region of Georgia to Central Asia (Suny, 1994). Both were charged with disseminating anti-Soviet propaganda, and imprisoned. Gamsakhurdia later recanted his views on television to receive a pardon, only to later become involved in a campaign to protest Soviet restrictions on the Georgian language. Both Kostava and Gamsakhurdia went on to found dissident societies into the 1980s. The late 1980s yielded a more permissive environment toward political dissent, which ushered in an escalation of ethnic politics in Georgia (Suny, 1994). In June 1988, a group of Abkhazian communists demanded the secession of Abkhazia from Georgia. This was followed a few months later by the Abkhazian regional party directly criticising the Georgian party leadership and the unequal state of Georgian-Abkhaz relations. Fear of Abkhazian secession from Georgia, paired with the fear that Georgia would not be able to secede from the USSR, led to massive demonstrations in Tbilisi in November 1988 (Suny, 1994). The Abkhazians again called for independence from Georgia in March 1989, which lead to an escalation of protests in Georgia. Moscow granted permission to the existing government to repress the protestors, culminating in the events on 9 April 1989 described in a later section.
During the Soviet period, there were no armed conflicts between ethnic Georgians and South Ossetians in the South Ossetian Autonomous Region. The two groups lived side by side, with high rates of intermarriage and very rare instances of ethnic violence. Ossetians numbered approximately 65,000 in South Ossetia (about two-thirds of the total population of the region), and 100,000 outside of South Ossetia (Toft, 2001). Within South Ossetia, Georgian and Ossetian villages formed a patchwork, with many people trilingual in Russian, Georgian, and Ossetian. Those outside of South Ossetia were particularly well-integrated with Georgians, the majority speaking fluent Georgian (T. de Waal, 2010). Tensions occasionally surfaced between the two groups. In 1925, for instance, South Ossetians expressed discontent via a petition to Stalin over local administrative roles overwhelmingly being given to Georgians rather than Ossetians. Ossetians also petitioned to have more school classes taught in Ossetian rather than Georgian. This petition was initially unsuccessful; the Georgian alphabet was imposed upon the South Ossetians until 1954, after which they wrote in the Cyrillic alphabet (Rayfield, 2012). These petitions exemplify a pattern whereby South Ossetians appealed directly to Moscow in order to keep powers from Tbilisi in check. These petitions also reflect the tendency within Soviet Georgia to favour ethnic Georgians over minorities. Georgians were overrepresented in state positions, and funding for cultural projects promoted aspects of Georgian culture almost exclusively (Suny, 1994). Despite this treatment, Ossetia was considered to be one of the most pro-Russian regions in the USSR during the Soviet era (Birch, 1995).

The Georgia SSR regime (and within it, the South Ossetian Autonomous Region) was under the control of the Soviet Union in virtually all aspects of life, from education and work, religion, health, and women’s role in society. All of these aspects were structured according to Soviet ideology which favoured collective material progress and the needs of society over egoism, individual desires and gratification (Hinote, Cockerham, & Abbott, 2009; Hoffmann, 2003; Marody & Giza-Polesczuk, 2000). Soviet authorities espoused that individuals could only reach their full potential by joining the collective and engaging in socially useful labour (Hoffmann, 2003). The Soviet state sought to create a ‘New Soviet Person’ based on these ideals, who would be sober, efficient, disciplined selfless, modest, honest, sincere, nonreligious and willing to put self-interest aside for the good of the collective (Attwood, 1997).
The Soviet system vehemently opposed religious thought, deeming religious behaviours and beliefs ‘backward’ and superstitious. Institutions such as the League of the Militant Godless commenced campaigns to prevent religious observance and promote atheism (Hoffmann, 2003). In the 1920s, the patriarch (leader) of the Georgian church was arrested, over a thousand churches were closed, and many priests and monks murdered or imprisoned (Rayfield, 2012). The Soviet state also carried out an anti-Islamic campaign in Adjara (a region in Georgia inhabited by the ethnic Laz population), as well as in Uzbekistan, Kyrgyzstan and Kazakhstan which included the destruction of some mosques, the closure of madrasas, and the forced unveiling of women (Akiner, 1997; Corcoran-Nantes, 2005; Pelkmans, 2006; Suny, 1994). One elderly Adjaran respondent in Pelkmans (2006) recounted the following event which occurred in 1929:

It started after the Communists ordered the women to come to a meeting. Then [the Communists] ripped off the [women’s] chadri and threw them into a fire. It was not a large conflict, only a few villages were involved. The people had no weapons, no bombs. No cars, nothing – just some hunting rifles. Of course when the army arrived it was all over. What could these farmers do against a professional army? Not a single thing! (p. 106).

Despite such repression, much of the population maintained their religious beliefs and practices throughout the Soviet era, especially in inaccessible mountainous regions (Pelkmans, 2006). The degree of religious oppression fluctuated over the Soviet era; after initial suppression the Georgian Orthodox Church was granted fuller autonomy to operate by 1943 (as church adherence was believed to strengthen patriotic support for the war effort during World War II) (T. de Waal, 2010).

Georgians were comparatively better-off than many other citizens in Soviet Republics, enjoying a relatively secure lifestyle during the Soviet era (T. de Waal, 2010; Frederiksen, 2013; Scott, 2007; Shelley, 2007b). Whilst Ukraine and Russia were to bear the burden of heavy industry and politics, Georgia represented a place of luxury, sunshine, and health for workers. Batumi, on the Black Sea coast, became a major tourist destination thanks in part to the promotion of the region as the ‘Soviet South’ or ‘Soviet Florida’ to the rest of the USSR, a place of exotic produce and holiday resorts where Soviet workers could relax (T. de Waal, 2010).
It is difficult to assess the socioeconomic status of average Georgians in the Soviet era, since a multitude of alternative economies to the official state economy flourished not only in Georgia but across the Soviet sphere (Frederiksen, 2013; Katsenelinboigen, 1978; Ledeneva, 2006). In the shadow economy, goods (including fruits, vegetables, and wine), services, and jobs could be obtained through a system of informal networks and contacts termed blat (Dragadze, 1988; Ledeneva, 1998, 2006; Pelkmans, 2006; Suny, 1994). Reliance on blat circumvented the regulation of the Soviet state and was driven by unmet consumer demand (Shelley, 2007a). Farmers on collective farms were allowed to grow and sell produce on private allotments, which provided them with a supplemental income. In 1970, Georgian farmers earned an estimated three times more from their private plots than from their collective farm income (Suny, 1994). At that time, only approximately two thirds of fruits and vegetables grown in Georgia were marketed, with the remainder sold in the black market. The shadow economy was judged to be almost as large as the official state economy in Georgia, facilitated and regulated by the presence of criminal bosses or ‘thieves-in-law’ (T. de Waal, 2010; Ramishvili & Chergoleishvili, 2014). Though corruption and bribe-taking was present throughout the Soviet Union (C. Humphrey, 1995; Ledeneva, 2006), some speculate that Georgia had a reputation second to none with regard to the scale and scope of their black market (Grossman, 1977; Suny, 1994). According to Shelley (2007b), Georgians played a central role in the shadow economy of the entire Soviet sphere. Though they composed only 2 per cent of the Soviet population, they composed an estimated one-third of the network of thieves-in-law throughout the Soviet Union (Glonti, 1998, as cited in Shelley, 2007a). They operated underground factories, and managed illicit trade distribution networks across the USSR. Georgian farmers defied Soviet laws and exported large quantities of citrus fruits and other agricultural products to be sold in markets in Moscow and beyond (Shelley, 2007a). As Georgian-grown citrus fruits were highly valued, Georgian farmers often yielded incomes 10 times higher than the average Soviet worker (Shelley, 2007b). Collective farmers in the Ratcha province, well-known for producing renowned Khvanchkara wine, were markedly prosperous as one-third of the annual output was sent directly to the Kremlin in Moscow (Dragadze, 1988).

4.2.1 Gender roles

The Soviet Union was the first country in the world to incorporate equal rights in its constitution, in the wake of the 1917 Revolution (Corcoran-Nantes, 2005). Policy and
laws were passed which removed men’s preferential rights regarding property, and bestowed upon women the right to vote and stand for election. A quota system was established which reserved 30% of elected government positions for women.

The Soviet view of families, womanhood, and fatherhood evolved over the USSR era. During the early years of the Soviet state, the ‘family’ was denounced as a bourgeois institution which enslaved women. Revolutionaries advocated an ideal of love freed from the confines of marriage and sought to liberate women from domestic responsibilities (Clements, 1994; Hoffmann, 2003). In 1922, reforms made divorce much easier for women to attain, with jurisdiction over marriage removed from religious institutions and transferred to the Soviet state. Soviet feminists such as Aleksandra Kollontai called for a collective child care approach (consisting of children’s homes, child care, and communal dining facilities) to relieve individual women of the burden of raising children, which they predicted would cause the family to ‘wither away’ (Ashwin, 2000; Goldman, 2002; Hoffmann, 2003).

4.2.1.1 The New Soviet Woman

A conception of womanhood emancipated from domestic burdens was just one idealized version of womanhood perpetuated by the Soviet state. Varieties of preferred womanhood changed according to the political goal(s) of given eras (Kay, 1997). A dramatic reversal of ideology occurred in the 1930s, likely spurred by a dramatic decrease in the birth rate and the need to prepare for impending war. The Soviet government embarked on a campaign to bolster the family in order to increase the birth-rate, thereby producing healthy citizens capable of working and contributing to the war effort (Attwood, 1997; Hoffmann, 2003). This development was not unique; many European governments championed motherhood and the traditional family in order to demographically sustain possible future military action in the wake of World War I (Hoffmann, 2003).

The state strove to create a ‘New Soviet Woman’ from the 1930s onward, who would be equal to men in the workplace without abandoning her work in the domestic sphere (Buckley, 1997; Clements, 1994; Crate, 2004; Hoffmann, 2003; Kay, 1997). In 1936, the Soviet state made abortion illegal, divorce more difficult, restricted access to contraceptives, and tightened regulations on child support in the case of single-parent
families (Engel, 2004; Hoffmann, 2003). A very traditional family model was emphasized, along with an essentialist vision of women as mothers, placing responsibility upon women to have large families and instil discipline and collectivist values into children (Hoffmann, 2003). A socially acceptable life-trajectory prescribed young women to become educated and work, then focus on maternal roles (remain at home to care for small children, receive state support in the form of maternity leave and mother’s allowances), and then return to the workforce after children were school-age (Wolchik, 2000). The pro-natalist agenda strengthened after World War Two (WWII), with divorce prohibitively expensive and the introduction of incentives for women to have more children (Clements, 1994). Women were granted a 2,000 Ruble annual bonus for each child they had over six children, and a 5,000 Ruble annual bonus for each child after the tenth (Hoffmann, 2003). An honorary title of ‘mother heroine’ was bestowed upon any woman who bore and raised ten or more children. Women with five to nine children were granted the ‘order of maternal glory.’ Besides the social status afforded by such titles, the achievement entitled mothers to various privileges regarding retirement pension and other social benefits (Corcoran-Nantes, 2005).

By promoting an essentialized view of women as mothers, the state assigned women a social role distinctly different to that of men (Hoffmann, 2003). Though the Soviet state challenged the gendered division in the public sphere, it did not challenge it in the private sphere. This resulted in women being doubly burdened by domestic and work obligations.

4.2.1.2 The New Soviet Man

The Soviet state also sought to restructure masculinity and fatherhood. Prior to the 1917 revolution, fathers’ authority over the family was absolute, legitimised by the then-powerful Orthodox Church (Kukhterin, 2000). The Soviet state delegitimized the role of the patriarchal male by occupying the private sphere, taking over responsibilities and assuming rights which were previously within men’s roles. For instance, by deeming only state/civil marriages as legitimate, men’s previous ‘ownership’ of wives and children granted through church-legitimized weddings were nullified (Kukhterin, 2000). Men’s role in the Soviet era revolved around work; tasks around childcare were covered by
women and the state (through childcare, universal education, and extra-curricular activities such as pioneer camp), which presented a barrier for male integration into the Soviet family (Ashwin & Lytkina, 2004). Women’s rights to divorce and employment further undermined men’s power in the family, as women could support themselves and children with the help of the state. As noted by Kukhterin (2000), “the state was prepared to stand in for the husband and father” (p. 85). Despite the incursion of the Soviet regime into private family life, and benefits afforded to women such as employment, education, and child care, the male ‘breadwinner’ norm endured throughout the Soviet era (Kiblitskaya, 2000a).

4.2.2 Education and work

The gendered division of the private sphere described above manifested in education and work patterns. The Soviet economy was managed entirely by the state, which emphasized large-scale production and efficient distribution (Hoffmann, 2003). The state introduced decrees to support women’s employment, such as declaring women’s right to work in 1917-1918, and passing legislation protecting pregnancy leave. Large numbers of women were recruited into the workforce during the first ‘Five Year Plan,’ which commenced in 1929 (Goldman, 2002).

Part of the first five year plan was the collectivisation of agricultural land into large state-run farms. This initiative had almost universal coverage, with non-collectivised farms occupying approximately only one per cent of the arable land in the USSR by 1991 (Bridger, 1997). Collectivisation destroyed peasants’ traditional way of life: livestock and all property of ‘kulaks’ (peasants judged to be ‘rich’) was seized by the collectivisation campaigners (Engel, 2004). In Georgia, peasants initially reacted by killing their livestock rather than submitting to the new collective farms. Man-made famines struck Ukraine and parts of Russia during collectivization in those areas. However, the collectivisation proceeded at a slower pace in Georgia, and so the Georgian rural populace was thus spared the privations elsewhere (T. de Waal, 2010). Despite the fact that collectivisation was bitterly opposed by most peasant women, by the late 1930s they comprised the majority of collective farm workers as men tended to migrate to urban areas for better opportunities (Engel, 2004). These women performed backbreaking labour, since much of farming was un-mechanized and only a tiny fraction occupied administrative or
management roles. They were paid a very small salary for this labour, in addition to small allotments of private land which they used to grow food and feed their families, selling any excess produce.

Collectivized agriculture was one of two economic bases for the Soviet state, along with centralized industry (Clements, 1994; Goldman, 2002). The creation of a strong workforce for these bases required investment in the educational sphere. A large-scale literacy program was launched in the 1930s, along with state-funded universal free education (R. J. Kaiser, 1994; Suny, 1994). The impact of these policies was evident in the increasing numbers of female newly-graduated physicians, lawyers, scientists, and professors into the 1930s. The increase in literacy rates amongst female peasants in the Caucasus was particularly rapid (Lapidus, 1978), leaping from just under half literate to approximately 80% over the 1930s (Clements, 1994). It is estimated that a half million people were taught how to read and write during the first ten years of Soviet rule (Suny, 1994). Both Georgians and the Ossetians attained particularly high levels of education, higher on average than the Russians for much of the Soviet period (R. J. Kaiser, 1994).

The Soviet state strove to involve women in skilled occupations and placing them in management positions. However, these intentions could not overcome strongly entrenched beliefs about the gendered division of labour in rural agricultural settings. Men remained over-represented in the better-paying jobs which involved operating machinery and management, whilst women took on the most gruelling and labour-intensive tasks (Clements, 1994). Though women constituted over half of the agricultural workforce by the end of the 1930s, 97% of managerial jobs in the sector were held by men (Clements, 1994).

With the advent of World War II, the line separating men’s and women’s work dissolved as the latter entered traditionally ‘male’ areas of employment such as heavy industry and construction (Clements, 1994; Corcoran-Nantes, 2005; Engel, 2004), mirroring developments in western countries (Woldu & Budhwar, 2011). Within the farming sector, women were recruited into formerly-male-dominated jobs such as tractor drivers, mechanics, and managers, and formed 90% of the agricultural workforce by 1945.
(Clements, 1994; Engel, 2004). Post-WWII, new industrialization policies created work and ensured that demand for women’s paid labour remained high (Marody & Giza-Poleszczuk, 2000), though many were pushed out of the higher-status positions they attained during the war in order to open up opportunities for returning male war veterans (Clements, 1994; Engel, 2004). Women’s participation in the workforce was among the highest in the world, with 90% of working-age women either working or attending school full-time (Kuehnast & Nechemias, 2004). A system of subsidized day-care encouraged mothers to re-entering the workforce soon after giving birth (Werner, 2004).

Despite high educational credentials and significant work experience, women across the Soviet Union were chronically underrepresented as managers and upper-level politicians (Dudwick, 1997; Engel, 2004; Kovacs & Varadi, 2000; Kuehnast & Nechemias, 2004; Marody & Giza-Poleszczuk, 2000), though they did constitute almost half of deputies elected to local Soviets in Georgia, as elsewhere in the Soviet Union (Lapidus, 1978). Female deputies contributed to policies related to family, health, education, and culture, but were largely uninvolved with budgetary matters or foreign affairs (Lapidus, 1978). Generally, women tended to take on jobs which were low-paying and low status (Ashwin & Bowers, 1997), such as secretaries, stenographers, copyists, archivists, cashiers, warehouse workers, ticket inspectors, and hairdressers (Goldman, 2002). Even where men and women took similar jobs, a lack of pay equity resulted in women receiving 20% to 40% lower wages than men working in the same positions, as female labour was viewed by managers as inferior to male (Engel, 2004; Goldman, 2002; Marody & Giza-Poleszczuk, 2000). Kiblitskaya (2000a) argues that the traditional gender hierarchy which was upheld in the private sphere was reproduced in the work sphere, leaving male supremacy unchallenged.

In the late 1980s, unemployment rates dramatically increased in the Soviet states as they restructured their economies during the era of perestroika (Ashwin, 2000). Many countries of the former Soviet Union embarked on a “shock therapy” approach to economic transition. Though this approach increased GDP by reducing governmental expenses and liberalizing the economy, it also increased poverty, especially among women (Werner, 2004). It also caused delays in salary distribution; those who were
fortunate enough to be employed during perestroika were regularly paid 6 to 8 months behind schedule (Werner, 2004).

4.2.3 Health

It was recognized that the project of socialism required a healthy society (Koch, 2013). Thus, by 1937 the Soviet Union provided national healthcare to all citizens, with health care personnel paid by the state. The ‘Semashko’ model of health care was implemented, composed of a multi-tiered system of care with a strongly differentiated network of service providers (Fleck, 2013). The 5 levels of care (district, central rayon, municipal, oblast, and federal) interacted through an extensive referral system, with each level corresponding to severity of ailment. The district physician was central, as s/he provided and/or coordinated medical care for the population within the catchment area. However, patients frequently by-passed the district physician in order to go directly to specialists (Fleck, 2013). Massive hospitals were constructed, coupled with massive training programs which fit into the developments in education described in the previous section. In-patient care was heavily favoured over out-patient care, which frequently led to short hospital admissions for relatively mild health issues such as hypertension, minor respiratory problems and gastritis (Corcoran-Nantes, 2005).

Though the health system promised to provide universal free access to all, in reality the system was extremely bureaucratic and rife with contradictions and redundancies. High-status state officials received superior care from the most highly-trained physicians, who also had access to the best medicines and equipment. While urban residents had access to hospitals, rural residents instead received care in village hospitals, by physicians’ assistants or ‘feldshers.’ Rural patients in Georgia tended to receive poorer-quality care than their urban counterparts. The poor quality health care in Georgia in urban and rural was characterised poorly-trained practitioners who commonly demanded payments in the form of money or goods in return for treatment (Koch, 2013). These demands may have been partially due to the chronic underfunding of the health sector and physicians. Because the health system was a ‘non-productive’ sector (as opposed to industry or agriculture), it consistently received insufficient funding to provide the level of care promised to the populace. From the 1930s to the 1960s, the sector in Georgia received less than 5% of the GDP (Koch, 2013). Moreover, the funds received were inefficiently
used, with disproportionate monies diverted to laboratory research and health-care facilities rather than personnel remuneration and basic materials. Even so, the system was a relative improvement of health services in many regions, and was soon reflected across the Soviet republics in dramatic improvements in life expectancy and infant and mother mortality rates (Corcoran-Nantes, 2005). As medication was covered by the state, limited finances presented no barrier to following a treatment regime (though medication supply presented another barrier).

The Soviet system sought to improve reproductive health, demonstrating the close linkage between Soviet policies on the family (most obviously, the promotion of the ‘New Soviet Woman’ described above) and health. Women’s clinics, paediatric institutes and specialist women’s hospitals were established across the Soviet Union (Corcoran-Nantes, 2005). The pro-natalist initiative of the 1930s saw an increase in funding for maternity wards and child-care facilities (Hoffmann, 2003). Though many births still occurred at home, a midwife was usually present. Despite the increase in investment in maternity clinics, funds remained insufficient and lacked basic supplied such as gloves and soap, as well as personnel (Engel, 2004).

Coupled with institutional investments, government authorities implemented educational initiatives to improve public health. Public health officials and doctors intervened by stressing the importance of hand washing and domestic cleanliness amongst the population (Hoffmann, 2003). The Ministry of Health demonstrated responsibility for leading the masses toward better health through publications on how to clean the body, clothing, and bed linens. Through pamphlets and posters, Soviet health messages consistently portrayed the maintenance of healthy homes as within women’s roles (Hoffmann, 2003).

4.2.3.1 Alcohol use

It is difficult to access statistics on women’s alcohol consumption in Georgia during the Soviet era. Elsewhere in the Soviet Union, women’s consumption it is thought to have been uncommon relative to men’s consumption (Hinote et al., 2009). In fact, male alcoholism was viewed as reaching ‘catastrophic’ levels in some areas of the USSR (Clements, 1994). In the rural countryside of the USSR, alcohol consumption was often
the choice leisure activity among men (Bridger, 1997; Denisova, 2010; Pilkington, 1997), often cited by women as the reason for divorces (Bridger, 1987; Engel, 2004; Lapidus, 1978) and other family problems. Societal expectations prevented women from engaging in the traditionally ‘male’ activity of drinking alcohol (Hinote et al., 2009).

Denisova (2010) argues that male alcohol use was an established part of traditional rural life in the Soviet Union, with holiday festivities being a designated time to eat and drink in abundance. Moreover, a system of ‘magerych’ (which entailed payment for domestic projects such as building barns or completing farmwork with goods rather than money) perpetuated men paying other men for labour with home-made or inexpensive alcohol. Thus, the system of neighbourly support presented opportunities and excuses for men to drink. Due to state-guaranteed employment and the perennial lack of labour on farms, it was impossible to fire men from their jobs even if they drank whilst working.

### 4.3 Post-Soviet Georgia

The collapse of the Soviet Union meant the fragmentation of Soviet territory into fifteen separate countries. Each state embarked on a unique path, some distancing themselves from Soviet ideology more than others. Of the republics that sought autonomy from Russia as the USSR dissolved, Georgia had one of the most difficult transitions to an independent democracy (Slider, 1997). Georgia declared its independence in April 1991 (Gachechiladze, 2014).

The Soviet period failed to convince the populace that women could or should hold influential political posts (Nechemias, 1994), as gains made during the Soviet era regarding women’s participation in government quickly eroded as the USSR dissolved (Buckley, 1997; Corcoran-Nantes, 2005; Fuszara, 2000; Grunberg, 2000; Moses, 1996; Popkova, 2004; Tohidi, 2004; White, 1997). The percentage of women elected as deputies in the Soviet Union fell from 32.8% in 1984 to 15.7% in 1989 (Lane, 1990). In 2000, women made up only 7.2% of the Georgian parliament (Tohidi, 2004). At the advent of the post-Soviet era, women in countries of the former Soviet Union had less access to legislative institutions than they had in the decades under communist rule. Whilst men came to dominate political structures in post-Soviet states, women became quite active in
creating and working in the NGO sphere (Berg, 2004; Corcoran-Nantes, 2005; Hemment, 2004; Kuehnast & Nechemias, 2004; Tohidi, 2004).

4.3.1 Post-Soviet gender roles

Buckley (1997) argues that a male backlash against the ‘emancipated woman’ of the Soviet era has occurred in post-Soviet states. Within the context of mass unemployment in the wake of the fall of the Soviet Union, there was a strong sentiment that women should return to the home, as this would free up jobs for men, and cut costs for employers who would no longer be burdened by the provision of maternity leave and child care (Ashwin & Bowers, 1997; Dudwick, 1997; Kay, 1997; Marody & Giza-Poleszczuk, 2000). Mikhail Gorbachev, former president of the Soviet Union, exemplified this backlash by encouraging women to heed their ‘purely womanly mission’ by staying home and looking after their families (Ashwin & Bowers, 1997). Such statements reveal that the idea of natural male superiority was preserved in Soviet society (Kukhterin, 2000).

Suny (1994) notes that despite more than 70 years of Soviet power, Georgian society remained a society dominated by men. The phenomenon towards patriarchal gender roles has been described in various ways by post-Soviet scholars, including the ‘re-traditionalization of society’ (Verdery, 1996) the ‘revival of masculinity’ (Marody & Giza-Poleszczuk, 2000), the ‘rise of masculinism’ (P. Watson, 1993) the establishment of ‘male democracy’ (Marsh, 1996), and the emergence of ‘neofamilialism.’ The latter is described below.

Zhurzhenko (2004) proposes that a set of values collectively called ‘neofamilialism’ has emerged in post-Soviet Ukraine. This phenomena is characterized by an emphasis on strong family values as a basis for national consolidation, and a high esteem for motherhood. In Ukrainian society, the restoration of the ‘traditional family,’ which was perceived as threatened during the Soviet era, represents liberation from communist totalitarianism (Zhurzhenko, 2004). The neofamilialist position calls for a return to a heterosexual nuclear family, consisting of two parents featuring a breadwinner male, a non-working female and their children. Women’s previous participation in the workforce is viewed as causing unhealthy competition between family members, a decline in male authority, and an overall misbalance of gender roles and household obligations. Neofamilialism is characterized by its child-centric character, emphasizing the
reproductive function of families. Families which produce at least three or four children are encouraged; one-child families are viewed as causing egocentrism and communication problems for the sole child. Neofamilialism, in Ukraine and other former USSR republics, represents a challenge to the communist totalitarianism of the past, as well as a re-evaluation of Soviet policies encouraging women’s emancipation (Zhurzhenko, 2004).

The neofamilialist position holds that contemporary social problems stem from the vestiges of the totalitarian state and the destruction of the traditional family (Zhurzhenko, 2004). The abolition of private property and the lack of private initiative deprived the family of economic autonomy and forced family members to contribute to the monopolistic state. The lack of economic autonomy granted to families was matched by the dearth of moral autonomy, as the state assumed responsibility for instilling (communist) values to children in the form of free, universal education. These injustices are redressed, according to the neofamilialist position, by transferring social and economic responsibility to the family, curtailing state interference and paternalism in these matters. This is supported by traditional gender roles within the family, with women responsible for household and children, and men in charge of leadership, decision-making, and employment outside the home.

Despite the tide of neofamilialism rising in some post-Soviet areas, a contradictory concurrent trend toward greater flexibility around gender roles has been noted in other areas. Crate (2004) argues that gender roles have become more fluid in rural areas in Russia post-USSR, with men and women taking on activities formerly associated with the opposite sex. She observed that the increase in female-headed households in rural Sakha Republic (a district in eastern Russia), along with the increase of female employment, and the decrease in female labour in the home, have led to men contributing more labour to domestic chores (such as cooking, cleaning, caring for children, and tending the household’s gardens and domestic animals).

Similarly, Kiblitskaya (2000b) observes a greater flexibility regarding gender roles in the post-Soviet era. She argues that men seem to have been hit harder by the transition from
communism to the market economy, stating “many women whose husbands were previously successful, high-earners by Soviet standards have been knocked back by the transition, and have found it hard to regain their footing” (Kiblitskaya, 2000b, p. 67). However, women have adapted by retraining (in some cases, several times) in order to gain a footing in new types of employment. This phenomenon has resulted in women taking on a ‘breadwinner’ role in families, even if they do so reluctantly and would prefer for men to support the family.

The backlash against women’s power can be viewed as an attempt among men to gain control over the private sphere, opening up opportunities for men to define new roles within the family (Kukhterin, 2000). Kukhterin (2000) contends that men are not quite sure what kind of fathers to be; there is tension between attempting to enforce a traditional arrangement of gender relations in which men assume the breadwinning role and a more flexible arrangement.

Part of the backlash may be due to the losses experienced by men in the post-Soviet era. Kiblitskaya (2000a) has argued that men experienced a more significant loss of status in post-Soviet Russia than women. Because they had higher-status and better-paid jobs in the Soviet era (described in section 4.2.2), they had farther to fall when the regime crumbled and may have felt the decline in status more keenly than women. In addition to loss of status, men in the post-Soviet era suffered a loss of identity in the face of late payment of salaries, reduction of wages, and the threat of or actual unemployment (Kiblitskaya, 2000a). Men’s loss of status in the work sphere has resulted in less autonomy for men, less respect from wives (who previously depended on their income), and apprehension about the future (Kiblitskaya, 2000a). Men who previously depended on job security due to their skills in heavy industry have lost confidence as such industries have fallen on hard times.

These aspects are part of the emasculation of men in the post-Soviet sphere. In his recent ethnographic work with young un- and under-employed men in Batumi, Georgia Frederiksen (2013) shows that men have turned to alcohol, drugs and crime “either because there was nothing else to do or because they could not be avoided” (p. 11). These
behaviours represented to these men ways of filling up empty lives, as well as regaining masculinity. Amongst this group, masculinity was also asserted by assembling in groups on streets, public squares, and in front of residential buildings. This served a socializing function initiating men into the practice of ‘birzha,’ defined as ‘hanging around’ (Frederiksen, 2013). Similarly, Pelkmans (2006) and Suny (1994) have noted that displays of consumerism, drinking, and toasting, provide Georgian men opportunities of demonstrating one’s ‘manliness’ to peers.

The seeming increase in conservative views on women’s roles in the post-Soviet sphere hearkens back to previous initiatives undertaken by the Soviet regime aimed at promoting the large families described in section 4.2.1.1. Though the regime saddled women with a double-burden, expecting women to both contribute to the labour force and be good mothers, the gender regime of socialism was arguably less patriarchal than current gender regimes in post-Soviet states (Graney, 2004).

4.3.2 Healthcare

The collapse of the USSR meant extensive healthcare reforms involving the reorganization of financing and delivery of care and treatment in many former Soviets (Chen & Mastilica, 1998; DeBell & Carter, 2005; Fister & McKee, 2005; Walley, Mossialos, Mrazek, & de Joncheere, 2005). At independence, Georgia inherited an extensive and highly centralized Semashko health system (Chanturidze, Ugulava, Duran, Ensor, & Richardson, 2009), featuring under-resourced and overburdened health care facilities lacking in basic supplies and staffed by demoralized personnel who were poorly remunerated (or simply unpaid) (Koch, 2013). The extensive infrastructure was impossible to retain upon independence, leading to a drastic decrease in the number of hospital beds (from 10 per 1,000 population in 1992 to 3.3 per 1,000 population in 2007), though the number of doctors per capita (454.6 per 100,000 in 2007) has remained very high compared to both the Commonwealth of Independent States\(^4\) (CIS) average (approximately 380 per 100,000 in 2007) and the European Union (EU) average (approximately 320 per 100,000 in 2007) (WHO, 2009). However, retaining physicians in rural locations in Georgia has been an issue, with more than 3 times as many doctors in the capital city of Tbilisi than in other regions (Chanturidze et al., 2009).

\(^4\) A regional organisation composed of some former Soviet Republics.
Due to the chaotic nature of Georgia’s transition period (described later in this Chapter), it was effectively left without an official health care system from the early 1990s until 1995 (Gotsadze, Zoidze, & Vasadze, 2005). Rates of infectious diseases quickly increased. For instance, Georgia was second only to Russia in the increase of tuberculosis from the mid- to late 1990s (Lomtadze et al., 2009). There was an increase of 13.4% in the mortality rate between 1989 to 1995 (Collins, 2006). Such public health crises were met with continual under-funding; the proportion of GDP spent on healthcare in Georgia dropped from 3.5% in 1991 to just 0.4% in 2000 (Glinkina & Rosenberg, 2003). In 2005, this had risen to 8.6% of GDP, not far below the EU average of 8.9% and substantially higher than the CIS average of 5.5% for the same year (WHO, 2009). In 2011, the percentage increased to 10.1% (Ministry of Labour, 2011b).

In 1995, a Health Care Reform Package was introduced in Georgia which introduced new concepts into the health care system such as health insurance and user fees (Koch, 2013; Rukhadze, 2013). This package was part of an overall ‘rationalisation’ process which radically privatised the health system (Koch, 2013), which offered unaffordable and low-quality care (Machavariani, 2007). It is estimated that about 80% of hospitals in Georgia were sold to the private sector during health reforms from 2007 to 2009 (Rukhadze, 2013). Out-of-pocket payments to access to medical care acts as a deterrent to seeking medical treatment and accessing pharmaceuticals (Karavasilis, 2011; Skarbinski et al., 2002), though insurance is covered for household living below the poverty line (Chanturidze et al., 2009; Rukhadze, 2013). Out-of-pocket payments are now the main source of funding for the health system in Georgia (Rukhadze, 2013). The polyclinics under the Semashko system have been gradually replaced by family medicine centres, though this process has been uneven across Georgia which has led to dual systems in operation in some areas (Rukhadze, 2013).

Georgian independence and the reorganization of the centralized health care system has had a profound impact on health status of Georgians (Koch, 2013), though they have a longer life expectancy than the majority of other former Soviet Republics (Hinote et al., 2009). For female Georgians, life expectancy at birth was 74.8 years in 2002, which has
remained relatively consistent since 1989. Male life expectancy at birth was 68.0 years in 2002, which was slightly less consistent than the female trajectory (for instance, a notable decrease was observed in 1993, when it lowered to 64.4 years) (UNICEF, 2004). More recent statistics show a much improved life expectancy at birth; 71 and 78 years for men and women respectively (WHO, 2015c), with heart disease and stroke the most common causes of death (WHO, 2015a).

Though psychiatric services in the former Soviet Union were characterized by high rates of institutionalization (Makhashvili & van Voren, 2013), resource shortages led to a chronic paucity of psychiatric hospital beds since the early 1990s. As of 2007, Georgia had one of the lowest numbers of psychiatric beds in the European region (28 beds per 100,000 population) (WHO, 2009). Outside of the hospital system, primary care services across post-Soviet countries are generally not oriented toward managing mental health problems (Jenkins, Klein, & Parker, 2005). In Georgia, primary care provides insufficient mental health services to general and war-affected populations alike (Makhashvili, Tsiskarishvili, & Drozdek, 2010). As of 2013, in addition to psychiatric hospitals, there were 18 outpatient psychiatric clinics in Georgia (Makhashvili & van Voren, 2013). However, the mental health services available in rural locations are less accessible and of poorer quality than those available in urban areas, with almost half of licensed psychiatrists working in Tbilisi (Makhashvili & van Voren, 2013).

A number of specialist mental health groups provide psychosocial support to Georgian IDPs, including the Georgian Society of Psychotrauma (Georgian Society of Psychotrauma, 2008) and the Georgian Association of Mental Health (Georgian Association of Mental Health, 2009). In addition, NGOs such as the GIP-T (The Global Initiative on Psychiatry) serve IPD settlements. Such NGOs have been instrumental in reforming mental health services in Georgia, creating momentum towards humane care (Makhashvili & van Voren, 2013).

Whether the prevalence of psychiatric morbidities such as problematic alcohol use increased, decreased, or remained consistent in the former Soviet Union is a matter of debate and may depend on the specific former state in question. Various authors (Bridger, 1997; Crate, 2004; Dudwick, 2003) have observed an increase in men’s consumption of
alcohol in Russia since the demise of the USSR, though it is acknowledged that this was a problem in the Soviet era as well. Though Georgia-specific information is difficult to access, a notable increase in alcoholism in rural Russia occurred in the 1950s after state-operated farms were consolidated into even larger farms, as part of the collectivisation process which occurred from 1927 onwards. Other increases occurred during an economic downturn in the 1980s, and into the 1990s as the Soviet Union disintegrated (Crate, 2004). Bridger (1997), who interviewed rural health care workers and residents in rural Russia in 1993, described the struggles faced by women whose male partners had turned to heavy alcohol use. These women often perceived that they had little choice but to work hard to support their families, while their male counterparts took to heavy drinking in the wake of the USSR collapse. One female interviewee stated, “The women take absolutely everything on themselves. The man are alcoholics, they won’t do anything” (Bridger, 1997, p. 51). Crate (2004) concurs, arguing that the rise in alcoholism among men rendered them an unreliable and irresponsible workforce, perpetuating and compounding problems in obtaining a job in an economic environment which provided scarce employment opportunities. Crate (2004) also contends that male alcoholism has led to an increase in households headed by single women, reasoning that women would rather shoulder the burden of raising a family alone than live with an alcoholic who strained the family finances.

4.3.3 Economic environment

The collapse of the Soviet Union resulted in the replacement of a centrally-planned economy based on socialist principles to a free market economy based on capitalist tenets, a system unfamiliar to the vast majority of Georgians (Gachechiladze, 2014). A deep recession occurred during transition which caused a dramatic decline in living standards (Scott, 2007; Shelley, 2007b). The transition had a devastating impact on Georgia:

[T]he anarchic disintegration of the USSR wrecked the [Georgian] economy, wiping out savings and pensions with inflation, closing factories, leaving farmland fallow; social cohesion disappeared, as the forces of law and order withdrew (Rayfield, 2012: 379).

In the Soviet era, well over 90% of Georgia’s trade was with other Soviet Republics, and primarily with Russia (T. de Waal, 2010). Due to the lack of trade elsewhere, economic collapse occurred once railways and borders began to shut in 1990 as the USSR collapsed (T. de Waal, 2010). Georgia descended from being one of the most prosperous regions in
the USSR into dire poverty (T. de Waal, 2010; Machavariani, 2007). One of the only industries to thrive in the postsocialist era has been the beer industry. Georgian beer producers, such as the Kazbegi company, have aggressively carved out a dominant market share for its products which are produced in Georgia (Manning & Uplisashvili, 2007).

The Georgian Kupon was introduced in April 1993 to replace the Russian Ruble. Initially, they were circulated at par with the Ruble and the US dollar, but hyperinflation soon devalued the Kupon at an alarming rate (Gachechiladze, 2014). In September 1994, the unofficial exchange rate peaked at five million Kupon to one USD (Wang, 1999). Salaries, if paid, were critically small; government employees could expect to be paid approximately three USD per month which was insufficient to buy any goods or services. Georgian GDP plunged by 73% between 1991 and 1994 (T. de Waal, 2010). South Ossetia was impoverished and economically isolated during this period, with the economy entirely based on agriculture and smuggled goods (T. de Waal, 2010). The Kupon was replaced by the Lari in 1995, which was more successful at retaining its value.

The immediate post-Soviet economy in Georgia was plagued by widespread corruption, increasing poverty, and en-masse non-payment of taxes (Glinkina & Rosenberg, 2003; Pelkmans, 2006). Pervasive organised crime and corruption deterred foreign investment (Shelley, 2007a). The police force, which was tasked with protecting the political system rather than the populace in the Soviet era, was complicit in organized crime to such an extent that it was difficult to distinguish between policy, paramilitary groups, and criminals groups, the latter of which flourished as any semblance of law and order dissipated (Glinkina & Rosenberg, 2003; Kupatadze, Siradze, & Mitagvaria, 2007). It is estimated that between 30% and 90% of economic activity in Georgia during the period of transition occurred in the ‘shadow sphere’ consisting of informal, illegal, or criminal interactions, involving ‘shady’ entrepreneurship, racketeering, smuggling (most notably drugs and alcohol), illegal trade (such as arms trading), and other such activities (Chatwin, 1997; Gachechiladze, 2014; Glinkina & Rosenberg, 2003). The power vacuum allowed criminal gangs to infiltrate Georgia’s governing structures (Ramishvili & Chergoleishvili, 2014; Shelley, 2007b). A large proportion of the working population was pushed out of the formal economy (due to increasing unemployment, low, delayed, or non-payment of wages) into the informal economy, leading to reduced tax revenues and the deterioration
of state services. Business development was at a standstill, with corrupt civil servants identified as a major impediment (Machavariani, 2007). Due to the unavailability of a social safety net, citizens turned to extended family networks for social protection and support (Scott, 2007).

The transition had severe economic consequences for women in particular. In most post-Soviet states, unemployment rates increased more rapidly among women than men (Attwood, 1997; Bruno, 1997; Clements, 1994; Dudwick, 1997; Fuszara, 2000; Kay, 1997; Marody & Giza-Poleszczuk, 2000; Pavlychko, 1997; Tohidi, 2004; Werner, 2004), although trends differed by area to some extent (Buckley, 1997; Kovacs & Varadi, 2000; White, 1997) with men hit harder in some areas (Crate, 2004; Kiblitskaya, 2000a; Szalai, 2000). The rescinding of social programs like subsidized day-care may have further discouraged women with children from actively seeking employment (Bruno, 1997; Dudwick, 1997; Werner, 2004; White, 1997).

The widespread lack of employment led large numbers of Georgians to permanently or temporarily move abroad to work and improve their economic situation (Broers, 2008; Migration Policy Centre Team, 2013), a trend also observed in other post-Soviet states (Hartman, 2007). Exact figures of Georgians abroad vary widely from 198,904 registered migrants (Migration Policy Centre Team, 2013) to 1.5 million (Caucasus Research Resource Centres, 2007) (the latter estimate includes undocumented migrants). It is estimated that Georgia’s population decreased by a fifth in the years following the collapse of the Soviet Union (Rukhadze, 2013; Scott, 2007). A 2010 estimate quotes remittances sent from abroad to amounting to 24% of the Georgian GDP (Ferry, 2013).

Migration has been strongly gendered, with Georgian women making up slightly over half of migrants outside the CIS (with Turkey a popular destination), yet only 36% of migrants in the CIS (Migration Policy Centre Team, 2013). Many of Georgia’s most distinguished cultural figures were among those who left to work and study abroad, representing a blow to the national pride (Scott, 2007). Minority groups also figured prominently in those who left Georgia, as large groups of Armenians, Azeris, Greeks, and Jews emigrated to their kin states (Sordia, 2009). While minority groups composed 28 percent of the population of Georgia in 1989, this dropped to 16 percent by 2002 (Sordia, 2009).
Agricultural work underwent radical transition with the collapse of the USSR. The fate of large collective farms established during the Soviet era came into question in the late 1980s. A strong push toward private farming emerged, with the reorganisation and liquidation of former collective farms. As part of the reorganization, former collective farm workers were given the option of buying shares in farms. For many, this option was viewed as risky and few bought in. Rather, rural Georgian families started to increasingly depend on their private garden allotments to provide food for the family, selling the excess at a profit (European Union, 2013). A 2012 estimate states that approximately half a million farmers became self-employed as a result of the land privatisation process of the 1990s, 95% of which are classified as ‘small farmers’ with approximately 1.2 hectares and 2 cows per family (European Union, 2013). The low income yielded by rural agricultural families is sometimes supplemented by remittances sent by family members working abroad (European Union, 2013).

A reliance on small-scale subsistence agriculture has been noted in other post-Soviet states during transition; fully two-thirds of Russia’s potatoes and a third of its meat and vegetables came from such allotments in the last three years of the USSR (Bridger, 1997). Rural women in particular took on the task of growing food for the family, as they had long been responsible for growing produce in allotments (see section 4.2.2) and tending to livestock during the Soviet era (Bridger, 1997). The overt reliance on such allotments has been referred to a ‘cows-and-kin’ system of household production (Crate, 2004).

4.3.3.1 Cows-and-kin

Crate (2004) argues that households in post-Soviet areas have transitioned from dependence on socialist infrastructure (such as state farms) for employment and goods to a dependence on a household production system called ‘cows–and-kin.’ This system is characterized by families investing in domestic animals, such as cows and chickens, and sharing the labour and foodstuffs such as meat and milk. Within the cows-and-kin framework some households produce goods in excess to their needs, in order to sell products in local markets and bazars (Crate, 2004). Traditional specialty foods are also produced in excess, such as foods associated with certain holidays or festivals. Profit is generally shared among extended family members.
Crate (2004) notes that the turn toward subsistence agriculture represented a common survival strategy across the post-Soviet states, in the wake of the dissolution of the USSR. She observed that rural households in Sahka Republic (a district in eastern Russia) previously employed by state farms now grow vegetables, keep cows and other domestic animals, forage, hunt, and fish to provide their own food needs. A reliance on subsistence farming has been noted in rural locations in other post-Soviet states such as Armenia (Dudwick, 1997).

4.4 Civil unrest and conflict in Georgia 1990-2008

It is within the chaotic context described above that Georgia emerged from a dissolving USSR. In this section I discuss events in Georgia as independence approached and the numerous wars which afflicted the 1990s (with a particular focus on South Ossetia as this is of most relevance to the thesis). I end the section with an account of the 2008 Russo-Georgian war, which resulted in IDPs being displaced from South Ossetia.

4.4.1 The first South Ossetian war 1991-1992 and aftermath

As the Soviet Union disintegrated in the late 1980s, there were frequent public demonstrations in the Georgian capital of Tbilisi demanding Georgian independence from the Soviet Union. A well-known Georgian nationalist dissident and human rights activist named Zviad Gamsakhurdia organized many such pro-independence rallies. Gamsakhurdia’s speeches at such rallies, along with the distribution of pamphlets by nationalist historians and linguists, spread hostile ideas about ethnic minorities including the South Ossetians, and alienated minorities from ethnic Georgians (Gachechiladze, 2014; Mekhuzla & Roche, 2009; Toft, 2001). He also promoted the Georgian Orthodox church, associating nationalism with religiosity (Pelkmans, 2006). The Georgian media attacked Gamsakhurdia’s opponents, and was complicit in spreading his messages of nationalism which alienated minority groups (Akerlund, 2012). A popular slogan at the time was ‘Georgia for the Georgians,’ a slogan which was interpreted as a battle cry for the oppression of minorities (Slider, 1997). Such chauvinistic rhetoric continued to influence attitudes toward minorities for decades to come (Broers, 2008).
On April 9, 1989, peaceful demonstrators on Rustaveli Avenue in Tbilisi were attacked by the Soviet army who used army shovels and nerve gas, killing 19. The killings shocked the Soviet Union, and resulted in the radicalization of Georgian public opinion against the USSR (T. de Waal, 2010; Ramishvili & Chergoleishvili, 2014; Souleimanov, 2013; Suny, 1994). The events became part of the dialogue reorienting Georgians toward a future separated from Russia (R. J. Kaiser, 1994). By September 1989, a public opinion poll showed that 89% of Georgians wanted independence from the Soviet Union (T. de Waal, 2010). The same spring, South Ossetians issued a declaration in support of Abkhazian independence from Georgia (Abkhazia was another state which had a degree of autonomy from Georgia during the Soviet era). On November 16, 1989, South Ossetia proclaimed their region an autonomous republic; a reaction to the nationalistic rhetoric coming from Gamsakhurdia (Toft, 2001) and to the fear that the rhetoric would lead to oppression of Ossetians as a minority group in Georgia (Laitin, 2001). The proclamation was rejected by authorities in Tbilisi, with Gamsakhurdia arguing that the South Ossetian Autonomous Region was an illegitimate creation of the Red Army, and the proclamation undermined Georgian independence from the Soviet Union (Toria, 2014). A convoy of approximately 20,000 Georgians attempted to reach Tskhinvali to confront those who made the proclamation. The convoy was interrupted by a group of South Ossetians who put up roadblocks and formed a human chain (T. de Waal, 2010). Three days of violence ensued, with six deaths and dozens wounded.

A coalition led by Gamsakhurdia was voted into power in 1990 in a partially democratic election (Gachechiladze, 2014), winning 155 out of 250 seats (Toft, 2001). The election was boycotted by the non-Georgian ethnicities in South Ossetia (Souleimanov, 2013), as it was the only way they could voice their misgivings against the dominant political chauvinistic rhetoric (Toft, 2001). Gamsakhurdia’s platform included independence for Georgia, the implementation of a free market economy, a multiparty governmental system and a legal system which protected the rights of citizens (Toft, 2001). Despite his proclamation that Georgia would become a ‘second Switzerland’ within years (T. de Waal, 2010), it became even more chaotic, as Gamsakhurdia proved incompetent in military, economic, and diplomatic affairs alike (Asmus, 2010). Gamsakhurdia placed loyal supporters in key positions in media outlets, and cracked down on any news agencies critical of the new leadership (Topouria, 2001). Armed gangs (such as the
Mkhedrioni, explained below) ruled the streets, basic services such as electricity and gas supplies were discontinued, institutions such as hospitals and schools stopped functioning, and hyperinflation destroyed the economy. His government also pursued a policy of resettling ethnic Georgians internally displaced due to a series of natural disasters in Georgia’s mountainous regions to minority-inhabited and border regions in the country, in order to ‘Georgianise’ them (Lyle, 2012).

Extreme political parties and paramilitary groups moved in to fill the power vacuum created by the disintegration of the USSR. One prominent group, the Mkhedrioni (translated as ‘knights’ or ‘horsemen’) acted as a parallel army and oversaw a criminal underworld which controlled economically important districts of Georgia by threat (Chatwin, 1997). Their leader was Jaba Ioseliani, former playwright, bank robber, and mafia boss (T. de Waal, 2010). Followers of this ‘paramilitary charity organization,’ sported a macho look characterized by dark sunglasses and black leather jackets, and assumed control over the gasoline and tobacco trades (T. de Waal, 2010). They also controlled prostitution and were involved in running protection rackets preying on newly-established small-scale entrepreneurs (Chatwin, 1997).

Gamsakhurdia embarked on an aggressive campaign to reign in the would-be breakaway regions (which included not only South Ossetia but also Abkhazia and Adjara). His government created ethnocentric policies which disenfranchised national minorities including Ossetians (Sordia, 2009), privileging ethnic Georgians over non-Georgians (Wheatley, 2006). He subjected minorities to chauvinistic rhetoric, often arguing that ethnic minorities were just ‘guests’ on primordial Georgian soil (R. J. Kaiser, 1994), threatening the South Ossetians with deportation (Souleimanov, 2013), and advising against mixed marriages (T. de Waal, 2010). It was commonly argued that minorities such as Ossetians were influenced by and more loyal to Russia than to Georgia (Suny, 1994). Such irresponsible rhetoric cultivated and perpetuated a widely-supported myth among the public that South Ossetians were mere visitors in Georgia, and as such should respect their ‘host’ country (S. F. Jones, 1994). Nationally-minded Georgians suggested that Ossetians should go back to Iran, if they did not like things in Georgia. South Ossetians counter-claimed that they descended from the Scythians, whose presence in both the North and South Caucasus dated back to ‘time immemorial.’
There were frequent protests in Tbilisi against Gamsakhurdia, previously considered a dissident hero. On September 20, 1990, the local administration within South Ossetia unilaterally elevated its status to a Union republic (separate from Georgia), and moved to unite with Russian North Ossetia (Gachechiladze, 2014). At that time, the population of South Ossetia was comprised of two thirds Ossetian and one third Georgian (Asmus, 2010; Toft, 2001). In response, Tbilisi revoked South Ossetia’s autonomous status and sent in troops. This started a war in South Ossetia which resulted in several thousand casualties, destroyed villages, and approximately 10,000 displaced persons, who fled either north to North Ossetia or south into Georgia (Asmus, 2010). Georgians were largely driven out of the South Ossetian capital of Tskhinvali, and some re-settled in Georgian villages near the capital, most of which were undamaged. Due to the interspersed nature of Georgian and Ossetian villages and high rates of intermarriage, the war divided many families (T. de Waal, 2010). Ossetians living outside of South Ossetia were expelled from their home areas in Georgia proper (Wheatley, 2006). Torez Kulumbegov, the local South Ossetian leader, went for talks in Tbilisi but was instead imprisoned by Georgian authorities from January to December 1991 on the charge of spreading distorted historical facts (S. F. Jones, 1994). He was freed only at the insistence of Amnesty International.

During the war, the Georgian Parliament declared independence from the USSR, exactly two years after the bloodshed on Rustaveli Avenue, on April 9, 1991. A few days later, Gamsakhurdia was unanimously elected president of Georgia by the parliament. However, conflict between political factions within the Gamsakhurdia government lead to a coup d’état commencing December 22, 1991. Gamsakhurdia’s opponents launched attacks on the parliament building, where he was taking refuge in a basement bunker (Suny, 1994). The coup d’état escalated into a short, bloody war, at least 113 deaths and the destruction of central Tbilisi (T. de Waal, 2010; Gachechiladze, 2014). On January 6, 1992, Gamsakhurdia escaped from the parliament building and fled to Azerbaijan, then Chechnya, and finally to Samgrelo in Western Georgia (Souleimanov, 2013).

After a brief interim government, Eduard Shevardnadze, a long-time rival of Gamsakhurdia, was appointed president in March 1992. It is alleged that Russia assisted
in the overthrow of Gamsakhurdia and in facilitating Shevardnadze’s rise to power, as the latter was widely regarded as a ‘Soviet man’ who would be far friendlier toward Russia than the former (Souleimanov, 2013). Indeed, Russian influence over Georgia’s domestic matters increased during Shevardnadze’s tenure, as he re-appointed ministers formerly composing the political elite during the Soviet era (Gachechiladze, 2014; Shelley, 2007b). These elite reinstated the Soviet system of governance characterized by embezzlement and corruption (Shelley, 2007b). Following his overthrow, Gamsakhurdia’s supporters (called the ‘Zviadists) led a low-level war in western Georgia until 1993 during which the Mkhedrioni terrorised the populace (Shelley, 2007a). The violence also spilled over into Tbilisi on a few occasions from 1992-1993. In July 1992, a five-sided conflict emerged involving proponents of Gamsakhurdia versus Shevardnadze, Abkhazians versus Georgians, and Russia controlling the major railroad bisecting Georgia (Suny, 1994). Shevardnadze inherited a country with a non-functioning economy, destroyed infrastructure, and at the mercy of armed militias. Further, the conflict with in South Ossetia threatened to escalate into a Russian-Georgian war (T. de Waal, 2010).

Despite these challenges, there was a mood of optimism that Shevardnadze would bring economic stability and peace to Georgia (Scott, 2007; Suny, 1994). Government control over the media lessened immediately after Shevardnadze’s arrival, ushering in a brief era of independent news coverage (Akerlund, 2012). Overtly discriminatory policies against minority groups came to an end (Mekhuzla & Roche, 2009), and a special human rights service was set up to investigate all cases of major human rights violations committed during Gamsakhurdia’s rule (including those committed against minorities) (Sordia, 2009). The more virulent aspects of the rhetoric against minority groups faded (Wheatley, 2006). In addition, a legislative framework aimed at national minority integration was drafted, though it was never signed. Beyond these steps, no consistent policies or long-term strategies were developed to integrate or protect minority rights during Shevardnadze’s tenure (Sordia, 2009).

However, optimism diminished as instability continued and living standards continued to plummet, as almost every aspect of Georgia’s economy and society was infiltrated with crime and corruption during Shevardnadze’s tenure (Machavariani, 2007; Shelley, 2007a, 2007b). The energy sector was completely corrupt, which resulted in frequent loss of
heating and electricity even in the capital of Tbilisi, which disrupted everyday life and demoralised the population (Scott, 2007). The situation was even worse in rural areas, with formerly-prosperous regions such as Kakheti rarely having electricity or running water (Shelley, 2007b). There was a perception amongst national minorities in rural and mountainous regions that they were being deliberately neglected by the government due to their ethnicity (Wheatley, 2006). For instance, Armenian inhabitants of the Akhalkalaki and Ninotsminda districts often voiced the suspicion that the government was deliberately allowing their transport, educational and healthcare infrastructure degrade to such an extreme that they would be forced to leave (Wheatley, 2006). Corruption also infiltrated the transport sector, which meant that neither roads nor rail were maintained, and flights in and out of Georgia were limited and extremely expensive. The latter discouraged potential investors and tourists from entering the country. The banking system was also penetrated with corruption. During Shevardnadze’s tenure, banks sprouted up which functioned solely to launder money for corrupt officials in former Soviet states (Shelley, 2007a, 2007b). The complete absence of oversight over the banking industry allowed such gross corruption to occur. Shevardnadze’s government cracked down on the independent media, as the regime was becoming uncomfortable with reporting depicting the chaotic and poorly-managed situation in the country. By the mid-1990s, the government had attempted to shut down the TV station ‘Rustavi 2’ twice (Akerlund, 2012).

A Moscow-brokered ceasefire between South Ossetia and Georgia called the Dagomys Agreement was signed on 24 June 1992. The agreement was intended as a short-term fix to halt the fighting, but it turned into a long-term agreement in the absence of any subsequent negotiations or agreements. Though the overall casualty numbers were low, the war had a devastating impact considering the region’s population of less than 100,000 (T. de Waal, 2010). The terms established demilitarized zones between South Ossetia and Georgia, which were to be patrolled by peacekeepers from the newly-formed CIS and United Nations monitors. Far from neutral observers, the peacekeepers installed in the South Ossetia were dominated by Russia, who had been part of the conflict which necessitated the need for peacekeepers. In practice, South Ossetia was largely run by Russian military and intelligence services in the post-civil war period, though still officially Georgian territory (Asmus, 2010). Russian military bases were established.
Post-war, South Ossetia experienced a major population decrease, with a decline from 100,000 to 60,000 from 1992 to 1998 according to one estimate (Parliamentary Budgetary Office of Georgia, 1998). This was due not only to the forced displacement of ethnic Georgians from South Ossetia during the war, but also to approximately 17,000 of the most educated segment of the population resettling in Russia (Kakhkhanidze, Kupatadze, & Gotsiridze, 2007).

South Ossetia became a focal point for lawlessness, smuggling, and organized crime (Asmus, 2010; Shelley, 2007a), with a sharp increase in contraband trade (Kakhkhanidze et al., 2007). Assassinations, kidnappings, hostage takings, and violent crimes were frequent (Kakhkhanidze et al., 2007). What was probably the largest market in the Caucasus emerged at Ergneti, on the de-facto border between Georgia and South Ossetia. Attracting thousands of Ossetians and Georgians daily, the market became a major smuggling thoroughfare for low-price untaxed or stolen goods (ranging from fruit, vegetables, tobacco, vodka, and gasoline, to weapons, drugs, and cars) in and out of the South Caucasus (Kakhkhanidze et al., 2007). The smuggling was controlled by the South Ossetian secessionist government, composed by a network of corrupt officials and law enforcement agencies, criminal groups, and marginalized groups such as IDPs, other conflict-affected persons and the poor (Kakhkhanidze et al., 2007). In fact, IDPs and the poor composed a significant proportion of petty traders at Ergneti, who depended on smuggling to cope with difficult financial circumstances (Kakhkhanidze et al., 2007). As Scott (2007) too notes, trade in contraband goods represented one of the few feasible jobs available to impoverished populations (including IDPS) in border areas. Typically, Georgian farmers sold fruits and vegetables to the Ossetians, who sold wheat, petrol, cigarettes, and other goods coming from Russia. The lucrative nature of this economy provided a disincentive for the conflict to become formally resolved, as it would have ushered in taxation on revenues (T. de Waal, 2010) and decreased the power of local clans controlling the market (Kakhkhanidze et al., 2007). Public officials too benefitted from the chaos and un-regulation; a 2002 study by the World Bank estimated that kickbacks to officials exceeded 8% of revenue, making Georgian one of the most corrupt post-Soviet states (Fries, Lysenko, & Polanec, 2003).
Georgia was admitted to the United Nations in the summer of 1992, the last of the 15 post-Soviet states to be admitted due to the disjointed and chaotic nature of the state (Gachechiladze, 2014). At the time, Abkhazia, South Ossetia, and another disputed region called Adjara were effectively running their own affairs, a low-level war was playing out in Mingrelia, and Tbilisi had little control over the territories (T. de Waal, 2010; Pelkmans, 2006). Meanwhile, relations between Georgia and Russia worsened into the 1990s due to the persistence of Russian military presence in South Ossetia despite several agreements signed by both sides which dictated the timetable of removal of Russian military bases (IIFFMC, 2009 V.II). In the late 1990s, Georgia began to tighten its relations with Western countries (Gachechiladze, 2014). For instance, it joined the Council of Europe and increased its interaction with the North Atlantic Treaty Organization (NATO).

Vladimir Putin replaced Yeltsin as President of Russia on 31 December, 1999. By 2000 Russian passports were being issued to residents of South Ossetia, essentially creating a false diaspora (T. de Waal, 2010). By the 2008 Russo-Georgian war, it is estimated that 90 per cent of ethnic Ossetians had possessed Russian passports (Gachechiladze, 2014). Moscow installed former wrestling champion Eduard Kokoity as ruler of South Ossetia in 2001. Kokoity was backed by the ‘Tedeyev brothers,’ shady businessmen who controlled the illegal smuggling scene in South Ossetia after the 1991-92 war (T. de Waal, 2010). He immediately took a strong position against reunification with Georgia, instead arguing that South Ossetia be considered an independent state. The South Ossetian government was largely dominated by Russian intelligence officers, particularly in the chain of command on defence and security issues (Asmus, 2010). Those in the South Ossetian government who were willing to negotiate reconciliation with Georgia were removed from the government.

4.4.2 The Rose Revolution and aftermath

After 8 years in power, Shevardnadze was very unpopular due to the high levels of corruption and crime, along with the economic decline and lack of basic services such as electricity and gas which plagued Georgia during his rule. His administration had again attempted to shut down the independent TV station Rustavi 2 in October 2001, culminating in a raid which was broadcast live. This crackdown led to large-scale protests
later termed the ‘Velvet Revolution’ due to the lack of bloodshed or significant violence in comparison to the protests in 1989 (Manning, 2007). Though Shevardnadze dismissed all of his ministers in an effort to appease the protestors, his political situation had been irreversibly weakened. After one week, the protest ended in a “somber mood, with a general sense of uncertainty as to what exactly had happened” (Manning, 2007, p. 22). In retrospect, the 2001 protests yielded the emergence of two groups which would become important in the ‘Rose Revolution:’ the ‘National Movement,’ headed by a Western-educated lawyer named Mikheil Saakashvili and the student movement called ‘Kmara!’ (literally, Enough!) (Manning, 2007).

Fraudulent elections in November 2003 initially yielded a victory for Shevardnadze. The student movement and political rivals to Shevardnadze called for mass protests, which lasted for two weeks and forced Shevardnadze’s resignation on 23 November in a coup tolerated by both Russia and the United States. Extensive coverage in the Georgian mass media on the electoral irregularities and Shevardnadze’s mismanagement fuelled the protests (Mikashavidze, 2010). These events were later called the ‘Rose Revolution,’ a name which was first used in a CNN broadcast and referred to the supporters of Saakashvili rushed the parliament building on 22 November carrying roses (Manning, 2007). The name quickly caught on in Georgia and abroad. New elections were held on 4 January 2004, yielding in a landslide victory for Saakashvili. On the first day of his presidency, Saakashvili vowed to restore Georgia’s territorial integrity, eliminate corruption, and improve the economy (Broers, 2008; T. de Waal, 2010). Taxes started to be paid, and foreign investment increased, funding various improvements to infrastructure and energy delivery (Shelley, 2007b). Aid from Western states increased, Georgia’s international standing improved, and progress was made toward joining NATO, traditional rivals of the Warsaw Pact countries during the Cold War (Gachechiladze, 2014). European integration was high on Saakashvili’s agenda (Sordia, 2009; Wheatley, 2006). The flag of the European Union was raised in front of all government buildings, a sign of wishful thinking on the part of the government (Scott, 2007; Tarkhan-Mouravi, 2014). Radical reforms were undertaken in the Ministries of Justice, Interior, and Defense (Sordia, 2009). Reforms were also implemented in the education sector by cracking down on corruption, improving and standardising the national curriculum, and developing policies to both integrate minority groups and protect
their language rights (Mekhuzla & Roche, 2009). This was consistent with an overall aim to improve the integration of minority groups into the civil state, as demonstrated by the creation of various bodies whose remit addressed minority issues (though the degree to which policies have been implemented is a matter of contention) (Sordia, 2009). An overwhelming sense of optimism, hope, and pride prevailed amongst Georgian citizens, concomitant with unrealistic expectations for rapid and fundamental change in the status quo.

At the beginning of his presidency, Saakashvili maintained cordial relations with Russia. Putin stated that he hoped the change in leadership would “restore the tradition of friendship” between Georgia and Russia (Shermatova, 2003). The withdrawal of Russian peacekeepers was negotiated, and it was agreed that Russia would allow Georgia to reincorporate South Ossetia as long as the Georgians did not use force. However, there were a few significant barriers to peace. Kokoity was staunchly against the idea of integration with Georgia. Further, relations with Russia remained strained as they refused to give up control of Abkhazia. Saakashvili announced that he would seek even closer ties for Georgia with the United States and EU, and would strive to join NATO.

Part of Saakashvili’s election campaign was to crack down on corruption (particularly in the police force) and the shadow economy, and increase tax revenues (Kukhianidze, 2014; Kupatadze et al., 2007; Machavariani, 2007; Scott, 2007; Shelley, 2007b). Sixteen thousand law enforcement personnel were dismissed and replaced by well-trained and better-paid officers (Kupatadze et al., 2007; Scott, 2007; Shelley, 2007a). His government closed the Ergneti market in June 2004, arguing that the undeclared transactions were undermining the state budget (IIFFMCG, 2009 V.II; Sabanadze, 2014). Indeed, tax revenues at the legal customs checkpoint between Russia and Georgia increased in the months after the closure of the market, bolstering state monies (T. de Waal, 2010). However, the closure of the market had social costs, as the market had brought together Georgians and Ossetians, compelling them to interact and support each other through mutual trade (Sabanadze, 2014). Grassroots Georgian-Ossetian relations were severed by the closure of the market. Further, it rendered thousands of Georgians and Ossetians unemployed. The closure did not go smoothly; by August 2004 clashes were occurring between South Ossetian and Georgian forces as the latter attempted to curtail the flow of contraband. The situation escalated into a brief armed conflict featuring nightly shelling.
Saakashvili announced a new peace plan for South Ossetia in July 2005, called “Initiatives of the Georgian Government with Respect to the Peaceful Resolution of the Conflict in South Ossetia” (IDMC, 2009). The plan offered to South Ossetia substantial autonomy, demilitarization, economic rehabilitation, and a political settlement. Kokoity refused the plan outright, stating, “we are citizens of Russia” (IIFFMCG, 2009 V.II). In 2006, the Georgian government arrested four Russian military officers deemed to be spies. The incident triggered an exchange of mutual accusations and retaliations between Tbilisi and Moscow. The Kremlin refused to issue visas for Georgians, harassed the many Georgians living and working in Russia, and blocked the import of Georgian wine, mineral water, fruit, and vegetables (T. de Waal, 2010). By the end of 2006, all border crossings between Russia and Georgia were cut (Asmus, 2010). During a speech at the UN in September 2006, Saakashvili accused Russia of the annexation and occupation of Abkhazia and South Ossetia, and demanded that the Russian peacekeepers leave both territories (IIFFMCG, 2009 V.II). This speech was delivered a day after a NATO Council, during which it was announced that an intensified dialogue with Georgia would commence (IIFFMCG, 2009 V.II).

In 2006, new elections in South Ossetia again resulted in a victory for Kokoity. However, Georgian-backed forces organized an alternative poll within Georgian-controlled areas, which resulted in the installation of Dmitry Sanakoyev as rival president. In 2007, the alternative government took up office in the Georgian-controlled village of Kurta, situated only 9 kilometres northeast of Tskhinvali. Kurta was one of several Georgian villages in the area along the main motorway between Tskhinvali and the Russian border. Georgian and Ossetian communities were administered separately by the two governments, using separate roads and infrastructure (T. de Waal, 2010). A ‘Georgian’ road bypassing Tskhinvali was constructed. The alternative government was part of a strategy to win over the hearts and minds of South Ossetians through ‘soft power,’ with
the investment of 1,850,000 GEL to repair villages, build medical clinics and recreational facilities, and provide perks to locals such as free summer holidays, summer camps for youth, and a ‘Disco for Peace’ designed to bring South Ossetian and Georgian youth together to mingle. The goal of the strategy, named ‘Project Sanakoyev,’ was to persuade South Ossetians that a future with Georgia was not a bad as their leaders wanted them to believe, and they would be better off economically in a loose confederation with Georgia than annexed to Russia or as an independent state. The assurance that Georgia would respect cultural autonomy was also part of the strategy of soft power.

Sanakoyev aimed to establish South Ossetia as an autonomous territory guaranteed of political representation within a unified Georgia, as evident in an address given at the Georgian parliament in Tbilisi on May 11, 2007 (Civil.Ge, 2007). He stated:

> I hold that the comprehensive Georgian-Ossetian dialogue must ultimately result in granting broad autonomy to the region and guaranteeing political representation and cultural identity to the Ossetian people within a unified state. This must be preceded and followed by joint social and economic projects. Such projects will serve as the grounds for building trust and improving the conditions of the population, which has long suffered from conflict (Civil.Ge, 2007).

The years of conflict had taken a heavy toll on citizens in South Ossetia, both Ossetians and Georgians. Sanakoyev speculates on the toll it has taken on the mental well-being of South Ossetian residents, notably the children:

> For many years, people have been kidnapped and killed each day in the state of frozen conflict. Georgians and Ossetians living in the conflict zone are in constant fear of the future. […] Our Ossetian children grow up in an environment of endless conflict, under constant stress and tension. They don’t have a normal childhood. They don’t know what is going on beyond checkpoints and turnpikes; on the other hand, they are aware how a machine gun sounds, how it can be assembled, how an armored carrier is driven, and how cannons drone. And this is how our generations grow up – or, to be correct, how they are demolished! (Civil.Ge, 2007).

Sanakoyev survived a remote-controlled mine attack on the convoy he was traveling in on 3 July 2008. Though Sanakoyev’s administration and Georgian police officials blamed Kokoity's government for launching the attack, representatives from that government denied the allegation.

In February 2008, Kosovo was recognized as an independent state by approximately fifty nations. This development had implications for South Ossetia, as it provided precedence of a separatist state becoming independent with the support of the West. Putin queried,

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5 This is equivalent to approximately 1,089,650 USD as of April 11, 2007.
“If people believe that Kosovo can be granted full independence, why then should we deny it to Abkhazia and South Ossetia?” (quoted by IIFFMCG, 2009 V.II, p. 27). On 4 March 2008, the South Ossetian government called upon Russia to recognize their independence from Georgia. Though formal recognition was not extended at this point, on 6 March Moscow rescinded a 1996 agreement which banned the delivery of weapons and military aid to the separatist territories, and started arming the separatists. Russians appeared to be preparing for war by illegally moving troops and arms into the separatist regions, repairing a key rail line in Abkhazia, practicing military manoeuvres, and sending Russian journalists to Tskhinvali. These developments were followed by a NATO summit in Bucharest in April 2008, where members pledged that Georgia would eventually become a member (T. de Waal, 2010), though notably no ‘Membership Action Plan’ (MAP) was extended at this point (Gachechiladze, 2014). It is argued that Moscow’s intentions in provoking the war was to prevent NATO expansion to Georgia or anywhere else along its borders (Kukhianidze, 2014), as Putin had warned Saakashvili that there would be consequences if he pursued a pro-West course (Asmus, 2010; Kukhianidze et al., 2007).

Shooting between South Ossetian and Georgian forces commenced on 29 July, 2008. Though this was consistent with the annual ‘shooting season’ which tended to occur almost every summer, the artillery was heavier and more powerful than in past skirmishes. On the Georgian side, it was suspected that the new weapons had been supplied to the South Ossetians via the Russians. Between 29 July and 7 August, four Georgian peacekeepers were killed, and six Georgian police officers, eleven peacekeepers, and fourteen civilians were wounded. Six South Ossetian militiamen were killed and thirteen wounded within the same time frame. On 7 August, Kokoity stated on Russian media that his forces would “clean out” local Georgian forces and villages if Georgian forces did not withdraw (Asmus, 2010). Both South Ossetian and Georgian villages were cut off and in some cases, destroyed during this period immediately before the war. It is estimated that at least 80% of the residents of Tskhinvali were evacuated to Russian North Ossetia in early August (Asmus, 2010). Nonetheless, several thousand remained, taking cover in bomb shelters constructed and used during the 1991-92 war (T. de Waal, 2010).

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6 For instance, the Georgian village of Nuli (in South Ossetia) was destroyed on or before August 4, 2008.
4.4.3 Russo-Georgian war, 7-12 August 2008

Independent observers have concluded that both sides are to blame for starting the August 2008 war (IIFFMCG, 2009 V.II). At 23:35 the night of August 7, Saakashvili gave the order for his troops to attack a column of Russian forces heading toward the capital Tskhinvali, as well as Russian forces coming through the Roki Tunnel on the Russian-Georgian border (Asmus, 2010) (see Figure 2).

The column confirmed Saakashvili’s suspicion that Russia had indeed mobilized, based on the numbers and type of equipment in the column. The Georgian forces arrived in Tskhinvali and briefly held their position. However, Russian reinforcements poured into South Ossetia and Georgian forces were soon outnumbered. As the Russian and South Ossetian forces advanced, the ethnic Georgian population was forced out of the area under threatened or actual physical violence (IDMC, 2009; Tsereteli, 2014).

Figure 2: Map of Georgia including the disputed territories

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7 These forces were revealed to be a regiment of the Nineteenth division of the Russian Fifty-eighth army, known for its brutality in the Chechen wars. The unit was not authorized to be in Georgia (Asmus, 2010).

8 Moscow has claimed that its forces entered Georgia at 14:00 on Aug 8. The precise moment when Russian units entered Georgia is a matter of debate (Asmus, 2010).
It is estimated that between 300-500 houses were deliberately burned, and another 2,000 were damaged during the conflict (OSCE, 2008). Entire Georgian villages north of Tskhinvali were completely razed (Tsereteli, 2014). Georgian forces withdrew from Tskhinvali to Gori, a city approximately 35 kilometers south of Tskhinvali and out of South Ossetia proper. On August 11, the Georgian forces withdrew further afield to Tbilisi. Meanwhile, large numbers of civilians began fleeing Gori (many of which had only recently fled Georgian-controlled villages in South Ossetia). The Russians continued their offensive into Georgia proper, bombing targets across the country and occupying Gori.

On 12 August 2008, a ceasefire (the Sarkozy-Medvedev agreement) was signed and hostilities ended. However, the ceasefire was vaguely worded which provided Moscow the opportunity to exploit the terms. For instance, the Russian army established new checkpoints deep in Georgian territory. Additional peace negotiations in early September
clarified the original ceasefire terms. EU observers were to be given access to the conflict zones, and to assist IDPs in returning home. Though these observers were deployed, they were not given access to the conflict zones (Tarkhan-Mouravi, 2014). No system was implemented to allow ethnic Georgians to return to their homes, and so very few Georgians who fled have been allowed to return. As the Georgian villages north of Tskhinvali were completely destroyed, there is little prospect of return (Asmus, 2010; T. de Waal, 2010). To present, Tbilisi has no control over South Ossetia. It remains locked in a frozen conflict with South Ossetia, and the Georgians displaced by the most recent conflict remain displaced.

Russia formally recognized Abkhazia and South Ossetia as independent republics on 26 August 2008 (Gachechiladze, 2014), a development which was denounced and deemed ‘unacceptable’ by the EU (Tarkhan-Mouravi, 2014). This was followed by the establishment of Russian military bases in both breakaway regions (Tarkhan-Mouravi, 2014). Though the Russians claim that their actions were motivated to defend Russian peacekeepers and newly-minted citizens (acquired through years of ‘passportization’) from genocide (T. de Waal, 2010; Gachechiladze, 2014), others argue that the root cause was geopolitical – Russia opposed and resented Georgia’s efforts to escape the Soviet sphere of influence (Asmus, 2010; Tsereteli, 2014). The war was disastrous for Georgia, who essentially lost all control of South Ossetia. Infrastructure had been destroyed, foreign investment plummeted, and the economy was badly hit (compounded by the 2008 financial crisis) (Tsereteli, 2014). The war diminished Georgia’s political stability and international standing, thereby lessening Georgia’s chances of joining the EU and NATO (Asmus, 2010; Tarkhan-Mouravi, 2014).

It is estimated that 850 people (half of these civilians) were killed in the war and several thousand wounded (T. de Waal, 2010). At least 158,000 ethnic Georgians and Ossetians fled South Ossetia and the bordering areas, amounting to over half the population of South Ossetia (IDMC, 2009). The vast majority of those displaced were initially accommodated in Tbilisi in public buildings such as schools and universities, and then were settled in the Shida Kartli region, of which the city of Gori is the capital. In the final months of 2008, many of those who were displaced from the ‘buffer’ zone bordering South Ossetia returned to their homes, as did ethnic Ossetians who fled alongside ethnic Georgians.
However, a substantial group of IDPs were unable to return home, with 2009 estimates ranging from 37,000 (IDMC, 2009) to 40,000 (T. de Waal, 2010), and 17,000 in 2012 (IDMC, 2012).

4.4.4 The impact of war on Georgians

The provision of adequate housing remains elusive for many IDPs. As of 2011, it was estimated that over 70% of IDPs from 2008 resided in purpose-built settlements which were hastily constructed in the latter months of 2008, adjacent to already-established villages and cities in Georgia, while the remaining 30% resided in multi-storey collective centres comprised of former hospitals, hotels, schools, factories, or other buildings which were initially provided as a ‘temporary’ housing solution when they were first displaced (Roberts et al., 2014). Though beyond the scope of this thesis, the insufficient provision of accommodation has also been noted amongst Georgians internally displaced due to ecological disasters (Lyle, 2012). In addition to poor housing conditions, lack of access to employment and livelihoods continues to be a problem, especially for IDP women (IDMC, 2012). Roberts et al. (2014) found that approximately 16% of IDPs were employed in full-time regular work, and another 4% were employed in irregular work. A quarter were retired, 22% were classified as unemployed, and almost 20% were housewives. Over half of the respondents reported that their household economic status was ‘average,’ while 44% felt that their status was either ‘bad’ or ‘very bad.’ Only a minority of respondents (2.5%) reported that their economic status was ‘good’ or ‘very good.’

There have been a limited number of studies on the mental health impact of war on the Georgian population. Focusing on IDPs from the wars of the 1990s, Buck, Morton, Nan, and Zurikashvili (2000) note high levels of PTSD and depression, elevated rates of non-communicable and communicable diseases, and a rapid decline in the living standard. Women were particularly traumatized by the loss of partners and family members, as well as homes and property. Post-conflict related stressors included arduous living conditions and economic difficulties (Buck et al., 2000). Interviews with women revealed that men were doubly traumatized by the war: by the loss of homes and property, and also the loss of status due to their inability to fulfil their traditional role as the leaders of their families. Women stepped into the ‘breadwinner’ role in many families, altering the long-standing
tradition of men as main earners and providers (Buck et al., 2000; Pol, 1999). Prior to the civil wars in the 1990s, men were heads of the family, responsible for making critical decisions regarding livelihood. Women were responsible for the household, including the maintenance of family order, health, and welfare, and minding children. Post-war, displaced women worked to provide desperately needed income for their families through trading activity and other menial labour. In contrast, men were largely unwilling to engage in menial labour to generate income, and instead were idle for long periods of time (Buck et al., 2000). Buck et al. (2000) conclude, “women have been much more successful [than men] at adapting to the difficult conditions and strains of everyday life in the IDP community” (p. 6).

Early reports on the impact of the 2008 war on IDPs mention the prevalence of feelings of dependency, helplessness and depression (IDMC, 2009). A rapid assessment on IDPs conducted in the months after the war by the Centre for Medical and Psycho-social Rehabilitation of the victims of torture (GCRT) found a high level of anxiety and sleeping disorders, as well as increased aggression and alcohol use among men (Georgian Mental Health Coalition, 2009). Other small-scale rapid assessments and screening projects related to the IDPs observed high reportage of PTSD and depression symptoms, along with other problems such as unemployment (Georgian Mental Health Coalition, 2009).

More recent analyses have found that the most common war-time traumatic experiences reported by Georgian IDPs (including not only IDPs resulting from the 2008 war but also the wars of the 1990s) are lack of shelter, serious injury, being trapped in a combat situation, and experiencing murder and other violent acts against friends and family (Roberts et al., 2014). In 2011, prevalence estimates of symptoms of PTSD, depression, and anxiety were 19.16%, 11.40%, and 7.55% respectively among men and 26.36%, 16.02%, and 12.71% respectively among women (Roberts et al., 2014). Just over 30% showed symptoms of at least one current mental disorder, 12.7% had symptoms of more than one disorder, and 5.6% had symptoms of all three disorders (Roberts et al., 2014). The prevalence of symptoms of hazardous alcohol use was reported for men, at 25.75% (Roberts, Chikovani, Makashvili, Patel, & McKee, 2013). Prevalence estimates of mental disorder symptoms among IDPs (both men and women) from the 2008 conflict
specifically are 25.25% for PTSD, 11.75% for depression, and 10.50% for anxiety, and over 15% had experienced a serious injury (Roberts et al., 2014).

In a sample containing IDPs from the 1990s and 2008, Roberts et al. (2014) found that 71% and 16% of current and former IDP men and women respectively were current drinkers. Of the current drinkers, 28% of men and 1% of women were classified as having at least hazardous alcohol use (according to the AUDIT scale (T. F. Babor, Higgins-Biddle, Saunders, & Monteiro, 2001)), and 12% and 2% of men and women respectively as episodic heavy drinkers (according to the World Health Organization definition of episodic heavy drinking (WHO GHO, 2013)). Cumulative trauma and depression were associated with the outcome of at least hazardous alcohol use. Having experienced a serious injury was significantly associated with episodic heavy drinking. Wine was the most frequently consumed beverage, followed by spirits and beer.

In a study of eight CIS countries, Pomerleau et al. (2008) observed the highest prevalence of episodic heavy drinking (also known as ‘binge drinking) in Belarus, Russia, Kazakhstan, and Georgia. Pomerleau et al. (2005) found that the Georgian sample (drawn from the general population rather than conflict-affected population specifically) had a low frequency of alcohol consumption, but large amounts of consumption per occasion. Frequency was strongly gendered, with 71% of Georgian women stating that they never drank alcohol, compared to 28% of Georgian men. Of those who drank wine at least once every 2 to 3 weeks, two thirds of men drank at least 1 litre of wine at one occasion (Pomerleau et al., 2008). The comparable prevalence among female counterparts with the same drinking frequency was 16%, significantly lower than the men but notably higher than women in other former Soviet countries. This finding is consistent with those obtained by a study on the alcohol consumption among females in 8 post-Soviet states. Hinote et al. (2009) found that Georgian women were almost three times as likely as their Russian counterparts to report consuming wine once per week or more frequently (only the Moldovian/Romanian sample reported a higher odds ratio, of 7.692 compared to Russian women). The relatively high rate of wine consumption among Georgian women likely reflects the Georgian tradition of wine-making, often produced at the household level.
The findings above indicate a need for a strong response from the health care system, especially regarding problematic alcohol use and common mental disorders related to war experiences and the environment at IDP settlements. The State Program for Mental Health (SPMH) in Georgia funds services for mental disorders, providing free outpatient and inpatient care (Chikovani et al., 2015). Within the SPMH, medications are provided free of charge when dispensed through a psychiatrist, but the patient must pay when they are prescribed through a neurologist or general practitioner. However, IDPs from the 2008 war (living in IDP settlements or collective centres) and the general population living below the poverty line are entitled to general health insurance. The National Health Care Strategy 2011-2015 specifically emphasizes mental health care, suggesting a balance between community- and hospital-based mental health services (Ministry of Labour, 2011a). Though health care expenditures have been increasing in Georgia, reaching 10.1% of GDP in 2011 (Ministry of Labour, 2011b), only 2.11% of the total health budget is devoted to mental health. Funding for hospital care has maintained priority over community-based, with over 65% of the 2011 budget allocated to hospital care and outpatient services receiving just over a quarter of the budget (Makhashvili & van Voren, 2013).

Despite having eligibility for insurance coverage, health care utilization amongst Georgian IDPs (both from the 1990s and 2008) for mental, behavioural, and emotional problems tends to be quite low, with only 39.0% of those suffering from such problems seeking care (Chikovani et al., 2015). The low numbers of eligible Georgians making use of the scheme may be related to a lack of information provided to the population on the benefits of the state program, and the non-coverage of some disorders such as anxiety disorders. Just over 33% of those suffering from mental, behavioural, or emotional problems did not seek care due to perceived barriers in access (Chikovani et al., 2015). The overwhelmingly most common reason for not seeking care was the inability to afford health services or medications. Of those who did access services, general practitioners and neurologists were the most commonly-utilized resources (accessed by 29% and 26% respectively of those who sought care), with very few accessing psychiatric services. Pharmacotherapy emerged as the dominant type of care received. Higher rates of service utilization was associated with female gender (OR 1.50, 95% CI: 1.25, 1.80), middle-age.
(OR 1.83, 95% CI: 1.48, 2.26) and older-age (OR 1.62, 95% CI: 1.19, 2.21), possession of the state insurance coverage (OR 1.55, 95% CI: 1.30, 1.86), current PTSD symptoms (OR 1.56, 95% CI: 1.29, 1.90) and depression (OR 2.12, 95% CI: 1.70, 2.65) (Chikovani et al., 2015). Low service utilization amongst Georgians (both conflict-affected and the general population) may also reflect resistance to community-based, user-oriented services which stand in stark contrast to the institutionalized responses to mental health in the Soviet era (Tomov, Puras, Keukens, & van Voren, 2007).

4.5 Selected vignettes

Below, I present four vignettes drawn from women who participated in the study. Their life histories have been formed within the backdrop of the historical events sketched in this Chapter thus far.

4.5.1 Latavri

Latavri was the eldest participant in the study, at 73 at the time of the interview. She introduced herself in the following terms:

I was born in Kurta in 1940. I was 1-year-old when my father went to war, World War II and he never came back. I was the only child in my family and my mother devoted her life to me. By a twist of fate, I married an Ossetian.

When asked by the interviewer to tell her about the events which lead up to her living at Skra IDP settlement, Latavri stated,

Well, I’d like to say that these events didn’t start in 2008. It all began long before… I don’t know. This is my opinion. This is what I think. When the Soviet Union was about to collapse… I’m not a politician or anything, but I’d like to tell you about what was going on in Tskhinvali at the time. May I? [Interviewee: You are free to say anything that you think is important]. Ossetians used to hold demonstrations in Tskhinvali. They didn’t want to live with Georgians. They didn’t want to be part of Georgia. I could tell it from their banners and everything. From my private conversations with them too, of course. Everything was against Georgia. They wanted their own republic. It all began during the Gamsakhurdia administration. Maybe even earlier.

Latavri reported that the South Ossetian demand for independence from Georgia was followed by “disturbances.” Prior to this demand, Georgians and Ossetians used to get along during the Soviet era. Latavri attributed the unrest in South Ossetia in the early 1990s to the collapse of the Soviet Union.

So, I was saying that it all began during the 90’s. In 1989, to be more precise. After the April 9 tragedy in Tbilisi… I don’t know. After this, life there got harder. There were 9 Georgian villages. There was no road or anything. Sometimes they would close the road through Tskhinvali. Sometimes they would let us pass through it. They used to stop buses and capture people. I don’t
know. We’ve been through a lot. I think anyone can prove it. We’ve been through hard times. They used to shoot at us. Our gorge was surrounded by mountains and their roadblocks or something, I don’t know, they were located uphill. […] They would shoot at us from there. We were in a really difficult situation. Many houses were destroyed by missiles. Everything was being destroyed. Herdsmen couldn’t put livestock to pasture because Ossetians would kidnap both their cattle and herdsmen themselves. This family from Kekhvi here lost a member when he was depasturing their cattle; four people from Dzartsemi were killed too, they were also kidnapped when they were depasturing their cattle. So, things like this used to happen. However, no one was kidnapped from Kurta. I haven’t heard about it but I do know that some people were killed. This is what happened. […] So, I’m saying that this war didn’t start in 2008, but a long time before. The situation had been growing worse until it escalated into the war in 2008. But even before 2008, things were so tense that we were standing at the verge of war. Younger people used to leave the region with kids, older people would stay there, then they would return but what these Russians and Ossetians did in 2008 was too much. It was just too much.

When tensions began to escalate in the summer of 2008, Latavri was in Tskhinvali. Since her husband was Ossetian, they were allowed to keep their apartment in Tskhinvali though other Georgians had been forced out the city in the 1990s. Her husband remained in Kurta at their home there. When war broke out, Latavri tried repeatedly to leave Tskhinvali, appealing to the Red Cross two or three times. According to Latavri, they refused to evacuate her because they had received an assurance from Kokoity that the Ossetian troops had been ordered not to harm anyone married to Ossetian men. She remained in Tskhinvali for the duration of the war, leaving by taxi on 11th December 2008. She recounts,

The taxi dropped me in Znauri. Then I had to pass through Okona and Knolevi. Those Georgian villages are now controlled by Ossetians but they let me pass through them, by the way. I told them I had a Georgian passport. They told me: “Never mind. Just go but keep in mind that you won’t be able to come back”. So, I left.

Her spouse stayed in their village of Kurta initially, but was evacuated by the Red Cross eventually. Latavri remembers,

He was beaten up and everything. All these terrible things happened to us. When he got sick, he was rescued by the Red Cross. [Interviewer: What happened? Who did that to him?] The Ossetians, of course. Who else? Kokoity’s bandits did this to him. [Interviewer: Wasn’t your spouse Ossetian too?] He was but… It happened anyway. He was alone there, without children and me. So, it just happened.

Reflecting on the loss resulting from the war, Latavria shares,

It’s all lost. I was 69 years old at the time. Everything my mother, my grandfather, my ancestors had worked for – and we had earned something too – was lost. We were left without anything. […] When we wake up… Well, I don’t know. I discuss things with other women and I know that we all face the same difficulties. So, we wake up thinking. We look around and think all the time. Personally I and everybody else. So, thinking. Thinking about our village, our corner, our burnt down houses. We go to sleep and dream about being there. Our flesh is here but our soul stayed there. […] Now, my dear, when I look back at things, it seems that our life was a bed of roses, not a bed of problems. We had a job. We had gardens full of fruit trees and everything. We had income. […] We owned livestock, chickens, pigs… We had everything. We used to buy flour and probably it was the only problem. I mean, finding money for another sack of flour. But it wasn’t a problem in general. Well, I can’t say that I face any serious problems here but being exiled and being called
IDP – this is a problem for me. It’s harder than I thought it was. I keep saying that we are like those people in Georgian movies whose villages are being razed and who are being exiled. This is exactly what happened to us. This is what we think about. This is my concern.

Significant in this account of loss is the extension of loss beyond the current generation. Latavri has lost not only the fruits of her own labour, but also the property and wealth accumulated by her ancestors. Additionally, Latavri points out that being called an IDP is a serious problem for her, alongside the financial difficulties faced in the settlement.

### 4.5.2 Guranda

At the time of the interview, Guranda was a single, employed 28-year-old living with her parents and younger sister in Karaleti IDP settlement. When prompted by the interviewee to tell her about herself, Guranda stated,

I am from Great Liakhvi Gorge, namely from Kheiti village. I am originally from the gorge. I was born there, in Tskhinvali. I will start my story from here. I am a double IDP, first time my family was forcibly displaced from Tskhinvali and we moved to a village that had not been occupied by that time. It was in a conflict zone, and I would say that I lived in war for 20 years. There were skirmishes, murders; literally, it was a mess. And ever since I was five, since I developed my worldview, all I saw was the war.

Guranda immediately self-identified as an IDP, as a double IDP in fact. She was likely displaced from Tskhinvali during the South Ossetian war of the early 1990s described above. She described the educational opportunities in Kheiti as far from ideal; the school building had been damaged by the war and so a makeshift school had been set up in a series of railroad cars. Teachers worked without pay. She remembers, “it was very hard for a school student to study in the village at the time.” Though a school of “European standards” was eventually built in approximately 2004, Guranda did not study there as her parents had already arranged for her to study in Tbilisi, staying with a relative. She reflects,

To tell you the truth, I mostly lived far from my parents. At first, I lived with my grandmother and I would visit my parents on holidays. It was because of the war and when it was time for me to decide where to continue my studies, my parents did their best to keep me away from that mess. But every summer, every winter I would spend my holidays in the village, Kheiti village. I had friends there. The only thing I didn’t do there was studies. My family, relatives, and friends – everyone lived there.

Despite only residing in Kheiti in the summer, Guranda stated that her best childhood memories consisted of adventures and holidays in Kheiti and the surrounding area, and repeatedly spoke of the beauty of the area during the interview. The beginning of her interview was full of such reminiscing:

There were a lot of sacred places, cultural heritage sites, historic and cultural monuments and we, local children, used to arrange various events voluntarily; Children, who used to visit us from Tbilisi would also help us. I mean children, whose mothers were originally from that village. We
had a wide circle of friends, so to speak. And we used to plan each summer. We used to organize journeys on foot, different events and stage performances. Our female neighbor used to supervise us. Unfortunately, she died in the village before the war. She was a sort of director of our performances. We used to sell tickets for our performances. […] Our village was very active, especially our neighborhood. Everything was full of life there. […] I’m trying to say that my childhood, my memories and memories of both locals and visitors, are amazing, everything there was so beautiful.

The wealth of the villages was also often commented upon by the interviewees. Guranda notes,

Except a couple of families, no one faced financial difficulties. […] They used to grow plants, and they could to sell their harvest… Despite the fact that it was very hard for the population to export their apples, the government was still trying to do their best to help the population. […] The government created job opportunities, built shopping centers, square parks and cinemas. […] The de-facto government created many job opportunities and salaries were quite high. Local people used to water their lands, grow plans, export their produce and use that money for themselves. And even before that, while Ergneti market still existed, people had already accumulated wealth.

The job opportunities and infrastructure investments were a part of the policy of ‘soft power’ unveiled to win over the hearts and minds of the population in South Ossetia. She also mentions the Ergneti market, the closure of which instigated the unrest in the summer of 2004.

Alongside these glowing memories of the wealth and beauty of South Ossetia, Guranda also emphasized the almost-constant threat of danger and violence:

Criminal groups were in the woods near my village. And as the years went by, it became more and more dangerous to stay there. In 2004, after the government shift, it became really dangerous to stay up there and we could neither visit cultural heritage sites up there. There was a monastery where monks lived, St. Saba Temple. It was an ancient temple built in 8-9th century. In Kheiti, there used to be a monastery complex, where monks lived but became impossible for them to stay there, their living conditions became intolerable – armed forces would go up there and insult them and so, they left the temple. Now they are living in Akhalgori Monastery. Personally to me, all this was very painful.

The government shift in 2004 to which Guranda refers was the election of Saakashvili. She notes that the crackdown on corruption and Saakashvili’s intention to reincorporate South Ossetia into Georgia escalated tensions in the area. Criminal gangs were confronted, resulting in an “intolerable” situation. Guranda remembers,

There were shootings, and population was defenseless. It doesn’t mean that they were shooting at the population; they used to shoot at each other from forest to forest. But the gorge was located beneath the forest. An accidental bullet or a bomb dropped by them could have hurt someone but despite everything, we all stayed there, none of us, neither young nor old, had left the village.

The ‘normalcy’ of living in a war zone was stressed in many interviews, including Guranda’s. She explains why no one left the village in the years leading up to the war:

We all thought it was stupid to leave the village. There were soldiers in my neighborhood and every evening they would set up these guard stations. […] As for us, we used to organize different
events, we used to go out with our guitars, panduris and sing and they used listen to our performances. Usually, in the evening, the shootings would start and we knew it. So, they would take their things and leave, while we would go back home despite the fact that we knew that a bomb or a bullet could have damaged our houses. [...] We used to cook for the soldiers. We had an extraordinary relationship. And they were kind to us too and when, they were leaving our village, they were feeling very sad. [...] I’m trying to say that despite the fact that there was a war, it was something usual for us. [...] The only reason why those people left the territory was because there was no point in staying there. Not because they were frightened by bombs, not because their houses were destroyed, not because they were afraid to die but because the population was being captured. And had women and children stayed there, they would have found themselves under worse conditions. Men weren’t going to leave. Only when the houses were destroyed and families were left outside, there was no point in dying there and that’s why they left. They could do nothing about it and so, the population of the gorge left their villages.

Guranda studied at a University in Gori and attained a teaching degree, and was employed as a school administrator at the time of the interview.

4.5.3 Lali

Lali was a 32-year-old married mother of two and living in Shavshvebi at the time of the interview. Though she was originally from a city outside of South Ossetia, she stated that she had no regrets about moving to the small village of Eredvi after her marriage. She remarks,

I never thought that I lacked anything because of the fact that I was living in the village. [...] I didn’t feel that we lacked anything. I raised my two kids so that I never had any problem with cleanliness, bathrooms, clothes, or food. I swear, I don’t lie. My mother-in-law was engaged in trade. My father-in-law was at home and he was helping me. My husband too was in trade, at Ergneti Market. We didn’t lack anything, I’m telling you. Then, our life went backwards.

The market to which Lali refers was one of the largest markets in the Caucasus, and was closed by Saakashvili in 2004 in an effort to stamp out corruption. Lali’s extended family owned livestock and an apple orchard, and sold chickens, pigs, and apples at the market. Lali remembers,

We had high income. And we wanted more and more. I used to tell my mother-in-law to buy different things. Now, when we are far from our village and we have nothing, I began to appreciate what we had. I’m not talking just about our belongings, I mean everything in general. I remember when I was pregnant with [son’s name]. I didn’t like apples at all. I don’t know, I couldn’t even put them in my mouth. I liked figs and other fruits but not apples. When my mother was visiting us in Eredvi, my mother-in-law used to tell me to bring out apples for my mother. I was taking them out but I always loathed them. But now, I MISS THEM, I really miss them. Now we no longer have the luxury of sitting down after 6 PM and eating an apple. There, we had boxes full of apples and we used to sell them. Russians and others were buying them. It was our source of income that was helping us move forward and be happy in this life. Now I have given up on everything and I follow the flow of life.

4.5.4 Isidore

Like Guranda, Isidore had been displaced twice due to conflict in South Ossetia. At the time of the interview, she was 57 years old, living in Shavshvebi IDP settlement, and
married with four children and several grandchildren. She originally lived in Tskhinvali, where she worked at a kindergarten. She notes that she had to work hard, because of her children who were young at the time. She remembers, “I did so many things and we were well accommodated in the end.” She and her family were forced to leave Tskhinvali in 1992 due to the war. They settled in the village of Eredvi next. She remembers,

We spent quite a long time in Eredvi, we settled down, purchased necessary things with some effort. We lived there I don’t remember for how many years. […] Both the local government and relatives supported us in Eredvi because we were IDPs. Whenever there was a job, they used to call my husband because we were IDPs. We were well accommodated. They even gave us land. […] When we moved to Eretvi we thought we would have a peaceful life there. But it wasn’t like that. It was even worse. Every day… We slept with clothes on because whenever they started to shoot, we were running to the neighboring village. […] We were forced to leave that place too and so we left. We had to leave Tskhinvali you know how, then Eredvi, now we have to buy things for the third time. What can we buy now?

Isidore notes that she did not take any belonging with her either time, since temporarily leaving one’s home due to unrest was a common occurrence. This was especially true of their time in Eredvi. She states,

I didn’t manage to take anything, from neither Tskhinvali nor Eredvi. We put our hands in our pockets because we thought… Well, we had to run away from Eredvi quite often and many times we took our belongings with us to a neighboring village. Then, we used to take our clothes and linen back home. This time, we thought that it would be the same. We decided just to hide and so, we didn’t even think to take anything with us. […] We owned 29 heads of sheep, goats and I didn’t have to worry. I used to sell wool, goats, sheep… Everyone in the village was praising us because we achieved a lot as IDPs. They used to say that we had the Garden of Eden. We didn’t complain. We had everything we needed. We bought many things because my children were of marriage age. We built everything, purchased everything. Neighbors were dreaming of what we had. And what do we have now? Nothing. We left everything there.

4.6 Chapter summary

This Chapter discussed the social environment with which this research engages by discussing recent and historical events relevant to the lives and backgrounds of the study participants. Tightly-woven kinship networks, shifting expectations and patterns of gender roles, high rates of ‘binge drinking’ (especially among men), prevalence of informal trade, the disintegration of the USSR, and decades of unrest formed the backdrop within which the participants lived their lives. In the next Chapter, I explain the methods used for the field research to explore themes of loss and coping amongst IDP women in Georgia.
Chapter 5: Methodology

A qualitative approach was chosen for this study in order to try and understand losses and coping strategies from the perspectives of the study participants. Qualitative research attempts to make sense of, or interpret, phenomena in terms of the meanings people bring to them (Denzin & Lincoln, 2008; Hennink, Hutter, & Bailey, 2011). Though qualitative research cannot give insight on the quantified strength between two variables, it can be used to unpick and make visible the mechanisms which link variables by examining how individuals explain relationships or phenomena (Barbour, 2014).

Though the war experiences, mental health status, and coping strategies of Georgian IDPs from the 2008 war with Russia have been examined quantitatively (Roberts et al., 2014; Saxon et al., forthcoming), there has been no qualitative research on how these IDPs make sense of their previous experiences and losses, current hardships, and how they cope with these challenges. Moreover, quantitative research on Georgian IDP mental health (Roberts et al., 2014), along with quantitative and qualitative research on other conflict-affected persons in LMICs (see Chapter 2, sections 2.2 and 2.4.4.1) have found that women and men experience different challenges during and after wars, have different mental health outcomes following war (with women most often carrying a larger burden
of mental health diagnoses), and employ different coping strategies. Therefore, a qualitative approach focused on women IDPs was chosen to address these topics.

This Chapter begins by detailing the study’s epistemological and ontological positions, followed by a section on critical realism. I then provide a detailed account of the field work completed for the study, followed by a description of the analytical approach taken.

5.1 Critical realism

This research follows principles of critical realism, described in the sections below. The critical realist approach was chosen after I completed my field work, with my perceptions of the respondents and their lives fresh in my mind. As described in section 5.4 of this Chapter, their accounts of historical events (both recent and not-so-recent), current daily challenges, and how they attempt to meet these challenges left an indelible impression on me, causing me to seek to represent their hardships and coping strategies in a faithful way. The respondents (as a group) faced very real, material hardship, and in many cases had long endured low-level warfare which had very real consequences for themselves and their loved ones. Acknowledging the material and external conditions in the research required a position which supported the existence of external reality, apart from anyone’s perception of it. A quantitative approach would have provided this. However, I was also intent to better understand women’s perceptions of these material conditions and very real historical and recent events, in recognition that external reality is inevitably filtered through subjective perspectives. Critical realism allowed me to ‘do justice’ to the women’s accounts by acknowledging both the external reality affecting their lives, as well as their own subjective perceptions of this reality.

All forms of ‘realism’ combine ontological positivism with epistemological constructivism, thus attempting to bridge the divide between positivism and constructivism (Barbour, 2014). The realist position accepts that there is a real world which exists independent of our perceptions and constructions (consistent with a positivist ontological position), yet our understanding of this world is unavoidably a construction influenced by individual perspectives and worldviews (consistent with a constructionist epistemological position). Maxwell (2012) clarifies:
While our *knowledge* of the world is inherently a construction from a particular perspective, there is nonetheless a real world, which can be understood in both mental and physical terms, about which our constructions are more or less adequate (p. 20).

A realist position recognizes that though our knowledge of the world is constructed from a particular perspective, filtered through subjective perceptions, there is nonetheless a real world apart from our perceptions of it (Maxwell, 2012). A single, ‘correct’ viewpoint of the world, independent of the world, is unachievable. Rather, there are a multitude of different valid perspectives on reality.

5.1.1 Critical realist approach to causality and ‘rich data’

Critical realism takes the position that causal explanations are local phenomena, limited to particular contexts. This aspect of critical realism was a good fit for the empirical findings as presented in Chapters 6-8, as the relevance of the findings beyond the particular group of women interviewed for this research is uncertain. For instance, the patterns of resource loss presented in Chapter 6 is entirely based on how this particular group of women explained their resource losses, and how losses led to other losses according to their own experiences. Though the causal process may be relevant to these particular women, the particular pathways of resource losses suffered by other war-impacted groups (for instance, war-impacted men, and/or war-impacted men and women around the world) may be entirely different. Moreover, the approach to causality endorsed by critical realism (that events have a bearing on future events) allowed for the linking together of events and losses. This was important, as the women certainly spoke about their losses this way; as one leading to another. As Maxwell (2012) points out, this position on causality is well-suited to research with small samples, especially if the data focuses on chronological events and the relationships between such events.

Critical realism places emphasis on ‘rich data’ in order to provide a thorough picture of a phenomenon (Becker, 1970). In order to achieve a thorough picture, a realist approach may include the piecing together of causal chains by drawing on multiple narrations on the same event or series of events (Erickson, 1992). The critical realist emphasis on rich data lends itself to the current research. In particular, piecing together of causal chains was especially relevant when compiling the accounts of resource loss shared by the respondents.

5.1.2 Critical realist approach to validity
Validity, from a critical realist perspective, stems from the types of understanding researchers have of the phenomenon studied. The perspective is most concerned with descriptive validity, (Maxwell, 2012). This type of validity is based on descriptive materials such as field notes and interviews, and also to the research setting and events taking place therein. Of particular emphasis is recording data in participant’s own words. Descriptive validity can be potentially verified by adequate observational data; a particular position possesses descriptive validity so long as it is supported by a substantial amount of the descriptive data. The critical realist position on validity was well-suited to the research at hand. The field notes taken and interviews conducted comprise a rich source of descriptive data which give rise to well-supported positions, supporting descriptive validity.

### 5.2 Research design and fieldwork process

Over the course of the fieldwork, 41 semi-structured interviews were conducted with IDP women in Georgia. The research design followed an inductive research process which allowed the research plan to evolve as new information was yielded in the initial interviews. (Maxwell, 2012). Consistent with a critical realist approach, the research design was assessed throughout the field work and adjusted as necessary. This process is described in the sections below.

#### 5.2.1 Phase 1: Project set-up (November 14 – December 3, 2012)

Phase 1 of the research project lasted from November 14 to December 3, 2012. It consisted of discussing with GIP-T staff issues such as research sites, sampling, the interview topic guide, as well as the recruitment of research associates, drivers, and translators/transcribers. Two female Georgian research associates, Tinatin (Tiko) Amirejibi (TA) and Mariam Razmadze (MR), were recruited via GIP-T staff, as both women had worked on various GIP-T projects prior to this research. Both were native Georgian speakers and also fluent in English and possessed experience conducting qualitative research on mental health topics. I chose to hire female research associates specifically to conduct the interviews as female IDPs may be more comfortable meeting with another woman rather than with a man. I had previously drafted a topic guide based on topics identified as relevant to coping in the psychosocial literature, and expert feedback from mental health and forced migration specialists at the LSHTM. The author
met with the associates during this phase in order to acquaint them with the aims of the study, obtain feedback on the appropriateness of the interview topic guide (whether it would be understood by potential interviewees), and identify concepts, phrases, and words potentially difficult to translate from English to Georgian. Through these discussions concepts were clarified and appropriate translations chosen. One of the research associates (TA) translated the modified original topic guide, as well as the participant information sheets and consent forms for both the interviews and the audio diaries from English to Georgian (see Appendices G, H, and I respectively for English versions). A sheet of instructions on using the audio guides was also drafted (see Appendix J) and translated into Georgian.

Three IDP settlements were chosen in which to conduct interviews: Shavshvebi, Skra, and Karaleti. The approximate location of these IDP settlements are shown in Figure 3 below. Shavshvebi is indicated by a circle, Skra by a triangle, and Karaleti by a star.

Figure 3: Location of Shavshvebi, Skra, and Karaleti IDP settlements
The settlements were chosen due to a previous collaboration between these settlements and GIP-T from May 1, 2009 to March 1, 2010. GIP-T staff had a pre-existing relationship with ‘key women’ in each of these three settlements, as these women were chosen to facilitate community mobilization programmes in their respective settlements. The programmes were multifaceted, consisting of training for family doctors and nurses on traumatic stress issues, including how to recognize traumatic stress in individuals and communities, and the general principles of psychosocial assistance. The programmes also included training sessions for teachers and parents focused on child psychosocial development disorders, emotional and behavioural difficulties, attachment disorder, violent behaviour, and depression. Attendees were taught how to recognize symptoms of disorders, how to effectively listen to and communicate with children, and how to resolve conflicts. The programmes also included an initiative called “New Sunny Spots in our Villages,” which encouraged residents to paint wall murals in the settlements, and a ‘Folk Art Evening,’ showcasing folk dances, songs, and folk art in each settlement (The Global Initiative on Psychiatry, 2010). Finally, the programmes involved the creation of community-based organizations (CBOs), headed by the ‘key women’ who were significant points of contact between the communities and GIP-T. Since the end of the programme, GIP-T has maintained contact with persons in the three settlements, notably with those women who took the lead in maintaining the newly-developed CBOs in each settlement.

Skra, Shavshvebi, and Karaleti settlements were chosen by GIP-T for the programme due to the range of size they represented (measured by number of households per settlement), as well as the level of isolation relative to the nearest established village or town. As of the end of February 2015, the populations of Skra, Shavshvebi, and Karaleti IDP settlements were 296, 608, and 1650 persons respectively (personal communication with Maia Khundadze, March 20, 2015). Skra and Karaleti are located close to established villages, with Skra settlement close to Skra village, and Karaleti settlement situated on the outskirts of the city of Gori (population of 54,700 in 2013) (citypopulation.de, 2015). Shavshvebi settlement was the most isolated of the three settlements, as it was separated from the established village of Shavshvebi by a large motorway which discouraged regular interaction between villagers and IDPs. Figures 4 through 8 below depict each of the three IDP settlements where the study participants resided.
Logistical matters pertaining to road access and safety influenced the settlements chosen. Settlements located in very isolated areas were excluded, as it was anticipated that such locations may be inaccessible during the winter due to inclement driving conditions. Also, settlements located very close to the de facto border between South Ossetia and Georgia were excluded due to concerns over safety of research associates, driver, and myself. As Skra, Karaleti, and Shavshvebi are all located relatively near the city of Gori it was anticipated that they would be accessible by car during the winter of 2012-2013. Moreover, they are sufficiently far from the ‘buffer zone’ at the boundary between Georgia and South Ossetia to mitigate safety concerns.

Figure 4: Shavshvebi IDP settlement

Figure 5: Bee farm at Shavshvebi IDP settlement
Figure 6: Skra IDP settlement

Figure 7: Tandoor oven at Skra IDP settlement
5.2.2 Phase 2: Respondent sampling approach and piloting of interviews and audio diaries  (December 4 - 17, 2012)
Phase 2 of the research project lasted from 4 to 17 December 2012. This phase consisted of developing the sampling approach and piloting the interview topic guides and audio diaries.

This study uses purposive sampling. The term ‘sampling’ refers to the process by which cases were selected for inclusion in the research, while acknowledging the inherently statistical/quantitative meaning associated with the term (Emmel, 2013; Maxwell, 2005). Nonetheless, the term ‘sampling’ is employed here as it is widely used even by qualitative researchers when describing who participated in their studies. Purposive sampling involves the deliberate and strategic selection of information-rich cases in order to best address the focus of the research (Palys, 2008; Patton, 2002). Adherents of purposive sampling recognize and respect resource constraints in decisions about sampling. For instance, time availability for fieldwork, budget, and capacity to analyse data are taken into account when forming a sample (Patton, 2002). The practical realities of fieldwork limited the choice of settings and participants somewhat. For instance, the widest possible range of IDP settlements would include those nearest to the ‘buffer zone’ on the very edge of the disputed territories. Notwithstanding the obvious physical risk in travelling to such zones, such settlements would have been difficult to access due to the reluctance of drivers to travel to such zones. As stated above, such settlements were excluded for reasons of safety and access.

This research uses the purposive sampling strategies of maximum variation and snowballing. Maximum variation sampling involves selecting a range of cases in order to maximize the diversity relevant to the research question, in order to attain a heterogeneous sample (Patton, 2002). For this research, I was interested in including a range of ages, marital statuses, and employment statuses. As such, women were selected in order to fulfil the largest age range possible (aged 18 or over), a variety of marital statuses (single [never married], married, divorced, and widowed), and both employed and unemployed women. The sampling approach was reviewed at various points throughout the data collection in order to drive future recruitment to maximize diversity. Snowball sampling involves asking a well-situated person to nominate people who can provide insight into a phenomenon (Patton, 2002). This approach risks bias, since the well-situated person chosen to nominate others for involvement may suggest participants for personal reasons.
rather than for reasons aligned with the study aims. However, I chose to proceed with this approach since the research from the outset did not seek to gather a random sample. Gaining access to the settlements and the residents depended on having a key contact. Had I not been put into contact with the ‘key women,’ recruitment would have been difficult or impossible.

Following the purposive participant selection strategy, the research associates and I were put in contact with a ‘key woman’ residing in Shavshvebi IDP settlement, via introduction by staff at GIP-T. The first 2 interviews (one with the ‘key woman’ and one with a woman suggested by the ‘key woman’) were conducted in Shavshvebi on 4th December, 2012. These interviews were attended by both research associates and I, in order to assist in case issues arose over the translated topic guide, and to give advice as needed. The remainder of the interviews (including 2 additional pilot interviews) were attended by only one interviewer and one interviewee (with some exceptions). My presence was discontinued during the interviews as the research associates felt that my presence was causing respondents undue stress. I share my associates’ opinion that the women were likely more candid in their responses due to my absence, as my presence as a foreigner may have added an unnecessary formal aura to the interview. At the end of each of the 4 pilot interviews, women were invited to give feedback on any aspect of the interview. These portions of the interviews were recorded and included in the transcriptions. The associates asked questions such as, “From the questions that I asked you, were there any that were uncomfortable for you? Were there any questions you didn’t want to answer?” or “I just want to ask you if there was any question that you think was awkward, that you didn’t like or has put you in a bad mood. It is very important to us.” Women stated that they had enjoyed the interview, and welcomed the opportunity to share their thoughts and feelings.

After the first interview was completed in Shavshvebi, the key woman was asked to suggest another woman to interview, guided by our objective to attain a heterogeneous sample regarding age, and marital and occupational status. Due to the small size of Shavshvebi IDP settlement (and Skra and Karaleti settlements), it was not possible to sample participants who were unknown to each other. The first 2 interviewees were selected and gave consent to complete an audio diary. They were each provided with a hand-held cassette recorder and a 90-minute blank cassette at the end of their interview,
and asked to use it over one week following the interview. They were instructed to record specific examples of the challenges they faced, and how they coped with these challenges (see Appendices I and J). As it was unknown at the outset whether participants would use the audio diaries, the author planned to either continue or discontinue this initiative based on how well they were received in the pilot phase.

After the first 2 pilot interviews were conducted, my attendance at the interviews was discontinued. Both research associates felt that the interviewees seemed nervous in my presence, and seem to be very careful and guarded about what they were saying. The research associates thought that this may have resulted from the fact that I was from outside of Georgia which gave an 'official' or 'formal' feeling to the research project. The associates also thought that women were a bit hesitant to open up in my presence due to a fear of their comments ending up in the media. Though I was not present for the rest of the interviews, I was often at the settlement with the research associates, and was available for support and/or consultation via mobile phone while all interviews were being conducted.

Following each pilot interview, I met with the research associates in order to discuss aspects of the topic guide which worked well, as well as areas requiring modification, removal, or expansion. The topic guide was modified based on these discussions. The author continued to meet with the research associates after each field visit to discuss general impressions on how the interviews went, and possible modifications to make to the topic guide.

The first two pilot interviews were translated and transcribed separately by two translators, producing two transcripts per interview. The research associates independently listened to the audio recordings and compared the content to both transcripts, and made note of any disparities between the audio recordings and the transcripts. The translator chosen to transcribe the remainder of the interview and audio recordings had produced the most accurate translation, in the opinions of the bilingual research associates. Though there will always be a gap between the original meanings in the raw Georgian data and the meanings as translated into English, I sought to mitigate
this as much as possible by having the translator produce English versions of the interviews (both those produced in the pilot phase and after) which conveyed the substantive meanings of words and phrases, rather than word-for-word literal translations in the case of idioms, for instance.

5.2.3 Phase 3: Initial data gathering (December 18, 2012 – January 14, 2013)

Phase 3 commenced on 18 December, 2012 and lasted until 14 January, 2013. During this time, 8 post-pilot interviews were conducted at Shavshvebi (for a total of 12 interviews conducted at Shavshvebi). Line-by-line open coding commenced on these 12 interviews during a pause in data collection between 27 December, 2012 and 15 January, 2013. After this initial coding, the original topic guide (see Appendix G) was modified for two reasons. First, certain questions included in the original topic guide were poorly understood by the interviewees. These sections were re-worded or removed. Second, unexpected themes had surfaced, which warranted additional focus in future interviews. A revised topic guide, which was used for the remainder of the interviews, appears in Appendix K. The initial coding also directed the purposive selection process. At the conclusion of the Shavshvebi interviews, the sample mainly consisted of married unemployed women. As such, we sought to include more divorced, single, and widowed women for the remainder of the project, as well as employed women as we relocated data gathering to Skra settlement.

During phase 3, the first two audio diaries were transcribed and translated into English. Very little material was recorded (under 4 minutes on each tape), and no new information was uncovered that was not revealed during their interviews. Both recordings featured multiple people talking on them. Though the women selected to complete the audio diary had signed consent forms, the others on these recordings had not signed consent forms. This presented ethical problems with regard to obtaining informed consent. Due to the extremely short recordings, the ethical issues around multiple participants, and lack of new or different data yielded, the author contacted her advisory board and a contact at LSHTM who had previously used the audio diary method in order to report these issues and gain feedback on whether to go forward with additional audio diaries. After some discussion via email, it was decided that there was not enough evidence to discontinue the audio diaries. As it was assumed that the respondents either did not understand what
to record, or were uncomfortable using the recorders, I drafted an additional simplified information sheet (see Appendix L for the English version) concerning the audio diaries in an attempt to assuage these concerns and obtain better quality data. At this point, it was decided to try two additional audio diaries in phase four.

5.2.4 Phase 4: Final phase of data gathering (January 15 – February 16, 2013)

The final phase of data gathering in the IDP settlements started on 15 January 2013 and ended 16 February 2013. During this time, 29 interviews were carried out; 13 in Skra IDP settlement followed by 16 in Karaleti IDP settlement. The author continued carrying out line-by-line open coding upon receiving the transcribed and translated interviews. After completing 41 interviews, no new themes were emerging from the data. For this reason, as well as the limited budget to support additional data collection, the IDP interviews were ended on February 16, 2013.

The research associates attempted to have two more audio diaries completed in Skra during Phase 4. This attempt was plagued with problems. In one case, the research associate forgot to obtain consent for the diary. She planned on obtaining consent upon her return the following week to pick up the recorder. However, the woman who had completed the diary had left the settlement by this time, reportedly to go to Turkey in order to work. As such, the associate had the key woman in Skra sign the consent form on the other woman’s behalf, which does not fulfil the requirements of informed consent. The other case involved a woman who initially agreed to complete an audio diary, but then did not complete it as she had a wedding to attend. She gave the recorder to the key woman in Skra, who completed the audio diary instead. The research associate managed to have her sign a consent form for the audio diary after it had already been recorded. Like the audio diaries completed at Shavshvebi, these diaries were extremely brief, the simplified instructions (see Appendix L) apparently making no difference in the acceptability of the audio diaries. Due to the difficulties in conducting the audio diaries, they were discontinued after a total of four were completed. Due to the brevity of the material and ethical issues (lack of informed consent), the completed audio diaries were not analysed.

5.2.5 Phase 5: Informal interviews with GIP-T staff and research associates (February 24, 2013)
After the interviews with IDP women were completed at the IDP settlements, I informally interviewed research associates Tiko Amirejibi and Mariam Razmadze, as well as Maia Khundadze, staff member at GIP-T who introduced the research associates and myself to the ‘key women’ at each settlement. The purpose of these interviews were to gain clarity on the relationship between the ‘key women’ at the settlements, GIP-T’s work at the settlements, and their impressions of the project in general. I did not intend to consider the material from these interviews data as such; the interviews were not intended to be formally presented. The purpose was to signify a wrap-up to the project, as well as gain some contextual information on the settlements. The interview with the research associates evolved to a lengthy discussion on what it was like to grow up in Tbilisi in the early 1990s, which I believe was motivated by their desire to convey to me just how chaotic the capital of Tbilisi was that point of time. The material was not used to triangulate interview data, but rather to support my broader contextual understanding.

5.2.6 Ethical considerations

Ethical considerations were discussed with the research associates in phase 1. As it was recognized that questions about coping with difficult circumstances and/or traumatic events could potentially result in distress for the participants, the associates were instructed to halt any interview during which a participant became distressed, and offer referral information to specialist mental health services. Specifically, we planned to refer any distressed participants to the Gori Psychosocial Center (known as ‘Tsiskara’). The Center, established in 2010 by GIP-T, assists families and children affected by conflicts (personal communication, Nino Makashvili, 5 October, 2012). No respondents became distressed during the interviews, and so no referrals were made.

Research associates were told that informed consent would be sought for every participant (see Appendices H and I). They were instructed to inform all participants that there was no direct benefit to individuals interviewed in this study, their data will be securely stored at LSHTM and would be treated anonymously, with no names of participants appearing in any publications resulting from the research. After discussion, it was decided that the
provision of a monetary compensation of 15 GEL\textsuperscript{9} per participant would be appropriate and preferable to other benefits such as household goods. Participants who completed audio diaries were to be given an additional 15 GEL. Ethical approval was granted by the Georgian National Council on Bioethics and by the LSHTM Ethics Committee (see Appendices M and N respectively).

5.3 Data analysis

This analysis followed what Maxwell (2012) terms an interactive or systemic approach, consistent with the principles of critical realism. This is a non-linear, inductive approach which allows for the research plan to change in response to new information or changing circumstances.

5.3.1 Coding process

Coding (facilitated by Nvivo qualitative analysis software) was completed after interview audio material was transcribed and translated. The author first completed a close reading of each English interview transcript. ‘Categorizing’ and ‘connecting’ the data was then completed as described below.

An inductive process was followed which initially involved categorizing phrases and paragraphs into ‘emic’ categories. ‘Emic’ categories reflect the viewpoints of the respondents, as they are based on the participants’ own words and concepts. Such descriptive emic categories ‘stay close’ with the data; these initial categories function as conceptual boxes in which to place data linked by commonality (Maxwell, 2012). Following recommendations of Charmaz (2004), line-by-line coding was completed, whereby virtually every line in all transcripts was assigned to an emic code. This process is similar to open coding, which involves “breaking down, examining, […] conceptualizing, and categorizing data” (Strauss & Corbin, 1990, p. 61). The process yielded a proliferation of codes, as virtually each statement in early interviews formed the basis of a new code in order to encapsulate the data (Bryman & Teevan, 2005). The process became much quicker as more interviews were coded, since much of what was yielded in the later interviews fit in with already-existing codes. This demonstrates that a

\textsuperscript{9} Equivalent to approximately 10 USD at the time of the interviews.
high degree of saturation was achieved in the sampling. Emic topic headings consisted of types of coping strategies or losses.

Some codes were much more frequent in the transcripts than others. For instance, only one woman reported that she ‘rearranged furniture’ in order to cope with displacement, while ‘accessing help from neighbours and family’ was reported in many interviews. There was considerable overlap between many of the codes. For instance, ‘having no money’ and ‘no jobs’ were two nodes which arose in the ‘daily challenges’ responses. Many comments pertained to both of these topics, resulting in the assignation of passages to two or more nodes.

In Nvivo, codes were organized into groups of responses to specific areas of inquiry covered in the topic guide. For instance, part 4 of the topic guide (See Appendix K) related to the daily challenges faced by women. Interviewers asked about challenges related to interviewee’s economic situation, food, electricity, gas, and water access, child care responsibilities, and emotional challenges related to displacement. These queries yielded 37 ‘child’ or ‘sub-’ codes assigned to the ‘daily challenges’ code, ranging from such challenges as ‘no jobs’ (discussed in 24 interviews) to ‘poor water quality or supply’ (discussed in 37 interviews). The ‘emotional challenges’ responses were quite rich, spawning 45 nodes each comprised of a distinct aspect to emotional challenges. Some of the most commonly-cited emotional challenges were ‘frustration at limited opportunities’ and ‘boredom,’ each discussed in 20 of the interviews.

Following the development of the emic categorization codes, I conducted an in-depth review of the literature on stress and coping theories and typologies (as outlined in Chapter 2). According to realist principles, exploring and accessing conceptual frameworks and theories is a crucial part of the research design (Maxwell, 2005). Theory can act as a ‘spotlight,’ illuminating particular events, phenomena, and /or relationships that were previously unnoticed (Maxwell, 2005). As such, the purpose of the review was to explore and identify relevant theoretical categories in order to contextualize the coded data into a framework, and bring out previously unseen relationships. The theoretical
codes represent ‘etic categories,’ as they are derived from researcher’s rather than participant’s concepts (Maxwell, 2012).

The frameworks chosen, in particular the coping framework, was influenced by the process of producing the systematic literature review which appears in Chapter 3. As discussed in Chapter 2, a plethora of coping typologies have been developed and applied to study a wide range of populations. Those intending on studying coping are faced with an extremely fragmented and diverse set of literature. My framework then further developed over the course of completing the literature review, data collection, and receiving feedback from journal reviewers. I had started with the Lazarus and Folkman (1984) problem- and emotion-focused dichotomy for coping, but then realised I needed to augment this and turned to the Parker and Endler (1992) typology, which includes distraction coping (further broken down into two types of distraction). However, I then recognised the need to incorporate additional coping strategies, such as seeking social support. For the purposes of my thesis, the Skinner et al. (2003) typology was superior to the other frameworks I had come across because it allowed me to address the wide range of coping strategies reported across the articles, in my systematic literature review, and also seemed to address the responses in my own data from Georgia.

With regards to loss, Hobfoll’s Conservation of Resources (COR) Theory (1989) was also chosen due to the goodness-of-fit between my data and the theory. As I mention in Chapter 6, I was struck by the narrative of losses which were so often shared in the interviews. Women spoke about losses in waves, with the loss of homes and property (and the meanings attached to these) as leading to other losses. As such, The Conservation of Resources Theory allowed me to expand and explore these narratives.

The process of identifying etic categories distinguished Hobfoll’s COR theory (1989) and the coping typology suggested by Skinner et al. (2003) as relevant and helpful frameworks from which to derive etic theoretical categories. Specifically, the COR theory was drawn upon to categorize various challenges, losses, and stressors faced by the participants, and the coping taxonomy suggested by Skinner et al. (2003) was utilized to interpret the plethora of coping strategies reported by the respondents. As discussed in
Chapter 2, the Skinner et al. (2003) typology is based on the coping domains best supported by the existing coping literature. Moreover, the scheme was deemed to be a good fit in terms of covering the range of coping strategies described by the respondents. Each of the emic loss and coping categories was assigned to a higher order (or ‘parent’) code informed by these theories. As an example, the emic coping category of ‘rearranging furniture’ was assigned to a parent theoretically-based code termed ‘distraction’ (informed by the Skinner et al. (2003) taxonomy). The purpose in applying theoretical concepts was to provide a vantage point or framework from which to interpret the data, and also to further theoretical development in the areas of coping and stress theories.

Critical realism holds that causal relationships can be disclosed, made visible, and to a certain extent, explained (Emmel, 2013). Thus, after the process of categorization outlined above, I undertook a related process of connecting events and ideas across the data. This task involves the identification of networks, patterns, and relationships between themes and concepts in the data. This exercise was particularly relevant to the data on resource losses, as it became apparent that losses resulting from the war and displacement unfolded over time, with initial losses often leading to subsequent losses (see Chapter 6). Though qualitative analysis often involves the categorization process outlined above, it rarely engages in exercises which explore contiguity between themes (Maxwell, 2012).

The purpose of utilizing analytic connecting strategies is to identify key relationships that tie data together into a sequence, thus eliminating information irrelevant to the progression (Maxwell, 2012). Following Erickson (1992), the process used here involves considering segmented data (in this case, the data contained in the emic codes described above), and reconstituting these segments into a relational order. The process of identifying connections between codes sometimes yield visual representations of data in the form of matrices or network figures (Maxwell, 2012). As such, I developed a figure detailing the process of loss described across the sample, in order to capture the contiguity-based relationships observed between loss types (see Chapter 6).

5.4 Reflexivity
One’s subjectivity is reflected upon through a process called reflexivity. Both researchers and study participants are subjective, which unavoidably influences all aspects of the research (Hennink et al., 2011). During an interview, the interviewer and interviewee each react to the characteristics and perceived position of the other, which contributes to the co-construction of reality yielded through the interview process (Finlay & Gouch, 2003).

Reflexivity involves a conscious self-reflection by the researcher(s) in order to reveal how factors such as their own social background, held assumptions, and their positioning vis-à-vis the study participants may influence the research process (termed ‘personal’ reflexivity). Though the term ‘reflexivity’ is often associated with the constructivist approach, it is relevant too for those adhering to a critical realist position. The latter position takes a view of knowledge as necessarily incomplete and partial. This view applies not only to knowledge of external reality, but also to our own minds (Maxwell, 2012). In other words, one’s own thought processes, beliefs, values and intentions are not necessarily obvious to oneself. Researchers may become aware of such characteristics during the research process. Reflexivity was considered whilst the data gathering and analysis unfolded.

Taking a critical stance toward one’s positionality implies reflection upon how one is positioned in the ‘grid of power relations’ which inevitably frame research contexts. Arguably, this exercise is necessary in order to undertake ethical research (Kobayashi, 2003; Sultana, 2007). One’s positionality is influenced by factors such as class, nationality, race, ethnicity, age, gender, and educational background (Nazneen & Sultan, 2014). These factors form a ‘map of consciousness’ which scholars bring into research projects (Haraway, 1991). Mullings (1999) adds that a researcher’s positionality influences their worldview and interpretation of data. Below, I reflect on my own positionality vis-à-vis the research, and provide three vignettes containing accounts of events which occurred during the fieldwork which give insight on the settlement residents’ perception of me, my attempts to ‘bridge’ my ‘outsider’ status, and issues which arose due to the sampling method used and the provision of monetary incentives.
My own research background has focused on a variety of topics, including cultural influences on ideas about additions and mental health in Canada (see Dell et al., 2011). I have also focused on women’s health, including morbidities specific to young and elderly women in the Canadian province of Manitoba, and dimensions of maternal morbidity and mortality in LMICs and HICs. The health of marginalized populations has also been a particular focus, as demonstrated by my participation on projects on Canadian Aboriginal youth involved in sex work, British injection drug users (including those diagnosed with HIV and/or hepatitis C), women facing violence in public and private spaces Indian slums, and vulnerable children in LMICs (see Seguin & Niño-Zarazúa, 2015). These experiences shaped expectations I held during the conception, fieldwork, and analyses phases of this research. First, I started from the position that displaced Georgian women experienced the war and displacement very differently to their male counterparts, since I have witnessed that experiences with hardships are gendered in other contexts (men and women understand injection drug use risks differently, they experience poverty differently, and they face differing levels of violence). Second, I expected that ‘western’ understandings of mental health and stressors would be very different to what I observed in the Georgian IDP settlements. I did not expect the potential participants to talk about PTSD or depression, for instance, in a way that corresponded with DSM versions of these afflictions, or to necessarily touch upon these topics at all.

I spent the first 31 years of my life in Canada, geographically far removed from the chaos which erupted in post-Soviet countries in the 1990s, and from war and conflict more generally. Despite the physical distance, I was very much engaged and interested in Cold War and post-Soviet developments in my youth due to my status as a daughter of a 20th Century history teacher who had extended family beyond the ‘Iron Curtain.’ My response to the 2008 war between Georgia and Russia (as I viewed the Canadian media footage filled with images of bloodied, fleeing civilians and destroyed buildings) was that the conflict was dramatically one-sided; Russia was picking on a small, weak country which was completely unable to defend itself against Russian forces. Despite my interest in the fallout of the Cold War in the post-Soviet sphere, I was naïve of the decades of unrest that had beleaguered Georgia before and since the ‘fall of the wall.’ Because of this ignorance, to my eyes the war seemed to spring out of nowhere; I do not recall hearing about any escalated tensions in the media before the Russians were already in South
Ossetia. This out-of-the-blue nature of the conflict (to ‘western’ eyes), paired with the dramatic military one-sidedness and the horrific scenes of wounded civilians and destruction lead me to feel sympathetic to the Georgians who had fled (or were wounded or killed by) the conflict, and anger at Russia for unleashing such devastation. I fully admit that my position on the war and the combatants was far from neutral, before this project was even conceived. I commenced the project already taking a sympathetic stance toward the Georgian side to the conflict.

However, non-neutrality is far from unique in studies focused on populations who have faced war. As Cordillera Castillo (2015) notes, it is difficult (if not unethical) to maintain a position of neutrality when confronted by the harsh realities faced by persons who have experienced war, violence, and suffering. The impossibility of maintaining a ‘neutral’ stance is noted as well by Scheper-Hughes (1995), whose respondents (residents of a squatter shantytown in Northeast Brazil) gave her an ultimatum to either join in their struggle to improve their community or leave. Theidon (2001) argues that asking conflict-affected persons about their war-related experiences is an inherently non-neutral act. For Cordillera Castillo (2015), disclosure of non-neutrality necessitates emotional, political, and analytical labour during the field work. I follow calls by Davies (2010) and Cordillera Castillo (2015) to recognize one’s emotions arising during fieldwork as assisting (rather than impeding) understanding of social phenomena. The disclosure of non-neutrality induces a range of difficult and uncomfortable issues with which the researcher must grapple in order to come to terms with their own positionality vis-à-vis conflict-affected groups, and how it affects the research.

5.4.1 Positionality

Because the interviews were conducted by research associates rather than myself, positionality between myself and the research associates, myself and the respondents, and between the research associates and respondents is important to consider and characterize. Researchers who study a group to which they also belong (termed ‘insiders’) may benefit from their pre-existing knowledge about the group insofar as they may gain greater insight into the thoughts and opinions of the group engaged in the study (Abu-Lughod, 1988; Hill-Collins, 1991). However, researchers who occupy an ‘outsider’ position may benefit from their perceived neutrality, insofar as respondents may be more likely to share information which they would not share with an ‘insider’ (Fonow & Cook, 1991). Due to
their more detached status vis-à-vis the group studied, ‘outsiders’ may also have a greater ability to ‘step back’ and problematize taken-for-granted meanings, understandings, and assumptions, thereby gaining a less distorted picture of a social phenomenon. In practice, the ‘insider/outsider’ dichotomy is somewhat fluid, as few researchers consistently remain an ‘insider’ or ‘outsider’ for the duration of an entire project (Kassam & Nanji, 2006; Mullings, 1999). Because this study was conducted by a relative ‘outsider,’ though facilitated by relative ‘insiders’ (comprised of GIP-T staff who facilitated the research, as well as Georgian research associates who conducted the interviews), elements of both the positive and negative aspects of ‘insider’ and ‘outsider’ statuses impacted the research.

5.4.1.1 Research Associate/respondent dynamics

I accessed a sense of the dynamics between the research associates and respondents through several channels. The first channel was via informal interviews I held with the research associates and Maia Khundadze (staff at GIP who facilitated introduction between the research associates and ‘key women’ in each settlement). I asked TA and MR how they thought they were perceived by the respondents during an informal interview held at the conclusion of data collection. They reported that they attempted to ‘fit in,’ through dressing simply and using ‘non-academic’ Georgian during the interviews. This was related as asking questions in a straightforward manner and avoiding abstract terminology. In fact, the term ‘coping’ was used less and less as the interviews progressed, since respondents did not seem to be familiar with the term. Rather than asking “how do you cope with your problems?” the associates posed questions such as, “what do you do to fix your problems?”

I was initially concerned with the impact of stigma perhaps felt by the respondents in their interactions with the research associates. During the informal interviews to which I refer above, I asked the research associates whether they thought IDPs encounter any stigma in Georgian society. The associates felt that there was virtually no stigma associated with IDPs. They explained that they had been around IDPs for much for their lives, due to the large waves of IDPs coming from South Ossetia and Abkhazia entering Tbilisi in the 1990s. Both personally knew many IDPs, as neighbours, friends, and schoolmates and university colleagues. The associates speculated that IDPs were largely viewed by Georgians as ‘normal people’ who have currently have ‘regular lives.’ The informal interview held with Maia Khundadze also reinforced the position that there was little
stigma associated with IDPs. When asked about stigma, she laughed and stated that there was no evidence that IDPs were reluctant to ask for help from governments and NGOs, which she believed indicated the lack of stigma as a barrier for help-seeking behaviour.

The second channel by which I viewed research associate/respondent dynamics was through direct observation of the pilot interviews. The actual interview was presaged by a minimum 10 minute conversation about other matters, and offerings of refreshments. Through this process, a level of rapport was built. Third, I also viewed the dynamics between the associates and respondents through comments in the transcripts. The associates strove to put the respondents at ease, through statements such as, ‘there are no right or wrong answers,’ and ‘we are only interested in opinions and experiences rather than correct responses.’ Further, the interviews were frequently interrupted by personal comments and asides, lending a sense of informality to the interviews which may indicate that respondents felt at ease. For instance, during interview #10, the research associate (MR) and respondent (Izolda) had a brief chat mid-interview about the beauty of Izolda’s daughter’s eyes, who had wandered into the interview space.

I perceived that the research associates felt a responsibility to give hope to the respondents. For instance, in the middle of her interview, Lali (along with her mother-in-law, who was present for part of the interview) related many daily challenges around making ends meet and supporting children. The research associate then told Lali,

We are going to discuss all that in detail in order to find out what is going on. In general, this research is very important. You and your family won’t benefit from it in this particular moment. However, after the London School publishes that these women have such needs, someone might eventually do something for you. It would be certain progress; you never know what is going to happen.

Though the research associate was explicit in stating that there was no benefit to involvement in the project (both at this point, and at the beginning of the interview), she nonetheless felt the need to link the project to the future hope that something might eventually change due to the project. The lack of current benefit was tempered with the vague assurance that someone may do something someday, spurred by the project.

On a few occasions, the research associates expressed disappointment with how an interview went during the post-interview discussion. These sentiments usually centred on
two issues: first, their perception that women were not being ‘active’ enough in their coping efforts (i.e., they reported reading or watching TV rather than starting a business), and second, that women had agreed to the interview only for the monetary reward rather than interest in the project. On several occasions I reassured both associates that the interviews were gathering relevant information, despite their perception that too many women were using ‘passive’ coping strategies. The research associates also made comments such as ‘it’s so hard,’ with reference to conducting the interviews. I interpreted such comments to mean that the emotional task of hearing the women’s stories during the interviews was draining.

5.4.1.2 Myself/respondent dynamics

Though I did not personally conduct the interviews, I became engaged with the respondents through the process of reading and coding the transcripts, whilst still in the field. As Skidmore (2006) notes, engaged research advocates for histories of misery to be recorded in the contemporary world. Indeed, the act of writing about suffering becomes an act of engagement in itself, insofar as the researcher is ‘witnesses’ to suffering, accountable for what they see and fail to see (Schepers-Hughes, 1995). As the fieldwork unfolded, I received more and more translated interview transcripts which I open-coded in the process described in section 5.3.1 above. My immediate reaction to some (though not all) transcripts was overwhelming sadness and empathy for the women who had shared their stories and thoughts in the interviews. Similar to Cordillera Castillo (2015), many stories left me feeling drained, tired, anxious, guilty, angry, and powerless.

These initial emotional reactions were swiftly followed by a grave realization that my sadness and empathy were insignificant to the point of nothingness compared to the sadness felt by the respondents. This vast disparity made me feel foolish, naïve, and guilty, since my feeling bad over their stories revealed just how different our lives were: I had the luxury of only reading a sad story and having an emotional response to it, in comparison to the women who had lived and were living these sad stories. I felt that my sadness was insufficient and ineffective due to my powerlessness to actually do anything to improve the lives of the women. In processing these complex emotions, I settled on the label ‘feeling bad for feeling bad.’ My ‘feeling bad for feeling bad’ stemmed from the profound realization of the immense and insurmountable social distance between my life and the lives of the respondents.
My considerable distress both over the women’s stories and the insurmountable social gulf between myself and the respondents impressed upon me the absolute necessity to ‘do justice’ to their stories so that they would not have been collected in vain. This intention is imbued throughout Chapters 6-8, as I attempt to relay the losses, coping strategies, and views on men’s and women’s roles in a faithful way. I was inspired by the work of Hardgrove (2009), who note:

> It is difficult to strike an authentic balance between attending to the genuine suffering of the displaced without presenting them as helpless victims, and recognizing their adaptive capabilities without romanticizing their resilience. Thus this study was designed to investigate the means through which refugees at Buduburam learned to survive, without assuming trauma and mental illness or sensationalized adaptation to camp life (p. 484)

The overall imperative to present the views of the respondents in a faithful and balanced way directed me to frame the research according to an epistemological/ontological position of critical realism, described earlier in this Chapter. To put it succinctly, critical realism allows for difficult circumstances to be ‘real,’ (thus, doing justice to the very objective, visceral materiality of the women’s poverty, aside from anyone’s subjective perception of the environment), yet also affirms the inevitable influence of individual subjective perceptions on this reality (thus, doing justice to the worldview for each respondent, verifying the multiplicity of perceptions on and reactions to the same real external circumstances). The critical realist position provided a tangible way to be true both to objective environmental hardships and subjective individual perceptions of hardships, thus (I hope) doing justice to the stories imparted.

Despite my intense engagement with the women through their responses, I did feel detached from the respondents on a different level. Some of the detachment is certainly due to my inability to conduct the interviews personally because of the language barrier. There were instances which revealed I was not privy to the same sorts of relevant information being offered to the research associates, which may not have happened had I conducted the interviews personally. For instance, during the informal interview I conducted with the research assistants, they mentioned that many respondents showed them pictures of their homes in South Ossetia before the 2008 war. Such images would have been very helpful for me to gain context of their lives before the displacement, since I was repeatedly told by the research associates, and by the respondents via their interviews, that the women had once lived on wealthy farms in South Ossetia. Though I
recognized that the women were viewing their previous lives through ‘rose coloured glasses’ from the vantage point of current near or actual impoverishment, I felt a nagging suspicion that they surely did not live in great wealth prior to being displaced. This version of pre-displacement life seemed completely at odds with what I observed and judged as extreme poverty in large areas of rural Georgia. Whilst traveling to the settlements and in rural Georgia more generally over the course of the fieldwork, I regularly saw houses and properties which appeared to be in poor repair. Struggling to make sense of this seeming discrepancy between the respondent’s glowing memories of a rural wonderland and what things were ‘actually like’ pre-displacement, I came across the work of Miller et al. (2002) in their study on Bosnian refugees in the US. They argue that memories operate as a source of comfort (a nostalgic and romantic idealization of what life was once like), and as a reference point against which current life experience were evaluated.

This seeming discrepancy led to my effort to understand how their lives ‘really’ were before they were displaced. I attempted to overcome my lack of knowledge about Georgia and the post-Soviet space more generally by delving into historical texts and analyses about societal aspects which influence(d) Georgian women, presented in Chapter 4. While this does not confer ‘insider’ status, this endeavour did provide me a much better context within which to understand and interpret the women’s daily lives.

My outsider status vis-à-vis the participants was sometimes capitalized upon by the research associates during interviews, in order to elicit more detailed information. In these cases, the associates instructed the respondents to ‘suspend’ the insider-insider dynamic which characterized the interviews, in order to educate a not-physically-present outsider. Most of the cues from the associates to respondents to ‘pretend’ that they were ‘outsiders’ occurred near the beginning of the interview, as the women were asked to describe the events which led them to reside in the IDP settlement. Consider the following exchange between one of the research associates and Makvala:

[Interviewer] Tell me about the events because of which you live here now. In any order, depending on what’s important to you. [Makvala] Well, the most important thing is that before 10th... [Interviewer] Tell me from the very beginning. Assume that I don’t know anything. What happened? Why did you have to leave? Where did you arrive? With whom? [Makvala] I understand. Before August 10, we were in our village. Locals had already left but my spouse couldn’t live anywhere else, he couldn’t leave and so on.
The instruction to ‘assume I don’t know anything’ represents an attempt by the associate to suspend the ‘insider’ status, in order to record information that would otherwise be passed over as it would be assumed to be understood amongst insiders. Makvala then proceeded to give a very detailed account of the war and its aftermath. Without the prompt by the associate to ‘assume that I don’t know anything’ (setting aside the ‘insider’ status), this information might not have been shared or deemed important or relevant. Nino was given a similar instruction:

[Interviewer] Could you please tell me about the events, which made you internally displaced? I am aware of all those events, but as for my coordinator, she knows nothing about it. She is from London and she has never heard of it. [Nino] Could you specify what exactly you want to listen from me? [Interviewer] For example, where did you live and what was the situation and conditions like there? [Nino] The situation in Kheiti was very tense but we were accustomed to it. We were living in horror that something bad would happen. We were afraid that someday we might have to leave the place.

This interview section explicitly refers to and utilizes my position as an outsider (as someone from London who knows nothing of the events leading up to Nino’s internal displacement), but this positioning by the research assistant gains important relevant information which otherwise surely would have been deemed unimportant or irrelevant, as evidenced by Nino’s hesitation to answer the question, requiring clarification before she began.

5.4.1.3 Myself/research associate dynamics

The dynamics between myself and the research associates were at times characterized by slight confusion by the latter over the aim of the project. Because the project was exploratory, with a shifting topic guide and a lack of hypothesis at the outset, the associates were occasionally frustrated with the direction of the project. Moreover, they were at times anxious over whether various concepts would be understood by respondents (notably, the concept of ‘coping’). These anxieties were relayed to me during the initial training of the associates, whilst practicing the topic guide and probing.

Various other interactions revealed that they felt I was ignorant about Georgia, and needed to read and learn about previous historical events in order to properly grasp what the respondents portrayed during the interviews. The extremely lengthy informal interview with the research associates at the conclusion of data collection largely consisted of them relaying to me what it was like to grow up in the 1990s in Tbilisi, in order to give context to the project. They went into incredible detail about the hardships
everyone endured during those chaotic years. These interactions reinforced my position as an outsider, though perhaps one that could be taught to understand the intricacies of Georgian history and present.

According to Falconer Al-Hindi and Kawabata (2002), truly committing to research reflexivity often implies admissions of awkward events, uncomfortable dilemmas, and circumstances during which one felt ill at ease. The field research in Georgia was interspersed with such uncomfortable moments, which I relay below for the purpose of revealing the reflexive lessons contained within them.

5.4.2 Field work vignettes

5.4.2.1 Vignette #1: ‘The water distribution is unfair’

During our second visit to Shavshvebi on December 11, I wandered around the settlement while the interviews were being held. Tamaz Katamadze (the driver who took myself and the research associates to the settlements) seemed reluctant to allow me to wander unescorted, and so joined me on this stroll. During this brief walk, we were stopped three times by residents, who engaged Tamaz in conversation. Tamaz spoke a bit of English and told me what they had said afterward. The residents complained to us about the conditions in Shavshvebi, of which the most pressing concern was the water supply and distribution. The water supply is apparently inconsistent, with some houses receiving water and others not depending on their location within the settlement.

These conversations reveal that the residents perceived me as an outsider who could possibly improve their circumstances. It also demonstrates that my presence in the settlements was far from inconspicuous; as an outsider I was spotted and judged as a possible ‘helper’ immediately.

5.4.2.2 Vignette #2: ‘Word has spread that we are in the settlement’

My (unintentionally) conspicuous presence in the settlements led to some tension in Shavshvebi. Between December 11 and 19 (our second and third visits to that settlement), word apparently had spread throughout the settlement that we were paying for interviews and some women (who had been interviewed) were angry that we were not choosing their relatives to interview, as they also needed money. Apparently, TA was
informed that women were feeling that we were arbitrarily choosing some respondents, and it was not fair to the ones not chosen. In fact, we had planned to ask a previous interviewee to complete an audio diary, but she refused as she was angry that her friends and family were not granted interviews.

I was naturally concerned by this development as I had not meant to cause any harm due to the sampling method. I was also concerned by the influence of the community tension on the key woman (who was tasked with suggesting respondents for the study), and felt guilty that we had (albeit unintentionally) possibly made her a target of anger by non-selected women. After all, she was simply following our instructions to choose a wide variety of women, in terms of age, marital status, and job status. The issue that arose in Shavshvebi illustrates the unintentional effects of offering monetary incentives in research. On the face of it, the practice seemed positive as the respondents received reimbursement for their time. The appropriateness and amount of the reimbursement was settled upon through discussions with staff at GIP-T, who had previously conducted research projects and interventions in the IDP settlements included in this project. However, reimbursements can also lead to animosity between participants and non-participants, especially in a small community (where everyone knows what is happening in the community) marked by poverty. While the 15 GEL\textsuperscript{10} monetary incentive for the interview was scarcely going to have a long-term impact on the respondent’s financial status, the amount is actually quite large relative to social aid available per month, which was 30 GEL for each head of family and an additional 24 GEL for each family member (an IDP allowance of 28 GEL per month was also available, for those who qualified). Viewed in this light, the tension which arose in Shavshvebi over how interviewees were selected, and anger at one’s relatives not being allowed to benefit monetarily by being interviewed, is understandable indeed.

MR also encountered an awkward situation in Shavshvebi due to the seemingly arbitrary selection of respondents. Between interviews, an old lady had approached her while she was walking in the settlement, asking why we had not asked her for an interview. She was elderly, and felt that she deserved the monetary supplement more than others.

\textsuperscript{10} Equivalent to approximately 10 USD at the time of the interviews.
turned to the key woman in Shavshvebi [Nestan] for advice, who felt that she should interview the woman. This produced interview number 6.

This event illustrates the difficulty in adhering to a particular sampling method in the face of the complex moral dilemmas which unexpectedly emerge during field work. In this particular case, the attempt to adhere to a purposive sampling procedure (described in section 5.2.2 above) intended to ensure a heterogeneous and robust sample was compromised by research associate guilt and compassion. Related to this event, it is difficult to say how much of the sampling (which was ultimately decided by the ‘key woman’ in each settlement) was driven by a number of factors having nothing to do with attaining ‘maximum variation.’ Though I controlled the sampling by giving instructions to the key women to select respondents in a given age bracket or marital or employment category, ultimately which 50-something employed married woman approached for an interview was out of my control, and instead depended on the network of the key woman, her understanding of the selection approach, and her commitment to avoiding patronage. A few scenarios are plausible in these circumstances. Most obviously, key women may have been motivated to choose family members to be interviewed, in an effort to alleviate money problems of loved ones. Key women may have also been motivated to have ‘old neighbours’ interviewed, as opposed to ‘new neighbours.’ This may have been especially prevalent in a settlement like Skra, which was composed of families hailing from a variety of villages in South Ossetia, which sometimes manifested in animosity between different alliances. It is also possible that key women deliberately suggested unemployed rather than employed women for interviews, due to the perception that the former probably needed the money more than the latter. The majority of those interviewed were unemployed. However, the proportion of unemployed versus employed women in the sample may simply reflect the widespread unemployment in the settlements.

5.4.2.3 Vignette #3: ‘Won’t you have a drink?’

On my first visit to Skra, I again decided to take a look at the settlement by walking around a bit. Besides imparting a sense of the settlement, this activity also ensured privacy to the interview with the key woman in Skra. As in Shavshvebi, Tamaz appeared to feel that I should be escorted, and walked closely next to me in the settlement. There were a few groups of men hanging around on the muddy streets, who appeared to be drinking alcohol. We were approached by a solitary man, who offered us some sweets. Upon each
accepting a sweet, we were invited into his home, where his wife made coffee and offered us cake (which we accepted). The man appeared quite drunk and offered Tamaz and I wine throughout the visit. His wife seemed irritated but unsurprised by his behaviour. During the conversation over the approximately 1-hour visit the man appeared quite angry and passionate at some points. He and his wife were explaining the problems with the settlement, which Tamaz translated for me. They reported that the land is too damp and they believe that this caused joint problems for their 11-year-old son. These complaints were consistent with others’ remarks on the perceived link between damp conditions and joint problems detailed later in the thesis in Chapter 6 section 6.4.1. They also stated that they wished that they had a bathroom, as it is difficult to wash without a shower/bathtub. The language barrier prevented me from initially understanding their issue about the lack of bathroom, causing the man to draw a picture of a bathtub and shower in my field notes so that I understood. The considerable lengths that the couple went through to communicate their difficulties to me reveals the degree to which persons at the settlement viewed me as an outsider who could help.

Part of reflexive analysis is describing how others perceive the researcher (Nencel, 2014). Being stopped on the streets of Shavshvebi by residents telling us about problems with the water supply, and being invited into someone’s home at the IDP settlement and being told about various problems in Skra settlement, reveals that residents of these settlements (including potential respondents) viewed me as someone who could potentially help them. In an attempt to limit the misconception that I could help the residents in a practical and immediate way, I was not present in Karaleti IDP settlement while the interviews were taking place. The tendency to view outsiders as possible helpers has been noted in other studies which focus on populations negatively affected by conflict and unrest. For instance, in her study on war-affected persons in the southern Philippines, Cordillera Castillo (2015) relayed an anecdote which revealed that her presence was interpreted by the village leader as indicating that village circumstances would improve, due to her status as being ‘from Manilla.’ Even though she was transparent in her aim to conduct academic research, she knew that the villagers welcomed her in part due to the opportunity through the research to relate their lives to a wider audience.
The dilemma whether to accept or reject the offer of wine brought to the fore my outsider status. I suspected that whatever occurred (my drinking or abstaining) may be reported to the wider Skra settlement; I perceived that my decision may impact the degree to which the research project would be accepted (or not) by potential respondents. Due to previous experience sampling strong home-made Georgian wine by virtue of living in Tbilisi for a few months prior to this event, my first instinct was to politely decline the offer outright. However, I was worried about the potential implications of not accepting the glass of wine, including the host’s inference that I was an ungrateful and ungracious guest, unwilling to mingle with the IDPs and partake in the local ‘goings-on.’

I was also concerned that not partaking may be perceived by locals as negative judgement of their behaviour, which I certainly did not mean to impart. However, I reasoned that the hosts’ judgement of me may be mitigated by my position as a female ‘outsider’ in the settlement and to Georgian culture in which pride over wine production figures prominently. Moreover, the obvious disapproval of the woman of her husband’s drunken behaviour perhaps implied that NOT drinking would have led her to form a positive opinion of me, thereby easing the acceptance of the project by other women in the settlement.

Such dilemmas around whether to partake in local behaviours, and the potential impact on accessing groups has been noted elsewhere. For instance, in their reflexive paper on a women’s empowerment project in Bangladesh, the researchers in Nazneen and Sultan (2014) reported discomfort and feelings of deception due to obligations to observe certain dress codes and behaviour which were requirements of group access. In adhering to the prescribed dress codes and behaviour, it is in some cases possible to bridge ‘positional difference’ between researchers and respondents. In the end, I had a few sips in an effort to appease both the perceived negative and positive implications of accepting the wine. This act represented an attempt to bridge positional difference between myself and respondents, though it is possible that the act of drinking wine may have alienated rather than endeared me to them.

5.5 Respondent characteristics
In total, 41 semi-structured interviews were carried out, but one was excluded as the tape recorder malfunctioned. Thus, 40 interviews were included. Though the intention was to conduct one-on-one interviews, this was not always possible due to the often-crowded living arrangements in the settlements. Six interviews featured an additional person during the interview. In most cases, the additional person was present for only a small part of the interview. However, in two cases the intended interviewee was joined by an additional woman who contributed substantially to the interview. In both cases, the main interviewee was a 20-year-old woman, one joined by her mother and the other her mother-in-law. As demographic information and responses were sought from both interviewees in these interviews, these two extra women were included in the sample, though the demographic information on one of these women is incomplete. These extra interviewees provided informed consent in a process identical to anticipated interviewees. A total of 42 women interviewed once between December 4 2012 and February 16 2013 in 40 interviews. All interviews occurred in homes of respondents.

Pseudonyms, interview location, age of interviewee, marital status, employment status, date of interview, length of interview, and number of interviewees per interview appear in Table 2. The age of participants ranged from 20 to 73 years, with an average age of 43 years. Most were married with children and currently unemployed. Thirteen resided at the Shavshvebi settlement, 13 at Skra, and 16 at Karaleti. The majority were from rural locations originally. In accordance with the purposive sampling strategy of maximum variation (described in section 5.2.2), I sought to conduct interviews with women covering the widest spectrum of employment activities. However, as the interviews were conducted during the work day, any women who were employed in paid labour were likely away during the day, which may have caused an underrepresentation of employed women in the sample.

Table 2: Demographic and interview details of the sample

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* SH = Shavshvebi, SK = Skra, KA = Karaleti
** M = Married, D = Divorced, W = Widowed, S = Single
Chapter 6: Results on resource losses faced by internally displaced women in Georgia

As discussed in Chapter 2, an analysis of coping strategies requires consideration of the difficulties which prompt a coping response. When asked to describe the challenges related to their daily lives, the women in this study provided stories replete with sentiments of loss – of land and property, financial stability, close relationships, and sound physical and mental health. This Chapter draws upon Hobfoll (1989)’s Conservation of Resources (COR) theory and the corollaries of loss spirals and loss caravans as a framework to interpret the accounts of resource loss (including the loss of objects, personal characteristics, conditions, and energies (as described in Chapter 2, section 2.4.5) amongst IDP women in Georgia. This Chapter addresses the second key research objective (see section 2.6) to explore the resource losses faced by IDP women in Georgia.

This Chapter draws upon the stories of loss shared by my sample in order to map out a chain of resource losses largely consistent with the ‘loss caravan’ and ‘loss spiral’ constructs. Because over 4 years had passed between the 2008 war and the interviews, the sampled women were in a position to reflect upon the chain of events, as well as relationships between various losses, over a period of time. Like Palinkas (2012), I conceive of these waves of losses in subsequent ‘tiers.’ As outlined in section 2.4.5.2, COR theory predicts that sudden losses associated with traumatic events usually have a severe initial impact, which is followed by subsequent resource loss. The waves of loss are depicted in a conceptual model near the end of the Chapter in the summary section.

At the time of thesis submission, a journal article based upon the findings in this Chapter had been peer-reviewed and resubmitted to Social Science and Medicine. See Appendix A for a list of publications and conference presentations arising from the thesis.
Below, I briefly discuss the historic context to the war and displacement, as described by the women. The purpose of this section is to provide a background and context to the women’s lives prior to the 2008 war and displacement. Next, I describe the traumatic events which occurred in the immediate aftermath of the August 2008 war, and then trace the impact of these losses on subsequent losses.

6.1 Life before the 2008 war

As described in Chapter 4 (section 4.4), South Ossetia had been at war in 1991-1992, with clashes and low-scale fighting frequently occurring throughout the 1990s and into the 2000s. Latavri, the eldest woman in the sample at aged 73, provided insightful comments on the long-standing issues which had led to the war in 2008. She begins by describing protests by South Ossetians in the capital, Tskhinvali, in the late 1980s:

Well, I’d like to say that these events didn’t start in 2008. It all began long before… When the Soviet Union was about to collapse […] Ossetians used to hold demonstrations in Tskhinvali. They didn’t want to live with Georgians. They didn’t want to be part of Georgia. I could tell it from their banners and everything. From my private conversations with them too, of course. Everything was against Georgia. They wanted their own republic. It all began during the Gamsakhurdia administration.

As discussed in Chapter 4, Gamsakhurdia was the first elected President of Georgia, coming to power in 1990 as the 1991-1992 war in South Ossetia was about to spark. He was an ardent supporter of Georgian independence from Russia, as well as a nationalist who spread hostile ideas about ethnic minorities including the South Ossetians. Latavri continues,

So, soon after [Gamsakhurdia’s election] those disturbances began… Our life there wasn’t that bad before. Georgians and Ossetians used to get along. All these troubles were caused by the collapse of the Soviet Union. […] I was saying that it all began during the 90’s. In 1989, to be more precise. After the April 9 tragedy in Tbilisi… I don’t know. After this, life there got harder.

The April 9 tragedy refers to the attack on anti-Soviet protesters in Tbilisi by the Soviet army which occurred in 1989. When asked to elaborate on how life got harder after this event, Latavri responds,

There was no road or anything. Sometimes they would close the road through Tskhinvali. Sometimes they would let us pass through it. They used to stop buses and capture people. […] They used to shoot at us. Our gorge was surrounded by mountains and their roadblocks or something, I don’t know, they were located uphill. […] They would shoot at us from there. We were in a really difficult situation. Many houses were destroyed by missiles. Everything was being destroyed.
Marta (married 39-year-old in Karaleti) concurred on the violent environment which characterized South Ossetia during the 1990s, stating “I finished school in 1991, and they have been shooting there ever since. We lived under those conditions but we were used to that kind of life.” In addition to transportation blockages, snipers, and the threat of missiles, Latavri remembers the common occurrences of kidnapping and killings resulting from South Ossetian aggression:

Herdsmen couldn’t put livestock to pasture because Ossetians would kidnap both their cattle and herdsmen themselves. This family from [Georgian village] here lost a member when he was de-pasturing their cattle; four people from [Georgian village] were killed too, they were also kidnapped when they were de-pasturing their cattle. So, things like this used to happen.

She concludes by drawing a link between the violence which occurred in the 1990s to the 2008 war:

So, I’m saying that this war didn’t start in 2008, but a long time before. The situation had been growing worse until it escalated into the war in 2008. But even before 2008, things were so tense that we were standing at the verge of war. Younger people used to leave the region with kids, older people would stay there, then they would return but what these Russians and Ossetians did in 2008 was too much. It was just too much.

The dangers before 2008 were also noted by Medea, a married 40-year-old in Karaleti. She shares,

They used to shoot almost every day. We lived in fear, we were worried. We didn’t know what was going to happen, who was going to be shot, or killed by a bomb. But we were still tolerating it. […] Well, things like that used to happen almost every year. Especially in summer. The village would empty, we would take our children away from the village and then, we would bring them back. We thought that it was going to be the same this time. We thought were leaving the village for 2-3 days. But we couldn’t go back and so, we are here now.

Marina, a married 26-year-old in Skra, opined that tensions increased in South Ossetia after the establishment of the Sanakoyev administration in 2007, which was intended to function as a rival administration to the president elected by the South Ossetians (see Chapter 4, section 4.4.2). She explains,

After the establishment of the administration, the shootings began. We were waking up and falling asleep to the sound of shootings. Things were really tense and in the last two years there, we used the 12 km relief road through the forest. It was terrible.

The relief road through the forest to which Marina refers is a road which by-passes Tskhinvali. It was created to allow Georgians to access to the city of Gori (located in Georgia proper), since they were not allowed to use the regular road after the implementation of the administration. It was via this relief road that many of the women and their families escaped in the lead-up and during the 2008 war. However, the relief road was also viewed as dangerous, with women stating that explosions frequently occurred on the road.
Injuries were common, with residents frequently caught in the crossfire between Georgian and South Ossetian (backed by Russian) forces. Sopio shares that her father-in-law was killed by a landmine on a road. She states,

Land was full of landmines. As I’ve already said, the situation was stable in terms of agricultural development but we lived in fear too. When you look above and see the Russian Army looking back at you, of course, you would experience fear. [...] Roads were full of landmines and my father-in-law was one of the victims (married 40-year-old in Skra).

Similarly, Marina in Skra settlement spoke about her spouse’s cousin, who stepped on a landmine in his cow pasture, which led to paralysis in his right hand and foot. The constant noise of gunfire was another stressor. She states,

I think that even if I had stayed there, I wouldn’t have been able to tolerate it. I thought that something was wrong every time there was no shooting sound for an hour or so in the morning. [...] It was nonstop. And it wasn’t light or something, they were shooting machine guns [...] Well, there were soldiers in all four corners and we were in the middle (married 28-year-old).

Medea’s son had suffered a gunshot wound at the hands of a sniper when he was 15. She recounts,

He was playing in a schoolyard with other kids and he was shot in his stomach by a sniper from above. And because of that we were frightened, of course, and we didn’t want him to stay in the village. [...] It happened during the night, under searchlights. He got shot in his stomach. So, we were scared… My spouse is especially… He always has negative thoughts on his mind. He didn’t want anything to happen to our kids and we would always take them away from the village (married 40-year-old in Karaleti).

Some women recounted fleeing on numerous occasions prior to the last displacement in 2008. For instance, 72-year-old Rusiko remembers, “There was another village nearby called Ditsi and we used to go there on foot every time it was unsafe to stay in our village. We would always return home.” Elisabed recalled an evacuation of her village in 2007, after which the residents returned to their homes after the skirmish subsided. Ketevan shares,

Well, it wasn’t just in 2008. We were in that situation for 20 years. [...] My children used to flee the village and stay in [small town in Georgia proper] for months with relatives. They would leave and come back [...] Well, we had fled the village once, twice… Sometimes we would even stay there. We used to tolerate it somehow. All these shootings, bombings… Bombs were dropped on nut trees, on some houses… The lower part of our house was damaged… (72-year-old widow).

Similarly, Ekaterine remembers, “leaving our village for a month or so wasn’t something foreign to us but we always returned” (married 41-year-old in Skra). Some women reported being displaced within South Ossetia prior to the 2008 war. For instance, Vardo and her family had first lived in the capital of South Ossetia, Tskhinvali. They were driven
out in the 1990s due to the Georgian-Ossetia war from 1991-1992, settling in a Georgian village less than 10 kilometres away from Tskhinvali.

Women reported hiding prior to fleeing, usually in basements, to escape shooting and bombing outside. The descriptions portray such events as stressful but normal occurrences. Elene speculated that people probably were used to the constant threat of injury and death. She notes, “people in Kheiti were used to [bombings and explosions]. They even were able to sleep during the war. […] Probably, a person can get used to anything.” One woman, a 72-year-old widow in Karaleti, had even brought some sour cream to whip whilst hiding in a basement on August 7th 2008, the day the war broke out. This illustrates the ‘normalcy’ of the constant state of tension and low-scale warfare. She states,

On Thursday evening, it was August 7, they were shooting and we were hiding in our neighbour’s basement hearing all these sounds of exploding bombs. In spite of everything, I was still thinking about doing something. So, I had taken a 10-litre jar of sour cream with me to whip it while we were hiding there (Ketevan).

Other women reported no disturbances between the Ossetians and Georgians, reflecting the often-localized nature of the history of the conflict. For instance, Lali, a 32-year-old who was not originally from South Ossetia, reported that no disturbances had taken place since she moved there. Moreover, she though that relations between South Ossetians and Georgians were fine. Lali states, “I also had some neighbours who were Ossetians and they have never said or done anything that could offend to me.” There existed a high degree of interaction and intermarriage between Georgians and South Ossetians. Comments such as, “Our relatives were mostly Ossetians. We used to be friends” (Makvala) were common. At least two of the women sampled (Lakavri and Nestan) had married South Ossetian men.

6.2 Traumatic events

Most women left their homes with other family members (notably, with children) either in the days before the war started (August 3 to 6), or in the first few days of the war. Almost all reported that they had made the decision to flee quite suddenly, with no time to prepare for the flight or prolonged displacement. For instance, Nana, a married 44-year-old woman living in Skra, was hiding in her neighbour’s basement with the rest of her community on the evening of August 8. Suddenly, another neighbour came into the
basement and told them all to leave as quickly as possible by any means, even on foot. The neighbour was acting on a rumour that the village was about to be bombed. As such, she left immediately with her daughter via a neighbour’s car, leaving her spouse and son behind. A minority of respondents remained in their villages throughout the war and were evacuated by the Red Cross at the end of September 2008.

Women fled their villages via a variety of ways, either on foot, in family or neighbour’s cars, on public transport. One woman even left the area using a neighbour’s abandoned tractor. Though a few routes out of South Ossetia were used, most first went to Gori, the nearest city in Georgia proper to South Ossetia. The attack of Gori by Russian troops on 9th August 2008 (see Chapter 4, section 4.4.3) triggered a second phase of flight, with the capital city of Tbilisi the most common destination reported by respondents. Though most women fled to Tbilisi at the bombing of Gori commenced, a few remained in that city during that bombing campaign by the Russians.

The women’s account of fleeing their homes were replete in details on the difficulties encountered due to transportation problems and getting ‘caught in the crossfire’ between South Ossetian, Russian, and Georgian forces. Transportation from the villages was complicated by the fact that Georgians were not able to use the main road coming from Tskhinvali to Gori, having to rely on the relief road (described in section 6.1 above) which was perceived as dangerous. As such, women reported using other, lesser-known routes in order to flee South Ossetia.

In some cases, women who left before war broke out were able to use public transport in order to arrive in Gori (prior to the bombing of Gori). Leila, aged 52, shared a particularly frightening account of a bus ride out of South Ossetia. She shares the following:

> When we crossed Eredvi, our bus stopped. We were scared and didn’t know where to go. They started shooting at us. We saw that the bus was shaking, people began to run away, we thought that they were shooting at us but as we found out later, there were other soldiers nearby and they were shooting at them. […] They were shooting from above. Something fell down and exploded, there was this noise and our bus almost flipped over. I laid over their girl that was with me to shield her when she began to cry and scream. I told her not to be afraid. Of course, we were scared.

Women who left after the war had started also encountered difficulty in finding a safe way out of South Ossetia. Some managed to get rides from strangers in truck beds,
crowded with others fleeing their villages. This is how Rusiko managed to escape. She recounts,

Then we saw a dropside truck and we sat in the bed of the truck, that woman and I. There were many other people coming on foot, from [Georgian villages in South Ossetia]… We all sat in the bed of that truck. However, because there were too many people, the driver couldn’t start the vehicle and some of them, including me, had to get down (72-year-old widow in Skra).

Luckily, Rusiko was later able to get back onto the truck bed.

Many women reported that they were exposed to shelling and shooting as they fled from their villages. For instance, Eteri (aged 42) experienced bombing as she and her family fled via car. She states,

[S]omething large exploded in front of us. I don’t know what it was. It frightened us […] It exploded with a flash… It felt like it was happening in front of our noses but it wasn’t so close… We weren’t harmed or anything, but it really frightened us.

Rusiko also reported being targeted by soldiers as she fled. She recounted that soldiers had shot at her and other villagers from high vantage points in the mountainous terrain. She remembers,

The Ossetians could see us, because they had taken control over the place called Mtskheta Cross, it was uphill and they used to shoot from there. We were lying down, getting up and slowly trying to escape from our village (72-year-old widow).

Women witnessed the looting and destruction of homes and entire villages whilst fleeing. Nutsa reported that bombs had levelled entire districts with houses, along with livestock. She states,

There was only ash falling down from the sky. Ash of dust. Where did these huge houses disappear? Where did livestock go? People had already left probably but where did livestock or these huge houses disappear? […] Just cavities remained. Nothing else, just cavities. Where the bombs fell, everything in that area was destroyed (married, age unknown, Shavshvebi).

Eliso (aged 39) stayed in a basement of a house near the border overnight as she, her children, and extended family including a 1-month-old baby fled South Ossetia. She recounts, “[A]t 6 pm, the shooting began in Eredvi as well and they were shooting all night. We were hiding in the basement with kids. We spent the night there.” Eliso and her family then made it to the relative safety of Gori, immediately before central Gori too was subject to heavy shelling. She describes the chaos that followed the attack on Gori:

Then, a helicopter or something started bombing Gori too. So, we ran out with the 1-month-old baby… Oh my God, it was so terrible. We were bathing the baby when it happened. […] We picked the baby up and ran out so fast, because of those shootings, that we forgot to put the diaper on the baby. A friend of mine lives on Gorky Street and we ran in that direction but people in that neighbourhood were panic-stricken too. It was near military base but we were so confused that we
didn’t know in which direction to run. People from that neighbourhood were running in our
direction. We couldn’t catch a taxi. […] Everyone was panic stricken and running away from the
city. People were running around. […] Everyone was panic-stricken. It was terrible. So, at the
railway station, I was ready to hop on any train, going either to Tbilisi or Western Georgia. We
just wanted to escape the city that was under attack. I didn’t know where to go with this kid…
Then, a train to Western Georgia arrived and we hopped on it.

Eliso and her family eventually made it to a town in western Georgia, where they hired a
jeep and arrived at a family member’s home. Khatia and various family members also
fled from Gori after arriving there from South Ossetia, managing to flee to a nearby
village. Others stayed in Gori during the bombing, under extremely harsh and dangerous
circumstances. For instance, Tamriko and her family retreated to the basement of her
brother-in-law’s house in Gori for 5-6 days during the bombing, without food and
sleeping on just one mattress. Ekaterine (aged 41), her children, and her nieces and
nephews were also in Gori during the attack. She remembers, “Children began to panic
but I didn’t know where else to take them. Buildings were under attack, they all were on
fire, and we witnessed it all with kids.”

6.2.1 Separation from family members

Women often spoke of the stress of separation from family members during the war, most
frequently from husbands and sons who refused to leave the villages. Elderly relatives
also frequently refused to leave their homes. Eliso (aged 39) was separated from her
spouse and in-laws for the duration of the war. When they too left the village, she was
“finally able to breathe.” Fortunately, her family had escaped relatively physically
unscathed. Similarly, Izolda’s husband had initially stayed behind in order to take care of
their sheep and goats. However, he left when “things got tense,” and was soon reunited
with Izolda in Tbilisi.

Other women reported that their temporarily missing family members sustained injuries
and/or witnessed scenes of destruction and violence, including the deaths of neighbours
and soldiers and the destruction of homes. For instance, Marina’s spouse and in-laws
remained in the village until 8th August after she had fled with her children on 3rd August.
They left at midnight, on foot through the forest amidst heavy shelling. Both her spouse
and father-in-law sustained shrapnel injuries. Rusiko (aged 72) was parted from her son
due to his refusal to leave their village, as he did not want to abandon their domestic
animals (cows and chickens). He was subsequently trapped in the village for the duration
of the war, finally reaching Tbilisi via the Red Cross and regaining contact with his
mother after the war. During the war he was taken captive and “got hit in the head very badly,” according to Rusiko. Maia recounted another instance of captive-taking. She left her village after assuming that her aunt and uncle had already left with other family members. They had in fact not left the village, and were taken captive by the Ossetians, who provided very little food and forced the men to bury the dead. They were later freed during a prisoner exchange, after which they left South Ossetia.

Occasional acts of extreme violence against family members was reported. Giuli’s grandfather stayed behind while the rest of the family fled, as they had made arrangements for him to leave with another family. Unbeknownst to Giuli (aged 26) and her journey companions, that arrangement fell through due to the neighbour’s car being stolen. Her grandfather returned to his home to find soldiers setting fire to it. When he protested, he was beaten badly by the soldiers. Giuli states, “His condition was so bad that he spent a month at the Republican Hospital. His neck was broken, he had cigarette burns all over his body and he had lost his vision; he couldn’t even get up.” He was later found by the Red Cross and transported to a hospital, where he died shortly after.

6.2.2 Deaths of loved ones

A minority of women lost family members due to the war. Makvala (aged 70), for instance, lost her spouse. She left the village without him on 10th August, two days into the war, as he wished to remain behind to care for an elderly uncle. She explained that they had fled the village on a number of occasions prior to the 2008 war, and she and her husband fully expected that she would return to the intact village in a few days. Instead, he was killed on their property while attempting to flee days after Makvala had already left. Eliso (aged 39) shared that her spouse’s godfather had been killed after forces found a weapon in his house during a search. A few other women reported that members of their extended family had been killed, but no one in their immediate family.

A few other women spoke of the deaths of neighbours. For instance, Ekaterine (aged 41) suffered the loss of three neighbours. One was a bed-bound 80-year-old women who perished when her house was set on fire. The other two were women whose vehicle was bombed while they were fleeing. Guranda (aged 28) lost some neighbours and a good friend who was in the Georgian army. She recounts:
A big tragedy for me was that my friend, a very close friend of mine was in the army, in Gori, at the time. He was the only child in his family and was raised in luxury. And the mother’s only son died during the invasion of Gori while he was serving with a tank battalion. […] Despite the fact that he was a young man, full of aspiration and patriotic feelings he wasn’t even given a chance to fight for his country. The village he was in was under attack and he was buried in a hurry. And we, his friends, arrived there, at his grave, forty days after his death… We did not have the opportunity to go there earlier. It was the most painful thing…Some people I knew died there. My neighbour died in front of my father, in a bomb explosion. My father told us about this bloody scene later and it really hurt me. Many people I knew from the gorge… Well, one of our neighbours was crossing the river with his wife when they were fleeing the village. His wife fell into the river and he could not save her. The man survived, but the river carried the woman downstream, when the gorge was being bombed.

6.2.3 Food and shelter challenges

Upon arrival in Tbilisi, most women and their families initially had no place to live, and little or no money to buy food. Lia (aged 38) describes, “In the beginning, it was complete chaos. We were in need. We didn’t have anything. We were literally hungry, homeless and had nothing to wear.” Some women fortunately had family in Tbilisi, with whom they stayed until the government organized accommodation for the rapid influx of displaced persons. However, as Vardo (aged 39) relates below, staying with family also presented challenges:

Well, in the beginning, when we left, our main problem was finding shelter. It was impossible to stay with anyone. How long can you stay at your relative’s place? We stayed at my brother’s. He had a one-bedroom apartment and both my parents and I stayed at his place. Five people were already living there in one room, when six of us arrived there. Can you imagine how it felt? […] We lived in terrible conditions. First two weeks were terrible. We had hygienic problems. You know how many things women need. We had no clothes, we couldn’t change them… I’m not even talking about unemployment. Everything was closed. We didn’t have any food. We all depended on my brother. […] We, women, including my mother, hadn’t eaten anything but water for one whole week. We couldn’t eat because we didn’t want our kids to be hungry.

Vardo and her family were allocated space to live in a kindergarten after two weeks at her brother’s place. She spoke very highly of the assistance provided at that time, stating, “people there supplied us with absolutely everything.” Others were allocated space in institutional buildings within a few days. Sopio remembers:

We spent the first night at the Gori railway station because it was late and we couldn’t go anywhere. The next day… Well, I have relatives in Tbilisi but other people from Gori were already living with them, so we couldn’t go there. They provided a technical school building in Teleti, near Tbilisi for us and we stayed there for a week or so (married 40-year-old in Skra).

The majority of respondents reported that they spent most of August, and all of September through to December in temporary accommodation in institutions, which were often kindergartens or University buildings. Conditions prompted a variety of responses. Tsisana (aged 28) opined that the conditions were “very bad;” unsuitable for kids. Marta (aged 39) went even further, stating that the first days she spent with her children in the kindergarten were the worst days of her life. She states, “There was no food, no beds. I
had to sleep on the floor with little kids.” Marina (aged 28) had a somewhat different opinion of the initial accommodation provided, stating that they “lived under relatively good hygienic conditions; we had food […] In any case, living conditions there were better than what we have [currently].” From December 2008 to January 2009, the IDP population settled into the purpose-built villages. The respondents reported that they had a degree of power in choosing which IDP village in which they would settle.

### 6.3 Initial losses

The initial losses described in this section occurred a result of the earlier losses associated with the hardships outlined in the previous section. Initial losses include the loss of property in South Ossetia, which represents both an object and a condition loss. Property was valued as an object due to the reliance of the women and their families on land for their livelihood. The loss of property was also considered a condition loss, as the property conferred a status as a landowner in a part of Georgia cherished for its natural beauty and fertile soil. Besides the loss of property, diminished mental health was a loss identified as stemming from the war-related trauma items discussed above. This outcome is addressed following the losses related to property outlined below.

#### 6.3.1 Loss of property (object)

The loss of property was the most salient object loss resulting from the war, encompassing losses of homes, appliances, furniture, and housewares, cars, and farmland. Each of these aspects to the loss of property is discussed below.

##### 6.3.1.1 Loss of homes

Frustration and sorrow at having lost their homes was a common theme across the interviews. The following statement was typical:

> We managed to work both at home and in our gardens. We used to do it with joy and happiness. Because it was our life, our house and everything else was ours too. Everything was built or created by us. Now there is just one question on our minds: what for? Why did we need all of that? The old life has ended. Instead of it, we now have these cottages and it’s all we have (Khatia, aged 50).

Comments on losses pertaining to homes frequently compared the size of the settlement cottages to their old homes, referring to their present homes as cramped or too small. One states, “[C]ompared to our houses in the gorge, it’s nothing. Excuse me but our cow houses were as big as this cottage. Really. Our houses were huge” (Tatiana, aged 48).
Another Karaleti resident concurs, stating, “We had a big house with 18 rooms. […] We had space upstairs, we didn’t need the 18 rooms, of course. We had another house, it wasn’t so big, it was a two-story house with 5 rooms” (Medea, aged 40).

Besides the size, the quality of the housing at IDP settlements was frequently referenced in discussions of home-related losses, with dampness being a paramount concern. Marina (aged 26) relates, “We live in a very bad place. It’s damp. Almost every cottage here has wet walls. The walls are literally crying. […] [Everyone here including me thinks that in a couple of years, these cottages will collapse.”

Residents at Shavshvebi and Skra settlement frequently reported the lack of indoor bathrooms as a major problem in their settlements. Marina states, “We don’t have bathrooms. There is a terrible smell here in summer and it’s unsanitary. […] [It’s very uncomfortable. This is how bad our living conditions are.” Natia (aged 53) concurs, stating, “Toilets are outside, I don’t know what the situation in other settlements is but it’s very uncomfortable…Well, we don’t have bathrooms at all.”

Besides problems with the cottages themselves, interviewees also spoke about amenities in the settlements. Concerns over water accessibility and cleanliness were a common concern across all three settlements, reflected in the following statement: “the fact that water is not clean is the number one problem” (Ekaterine, aged 41). Particularly in Shavshvebi, IDPs in made several comments about the salinity of the water. Jana (aged 35) explains,

> Apples cannot grow here. Apple saplings wither because of water salinity. I bought apricot and apple saplings and when I planted them and watered it a white layer was on the ground because of water salinity. If a newly planted sapling is watered with saline water it will not survive. That’s why these villages here are so poor in gardens.

A major issue touched upon across the settlements was the water schedule, which became a problem particularly in the summer months when water resources were pushed to the limit due to irrigation activities. Giuli (aged 26) notes, “In winter, we have relatively less problems with water because IDPs don’t use it for irrigation. In summer, however, there is almost no water at all because everyone here irrigates their gardens with it.” Sopio
(aged 40) in Skra concurs, explaining: “here is a struggle for water and the fastest and strongest gets it. […] [O]ur village is always running short on water.” In Skra, attempts had been made to drill wells to improve water access. Though this worked for increasing water for irrigation in the summer, it was not considered drinkable. Sopio opines, “[the wells] aren’t deep and water is dirty and undrinkable.”

Though not an overwhelmingly frequent theme, interviewees occasionally commented on lack of space in their cottages or settlements. Cottages typically housed from 2 to 5 persons, with larger families spread over 2 or more cottages. Nana in Skra stated, “we are five and there isn’t enough space for us here” (married 44-year-old). Nana also felt that there was not enough space between the cottages in the settlement, stating “We can’t even walk in our yards normally because there is wire grid fencing and neighbours living in front of you”. The problem of house spacing was noted as well in Karaleti. Marta (aged 39) pointed out that closely-spaced houses inhibited residents from keeping large domestic animals. While chickens were viewed as fine to keep, larger animals like cows and pigs could only be kept by those on the outskirts of the settlement.

6.3.1.2 Loss of appliances, furniture and housewares

The loss of homes meant the loss of all possessions inside the homes. Many women reported taking nothing with them, due to the haste in which they left and to the expectation that they would be allowed to return within a few days. Guranda (aged 28) describes the haste in which her parents left their village:

They left a cup of hot coffee on the table, they didn’t take anything with them, just the clothes and home slippers they were wearing – they all got into the car just like that. You may ask why. Because they were going to return home in no time.

Marina (aged 26) in Skra states,

Personally, I thought that it was going to be like the 2004 War, when we left our home for a couple of weeks with kids and returned soon. Accordingly, we fled the village without anything at all. We left everything there, gold, absolutely everything.

Similarly, Eliso (aged 39) stated that she used to bring family photos with her when leaving the village due to skirmishes, but her spouse told her to stop carrying them back and forth. So, she had left them behind this time. Khatia (aged 50) was hanging laundry out to dry when they were advised by a ‘military person’ to leave the village. She left wearing only one shoe and later discovered two clothespins in her pocket, evidencing the
haste in which people left. She left without money or belongings. She shares her thought process below:

We didn’t even think about taking something with us. Even if we had taken something with us, someone could have taken it away from us on our way. They were robbing people. Plus, it wasn’t our car and there is so much space in your pockets. I didn’t even think about taking money with me because I didn’t want anyone to take it away from me on our way. Moreover, I also thought that we were going to return home in a couple of days. We didn’t think we were leaving our village for good.

Irma (aged 56) remembers,

Of course, we had left the village before. We used to wait here until things were over and then, we would go back. This time, we thought that it was the same and so we left our village with hands in our pockets, hoping to go back to the village in a couple of days. But we never did.

As a consequence of leaving with nothing, many report having to ‘start from scratch’ in rebuilding the households they once enjoyed, enriched by the tradition of passing material goods from one generation to the next. Women who had been displaced multiple times were particularly frustrated with the loss of goods. Isidore (aged 57) had been displaced twice, from South Ossetia in 2008 and also from the capital of South Ossetia, Tskhinvali, in the early 1990s. She remarks, “now we have to buy things for the third time. What can we buy now?”

Commonly-missed items included kitchenwares and appliances such as washing machines. Tatiana (aged 48) reflects,

I’ve just realized how rich we were and how many things we had. Here, we have just one fork and one plate we were given. We have to buy everything again now. In the [pre-displacement] village, we used to have 3-4 sets of dinnerware. Some families even owned wedding dinnerware sets just in case. That’s how we lived.

The difficulty in adjusting to a lack of cooking pots was commonly relayed. Nutsa remembers the pots she had in her former village, and how the lack of those possessions has multiplied her labour time whilst cooking:

How many times have I cried over the things I used to have in my house that I don’t have here. Let’s say, when I have to cook, I have so many children, I have to prepare food in a large pot. But when you have a tiny, little pot like this… You are forced to cook 3 times in it. How many times have I cried… If I were in my village… I had two, three large pots there.

Khatia (aged 50) in Karaleti also reported missing her kitchenwares. She reflects, “In our village, we had 4-7 large pots. Now we have none and we can’t even borrow them from our neighbours because sometimes they have only one pot and they need it.”
Along with kitchenwares, women missed appliances they had formerly owned. Rusiko (aged 72) explains:

I’m gradually moving backwards. [...] Here, we have nothing. [...] We had everything there. I have this small refrigerator and there is almost no space for anything. We had a bigger refrigerator there as well as a washing machine… How many things will we be able to buy? We need so many things and my pension only isn’t enough.

Rusiko’s remarks are echoed by Lali (aged 32), who also missed her washing machine: “I don’t even have a washing machine and it’s very hard for me… I already hate when I have to do the laundry.”

6.3.1.3 Loss of car and transport

Many women identified the lack of reliable transport as a major challenge in their post-war lives. For some, the lack of a regular, affordable public transport system was discussed. For others, a family car was sorely missed. For instance, Ekaterine (aged 41), whose family had left their car in South Ossetia, states,

We owned a car and we could transport wood or go anywhere. Here, we don’t have this… Even mini-van operates twice a day only and once a day on weekends… at 8:30 am. If you urgently need to go somewhere, you should hire a taxi and you can’t always afford it.

Other women spoke about the lack of accessibility of key community resources, due to poor road maintenance and distance between the settlement and institutions such as schools and churches. This was an issue for children in Skra attempting to walk to school, as related by Ivdity (aged 23), a young mother: “We also have problems with the road. The road is damaged. Children cannot normally walk to school. [...] It’s very far. There is no public transport.” Her mother-in-law Natia (aged 53) adds, “there is no school bus for children. The school is very far from here. Children have to walk two kilometres. [...] Everyone in the settlement has this problem.” The issue of distance between the settlement and school was repeated in other interviews conducted in Skra. In contrast, residents of Karaleti benefited from a free mini-bus which transported their children to and from school in Gori. A mother (Marta, aged 39) from Karaleti states, “Schools are trying to attract as many kids as possible. That’s why they are offering this free mini-van service. [...] So, we don’t have transportation issues and we are grateful.” Another Karaleti mother (Eliso, aged 39) concurs, noting that in addition to the minivan service, the teachers and school administration had welcomed their children warmly.

6.3.1.4 Loss of farmland
A common way of life in the villages of origin, as conveyed through the interviews, was to plant and tend large gardens to provide food for the family and to sell excess produce for profit. Raising domestic animals such as cows and chickens were also a feature of the rural lifestyle. Sopio (aged 40) explains:

Each cow can produce 10-12 litres of milk. And when you own 8 cows, you make cheese… And why do you need so much cheese? Cheese made from one cow’s milk is more than enough for one family. And why would someone keep cheese made from 8 cows’ milk, so we used to sell it… We also owned bees… We had tons of potatoes. No one needed 5-6 tons of potatoes, when 1 ton is more than enough for a family. So, we used to sell all these things and we had money.

Tatiana (aged 48) in Karaleti remembers:

We had such a good life there. We used to grow fruit, nut trees… We used to harvest 20-21 sacks of walnuts. After cracking, we used to get 4-5 sacks. We also had apple trees, fruit trees… So, we didn’t have any problems. [Interviewer: You used to grow vegetables too, probably]. Yes. Everything. Potatoes, onions… Fruit. Everything. We didn’t have to buy anything except flour and oil. We had everything else.

Such statements were quite common, with women reporting that they used to make a good profit selling fruits and vegetables in markets, and always had food for the family. Others spoke about animal products they used to sell: “We owned livestock, we owned three cows, I used to make and sell cheese, milk” (Tamriko, aged 47). Khatia (aged 50) remembers,

We owned livestock, poultry, chickens… Everything. We weren’t in need. We weren’t afraid of hunger. We used to grow everything our family needed. We had chickens and accordingly, eggs too. We owned livestock and had milk. So, weren’t afraid of hunger. We didn’t even have to work.

The ability to grow much of the family’s food needs meant that the women rarely needed to buy food from shops. Past gardening resources were frequently presented in stark contrast to the gardening opportunities in the settlements. Giuli explains, “Currently, we have to buy everything. In our village, however, we had it all. We used to grow everything we needed in our garden; we had meat and eggs at home. But here, we buy everything” (single 26 year-old).

Garden allotments had been provided for the IDPs at each settlement. In Karaleti, residents drew lots for garden spaces, which provided some residents with land planted with fruit trees and some residents with empty plots. Opinion on these allotments were mixed, but the majority criticized them as being too small, located in inaccessible places, or containing poor soil. Natalia (aged 52) opines,

Well, it’s a bit problematic because this garden around our house is too small and we can only grow greens here. […] We do have another garden, however. It’s a bit far from here but there is
no road and because of this, we don’t maintain it. We have to cross the river to arrive there. So, we don’t work in there and accordingly, we can’t grow anything in there.

The lack of road to garden allotments was mentioned as well by Tatiana, also in Karaleti. She and her husband had planted plums in their allotment, but were unable to harvest them because the lack of road meant that they could not drive a vehicle to the allotment in order to transport the plums.

A minority of women reported that they were unable to use their allotted gardens at all due to poor soil quality. One Karaleti resident complained that their allotment was full of stones and gravel, and another (Ekaterine, aged 41) that her land seemed ‘barren,’ as her efforts at starting fruit trees proved unsuccessful. However, other women reported satisfaction with the garden allotments. In fact, Marta (aged 39) reported reaping a very good harvest, which enabled her to sell produce at a profit. Similarly, Vardo (aged 39), judged that the soil in Skra was good, and plants could grow as long as they were cared for. Sopio, also from Skra, felt that the land given was enough to grow enough vegetables for the family but not large enough to produce surplus vegetables to sell.

6.3.2 Loss of property (condition)

The loss of homes and property in South Ossetia represented a condition loss for the women. The status of owning a home and land represented stability and a sense of heritage. Natalia (aged 52) spoke of a love for her native land: “Everyone wants to go back. I’m not sure about the kids who were born here; they probably don’t know what it is to love your native land, others have this love at the genetic level, they pass it on.” Makvala, whose husband was killed after she had fled the village, explained that he stayed behind because he was a “huge patriot,” who used to teach school children love of Georgia in his occupation as a teacher. Women often shared happy memories of their villages and neighbours in south Ossetia. Khatia (aged 50) spoke about the communal nature of making bread in a tandoor oven12 (see Chapter 5, Figure 7) as one aspect of the connectivity between neighbours. She remembers, “Whenever someone in our village was baking bread, 6-7 of us always used to gather around the tandoor helping the host. We used to have fun. We used to have a great time together.” Guranda (aged 28) also remembered this tradition:

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12 A cylindrical clay oven with a wood fire at the bottom, in which Georgian women make bread. See Figure 7.
We had this tradition, when one of the neighbours was baking bread in a tandoor, others would bake it too. The entire neighbourhood would bake bread together and we used to celebrate it. They would drink coffee or wine and they would tell interesting stories… It was a kind of gathering. For women, it was fun, while men would gather front of my house, for young people it was fun too.

Raising animals for meat and dairy products was seen in instrumental terms (providing food and livelihood, as discussed above), but also referenced a way of life for which the women were nostalgic. Sentimental comments made by the women about former engagement in animal husbandry and making cheese from cows milk, reflects a strong connection of the women to their lost land and livestock. Elisabed’s (aged 28) grandparents (also IDPs) managed to bring some cheese from the family cow as they left South Ossetia. She recounts the event of sharing the cheese below:

I left my heart and soul in the village, so to speak. […] Our grandma also took one pot full of cheese for my kids. My children began to cry when they saw the cheese because they understood that it was made of our cow’s milk. It was very hard, even for the kids. I think they don’t remember our village now but when they talk with each other, they say they do. They remember cherry trees, mulberry trees, our dog, this, that… They always talk about it. It’s very difficult to listen to it and deal with it.

This shows not only the strong connection between the IDP women and their lost land, but also the transfer of this orientation toward the lost Georgian lands in South Ossetia to new generations who had spent most of their young lives in the settlements. In addition to sentimental statements about livestock and animal products, women often referenced their former gardens and spoke about how much they missed home-grown fruits and produce, particularly apples.

Most of the women had been displaced from a string of villages in one of two mountainous gorges: the Greater and Little Liakhvi Gorges. Women often shared sentimental remarks about the great beauty of the landscape in which their villages were located. For instance, Sopio (aged 40) remarks, “[M]y family is from the Little Liakhvi Gorge. It was a very beautiful village. Both visually and… Nature there was amazing and trout was… I don’t know. It was a fairyland.”

A few women reported that the displacement and their abandoned villages were constantly in their thoughts. Latavri (aged 73), speaks for some of them:

I discuss things with other women and I know that we all face the same difficulties. So, we wake up thinking. We look around and think all the time. Personally I and everybody else. So, thinking. Thinking about our village, our corner, our burnt down houses. We go to sleep and dream about being there. Our flesh is here but our soul stayed there.
Tatiana (aged 48) provides a similar sentiment, stating, “I miss it so much that sometimes I wish I were a bird to be able to fly over our gorge and see it once again.”

Another aspect to the loss of land is the loss of access to graves of loved ones, which prevents IDPs from carrying out traditions honouring the dead. Even Georgians who are not religious participate in various rituals in order to properly care for the deceased, including maintaining the gravesite and planting flowers, and visiting the grave on the deceased’s birthday, on the anniversary of their passing, and the day after Easter. There is a strong tradition of burying the dead next to already-deceased loved ones. Tata (aged 31) related the following:

I keep saying that if anyone dares to enter that territory, I’ll go with them, I swear, even just for a day. My deceased grandparents, father’s sister – she died young – are buried there. […] I just want to visit their graves, to light a candle in their honour.

Eteri’s 2-year-old niece died of a brain tumour weeks before the war. Due to the war and displacement, she and her family had been unable to commemorate the death 40 days after the death by lighting a candle on the grave, in accordance with Georgian Orthodox rites. Some respondents reflected on the probability that upon their own death they would not be buried in their homeland. Makvala, a 70-year-old widow in Skra, states, “Some people wish to be buried in their homeland, next to their parents. Nobody wants to be buried somewhere else, including me. What if I die?”

6.3.3 Loss of mental health due to traumatic events (condition)

Besides property-related losses, women specifically referenced mental health losses as resulting from war-related traumatic events. Women’s accounts of the fear experienced both during flight, and of the years of sporadic conflict leading up to the all-out war, frequently centred on shelling and shootings. Marina (aged 26) shared the following:

We lived in a tense environment but I was only worried because of the shootings. I didn’t worry about anything else. Now this old stress manifests itself. These shootings… I was mostly afraid of the shootings. They used to make me quake and I couldn’t stop it. Especially at night, when it was impossible to hide anywhere. […] [Interviewer: Do you have fears?] Not so many now but I did in the beginning. I couldn’t even go out alone. [Interviewer: You probably felt everything very deeply]. Yes, I did, and I became very aggressive… It was stressful.

Makvala (aged 70), explains how her mental health has been impacted by the war, speculating how it has impacted the mental health of the community. She recounts:

Because of what we’ve been through, we have given up. It has affected us a lot. People, who haven’t experienced it… You can’t imagine what we felt when there was an airplane in the sky about to drop bombs. We used to hide in basements because we didn’t want to die. […] And seeing
other people’s homes in flames knowing that the same fate awaits our houses... Everything you worked for, everything you bought, everything you did will turn into ashes within seconds. How would you feel after that? It will be hard, of course.

Makvala’s husband, who was 65 years old during the war, refused to leave the village and was killed. She shares the following:

When he finally decided to flee the village, he was shot dead in our yard. The person, who brought me the news, also told me that someone asked my spouse why wasn’t he running away like others, my spouse was 65, and he replied that he didn’t want to leave because it was his home. He was shot because of what he had said. My heart starts to hurt when I think about it. Of course, I became neurotic.

Other women reported psychosomatic symptoms as a result of the war. Sopio (aged 40) spoke about health problems her mother-in-law was experiencing. She describes,

My mother-in-law has some health problems because of her age. She’s 62. She’s not very old but still... Life has affected her health. [...] She said she feels pain everywhere but she doesn’t know what exactly is causing the pain. She feels pain everywhere from neck bones to arms and insides. She feels pain absolutely everywhere.

Vardo (aged 39) recounted an event which caused her 77-year-old mother-in-law’s mental health to deteriorate:

When my mother-in-law was fleeing the village, during the war, they got into a car accident. A bomb exploded nearby, the driver lost control of the car, and it flipped over. Her mental health has been deteriorating ever since then. [...] Her head was swollen to shocking proportions. With the help of doctors and medications, we managed to get it back into shape. She has been experiencing some problems since then. However, she was a healthy woman before.

Women often made links between what their male loved ones had endured during the war, and subsequent mental health problems. Nanuli (aged 71) spoke about the impact of the war on her adult son’s mental health in the following:

My son, for example, he has become neurotic after the war. [...] Before the big war, my son witnessed how Ossetians and Georgians used to shoot each other ... Some were shot in the head, others in the leg [...] After that, he has neurosis.

Tata aged 31) tells of the immediate mental health impact of the war on her husband, who was a soldier during the war. She recounts,

Then, my husband became aggressive, for a while. I don’t know... I don’t even want to think about it. He used to freak out, whenever I was trying to speak with him. He had a terrible neurosis because other soldiers next to him were killed and that, of course... [...] He used to jump out of bed... He was recalling their tents or something, where they used to live, and how bombs were falling and exploding killing people... He rescued many injured soldiers and he saw this everything... Even in movies, it’s something terrible and pitiful to watch. So, I can imagine what he was feeling when it was happening around him. I stopped talking to him because he was getting angry... He became very aggressive. He was getting angry even over those things he shouldn’t normally get angry at.

There were many comments about problems with neurosis and ‘nerves’ in general as a result of war trauma. Jana (aged 35) of Shavshvebi states,

I did not lose any member of my family but it affected our nervous systems and my son had to visit psychologists. [...] He became very nervous. He witnessed everything what was going on
there. He saw how people died in their cars, how the place was bombed. Little kid cannot stand all
these cruelties (married 35-year-old).

Elisabed (age 28) discloses, “I have neurosis because of the war. […] I had anxiety
attacks, fear of dying, insomnia, dizziness, trembling […] Sometimes, when I get nervous,
I feel dizzy and I shiver.”

Physical and mental health were frequently conflated, with the term ‘heart’ used to denote
both problems with the physical heart and problems with mental health such as worrying.
For instance, Leila (aged 52) from Skra felt that the death of her 55-year-old brother-in-
law had been due to his heart having to ‘take too much.’ Her brother-in-law had stayed
in their village after Leila and others had fled, in order to attend to an elderly family
member who refused to leave. Leila shares, “their house was burnt down anyway. They
saw their house, their car, in flames. Our house was nearby too and they watched it burn.
How much can one heart take? So, this young man died.”

6.4 Losses due to displacement

The loss of property as both an object and a condition each led to additional losses. Loss
of property (as an object) was connected to the loss of livelihood and decreases in physical
health. Loss of property (as a condition) was connected to mental health deterioration and
the loss of social networks.

6.4.1 Loss of physical health (condition)

A range of physical health concerns were noted by the interviewees, which were
commonly attributed to conditions at the IDP settlements. Notably, problems with
dampness and mould were frequently implicated in respiratory problems. Attempts had
been made to deal with the issue. For instance, in Shavshvebi, organizations had
renovated and repaired the cottages at least twice to deal with mould issues. As such,
some of the health problems reported during interviews were attributed to conditions of
the cottages when they were first built, rather than to their current condition. Tamriko
(aged 47) reflected on the former condition of their cottage in Karaleti, linking it to her
son’s health problems. She describes:

These rooms were so damp, my oldest son almost died, he had pneumonia… He spent a week in
the emergency department. He was in such a bad condition… We were so worried. These walls
dried out just two years ago. When we moved here, it was so wet and damp under mattresses…
There was the smell of mould in the house. After pneumonia, my son got asthma. I can’t even tell
you how hard it was for us.

193
Tatiana and Irma, other Karaleti residents, also stated that they used to have problems with mould, but felt it had been addressed with the winterization of the cottages and renovation of walls. Sopio (aged 40), opined that mouldy conditions in the cottages had led to her joint problems. Likewise, Khatia (aged 50) opined that her 24-year-old daughter’s joint problems resulted from the wet conditions of the cottages in Karaleti:

> When we arrived here, all walls in the house were very wet. My daughter still experiences joint pain. She is feeling very bad. [...] Her joints are in such a bad condition that there is nothing we can do to help her. She’s still young, 24-year-old child. So, the walls were wet when we settled here. Gradually these walls dried out.

Besides dampness and mould, the water quality was implicated in causing health problems. Medea (aged 40) drew a link between poor water quality at the Karaleti settlement and health declines in the community. She states, “[I]t’s very bad water. A laboratory has tested it and… Almost everyone here has pain their kidneys, backs, livers… Every other person is sick because of this water.” However, opinion in Karaleti on water quality was divided, with another resident defending the water quality:

> I would not say that anyone has ever gotten sick because of this water. Once, in summer, there was some infection in the settlement. That virus infected some people. They blamed it on the water but later, it turned out that it was just some virus. Although it is possible that we all carry some infectious disease and it hasn’t manifested itself yet (Guranda, aged 28).

### 6.4.2 Loss of livelihood (energy)

The COR theory considers money to be an energy resource, as possession allows the acquisition of additional resources. The loss of livelihood was overwhelmingly considered the most pressing problem in all three settlements, and was unequivocally linked to the loss of property discussed in section 6.3.1. Medea (aged 40) shares, “I’ve never been so poor in my life before we moved here four years ago.” Social aid and/or IDP allowances were available to those who qualified for it\(^\text{13}\). Many of the interviewees’ families relied on these monthly payments in order to survive, but the respondents consistently reported that it was insufficient to cover basic needs.

Interviewees, who were mainly farmers and traders prior to being displaced, reported that adapting to new ways of making an income was extremely difficult in their new settings.

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\(^{13}\) Social aid reportedly consisted of 30 GEL for each head of family, and an additional 24 GEL for each family member. For a family of 4, this amounts to 102 GEL per month, which was equal to approximately 60 USD at the time of the interviews. An IDP allowance of 28 GEL per month was also available, for those who qualified.
Reflecting on the job prospects for her neighbours, Eliso (aged 39) states, “Despite the fact that many of them aren’t lazy, there are almost no jobs here. There are just some low-wage jobs.” The lack of income presented problems in paying bills. Many women claimed that they had not had to pay for electricity or gas in their former villages in South Ossetia, which compounded the distress at now having to pay for utilities. Many women were overwhelmed by their bills, and reported different techniques in paying them such as borrowing or using appliances sparingly. Despite this, many reported having their electricity and, more commonly, gas supplies being cut off due to lack of payment.

Unfortunately, entrepreneurial efforts made in order to address financial shortcomings did not always pay off. For instance, Medea (aged 40) invested considerable resources in order to build a small bakery. She made a small income supplying bread to Karaleti residents and a local restaurant. However, the cost of wood and flour increased, causing her to seek funding to grow her business. An NGO had confirmed funding in order for her to expand her bakery, but the opportunity somehow evaporated. She recounts the following:

They came here, saw our tandoor, they took pictures and told me they would finance my project after the winter holidays. Yes, they even called me and confirmed it. It was a very good project. Especially considering the fact that I was already running my business and I just wanted to expand it. My project had this privilege. I don’t know what happened. They didn’t call back me after that and when I visited them… Well, I heard that they had financed other people’s projects submitted together with mine. So, when I visited them, they told me that someone else had already received the bakery grant and I still don’t know who it was.

In the end, Medea was forced to close her bakery.

One of the most salient themes related to loss of livelihood was the effect of poverty on children. Mothers and grandmothers voiced concern over the lack of dispensable funds for education and recreational/extra-curricular activities, and overall future prospects. Eliso (aged 39), mother of two teenagers, offered the following statement on children’s prospects away from their village of origin:

Now, we are concerned about our children’s future. When we lived in our village, we didn’t have to think about it, I knew that we would always be able to find money and that we wouldn’t be in need. Now that we have to live under the open sky, and considering the fact that we don’t know what to do, it’s very difficult and we are worried because of this probably.

The inability to buy basic necessities such as food and school supplies was clearly a source of great distress for mothers and grandmothers. Sopio (aged 40) states, “as a
parent, plus with Georgian mentality, I want my children to have absolutely everything.” Maia (aged 39) in Shavshvebi shares, “Often, I couldn’t buy food for my family. I had these kinds of problems. […] I need clothes for my children; I need to buy them food.” Nutsa relates that it was difficult to buy school supplies and provide money for school events:

[Children] also need exercise books. They gave them books at school but we still have to buy exercise books, pens… Today in the morning my little one came to me and told me that they have a New Year’s matinee at school. He left crying because he told me that his teacher asked everyone in his class to bring 3 GEL. […] I didn’t have it, what was I supposed to give him if I don’t have it?

Besides basic needs, mothers spoke of other resources they were unable to provide to their children due to lack of funds. The inability to buy computers for children was discussed a few times. One mother (Lali, age 32) in Shavshvebi regretted that she was not able to purchase a computer for her children. She states, “They are crazy about computers and there is no way I can buy one. I can’t even buy it on credit. I feel so sad, so sad because of that.” Eliso (age 39) in Karaleti concurs, stating “We don’t even have a computer yet because we can’t afford it.” Eteri (age 42) stated the same: “Now my sons are begging me to buy them a computer on credit but even if I did, I would still have to pay for it.”

Often, extracurricular activities or other recreational groups for children were simply out of the question due to financial constraints. One mother regretted that she was unable to spend money on dance lessons for her daughter:

I pity my children, I want them to be involved in something. […] Dancing lessons are especially important for my girl. […] Nevertheless, it’s not only about paying a monthly fee. She needs special shoes, a belt, a black dress (Lali, age 32).

Her sentiments were echoed by several other mothers and grandmothers. A 42-year-old mother of two sons relates:

They don’t go anywhere; they don’t even go to sports. Nothing is for free. They went to wrestling school for some time but they stopped going there. My younger son wants to take swimming lessons, he’s begging me to let him take them but they cost 50 GEL a month. I can’t afford them and so, he sits at home (Eteri).

Limited opportunities for children resulting from financial difficulties were also commented on by young women whose educational prospects had been frustrated by lack of parental funds. Twenty-three year old Ivdity explains how she has had to suspend her University course due to lack of funds available from her parents:
[Interviewee’s parents] told me they would support me in every way possible and pay my university fees. So, the biggest problem was that later, my family was no longer able to pay my university fees. […] [I]t was the biggest limitation I faced since the displacement.

The inability to continue studies due to financial hardship was echoed in Giuli’s account below, who studied pharmacy:

After graduating from college in 2008, I had to undertake an internship but they asked me to pay 100 USD per month and my family couldn’t afford it at the time because we had recently fled the village. So, I didn’t do it. You can’t get a job unless you have experience but I have none. So, I’m forced to sit at home without a job.

Though overall the sample overwhelmingly reported that they had been more stable financially prior to the displacement, some women felt that there were more opportunities for training and getting into careers outside of farming post-displacement. Though they nonetheless reported financial difficulties, women who had worked as teachers, cleaners, or salespeople prior to being displaced (as opposed to farmers) had a more mixed opinion on whether job and educational opportunities were better in South Ossetia or in the settlements. For instance, Vardo (age 39), who had worked in a kindergarten prior to displacement, felt that there were more educational and training opportunities in Skra settlement than in her village in South Ossetia. She explains:

Because as IDPs, we used to receive more attention. Training courses, for example. I attended computer courses and received a certificate. I won a grant. I had my own small business […] So, I’ve received more education. I didn’t have this opportunity in my village. […] Training courses were never held there. At least, not while I lived there. […] Here, on the other hand, we used to receive more attention and accordingly, we’ve learned more. Now I plan to resume my studies, for retraining purposes. We’ll see.

This was echoed by Guranda (age 28) who opined that “after the war, people now have the opportunity to reveal their skills. They have more opportunities now.” A 56-year-old woman in Karaleti, who had worked as a teacher for 37 years prior to being displaced, had the following optimistic opinion of the opportunities in the settlement:

[W]e aren’t really limited here. If you really want to do something you are interested in doing it, there are many opportunities to do different things here. The gorge was relatively isolated… Here, they offered us different courses, such as cooking classes, dressmaking classes, massage courses, hairdressing courses.

Other women felt that job opportunities, though limited in the settlements, were just as limited in their villages of origin. Eteri (age 42) in Karaleti reflects, “it wasn’t easy to find a job there either. There were almost no jobs there. Here, there are much more job opportunities but some of employers need young people… For basic jobs.” Sopio (age 40) opined that educational opportunities in her village of origin were limited. She goes on to say,
Life there was hard in terms of education. There were almost no educational institutions. Well, there was a school but it was very far. There was no school in the village. Children had to go to another village. So, it was impossible to realize your potential in terms of education.

Ana and her husband (of Shavshvebi) were also unable to find permanent employment in their village of origin. Though she harvested apples and owned a cow which produced dairy products, she felt that such endeavours were not dependable sources of income.

Sopio, in Skra, also opined that job opportunities in the origin village were sparse. Unlike the other respondents, she attributed her generation’s joblessness on the wider political context. At 40 years old at the time of the interview, she felt that her generation had gotten ‘lost in the middle’ of political events in the late 1980s and 1990s. She would have been in her early 20s during the tumultuous period of the breakup of the Soviet Union and the independence of Georgia from Russia. She reflects,

I can’t say that it’s only because of the war that I can’t do some things now. When I was a little girl, everyone used to tell me that I should grow up and get a job. When I finally grew up, the new government told us that it wasn’t our time anymore and that we should stay at home and give way to young people. So, my generation got stuck in the middle. Even when I lived there, I couldn’t find a job.

Similarly, Marta, who was 39 at the time of the interview, referred to the women in her generation as the “lost generation.”

Other women saw their unemployment as a consequence of marrying and starting a family young, in addition to a consequences of war and displacement. For instance, Lali (age 32), who had completed an obstetrician-gynaecology course, reflects on why she had never worked outside the home:

I finished the courses in 1997. Then, I got married and of course, my problem was that I gave birth to the first child, then to the second, and later I had to raise them. As they became older, we became IDPs. After the war. So, I’ve never had a chance to work.

Similarly, Marina (age 26), who married at the age of 16, explains that she was not really seeking employment before the displacement as she was “mostly at home raising children.”

6.4.3 Loss of mental health (condition)

Mental health declines figured prominently in the wave of losses resulting from the condition loss of property. Interviewees speculated on how their own mental health status had changed as a result of being displaced from South Ossetia, as well as how the mental health of loved ones and neighbours had changed. Khatia (age 50), reflected on the mental health of loved ones.
health status at a community level. She observed several changes in her neighbours, many of which she knew before they had been displaced. She shares:

We have many problems here. Our nerves are wrecked. After all that we’ve been through […] There’s only so much we can take. We changed. We used to be different when we lived there. I look at my neighbours and I see that we are different now. […] I mean that after all we’ve been though, it seems like people aren’t interested in one another anymore. We aren’t as good neighbours as we used to be. I feel that people are different now. This is what I see. […] We’ve changed a lot. I see it. We use to do things with different joy. We used to laugh. Now, we rarely laugh. We hear only bad news now.

Contained in this statement are several themes which were echoed across many other interviews. Problems with ‘nerves’ and neurosis, isolation, and joylessness were often imparted. Makvala (age 70) also speculated on the community-level mental health results of the war and displacement. She offered an even bleaker opinion on the mental health of her neighbours in Skra:

When your heart is broken, you don’t want to live anymore. 86 families live here and I am sure that all of them wish to die soon. I visit my neighbours and I know that they all think this way. Nobody thinks that they will do this or that in the future, or have a better life. Because of what we’ve been through, we have given up. It has affected us a lot.

This statement relays the oppressive nature of living in the IDP settlements, where some feel as though there are no possibilities for a better future and ‘giving up’ is the only option. Irma (age 56) (along with others) stated that she had “lost her joy in life” after becoming displaced. She elaborates:

I used to be interested in many things. I was happier. But here, I can’t stop thinking about the problems I have or could have in the future. I involuntarily think about my old life and it, of course, affects me. […] In addition, age takes its toll and I’m not as happy as I used to be.

Strong feelings of sadness over lost homes and property frequently surfaced during the interviews. Lali (age 32) in Shavshvebi ponders,

Is this life? It’s so hard but I don’t curse anyone, neither do I ask for anything. I’ve always been like this, but because of what happened my heart hurts and I’m very sad. Why did this have to happen? But it happened so why can’t we live under normal conditions? But what conditions are we talking about when we don’t even have a bathroom.

Others reflected that they had chosen to isolate themselves post-displacement. Ketevan, a 72-year-old widow, stated that she has limited her contact with the outside world since the war. She explains, “I don’t like to go out. […] I don’t know what happened to me. I have absolutely no desire to go out.” Sofiko (age 23) revealed that her father had isolated himself immediately after the war, linking this behaviour to depressive symptoms and ‘giving up on life.’ She shares:

[M]en are more depressed now in my opinion. They’ve given up on everything in their lives, while women have shown their fighting spirit, so to speak. […] [A]fter we moved here, my father didn’t
want to do anything, he locked himself up at home and didn’t want to go out; he was avoiding people. He used to say that he didn’t want to remember anything. He also told us not to remind him of anything and stop talking about it. […] My father has had a hard time getting used to everything here. He used to say he didn’t want to do anything and that everything he had done there was destroyed in a second and that starting all over again was pointless, it would take a lot of time.

Swift mood changes such as being easily angered were also reported by the sample. Latavri (age 73), opined that the displacement had “affected our mental health,” elaborating, “I get angry more easily now. I used to be a quiet person, I was able to tolerate more but not so much anymore.” This change had also been noticed by Tatiana (age 48). She recounts a recent incident: “Little kids were playing here yesterday with my grandson, and… Well, I can’t tolerate noise anymore. […] Even a small thing can make me angry. My 27-year-old daughter is in the exact same situation. Her nerves are wrecked.”

Some women reported a myriad of mental health problems plaguing themselves or close family members. Tatiana (age 48), recounted a tragic recent incident in which her granddaughter had been hit by a car in the settlement and died. Along with the loss of their home and property in the war, this accident had a profound impact on the Tatiana’s husband’s mental health. She shares,

My spouse is so broken. I don’t know. I’ve been through a lot too but my spouse has changed dramatically since the displacement. […] He now has vision problems too. Neurosis. I want to take him to the doctor but he won’t come with me. […] He keeps saying he won’t live for too long. He doesn’t even want to, he says he’ll meet our granddaughter sooner and be with her there […] My spouse is so broken hearted that nothing exists for him in this life anymore.

This passage reveals the profound hurt and constellation of mental health problems resulting from loss of homes and land; her spouse is ‘broken,’ suffering from vision problems, neurosis, and seems to have lost the will to live.

Finally, intense boredom and monotonous day-to-day life were often reported by the women in all three settlements, one commenting that “it’s boring to death” (Eteri, age 42). Lali (age 32) in Shavshvebi offers the following description of daily life:

In my opinion, our life here is very boring; personally for me and my family. Every morning, when we wake up, we basically have to do the same. The sun rises, we wake up, and we think about what to cook, then we send our kids to school […] This unemployment is very tiring. Everyday is the same, in the morning you wake up, at night you go to bed… What for? There should be something joyous about waking up, about the fact that you’re still alive.

6.4.4 Loss of social networks (condition)
Besides declines in mental health, the loss of close-knit communities and close geographical proximity of family and friends comprised a salient loss resulting from the loss of property in South Ossetia. Women often stated that they were ‘used to their old neighbours’ and they used to know everyone in their villages of origin. The settlements often combined families from different South Ossetian gorges, most notably the Greater and Little Liakhvi gorges.

Quite a few women felt that they had lost contact with formerly geographically close family members due to distance. Ekaterine (age 41) reflected on the loss of contact with her siblings: “I used to contact them almost daily but it’s been 5 years since we moved here, and I still haven’t visited my sister. Whenever I had a problem there, I used to share it with [her brother and sister] and they used to help me but here, I don’t know.” Similarly, Vardo (age 39) states, “I don’t have friends now. I’ve lost everyone, they are all scattered around now.” Regarding now-distant family, she relates “we literally cry on the phone we miss each other so much. We can’t wait to meet each other. It’s just that we don’t see each other because we live far.” She describes the loss of social support inherent in these lost contacts:

Our family used to solve problems together. […] Many of our relatives lived there and we used to support each other. Problems there were less visible. When we moved here, it was a bit hard in the beginning. It was an unfamiliar environment. We didn’t know people here. When we had to do some physical work, there was no one who could help us because we didn’t know them. So, in the beginning it was hard, we had to do everything on our own. In the first two months, we gradually became closer with other people and began supporting each other.

Marta (age 39) also felt that formerly close relationships had been strained by the displacement. She relates,

Sometimes I’m too lazy to phone even my parents and say hi. I’m not even talking about my friends. […] [M]y heart is far from them, so to speak. I’m tired of everything. When I meet our mutual friends, I send them my regards, of course, but I don’t phone them personally (married 39-year-old in Karaleti).

A minority of women spoke about not being able to see family members who remained in South Ossetia. Makvala (age 70) had not been able to see her brother in years because he had an Ossetian passport, preventing him from freely travelling in and out of Georgia. She was unable to visit him in South Ossetia due to fear of capture and imprisonment by the Ossetians. She states, “Do you know what it feels like, when you can’t see your brother, your flesh and blood…? I want to go and see him, but I can’t.”
Though not an overwhelmingly common theme, some women spoke about distrust and conflict in the settlements, attributing the disharmony to different places of origin within South Ossetia. Marina (age 26), from the Greater Liakhvi gorge, opines on the differences between two sets of IDPs living in Skra:

[People from Greater and Little Liakhvi gorges, differ from each other a lot. Women from the Little Liakhvi gorge are very aggressive, very. They immediately begin to fight. They are unable to solve problems by talking them through, they start a hand-to-hand fight. For that reason, we don’t get along.]

Tatiana (age 48), also from the Greater Liakhvi gorge area, opined that people from the same villages tended to interact with each other more often than those from different villages. She implies that this is due to mistrust:

Well, not everyone is to be trusted, of course […] Well, a lot of people from [village in Little Liakhvi gorge], [village in Little Liakhvi gorge], and other villages live here but we, people from Achabeti, understand one another more; we share our problems with one another and it helps us a bit.

Rusiko (age 72), from a village in the Little Liakhvi gorge, notes “We are the only family from our village here. Everyone else is from other villages. I can’t even go out and get distracted for a while. So, I stay in.” However, Sopio (age 40), also from the Little Liakhvi gorge, reports that she gets along well with her neighbours from the Greater gorge. She shares, “[It wasn’t hard for us to build a relationship with each other. It wasn’t hard at all.” Similarly, Latavri (age 73) reported that she and her neighbours got along well, since they were all “oppressed, exiled people” (73-year-old widow in Karaleti).

Others reported tension between people in the newly-created IDP settlements and people in adjacent villages and towns. Tatiana (age 48) in Karaleti settlement, which is close to the city of Gori, felt that the people of Gori and Karaleti (the town) treated IDPs in Karaleti settlement poorly, though the IDPs would never treat the townspeople poorly. She states,

[People from Gori and [the town of Karaleti] reminds us too: “IDPs, IDPs, we are tired of hearing that you are IDPs” – they tell us. People from the gorge would never treat them this way. […] People from the gorge are totally different. I mean, by nature… They are more compassionate, empathetic… Compared to people from Gori.

Lali (age 32) reported some conflict in the market at Gori with the local merchants.

At Gori market, for example, if you touch anything or ask for price, you have to buy it and I had many conflicts because of that. I don’t understand why they get angry. I just asked for the price, maybe I am going to buy that thing tomorrow, why are you attacking me?

Some women revealed that they perceived the settlement to be unsafe. Leila (age 52) from Skra states that she did not like her grandchildren and the children of other playing
outside. Opining on her neighbours, she states, “they are strangers…I don’t know. Whom can I trust?”

Other women had managed to create a new social network to replace the one lost or disrupted by the war and displacement. Such networks were reported within settlements and bridging settlements and nearby towns. Tamar (age 20) in Shavshvebi revealed that she had initially been very distrustful of her neighbours in the settlement, but now had good relationships with them. Her initial distrust was due to their South Ossetian ethnicity:

I didn’t trust anyone because mostly Ossetians live here too. It was irritating me. When I went to school, I finished 11 grades here, and their last names were irritating me. I was very aggressive. I don’t know… Eventually I got used to it. I used to say to myself that it wasn’t their fault and took myself in hand to have a good relationship with them.

Khatia (age 50), felt that she did not have a ‘bad’ relationship with her neighbours. She goes on to say, “Even if they are introverted, it is still possible to find a common language. […] If I need something and share my problems with them, they will help me if they can.”

Maia (age 39) in Shavshvebi settlement recounts that though she did not know her current neighbours until she arrived at the settlement, they “liked each other immediately.” She goes on to say, “My neighbours are really good. We often say that we can live here forever together and have a good, sweet relationship.” Likewise, Sopio (age 40), describes the following social interaction among the neighbours in Skra:

I don’t know how people living in other parts of the settlement treat their neighbours but here, in our neighbourhood, when someone makes coffee, all six of us, neighbours, gather there; in the morning, for example. In the afternoon, someone else makes coffee and we gather there. Then, the third one makes coffee. On the next day, the fourth and fifth ones make coffee and so on. So, I can’t say that I have a bad relationship with my neighbours. [Interviewer: And why do you have such a good relationship with your neighbours? Did you know these people before?] No, we weren’t acquainted. My family is from [village in the Little Liakhvi Gorge], our neighbours next door are from [village in Greater Liakhvi Gorge], others are from [village in Greater Liakhvi Gorge] and so, we all are from different villages. Nonetheless, it wasn’t hard for us to build a relationship with each other. It wasn’t hard at all. […] We share our problems, pain, and worries, and support each other.

This is in contrast to Marina’s opinion above, which emphasized tension between those coming from different gorges. Despite Marina’s inability to get along with neighbours in Skra settlement, she was able to foster new friendships in the village of Skra. Similarly, Guranda (age 28) in Karaleti settlement appears to have built friendships with residents of Gori, stating “For me living here… I don’t feel myself like an IPD, because I’m already used to life in Gori and living with the people from Gori.”
6.5 Sustained losses due to previous losses

The losses described in this section have occurred due to circumstances resulting from the war and displacement. As such, they are not due directly to the war and displacement, but to the psychosocial and environmental circumstances and losses which followed the displacement. It is in this tier of losses where the impact of the loss of livelihood manifests further losses; in social connections and physical and mental health.

6.5.1 Further losses of social networks (condition)

One of the most heartfelt outcomes women related to financial instability was the impact on social networks. Women spoke about not having the means to cover the transportation costs in order to visit friends, neighbours, and family members who now lived far away due to the war and displacement. In most cases, such formerly close contacts now lived in other IDP settlements. For instance, Eliso’s in-laws had been allocated a cottage in an IDP settlement far away from Karaleti, where Eliso and her family lived. Though they managed to visit the in-laws quite often, she notes that “we spend a lot of money on this.” Rusiko (age 72) reflects on formerly-close family relationships: “We’ve almost lost each other. We don’t see each other often. They live in different places. Again, these financial problems […] I think our relationships became cold.”

Along with transportation costs, women cited the Georgian tradition of bringing gifts or sweets when visiting loved ones as a barrier to keeping in touch. Many women stated they would rather stay at home than visit someone with empty hands. Sopio (age 40) shares, "We became distant. This is the greatest pain. […] You know Georgian mentality, I can’t visit them with empty hands. It makes me feel uncomfortable when I visit someone without a gift. They have kids and I should at least buy them 2 kilos of chocolate. I can’t afford these things… The more time passes, the more uncomfortable I feel about visiting them with empty hands. So, all this has made us distant.

These sentiments were common across several interviews. One woman explains how the lack of income and ability to give gifts has prevented her from visiting family even when she was near family homes:

To visit my friends or relatives, I need to buy at least a kilo of candy. I keep saying that I might lose my relatives soon because of that, because I can’t visit them with empty hands. Especially, when 5-6 people live in the same settlement. It’s better not to visit any of them. I haven’t seen some of them in months because to visit them, I need to buy them at least a kilo of sweets. For some reason, it makes me feel ashamed… The other day, I was in [an IDP settlement] visiting my brother’s children and my cousins live there as well. I really wanted to see them too but I was there during New Year’s holidays and I couldn’t visit them without sweets. And so, I didn’t visit them. So, this is what is happening now. We are losing one another.
This quote underscores the importance of gift-giving to Georgian ways of interacting, which presents an obstacle to those without disposable income to use toward such purchases.

6.5.2 Further losses of mental health due to loss of livelihood (condition)

The loss of ability to make a living was strongly linked to subsequent poor mental health. Lali (age 32) spoke about previously making a living selling apples in a market in South Ossetia. Now unable to support herself this way, she discloses that she has ‘given up on everything’:

There, we had boxes full of apples and we used to sell them. Russians and others were buying them. It was our source of income that was helping us move forward and be happy in this life. Now I have given up on everything and I follow the flow of life.

Pervasive worrying was reported in response to financial woes. Tata (age 31) in Shavshvebi relates,

[My father, for example, was worried all the time because we had to pay our gas and electricity bills; he didn’t know how we were going to pay them because he knew there were no jobs, no other sources of income.]

When asked how unemployment affected her mood, Eka (age 27) of Shavshvebi shares,

[We worry a lot about what will happen, and everything runs out together and you have nothing, if only there was some kind of source of income, to have 200 or 100 GEL per month, that would help us somehow to get through… and I’m not saying anything about clothes, we just think how to survive the winter.]

‘Giving up hope’ and problems with ‘nerves’ were commonly cited as issues resulting from money woes. Isidore (age 57) spoke about neurosis which had plagued her since the displacement, implicating lack of income as the cause:

In my [pre-displacement] village I didn’t face any difficulty at all, absolutely. Here we have absolutely no income and this has caused my neurosis. My nerves are so… I don’t know, it has affected everything. […] Now my nerves are so bad, this poverty too… Sometimes my mind doesn’t work because of these nerves.

She goes on to relate that her ‘nerves’ now prevented her from doing the sort of work she did prior to the displacement, which was buying and reselling apples and other produce and goods. This evidences another loss spiral – mental health problems rooted in financial problems only yielded additional barriers to working and addressing financial woes.

Some respondents also spoke of the lack of self-sufficiency they suffered resulting from a lack of livelihood. For instance, Tata (age 31) explains, “Here, we feel helpless. It is like we hang upon the hands of others.”

6.5.3 Further losses of physical health (condition)
In addition to attributing physical health losses due to the object loss of properties in South Ossetia (described in section 6.4.1 above), loss of physical health was also tied to the loss of livelihood and mental health losses. Many women attributed physical health problems to underlying mental health issues, most commonly, to ‘excessive worrying.’ Natalia (age 52) explains this connection in the following:

All these problems and worries have affected our health, of course, and we can’t do anything about it because treatment needs a lot of money. We have health insurance but even if we visit a doctor for a checkup, we will need to buy medications and we can’t afford them. Accordingly, we can’t do anything about it and our health is in God’s hands now.

Interestingly, many women more commonly connected men’s physical health woes as resulting from mental health problems, yet not applying this logic to themselves. Specifically, very often women attributed men’s heart health issues to worry, along with their inability to talk about their worries with others. For instance, Marta (age 39) ascribed her husband’s heart problems to his inability to share his feelings when he ‘feels sad,’ showing a perceived link between the loss of mental health leading to the loss of physical health. She explains,

It’s harder for men because they don’t express themselves and keep things to themselves. [M]y spouse is like this and that is why he has heart problems now, probably. He doesn’t show it. He doesn’t want us to see that he feels sad. I don’t know. So, all this was harder for him.

Several women provided accounts of men having heart problems due to the worry caused by displacement. Ekaterine (age 41) spoke about the toll ‘worrying’ took on her father. She states, “My father is a sick person. He did have some heart problems before but after all that, he became even sicker, he has heart problems due to worrying.”

Physical health woes were tied not only to ‘worrying,’ but also to the loss of livelihood. The connection between physical health deterioration and lack of income was explained in terms of the inability to pay for medication and/or medical procedures. A minority of interviewees mentioned that they had health insurance, but even these opined that the coverage was insufficient to cover medical needs. Discussions of physical ailments formed a large proportion of some interviews, reflecting the immense scale of the problem as experienced by some women. The passage below reveals the linkage between these resource losses:

I have a wart in my eyes and there are some abnormalities too. An eye doctor from Gori Hospital visited us here and he checked me. […] I’m going to tolerate it for as long as I can. But the doctor told me that what I have in my eye could collapse and cover my eye. Now, I’m planning to do it, I’m just waiting for some money. I have all possible problems. I’d lie if I said that there is something positive about my health (Izolda, age 33).
Similar to the discussion on loss of livelihood above (section 6.4.2) women were inclined to describe the link between lack of income and loss of physical health in terms of implications for their children. For instance, several women reported not being able to buy medication for their sick children and grandchildren. Nana (age 44) explains:

> When a child gets sick, you should have money to quickly take him/her to the doctor, buy medications and solve that problem. But this… When I took my grandchild to the doctor, I borrowed 50 GEL. What can I do?

The impact of loss of livelihood on physical health was particularly felt in families where more than one member was regularly sick. Isidore (age 57) in Shavshvebi states,

> Somebody is always sick in our family. This child is very sick. S/he was raised in hospitals. My husband went out the other day and an ambulance brought him back home. He has blood pressure problems. Some days ago, my daughter who lives with me wasn’t feeling well. I was sick too. I was taking medicines for a month. My doctor prescribed me them and told me to take them for two months but I couldn’t […] [b]ecause I couldn’t afford them. They cost 40 GEL.14 and I couldn’t afford them.

Often, women described a pattern of being unable to pay for medical attention or prescriptions, which worsened or perpetuated poor health, and then engaging in work despite health issues in order to attempt to recoup financial loss. For instance, Isidore, who could not afford medications in the passage above, states that she would take any job in order to make money for her family, despite being advised by her doctor not to work. She describes her ‘lack of choice’ in the following: “My doctor didn’t allow me to work, for a year, but if find some job in summer, I will take it. I have no other choice. I will do some hoeing, or tilling, for some time.” This passage shows the resources that some women will invest in order to bring in some much-needed income, including taking on physical work against doctor’s orders. This pattern fits the cycle of resource loss theorized by the ‘loss spiral’ concept. Isidore is unwell (at least partially) because she cannot afford medications, and as she employs resources to offset this loss (finding a job and working), her health will likely continue to degrade since she is already not well enough to work.

### 6.6 Chapter summary

This Chapter drew upon Hobfoll’s COR theory and the corollaries of loss spirals and loss caravans to describe the waves of material and psychosocial losses amongst Georgian IDP women and their families resulting from the trauma of the 2008 war with Russia.

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14 Approximately 25 USD at the time of the interview.
In Figure 9 below, traumatic events which start the process of loss are linked to imply that such events are overlapping; many of the details with regard to separation from loved ones could fit into the displacement category, and so forth. Losses resulting from the traumatic events are categorized into one of three tiers, based on how one loss was described as leading to a subsequent loss. Such connections are indicated by one way arrows. Some relationships between losses were consistent with Hobfoll’s concept of a loss spiral. These relationships are represented by two-way arrows.

War-related traumatic events experienced during the fleeing and in the immediate aftermath of the war (displacement, separation from family members, deaths of loved ones, and food and shelter challenges) were cited as leading to mental health issues such as fear, trouble sleeping, and neurosis. Displacement and the loss of property it entailed led to a series of losses: displacement led to the loss of property as an object loss, leading to the loss of livelihood (energy loss), which lead to the loss of social networks (condition loss), of mental health (condition loss), and physical health (condition loss).

The depiction of traumatic events and subsequent losses in Figure 9 represents a simplified account of the hardships faced by the women in the sample. The placement of a box in a particular tier does not mean that its effects are contained or limited in a chronological sense. The Figure is not intended to imply that a strict chronology between losses exists. For instance, the mental health losses under ‘initial losses’ depicted as resulting from traumatic events are still felt and reported alongside the ‘losses due to displacement’ and ‘sustained losses due to previous losses.’ In other words, mental health losses due to the initial traumatic events of war do not ‘end’ when the losses due to displacement begin. The Figure is meant to illustrate the connections between traumatic events and subsequent losses in an order which relates to how much
Figure 9: Visual representation of resource losses resulting from war and displacement

- Traumatic events
- Initial losses
  - Loss of property (object)
  - Loss of livelihood (energy)
- Losses due displacement
  - Loss of physical health (condition)
  - Loss of mental health (condition)
  - Loss of social network (condition)
- Sustained losses due to previous losses
  - Loss of physical health (condition)
- Displacement
- Separation from and deaths of loved ones
- Food and shelter challenges
- Loss of mental health (condition)
of the sample told their story of the 2008 war and its continued affects. The Figure is also intended to demonstrate that similar types of losses may stem from several different sources. This point is best exemplified by mental health losses. Though much literature focuses on mental health losses felt as a result of traumatic events of war, the mental health losses resulting from the loss of property and livelihood are just as salient for this sample. This cascade of losses is consistent with the concept of a resource caravan; the loss of an important resource (property) had a comprehensive, multilevel impact on other resources (livelihood, social networks, and physical and mental health). The losses of livelihood and physical and mental health are interrelated and form a loss spiral. Loss of livelihood led to a decrease in physical health due to the inability to afford medical care and mediations. Poor physical health was also viewed as caused by poor mental health, with ‘worrying too much’ commonly perceived as the cause of health problems. The inability to make a living also impacted on mental health. For instance, constant worrying about financial problems, or ‘giving up’ on trying to address money issues were commonly reported.

In the next Chapter, I draw upon a coping taxonomy suggested by Skinner et al. (2003) in order to interpret the myriad of strategies the respondents turned to in order to address the losses outlined in the present Chapter.
Chapter 7: Results on coping strategies used by internally displaced women in Georgia

In Chapter 6, I drew upon Hobfoll’s COR theory and the corollaries of loss spirals and loss caravans to describe the waves of material and psychosocial losses suffered by Georgian IDP women and their families as a result of the trauma and displacement due to the war with Russia. This Chapter positions coping strategies as a response to this pattern of losses. I draw upon a coping typology proposed by Skinner et al. (2003) to guide analysis and interpretation of interview data pertaining to coping. This Chapter addresses the third key research objective (see section 2.6) to explore the coping strategies used by internally displaced women in Georgia.

The COR theory predicts that when confronted with stress, people strive to minimize the loss of resources (Hobfoll, 1989). However, Hobfoll (1989)’s theory is relatively underdeveloped in exactly how people strive to conserve or gain resources. He proposes two main ways in which people do this: (1) shifting the focus of attention, and (2) re-evaluating resources. The former involves reinterpreting the threat as a challenge. People may focus on what they might gain in a challenging situation, rather than on what they might lose. The latter involves re-evaluating the value of a resource which is threatened or has been lost. For instance, the stress of job loss may be offset by diminishing the value placed upon that job. An individual could cope by rationalizing that the job was not a good fit with their ultimate career goals, for instance, and may be re-evaluated as a ‘blessing in disguise.’ However, for the purposes of this thesis, it was felt this model was insufficient to interpret the wide array of behaviours and cognitive coping strategies reported across the sample. For instance, Hobfoll’s typology does not account for coping strategies which directly challenge the stressor, for instance, being frugal with money in order to offset financial difficulties. The task attempted in this Chapter required a framework which could assist in the categorization of specific coping responses; in other words, of what was happening ‘on the ground’ during coping episodes.

The typology of coping strategies observed by Skinner et al. (2003) are used as a framework for analysing the coping strategies used by the women in this study. The typology used by Skinner et al. (2003) is based on an extensive analysis on the most
widely-supported coping types used in the coping literature (see Chapter 2 section 2.4.4). This framework was applied to the compendium of coping strategies reported by the sample. The core coping strategies include: problem solving, support seeking, escape-avoidance, distraction, and positive cognitive restructuring.

7.1 Description of coping strategies

The following section describes the different coping categories which will be used in the remainder of the Chapter to organize coping strategies reported by the sample. This coping taxonomy meets criteria set out by Skinner et al. (2003) sought to fulfill the following criteria in the development of this taxonomy: mutually exclusive and exhaustive categories, and conceptually clear definitions of categories.

7.1.1 Problem solving

Problem solving, as a coping type, has appeared in virtually all coping taxonomies since Folkman and Lazarus (1980)’s foundational work which distinguished between emotion- and problem-focused coping. Specific instances of problem solving include instrumental action and/or coming up with a strategy regarding a problem. Problem solving approaches feature planning, logical analysis of a problem, effort, persistence, and determination.

7.1.2 Support seeking

Seeking social support was present in 88 out of the approximately 100 assessment of coping reviewed by Skinner et al. (2003). A wide range of ‘targets’ for support is reported across the literature, including family, friends, professionals, and religious figures. Goals motivating seeking social support include receiving comfort, advice on problems, and/or instrumental help such as money or goods. The goal can be related to a specific problem, or to solicit emotional support from others. ‘Seeking social support’ is different to the general concept of ‘social support.’ Seeking social support, as a coping strategy, involves reaching out to possible resources of social support from a variety of ‘targets’ listed above.

7.1.3 Escape-avoidance
Avoidance and/or escape includes efforts to stay away (physically and/or mentally) from a stressful situation. It appears in just over half of the taxonomies reviewed by Skinner et al. (2003). Examples include cognitive avoidance (avoid thinking about a problem), taking actions to avoid a potential stressful situation, denying that a stressor exists, and engaging in wishful thinking. To these items, I add instances of helplessness (relinquishing control over events) and social withdrawal (staying away from others, or preventing others from knowing about a stressful situation or its effects). Helplessness includes passivity, confusion, cognitive exhaustion, dejection, and pessimism. Social withdrawal includes isolating oneself physical and/or emotionally from others. Although helplessness and social withdrawal are sometimes considered to be coping categories in their own right, I consider these to be part of the escape-avoidance category because they are related to the concept of passivity which is a feature of other items in the escape-avoidance category. Moreover, these items have variously been assigned to escape-avoidance domains in other scales (see Connor-Smith et al., 2000).

7.1.4 Distraction

Although related to escape-avoidance, distraction was found to be a distinct category of coping according to two analyses (Ayers et al., 1996; Connor-Smith et al., 2000). Moreover, a distinct distraction category was present in over 40 coping taxonomies reviewed by Skinner et al. (2003). Quite simply, distraction refers to attempting to deal with a stressful situation by engaging in an alternative pleasurable activity. Examples include hobbies, exercising, watching TV, and reading. Skinner et al. (2003) also lists ‘visiting friends’ as a type of distraction. As ‘visiting friends’ could also be considered support seeking (visiting friends to get advice or emotional support), the following analysis attempts to distinguish the reason behind such visits, as indicated by the women.

7.1.5 Cognitive restructuring

Cognitive restructuring refers to attempts to change one’s perspective of a stressful situation in order to see it in a more positive light. Examples include focusing on positive aspects of one’s life as opposed to negative, having an optimistic viewpoint, and/or downplaying levels of distress. Though Skinner et al. (2003) strove to propose mutually exclusive coping categories, a degree of overlap was the result when the typology was applied to the coping strategies reported by this sample.
7.2 Findings

7.2.1 Problem solving

Coping strategies which fit into the problem solving domain included seeking employment and working, budgeting, and seeking alternative sources of income.

7.2.1.1 Seeking employment and working

Many women reported taking any and all jobs that they could in order to cope with the financial losses described in Chapter 6. Despite the problems with garden allotments discussed in that Chapter, many managed to sell at least some fruit and vegetables at markets to provide much-needed income. Besides this work activity, many worked occasionally at temporary agricultural jobs involving heavy manual labour in fields and gardens. Marina (age 26) shares,

In general, people living in our settlement are unemployed and the population of the [village of Skra next to Skra IDP settlement] hires them sometimes. They have cherry gardens and they call people from our settlement when they need to harvest them. Usually women do it. There are some seasonal jobs in the village sometimes and women from our settlement take them.

Such short-term agricultural jobs were widely viewed as being appropriate for women, not men. For instance, Izolda (age 33) shared that she had taken a job harvesting garlic last summer, while her husband stayed at home: “Mostly he is at home because these jobs are for women and there is nothing to do for men.” Eteri’s comment below also illustrates that women, rather than men, often took on such work:

There was a farm in [name of village] and we used to work there. Mostly women. Well, men worked there too but still… We used to hoe, pull weeds in gardens; work from the morning until the evening, in the sun and heat… I have vein problems and it wasn’t easy for me to pull weeds all day but I had no other choice (age 42).

Ana (age 37) reported taking on gardening jobs in cold conditions for the benefit for her children. She recounts a job she had taken on last winter: “I didn’t even care about freezing cold […] we would go out and be from morning till evening in that garden in that freezing weather, and I endured the unendurable only because of my children.”

Women shared that men sometimes took on agricultural jobs, engaged in animal husbandry such as rabbit farming, and worked as soldiers in the Georgian army.

Women reported that collecting wages for informal, short-term agricultural work was sometimes challenging. For instance, Isidore, who was beset with health problems she
could not afford to treat (see Chapter 6), reported that she was owed a total of 325 GEL\textsuperscript{15} from three completed agricultural jobs. Similarly, Izolda and her husband were owed 500 GEL\textsuperscript{16} from temporary farming work. Unfortunately, they appeared to have little recourse to recover the earnings.

Besides agricultural jobs, some women were able to find employment at the NGOs to which they had formerly turned for help. Though Marina was unemployed at the time of the interview, she had previously worked for three different NGOs in various capacities, including as a computer instructor and then as a community coordinator. Guranda was previously employed at the community centre where she had earlier benefitted from various programs, and Sofiko was employed with a women’s rights NGO at the time of the interview.

Natalia, who worked as a maths and physics teacher prior to displacement, was working as a kindergarten teacher at the time of the interview. Wages were very low, at 70 GEL\textsuperscript{17} a month. Some women admitted that they had given up trying to find the sort of job they had before being displaced. Marta (age 39), also a former teacher, cites nepotism as an insurmountable obstacle in finding future work as a teacher. She explains:

\begin{quote}
We’ve given up on the idea of finding a job. It’s always been like this – you should know someone, who knows someone, who will hire you. [M]y “someones” are all IDPs. Accordingly, I’ve given up on the idea of working professionally as a teacher ever again.
\end{quote}

Khatia (age 50) too cites nepotism as an endemic problem in attaining employment:

\begin{quote}
“Some of [my neighbours] have jobs. They knew someone and they were hired. As usual, someone called someone…We had no contacts, however.”
\end{quote}

7.2.1.1.1 Attending trainings

Quite frequently women reported that they attended various training sessions in order to improve their job prospects. Lali (age 32) is one such woman, and states the following:

\begin{quote}
“I’ve […] attended sewing training because I thought that it would give me the opportunity to get a job. I’ve attended every possible training.”
\end{quote}

Vardo mentioned that she had received a grant to open a small sewing business after attended training sessions.

\textsuperscript{15} Equal to almost 200 USD at the time of the interview.
\textsuperscript{16} Equal to approximately 300 USD at the time of the interview.
\textsuperscript{17} Equal to just over 40 USD at the time of the interview.
However, her sewing machine broke and she was forced to close the business. Despite this, Vardo valued the training received and recognized that she would not have had the opportunity to receive such training in her village of origin. Makvala also mentioned several training options, which were not being offered currently but she thought would be offered in the springtime. She mentioned that dressmaking, culinary courses, and other training courses were sometimes on offer. Sofiko (age 23), also attended numerous training sessions. She shares,

I’ve developed my skills. I became more self-confident and I was trying to attend every training course in my free time. […] There was also a technical school for IDPs, I’ve attended culinary courses there and after I finished the course, I undertook an internship at First Social Enterprise specializing in waste management. After the internship, they decided to hire me as cook’s assistant.

Other training sessions introduced new agricultural methods to settlement residents. Vardo (age 39) elaborates on this point:

[T]hey teach us garden and livestock farming using new methods and it helps us, for example, harvest more in less time. […] Non-conventional irrigation systems, for example, they teach us how to build irrigation systems when there isn’t enough water. One needs money to build these systems, of course… So, we’ve learned a lot in this respect.

Some women, such as Tamar and Nutsa, had attended many training sessions but felt they were unable to benefit from the knowledge gained. They had attended training on how to write a business plan, as well as culinary, sewing, and jewellery-making classes. Nutsa states, “I’ve received knowledge, but I’m not able to use it.” Some women expressed frustration at not being able to use the knowledge gained at training sessions due to the lack of job opportunities, or at being trained for tasks at which they were already proficient. For instance, Lali (age 32) shares, “They were holding trainings in the club here. But we haven’t used that knowledge anywhere. I didn’t need to learn sewing, because I already knew it.” Similarly, Nanuli attended training sessions on rabbit farming, but she knew about it already since they had rabbits in their origin village too.

Sometimes the opportunities coming from training sessions required an investment from the attendant women in order to start a small business. This was the case regarding a sewing training session. Lali initially hoped that attendees would be given a small factory in which to start a sewing salon. However, it was up to the women to invest in the business, which was not an option for those attending due to their poverty. Lali, whose
family of four receives 102 GEL per month from social aid, asks rhetorically, “How could I give them 100 GEL to open a factory when I get 102 GEL?”

Though the IDP settlements hosted frequent training sessions immediately after the war, some respondents lamented that there had been a dramatic decrease in training sessions offered since then. Sofiko (age 23) opines, “I’d be very good if they hold them again. Unfortunately, there are no training courses anymore.” Marina (age 26) concurs, stating:

I used to attend trainings. I haven’t skipped any of them. I have attended every training I was invited to and I really miss that life. [...] Now, NGOs aren’t as active as they used to be. They no longer visit settlements and my life too isn’t as active as it once was.

7.2.1.2 Budgeting

Beyond seeking employment, women reported a wide variety of budgeting techniques to cope with the loss of livelihood discussed in Chapter 6. As the loss of livelihood the most pressing loss identified by the women, their coping strategies are detailed at length below. Women report being very careful with every expenditure in order to not waste any money. Lali (age 32) and her husband budgeted their social aid carefully in order to make the money go as far as possible. She describes,

We receive 102 GEL and it’s nothing but I like when we sit down together in the evening and discuss how to distribute this money. We sometimes buy things from the wholesale market to spend less money; buy something that cost 1.70 GEL for 1.60 GEL because I want to buy something else for my kids.

7.2.1.2.1 Gardening as problem solving

The most commonly-reported coping strategy pertaining to budgeting was the reliance on home-grown food in order to avoid buying food. This proved to be a very robust theme, with virtually all women mentioning that they grow their own food as a coping strategy against financial woes. Though the quality of the soil and irrigation opportunities were viewed as far from ideal (as discussed in Chapter 6), many women cited the opportunity to grow food (most commonly fruits, vegetables, nuts, and grains) on their allotments as fundamental in supporting their families’ food needs, freeing up scarce monetary resources to be allocated elsewhere. Natia (age 53) reflects, “Thank God, we have these small land lots to grow our vegetables. So, we don’t have to buy them. It could have been worse.” Some respondents, such as Tsisana (age 28), reported that their food intake was

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18 Equivalent to approximately 60 USD at the time of the interview.
limited to what they could grow: “We eat what we grow. We can’t really afford food. Social aid is our only income. How many things can we possibly buy with it? We need flour, hygienic items.” Vardo (age 39) explains how growing vegetables helps her cope with financial difficulties:

[W]e try to avoid buying things. We grow all possible vegetables and other things. If, for some reason, we don’t manage to grow them, we wouldn’t be able to buy them and that would become a problem. [...] This is how we cope [...] [I]f you work hard and take care of your plants, everything will grow perfectly. We grow all possible vegetables and we don’t have to buy them. We buy only fruits but it’s only because our trees haven’t produced crops yet.

Vardo further explained that she was able to buy flour, sugar, salt, and pasta by generating income by selling food that she does have, like the onions and watermelons which she grows. Such sentiments were also expressed by Nutsa and Tatiana. Marta (age 39) in Karaleti also opined that working hard in the garden ‘paid off:’ “I don’t know how other people feel but I’m satisfied. If you work hard in your gardens, you will reap a good harvest and it will help you survive. When you plant 2 kilos of onions and reap 6 boxes, it isn’t bad, don’t you think?”

In addition to relying on fresh fruits and vegetables in the summer months, women also engaged in canning fruits and vegetables in order to extend the beneficial impact of the gardens into the winter months. For instance, Eka stated that she harvests enough from her garden to get her family through the winter. Similarly, Makvala, Rusiko, and Ketevan, all widows in their seventies, were almost entirely self-sufficient year-round when it came to food. In fact, Ketevan even had excess food to share with her extended family over the winter. Despite these successes, the majority of women were unable to yield enough of a harvest to provide for their family’s food needs year-round. Marina stated that due to the small size of the allotments, food sources did not last year-round which forced them to buy food in the months before the harvest each year.

Though less common than gardening initiatives, some women also engaged in animal husbandry in order to avoid buying products such as eggs, meat, and dairy items. Nana (age 44) reflects on the impact her cow on her well-being: “It helps me a bit. Otherwise, we would be in a very miserable situation.” Many women aspired to own animals such as cows and chickens, but not all could afford to buy or feed these animals, or raise them in the limited space in the settlements.
In addition to growing as much of the family’s food as possible, women took an economical stance toward meeting all basic needs. For instance, they commonly reported preparing inexpensive meals with their home-grown food in order to make food sources last. Lali (age 32) describes the food she prepares for her children:

We mostly eat soups and this the only way out of the situation, in my opinion. What else can I do when we don’t have any other choice? I make soups, when I have some cabbage, or Borscht, or something other. They often drink tea with bread only. I really can’t afford butter.

‘Making-do’ with the food available, and cutting out luxury items such as butter and meat were commonly reported by the sample as ways to cope with financial constraints.

Making frugal decisions about heating and electricity were also commonly reported. For instance, women reported using wood to heat their homes rather than gas stoves, to save on fuel costs. However, this technique relied on having money to buy wood upfront, rather than using gas and having the option of paying for it later. Some were able to gather their own firewood, not an easy task due to the physical strength needed to chop trees down and split them into smaller pieces, and to the widespread lack of means to transport large volumes of wood.

Finally, women cited repairing clothing in order to make items last, thereby avoiding the purchase of new clothing. For instance, Lali (age 32) had fixed her son’s boot at home in order to avoid buying a new pair, thus coping with financial constraints. She recounts, “[T]here was a hole on the back of the red felt boots my mother brought a long, long time ago. […] So, I heated up the point of a knife, I swear, and I repaired them not to let water go in.” Rusiko reported that she bought used clothing rather than new in order to save money. Other women reported receiving clothing from family members and/or neighbours who had outgrown the clothing, and taking advantage of charities which distributed donated clothing.
Besides budgeting and seeking employment, women coped with financial losses by seeking alternative sources of income. Though most women had left their valuables in their home villages (see Chapter 6), some had managed to take jewellery with them and reported pawning these items to obtain much-needed income. Unfortunately, pawning such items in return for loans only perpetuated financial woes, due to interest payments. Eka had pawned some rings, resulting in 40 GEL monthly interest charges. Considering that social aid for a family of 4 amounts to 102 GEL, this interest charge is a significant proportion of the family income. Izolda (age 33) was in a similar situation: “I pawned all gold that I had and I pay interest with my social aid money, with the rest I have to buy food for my children and live from month to month.”

Some women reported that they borrowed money from others in order to cope with a lack of income, in the hope that they would be able to pay it back once they had money. For instance, Ana had borrowed money from a neighbour in order for her daughter to attend dance lessons, expecting to be able to pay it back once she was paid for short-term agricultural work she had completed months earlier. Irina, who occasionally received financial support from an employed granddaughter, had borrowed money in order to attend her grandson’s wedding. Izolda was friends with someone who owned a shop in a nearby city, and was able to take goods on credit and pay for them later.

7.2.2 Support seeking

Besides actively trying to solve problems mitigating income shortfalls, women often sought support from friends, family, neighbours, priests, and teachers in order to cope with problems and losses outlined in Chapter 6. Consistent with the definition of support seeking described in the introductory section of this Chapter, I did not discriminate between the reasons motivating support-seeking behaviour. Women reported turning to others for advice on specific problems and for instrumental help (such as money or goods). Others, such as Eteri, shared sorrow and ‘heartache’ with others in order to gain emotional support. In particular, neighbours and family members were most-commonly cited as sources for support.

7.2.2.1 Neighbours
‘Turning to neighbours’ for emotional and instrumental support was one of the most common coping strategies mentioned by the women. Some spoke of the specific beneficial impact of pre-displacement neighbours who had settled alongside them in the IDP settlement, while others did not differentiate between ‘old’ and ‘new’ neighbours in their settlement.

7.2.2.1.1 Pre-displacement neighbours

The value of close proximity to pre-displacement neighbours was quite a salient theme in the coping responses. The quotes below emphasize the emotional support imparted through these established relationships. Instrumental support, in the form of money, assistance on tasks, and goods, was not commonly mentioned with reference to pre-displacement neighbours.

Natalia (age 52) explains how she draws strength from the presence of previous neighbours, who were settled in the same IDP settlement as she:

Well, we all are IDPs and we used to support one another emotionally. Besides physical help, we used to help each other with other things too as well as support one another emotionally. […] In short, we helped one another cope with the displacement. My brother-in-law’s wife lives here too, so do most of my old neighbours […] Families living in these 3 rows, we are from the same gorge. The next row is from a different village. So, old neighbours live in one row here. The fact that we used to support one another emotionally helped us a lot and we managed to cope with the displacement more or less.

Tatiana (age 48) felt that the level of understanding was greater between old rather than new neighbours. She explains, “we share our problems and it helps us a bit. […] The grief would tear our hearts open, if we weren’t able to share our problems.” Irma (age 56) also drew strength from the fact that so many of her former neighbours lived in Karaleti settlement. She says,

Some of them are my friends and relatives… I even share my last name with some of them. Well, my spouse’s last name. […] We help and support one another. It’s one of the good things about living here. […] We were friends in the village and we still are […] Whenever we are out, we feel that we are surrounded by ‘our’ people. Every person is good, of course, we all are from the same gorge but seeing people from our village every day makes us stronger. We know that we are not alone and we support each other.

Eliso had sought to strengthen relationships with previous neighbours since becoming displaced. She relates,

I have a warmer, a very warm, relationship with them now. We used to greet one another and everything in the village but here, when we see someone we haven’t seen in a long time, we greet one another more warmly of course. In the village, we could just greet one another and walk by but here, it’s different. We hug them and want to be closer.
She noted that these ties had grown stronger due to the common trauma they had been through, which led to a common realization that loving each other was important. She elaborates:

Probably, because after what we’ve been through we started to appreciate what we had there and realize that we lost it and nothing is more valuable than… Love is the most important thing in life. Loving one another. Well, it always was but now we started to appreciate things. The war made us realize that everything is transient.

Living in proximity to old neighbours imparted feelings of security and stability, through realization that old neighbours had survived the war and communities, though displaced, were largely intact. Guranda reflects on the importance of having old friends and neighbours in close geographic proximity in helping her community to cope. She states,

The fact that they live together, they see that they of them is alive, they all recall their stories together and help one other, helps them overcome their difficulties. And sometimes I think that the only we lost is our territory, we don’t live in the place where we used to live. As for the rest, I would not say that we’re living in a foreign environment because the same people are living here and it’s very important to me. So, we continued to live our lives normally, with our hearts full of hope.

Marta concurs, stating

Everyone in this neighbourhood is my old neighbour and colleague from the village. […] My spouse’s uncle lives here as well. So, almost everyone here is an old friend of mine. So, that helped us realize that we weren’t alone in this situation as well as cope with the displacement. We used to support one another; tell one another that thousands of people were in the same situation, that we should thank God for being alive and healthy.

7.2.2.1.2 New neighbours

Though many women drew emotional strength from the presence of previous neighbours from the village, they also appreciated and sought support from new neighbours. Such support took the form of emotional (comforting one another, empathetic listening, giving and receiving advice) and instrumental (goods and assistance on tasks) support.

Women shared many instances of helping neighbours, or receiving help from them. For instance, residents in Shavshvebi settlement helped Irina cultivate her garden, build a chicken coop, and pay for her son’s funeral. Ana’s neighbour once had a surplus of hay, which he gave to Ana to feed her cow. Lali’s neighbours regularly gave her animal bones to make soup stock. Women sometimes minded each other’s children to allow mothers to concentrate on other tasks. Vardo (age 39) describes how her neighbours cope by helping each other with laborious tasks:

We used to support each other. I’ll give you a little example. In spring, we need tools. Others provided them for us. Well, they were a bit unfit but still. So, neighbours helped us with tools and
moreover, they offered us their help. We used to help each other. No one has tilled the ground here in 20 years and one-pass tillage wasn’t enough. The soil requires two-three years of work to get it into shape, so to speak. My spouse and I worked there alone and it was hard. Our neighbours offered us help. Later, we helped them.

Very few women reported borrowing money from neighbours. They felt that this would be a step too far, since poverty was so widespread in the settlements. For instance, Lali (age 32) states, “Even if I ask my neighbours, I don’t think they would be able to help me. None of my neighbours lives in luxury; they can’t help me because they all have their own problems.” In a similar vein, Tatiana (age 48) states “We plant things and try do everything by ourselves because we understand that we can’t always ask others for help. Everyone has their own problems in their lives and life is hard for everyone.”

Though they could not turn to each other for money problems, the respondents felt that neighbours represented a rich resource which could provide emotional support. Nutsa explains that the formation of relationships between neighbours in Shavshvebi had been key to helping the community cope with the displacement. She states, “By taking care, supporting each other we have managed, and still manage to overcome these terrible times.” Latavri (age 73) also reported reaching out to neighbours, stating “We help one another with everything we can. When someone needs something. If we don’t help one another, how are we going to overcome this disaster?” Natalia (age 52) explains that she visits her neighbours when she feels sad. She states, “Whenever I feel sad, I visit my neighbours. We support and share our problems with each other.”

Nestan recounted that in the early days of the displacement, she reached out to her new neighbours in Shavshvebi by inviting them over for coffee. She felt that the neighbourhood became more generous and friendly as a result. Nutsa and Tamar had met Nestan in the settlement, and had since grown close with her. Nutsa states, “Personally to me she is a very good neighbour. If she has something, even not much, she shares it with my children. In every way that she can […] [S]ometimes she shares the last thing from her house. She is that kind of person.” Tamriko (age 47) too had made new friends, one of whom was present for at least part of her interview. She shares, “This woman and I have a very good relationship despite the fact that people from my village live here as well. She’s from another village. I met her here after we moved here.” Jana (age 35) explains how she built new relationships among new neighbours:
First we got to know each other. After that, we shared information about our past and hardship made us closer to each other. […] I made a lot of friends here. There were neighbouring villages, where I did not know people, but I got to know them here after displacement. We collaborate now. We often get together and share our thoughts and worries with one another.

Maia (age 39) also reported forming strong bonds with new neighbours. She states, “I met them here and we liked each other immediately. My neighbours are really good. We often say that we can live here forever together and have a good, sweet relationship.”

Sopio (age 40) shared that in Skra settlement, a group of women took turns making coffee for the group, providing an opportunity to get together and give and receive emotional support. She describes,

[When someone makes coffee, all six of us, neighbours, gather there; in the morning, for example. In the afternoon, someone else makes coffee and we gather there. Then, the third one makes coffee. On the next day, the fourth and fifth ones make coffee and so on. […] We share our problems, pain, and worries, and support each other. We do get moral support.]

Women sought emotional support for the hardships related to displacement, and also for interpersonal problems. Ivdity (age 23) reported turning to her neighbours after fighting with her husband. She states, “Well, we visit our neighbours when we want to get over something. […] When I fight with my husband, for example. Sometimes, I go out, visit someone and share my problems with them over a cup of coffee. It makes me feel better a bit.” Nino (age 37) concurred, stating “Sometimes when I leave the house with a nervous breakdown and see neighbours and talk with them on some other issues, I calm down. […] I have good neighbours. There were instances, when they calmed me down.”

Some women were reluctant to share problems with neighbours. For instance, Ekaterine (age 41) stated that she preferred to turn to persons other than neighbours for help, due to a fear that they might ‘make fun’ of her for having financial troubles. She offers the following opinion of neighbours:

[S]ome of them can judge you, some of them not. There are so many people in need here. Some people help them, while others make fun of them. In our village too, there were people who could make fun of the poor and probably, this kind of people live here too. So, some can make fun of you, while others can protect you.

7.2.2.2 Family

Along with neighbours, family represented a resource to which women could turn for help. Some women preferred turning to family rather than to neighbours, including Elene (age 27). She explains: “When I have a problem, I won’t share it with my neighbours. I
would probably call my mother, my brother or my sister-in-law. [...] So, when I have a problem, they help me. My brother is a contract soldier and he helps me when I need something.” Sopio (age 40) also preferred to share her problems with family members rather than with neighbours, due to a suspicion that neighbours might betray her confidence. She states, “They might also tell others about my problems, behind my back. Share this news with others.”

Natalia reports seeking and receiving social support from her adult son and husband, both ‘optimists’ in her view:

“I’m a pessimist. My spouse is an optimist. My son is an optimist too. I tell him he’s my therapist because they help me overcome many things. Especially my son. He is very helpful. I often ask him for advice; I always want to know his opinion about things. He’s my son but talking with him calms me down. [...] Despite everything, I’m still pessimistic about things, and I often feel depressed. And whenever I feel depressed, my spouse and son help me feel better.

Lia (age 38) describes how her husband provides support for her, and vice versa, in the following:

[My] spouse is an artisan and when he is without a job, for example, it drives him to despair. I’m always trying to cheer him up by telling him that it’s not a problem, that we’ll find something and that God won’t forget about us. Whenever I’m going through hard times, he is trying to cheer me up.

Similarly, Lali (age 32) shared an instance wherein she supported her husband emotionally after he was fired from a job:

I told him not to worry because we have this social aid, that we weren’t left without anything at all, I told him that he would go out, find another job. This is how I support him. I calm him down [...] I need to discuss my problems with my spouse because I need his support and he needs mine. Well, I’m a woman and maybe I can’t support him as much as he can support me. With his support, I manage to solve and achieve everything. This is what I do.

Nana (age 44) as well describes how she and her husband comfort each other during challenging situations: “When things don’t work out, it gets on his nerves. So, sometimes I try to reassure him.”

Beyond emotional support, women sought instrumental support from family members, especially extended family members who were not as negatively affected by the 2008 war. One of Lali’s relatives gave her a new stove which they were going to discard. She recounts, “One of our relatives bought a new stove and s/he gave us this little one, s/he wanted to throw it away but I took it because I didn’t have it and I couldn’t pay my gas bill.” An extended family member had bought a phone for Isidore (age 57) as a gift, which
facilitated frequent contact with family members. She also asked for and received money from a family member in order to pay her electricity bill. She recounts,

I dared to ask. This person was visiting me, I told him/her how worried I felt because I didn’t have electricity and that they had penalized me because they had to cut it off. This person then gifted me money and we paid our electricity bill.

Izolda’s parents, who had returned to their home near the buffer zone between South Ossetia and Georgia, assisted Izolda by giving her food and seeds. Similarly, Elisabed’s grandparents had helped her family by providing basic foodstuffs such as flour and sugar, freeing Elisabed to purchase school supplies for her children.

Children proved to be an extremely strong resource for respondents, in terms of motivation for carrying on and adding meaning to life. Relationships with cherished family members were sometimes held up as the only thing worth living for, or the only worthwhile thing left in life. For instance, Irina, a 71-year-old widow in Shavshvebi, pondered, “What’s the point of my life now? My girl is the only thing keeping me alive.” Natia (age 53) also felt strongly that her children gave her the will to carry on. She explains, “I cope with and get used to everything because I can look at my children here. Thank God, we survived and we are together. It helps me overcome a lot.” Elisabed (age 28) puts it even more strongly “After the war, I felt so bad, I felt empty. My only reason for being alive was my kids.” Nanuli (age 71) also drew strength from her family. She states, “These kids are my only joys in this life. These kids and my daughter-in-law. I’m thankful to her.” Izolda (age 33) as well placed much emphasis on her children in helping her face her challenges:

[M]y children are next to me, they grow up and it makes me feel better. […] It’s good to see your children grow. […] Despite the fact that we lost everything, watching my children grow gives me hope that everything will be alright. […] When you see your children grow and they have everything ahead… Future for me is my healthy children by my side.

At the time of the interview, Makvala’s son and new daughter-in-law were planning on coming to Skra settlement to live with her. She comments, “My daughter-in-law gave birth and they will come here to live. I have a very good daughter-in-law, she’s as pretty as you, she’s beautiful, good, conscious girl. She’s a pure person. I’m very thankful for her.” Nana (age 44) reported a close relationship between her, her daughter, and her granddaughter. She shares,

I’ve also helped my daughter raise her kid. When they are here for 2 months and I get used to them, I always cry when they depart. […] They were here for the New Year. Even when we talk on a phone and she tells me ‘Granma, come here and take me with you’, it makes my heart tremble.
Marta (age 39) was highly focused on her children’s opportunities and providing them with the best possible start in life. She stated,

I prefer to buy things for my kids because they go out more often, it makes them happier. I don’t think that anything can make me happy anymore. […] I live my life for my kids and I want my children to have a better future.

7.2.2.3 Friends, co-workers, and priests

Though family and neighbours represented the largest targets from which women sought support, they also turned to friends beyond their settlements, co-workers, and to priests. For instance, Marina (age 26) had created an extensive support network beyond the settlement: “Today, I have many friends, who work at the Ministry, local government, NGOs and they help me a lot when I need something. I can freely ask them for help.”

Eliso was from the city of Gori originally, which meant that she had an already-existing network of friends prior to settling in Karaleti settlement (located on the outskirts of Gori). She reflects on how this network helped her cope:

I have many friends in both Gori and this region because I was raised here and… Well, I think that they helped me cope with this everything. They help me, they understand what I feel, and they try to calm me down… Often, I don’t even want to leave home but they keep inviting me and it helps me not to think about many things. […] It’s important to have friends who support you.

Perhaps because the sample included so few employed women, only a few stated that they sought support from co-workers. Guranda (age 28), who was employed as a school administrator, had been through some job instability at her institution a short time before her interview. She describes the support she received from her co-workers:

Recently I had some problems at work, many employees were laid off. We had to pass skill tests and attend an interview with a psychologist. I received high grades. I was contract work and I couldn’t have lost my job too. I remember that all my colleagues were supporting me. They were encouraging me: “You won’t leave, you don’t have to be afraid, you won’t lose your job.” They were optimistic and it was very important for me that they expressed their love for me and supported me. But everything was held justly and everything was fair and so, now I feel that I deserve my job and that makes me happy.

Some of the more religious women in the sample reported seeking support from priests in order to cope. For instance, Sopio (age 40), who normally concealed her problems from neighbours and most family members, mentioned that she was able to confide in and gain support from her priest. She states, “I can see our priest, for example, and share all my problems with him. It makes me feel better. It makes me feel free, so to speak.” Sofiko (age 23) as well reported seeking and receiving support from her priest. “I didn’t go to church before but church has helped me a lot. My priest has helped me. He used to support
me and cheer me up.” Vardo reported that priests sometimes provided the settlement with instrumental help. She recalled an instance when a local priest came to Karaleti and distributed boxes of second-hand clothing.

7.2.3 Escape-avoidance

The most commonly-reported types of escape-avoidance were resignation, physical and emotional isolation, physical escape, crying, and wishful thinking. There is considerable overlap between these categories. For instance, comments about isolation were sometimes intermingled with comments about ‘giving up.’

7.2.3.1 Giving up/resignation

There were several instances in the transcripts where a woman reports that she has coped with a challenge by admitting defeat; by conceding that the hardship cannot be overcome. For instance, Lali (age 32) spoke specifically about the loss of her livelihood, which pre-displacement had consisted of growing and selling apples. Now, realizing that this way of life was over, she simply ‘followed the flow of life:’

There, we had boxes full of apples and we used to sell them. Russians and others were buying them. It was our source of income that was helping us move forward and be happy in this life. Now I have given up on everything and I follow the flow of life.

Makvala (age 70) speculated that all IDPs had ‘given up hope:’

When your heart is broken, you don’t want to live anymore. 86 families live here and I am sure that all of them wish to die soon. I visit my neighbours and I know that they all think this way. Nobody thinks that they will do this or that in the future, or have a better life. Because of what we’ve been through, we have given up.

Though Maklava’s statement is quite dramatic, it does resound in other women’s comments. For instance, Nana as well stated that sometimes she wanted to “die and find rest” rather than face problems.

Some women had relinquished control over decision-making, having given up that they could make decisions which would benefit their families. Natalia (age 52) states, for instance, “My spouse is able to solve any problem easily. Probably, it’s because he’s an optimist. It’s harder for me. So, I trust my spouse and I let him take the lead.” Similarly, Marta (age 39) shares,

I’ve never been strong. I let others decide. I was angry the other day and I was complaining to [a friend] and she told me: “Look at you, you are such a big woman and you can’t even confront anyone.” I can’t. I’m not that strong. I’m not a fighter either. […] When someone tells me not to do something, I just say ‘alright’. I’m very complaisant. I know it’s bad. You should live by your
own principles. Well, not that I will let anyone exploit me, but still. I listen to my family, my parents, and even to my kids, by the way.

Marta revealed that she felt ‘hopeless,’ due to external factors beyond her control which had negatively influenced her life path. After reflecting on the difficulties she endured during the wars of the early 1990s, during which she and her family were displaced for the first time, she shares:

I’ve been through so much. I want my children to have a better life than I had. I was born at a bad time. The lost decade, plus this war now. I don’t know. Life has passed me by and I haven’t done anything worthwhile in my life. It’s too late to do anything now. And all I can wish for now is to be healthy for the next 20 years. Half of my life is gone. I don’t know. I feel hopeless.

Khatia (age 50) describes a process by which she had concluded that nothing could be done about her problems so she just tries not to think about them. She is resigning herself viewing her problems as insurmountable.

I think that no matter what you are going through in life, thinking too much can make you go crazy sometimes. There is not much we can do, so why do we have to think too much about our problems. This is what I usually tell myself and it helps me forget about my problems. If there were a way out, we would try to find it of course. But there isn’t, so why search for it?

She has ruled out suicide, and cites other coping strategies such as seeking support from family and friends, and distraction through housework.

Some opined that men were more prone to ‘giving up’ than women. Sofiko (age 23) compared her mother’s coping style to her father’s in the following, arguing that men were more likely to ‘give up’ than women:

[M]en are more depressed now in my opinion. They’ve given up on everything in their lives, while women have shown their fighting spirit, so to speak. […] In my family, for example, after we moved here, my father didn’t want to do anything, he locked himself up at home and didn’t want to go out; he was avoiding people. He used to say that he didn’t want to remember anything. He also told us not to remind him of anything and stop talking about it. My mother approached this issue differently. And I think it was my mother who helped my father deal with it. She used to tell him that we would necessarily return to the gorge, to our home and live a normal life there. She also told him to think about us too. We were worried about his condition too and I don’t know. […] My father has had a hard time getting used to everything here. He used to say he didn’t want to do anything and that everything he had done there was destroyed in a second and that starting all over again was pointless, it would take a lot of time.

7.2.3.2 Physical and emotional isolation

Some women coped by isolating themselves. For instance, Elisabed (age 28) rarely ventured outside. She states that after arriving in Karaleti, “I stopped going out and became more introverted. […] I feel better when I’m alone. I don’t feel comfortable when I’m out.” Natalia (age 52) too reported that she often ‘stayed in,’ which she attributed to the loss of relationships she had with former co-workers. She shares, “I especially miss
my co-workers with whom I worked for so many years. We knew one another well and we had a really good relationship. In the beginning, it was very hard… So, I became withdrawn and I often stay in.” Ketevan (age 72) as well reported that she had become withdrawn as a response to displacement. She tells the following:

I became withdrawn. I liked to go out, visit my children. I used to buy gifts for them, or bring them something else. I mean, for their birthdays. Now, it’s been four or five years since the war and I’ve visited my kids in [village in buffer zone] and [village in buffer zone] just a few times. As I’ve already said, one of my daughters lives in Gori and I’ve visited her just twice in these four years. The same can be said of my other children. I really don’t like to go out. I go outside only when I have to take out the garbage. I only visit a couple of women here. This is how I feel now. I don’t want to go out. I have enough willpower to stay in for months.

While some of the lack of visiting may be linked to lack of ability to purchase gifts for hosts and pay for transport (see Chapter 6), Ketevan reports that she also has not visited her daughter in Gori, to which her settlement of Karaleti is attached. As such, it would seem that the isolation is due to Ketevan not wanting to go out, rather than being prevented financially from going out.

Besides physical isolation from others, some women coped with their problems via emotional isolation. This consisted of concealing emotions and consciously not reaching out to others for help, as demonstrated by Jana’s (age 35) statement: “I do not leave home. […] I don’t go out, and let other people know about my emotions, or let other people see my gloomy face.” Similarly, Tamriko (age 47) states, “I don’t like to go out. I prefer to be alone. I don’t know… I am like this. […] I’m not like other people who go out and share their problems with others.” Izolda revealed that at the beginning of their time in the settlement, she coped with problems through isolation, concealing emotions, and taking out her frustrations on her children. She recounts,

In the past, I didn’t like going out at all. I tried not to express what I felt. I didn’t want others to feel that I was angry; I acted like nothing had happened. I wanted to stay home. I didn’t want to go out. In the past, it was different because my kids had to suffer. I used to hit them to feel better.

Some women reported concealing their emotions from others in order to avoid potentially stressful situations. Eliso (age 39), for instance, self-identifies as a ‘conflict avoider.’ She explains her approach to conflict: “Whenever I notice that things are getting tense, I prefer to step back. I don’t like to argue with people.” Eka (age 27) as well shared this sentiment, stating “I don’t like to fight, I might get angry at something but, I keep it in my heart.”
Jana (age 35) uses a similar coping style. She shares, “I keep my emotions and anger and try not to show it to others. […] I might be offended but I never show it to others.”

Other women were motivated to conceal their emotions in order to not ‘bother’ others with their problems. Ketevan (age 72) states “Well, when I’m angry, I don’t show it, I don’t want to bore anyone with my problems. I always try to be in a good mood.” Medea also avoided sharing her problems with others, to avoid putting others in a bad mood by burdening them with her problems. Similarly Eteri (age 42) states, “I don’t like to ask for help. I don’t like to bother people. Some people have no problem with bothering their neighbours or relatives. They are demanding but I’m not like this.”

In addition to concealing emotions such as anger, women also reported concealing their own vulnerabilities and needs. Such behaviour may have been motivated by pride; for instance, Isidore (age 57) felt that others may judge her for needing help, and explained, “I don’t ask for help because I don’t think it’s nice.” Others appeared to want to be stoical with their neighbours, equating help-seeking with failure. For instance, Nana (age 44) claimed, “I can’t ask anyone to help me financially or with clothes… I just can’t do that. […] I’d rather die of hunger than ask anyone for anything.” Jana (age 35) stated, “[I]f I am in trouble I try to resolve it by myself and never ask for anybody’s help. There are some problems that you cannot share with others, you cannot speak them out.” Similarly, Lali (age 32) was also reluctant to reach out to her neighbours for help:

I personally don’t like to go out and share my problems with my neighbours. […] I’m not that kind. It would probably ease my mind, if I did but I don’t want others to know about my family problems. I prefer to act as if I don’t have any problems with neither clothes nor food. I don’t like to cry over my problems outside.

Some women felt that the concealment of vulnerabilities and emotions was ultimately counter-productive, as it led to other problems. For instance, Marta (age 39), who shied away from confrontation with other adults, noted that her coping style impacted her children negatively. She states: “I take it out on my kids. Well, I don’t beat them or anything but sometimes, I talk too loud with them. So, yes, I take it out on the kids, not on others.” Sopio felt that her tendency to ‘leave problems at home’ rather than showing others her ‘crying eyes’ had caused serious problems with her heart.

7.2.3.3 Physical escape, crying and wishful thinking
Women sometimes reported that they sometimes physically removed themselves from a situation or place in order to cope. For instance, Nestan also mentioned that she occasionally coped with anger by ‘going out.’ Nino recounted an episode in which she left her home and went to a busy transport hub in Tbilisi in order to calm herself:

Once, I was very angry. I had just come back from Gori and I thought that I would die if I stayed at home. I lied to my husband, and told him that [disabled son’s] doctor called me from Tbilisi and told me that he needed to see me urgently. I arrived in Tbilisi, Didube station. I sat there pointlessly; I did not do anything. I left only after a thought flashed into my mind that I was sitting pointlessly and it was time to take care of the children.

Crying was occasionally listed as a coping strategy by the women. Isidore (age 57) states, “Sometimes I sit down and cry because we are very poor.” Izolda (age 33) also reported crying in order to cope with negative feelings. She reports, “My nerves are so bad, whenever my nerves tense me up I feel very bad if I don’t cry. […] Whenever I stay alone I cry a lot. It helps me feel relieved.”

Some women engaged in wishful thinking during the interview, which commonly consisted of comments about hoping to return to their villages of origin. Medea (age 40) states,

I live in hope. I’m still hopeful. Some people say that they are not but I hope to return home. I still believe, I don’t know why. I believe we will return home. I don’t know. […] I have a feeling we are going to leave soon.

Latavri (age 73) explains that she thinks about the possibility of return to her origin village in order to ‘not give into sorrow.’ She ponders, “What if they let us return? We all dream about going back home […] We should return there ‘in the name of’ Georgia.” Natalia (age 52) also engaged in wishful thinking about returning to her homeland, a position supported by most senior religious figure in Georgia, the ‘Patriarch.’ She states,

In general, I feel optimistic. I can’t wait to see what a new month will bring. Our Patriarch has said that everything is going to be alright and that Georgia will shine and I can’t wait for that day to come. I’d love to see shining Georgia. I want everyone’s kids to have a bright future.

Many women felt that men frequently engaged in wishful thinking. According to Nutsa, men in Shavshvebi often gathered in groups on the roads in the settlement, and talked about returning to their villages and homes, and visiting their gardens and land.

7.2.4 Distraction

Nutsa explained how distraction helped her cope with being displaced:
When you do things, you somehow forget about the problems. It seems that you get used to this life. When you don’t have anything to do, you start to think more about… For example, about the things that you don’t have and that you need.

The most common distraction techniques focused on seeking employment and working, gardening, doing housework, reading and watching TV, and visiting others. This coping domain proved to overlap with two other domains; seeking employment and working, and gardening was shared with problem solving, and visiting others with seeking support.

7.2.4.1 Seeking employment and working as distraction

Besides the obvious economic benefit of working (as described in the ‘problem solving’ section above), some women described how working helped them divert their attention from problems and combat feelings of depression. Though unemployed at the time of the interview, Vardo had previously worked as a ‘village chief’ in Skra. She remarked that the position ‘helped her a bit.’ When asked to elaborate on that statement, she shared:

[S]taying in and doing the same all the time can make you feel depressed. When you have a job, you meet new people, people from NGOs, many of them visited us… There were training courses, retraining groups… I had to pay attention to students. And it all was different, active engagement helps you divert your attention to these things and forget about your everyday problems in your family for some time. I almost never felt depressed. […] I was less irritated by things, so to speak.

Marina (age 26), who was also unemployed at the time of the interview, was prepared to take on a volunteer position simply to be busy and occupied. She shares,

My [previous] work helped me overcome a lot. Now I feel that I’m beginning to have this attack again. The fact that I’m home now and left to my own devices has had a negative effect on me. Now I’m trying to find something; I surf on the internet, I call around people asking for help… It doesn’t necessarily have to be a paid job, I’m ready to volunteer again. I just want to do something.

Guranda (age 28) as well managed to find employment at the community centre where she had earlier benefitted from various programs. She was previously involved in providing some programming for children in the settlement, before funding for the program was cut. Beyond the financial benefits to her previous position, she felt that being active in the organization and assisting others helped her cope with being displaced. She states,

I’ve discovered many things about myself. […] I didn’t know how to help people, I had never done it before because no one needed it. […] It was thanks to the displacement, I have discovered so many opportunities. Governmental and non-governmental organizations gave an opportunity to be involved in many projects and help both other people and myself.

Sofiko (age 23) had found employment with an NGO focused on women’s rights. She reflects how her job has impacted her well-being: “Things are relatively better now. I have a job and I’m very happy. Being out of work and waking up to nothing was terrible.”

Leila (age 52) as well pointed out the diversionary benefit of working. She explains:
If people here were employed, they would at least have some fun while going to work. Communicating with people helps you forget your problems. When you stay in, you think and worry more. Especially when you’re alone.

Nana had worked as a cleaner immediately after being displaced, while she and her family were waiting for the settlements to be built. She felt that this job had helped her to ‘get over things’ simply because she was able to do something active rather than focus on the then-recent war. Sofiko as well recognized the value of work as diversion. She states, “Life here is harder for people who spend all their time at home doing nothing. When you have a job, you forget about your problems.”

Besides the value imparted by training sessions in the form of potential projects and employment opportunities (see section 7.2.1.1.1 above), attending training sessions also offered the women with a much-welcomed distraction. Besides learning something new, Ana felt that such sessions were entertaining and interesting. Izolda (age 33) found that attending training sessions reduced her stress level. She shares, “[W]henever I attended training, my soul was relaxing while listening to those discussions.” Lali (age 32) explains how sessions helped her: “[A]t least, I could divert my attention because I was going out, I was listening to some new opinions.” Lia (age 38) had attended as many training sessions as possible. She notes, “if I had to stay in, I would go crazy.”

7.2.4.2 Gardening as distraction

Besides the financial benefit to growing fruits and vegetables discussed in section 7.2.1.2.1 above, several women, such as Nutsa, felt that it also provided an opportunity to divert her attention away from other problems. Nutsa enjoys being busy in the summer, going out and working in her garden, planting seeds and tilling the ground. Leila (age 52) also spoke of the diversionary potential of gardening, stating that it helped her “forget about our problems.” Similarly, Eliso (age 39) remarks, “Well, when you do things with your bare hands, it helps divert your attention.” Marta (age 39) concurs, stating “I can’t wait to plant onions and garlic, hoe the land, and watch seeds grow. I’m so excited. Going out and doing something would add meaning to my life. Physical work is our vital force.” Tamriko (age 47) too reports that she copes by going to her garden and working, in order to “forget about things.” Ekaterine (age 41) describes how she had turned to gardening as a coping technique:
In the beginning, I used to cry hysterically and shiver, then I took myself in hand because I had to raise my little child. I had to raise him, look after him… But now, I manage to divert attention by going out or working in our garden.

Ketevan (age 72) too notes gardening as a distraction technique: “Luckily, I have this garden and it keeps me distracted.” Tatiana’s remarks about gardening reveals the overlapping nature of gardening as both a problem-oriented and distraction-oriented coping technique. She shares,

When we go out here, we manage to have fun somehow, we work in our gardens whenever we want… We planted so many fruit trees here. They grow so well. I mean, our apricot, white cherry trees. I’ve also planted raspberries, strawberries… I’ve planted them in small spaces, just for ourselves, but I maintain our garden with my own bare hands and I also make compotes and jams. To avoid buying these things (age 48).

Tatiana (age 48) explains that gardening offers not only a distraction opportunity, but also a chance to visit with others also working in their gardens: “Working in gardens with others calms me down too because someone says something, another person says another thing and I forget about my problems. And when I come back home, I feel calm.” This quote illustrates that the different types of distraction overlap each other somewhat.

7.2.4.3 Housework

Quite a few women reported that they tried to find things to do around the house as a distraction technique. Eka (age 27) explains, “Being idle is very difficult, [a] lot of thoughts come to your head when you have nothing to do, you start to remember everything […] [W]hen you clean your house, you switch your attention.”

Nutsa thought that women were able to divert their thoughts away from their villages through doing tasks such as laundry. She opines: “Women […] manage to divert our attention. When we do laundry for example, we think about washing clothes, enough water, swilling and hanging up the laundry.” Elene (age 27) states that she sometimes does laundry as a distraction technique, rather than seeking support from others: “I usually do something, laundry, for example, to get over something. I can’t say that I will go out and tell it to someone.” Medea (age 40) as well reports that doing housework is her preferred coping method, and explains why she chooses this method rather than seeking support from others:

I usually do housework. When I’m worried about something trying to find a way out, I do housework and I don’t even get tired. […] So, this helps me divert my attention. Even if I wanted to share my problems with others, everyone here has their own problems and I don’t want to burden them with my problems. I can’t take it out on my kids, of course. Neither on my spouse.
So, I prefer to keep my problems to myself and do housework. Even several times a day. But no, I can’t share it with others.

Ketevan (age 72) also frequently turned to housework as a distraction technique:

Well, when I feel nervous, I prefer not to talk… Nor to listen to anyone. My neighbours invite me, of course, but I don’t know what to speak with them about, so I prefer to stay in and think about my problems and then, divert my attention to something else but it never works. I usually can’t forget about my worries. [D]oing housework keeps me distracted and busy. It helps me forget everything. I’ve been doing housework since the morning. A neighbour of mine visited me today and I told her to wait because I hadn’t shaken out my rug in a long time, I was taking it out… So, housework helps me live. My neighbours keep telling me I should go out more often but why should I? I always find something to do. Wash stockings, pants, this, that… I don’t know. It keeps me distracted.

Sopio (age 40) reported that she distracted herself by rearranging furniture in the family cottage. She says,

You may laugh but I move furniture. […] A week ago, our wardrobe was here, I removed some parts of it and took them to our bedroom and put these things here instead. I’ll let it stay like this for a while, later I will do something about it […] Now when I’m locked at home, I take it out on furniture, so to speak.

Some women reported that they engaged in baking in order to distract themselves from everyday problems. Leila (age 52) engaged in baking in order to cope with physical ailments and ‘forget her sorrows:’ “When I have high blood pressure and feel very bad, they ask me to make some cookies and that helps me feel better. […] Often, when I can’t sleep at night, I get up and bake something for kids.” Other women focused on children in order to distract themselves from stress. Ivdity (age 23), mother of a 4-year-old child, states, “Sometimes, I play with or look after my child and it helps me forget my worries.”

7.2.4.4 Reading and watching TV

Jana (age 35) states that she distracts herself from stress with a combination of reading and housework: “I entertain myself, distract myself by doing housework. I also love reading and this is how I handle it. I may put off doing some housework and start reading.” Irma (age 56) also read in order to distract herself. She shares, “I read books or magazines, whatever I get my hands on… I have some magazines here too. It entertains me and helps me forget about my problems.” Natia (age 53) as well used reading as a distraction technique:

I love to read. I prefer to keep quiet and read something. I love to read, very much. [Interviewer: Does it help you?] Well, yes… Sometimes I read magazines or… I really like to read books about religion. Religion textbooks or books about lives of saints and so on. Mostly, I read newspapers, of course.
Giuli used a combination of distraction techniques including reading, watching TV, and socializing with her friends. Izolda (age 33) states, “I have to watch a DVD. I do these kinds of things because I don’t want to follow my nerves.”

7.2.4.5 Visiting others for distraction

When asked how she coped with her problems, Eka (age 27) reported that she liked to ‘switch her attention,’ or distract herself. She thought that women in the settlement switched their attention by visiting neighbours, “going here and there.” Izolda (age 33) also thought that she visited others as a diversionary coping technique. She tells, “When I’m on my nerves and I go out, I feel a need to talk to someone about something different to divert attention; to have some fun and forget about my worries. Whenever I feel something, I have to visit a neighbour.” Giuli also mentioned visiting her girlfriends and having fun as distraction techniques. Vardo (age 39) stated that people in the settlement gathered and talked to each other in order to entertain themselves, especially in the summer when the weather was good. She shares, “We have fun, in a word. We visit each other.” Beyond the distraction functioning of visiting others, making contact with neighbours, family, friends, and community members represented support-seeking behaviour as described above in section 7.2.2.

7.2.5 Cognitive restructuring

The strategies below fit into Skinner et al. (2003)’s concept of cognitive restructuring, which refers to attempts to change one’s perspective of a stressful situation in order to see it in a more positive light.

7.2.5.1 Faith

A proportion of respondents reported that their faith allowed them to reconceptualise their circumstances in a positive way. Many reported that church attendance and faith in God had a calming effect, reducing stress. For instance, Tamar (aged 20) states, “Many IDPs go to the church and it helps us a lot. When I come out from there I feel so spiritually calm… It’s very good.” Nana (aged 44) concurs, stating “Going to church and seeing a priest makes me feel peaceful and disburdened. When I return home, I feel like I was on a holiday, I’m so relaxed.” Maia states, “I feel myself calmer when I enter the church. There is a church in the village and we visit it. Yes, it’s helped me. I’m calmer now.”
Some respondents reported that drawing on faith gave them strength to cope with various challenges. Guranda (aged 28) mentioned that her main daily challenges centred on her niece, whom she was helping to parent. She shared that she coped with this challenge by going to church, confessing to her priest, and praying. She states simply, “I have faith in God and it helps me a lot. […] I think that faith is the most important thing in my life and it makes me stronger.”

Women also reported that faith helped them make sense of and interpret past events, by viewing such events as ‘God’s plan.’ For instance, Natia (aged 53) drew meaning from religion and this ‘helped her live.’ She states, “Faith in God gives the biggest, strongest meaning to my life.” The fact that they had survived the war was viewed as strong evidence of God’s protection, and as an omen that God would continue to protect them. For instance, Marta (aged 39) attributed the relatively few civilian deaths to protection by God and the Virgin Mary. She reports that the relief road which formed the escape route from the war to relative safety was covered in fog in the day that many fled, a phenomenon which Marta attributes to God’s protection from the dangers associated with the war and fleeing. She recounts,

Personally, I haven’t seen it but people say that from the relief road that was located uphill, the entire gorge was clearly visible and one of them said that s/he went up, looked down at the Liakhvi Gorge and the gorge was covered in white fog. There were quite a lot of churches in the gorge and one of the priests there said that Virgin Mary was protecting us. Indeed, there were not so many victims among the civilian population and that was the priest’s explanation of what happened. […] I think that it was God who helped us survive.

Marina (aged 26) also felt that God had saved her and her family’s lives during the war, helping them to escape. She states, “I think that God saved us. I don’t know… We’re still surprised that we’ve survived and it’s all thanks to God because there, we were blocked from all four sides and we still managed to escape.” Eliso, Natia, Giuli, and Lia as well attributed their survival to God’s will. Irma (aged 56) states, “It was God who helped us survive those bombings in the gorge and bullets flying all around us. Thank God, my family and I are unharmed now.” Natalia (aged 52) states “I’m grateful to God for we are alive and unharmed now. We are standing on our feet, we are able to walk, and I’m thankful to God for that.” Several women reported that viewing events as God’s will was comforting. Comments such as “everything that happens is God’s will” (Ekaterine, aged 41) were fairly common. Occasionally, such comments about God’s plan and intervention
also fit into the ‘giving up/resignation’ subtype of the ‘escape-avoidance’ domain discussed above, as viewing events as God’s will fundamentally removes control of challenging circumstances out of an individual’s’ hands.

Quite a few women relied on God in helping them cope with harsh material conditions in the settlement. For instance, Leila (aged 52) recounted some of the renovations she and her husband were planning on doing to their house in their village of origin. She wanted to accomplish the same things in their cottage in the settlement, but pointed out numerous obstacles. She states,

> Well, we want to do the same here but we can’t do anything here because there are cracks in walls. This floor is broken too, this thing here too. What can we do? What’s going to happen, I don’t know. We rely on God.

Her statement reveals that she puts stock in God’s intervention in order for the obstacles preventing renovation to be removed. Marina (aged 26) also places her hope in God’s intervention in assisting her to cope with conditions at Skra settlement. Speaking about the lack of availability of wood near the settlement, she states, “we bought some wood and it’s enough for now but I don’t know what we are going to do next year. I hope God will help us.”

**7.2.5.2 Focus on mental strength**

Quite a few women drew confidence from the fact that they had been able to meet the challenges that life had presented to them so far. The discovery of their own mental strength helped them cope as they faced new challenges. Natia (age 53) explains how her inner strength, which developed through the challenges related to the war and displacement, helped her overcome the wounds of the past:

> Personally, I feel that I have more strength now. I mean, inner strength because physically, I can’t even walk. Nevertheless, I feel inner strength. You need strength to overcome what we’ve been through. It came to me naturally and helped me overcome and forget everything that happened four years ago. […] The fact that you are able to analyse, overcome and keep quiet about all these things is what makes you strong […] Probably, the only positive thing that happened to us is that we feel this inner strength. We are more self-confident after all that we’ve been through. […] You can't fight fate; you just have to be strong.

This comment also demonstrates the overlap between different coping styles; there are elements to emotional isolation (‘keeping quiet,’ rather than seeking support) in this statement.
Tata (age 31) also thought she had become mentally stronger since being displaced. She reflects, “I’m not afraid anymore. Sometimes I know that I’m going to face some problem and I never think I won’t be able to solve it. I’m stronger. […] I depend on me in general.”

Guranda (age 28) as well thought she had become a stronger person since being tested by the hardships of displacement. She shares,

[A]fter the war because I managed to overcome all difficulties. I didn’t become withdrawn, aggressive, or evil. On the contrary, I looked at all this from a totally different perspective and I realized that I am strong. If you don’t face difficulties, you will never understand how much you are able to do. All the bad things that happen in our lives are a test. I’ve already been in this situation many times. Through the difficulties and it made me realize that I am strong.

Lia (age 38) also felt that she had gained in strength since the war. She states, “Now, I’m stronger. […] I learned how to overcome difficulties. I’ve discovered my stronger inner me.”

Sofiko (age 23) as well thought she had gotten stronger. She states, I think I’m stronger now. I’ve been through a lot of stress and I’m still alive. Life gave me the drive to keep going. I’ve been through a lot, I’ve lost everything, and I don’t think there is something I’m not able to deal with. I’ve coped with loss of the most important things in my life and I think that I can get used to anything.

Vardo (age 39) too though that he had become a stronger woman since the displacement. She reflects on her development:

I’m stronger now, more self-confident. I wasn’t really able to solve my problems before. Now I can solve any problem we have in our family. I’ve deepened my knowledge. This makes you stronger too. I also look at things differently now. I was afraid before.

Children’s needs proved a very strong motivation in the development of mental strength and confidence cited by the respondents. Some women stated that they needed to be strong in order to support their families, financially, emotionally, and otherwise. Maia (age 39), for example, felt that her sense of strength gained after becoming displaced was a necessary adaptation to having to protect her family. She states, “I need this strength. I have to be strong to overcome my family problems.”

Lali (age 32) shares a similar sentiment in the following: “I still think that I will achieve something. I’m not going to give up because I want a better future for my kids. I really want it.”

Eteri (age 42) states, “Well, I have hope for the future. I’ve never lost it. I have children. I’m trying to help them pave their way… I want them to learn more and have a better life than we do.”

Eliso felt a sense of obligation in carrying on and striving to create a better life, since she had a family: “Even after all these [difficulties], we are still struggling because it’s our obligation to our family. We don’t have a choice. We are obligated to do it.”

7.2.5.3 Downplaying losses and focusing on the positive
Coping through downplaying one’s losses was frequently implied by the respondents. Women compared their own losses to losses experienced by others, concluding that others ‘had it worse.’ The also considered that things could have been even worse for them, for instance, they could have lost a family member. Putting a positive spin on their condition, for instance, appreciating their cottages and assistance such as social aid despite shortcomings sometimes came through during interviews, and represent cognitive restructuring.

Though no respondent specifically stated that they coped by comparing their losses to others’ losses, it was clear that the positioning of others’ troubles as truly insurmountable diminished the scale of their own problems. For instance, Medea (age 40) reported that her family faced financial hardship and health problems. However, she downplayed these issues by shifting the attention to the needs of elderly people. She queries, “What about elderly people who can’t work? Nobody’s helping them. What should they do? They can’t even pay their bills with their pension. […] I feel pity for these people.”

Many women stated that the most important thing to consider, under the circumstances, was that they were alive. This fact was used to minimize the seriousness of stressors, since compared to death, living in the current situation was preferable, no matter how difficult. Irma’s statement was typical: “The most important thing is that everyone is alive and healthy” (age 56). Marta (age 39) has also chosen to focus on the fact that no one in her immediate family had been killed during the war: “[T]hank God, no one was killed nor injured. We all are alive. Everything is transient. We aren’t crying over what we lost. […] The main thing is that my friends and relatives are alive and healthy.” Guranda (age 28) explains how she and her community had accepted their state, reprioritizing the importance of having family and friends over material losses. She states,

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\text{We accepted our fate. Later I realized many things, it became clear that material things mean nothing. I mean, that we try to purchase or do something, we worry about things like everyday problems but life goes on and that’s more important than everyday problems. We should be grateful for everything we have. The most important thing is to see and love each other. This is the most important thing. }
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Nestan (age 54) downplays the object losses experienced by the sample, in light of the fact that they were still alive and should be thankful for that. She states, “Survivors shouldn’t worry about expensive tableware. The most important are your children and family members […] Well, you can get all these things but you can’t get or buy live.” Jana (age 35) shares a similar sentiment: “We have seen a huge loss. We lost everything. But the most important thing is that we, our relatives and siblings are all alive and
healthy.” Similarly, Sopio (age 40) states, “Maybe, we lost many things but it is secondary, the most important thing is that we are alive and healthy.” Ketevan (age 72) as well stated, “[B]ecause of the fact that we survived unharmed, we aren’t crying over what we lost.”

Frequently, women compared their fate to the fate of others who had lost family members, thereby minimizing their own loss. Lali (age 32) shared that one of her mother-in-law’s relatives had been killed in the war. She felt that this loss made her appreciate her circumstances more. She reflects, “There are families who’ve lost their mothers or fathers and it’s hard for single parents to raise their children alone. I’m thankful we are alright and healthy.” Natia (age 53) as well appeared to compare her fate to others in order to cope with challenges. She states,

“People who lost their children... How can you talk about the things you left there and riches after that? Personally, I have this feeling and sometimes I feel ashamed to say that I left this, that there or that I miss someone or something. What should people who lost their children do? How are they going to live their lives? It makes me feel ashamed to talk about my things.”

Some women downplayed the loss of their homes by focusing on the fact that the government had provided then with the cottages in the settlements, despite the problems in quality noted in Chapter 6. For instance, Nanuli (age 71) notes, “They gave us these ‘marshy’ houses, these cottages. It’s a marshy place and my legs hurt because of these winds. […] But it’s fine. At least, they didn’t leave us on the street and gave us this place.” Guranda (age 28) also chose to focus on the positive: “[A]t least it was a place I could call my own. I had a roof over my head and I could live with my family in there and not in some dormitory in Tbilisi.” Vardo (age 39) acknowledges that circumstances were difficult immediately after the war, “but we didn’t complain because we at least had a roof over our heads.” Similarly, Ketaven (age 72) states, “Maybe we don’t have a lot, but we have a little bit of everything and a roof over our heads.” Latavri (age 73) even went so far as to state, “our life here is okay because our government provided us with shelter at least.”

Though lack of finances was a prominent loss reported across the sample (see Chapter 6), Latavri focused on the fact that at least social aid was provided, which allowed her to occasionally indulge in special foods. As she was 73 years old at the time of the interview, Latavri also received a small pension which assisted her. She states,
So, we get social aid. It’s not enough, of course, but we spend it accordingly. I can’t say that we are hungry. Our situation isn’t that bad. We are able to buy meat at least once a month and eat something different. So, this is what we are able to do with our pension and social aid.

The cognitive restructurming of losses around finances and housing represents the adoption of a positive viewpoint of circumstances. Nestan (age 54) was one respondent who adhered to such an outlook. When asked if any positive changes had happened since displacement, she shared a Russian proverb:

“Be patient, Cossack, and you’ll be a chieftain.” It means that you shouldn’t let things get you down. [...] One should be active, communicate with people, learn something new, and know that is happening in order to achieve something.

Marina (age 26) also took a positive approach to life: “[W]e try to enjoy [life] despite everything. We are happy to be alive. Even when bad things happen, we don’t lose that little hope we have.” Latavri opined, “We should try not to give into sorrow, because you never know what the future will bring. What if they let us return?” Sopio (age 40) thought that everything would “fall into place sooner or later,” and felt that a lack of optimism harmed future prospects. Guranda (age 28) also drew a link between optimism and ability to meet challenges. She states, “As for the future, I think that if we look at the bad things that happen in our lives from a different viewpoint and be more optimistic, it would be easier for us to overcome difficulties.”

7.3 Chapter summary

This Chapter sought to organize the coping strategies used by the sample into a coping typology well-supported by previous research on coping. The coping typology consisted of the following domains: problem solving, support seeking, escape-avoidance, distraction, and cognitive restructuring. Activities reported by the women such as seeking employment and working, budgeting, and turning to alternative sources of income fit into the problem solving domain. Additionally, women sought support from neighbours (both old and new), family, and friends, co-workers, and priests. Some women shared that they used escapist or avoidant techniques, such as giving up on problems, isolating themselves both psychically and emotionally, removing themselves physically from a stressful environment, crying, and engaging in wishful thinking. Distraction was a commonly-reported coping domain, comprised of seeking employment, working, and gardening for distraction, engaging in housework, reading and watching TV, and visiting others. Finally, a range of cognitive restructuring techniques were evident, including drawing
upon faith, focusing on mental strength, and downplaying losses and focusing on the positive.

Though Skinner et al. (2003) sought to propose a typology characterized by mutually exclusive coping categories, some of the coping strategies used by the respondents fit with the distraction domain and one other coping domain, representing the dual, overlapping nature of coping strategies such as seeking work and visiting others. The assignation of coping strategies and the overlapping nature of some strategies is illustrated in Figure 10 below.

The next Chapter explores Georgian internally displaced women’s understandings of how men’s and women’s roles have changed as a result of displacement.
Figure 10: Coping strategies of Georgian IDP women

**Problem solving**
- Budgeting
- Seeking alternative sources of income
- Adopting new roles and responsibilities

**Distraction**
- Housework
- Reading and watching TV

**Escape-avoidance**
- Alcohol
- Giving up/resignation
- Physical escape, crying, wishful thinking

**Cognitive restructuring**
- Faith
- Downplaying losses, focusing on the positive
- Focus on mental strength

**Support seeking**
- Family
- Neighbours
- Friends, co-workers, and priests
Chapter 8: Results on women’s understandings of the impact of displacement on men’s and women’s roles

Men’s and women’s roles are an important factor to consider when exploring coping strategies, as findings from the systematic literature review in Chapter 3 demonstrated the influence of gendered social mores on coping strategies (see especially section 3.2.3). Though a notable shift in these roles is observed in the interviews, I propose that this shift nevertheless largely abides by roles prescribed to men and women which were established long before the 2008 conflict and subsequent displacement.

This Chapter addresses the fourth key research objective (see section 2.6) to explore Georgian internally displaced women’s understandings of how men’s and women’s roles have changed as a result of displacement. I first describe traditional men’s and women’s roles in Georgia, and the degree to which the respondents identified with these roles. Next, I relay women’s understandings of differences between men and women regarding coping strategies, which centred on three themes: women’s higher usage of support-seeking compared to men; higher use of problem-solving compared to men; and differences in distraction techniques between women and men. I then discuss the ways in which women made sense of these differences, which were explained as resulting from men’s and women’s differing roles during the actual conflict, and men’s apparently unique ties to ancestral homeland left behind. Finally, I convey women’s views on whether men’s and women’s roles have been influenced by the war and displacement. I also present examples of challenges to socially prescribed roles for men and women.

Since only women were interviewed, men’s losses and coping are unavoidably viewed from women’s perspectives. From the outset it is recognized that men’s losses and coping strategies described here are filtered through the perceptions of women; male respondents may have given a very different account of these topics.

8.1 Men’s and women’s roles in Georgia
Georgian society is characterized by quite traditional gender roles (see Chapter 4). As the majority of the women in this study lived and were from rural areas, men’s and women’s roles in rural areas of Georgia are described here. Men are generally considered heads of families, expected to make critical decisions and support the family financially. In terms of specific activities commonly allocated to men, in rural areas they are responsible for raising cows and pigs, harvesting crops, hunting, fishing and cutting wood (Pol, 1999). Women in rural areas are commonly in charge of caring for and educating children, caring for elderly family members, and maintaining households, including cooking, housework, sewing, tending to gardens, raising poultry, milking cows, collecting mushrooms, blackberries, and other wild plants, shopping, and budgeting monetary resources (Pol, 1999).

The comments of respondents in this study revealed viewpoints on men’s and women’s roles which largely adhered to these traditional Georgian mores in rural areas, held by women across the age spectrum. For instance, when asked what sorts of activities she did throughout the day, Medea (aged 40) specified, “I do what every woman does. Laundry, cooking, dishes… Keeping the house clean.” She further elaborated, “Housewives have more responsibilities in family life. They should look after their kids, families.” Similarly, Marta (age 39) explains her daily routine in the following: “I wake up, send children to school. Clean up a bit. I cook, do laundry. […] I do things around the house. All the small things every woman does. […] We have a garden. In spring, we work there. We grow everything our family needs.” Nino (aged 37) opined that heavy agricultural work such as hoeing and ploughing were men’s jobs, while her tasks included sewing and looking after the family. Sopio (aged 40) shares, “Personally, I don’t preoccupy myself with cutting wood or digging the garden. There is a man in our family and he can take the trouble to cut enough wood for two days.”

Some statements underscored the strict observance of such roles, as enforced by both men and women. Ketevan (aged 72) stated, “[M]en don’t let women do men’s work […] Some things should be done by women; other things should be done by men.” Irma stated: “[I]n my family, my spouse does men’s work and I do women’s work.” Men’s work was commonly reported to include earning a wage outside the home in order to financially support the family, doing manual, heavy work in the garden (hoeing, tilling, digging, and
establishing new gardens), and gathering and chopping wood. The informal interview held with the research assistants also underscored the centrality of family responsibilities for women’s roles, to the degree that women had little identity outside the domestic sphere and were expected to ‘live for their families.’ These views concord with conservative perspectives on women’s roles in the post-Soviet sphere (see section 4.3.1), and echo initiatives undertaken by the Soviet regime aimed at promoting traditional gender roles described in Chapter 4 (section 4.2.1.1).

Occasionally, women were somewhat disparaging of their own abilities and strengths, as compared to their husbands. There were plenty of women who explained that they were ‘just a housewife,’ while their husbands were normally the breadwinners. Sopio (aged 40) opined that women were ‘the weaker sex.’ Similarly, Ketevan felt that the man was the ‘boss’ of a family, who was largely responsible for solving problems affecting the family. When Lali (aged 32) was prompted to elaborate on how she and her husband coped with being displaced, she stated, “Well I’m a woman and maybe I can’t support him as much as he can support me.” Such statements reveal an adherence to a patriarchal view of society which places men above women.

A strong commitment to traditional roles for women and men was also revealed through several statements on perceived men’s views of the acceptability of women working outside the home. Several women referenced that their husbands did not want them to work for wages. For instance, Elisabed (aged 28) stated “I could do many things but my husband doesn’t let me. I don’t have education but I could do some physical work, for example.” Her husband also forbade her from attending training courses aimed at enhancing skills relevant to the job market. She stated, “He tells me to stay in and look after the kids. […] He used to say that it’s men’s responsibility to support their families.” Marta (aged 39) explains that she has turned down many jobs, even though she “is not picky,” due to her husband’s wishes.

Sometimes women mentioned relatives and friends (both male and female) who had gone abroad to find work, most frequently, to Turkey. Izolda (aged 33) stated that she was considering going to Turkey for work, as she already had a female relative working there.
However, her husband would not entertain this option: “I might go to Turkey to work. My husband doesn’t let me, however. I don’t know what I am going to do. One of my relatives is working there and they told me they would take me there.”

8.2 Divergent coping strategies

The respondents commonly expressed that women were ‘better’ at coping with the traumatic events of the war and current displacement. Many women compared themselves to their spouses, who they saw as floundering in the displacement era. Tatiana states,

I’m standing stronger than my spouse. My spouse is so broken hearted that nothing exists for him in this life anymore. Despite everything, I’m still thinking about what needs to be done in or purchased for our house. But my spouse doesn’t care about anything anymore. I do it for my children, what other choices do I have? […] Here, most men have heart problems now and their nerves are wrecked. We, women, are worried too, of course but not as much as men. Men worry a lot. It’s because they were born and raised there.

The major differences in coping observed by women were that women seemed to engage in more support-seeking and problem solving than men, who appeared to rely on escape-avoidance techniques. Both men and women appeared to use distraction strategies, but this manifested in very different activities. While women tended to engage in household and childcare responsibilities for distraction, they perceived that men turned to alcohol use as a distraction technique. Each of these themes is described below.

8.2.1 Support seeking among women

The most prominent perceived difference between men and women regarding coping strategies was the reliance of women on support seeking, versus men’s tendency to conceal their hardships from others. Almost all women interviewed commented on this difference. Women felt that it was ‘easier’ for them to overcome hardships of displacement due to their tendency to reach out to others. Tata stated, “It was harder for men to overcome everything. Women are more…Well, they can talk, have their say…Men mostly keep things to themselves.” Eka shares, “[M]en can’t express things that clearly and females like to speak up, or by crying and expressing their feelings with tears.” Lia (aged 38) concurs, stating,

Well, it’s harder for men because they can’t express themselves. Some men keep everything to themselves and it affects their physical health. Women, on the other hand, share their problems with each other and it helps them get over their problems.

Eteri as well felt that men did not express their feelings, despite the fact that they ‘bear a heavier load’ than women. She shares, “My spouse, for example, he doesn’t talk much
but I see that he is worried. […] Women are able to share their worries with each other, unload their problems. And it helps them get over things.” Eliso felt that women gained relief from saying what was on their minds, while men were more reserved about their feelings. Lali as well thought that women were more ‘open,’ and more willing to share their feelings with others as a coping strategy. She reported that her husband would never share his problems with her unsolicited; she has to probe him in order to be privy to these problems.

8.2.2 Problem-solving among women

The second major perceived difference in coping strategies was women’s problem-solving approach to losses. It was widely perceived that women were more ‘active’ than men when it came to coping with displacement. For instance, Izolda states,

I think that mostly women solve problems. Work-related problems, for example. […] When there is something we would like to do in the settlement; for example, we have this salty water and we need to solve this problem. Women care more than men. We attend trainings and I know that women think and do more than men.

Guranda explains how women in her family rely on problem-solving:

Other women in my family and I, for example, try to identify the problem as quickly as possible, we try to understand what’s going on, and then we decide what to do and which way to go. […] My mother is a housewife, but she is in charge of everything that is going on in our family and she tells everyone what to do.

Tata as well observed how these differences between men and women regarding problem-solving coping played out in family dynamics:

If we don’t have bread, for example, I will go out, do something and I will find a way to get it. But my father, […] he can’t go out and can’t do what I or my mother can do. Because men are totally different… Maybe shyer… They have different… He can’t even go out to buy it. That’s what my father is like.

Marina too felt that women were more active than men in solving problems, overshadowing men in the post-conflict era. When probed to elaborate on her statement, she shared, “When we needed to discuss something or address the Ministry of Internally Displaced Persons, women were more active. Women were in the foreground.” This resonates with a statement shared by Maia, who recounted a woman-dominated protest in her settlement over plans to cut off residents’ gas supply due to non-payment. Though the men also did not want the gas to be shut off, they refrained from taking an active part in the protest, which involved blocking a road in the settlement. When asked why the men did not respond as strongly as the women, she states, “They [the men] seemed a bit distant. […] I don’t know why they refrained. […] They wanted to block the road too but for some reason… They probably were shy or something.”
8.2.2.1 Adopting new roles and responsibilities

Some women felt that they had coped with the challenges and losses associated with displacement by expanding their roles and responsibilities into formerly ‘male’ activities. Lali (age 32) had lived with her husband, two children, and in-laws prior to displacement. However, the war had disrupted this arrangement and at the time of the interview she lived with only her husband and children. This new household arrangement required her to take on additional roles, previously fulfilled by her in-laws. She explains, “Now I live apart and I solve my problems on my own. […] I control mostly everything. For example, it is my responsibility to go to Gori, take that social aid, decide what to do with it, what to buy.” Similarly, post-displacement Ekaterine assumed the responsibility of obtaining food for the family, which had previously been her spouse’s role.

Guranda (age 28) also mentioned changed family dynamics since the displacement. She felt that while she had become more independent, her family had grown increasingly dependent on her:

I’m more independent now, because before the war I used to depend on many things, now on the contrary, even my family members want to know my opinion on things. Sometimes I wonder why they trust me so much and let me make decisions or solve problems. For example, when someone has go to the bank. I think that my parents can go there and solve everything on their own but for some reason, for them I’m the person who is able to solve our family’s problems.

Makvala also reported taking on new responsibilities in order to cope with the demands of being displaced. Despite being 70 years old at the time of the interview, she reports that she had started cutting her own wood and starting the stove by herself, which are tasks she did not have prior to displacement. She shares,

I had never cut the wood before the displacement. But who’s going to do it for me here? My son is in the army and he can’t help me. So, it should be done by me. Who is going to fire up the stove for me? I have to do it, because I have to bake bread. So, I have to do both women’s and men’s work. I hoe, I shovel.

Lali (age 32) had also started chopping her own wood and taking on responsibilities previously under her husband’s domain: “I’ve chopped the wood… Never before had I held an axe. I have also planted many things; I have even tilled the ground.”

The phenomenon of women assuming men’s roles was echoed across the interviews. Vardo (age 39) felt that she had become more independent post-displacement since her husband had relinquished his former ‘head-of-household’ role. She states,
I used to depend on my spouse in everything. I thought that he was in charge of everything. But here, I couldn’t depend on him, and I felt that I had to pull myself together and be stronger. So, the displacement has helped me find the strength to cope with things. […]. My spouse used to take care of everything. I used to be a weak person, so to speak. Here, I look at things differently. […] Now, I am able to cope with things.

Vardo thought that women in general had assumed previously-male responsibilities after the displacement. Consistent with the comments made by Lali, Ekaterine, and Makvala, she reported seeing women cutting down trees and shrubs to heat their homes (thereby avoiding gas and electric heating costs) and taking on jobs that men were apparently too proud to accept. She recounts, “[W]hen people from Skra need someone to hoe or do other similar things, men stay in and drink, while women […] They hoe or harvest cherries.” Lali (age 32) opined that women seemed to be more ‘visible’ in tackling problems post-displacement than men were. She shares,

On my way to Gori, I see women only. […] Many men are unemployed here; they stand in the street and are alcoholics. Accordingly, women have to do everything. I see women everywhere. […] Women are more active and I think that women have to do much more now.

Lia (age 38) too felt that women had come to the fore in assuming roles formerly held by men. She attributes this phenomenon to an inability among men to adjust to the new, post-displacement environment: “[W]hen a man is unable to realize his potential and unable to adapt to the new environment, women have to take it upon themselves because someone needs to support their families.”

However, not all women reported expanded roles post-displacement. For instance, Marta’s husband insisted on retaining traditional Georgian roles for men and women. She explains how this attitude had constrained her job opportunities in the settlement:

My husband, for example, won’t let me wander the streets looking for a job. Even if there were jobs, He won’t let me work in night shifts. Neither as a cleaner. As I’ve already said I’m not picky. Some women, on the other hand, won’t even seek their husband’s permission. They do what is best for their families. I’m more dependent on my husband in this respect than many of my female neighbours are. Had I been more independent, I may have had less problems and more money to spend. But I try not to make my husband angry. He doesn’t want his wife to… I don’t know. […] But he’s a bit jealous and well, you know […] Jealous men don’t let their wives… Well, he doesn’t let me do many things. […] I’ve declined many job offers that I’m sure many women wouldn’t have. I’ve had several chances to change my life for the better but I haven’t taken them because I didn’t want them to cause any conflicts or problems in my family. For the sake of my family, I’ve often put my personal interests aside. It’s not right but I don’t have a choice.

In Marta’s family, addressing financial problems is given less priority than upholding traditional roles for men and women, illustrating how patriarchal relations can constitute an obstacle to women’s contribution to financial matters. Marta speculates that most
Georgian women her age (39 years at the time of the interview) and older are similarly constrained by their husbands. She opines,

> It’s not a problem for new generations. They live the way they want. My generation of women can’t live otherwise, we still depend on our husbands. It’s very bad, I know. I don’t like it. I won’t raise my kids to be like this, I’ll tell them to do what they think is best for them and their lives. I don’t want my kids to be dependent on anyone.

Jana (age 35) felt that most women were constrained by the traditional roles for men and women described by Marta. She opines, “most of the women here are only involved in household activities. A lot of paid trainings are available nowadays and I think women should definitely attend them and gain education. Being at home always affects negatively on women’s [mental] condition.”

8.2.3 Differing distraction techniques: Housework and childcare versus alcohol use, wishful thinking, and ‘hanging around’

Though both men and women used distraction techniques, this was viewed as manifesting in very different ways. Women commonly reported focusing on household chores and taking care of children for distraction. Eka notes, “Being idle is difficult, lots of thoughts come into your head when you have nothing to do […] It is easier for women. Even when you clean your house, you switch your attention.” Giuli also felt that it was ‘easier’ for women than men to spend time at home, since they could “do housework or fulfil some other responsibilities of a housewife.” However, men could not be expected to stay confined to the home. She elaborates:

> Unemployed men have nothing to do at home. They spend their time on the street with other men. Women, on the other hand, do things around the house and it helps them forget their worries. Women deal with problems better than men do. […] Housework helps women divert their attention, while men do nothing but stand on the street with other men. And it does nothing for them.

Nino as well commented on the tendency for men to spend time loitering on the streets with other men: “Men basically go out and gather somewhere. We women stay at home and have to deal with the problems. We have to fight.”

Vardo felt that women used distraction focused on family responsibilities in order to cope, which was not considered an option for men. She states,

> It was easier for me to cope with [displacement] than it was for my spouse. […] [Men] drink now and now it’s especially hard for them to control themselves. Yes, women cope with problems better than men do. Women have much more things to do; they look after their kids, spouses, homes… So, they cope with problems by doing everyday things. It’s harder for men.
These statements reveal the degree to which coping strategies are shaped by ideas on appropriate male and female behaviour. Whilst women could always turn to housework and childcare as acceptable distraction outlets, these activities viewed as neither appropriate nor available for men. This accepted fact cause women to pity men, since the women apparently benefited from having gender-appropriate activities with which to distract themselves.

Rather than housework and childcare, women widely reported that men tended to use wishful thinking and alcohol use as coping strategies. Nutsa compares men’s wishful thinking to her own chosen coping strategy, distraction through housework:

> When men are standing there in the street […] they always talk about returning to their villages and visiting their places, their gardens… They talk about it all the time. Well, women talk about it too but we still manage to divert our attention. When we do laundry for example, we think about washing clothes, enough water, swilling and hanging up the laundry. When these men stand there in the street, they only think about their old houses.

Likewise, Tamriko compares her own distraction techniques to men’s drinking in the following:

> Women take better care of their families, their kids, and their future. I don’t know… While some men… They wake up, go out and drink. They forget about their problems and have fun. They stand on the street here and talk. While women are always thinking… They are worried about her kids and their future.

Alcohol was talked about as an escape or avoidance strategy and also as a distraction technique used by men. For instance, Tamriko (age 47) felt that men engaged in drinking alcohol not only to numb their pain and escape thinking about problems, but also because it provided an opportunity for men to get together and visit. She shares the following:

> “[S]ome men… They wake up, go out and drink. They forget about their problems and have fun. They stand on the street here and talk.” Sopio’s explanation of men’s drinking also shows these dual coping functions of alcohol use:

> [M]en in our settlement very unfortunately numb the pain of grief with alcohol. It’s difficult but it’s a fact. They are out drinking almost 24 hours a day. They think they are numbing the pain of grief with alcohol. […]It’s also that they are unemployed. It’s the only excuse they have – what else can they do (age 40).

Alcohol use was frequently framed as a diversion away from boredom, generally associated with the boredom of unemployment. Nana (age 44) states, “[M]any people in this settlement can’t work because they aren’t employed. My son’s peers, for example, 23-24 year olds. And they are forced to… Well, they drink a lot.” Implied in this statement is that young men are drinking in order to have an activity to focus on in lieu of work.
Rusiko (age 72) too thought that drinking had increased, and it was due to men having nothing to do due to unemployment. She states, “It’s because they have nothing to do. When people work, they are concentrated on other things but people here have nothing to do, so they drink and have fun.” Lia (age 38) too thought that men used alcohol as a distraction technique. She states,

“People consume more alcohol now. […] I’m talking about men. It’s very hard when you are a man, full of energy and you are standing on the street and have nothing to do. They simply can’t find a job. Especially, in winter. There are no jobs for men during the dead season, I mean winter and so, they drink and kill time.

Tatiana (age 48), who shared that her husband had a problem with alcohol use, attributed their behaviour to unemployment and an attempt to calm their ‘nerves. This demonstrates that alcohol use may symbolize an attempt to deal with the mental health losses described in Chapter 6. Similarly, Latavri thought that men’s alcohol use was evidence that they had “fallen into despair,” implying that they drank in order to escape despair. Tamriko (age 47) felt that men used drinking as a ‘way out’ of dealing with problems. She states, “People here have lost their houses and everything they had, so they think that drinking is a way out. They drink, forget about their problems.” Marina (age 26) offers a similar rationale: “After all this stress, they’ve given up and they think that alcohol is the only way out. This war has had a very negative effect on them.”

They drink. Mostly those ones who have nothing to do. I’m watching them and they are drunk all the time. […] They say alcohol helps them calm their nerves. I keep telling my husband: “Does it mean that I should start drinking too?” He smokes a lot too. I keep telling him he should control his emotions a bit and get a grip on himself. We all are nervous but he tells me he’s more nervous than anyone else […] My spouse had a job a while ago but that thing closed down. When he was out working, I felt so relaxed. He quit drinking too and his condition was improving. That is why I wish he had a job now.

Natia also felt that men’s drinking was due to them having nothing productive to do:

[Men have] nothing to do. They have no… I don’t know how to say it… no sources of income. They are men and they should support their families. At least, in Georgia. The situation is very bad in this respect. People are unemployed and they have more time for drinking and unhealthy lifestyle.

Contained in this statement is the sentiment that men have failed to conform to the traditional roles prescribed for men and women in Georgian society, that men should financially support their families. Giuli (age 26) and others occasionally expressed their opinion on appropriate male behaviour, such as the following: “In spite of everything, I
think that it’s the man’s responsibility to support his family. It’s hard to deal with an unemployed man.” She also attributes alcohol use among men as resulting from them having nothing to do.

Unemployed men have nothing to do at home. They spend their time on the street with other men. […] Men do nothing but stand on the street with other men. And it does nothing for them. […] I see that they drink more than they did before.

Men’s drinking was viewed as a troubling development, due to the associated health concerns, perceived inappropriateness of public drunkenness, and negative influence on children in the community. Ekaterine bemoans “[Y]ou can’t let your children go out alone because people here are almost always drunk and you can’t let your 11-year-old kid go out free.” Elisabed judged that her husband was drinking more currently than he had in their origin village. In his case, it lead to a health condition:

Here, he had alcohol poisoning or something, I don’t know… He had a rash on his hands, arms and it lasted for a month. He refused to see doctors. He was scared they would discover problems with his liver or something. Later, the rash disappeared. […] I did my best to understand him and help him to stop drinking. But he didn’t listen. […] I tried to explain to him that it was bad for our kids, for me, for him… Our neighbours, relatives, everyone told him about it too. […] Our grandparents pitied me because my spouse had this drinking problem and he didn’t listen to anyone.

Many women, such as Sofiko and Guili, drew a sharp distinction between pre-displacement and post-displacement drinking frequency. Sofiko notes:

I know some people who didn’t drink before. I had never seen them drunk before the displacement. Now they are drunk all the time and they drink very often, and sometimes, every day. They drown their sorrow in alcohol. This is one of the main reasons they drink.

Marina too attributed the increase in men’s drinking to poor mental health. She states, “After all this stress, they’ve given up and they think that alcohol is the only way out. This war has had a very negative effect on them.” Tatiana also connects poor mental health to drinking:

They drink. Mostly those ones who have nothing to do. I’m watching them and they are drunk all the time. […] They say alcohol helps them calm their nerves. I keep telling my husband: “Does it mean that I should start drinking too?” […] His nerves are so wrecked.

Men’s alcohol use was sharply contrasted with women’s coping techniques. For instance, Tatiana compared her husband’s drinking behaviour to her own coping techniques, which included visiting other women, and working in her garden. Vardo explains how men’s drinking adds to the burden of problems faced by women, as they are obliged to deal with their spouse’s drinking on top of all of the other problems associated with being displaced:

We had absolutely nothing and we had to start everything from scratch. So, men used to overcome these problems with a glass of wine, while it was a little bit harder than that for women. It was hard for me too because I used to distract my spouse from drinking. I tried to find different things
for him to do. I never told him that we had nothing for dinner or ask him to get the ingredients not to cause even more stress to him. I didn’t want him to multiply the number of bottles, so to speak. As a result of her husband drinking, Vardo’s challenges were compounded by having to conceal the degree of poverty they faced and taking sole responsibility for the family’s well-being. Elisabed (age 28) also cites having to deal with a husband who drank frequently, on top of all the other challenges associated with the displacement: “I was also worried about my spouse because he started drinking more here. I thought that I had to solve everything on my own: raise our kids, look after our home.” She explains that she has tried to reason with him in order to make him stop drinking, but he did not listen. Though he had recently suffered an alcohol-related health scare, he continued to drink. Elisabed coped financially with her husband’s behaviour by borrowing money from family, and not informing him of her purchases.

Comments about men’s alcohol use are imbued with moral judgements on the behaviour, including seeing it as a form of weakness. Men who drank were viewed as taking the ‘easy way out,’ while women were left to hold families together and rebuild what had been lost due to the displacement. For instance, Lali (age 32) compares her own relative strength compared to those who drink: “I’ve always been strong. It means that I won’t drink… There are women who drink and smoke. They can’t handle their problems and they leave their families.” This statement is interesting in that it explicates a moral judgement, and it also provides an example of ‘othering:’ though no women in the sample mentioned that they drank as a coping strategy, female drinking occasionally surfaced as something other women might do to cope.

The link between unemployment and men’s drinking behaviour is made explicit by Tamriko: “People here have lost their houses and everything they had, so they think that drinking is a way out. They drink, forget about their problems… They are unemployed.” Natia notes, “They drink quite often; not only here but in every settlement too […] They’ve nothing to do. They have no sources of income. […] People are unemployed and they have more time for drinking and unhealthy lifestyle.” Giuli as well linked unemployment to men’s drinking: “[Men] are unemployed. They have nothing to do.” Women’s linkage of alcohol use to unemployment was supported by perceived changes in men’s drinking patterns during brief periods of employment. Tatiana explains how employment is linked to less alcohol use in the following:
Employed men, for example, managed to cope with the displacement. […] As for those men, who stay at home… My husband, for example, he is so nervous. I wish he had a job. Especially, when he drinks… Gosh… His behavior affects me so much that I don’t want to live sometimes. He makes me so nervous. […] My spouse had a job a while ago but that thing closed down. When he was out working, I felt so relaxed. He quit drinking too and his condition was improving. That is why I wish he had a job now.

Some women linked men’s drinking to having much more free time than they did before they were displaced. Irma states,

They are unemployed and the only thing they can do is to drink. In our village, however, everyone used to be busy doing something whether they wanted it or not. People owned huge gardens, a lot of cattle and not everyone had time to drink.

Elisabed too felt that her husband simply had the luxury of free time post-displacement, leading to drinking. Rusiko thought that men had nothing to do, and so spent their time distracting themselves through alcohol use. She states, “It’s because they have nothing to do. When people work, they are concentrated on other things but people here have nothing to do, so they drink and have fun.” Lia shared a similar sentiment:

Well, people consume more alcohol now. […] I’m talking about men. It’s very hard when you are a man, full of energy and you are standing on the street and have nothing to do. They simply can’t find a job. Especially, in winter. […] There are no jobs for men during the dead season, I mean winter and so, they drink and kill time.

Many respondents viewed problematic alcohol use as more of an issue among young unemployed men specifically. Nanuli notes, “Men who are in need will go out and work of course. Young, unemployed men, however, became alcoholics. Nana felt that alcoholism was rife among young men, and connected it to endemic unemployment. She states, “[M]any people in this settlement can’t work because they aren’t employed. My son’s peers, for example, 23-24 year olds. And they are forced to… Well, they drink a lot.” Elene adds,

Almost every unemployed person drinks here. Young people drink almost every day and walk here drunk. Well, they don’t do anything bad to anyone or anything but themselves. […] If they were employed, they would have to do something and no one would let them drink. So, I don’t think that they would drink if they were employed. They are young and they drink.

Some women thought that men’s drinking had increased immediately after the war, during the initial period of displacement, but had since decreased. Sopio shares,

After the war, my spouse became more complicated, he had some drinking problems and he wasn’t able to think clearly. But thank God, everything is alright now. He managed to pull himself together. We helped him too, we didn’t take much notice of it. I see that others have conflicts in their families but thank God, we don’t have this problem.

Vardo too noted that her husband drank more alcohol immediately after becoming displaced, but this had decreased since he had become more occupied since establishing
and working on a farm. Tamar revealed that her father used to drink ‘very often,’ and that he was in a ‘very bad condition’ when they first arrived in Shavshvebi. Tata as well revealed that her father used to “cry a lot after having drunk a couple of glasses”, but his condition had improved after adjusting to the settlement and his new neighbours.

It is important to recognize that not all women felt that drinking had increased among men since the displacement. For instance, Medea thought that the same men who had alcohol problems pre-displacement drank after becoming displaced, with the war having no effect on their behaviour. Eliso too felt that men had not started drinking more, at least not in her family nor nearby. A few women felt that alcohol use had actually decreased since the displacement. Natalia (age 52) opines,

> Well, people who like to drink are everywhere but I wouldn’t say that they drink more. On the contrary, they drink less. Probably, it’s because they don’t have money. In our village, for example, we used to grow our own grapes and make a lot of wine. Here, however, they can’t afford it and probably, it’s one of the reasons they drink less. Nonetheless, those ones who really like to drink would always find a way to buy alcoholic beverages anyway. Still, I can’t say that anyone drinks heavily in our settlement, at least no one around me.

Eteri as well thought that men drank rarely, because alcohol cost money and people were poor. She speaks about her spouse, who was forced to quit smoking due to the expense. Izolda (age 33) felt that drinking had decreased, at least concerning her own husband. Commenting on her husband’s drinking behaviour before displacement, she states, “my husband was out all the time. […] He was mostly out drinking, having fun. He didn’t even think about his family. Well, he was different, I don’t know… and for the most part, I had to do everything.” However, her husband was now more active in work, which Izolda attributes to her own declining ability to physically work the way she used to before displacement.

### 8.3 Making sense of coping: How women explain differences in coping

The dual factors of increased exposure to combat and destruction wrought by the Ossetian and Russian forces, along with the loss of ancestral land perceived to be central to men’s identities, were referenced by women as leading men to cope with the war and displacement in ways different to their female counterparts.
Such differences in coping were commonly attributed to the different experiences and perceptions of the war, which varied between men and women. Most notably, men’s roles as combatants and defenders of land during the war, and the perception of men’s innate status as the native inhabitants of the land, were cited as leading to different coping strategies in the post-war period.

8.3.1 Roles during the war

Male civilians were often tasked with protecting villages from attack, monitoring the movements of Russian and South Ossetian forces, and directing their friends, families, and neighbours if and when they should leave their villages. In addition to fulfilling informal sentry positions, many men fought as combatants on the Georgian side. In contrast, women were largely responsible for keeping children and other vulnerable family members safe during the flight, and securing a place for these dependents to stay. Marina, whose husband fought on the Georgian side, reflected “He had more [mental] problems [than me] because it was him, who looked in the face of death.” Marta too felt that her soldier husband’s war trauma was different to her own, explaining “He has witnessed more horrible things than I have. He witnessed all those bombings and helicopters flying over him when he was driving his KAMAZ [a truck].”

While most women felt that male exposure to combat had resulted in men suffering more severe mental health problems after the war, others felt that repeated exposure to combat over years of civil unrest made men more accustomed to dangerous situations and less prone to negative mental health outcomes after the war. Elene, whose husband was among the combatants, noted: “Well, it was hard for both [men and women] but I think it was harder for women because men are used to the bullets and stuff. My husband spent all his time in the trenches guarding something.”

In the days leading up to the war, there was a widely-reported tendency for civilian men to stay behind while the rest of the family fled, in order to care for domestic animals and look after and guard the property. Marta’s father, for instance, initially stayed behind. She explains his motivation: “He used to say that he wouldn’t let the enemy have his village.” Nana’s account below was typical:

I left together with my daughter. My son and spouse stayed there. My son fled the village too, later, but my spouse didn’t want to leave the house. We owned livestock, poultry, everything… Our house was full and so, my spouse refused to leave. All men stayed there.
Because they did not flee alongside the women and children, many male civilians witnessed first-hand the destruction of homes and villages, along with risking enormous physical danger. Such was the case with Nino’s father in law:

I left [my village] earlier. My father-in-law stayed there for those 9 days when the war was going on. He slept in a tunnel. There was a big tube under the highway in front of our house and he slept there for those 9 days as he did not leave the cattle and the house. He witnessed everything, the coming of the troops in our village. Then a shell exploded in front of our house and he witnessed that too. Window glass shattered because of the explosion and that glass fell on him. Our men underwent a very bad period.

Despite the fact that these IDPs had tolerated decades of violence and instability, and many civilian men risked (and in some cases, lost) their lives defending their property, some women perceived that other Georgians felt the men had given up too easily. Marta explains, “people living in the [the city of Gori] call [male IDPs] rabbits. They keep telling us that we ran away from there like rabbits and left our houses to them.”

8.3.2 Men’s ancestral ties to the land

Many women felt that men’s war-related property losses were more acute than women’s because of the latter’s ancestral ties to the land. In Georgia, traditional societal expectations oblige women to relocate to their husband’s town or village of origin when they marry, which means that not all of the women interviewed were from South Ossetia originally. Eliso, who had ‘married’ in South Ossetia but was not from there originally, stated,

It’s hard for us women but for men, it’s even harder because they were born and raised there. I got married there 15-16 years ago and I was so used to it and I miss and love that place so much. Can you imagine how a person born and raised there feels now? The ones who spent their childhood there. Of course, it’s harder for them. […] [M]y spouse dreams about his village every night and every day he tells me where he was, what he did in his dream. So, it’s harder for them [men].

Tamriko, who had ‘married’ in South Ossetia but was from elsewhere, concurs: “My spouse, for example, his father is buried there. It was his homeland. I got married there. So, it was harder for my spouse. He was raised there.” However, even women who were originally from South Ossetia viewed the loss of territory as a larger loss for men than for women. Tatiana, who was from South Ossetia originally, viewed the loss as a much more fundamental affront to males than to females. This is reflected in her response when asked if she hoped to return to her village. She queried whether men would be able to accept South Ossetian neighbours after what had transpired during the war (most notably, the destruction of Georgian houses and villages). The ability of women to accept Ossetian neighbours was not touched upon, though presumably women from South Ossetia
(including Tatiana) would have felt the loss of territory as deeply as men if it were simply about being ‘from there.’ She ponders,

This living next to Ossetians… Will our men be able tolerate it? I don’t know. After what they have done to us [...]. My spouse tells me that he wants to live there anyway, despite the fact that everything is ruined there. But I don’t know, I don’t think that men are able to tolerate living next to Ossetians. Especially considering the fact that they are so nervous and worried now. […] So, no, they won’t tolerate living next to them.

Medea, also originally from South Ossetia, hypothesizes why some women were not as wounded by the loss of territory as were men:

Well, what they lost during the war belonged to both of them [men and women], of course. But for men… it was the place, where they were born, where they started walking, where their ancestors lived. It was their native land. Some women got married there and they weren’t even adjusted to that environment. Some of them still don’t realize that they lost something that was theirs too. […] I’ve heard many of them say that they wouldn’t go back. But I will go back. I really love that place.

The disruption to ancestral legacy imposed by displacement, referred to by Medea above, was perceived by the women as an affront to their male loved ones. In particular, the inability to visit graves of deceased family members buried in South Ossetia was viewed as a denial of a fundamental right due via ancient historical lineage, and contrary to Georgian Orthodox rituals (see Chapter 4). Irma pointed out that the impossibility of passing on the land to new generations was also troubling for men:

My spouse worries a lot. He keeps talking about the place he was raised in. He wants his grandchildren to know about it. It’s harder for him than it is for me because I got married in that village and I wasn’t born there.

8.4 Roles in flux or more of the same?

There was a strong sentiment that men, in the post-displacement period, had abdicated roles perceived to be ‘male,’ most notably, earning money to support the family, but also certain chores. Women’s emotional reactions included disappointment, frustration, anger, contempt, and condescension. Sopio states, “Men literally do nothing. They don’t have jobs. If they don’t do what they have to, like dig a garden or cut wood, what else can they possibly do for you?” Giuli states, “In spite of everything, I think that it’s the man’s responsibility to support his family. It’s hard to deal with an unemployed man.” Natia too reproved men for not working and fulfilling the breadwinner role. She opines, “They are men and they should support their families. At least, in Georgia. The situation is very bad in this respect.” Such a viewpoint was upheld within the context of widespread unemployment endemic not only in IDP settlements, but also in rural Georgia more broadly.
Women reproached men for not fulfilling ‘male’ roles beyond wage earning, as shown in Makvala’s statement below:

There are many families, where men are so lazy and women are more hard working. And they do men’s work too. I don’t know, these men are so desperate. When I look at them, I tell them, ‘Move, you, scoundrel, why should you wife carry brushwood and fire up the stove for you! Move and bring it yourself, are not you a man??’

Nino reflected on her own husband’s lack of adherence to traditional roles, relating a recent anecdote wherein she and her young son gathered and transported brushwood to the family home, because her husband would not do it.

Despite widespread underlying adherence to patriarchal roles for men and women (described in section 8.1) and the frustration expressed by women at men for falling short of the breadwinner role, there were plenty of statements and examples arising from the interviews which indicated a willingness amongst women (and men) to contravene certain traditional roles in the post-war period. For instance, many women sought and took on paid employment outside the home in the form of temporary agricultural work. Such jobs typically involved long hours of manual labour in fields and gardens, consisting of planting seeds or harvesting produce. Surprisingly, such temporary jobs were viewed as more appropriate for women than men despite the widely-reported idea that activities such as tilling the ground and harvesting produce were ‘men’s work.’ Izolda, who had previously taken a temporary position harvesting garlic, explains why her husband did not take on a similar job: “Mostly he is at home because these jobs are for women and there is nothing to do for men.” Marina explains,

In general, people living in our settlement are unemployed and the population of the village hires them sometimes. They have cherry gardens and they call people from our settlement when they need to harvest them. Usually women do it. There are some seasonal jobs in the village sometimes and women from our settlement take them.

Men’s pride was also invoked as an obstacle in men taking on temporary agricultural jobs. Medea recounts,

Men have this pride that doesn’t let them… Well, how to say it... There was a time when employers were trying to humiliate us, when we were looking for a job: “We are tired of you, IDPs”, “Stop telling us about your problems”. People were like this in Gori. So, men thought it was beneath their dignity… Women are able to raise an objection, tell them something in return… Men can’t do that.
Women taking on heavy agricultural work indicated a shift in acceptable roles for women, spurred in part by the lack of ‘appropriate’ employment opportunities for men. Guranda’s statement below describes how traditional roles for men and women have changed after the war due to lack of employment opportunities for men:

[C]onsidering the fact that mostly men earn money for their families, while women decide how to spend that money, the main problem was the fact that there were no jobs for men and it was very difficult to make this scheme work.

The shift in roles for men and women is mentioned as well by Lia, who explained: “when a man is unable to realize his potential and unable to adapt to the new environment, women have to take it upon themselves because someone needs to support their families.” Vardo is one woman who had taken it upon herself to support her family. She describes this change in roles: “I used to depend on my spouse in everything. I thought that he was in charge of everything. But here, I couldn’t depend on him, and I felt that I had to pull myself together and be stronger.”

Women specifically cite men’s coping strategies, most notably alcohol use, as expediting this shift in roles. Isidore spoke about her neighbour, whose husband Isidore considered to be an alcoholic. Because of this man’s drinking, Isidore’s neighbour shouldered the entire responsibility of caring for their garden and thus supporting the family. She explains,

Her husband is always drunk, he’s an alcoholic, and the woman does what her man should do. She fenced their garden herself, she did everything. Now she tills the ground, plants seeds… Her husband is mostly sleeping. After he drinks, he spends a week in bed.

Vardo had witnessed women doing tasks such as manual labour and gathering firewood while their husbands drank. She shares,

Many times, I’ve seen women going to the forest. […] They used to go there to cut down these shrubs, while their men were at home drinking with their buddies. Even when people from Skra needed someone to hoe or do other similar things, men used to stay in and drink, while women…they used to hoe or harvest cherries.

Lali reported that women in her settlement seemed to be compensating for men’s abdication of their role as provider: “Many men are unemployed here; they stand in the street and are alcoholics. Accordingly, women have to do everything. I see women everywhere. They work, they take care of their families, kids.”
Despite the noted trend of women taking on men’s roles outside the domestic sphere, there was little mention of men taking on roles within the household as their female counterparts absorbed formerly ‘male’ roles. This indicates the large degree to which women continue to honour the prescribed roles for men and women in Georgia, with women continuing to carry out their traditional tasks even as some men failed to live up to their traditional responsibilities.

8.5 Instances of challenges to traditional roles for men and women

Though women largely adhered to traditional gender roles and even stepped into men’s roles when necessary for the family, instances of dissatisfaction with and challenges to this arrangement were evident throughout the interviews. A few women opined that women should be given more power over employment opportunities. For instance, Jana, who worked as a coordinator for a women’s NGO, noted,

I would be glad if more women were employed. […] Most of the women here are only involved in household activities. A lot of paid trainings are available nowadays and I think women should definitely attend them and gain education. Being at home always affects negatively on women’s [mental] condition.

Though Marta recognized that she was quite constrained by her husband in terms of capitalizing on employment opportunities, she felt that not all women faced the same restrictions:

My husband, for example, won’t let me wander the streets looking for a job. Even if there were jobs. He won’t let me work in night shifts. Neither as a cleaner. As I’ve already said I’m not picky. Some women, on the other hand, won’t even seek their husband’s permission. They do what is best for their families. I’m more dependent on my husband in this respect than many of my female neighbours are. Had I been more independent, I may have had less problems and more money to spend. But I try not to make my husband angry. He doesn’t want his wife to… I don’t know. I know it’s not right, when there is trust and love between us. It’s about trust. But he’s a bit jealous and well, you know…Jealous men don’t let their wives… Well, he doesn’t let me do many things.

Stories of the curtailing of men’s power over decision-making were imparted in the interviews. Nestan recounted an instance where she challenged the decision-making power traditionally held by men, by influencing the provision of aid distributed to her IDP settlement. She shares,

When we got here, there was a food program by the UN and [UN employee] visited us, she was their director or something. [UN employee] told me that she was going to help us financially. However, she didn’t know to whom to give the money – to men or to women – and she asked me for an advice because I was a housewife. I said: ‘To women, of course’ because women know the family budget better: what they need, which products to buy, which detergents and so on – the list was long. There was my spouse and they asked him what he would buy if they gave him money and he said beer. He likes beer very much. After that they helped IDPs financially many times and each time, money was transferred to women’s plastic cards. Men went crazy.
Though Nestan did appeal to traditional norms by phrasing her response as fitting in with women’s budgeting responsibilities, it also represented a challenge to men’s decision-making power by placing the monetary assistance directly into women’s bank accounts rather than men’s.

Challenges to traditional roles for men and women were frequently veiled in disapproving comments about men’s coping strategies (which are largely shaped by traditional roles prescribed to men and women). For instance, Tamar and Nutsa challenged men’s reliance on wishful thinking and ‘living in the past,’ thereby challenging men’s prerogative to prioritize their focus on past losses over new circumstances requiring attention. Tamar, who was interviewed along with her mother Nutsa, reported that her mother had repeatedly challenged Tamar’s father on his alcohol use and his perceived unwillingness to invest effort into building a life in their settlement. Tamar shares, “My mother tries… She is always fighting with him telling him that we need something and that we need to move on but he tells her that we don’t need anything. He is strange. My mother is a rebel.” Lali too challenged her husband’s fixation on return to South Ossetia, relating the following after she was asked if she hoped to return:

My spouse hopes that we will return but I’m afraid because there I will have to start everything from scratch. […] But if my spouse wants to return… I don’t believe in it… I don’t think we will return. […] I still think that I will achieve something [here]. I’m not going to give up because I want a better future for my kids. I really want it. I want to extend this little cottage for example or do something else for my children. I keep trying.

Similarly, Tatiana pointed out that she was against her spouse’s wish to eventually return to their village in South Ossetia. She explains, “We’ve already planted trees here. We’ve managed to do this, that. We are more or less used to this new life here. We managed to cope with the displacement somehow. And now you want me to move from here back to the gorge? And start everything anew there?”

Dissatisfaction with the traditional roles prescribed to men and women were evidenced as well in anecdotes about women divorcing husbands who were alcoholics, despite the fact that this is strongly discouraged by the Georgian Orthodox faith. Although the interviews were replete with instances of women expanding their roles to become breadwinners, there were instances to the contrary. One respondent, Isidore (aged 57), reported that her husband actually had expanded his role after the war, to cover much of the household duties and childcare. As Isidore also reported problems with ‘nerves’ and physical ailments resulting from the war and the settlement environment, this change in
role stemmed from an inability to physically or mentally fulfil the expected women’s roles in the displacement era. As she could not afford to purchase drugs prescribed by a doctor for her conditions, Isidore’s ailments were compounded by poverty. She reported that her husband now drank less than he did before the war, as he now needed to work more due to Isidore’s poor health.

8.6 Chapter summary

This Chapter outlines the differences, as understood by women, in internally displaced men’s and women’s coping strategies. The respondents felt that they engaged in more support seeking and problem solving (including role expansion) activities, and different distraction techniques, than their male counterparts. Women hypothesized that these differences may stem from men’s roles as combatants and protectors of the land during the war, and to male ancestral ties to the land lost. Though there are instances of challenges to the prevailing traditional roles socially assigned to men and women, the findings in this Chapter support the contention that women’s and men’s diverging coping strategies largely accord to and perpetuate traditional norms. Though women have challenged traditional norms by assuming the breadwinner status previously within men’s domain, obligations in the domestic sphere remain unchallenged. Thus, the respondents are caught in a ‘double bind.’

In the next Chapter, I discuss the findings which were presented in Chapters 6, 7, and 8 within the backdrop of the historical context (Chapter 4), the findings of the systematic literature review (Chapter 3), and the theoretical concepts (Chapter 1).

Chapter 9: Discussion of research findings

Below, I first return to the theories touched upon in Chapter 1, to suggest how these relate to the findings of this thesis. I then summarize the findings from Chapters 6-8 and contextualize the findings within the findings of the systematic literature review and other literature. I close the Chapter with a comment on the frameworks used in the thesis, and some recommendations.
The losses experienced and coping strategies used by the internally displaced Georgian women in this thesis reflect the chaotic context created in the late 1980s into the post-Soviet era. Nazpary (2002)’s concept of absolute disorder is certainly relevant, as the women describe tumultuous life histories and struggling to subsist on very limited means in a chronically unstable and unpredictable environment. Though chaos is not viewed as acceptable by the women, it has in many ways become part of the social fabric as theorized by Das (2006). The relative ‘normalcy’ of conflict and chaos in some areas (like South Ossetia) is instructive for researchers to take a long view when considering the struggles and strengths of conflict-affected persons. Especially among the younger women in the sample, it appeared there was rarely a calm moment even prior to the displacement, making the idea of crisis as abnormal somewhat irrelevant.

However, one should be careful not to underestimate the deteriorative effect the displacement has had on the women, even though they have been exposed to chronic instability. The loss of land for persons who depend on land for survival is disastrous. This loss is compounded by the sentimental and patriotic meaning attached to the land. Herein lies the fundamental difference between the losses experienced by the IDP women in this study and other economically marginalised groups in Georgia. Though many in Georgia have been made poor and dispossessed by the dissolution of the USSR, IDPs struggle as well with the unique loss of homeland and source of survival.

Though the majority of the participants openly spoke of the chronic violence they experienced prior to displacement, almost without exception they reported that they wished to return to their homes. Though occasionally nostalgia for the Soviet era came across in the interviews, nostalgia for the homeland (despite the chronic unrest) was a much stronger theme. Even though the IDPs had experienced in some cases extreme violence, they almost all believed that they were better off financially in South Ossetia. It is this draw, along with the sentimental attachment of homeland amongst a group with strong ancestral ties (see Chapter 4) which ultimately seems to outweigh the physical danger. This may indicate the level of normalcy of violence in their lives, or Merl (2011)’s observation that people construct their past as they would like it to have been.
Regardless of what we make of the sample’s strong attachment to the idea of return, it is likely that interventions following a psychosocial approach will be more appropriate than those coming from the trauma standpoint. The sample had lived through decades of unrest, and in many cases were rebuilding their lives for a second time. Though undoubtedly some suffered from mental illnesses defined from a trauma approach, the reality was that majority had been adjusting to violent circumstances for some time. In the relatively stable IDP settlement context, there was a clear and overwhelming need for jobs and purposeful activity. As mentioned in the recommendations below, it is recognized that job creation schemes and the regeneration of the economy are difficult within the context of a state struggling to maintain stability. However, this does not detract from the validity of the stance that employment would have beneficial impacts not only on economic aspects of life but on physical and mental well-being, and social connectedness.

Aspects of the psychosocial approach particularly relevant for this thesis include the long-term focus and attention to daily stressors caused by the effect of conflict. Though the hardship and trauma associated with the war and flight were certainly mentioned by the women who participated in this study (as well as issues which may be symptoms of depression or anxiety disorder), the daily challenges associated with displacement (loss of income, belongings, and ability to grow food, and decreased opportunities for children) were much more pronounced. As noted by Miller et al. (2008) and van Ommeren et al. (2005), the mental health impact of armed conflict is mediated by the stressful social and material conditions it creates. As above, this finding speaks to the need for interventions coming from a psychosocial standpoint rather than a trauma standpoint including providing jobs, reuniting families, and creating effective justice and education systems (Silove, 2005a).

9.1 Resource loss amongst IDP women in Georgia

Chapter 6 provides a broad context of the experiences and challenges faced by the respondents in describing the waves of material and psychosocial losses amongst Georgian IDP women and their families resulting from the 2008 war with Russia. I drew
upon Hobfoll’s conservation of resources (COR) theory (1989) to interpret the stories of loss shared by the women in this sample. The COR theory illuminates the process of loss rooted in displacement, as a phenomenon which unfolds over time producing far-reaching outcomes on the lives of the women in this study years after the war has ended. Displacement and the loss of property it entailed led to the loss of livelihood, which led to the loss of social networks, mental and physical health. This cascade of losses is consistent with the concept of a resource caravan, as the loss of an important resource (property) had a comprehensive, multilevel impact on other resources (Hobfoll, 2012). The linkages between initial war-related trauma, and subsequent resource loss, are depicted in Figure 9 in Chapter 6, section 6.6.

Traumatic experiences endured during and immediately after the war (including exposure to combat, separation and deaths of loved ones, and food and shelter difficulties) were cited by the respondents as leading to mental health issues such as neuroticism and aggression. This finding is consistent with Araya et al. (2007b), who found that trauma during flight was associated with increased mental distress among displaced Ethiopians. However, the respondents in the current study reported additional factors linked to poor mental health beyond the trauma associated directly with the war. The circumstances produced by the war (notably, prolonged displacement, poverty, and its effects) were a profound source of despair and worry in addition to war-trauma. Elsewhere, Georgian IDPs have referred to the loss of their native land as a ‘lost paradise,’ demonstrating a strong attachment to their villages of origin (Makhashvili et al., 2010). The loss has resulted in bitter feelings of deprivation, and a belief that they had been betrayed by their government who did not do enough to prevent the displacement, provide them with quality housing, or help them to return home.

The multiple paths to mental distress represented in Figure 9 (Chapter 6, section 6.6) have been noted in other war-affected groups. For instance, in her study on Mozambican refugee women, Sideris (2003) found that the critical loss of access to land and traditional economic roles was linked to subsequent losses of self-worth, confidence, and status. A study on internally displaced children in Angola found that the loss of homes and farmland increased poverty, decreased social status, and led to feelings of hopelessness (El-Bushra, 2000). In a study on social determinants of health among IDPs in northern
Uganda, Roberts, Ocaka, et al. (2009) found that displacement from property led to impoverishment, which in turn led to mental health losses, with a similar pattern observed amongst IDP Palestinian women in the West Bank (Al-Khatib, Arafat, & Musmar, 2005).

Such findings (both in this research in Georgia, and studies from elsewhere) resonate with Miller and Rasmussen (2010)’s contention that the stressful social and economic conditions following conflict have significant impacts on mental health and well-being, in addition to direct exposure to violence during war. Many of the losses recounted by the respondents in the current study manifested in innumerable daily stresses due to, for instance, cooking in an inadequately-stocked kitchen (to choose but one of a multitude of possible examples). The loss of kitchenware and appliances represented the loss of modern conveniences and ultimately, the loss of time, as women spent inordinate amounts of time handwashing garments and using the only pot repeatedly in order to prepare family meals (the lack of pots making it impossible to speed up the process by using several pots simultaneously). The daily stressors suffered over the effect of conflict (rather than on the conflict alone) on income underlies the relevance of the ‘psychosocial’ approach to mental health needs as described in Chapter 1 (Miller et al., 2009; Miller et al., 2008; Miller & Rasmussen, 2010; Miller et al., 2002; Rasmussen & Annan, 2010; Summerfield, 1999).

A multiplicity of paths leading to the loss of social networks was evident in the current research, as depicted in Figure 9 (Chapter 6, section 6.6). The IDP settlements were viewed as insecure and unfamiliar by many respondents, a far cry from pre-displacement villages which were characterised as cohesive and familiar, if not always physically safe due to decades of unrest. A lack of income to obtain gifts necessary to bring when visiting family presented another barrier to maintaining contact, along with the inability to pay for transportation to visit family. These difficulties, along with the separation of extended family members across different IDP settlements, were often implicated in the deterioration of social networks. As Miller et al. (2002) argue, temporal and historical aspects are important to recognize with regard to the refugee experience. From a psychosocial perspective, the evaluation of current social support network is inevitably compared to previously strong networks in villages. Similar to some of the women in the present study, Bosnian refugees in the USA frequently contrasted their weak post-
migration social networks to the rich social networks to which they belonged prior to the war. However, it is important to recognize that not all respondents in this study felt a loss of social networks; some had built supportive networks post-displacement. This is consistent with findings on Congolese, Burundi, and Rwandan refugees in Tanzania, who successfully formed new relationships post-displacement (especially with women in their host country) (Willems, 2005).

Physical health losses also emerged at several points in the cascade of losses occurring as a result of displacement (see Figure 9, Chapter 6, section 6.6). Such losses were observed to result from the conditions at IDP settlements, with dampness, mould, and poor water quality blamed for causing respiratory and joint problems. Physical health ailments were also seen as resulting from mental health woes, most commonly, to excessive worrying, and to financial woes due to the inability to purchase medications and medical consultations. Roberts, Ocaka, et al. (2009) too observed these pathways to poor physical health amongst IDPs in northern Uganda, and participants in Eggerman and Panter-Brick (2010) drew a link between poverty and poor physical health. Conflict-affected Lebanese families reported significant financial problems due to the civil war in Lebanon, which led to a reduction of food consumption and physical declines amongst mothers especially (Farhood et al., 1993).

In this study, the losses of livelihood and physical and mental health are interrelated and form a loss spiral. Loss of livelihood led to a decrease in physical health due to the inability to afford medical care and mediations. Poor physical health was also viewed as caused by poor mental health, with ‘worrying too much’ commonly perceived as the cause of health problems. The inability to make a living also impacted on mental health. For instance, constant worrying about financial problems, or ‘giving up’ on trying to address money issues were commonly reported. A similar observation is reported in Heath et al. (2012) in their study on Palestinian adults, who noted that resource loss and psychological distress each exacerbated the other, with both becoming worse over time.

The widely-reported lack of access to health services reported by the participants exacerbating losses in physical and mental health. The lack of access to mental health
services amongst conflict-affected Georgians has been reported elsewhere. For instance, Chikovani et al. (2015) found that conflict-affected persons (including IDPs) in Georgia had limited access to mental health services. As discussed in Chapter 4, section 4.3.2, the privatised health care system in Georgia relies largely on out-of-pocket payments from citizens to fund services (Rukhadze, 2013), which acts as a deterrent to citizens of low socio-economic status from seeking medical treatment and accessing pharmaceuticals (Karavasilis, 2011; Skarbinski et al., 2002). This barrier seems to persist even though insurance is covered for household living below the poverty line (Chanturidze et al., 2009; Rukhadze, 2013), which includes IDPs. Makashvili and van Voren (2013) further argue that there is a lack of outpatient psychiatric clinics in rural Georgia, and existent clinics tend to provide poorer quality care than clinics in urban areas.

9.2 Coping strategies of IDP women in Georgia

The compendium of women’s coping responses to the 2008 war and displacement, as presented in Chapter 7, are interpreted according to a typology of coping domains (encompassing problem solving, support seeking, escape-avoidance, distraction, and positive cognitive restructuring) suggested by Skinner et al. (2003). This typology was also applied to the 50 studies which examined coping amongst conflict-affected populations residing in LMICs systematically reviewed in Chapter 3 (see also Seguin & Roberts, 2015), which are drawn upon to contextualize the findings of this research.

9.2.1 Problem solving

Problem solving coping strategies were the most common types of strategies reported by the respondents. This included such activities as seeking employment and working, budgeting, seeking alternative sources of income, and adopting new roles and responsibilities. Engaging in such activities were reported as necessary to survive, and generally yielded a sense of hope and relief amongst respondents. The systematic literature review on coping strategies used by conflict-affected persons in LMICs presented in Chapter 3 found that problem-solving coping tactics were largely protective for mental health (Seguin & Roberts, 2015).

Many women in this study were extremely eager to take on petty trading, temporary work, and work perceived as unappealing to address financial difficulties. This resonates within
other studies on war-affected persons residing in LMICs. A study on Liberian refugee women in Ghana observed that women were engaged in ‘inconsistent subsistence’ economic activities, comprised of tasks such as hair-braiding, selling water and produce, and washing the clothes of others in order to generate income to survive (Hardgrove, 2009). The majority of these women were unable to access work similar to what they had previously done in Liberia, especially those women were trained professionals such as teachers and nurses. This is similar to the findings of the current study, which found that women who had previously worked as teachers were largely unable to be absorbed into schools in or near their IDP settlements (see Chapter 7). For those who managed to find teaching jobs, wages were very low.

Along with striving to work, the respondents in this study attempted to address financial difficulties through attending education and training programs, and volunteering, with the view that learning new skills could lead to future employment. This phenomenon has been widely reported amongst conflict-affected women in other settings, including Ugandan (Bennet et al., 1995), Liberian (Hardgrove, 2009), and Afghani (Kassam & Nanji, 2006) refugees in LMICs.

9.2.2 Support seeking

Seeking social support was quite a common coping strategy, with many women in this study turning to a variety of sources of social support (neighbours [both old and new], family, and friends, co-workers, and priests), in the face of losses to social networks described in section 9.1 above. Overall, the systematic literature review (see Chapter 3) indicated that support seeking was protective for mental health amongst other war-affected populations in LMICs. The practice of reaching out to family and friends in coping with difficult circumstances is a sentiment widely reported across studies on women’s experiences with war and conflict (Bennet et al., 1995; De Vries, 2001; Farhood et al., 1993; Klaric et al., 2008; Lopes Cardozo et al., 2005; Lopes Cardozo, Talley, Burton, & Crawford, 2004), and in studies on post-disaster contexts more generally (Bonanno, Galea, Bucciarelli, & Vlahov, 2007). Amongst the Georgian IDPs in this study, relationships with cherished family members were sometimes held up as the only worthwhile thing left in life. The respondents frequently reported turning toward children for support, who they viewed as adding meaning to their lives. As Makashvili et al.
(2010) notes, in the collectivist culture of Georgia, children are viewed as the most important part of the community. This resonates within other studies on war-affected citizens, including Bosnian (Bennet et al., 1995), Tibetan (Ruwanpura et al., 2006), and Ethiopian and Eritrean (Nordanger, 2007) refugees in LMICs.

Reaching out to peers is also commonly reported in other studies on war-affected groups. In the current study, the support from ‘old’ neighbours (i.e., neighbours from their pre-displacement village) was of paramount importance, as reflected in other studies (Almedom, 2004; Kassam & Nanji, 2006). However, reaching out and developing new networks has also been noted in the current sample and amongst other samples (Allden et al., 1996; Badri et al., 2013; Kassam & Nanji, 2006). Drawing support from priests and other religious figures was frequently reported by the respondents in this study, mirroring reports across the coping literature on war-affected persons in LMICs (Almedom, 2004; Hardgrove, 2009).

Only a minority of the respondents mentioned reaching out to mental health counsellors, psychologists, or psychiatrists as strategies to deal with their problems. This findings is reflected in other studies which suggests that appealing for social support from friends, family, neighbours, and community members is preferable and a more common way for war-affected persons in LMICs to deal with trauma and loss than specialized services (Ruwanpura et al., 2006). As Somasundaram (2010) states, social support from family and reliance on social networks more generally is a vital protective factor against poor mental health, especially in non-western more ‘collectivist’ orientated cultures. Collectivist cultures traditionally are family and community-oriented, with the boundary between individual and the outside blurred, with individual health inextricable from community health (Somasundaram, 2010).

9.2.3 Escape-avoidance and distraction

Distraction techniques reported by the women in this study included reading and watching TV, as well as doing housework. They also distracted themselves through visiting others (which overlaps with support-seeking strategies), and seeking employment and working, and gardening (both of which overlap with the problem solving domain) (see Figure 10, Chapter 7 section 7.3).
Some women in this study reported that they used escapist or avoidant techniques, such as giving up on problems, isolating themselves both physically and emotionally, leaving a stressful environment, crying, and engaging in wishful thinking. These tactics represent attempts to avoid unwanted internal and external experiences. It has been argued that avoidance may result in relief from distress, but the beneficial effect is temporary (Molina et al., 2010). Moreover, avoidance has been linked to the development of anxiety among general populations (Feldner, Zvolensky, Eifert, & Spira, 2003; Karekla, Forsyth, & Kelly, 2004). The systematic literature review presented in Chapter 3 showed that escape-avoidance coping was largely associated with negative mental health outcomes (Seguin & Roberts, 2015).

It has been suggested that avoidance coping resonates within ‘typically Georgian’ ways of dealing with painful memories. Makhshvili et al. (2010) shares a Sufi story which is well-known in Georgia, which represents the tendency against disclosure of traumatic events in favour of concealment. The story is paraphrased below.

Master Nuri, a wise and respected man, was married to a woman much younger than he was. Once, one evening, when he returned home earlier than usual, his faithful servant went to him and said: “Master, your wife is behaving strangely. She is in her room now. There, she has an enormous trunk that belonged to your grandmother. It is big enough to place a man inside. […] She didn’t allow me, your old and faithful servant and advisor, to open it,” the servant added. Nuri went to his wife’s room and found her worried-sitting in front of the huge wooden trunk. “Won’t you show me what’s in that trunk?” he asked. “This is all because of the old servant’s suspicions, isn’t it? Don’t you trust me?” his wife said. “Isn’t it easier to open the trunk without enquiring what caused my interest?” suggested Nuri. “I fear, this is not possible” replied his wife. “Why not, is it locked?” “Yes.” “And where is the key?” The wife showed him the key and said “Tell the servant to leave and then you can have it.” The master ordered the servant to go. The woman passed the key to her husband and left in confusion. Hours passed as Nuri was thinking. Then he called his four gardeners. In the dark, they took the trunk to a remote part of the garden and buried it without opening. Since then, no one has spoken of it anymore (Idris Shakh, 2000, as cited in Makhshvili et al. (2010).

As Makhshvili et al. (2010) comment, in Georgian culture it is sometimes not considered beneficial to ‘open the trunk’ which may contain painful memories of traumatic experiences, as bringing such memories to the fore may cause greater harm than relief.

9.2.4 Cognitive restructuring

A range of cognitive restructuring techniques were reported by the respondents, including downplaying losses by comparing one’s hardships to the lives of others, focusing on
positive aspects of one’s life, reflecting on previous successful efforts to meet challenges, focusing on the future, and drawing upon religion in a variety of ways.

Though women did not explicitly state that they coped by comparing their hardships with the (judged-as-worse) hardships of others, this through process was revealed through their recounting of their own difficulties, when they would often state ‘but others have it much worse.’ The tendency to downplay one’s own stressors vis-à-vis others’ stressors has been observed elsewhere (see Allden et al., 1996; Nordanger, 2007; Ruwanpura et al., 2006).

Focusing on mental strength was another cognitive restructuring coping technique reported by the sample. Women were proud that they had been able to meet the challenges that life had presented to them so far, which contributed to a sense of confidence as they reflected on how far they had come. The discovery of mental strength helped them cope as they faced new challenges, supporting them to take on new roles and responsibilities. Such a phenomena has been observed elsewhere amongst war affected groups (Allden et al., 1996). Focusing on the future rather than the present was also commonly reported amongst the respondents, reflected in statements on hopes for children’s prospects, and on the responsibility felt to create a better future for the benefit of children. Other research has observed a similar sentiment (Badri et al., 2013).

Coping through faith was revealed as a nuanced process, with several aspects of religion playing a role. For instance, respondents reported that faith enabled them to find meaning to hardships and/or to war-related events. Several women viewed the war and displacement as ‘God’s plan,’ assigning an inevitability to the events which conferred comfort. The meaning-making function of faith-based coping has been reported elsewhere (Ebadi et al., 2009; Eggerman & Panter-Brick, 2010; Hardgrove, 2009; Thomas et al., 2011). Besides assisting respondents to assign meaning to traumatic events and stressful circumstances, faith also imparted a sense of strength to respondents. Numerous respondents shared sentiments such as ‘God gives me strength’ and ‘God makes me stronger,’ reflecting research findings amongst other female (Badri et al., 2013) and mixed-gendered war-affected groups in LMICs (Ruwanpura et al., 2006).
9.3 Differences in coping between men and women and shifting roles

As demonstrated in the literature review in Chapter 3, there is some evidence to suggest that conflict-affected men and women in LMICs cope in different ways. This is likely due to several factors, including the higher burden of CMDs experienced by women in these settings (Ahern et al., 2004; Farhood et al., 1993; Karunakara et al., 2004; Richards et al., 2011; Roberts, Damundu, et al., 2009; Roberts et al., 2008; Roberts, Ocaka, et al., 2009; Sabin et al., 2003; Sachs et al., 2008; Steel et al., 2009; Thapa & Hauff, 2005; Turnip & Hauff, 2007; Yamout & Chaaya, 2011), the different types of trauma suffered by women versus men (Dahl, Mutapcic, & Schei, 1998; H. Johnson & Thompson, 2008; Mollica et al., 1987; Somasundaram, 1994), differences in resource availability (Annan & Brier, 2010; Feseha et al., 2012; Kottegoda et al., 2008), different hardships experienced by men and women in post-conflict settings, including intimate partner and familial violence faced by women (Annan & Brier, 2010; Feseha et al., 2012; Kottegoda et al., 2008) and differences regarding the manifestation of trauma, with men more frequently turning to substance use than women (Ahern et al., 2004; Ezard et al., 2011; Gibbs, 1989; Roberts et al., 2011; Somasundaram & Sivayokan, 1994; Stewart, 1996; Weaver & Roberts, 2010).

9.3.1 Problem solving

The differences in coping between men and women relayed below by the respondents are related to shifting roles. Many of the women interviewed felt very strongly that their roles in the displacement era had expanded, with some reporting that they had taken on the breadwinning role in their families. This relates to reported differences in problem-solving techniques. The study respondents often stated that they were much more willing than their male counterparts to take on petty, temporary, and unappealing work. This theme echoes accounts given by Georgian women displaced from Abkhazia and South Ossetia by the civil wars of the 1990s (see Chapter 4, section 4.4.4) (Buck et al., 2000; Pol, 1999). For instance, a study on the 1990’s Georgian IDPs observed that women worked determinedly to provide for their families, turning to petty street trade and menial labour. These activities formed the backbone of the unofficial or grey-market economy which flourished during the 1990s (as described in Chapter 4, section 4.3.3) (Zurikashvili, 1998). Gender roles changed amongst IDPs in rural areas as well, with women making up the vast majority of seasonal agricultural workers in tea plantations and corn farms in western Georgia in the mid to late 1990s (Buck et al., 2000). Male counterparts to these
women were seemingly unwilling to engage in these income generating activities, instead reportedly idly passing time loitering in collective IDP centres with other men, drinking alcohol, talking, and playing games such as backgammon (Foundation for the Development of Human Resources, 1997; Pol, 1999; Women's Commission for Refugee Women and Children, 1998). A survey in 1998 concluded that women provided the main sources of income in 72% of IDP families in Georgia (Zurikashvili, 1998). These trends have again become apparent with IDPs displaced in the 2008 war.

Women have interpreted men’s behaviour in the wake of the civil wars of the 1990s as stemming from men’s ‘double traumatization.’ Through women’s eyes, IDP men feel personally responsible for losing the war (and the territories or Abkhazia and South Ossetia), houses, personal property, and the lifestyle associated with these assets, and felt guilty for not doing enough to prevent their family’s exile from the break-away territories, and the destitution which followed (Buck et al., 2000). The feeling of powerlessness to do anything about these hardships was compounded by the scarcity of job opportunities in the post-conflict environment, and the associated loss of the breadwinner role. This loss amounted to a second layer of traumatization on top of the property losses resulting from displacement. Moreover, many were ashamed that women demonstrated strong entrepreneurial skills evidenced by their engagement in petty trade, even though women barely made ends meet through these activities (Buck et al., 2000). Due to humiliation, men rarely made use of microcredit programs offered to entrepreneurial IDPs, in contrast to women who eagerly sought out and accessed such programmes. Due to these gendered differences in activities in the post-conflict era, some researchers have concluded that internally displaced Georgian women have been much more ‘successful’ than their male counterparts in adapting to the difficulties resulting from war and displacement in the 1990s (Buck et al., 2000; Pol, 1999). These sentiments are observed also with regard to the 2008 IDPs, with women recognizing that men in their communities feel traumatized by the loss of territories and the lack of livelihood whilst displaced. In 2008, as in the 1990s, women report that men are less willing to take on menial work, and less interested in attending training sessions and make use of microcredit programs. The expanded roles observed by conflict-affected women in this study have been reported elsewhere (Beck & Beck-Gernsheim, 2014 [2011]; Bennet et al., 1995; El-Bushra, 2000; Tummala-Narra, 2004; Turnip & Hauff, 2007).
9.3.1.1 The pervasiveness of women’s double bind

Though the study respondents felt very strongly that their roles in the displacement era had expanded, it is important to not romanticize or exaggerate the shift toward employment outside the home. The historical context of women’s work in the Soviet Union reveals that women have often faced a ‘double bind’ resulting from the dual obligations to the family/household and outside work. As discussed in Chapter 4, the endeavour to create a ‘new Soviet woman’ from the 1930s advocated for women to rise to men’s equal in the workplace without abandoning their work in the domestic sphere (Buckley, 1997; Clements, 1994; Crate, 2004; Hoffmann, 2003; Kay, 1997). Moreover, both men and women worked on collective farms during the Soviet era, as mentioned by Latavri, aged 73 at the time of her interview: “Both men and women worked hard both at their homes and in Kolkhoz of the time. They both worked hard. The only difference was that men could lift heavy things. But the fact is that they both worked hard.” In fact, Georgian IDP women working to support their families can be viewed as an attempt to fulfil their overwhelmingly dominant priority, the maintenance and well-being of children. This motivation is entirely within their prescribed role as caregivers to children. Though they have contravened the imperative to leave the breadwinning to men, they have also upheld their duties by caring for their children.

Also relevant to the current context is the 1990s trend in post-Soviet states involving women taking on additional responsibilities as men turned to alcohol use. As described previously in Chapter 4 (section 4.3.2), Bridger (1997) outlines the struggles faced by women whose male partners had turned to heavy alcohol use. These women often perceived that they had little choice but to work hard to support their families, with one stating “The women take absolutely everything on themselves. The man are alcoholics, they won’t do anything” (Bridger, 1997, p. 51). This statement is extremely similar to Lali’s statement, which is worth revisiting here: “Many men are unemployed here; they stand in the street and are alcoholics. Accordingly, women have to do everything. I see women everywhere. They work, they take care of their families, kids.” Statements which attribute women’s expanding role to obligations to family (notably child) well-being perhaps reveals a hierarchy of commitments to various aspects of the roles prescribed to women. As evidenced by their numerous entrepreneurial attempts, it appears that
commitments to family and child well-being (fulfilled through paid employment) ultimately superseded the imperative to restrict their activities to that of a housewife.

9.3.2 Escape-avoidance, distraction, and support seeking

One of the most striking themes reported by respondents regarded perceptions of men’s problematic alcohol use, which was viewed by the respondents as a distraction and escape-avoidance coping tactic used by men. Indeed, men socializing and drinking in groups throughout the day was a source of frustration for many of the women. Most respondents perceived that men’s alcohol use was very high, and had increased compared to the frequency prior to displacement. These developments were described by the women as an example of shifting roles of men and women in the community, and was explained as a factor in spurning women to engage in problems solving coping by seeking and taking on paid employment. Alcohol use was also contrasted with women’s distraction techniques, which tended to focus on seeking employment and working, gardening for distraction, engaging in housework, reading and watching TV, and visiting others. Many of these distraction activities reflect concordance with traditional roles prescribed to women, as they also function as constructive problem-solving activities to benefit the family (employment, working, gardening, housework). The culturally-prescribed nature and availability of distraction techniques has been observed elsewhere (Kassam & Nanji, 2006).

Traditionally, Georgian men are assigned the tasks of providing for their families and treating guests lavishly (which requires financial means). These roles were challenged by the ‘transition’ period during the break-up of the Soviet Union and subsequent civil wars, which entailed social transformation and fragmentation and reduced employment opportunities (Frederiksen, 2012). Georgian men have responded to this challenging socioeconomic context by drawing upon the tradition of dzmak’atsoba, which refers to ‘brotherhood’ or ‘brother-men.’ The brotherhood provides physical, economic, and moral support to members, and allows a route for one to become a ‘good Georgian man’ when other routes (most notably, financially taking care of loved ones) are blocked (Frederiksen, 2012). Birzha, a Russian word literally meaning ‘stock exchange,’ refers to a male street institution governed by ‘rules of the street,’ demanding honour, honesty, and manliness from its members. Members (typically male teenagers and young men) frequently ‘hang around’ in small groups in public areas, and drink alcohol (Zakharova, 2010). ‘Davabirzhaot!’, or ‘let’s go to birzha,’ is a common expression among young men.
and in Georgia more generally (Curro, 2015). It is a manifestation of the strong ties of brotherhood and kinship characteristic of Georgian society, as discussed in Chapter 4. Birzha offers camaraderie and channels of socialization to men which emphasize aggressive behaviour, especially among younger members. Birzha is also a response to unemployment and marginalization, as the transition from communism to the market economy (described in Chapter 4) left fewer employment opportunities for men (Curro, 2015). The practice of birzha is almost exclusively male. A respondent in Curro (2015)’s ethnography of birzha explained that women’s involvement typically entailed showing up and taking their drunken men home. Birzha is both a rural and urban phenomenon, with rural villagers often gathering at public spaces such as water springs in rural areas, as they did in pre-Soviet times (Curro, 2015).

Men’s engagement in birzha was a source of impatience and frustration for the respondents, who viewed the practice as a waste of time. Nonetheless, others have suggested that birzha may be viewed as a way for Georgian men to seek support which is socially acceptable; membership imparts a sense of identity and solidarity with other men in the local community, entailing reciprocal unconditional trust and loyalty between members (Frederiksen, 2013). Others have argued that drinking symbolizes a culturally-acceptable demonstration of masculinity among conflict-affected men when the breadwinner role becomes impossible to fulfil due to reduced opportunities for conflict-affected men in post conflict LMICs (El-Bushra, 2000; Ezard et al., 2011) and those resettled to stable settings (Lipson, 1991; Menjivar, 1999). Within the Georgian context, it has further been proposed that alcohol use has diminished men’s wishes and capacities to find and maintain stable employment (Pol, 1999), risking a perpetual cycle between alcohol use and unemployment.

As is the case for problem-solving coping, the respondents felt that support-seeking coping differed between the men and women in their settlements. In fact, these differences were among the most emphasized when respondents were asked to speculate on how men’s and women’s strategies differed. As reported in Chapter 8, respondents widely felt that women readily engaged in seeking support, whilst men tended to conceal their hardships from others, though did spend time with other men nonetheless. Perhaps the key differences between male and female support-seeking was the location of the visiting,
along with the activities characterizing the visits. Whilst men spent time with groups of other men in public spaces, chatting, reminiscing about the homeland, and drinking (in accordance with the culturally-consistent practice of birzha), women visited each other in homes and in gardens as they worked, sometimes drinking coffee.

Though the respondents felt that men not seeking and attaining employment were contravening traditional roles assigned to men and women, the perceived increase in alcohol is a much more ambiguous development. It is my contention that their alcohol use and the tendency to ‘hang around’ with other men symbolizes accordance with rather than defiance of previous roles. As described in Chapter 4 (section 4.2.3.1), the level of alcohol use among men throughout much of the Soviet Union (especially in rural areas) was high, and symbolized masculinity (Bridger, 1997). It is hypothesized that the emasculation of Georgian men via high unemployment and poverty in the chaos of the breakup of the Soviet Union disintegrated lead to even higher rates of alcohol use among men, as they sought to re-establish masculinity (Dudwick, 2003; Frederiksen, 2012, 2013). High rates of problematic alcohol use has been noted in other post-conflict settings (Ezard et al., 2011; Roberts et al., 2011; Somasundaram, 2010; Somasundaram & Sivayokan, 1994; Weaver & Roberts, 2010).

9.4 Reflection on frameworks

In Chapter 2, section 2.4.5 I argue that COR theory provides a basis upon which to conceive of losses unfolding over time, with initial losses in one resource type typically leading to subsequent resource losses of other types. In applying the tenets of COR theory to the interview data, I found that there was a very good fit between how respondents spoke about their current challenges and losses since the war and the theory. The COR theory was helpful in conceptualising how losses in one area led to losses in other areas, how resources tended to decrease together in parallel, and how loss spirals developed and persisted over time.

However, each woman had a unique story of loss (and coping) to tell which did not always resonate within the prediction that initial losses would lead to subsequent losses. Therefore, the pattern of losses presented in Chapter 6 (and represented in Figure 9,
Chapter 6, section 6.6) is not necessarily ‘true’ for each and every respondent. Nonetheless, the pattern of losses reported is based on salient loss linkages reported across the respondents, and so the results reported are best viewed as a composite of the individual and unique personal stories imparted in the interviews.

Though COR was useful in conceptualising losses reported by the women in this study, the theory is less useful at suggesting what people do in response to losses. For this aspect of the study, I drew upon a coping typology proposed by Skinner et al. (2003). This typology was created in response to perceived shortcomings of earlier typologies, as described in Chapter 2 section 2.4.4. One such shortcoming identified was the lack of mutually exclusive coping domains, which Skinner et al. (2003) strove to overcome. Despite their intention, many of the coping strategies shared by the study participants fit into two or more coping domains, representing the dual and overlapping nature of coping strategies (see Figure 10, Chapter 7, section 7.3). In particular, the distraction coping domain tended to overlap with other domains, with the exception of cognitive restructuring. Strategies which fit into both problem-solving and distraction included ‘seeking employment and working,’ and ‘gardening,’ ‘visiting others’ fit into seeking support and distraction, and ‘alcohol’ was reported as both a distraction and escape-avoidance technique.

The multi-functional nature of coping strategies are abound across the articles included in the systematic literature review. As noted in Chapter 3, the classification of coping strategies into Skinner et al. (2003)’s domains was challenging given that a given coping activity or mindset could serve one or more purposes. For instance, as shown in Igreja et al. (2009), participation in cyclical agricultural production by conflict-affected residents in Mozambique served several purposes: it addressed poverty by providing work and food (indicative of problem solving), it yielded a feelings of hope for the future, a sense of purpose, and feelings of safety and mastery (indicative of cognitive restructuring), and also increased the frequency of social interaction, which may have yielded opportunities to seek social support from others (indicative of support seeking). The multi-purpose nature of some coping activities reported by the sample in this research defied straightforward categorization into the domains proposed by Skinner et al. (2003).
The coping strategies reported by the respondents are consistent with many aspects of Georgian culture (see Chapter 4). Women engaged in problem solving to care for their families, and both men and women sought support in ways consistent with already-existent cultural practices (women and men relying on kinship and strong bonds between neighbours, men relying on ‘brothers’ and attending the birzha). The culturally-framed nature of coping is by no means unique to the Georgian IDP context of focus here. The findings reported in the systematic literature review in Chapter 3 shows many examples of cultural mores both restricting and providing coping options. For instance, Lopes Cardozo et al. (2005) argue that Afghan women’s coping strategies (largely consisting of talking to family and friends) reflect the restriction of women to their homes. Conversely, a greater proportion of men than women stated that having more income would improve their well-being, perhaps reflecting the traditionally-male breadwinner role and their greater participation in happenings outside the home. Reliance on religion and family is also noted among Afghan war-affected groups by Scholte et al. (2004), who suggest that these options are available to Afghan women due to cultural dictates which prevent them from making use of other resources. Male Afghan refugees reported use of recreational activities to cope, which were unavailable for women due to the cultural inappropriateness of engaging in sports and other recreational activities in the presence of men (Kassam & Nanji, 2006). Tibetan refugees in India in Ruwanpura et al. (2006) relied on support from family (which tend to be large in Tibet), due to the tradition of Tibetan elders giving advice and comfort to younger members. Tibetan refugees also tend to rely on religious teachings, most notably those of the Buddhist faith (Ruwanpura et al., 2006; Sachs et al., 2008).

9.5 Limitations

The results presented in Chapters 6 through 8 are based on one-time interviews, which may have reduced the depth of discussion on issues related to their daily lives, such as losses encountered and coping strategies employed to offset loss. Though longitudinal qualitative research design may have allowed additional details and nuance, the modest resources available to support the research precluded this option. However, a high degree of saturation was achieved regarding the topics of resource loss and coping, which may indicate that the key points were well-covered.
Interviews occurred during the day rather than evenings and so I may have inadvertently excluded women who worked outside their homes during the day, which could have caused employed women to be underrepresented. As employed women may have been less focused on the loss of livelihood, this limitation may have skewed the results pertaining to loss of resources somewhat. However, the preponderance of unemployed women in the study does reflect the overall widespread unemployment in Georgian IDP settlements, and in Georgia generally since the disintegration of the Soviet Union (see Chapter 4, section 4.3.3).

Though interviewees were informed that their participation would not result in benefits (beyond the monetary reimbursement), and that the researchers did not represent a government department, participants may have magnified accounts of resource loss in an attempt to gain benefits.

Due to translation from Georgian to English, some of the intended meanings spoken in Georgian may have lost meaning via translation into English. As explained in Chapter 5 section 5.2.2, I sought to obtain the best possible translation by double translating and transcribing the first two interviews, and having the research associates independently check for errors between the audio recording and transcripts.

The concept of ‘coping’ proved to be unfamiliar to respondents during the pilot phase of the project (see Chapter 5, section 5.4.1.1). This issue was addressed by instead first asking women about the challenges and difficulties, and how they responded either mentally and behaviourally. The coding of interview data was completed only by the PhD candidate, and so the mitigation of researcher bias through a double-coding procedure was not completed. As the findings are qualitative and the sample size is relatively small, the findings are not generalizable to other conflict-affected populations. The limitations of the systematic literature review are presented in Chapter 3, section 3.4.

9.6 Contributions of thesis
This thesis was prompted by gaps in the evidence base pertaining to the stressors, losses, and coping approaches of conflict-affected persons in LMICs, where the majority of conflict-affected persons live (see Chapter 2, section 2.5). Moreover, differences between men and women regarding stress, loss, and coping are largely unexplored in existing literature. These gaps are all the more apparent with consideration of a recent expert consensus on research priorities for mental health and psychosocial support in humanitarian settings which are detailed in Chapter 2 section 2.5.

With regard to these gaps, this thesis makes empirical contributions by systematically reviewing how coping mechanisms are utilized by conflict-affected populations in LMICs (Chapter 3) (see also Seguin & Roberts, 2015), exploring resource losses faced and coping strategies used by IDP women in Georgia (Chapters 6 and 7 respectively), and exploring Georgian IDP women’s understandings of how men’s and women’s roles have changed as a result of displacement. This thesis also contributes to theories on loss and coping, by reviewing the benefits and drawbacks of alternative approaches (see Chapter 2, section 2.4), and reflecting upon the usage of Hobfoll (1989)’s COR theory and Skinner et al. (2003)’s proposed coping domains (see section 9.4 above). Methodologically, the thesis contributes to the existing knowledge base on the usage of iterative approaches to fieldwork (for instance, modifying the topic guide in response to emerging themes and items poorly understood by respondents), as well as on potential implications of certain aspects of conducting fieldwork (for instance, purposive sampling and/or the provision of monetary incentives may complicate community relations, one’s presence in resource-limited settings may be unintentionally conspicuous) (as described in Chapter 5, especially sections 5.4.2.1, 5.4.2.2, and 5.4.2.3). Moreover, the failure of the audio diaries (which is not fully explored in this thesis) may nonetheless prove a helpful lesson to other researchers conducting studies in the future.

The findings from this research are also add to the evidence base on the challenges faced by Georgian IDPs, as well as resources which may help them function. Such information may be relevant for Georgian policy-makers in the health care field, health care professionals, and NGOs who are involved in providing services to IDPs.
9.7 Recommendations

Below, I propose five recommendations. I follow each recommendation with a section which elaborates upon and justifies the recommendation. The following recommendations are proposed: (1) mental health and psychosocial support interventions should target both the individual and the group; (2) mental health and psychosocial support interventions should foster resources to support livelihood initiatives; (3) existing health support should be expanded and better communicated to IDPs; (4) interventions to address male alcohol use should be introduced; (5) further research suggestions.

9.7.1 Mental health and psychosocial support interventions for Georgian IDPs should target both the individual and the group

It is imperative to structure interventions on the needs and priorities of the intended benefactors. As described in Chapter 4, Georgian culture is strongly collectivist in nature, which means that the interests of the group take priority over the interests of individual (Makhashvili et al., 2010). In Georgia, small kinship groups are the basic unit of society, with members striving to provide basic needs for all in the group. The collective character of Georgian society was imbued in the interviews for this research, as evidenced by a widespread tendency to both draw and provide support for friends, neighbours, and family. Recognized Georgian mental health experts have advised that complementary approaches are needed which integrate individually-focused trauma treatment and community-based psychosocial assistance (Makhashvili et al., 2010).

The guidelines of the Inter-Agency Standing Committee (IASC) on Mental Health and Psychosocial Support in Emergency Settings (Inter-Agency Standing Committee, 2007) represent an attempt to bridge the trauma-focused and psychosocial approaches to mental health, and have been endorsed for Georgian settings (Makhashvili et al., 2010). The guidelines provide a practical framework for providing a multi-layered support system comprised of basic services and security, community and family supports, focused, nonspecialized supports, and specialized services. This approach is appropriate in the collectivist culture of Georgia, as interventions must be aimed not only at individuals but at communities. A combination of interventions should be used, blending psychosocial interventions at the community level and individual specialized treatment (Makhashvili et al., 2010). Community level interventions entail assessing and understanding the
habits, practices, rituals, traditions, and coping strategies of the group. A community action plan should be designed in consultation with community members, possibly supplemented by a needs and resources assessment. Community-based psychosocial assistance involved community mobilization and involvement, the promotion of resilience, empowerment, self-healing, and social connectedness. Possible community action plans may include recreational activities and events, setting up community-based organizations, or supporting the development of enterprises which fulfil an identified need in the community. Community features of previous villages (values, social networks, patterns of behaviour and routines) should be regenerated to facilitate coping. As suggested by Makhashvili et al. (2010), powerful memories can become resources. Recalling village metaphors and ‘sayings’ can stand as strong symbols of identity, adding meaning to lives.

The IASC suggests that the management of minor mental health problems could be managed by community level workers, while others with more severe mental health issues could be referred to a higher intensity level of care. Community level workers could support mental health by:

- Strengthening and uniting families; rebuilding and regenerating community structures and institutions; encouraging leaders; facilitating self-support groups; village and traditional resources; using creative arts; cultural, ritualistic practices; as well as linking up with other service sectors like education, social service, local and regional government (Somasundaram, 2010, p. 26).

As Pedersen et al. (2008) point out, no intervention or rehabilitation program in post-conflict areas should neglect the reconstruction of the social fabric. The GIP-T has already introduced such programs designed to foster community mobilization and involvement, the promotion of resilience, empowerment, self-healing, and social connectedness (see Chapter 5, section 5.2.1). Most notably, they implemented a multifaceted mental health program which consisting of training for family doctors and nurses on traumatic stress issues, for teachers and parents on child psychosocial development disorders, emotional and behavioural difficulties, attachment disorder, violent behaviour, and depression. The intervention also included an initiative called “New Sunny Spots in our Villages,” which encouraged residents to paint wall murals in the settlements, and a ‘Folk Art Evening,’ showcasing folk dances, songs, and folk art in each settlement (The Global Initiative on Psychiatry, 2010). Finally, the programmes involved the creation of community-based organizations (CBOs), headed by the ‘key women’ who were significant points of contact.
between the communities and GIP-T. These initiatives were mentioned by the respondents as helpful, but they felt that such programs should be offered for longer periods of time/ at the times of the interviews, many respondents felt that they had been forgotten by groups which had formerly assisted them. Such interventions focused on fostering community resources (rather than specialized mental health services exclusively) may be necessary in resource-low settings with few physicians and/or mental health specialists, such as Georgia.

Through community engagement, those who are in need of higher intensity treatment can be identified. Such individuals should be offered one-on-one specialized trauma treatment. Building rapport and confidence over time through empathy is imperative to construct a healing relationship (Drožđek & Wilson, 2004). Trust can be a source of strength and facilitate recovery from trauma, allowing the clinician to work through issues hidden in the metaphorical ‘trunk’ (Makhashvili et al., 2010) referenced earlier. This dual, holistic approach addresses severe mental health issues among the most traumatized members, yet also mends tears in the community fabric.

9.7.2 Mental health and psychosocial support interventions for Georgian IDPs should foster resources to support livelihood initiatives

This recommendation follows a psychosocial orientation to mental health by addressing the stressful social and material conditions created by conflict, framed by the understanding that such conditions mediate the mental health trauma caused by war (Miller et al., 2008; van Ommeren et al., 2005). Measures such as providing jobs, reuniting families, and creating effective justice and education systems are viewed as appropriate treatment responses for populations affected by war (Silove, 2005a). As demonstrated in Chapter 6, the lack of livelihood for the women interviewed had a profound effect on other areas of daily lives, including the deterioration of social networks, and losses in mental and physical health, and support-seeking behaviour. Therefore, I suggest that supporting livelihood activities may not only improve income security, but also facilitate support-seeking (by facilitating travel and Georgian gift-giving imperatives during visits), and improve physical and mental well-being (the former by enabling payment for medical care and prescriptions, and the latter by fostering self-esteem and confidence).
Immediately after the 2008 war, Georgian IDPs were inundated by programs, services, interventions, and assistance from a range of international and local organizations. Though the appropriateness and effectiveness of some of these initiatives has been critiqued (Makhashvili et al., 2010), many respondents felt that at least they were being provided with training and the (albeit small) possibility of starting a new business in their new environment. At the time of the interview (more than 4 years after the conflict had ended), many respondents observed that training sessions and opportunities for credit programs had decreased significantly, leading to feelings of disappointment and hopelessness. The reintroduction of employment and training initiatives would be welcomed by the respondents, and the results suggest that such initiatives would have far-reaching impacts on the daily lives of IDP women and their families. It is recognized that this recommendation may be difficult to carry out, due to the widespread poverty in Georgian even among the non-displaced population.

9.7.3 Expand health supports for IDPs

As described in Chapter 4 section 4.4.4, the State Program for Mental Health (SPMH) in Georgia funds services for certain mental disorders, providing free outpatient and inpatient care (Chikovani et al., 2015). Under the program, medications are provided free of charge when dispensed through a psychiatrist, but the patient must pay when they are prescribed through a neurologist or general practitioner. However, this fee is waived for IDPs from the 2008 war living in IDP settlements or collective centres and the general population living below the poverty line. As presumably all study respondents would be eligible for free medications and services for mental disorders under the SPMH, it is striking that so many respondents did not appear to have benefited from this provision. Low health care utilization amongst Georgian IDPs (both from the 1990s and 2008) for mental, behavioural, and emotional problems has been reported elsewhere (Chikovani et al., 2015).

Though the interview topic guide did not address whether respondents knew about their entitlement to healthcare, or delve into barriers to healthcare in great depth, the lack of disposable income to pay for medical care was repeatedly cited as a major factor in perceived physical health losses (which sometimes led to mental health losses).
Chikovani et al. (2015) suggest that the lack of coverage of certain disorders (for instance, anxiety disorders) may serve as a deterrent to seeking care. As pointed out by Tomov et al. (2007), low service utilization amongst Georgians (both conflict-affected and the general population) may also reflect resistance to community-based, user-oriented services which stand in stark contrast to the institutionalized responses to mental health in the Soviet era.

Because low access to care may be cause by both a lack of communications to IDPs on their benefits, and the lack of coverage of certain disorders, I suggest that access could be increased by communicating benefits to IDPs more effectively, and by expanding coverage to include mental disorders arguably most likely to impact upon IDPs (such as anxiety disorders). Unfortunately, less than 3% of the total Georgian health care budget is devoted to mental health (Ministry of Labour, 2011b), which amounts to a systemic barrier to extending the coverage.

9.7.4 Introduce interventions to address harmful alcohol use among men

Though it is acknowledged that this thesis represents only the views of women vis-à-vis male alcohol use, the pervasive nature of male alcohol use (as reported by the respondents) signifies a major health issue impacting not only men’s health but also the social fabric of IDP communities (Roberts et al., 2014). Whether or not harmful alcohol use has increased since the war, interventions to address and decrease male alcohol use may have benefits not only for men, but also for women’s wellbeing.

Such an intervention may consist of brief community-based interventions to promote awareness on harmful alcohol use and its effects, and screening and brief treatment through primary health care services (T. Babor & Higgins-Biddle, 2000; WHO, 2001), which have been shows effective in stable settings (National Treatment Agency for Substance Abuse, 2007). As such a strong link was observed between men’s unemployment and their drinking behaviour, the recommendation for interventions to address alcoholism could be offered in parallel to interventions to support livelihoods suggested in section 9.7.2. above for the largest positive impact. Given the gendered nature of alcohol use found in this research and elsewhere for Georgian IDPs (Roberts et
al., 2014), interventions aimed at decreasing harmful alcohol use must be gender sensitive.

9.7.5 Research recommendations

The losses and coping strategies reported by the respondents in this study are shaped by the unique circumstances framing the lives of Georgian women internally displaced for almost five years, with no tangible likelihood of return to their pre-war homes and property. The uniqueness of this group of IDPs, along with the promising but largely untested COR theory, necessitate future exploration of the loss of resources amongst conflict-affected persons in low and middle income settings. Such research could form an evidence base on patterns of long-term losses suffered by conflict-affected persons beyond the very specific scope of this thesis.

Due to the complexity inherent in the concept of coping, future research would do well to consider coping taxonomies such as Skinner et al. (2003) as flexible frameworks to stimulate interpretation of reported coping behaviours and cognitive approaches, rather than universally-relevant frameworks which can be applied to any context. Though this proposed research direction would continue to contribute to the already-diverse set of literature on coping which can be challenging to integrate (see Chapter 3), it acknowledges the necessarily context-framed nature of coping and speaks to the importance of culturally sensitive interventions in order to facilitate coping viewed as effective and appropriate in a given setting.

The systematic literature review revealed that most studies on coping amongst conflict-affected persons in LMICs feature cross-sectional research designs. Though the challenges of using alternative study designs in such contexts are fully recognized, a greater number of longitudinal studies would better illuminate the temporal relationship between coping and mental health. Qualitative longitudinal studies on resource loss and coping amongst IDPs would illuminate the long-term effects of war and displacement, and perhaps the flexibility/changeability of coping responses over time.
This research, along with several articles included in the systematic literature review, supports the gender disaggregation of data in future research exploring resource loss and coping. The findings presented both in this thesis and in the literature review support the stance that gender influences coping strategies and also shapes the relationship between coping and mental health.

Finally, studies (both qualitative and quantitative) testing the impact of interventions to support beneficial types of coping behaviours amongst IDPs are sparse. As such, greater research attention is merited in order to form an evidence base to support policy interventions aimed at fostering resiliency and effective coping efforts.

9.8 Conclusions

This thesis explores resource loss and coping strategies among internally displaced Georgian women, drawing on a systematic literature review and 40 semi-structured in-depth interviews with 42 women. Resource losses were interpreted according to Hobfoll (1998)’s COR theory. A cascade of resource losses was reported. Most prominently, the loss of property entailed by displacement led to the loss of livelihood, which led to subsequent losses in social networks, and mental and physical health. A range of coping strategies were reported to offset these losses, which were interpreted by a coping typology suggested by Skinner et al. (2003). Problem solving (in the form of seeking employment and using financial resources carefully) and support seeking behaviours emerged as the most-commonly-used strategies. Key differences in the coping behaviours of men and women were reported by the (exclusively female) respondents, in the areas of problem solving (with women adopting the ‘breadwinner’ role in some cases), support seeking (with women more likely than men to reach out to others), and escape-avoidance and distraction (with men frequently turning to alcohol use, as perceived by the women). The adoption of the breadwinner role represents an expansion of these women’s roles into a formerly-male arena, which they attribute to men’s drinking frequency (which is viewed as both escape-avoidance and distraction coping). Because of the highly context-specific nature of resource loss and coping, additional research is needed to further understand of the losses amongst conflict-affected women in LMICs, and how they cope with these challenges.
Appendix A: Publications, conference presentations, and invited lectures arising from the thesis

Publications under review

Seguin M, Lewis R, Amirejibi T, Razmadze M, Roberts, B. (peer-reviewed and resubmitted at Social Science and Medicine, manuscript ID SSM-D-15-02334). Our flesh is here but our soul stayed there: A qualitative study on resource loss due to war and displacement among internally-displaced women in the Republic of Georgia.

Accepted publications


Conference presentations and invited lectures


Seguin M, Roberts B. Coping with the aftermath of civil unrest: Internally displaced women in Georgia. Civil Unrest and Socio-Political Changes: Marginalisation, Disintegration, Exclusion. Tbilisi State University, Tbilisi, Republic of Georgia. 26-29/05/15.

Seguin M, Roberts B. The impact of war-related displacement on gender roles: A case study in the Republic of Georgia. Women in Culture Conference: Gender, Culture, and Migration. University of Gdansk, Faculty of Social Sciences, Gdansk, Poland. 06-07/03/15.

Seguin M. Coping strategies used by conflict-affected persons: A systematic literature review. The London School of Hygiene and Tropical Medicine, London, UK. 08/02/14.
### Appendix B: Sample and location, coping classification scheme, and findings for the selected studies

<table>
<thead>
<tr>
<th>Author (year)</th>
<th>Sample and location</th>
<th>Coping classification scheme</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quantitative studies</strong>*</td>
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<tr>
<td>Ahern et al. (2004)</td>
<td>306 conflict-affected and returnee Kosovar Albanians</td>
<td>Social support measured by the Medical Outcomes Study scale, including the following domains: (1) Instrumental support, (2) Emotional support, and (3) Appraisal support.</td>
<td>Women and men had similar social support scores. Social support mitigated the impact of traumatic events on mental health outcomes.</td>
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<tr>
<td>Allden et al. (1996)</td>
<td>104 Burmese refugees in Thailand</td>
<td>(1) Weria (resolve and determination to use one’s innate talents and strengths to deal with one’s karma) (2) Acceptance of inability to return to Burma (3) Continuing the prodemocracy struggle (4) Helping the people of Burma (5) Friends (6) Financial support from UNHCR</td>
<td>The most commonly-cited strategy was ‘continuing the prodemocracy struggle,’ reported by 75% of the sample. This was followed by ‘weria,’ ‘helping the people of Burma,’ ‘UNHCR financial support,’ ‘acceptance of inability to return to Burma,’ and ‘friends,’ reported by 45%, 31%, 25%, 16%, and 12% respectively.</td>
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<tr>
<td>Araya et al. (2007a)</td>
<td>1200 IDPs in Ethiopia</td>
<td>(1) Task-oriented (2) Avoidance-oriented (3) Emotion-oriented</td>
<td>Women reported higher emotion-oriented coping than men, who reported higher task-oriented coping. For both genders, higher emotion-oriented coping was associated with traumatic events, and task-oriented coping with perceived social support.</td>
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<td>Araya et al. (2007b)</td>
<td>1193 IDPs in Ethiopia</td>
<td>(1) Task-oriented (2) Avoidance-oriented (3) Emotion-oriented</td>
<td>Task-oriented coping had a direct benefit for both genders, but by different pathways: by decreasing mental distress for women and increasing the quality of life for men.</td>
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<td>Araya, Chotai, Komproe, and De Jong (2011)</td>
<td>859 female IDPs in Ethiopia</td>
<td>(1) Task-oriented (2) Avoidance-oriented (3) Emotion-oriented</td>
<td>High task-oriented coping was found among displaced women residing in community settings versus those in temporary large-scale shelters. Levels of mental distress did not differ between the two groups of women, but those in the community setting reported a significantly higher quality of life and better living conditions.</td>
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<tr>
<td>Study</td>
<td>Sample Description</td>
<td>Coping Strategies</td>
<td>Findings</td>
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<td>Bass et al. (2012)</td>
<td>333 conflict-affected residents in Indonesia</td>
<td>(1) Praying (2) Reciting the Koran (3) Earning money (4) Sitting together to chat (5) Walking to please one’s heart (6) Discussing (7) Listening to advice from wise men (8) Engaging in sports (9) Engaging in recreation</td>
<td>The counselling intervention was associated with an increase in the use of positive coping strategies for both men and women. An impact on functioning was found for men, but not for women.</td>
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<tr>
<td>Bryce et al. (1989a)</td>
<td>152 conflict-affected Lebanese mothers</td>
<td>(1) Cognitively-oriented (2) Passive appraisal (3) Diversion/denial (4) Emotion-oriented (5) Family-oriented (6) Socially-oriented</td>
<td>Emotion-oriented and passive appraisal are used significantly more often by mothers with lower levels of education than their highly-educated counterparts. Higher education and income level are negatively correlated with denial and diversion techniques. The use of emotion-oriented coping was associated with higher psychological dysfunction. Mothers who perceived events as affecting them negatively, who were exposed to more war-related events, and who use emotion-oriented coping had the highest levels of depression symptoms.</td>
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<tr>
<td>Bryce et al. (1989b)</td>
<td>192 Palestinian refugee mothers in Lebanon and conflict affected Lebanese mothers</td>
<td>(1) Cognitively-oriented (2) Passive appraisal (3) Diversion/denial (4) Emotion-oriented (5) Family-oriented (6) Socially-oriented</td>
<td>On average, the sample used cognitively-oriented coping most often, followed by passive appraisal, family- and emotion-oriented. Diversion/denial and socially-oriented coping were used the least often.</td>
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<tr>
<td>De Vries (2001)</td>
<td>51 Sri Lankan Tamil refugees in India</td>
<td>Open-ended question about sources of social support (consisting of emotional and/or material support): (1) Friends and/or neighbors (2) Elderly persons (3) Family members (4) No support (5) Financial help</td>
<td>Sixteen received support from friends and/or neighbours, nine from family members, eight received no support, and one person received support from elderly persons. Thirteen received financial help, some from family members living abroad.</td>
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<tr>
<td>Emmelkamp et al. (2002)</td>
<td>315 Bhutanese refugees in Nepal</td>
<td>Positive coping strategies (1) Discussing the problem with friends and family (2) Worshipping (3) Visiting a traditional healer (4) Playing with children or watching children play (5) Going for a stroll (6) Working (7) Listening to the radio (8) Getting involved in a political movement (9) Accepting the situation (10) Singing songs. Negative coping strategies are: (1) Blaming oneself (2) Drinking alcohol (3) Smoking or chewing tobacco (4) Isolating from other people (5) Fighting or arguing (6) Hitting children (7) Ignoring the problem (8) Obsessing about the problem (9) Abandoning one's spouse (10) Giving up hope</td>
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<tr>
<td>Authors</td>
<td>Sample Description</td>
<td>Main Findings</td>
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<tr>
<td>Farhood &amp; Dimassi (2012)</td>
<td>625 conflict-affected residents in Lebanon</td>
<td>Examined social support (measured by a bespoke scale comprised of eight items measuring level of support available), smoking, alcohol consumption, drug or tranquilizer consumption, level of exercise, and working behaviours (including paid and domestic work). Out of a possible maximum score of 8, the sample scored 6.1 on the social support scale, indicating quite a high level of social support. Eight percent reported using tranquilizers, and 1.4% used illicit drugs. Descriptive findings on the other coping strategies were not reported.</td>
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<td>Farhood et al. (1993)</td>
<td>540 conflict-affected Lebanese families (525 mothers and 413 fathers)</td>
<td>Degree of social support on the availability of and satisfaction with addressing the following issues: (1) Personal problem (2) Health related problem (3) Financial problem (4) Security problem (5) Social/recreational Mothers and fathers reported high availability of and satisfaction with all types of social support.</td>
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<tr>
<td>Farhood (1999)</td>
<td>438 conflict-affected families in Lebanon</td>
<td>(1) Cognitive strategies (2) Avoidance strategies (3) Behavioural strategies Families most frequently reported using cognitive strategies, followed by avoidance and behavioural strategies respectively. Use of cognitive coping was associated with higher levels of social support, education, and economic status. Cognitive coping did not affect physical or psychological health.</td>
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<tr>
<td>Gavrilovic et al. (2003)</td>
<td>139 conflict-affected students in the former Yugoslavia</td>
<td>(1) Philosophical approach (2) Sport and walks (3) Leisure activities (4) Work (5) Humour (6) Getting information (7) Avoidance (8) Substance abuse (9) Talking and gathering ‘Talking and gathering’ was the most frequent strategy, with 90.6% of the sample reporting this. In descending order, the next most-frequently reported strategies were: ‘leisure activities’ (70.5%), ‘sport and walks’ (51.8%), ‘work’ (35.3%), ‘avoidance’ (24.5%), ‘substance abuse’ (12.2%), ‘humour’ and ‘philosophical approach’ (both 8.6%), and ‘getting information’ (2.2%).</td>
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<tr>
<td>Hussain &amp; Bhushan (2011)</td>
<td>226 Tibetan refugees in India</td>
<td>(1) Self-blame (2) Other-blame (3) Ruminating (4) Catastrophizing (5) Putting into perspective (6) Positive refocusing (7) Positive reappraisal (8) Acceptance (9) Planning There were significant differences in the mean scores for each of the nine subscales between men and women. Women were more likely to use the following strategies than men: self blame, acceptance, ruminating, positive refocusing, positive reappraisal, and catastrophizing, whereas men were more likely to refocus on planning, put into perspective, and blame others.</td>
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<td>Husain et al. (2007)</td>
<td>471 Afghan refugees and conflict-affected residents in Pakistan</td>
<td>Perceived social support based on the Multidimensional Scale of Perceived Social Support (MSPSS), measuring social support from the following sources: family, friends, and significant others.</td>
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<tr>
<td>Igreja et al. (2009)</td>
<td>240 conflict-affected residents in Mozambique</td>
<td>Participating in the agricultural work cycle</td>
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<tr>
<td>Reference</td>
<td>Sample</td>
<td>Methods/Intervention</td>
<td>Notes</td>
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<tr>
<td>Khamis (1998)</td>
<td>305 conflict-affected women in Palestinian territories</td>
<td>(1) Acquiring social support, (2) Reframing, (3) Seeking spiritual support, (4) Mobilizing family to acquire and accept help, (5) Passive appraisal</td>
<td></td>
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<tr>
<td>Klarić et al. (2008)****</td>
<td>187 conflict-affected women in Bosnia Herzegovina</td>
<td>Modified Social Support Appraisals (SS-A) scale, which measures level of perceived and available support from three sources: (1) Family, (2) Friends, and (3) Coworkers.</td>
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<tr>
<td>Kunovich &amp; Hodson (1999)</td>
<td>2,202 conflict-affected Croatians</td>
<td>Social integration: (1) Organizational memberships (in political parties, unions, church organizations, non-governmental organizations, art and culture societies, sports clubs, and local associations) (2) Frequency of social activities (going to the cinema, restaurants and cafes, going on trips, participating in sports, attending concerts) (3) Existence of close personal relationships (frequency of visiting friends and relatives, being married, having children, and living with other relatives)</td>
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<tr>
<td>Lopes Cardozo et al. (2005)</td>
<td>699 conflict-affected residents in Afghanistan</td>
<td>Own instrument developed via preliminary qualitative interviews prior to survey, composed of 12 mechanisms: (1) Talking to family or friends (2) Receiving medical assistance (3) Receiving counselling (4) Visiting traditional healer (5) Reading Koran or praying (6) Engaging in traditional ceremonies (7) Receiving humanitarian assistance (8) Having better food security (9) Having more income (10) Living in better housing (11) Receiving skills training (12) Other</td>
<td>Each respondent could choose only a single mechanism as their predominant coping strategy. The top three most chosen answers among women were items 5 (38%), 9 (23.4%) and 1 (11.1%). Among men, the top choices were 5 (37.5%), 9 (35.6%) and 10 (5.6%). Overall coping mechanisms of females were statistically different from male coping mechanisms, though reading the Koran or praying was the most commonly reported mechanism for both genders.</td>
</tr>
<tr>
<td>Lopes Cardozo et al. (2004)</td>
<td>495 Burmese refugees in Thailand</td>
<td>Own instrument developed via an open-ended question in the survey, composed of 6 strategies: (1) Singing or playing music (2) Sleeping (3) Drinking rice wine (4) Thinking about homeland (5) Talking to friends or family (6) Visiting the clinic</td>
<td>The most common coping strategy reported was talking to friends or family (59%), followed by sleeping (19%), thinking about their homeland (14%), visiting the clinic (5%), singing or playing music (2%), and drinking rice wine (1%).</td>
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<tr>
<td>Study</td>
<td>Sample Size</td>
<td>Measure</td>
<td>Findings</td>
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<tr>
<td>Maercker et al. (2009)</td>
<td>61 Chechen IDPs in Russian Federation</td>
<td>Social acknowledgement of trauma (as a form of social support) measured by the Social Acknowledgement as a Victim or Survivor Questionnaire (SAQ), comprised of three subscales: (1) Recognition, (2) General disapproval, and (3) Family disapproval.</td>
<td>SAQ scores were low, indicating a low level of acknowledgement of Chechen IDPs as victims. There were no differences between gender or age groups.</td>
</tr>
<tr>
<td>Morina et al. (2010)</td>
<td>163 conflict-affected Albanian Kosovars</td>
<td>Avoidance measured by the Acceptance and Action Questionnaire (AAQ), which measures experiential avoidance in general.</td>
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<tr>
<td>Morina, Stangier, &amp; Risch (2008)</td>
<td>84 conflict-affected Kosovars</td>
<td>Avoidance measured by the Acceptance and Action Questionnaire (AAQ), which measures experiential avoidance in general.</td>
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<tr>
<td>Morina (2007)</td>
<td>152 conflict-affected Kosovars</td>
<td>Avoidance measured by the Acceptance and Action Questionnaire (AAQ), which measures experiential avoidance in general.</td>
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<tr>
<td>Nelson et al. (2004)</td>
<td>562 IDP and conflict-affected Serbians in Serbia and Kosovo</td>
<td>Social support, classified into one of three categories: (1) High (2) Moderate (3) Low</td>
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<tr>
<td>Pederson et al. (2008)</td>
<td>373 returnee, IDP, and conflict-affected Peruvians</td>
<td>Measured social support networks in four areas: (1) Local authorities (2) Institutional (3) Neighbour or friend (4) Family. Density of social support was calculated on the basis of frequency of contact with each of the four categories (daily, weekly, monthly, annually, and rarely)</td>
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<tr>
<td>Pham et al. (2010)</td>
<td>2,635 conflict-affected residents in the DRC</td>
<td>Measured sense of coherence with the Orientation to Life Questionnaire, which includes three aspects of the concept: (1) Meaningfulness, (2) Comprehensibility, and (3) Manageability.</td>
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<tr>
<td>Study</td>
<td>Sample Description</td>
<td>Coping Strategies</td>
<td>Findings</td>
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<tr>
<td>Punamaki et al. (2008)***</td>
<td>92 conflict-affected, IDP, and returnee males in the Gaza Strip</td>
<td>Dispositional coping styles including (1) Active and constructive (2) Avoidance and denial (3) Social affiliation (4) Emotion-focused coping. Situational coping strategies including (1) Active and constructive (2) Avoidant and passive (3) Social affiliation (4) Emotion-focused coping (5) Religious affiliation (6) Political activity</td>
<td>Significant positive associations were observed between social affiliation (dispositional) and active and constructive (dispositional), social affiliation (dispositional) and emotion-focused (dispositional), emotion-focused (dispositional) and active and constructive (dispositional), emotion-focused (dispositional) and avoidance and denial (dispositional), emotion-focused (dispositional) and political activity (situational), active and constructive (situational) and political activity (situational), and social affiliation (situational) and emotion-focused (situational). Significant negative associations were observed between social affiliation (dispositional) and avoidance and denial (dispositional), active and constructive (dispositional) and religious affiliation (situational), avoidance and denial (dispositional) and religious affiliation (situational coping), and emotion-focused (situational) and religious affiliation (situational).</td>
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<td>Punamaki (1986)</td>
<td>174 conflict-affected women in West Bank and Gaza Strip</td>
<td>Measure was informed by the Modified Rotter Incomplete Sentence Blank. Responses were classified according to a model by Dill and Feld (1982): (1) Attack and confrontation (2) Avoidance and withdrawal (3) Inaction and passivity (4) General apprehension (5) Defense mechanisms (6) Socially and politically oriented activity</td>
<td>Most women used more than one coping mode in response to stress. A third of the sample employed social and political activity and another third used denial as primary coping strategies. Exposure to traumatic experiences increased women's social and political activity, and decreased avoidance and withdrawal as coping modes. General apprehension was the most commonly reported response to threat (reported by 43.5%), followed by social and political activity (reported by 34%) and denial (reported by 30%). Vulnerable women, as compared to women with more assets, were more likely to report general apprehension as a response to stress.</td>
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<tr>
<td>Study (Year)</td>
<td>Sample Size &amp; Location</td>
<td>Methodology</td>
<td>Findings</td>
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<tr>
<td>Riolli et al. (2002)</td>
<td>38 Kosovar refugees in Albania</td>
<td>A scale developed by Latack (1986) consisting of 28 items in 2 clusters: (1) Control coping (actions and cognitive reappraisals that are proactive in tone and address the course of the stress) (2) Escape coping (actions and cognitive reappraisals that suggest avoidance and seek to decrease the negative feelings of stress)</td>
<td>No results were provided regarding the frequency of coping types used by the sample. Multiple regression revealed a marginally significant relationship between stressful events, control coping and psychological adjustment: a high number of stressful events combined with lower control coping were related to greater psychological maladjustment ($R^2= .20$), $F(3,34)= 2.78$, $p&lt;.06$. Escape coping was not significantly associated with psychological adjustment.</td>
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<tr>
<td>Sachs et al. (2008)</td>
<td>769 Tibetan refugees in India</td>
<td>Modified Daily Coping Assessment: (1) Distraction (2) Situation redefinition (3) Direct action (4) Catharsis (5) Acceptance (6) Seeking social support (7) Relaxation (8) Religion (Meditation) (9) Religion (Seeking divinations from lamas/performing special prayers/visiting temples) (10) Religion (Viewing the trauma as a result of karma)</td>
<td>On average, the participants used more than 7 out of the 10 coping strategies on the scale. The three religious strategies were used most frequently (reported by over 90% of the sample), followed by seeking emotional support from loved ones, friends, or professionals (reported by 77%). Exposure to trauma was positively associated with increased frequency of coping strategies.</td>
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<tr>
<td>Scholte et al. (2004)</td>
<td>1,011 conflict-affected residents in Afghanistan</td>
<td>Own assessment based on preliminary focus group prior to the quantitative study. It assesses where individuals turn to for emotional support. Items include: (1) Direct family (2) Family in law (3) Friends (4) Neighbours (5) Mullah, shire, or holy place, (6) Allah, (7) Village health volunteer/traditional birth attendant (8) Physician (9) Herbalist (10) Other</td>
<td>The most commonly-chosen response was ‘Allah,’ endorsed by 98% of the sample. The second most-frequently chosen item was ‘direct family’ (81%).</td>
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<td>Seino et al. (2008)</td>
<td>555 conflict-affected mothers in Afghanistan****</td>
<td>Resources sought for mental health support: (1) Health facility (2) Religious leader (3) Reading Quran or praying (4) Spiritual healer (5) Visiting friends</td>
<td>In descending order, the most commonly-chosen responses were: health facility (89%), religious leader (61%), reading Quran or praying (55%), spiritual healer and visiting friends (both 43%).</td>
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<tr>
<td>Sousa (2013)</td>
<td>122 conflict-affected Palestinian women in the West Bank</td>
<td>(1) Proactive coping (2) Self-reliance (3) Reliance on political support (4) Reliance on religious support (5) Reliance on family support (6) Political or civic engagement</td>
<td>Positive correlations were found between political violence and both political and civic engagement and reliance on political support. Proactive coping and reliance on self acted as risk factors, rather than protective factors. Reliance on religious support was the only coping variable that demonstrated a statistically significant protective influence within the relationship between political violence and health. More specifically, the institutional and organizational aspects of religion, rather than faith or prayer, were the source of the protective mechanism.</td>
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<tr>
<td>Study</td>
<td>Sample Size</td>
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<tr>
<td>Usta, Farver &amp; Zein (2008)</td>
<td>310 predominantly-returnee women in Lebanon</td>
<td>Modified Women and Girls' Protection in Affected Areas questionnaire composed of the following coping strategies: (1) Support groups for women (2) Talking to friends or family (3) Assistance from NGO workers (4) Legal advice (5) Mental health counseling (6) Try to forget about the experience (7) Don’t know how to cope</td>
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<tr>
<td>Yamout &amp; Chaaya (2011)</td>
<td>218 IDPs in Lebanon</td>
<td>Own instrument based on response to an open-ended question in a survey. Categories include: (1) Nothing (do not use any coping strategy) (2) Socialising (meeting new friends, visiting people inside or outside the IDP centre, keeping in touch with friends and relatives, seeing/conversing with guys, and communicating with peers) (3) Reasoning oneself (4) Increasing praying (5) Increasing smoking (6) Increasing eating (7) Taking care of children/grandchildren (8) Attending to regular work (9) Helping in the organization of the IDP centre (10) Seeking entertainment inside or outside the IDP centre. Items 3-10 were combined to create a category called ‘other ways.’</td>
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</table>

41% reported that they did not know how to cope with their current situation, and another 40% reported using active coping strategies (items 1-4). The remaining women reported trying to forget about their challenges as a coping strategy. The women from the areas hardest-hit by the war were more likely to use active coping strategies than women from other areas of Lebanon. Women who did not know how to cope or tried to forget about their experiences reported higher rates of domestic violence during the conflict than women who used active coping strategies. In descending order, the most commonly-reported strategies were: doing nothing (29% endorsed), socialising (28%), increasing smoking (21%), and increasing praying (7%). The remaining items were endorsed by 6% or less of the sample.

**Qualitative studies**

<table>
<thead>
<tr>
<th>Study</th>
<th>Sample Size</th>
<th>Description</th>
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<tbody>
<tr>
<td>Almedom (2004)</td>
<td>112 IDPs in Eritrea</td>
<td>(1) Support from churches (christenings, burial rites and rituals) (2) staying together with home village communities (3) keeping track of the news (4) finding meaning to displacement (5) assistance from traditional birth attendants and ‘St. Mary,’ who helps women during pregnancy and childbirth</td>
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<thead>
<tr>
<th>Study</th>
<th>Sample Description</th>
<th>Coping Strategies</th>
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<tbody>
<tr>
<td>Badri, van den Borne &amp; Crutzen (2013)</td>
<td>20 conflict-affected and/or former IDP female University students in Sudan</td>
<td>(1) Strong religious practices and beliefs (praying and reading Koran) (2) Developing social support networks and interpersonal relationships (3) Improving environmental mastery and intercultural competence (4) Focusing on future wishes and aspirations</td>
<td>All mentioned item 1 as a coping strategy. The participants reported reaching out to other Darfuri students to receive and give support. The majority of the sample reported a wish to complete their education (item 4), for the purpose of returning to their communities and assisting in rebuilding them with newly acquired skills.</td>
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<tr>
<td>Ebadi et al. (2009)</td>
<td>20 conflict-affected chemical warfare victims in Iran</td>
<td>Developed own instrument composed of 2 domains: (1) Religious sentiment (2) Patriotism</td>
<td>Viewing the mustard-gas related illness as the divine will of God, framing the illness as a means of absolving sin, and saying prayers in the anticipation of divine rewards are components of religious coping which brought comfort to the sample. Illness was also framed in terms of defending the motherland, and as a source of pride arising from self-sacrifice.</td>
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<tr>
<td>Eggerman &amp; Panter-Brick (2010)</td>
<td>1011 conflict-affected Afghani parents</td>
<td>Own instrument based on interview responses, composed of 6 ‘solutions to problems’: (1) Faith (2) Family unity and harmony (3) Service to others (4) Perseverance and effort (5) Morals (6) Social prominence, respectability, and honour</td>
<td>Hope was rooted in cultural values, encompassing strong religious faith and individual effort. Service to others, strong morals, and family unity compliment faith and perseverance to give meaning to relationships and experiences. These values underpin family and individual honour. Though these cultural values were sources of hope and resilience, they were also sources of entrapment as families strove to fulfil cultural expectations in the face of economic demands of survival.</td>
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<tr>
<td>Ezard et al. (2011)</td>
<td>Sudanese, Somali, and other refugees in Kenya, returnees and IDPs in Liberia, IDPs in Uganda, Afghan refugees in Iran and Pakistan, and Burmese refugees in Thailand (n unknown)</td>
<td>The sample reported the following coping strategies: (1) Alcohol production as livelihood (2) Using inhalants (petrol, glue, or solvents) (2) Drinking alcohol (3) Cannabis/hashish use (4) Opiate use (5) Tranquilisers use</td>
<td>Alcohol production and use was widespread in the Kenyan refugee camp, Ugandan IDP camp, and amongst Liberian IDPs and returnees. Cannabis use was also widely reported amongst the Liberians. Opiate use was widely available and used amongst Afghan refugees, who also used hashish and tranquilizers. Burmese refugees widely used alcohol, and opiates, cannabis, and inhalants to a lesser extent.</td>
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<td>Hardgrove (2009)</td>
<td>Liberian refugee women in Ghana (n unknown)</td>
<td>Own instrument composed of 3 ‘capabilities:’ (1) Adapted livelihood strategies (2) Psychosocial support of church (3) Financial aid from American NGO</td>
<td>Item 1 means the use of new and old skills, retraining in a new occupation, engaging in subsistence activities., item 2 faith in a loving and protective God and commitment to Christian churches for opportunities for leadership and for gathering with others to gain social and emotional support, and item 3 was conceptualized as a means to achieve a better way of life.</td>
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<tr>
<td>Kassam &amp; Nanji (2006)</td>
<td>61 Afghan refugees in Pakistan</td>
<td>(1) Faith and religion (2) Community and family support (3) Purposive activity (work, educational courses) (4) Recreation (sports, singing, dancing, playing chess) (5) Escaping the camp through unnecessary medical referral</td>
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<td>Women especially drew upon support systems, forming informal groups in which to discuss difficulties. Men were able to make more use of recreational facilities, due to cultural mores preventing women from engaging in recreational activities in the presence of men.</td>
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<td>Diverted thinking was composed of comparing one’s situation with someone even worse off, or contextualizing their challenges in terms of patriotism and their contribution to national independence. Distraction was composed of preoccupying oneself with work or other activities. Future investment implied working hard to replace what had been lost, raising children well, and focusing on income-generating activities.</td>
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<td>Ruwanpura et al. (2006)</td>
<td>20 Tibetan refugees in India</td>
<td>(1) Family support (2) Religious and cultural beliefs (3) Using traditional Tibetan medicine (4) Receiving support and services from organizations</td>
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<td>Family support was the primary coping strategy in overcoming mental distress, though many of the interviewees listed a range of coping strategies commonly employed.</td>
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<td>Somasundaram (2010)</td>
<td>Conflict-affected residents and IDPs in Sri Lanka (n unknown)</td>
<td>(1) Alcoholism (2) Blaming others (3) Religion and faith in God (4) Seeking support (new relationships, helping others, comradeship) (5) Sense of optimism and hope for the future</td>
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<td>Coping involves the ability to negotiate recognition through ‘love,’ ‘solidarity,’ and rights. Love and solidarity facilitate a range of coping strategies, including support from close relations, religion, and solidarity with other refugees.</td>
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<td>Thomas et al. (2011)</td>
<td>24 Pakistani and Somali refugees in Nepal</td>
<td>(1) Love (2) Rights (3) Solidarity</td>
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<tr>
<td>* All quantitative studies used cross-sectional survey designs, with the exception of Bass et al. (2012), who used a controlled trial study design, and Igreja et al. (2009), who used a longitudinal study design.</td>
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<td>** All qualitative studies used semi-structured interviews, with the exceptions of Ebadi et al. (2009), who used unstructured interviews, and Kaassam &amp; Nanji, (2006) who conducted unstructured and semistructured focus groups.</td>
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<td>***This study also reported on a sample of 92 male Palestinian former prisoners. Those findings are not included in this review, due to the possibility that they were involved in combat activities.</td>
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</table>
This study also reported on a sample of 180 women not affected by the conflict in Bosnia and Herzegovina. These results are not included since they do not meet inclusion criteria.

This study also reported on a sample of 617 women not affected by the conflict in Afghanistan. These results are not included since they do not meet inclusion criteria.
### RATS checklist for qualitative studies

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<td>Research question explicitly stated</td>
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<td>Research question justified and linked to the existing knowledge base (empirical research, theory, policy)</td>
<td>Y</td>
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<td>Appropriateness of qualitative method</td>
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<td>Study design described and justified</td>
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<td>Sampling: Criteria for selecting the study sample justified and explained</td>
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<td>Recruitment: Details of how recruitment was conducted and by whom</td>
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<td>Details of who chose not to participate and why</td>
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309
| **Data collection: Method(s) outlined and examples given** | Y | Y | Y | Y | N | Y | Y | Y | N | Y |
| **Study group and setting clearly described** | Y | Y | Y | Y | Y | N | N | Y | N | Y |
| **End of data collection justified and described** | N | N | Y | N | Y | N | Y | N | N | N |
| **Role of researchers: Do the researchers occupy dual roles (clinician and researcher)? Are the ethics of this discussed?** | N | N | N | N | Y | Y | N | N | N | N |
| **Ethics: Informed consent process explicitly and clearly detailed** | N | Y | Y | Y | Y | N | N | Y | Y | N |
| **Anonymity and confidentiality discussed** | N | N | Y | N | N | N | N | N | N | Y |
| **Ethics approval cited** | Y | N | Y | Y | N | N | Y | N | Y | Y |

**Soundness of interpretive approach**

| **Analytic approach described in depth and justified** | N | Y | Y | Y | N | Y | Y | Y | N | Y |
| **Evidence of alternative explanations being sought** | N | N | N | N | N | N | Y | N | N | N |
| **Analysis and presentation of negative or deviant cases** | Y | N | N | N | N | N | N | N | N | N |
| **Description of the basis on which quotes were chosen** | N | Y | N | N | N | N | N | N | N | N |
| **Semi-quantification when appropriate** | n/a | n/a | n/a | Y | n/a | n/a | n/a | n/a | n/a | n/a |
| **Illumination of context and/or meaning, richly detailed** | Y | Y | Y | Y | N | N | Y | Y | Y | Y |
| **Method of reliability check described and justified** | Y | N | Y | Y | N | N | Y | N | N | N |
| **Discussion and presentation: Findings presented with reference to existing theoretical and empirical literature, and how they contribute** | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| **Strengths and limitations explicitly described and discussed** | N | Y | N | N | Y | N | Y | N | Y | N |
| **Evidence of following guidelines (format, word count)** | Y | Y | Y | Y | Y | N | Y | Y | N | Y |
| **Detail of methods or additional quotes contained in appendix** | N | N | N | N | N | N | N | N | N | N |
| **Written for a health sciences audience** | N | Y | Y | Y | Y | N | Y | Y | Y | N |

**Presence of red flags**

| **Jargon** | N | N | N | N | N | N | N | N | N | N |
### STROBE checklist for quantitative studies

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| Over interpretation | N | N | N | N | N | Y | N | N | N | N | Y | N | N | Y | N | N | Y | Y | Y | N | N | Y | N | N | N | Y | N | N | Y | N | N | N | N | N | N | N | N |
| Seems anecdotal, self evident | N | N | N | N | N | Y | N | N | N | N | Y | N | N | Y | N | N | Y | Y | Y | N | N | Y | N | N | N | Y | N | N | Y | N | N | N | N | N | N | N | N |
| Consent process thinly discussed | Y | Y | N | N | N | Y | Y | N | Y | N | Y | Y | N | Y | N | N | Y | N | Y | Y | N | N | Y | N | N | Y | N | N | Y | N | N | N | N | N | N | N | N | N |
| Doctor-researcher | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N |

311
| Data sources / measurement | Y | N | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | N | Y | Y | N | N | Y | Y |
| Bias                      | N | N | N | N | N | N | N | N | N | N | N | N | N | Y | N | Y | N | N | N | N | N | N | N | Y | N | N | N | N | N | N |
| Study size                | N | N | Y | Y | Y | N | N | N | N | N | Y | Y | Y | Y | Y | Y | N | Y | N | N | N | N | N | Y | Y | Y | N | Y | Y | Y |
| Quantitative methods      | Y | N | Y | Y | Y | Y | Y | Y | N | Y | N | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y |
| Statistical methods       | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | N | N | Y |
| Validity test             | N | Y | Y | Y | Y | Y | N | N | N | N | N | Y | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N | N |
| Results                   |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Participants              | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| Descriptive data          | Y | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | N | Y | N | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | N | Y |
| Outcome data              | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| Main results              | Y | Y | Y | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| Discussion                |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Key results               | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| Limitations               | Y | Y | N | Y | Y | N | N | Y | Y | Y | N | Y | Y | Y | Y | Y | N | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | N | Y |
| Interpretation            | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y | Y |
| Generalisability          | Y | N | N | Y | N | N | N | Y | N | N | N | N | Y | Y | N | N | N | N | N | N | N | N | Y | N | N | N | N | N | Y | N |
| Other information         |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Funding                   | Y | N | N | N | N | Y | Y | Y | N | N | N | N | Y | N | N | N | Y | N | Y | Y | Y | N | Y | N | Y | N | Y | Y | Y | Y |

| Table 312 |
## Appendix D: Findings organized by coping domain

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<td>306 conflict-affected and returnee Kosovar Albanians</td>
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<td>Allden et al. (1996)</td>
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<td>Badri, van den Borne &amp; Crutzen (2013)</td>
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<td>20 conflict-affected or former IDP female University students in Sudan</td>
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<td>333 conflict-affected Indonesians</td>
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<td>152 conflict-affected Lebanese mothers</td>
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<td>61 Chechen IDPs in Russian Federation</td>
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<td>Pederson et al. (2008)</td>
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<td>Seeking social support from local authorities, institutions, neighbours, friends, and/or family.</td>
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<td>Emotional support from direct family, family in law, friends, neighbours, mullah, shire, or holy place, Allah, village health volunteer/traditional birth attendant, physician, herbalist, or other.</td>
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<td>Conflict-affected residents and IDPs in Sri Lanka (n unknown)</td>
<td>Seeking support (new relationships, helping others, comradeship)</td>
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<td>Badri, van den Borne &amp; Crutzen (2013)</td>
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<td>Quantitative</td>
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<td>Cognitively-oriented</td>
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<td>Bryce et al. (1989b)</td>
<td>Quantitative</td>
<td>192 Palestinian refugee mothers in Lebanon and conflict-affected Lebanese mothers</td>
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<td>Qualitative</td>
<td>20 conflict-affected chemical warfare victims in Iran</td>
<td>Religious sentiment, Patriotism</td>
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<td>Emmelkamp et al. (2002)</td>
<td>Quantitative</td>
<td>315 Bhutanese refugees in Nepal</td>
<td>Worshipping, Accepting the situation</td>
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<td>1011 conflict-affected Afghani parents</td>
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<td>Sample Size/Context</td>
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<td>1999</td>
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<td>139 conflict-affected students in the former Yugoslavia</td>
</tr>
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<td>Gavrilovic et al.</td>
<td>2003</td>
<td>Quantitative</td>
<td>226 Tibetan refugees in India</td>
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<tr>
<td>Hussain &amp; Bhushan</td>
<td>2011</td>
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<td>61 Afghan refugees in Pakistan</td>
</tr>
<tr>
<td>Khamis</td>
<td>1998</td>
<td>Qualitative</td>
<td>305 conflict-affected women in Palestinian territories</td>
</tr>
<tr>
<td>Kellezi, Reicher &amp; Cassidy</td>
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<td>Quantitative</td>
<td>127 conflict-affected Kosovar Albanians</td>
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<tr>
<td>Lopes Cardozo et al.</td>
<td>2005</td>
<td>Quantitative</td>
<td>699 conflict-affected Afghans</td>
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<td>Nordanger</td>
<td>2007</td>
<td>Qualitative</td>
<td>20 Eritrean refugees in Ethiopia and conflict-affected Ethiopians</td>
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<td>Pham et al.</td>
<td>2010</td>
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<td>2,635 conflict-affected residents in the DRC</td>
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<td>92 conflict-affected, IDP, and returnee males in Gaza Strip</td>
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<td>Ruwanpura et al.</td>
<td>2006</td>
<td>Qualitative</td>
<td>20 Tibetan refugees in India</td>
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<tr>
<td>Sachs et al.</td>
<td>2008</td>
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<td>769 Tibetan refugees in India</td>
</tr>
</tbody>
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317
<table>
<thead>
<tr>
<th>Author et al. (Year)</th>
<th>Methodology</th>
<th>Sample Size/Population</th>
<th>Engagement</th>
</tr>
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<td>Seino et al. (2008)</td>
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<td>555 conflict-affected mothers in Afghanistan</td>
<td>Reading Quran or praying</td>
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<td>Qualitative</td>
<td>Conflict-affected residents and IDPs in Sri Lanka (n unknown)</td>
<td>Religion and faith in God, Sense of optimism and hope for the future</td>
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<td>Qualitative</td>
<td>24 Pakistani and Somali refugees in Nepal</td>
<td>Cathartic process of prayer</td>
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<td>Yamout &amp; Chaaya (2011)</td>
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<td>218 IDPs in Lebanon</td>
<td>Reasoning oneself, Increasing praying</td>
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<td>Quantitative</td>
<td>104 Burmese refugees in Thailand</td>
<td>Continuing the prodemocracy struggle, Helping the people of Burma</td>
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<td>Qualitative</td>
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<td>Keeping track of the news</td>
</tr>
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<td>Task-oriented</td>
</tr>
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<td>Araya et al. (2007b)</td>
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<td>Task-oriented</td>
</tr>
<tr>
<td>Araya et al. (2011)</td>
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<td>859 female IDPs in Ethiopia</td>
<td>Task-oriented</td>
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<tr>
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<td>Qualitative</td>
<td>20 conflict-affected or former IDP female University students in Sudan</td>
<td>Improving environmental mastery and intercultural competence</td>
</tr>
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<td>Quantitative</td>
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<td>Earning money</td>
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<td>Eggerman &amp; Panter-Brick (2010)</td>
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<td>1011 conflict-affected Afghani parents</td>
<td>Perseverance and effort</td>
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<td>Emmelkamp et al. (2002)</td>
<td>Quantitative</td>
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<td>Working, Getting involved in a political movement</td>
</tr>
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<td>Authors</td>
<td>Methodology</td>
<td>Sample/Context</td>
<td>Key Findings</td>
</tr>
<tr>
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<td>--------------</td>
<td>--------------------------------------------------------------------------------</td>
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<td>Ezard et al. (2011)</td>
<td>Qualitative</td>
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<td>Producing alcohol to earn a living</td>
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<td>Quantitative</td>
<td>625 conflict-affected residents in Lebanon</td>
<td>Working (paid and domestic)</td>
</tr>
<tr>
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<td>Quantitative</td>
<td>438 conflict-affected Lebanese families</td>
<td>Behavioural strategies</td>
</tr>
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<td>139 conflict-affected students in the former Yugoslavia</td>
<td>Work</td>
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<td>Hardgrove (2009)</td>
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<td>Liberian refugee women in Ghana</td>
<td>Adapted livelihood strategies</td>
</tr>
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<td>Quantitative</td>
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<td>Planning</td>
</tr>
<tr>
<td>Igreja et al. (2009)</td>
<td>Quantitative</td>
<td>240 conflict-affected residents in Mozambique</td>
<td>Participating in the agricultural work cycle</td>
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<td>61 Afghan refugees in Pakistan</td>
<td>Purposive activity (work and educational courses)</td>
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<td>Quantitative</td>
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<td>Having better food security</td>
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<td></td>
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<td>Receiving skills training</td>
</tr>
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<td>20 Eritrean refugees in Ethiopia and conflict-affected Ethiopians</td>
<td>Future investment (working to replace what had been lost)</td>
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<td>Quantitative</td>
<td>92 conflict-affected, IDP, and returnee males in Gaza Strip</td>
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<td>174 conflict-affected women in West Bank and Gaza Strip</td>
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<td>Attack and confrontation</td>
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<td>Control coping</td>
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<td>Quantitative</td>
<td>769 Tibetan refugees in India</td>
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<td>218 IDPs in Lebanon</td>
<td>Attending to regular work, Helping in the organization of the IDP centre</td>
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<tr>
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<td>315 Bhutanese refugees in Nepal</td>
<td>Blaming oneself, Drinking alcohol, Smoking or chewing tobacco, Isolating from other people</td>
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<td>Fighting or arguing, Hitting children, Ignoring the problem, Obsessing about the problem, Abandoning one's spouse, Giving up hope</td>
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<td>Inhalent, alcohol, cannabis/hashish, opiate, and tranquilizer use</td>
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<td>Smoking, Alcohol consumption, Drug or tranquilizer consumption</td>
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<td>Avoidance strategies, Avoidance, Substance abuse</td>
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<td>226 Tibetan refugees in India</td>
<td>Self-blame, Other-blame, Rumination, Catastrophizing</td>
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<td>61 Afghan refugees in Pakistan</td>
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<td>Lopes Cardozo et al. (2004)</td>
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<td>Sleeping</td>
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<td>Avoidance</td>
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<td>Avoidance</td>
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<td>Punamaki et al. (2008)</td>
<td>Quantitative</td>
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<td>174 conflict-affected women in West Bank and Gaza Strip</td>
<td>Avoidance and withdrawal</td>
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<td></td>
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<td>Inaction and passivity</td>
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<td>38 Kosovar refugees in Albania</td>
<td>Escape coping</td>
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<td>Sachs et al. (2008)</td>
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<td>769 Tibetan refugees in India</td>
<td>Catharsis</td>
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<td>Alcoholism</td>
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<td>Usta, Farver &amp; Zein (2008)</td>
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<td>310 predominantly-returnee women in Lebanon</td>
<td>Try to forget about the experience</td>
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<td></td>
<td></td>
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<td>Don't know how to cope</td>
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<td>Quantitative</td>
<td>218 IDPs in Lebanon</td>
<td>Do nothing</td>
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<td></td>
<td></td>
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<td>Increasing smoking</td>
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<td>Increasing eating</td>
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**Distraction**
<table>
<thead>
<tr>
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<th>Sample</th>
<th>Activities</th>
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<tbody>
<tr>
<td>Bass et al. (2012)</td>
<td>Quantitative</td>
<td>333 conflict-affected Indonesians</td>
<td>Walking to please one's heart, Engaging in sports, Engaging in recreation</td>
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<td>Eggerman &amp; Panter-Brick (2010)</td>
<td>Qualitative</td>
<td>1011 conflict-affected Afghani parents</td>
<td>Service to others, Social prominence, respectability, and honour</td>
</tr>
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<td>Emmelkamp et al. (2002)</td>
<td>Quantitative</td>
<td>315 Bhutanese refugees in Nepal</td>
<td>Playing with children or watching children play, Going for a stroll, Listening to the radio, Singing songs</td>
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<td>Exercise</td>
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<td>Quantitative</td>
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<td>Sport and walks, Leisure activities, Humour</td>
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<td>Kassam &amp; Nanji (2006)</td>
<td>Qualitative</td>
<td>61 Afghan refugees in Pakistan</td>
<td>Recreation (sports, singing, dancing, playing chess)</td>
</tr>
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<td>Humour</td>
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<td>Social activity</td>
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<td>Lopes Cardozo et al. (2005)</td>
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<td>Quantitative</td>
<td>495 Burmese refugees in Thailand</td>
<td>Singing or playing music</td>
</tr>
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<td>Qualitative</td>
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<td>Distraction</td>
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<td>Study</td>
<td>Method</td>
<td>Sample Description</td>
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<tr>
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<td>-------------------------------------------------</td>
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<td>Sachs et al. (2008)</td>
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</tr>
<tr>
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<td></td>
<td>Relaxation</td>
</tr>
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<td>Qualitative</td>
<td>24 Pakistani and Somali refugees in Nepal</td>
<td>Solidarity (playing sports, attending courses, caring for others)</td>
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<td>Yamout &amp; Chaaya (2011)</td>
<td>Quantitative</td>
<td>218 IDPs in Lebanon</td>
<td>Taking care of children/grandchildren</td>
</tr>
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<td></td>
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<td></td>
<td>Seeking entertainment inside or outside the IDP centre</td>
</tr>
</tbody>
</table>
Appendix E: Factors associated with coping domains

<table>
<thead>
<tr>
<th>Study</th>
<th>Method</th>
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<tr>
<td>Bass et al. (2012)</td>
<td>Quantitative</td>
<td>333 conflict-affected Indonesians</td>
<td>The usage of coping strategies (including 'sitting together to chat,' 'discussing,' and 'listening to advice from wise men') increased in the intervention group more than in the control, and more among the males than females.</td>
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</tbody>
</table>
| Lopes Cardozo et al. (2005) | Quantitative | 699 conflict-affected residents in Afghanistan | Many more women than men chose 'talking to family or friends' (11.1% versus 5.0%).
Many more women than men chose 'receiving medical assistance' (9.0% versus 1.4%).
Many more men than women chose 'receiving counselling' (5.1% versus 0.5%).
There was a very small gender difference, with women slightly more likely to choose 'visiting traditional healer' over men (1.2% versus 0.1%). It was not a commonly-chosen strategy for either gender.
More women than men chose 'receiving humanitarian assistance' (5.0% versus 1.7%). |
<p>| Sachs et al. (2008)  | Quantitative | 769 Tibetan refugees in India               | The higher level of trauma, the more coping strategies used (including 'seeking social/emotional support from loved ones, friends, or professionals) (F (2,766)=8.31, p&lt;0.001, n2p=0.02).                                |</p>
<table>
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<th>Study Year</th>
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</thead>
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<td>Scholte et al. (2004)</td>
<td>2004</td>
<td>Quantitative</td>
<td>1,011 conflict-affected residents in Afghanistan</td>
<td>Women were more likely than men to turn to their in-laws for emotional support (n=348; 34.9% compared to n=206; 21.1%)</td>
</tr>
<tr>
<td>Sousa (2013)</td>
<td>2013</td>
<td>Quantitative</td>
<td>122 conflict-affected Palestinian women in West Bank</td>
<td>Reliance on political support was significantly positively correlated with relying on self (r=0.201, p&lt;0.05). Reliance on religious support was positively significantly correlated with reliance on political support (r=0.337, p&lt;0.01) and reliance on family support (r=0.205, p&lt;0.05). Reliance on family support was significantly positively correlated with reliance on self (r=0.285, p&lt;0.001), reliance on religious support (r=0.205, p&lt;0.05), and usage of proactive coping (r=0.308, p&lt;0.01).</td>
</tr>
<tr>
<td>Usta, Farver &amp; Zein (2008)</td>
<td>2008</td>
<td>Quantitative</td>
<td>310 predominantly-returnee women in Lebanon</td>
<td>The items 'active strategy: support groups for women' and 'active strategy: talking to friends or family' differed significantly by geographic area (with some areas safer than others) (X²=98.34, df=10, p=0.000).</td>
</tr>
<tr>
<td>Araya et al. (2007a)</td>
<td>2007a</td>
<td>Quantitative</td>
<td>1200 IDPs in Ethiopia</td>
<td>Women reported significantly more emotion-oriented coping than men (F=5.83, P=0.016). For both women and men, higher emotion-oriented coping was associated with living in the Kaliti shelter rather than in the Kore shelter (women, r=0.118, P&lt;0.001, men r=0.153, P&lt;0.01). Traumatic experiences related to the displacement were significantly correlated with higher emotion-oriented coping for both genders (for women, r=0.167, P&lt;0.001, for men, r=0.109, P&lt;0.05).</td>
</tr>
<tr>
<td>Study</td>
<td>Design</td>
<td>Sample Size</td>
<td>Findings</td>
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<tr>
<td>Araya et al. (2007b)</td>
<td>Quantitative</td>
<td>1193 IDPs in Ethiopia</td>
<td>For women, emotion-oriented coping was significantly negatively correlated with average quality of life (r=-0.19, P&lt;0.001). Emotion-focused coping was not a significant mediator between mental distress and quality of life.</td>
<td></td>
</tr>
<tr>
<td>Bass et al. (2012)</td>
<td>Quantitative</td>
<td>333 conflict-affected Indonesians</td>
<td>The usage of coping strategies (including 'prayer' and 'reciting the Koran') increased in the intervention group more than in the control, and more among the males than females.</td>
<td></td>
</tr>
<tr>
<td>Farhood (1999)</td>
<td>Quantitative</td>
<td>438 conflict-affected Lebanese families</td>
<td>Resources such as support, education, and economic status predicted 7% of the variance in cognitive coping (R²=0.78, F change=10.67, df=7 and 430, P&lt;0.0001).</td>
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<tr>
<td>Hussain &amp; Bhushan (2011)</td>
<td>Quantitative</td>
<td>226 Tibetan refugees in India</td>
<td>The difference between first and second generation refugees for putting into perspective was not significant (t=0.612). Males report putting into perspective significantly more often than females (t=7.02, P&lt;0.001). The trauma total score significantly predicted putting into perspective after controlling for demographic variables (R²=0.242, B=0.250, p&lt;0.01). First generation refugees reported positive refocusing significantly more often than second generation participants (t=4.31, P&lt;0.001). Females report positive refocusing significantly more often than males (t=17.04, P&lt;0.001). The trauma total score significantly predicted positive refocusing after controlling for demographic variables (R²=0.715, B=0.287, p&lt;0.001).</td>
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<tr>
<td>Study</td>
<td>Methodology</td>
<td>Sample Size</td>
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<tr>
<td>Kellezi, Reicher &amp; Cassidy (2009)</td>
<td>Quantitative</td>
<td>127 conflict-affected Kosovar Albanians</td>
<td>First generation refugees reported positive reappraisal significantly more often than second generation participants ($t=7.12$, $P&lt;0.001$). Females report positive reappraisal significantly more often than males ($t=6.55$, $P&lt;0.001$). The trauma total score significantly predicted positive reappraisal after controlling for demographic variables ($R^2=0.432$, $p&lt;0.001$, $B=0.234$, $p&lt;0.01$).</td>
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<td>Females report positive reappraisal significantly more often than males ($t=6.55$, $P&lt;0.001$). The trauma total score significantly predicted positive reappraisal after controlling for demographic variables ($R^2=0.432$, $p&lt;0.001$, $B=0.234$, $p&lt;0.01$).</td>
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<tr>
<td>Lopes Cardozo et al. (2005)</td>
<td>Quantitative</td>
<td>699 conflict-affected Afghanis</td>
<td>First generation refugees reported acceptance significantly more often than second generation participants ($t=6.25$, $P&lt;0.001$). Females reported acceptance significantly more often than males ($t=9.63$, $P&lt;0.001$). The trauma total score significantly predicted acceptance after controlling for demographic variables ($R^2=0.510$, $B=0.275$, $p&lt;0.001$).</td>
<td></td>
</tr>
<tr>
<td>Pham et al. (2010)</td>
<td>Quantitative</td>
<td>2,635 conflict-affected residents in the DRC</td>
<td>Sense of coherence was significantly negatively associated with previous exposure to violence ($r=-0.30$, $p&lt;0.01$).</td>
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<td>Positive reframing was significantly positively associated with war appraisal ($r=0.212$, $p&lt;0.05$), such that a positive appraisal of the war was linked to higher positive reframing.</td>
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<td>Religion was positively correlated with family support ($r=0.216$, $p&lt;0.05$) and self-efficacy ($r=0.185$, $p&lt;0.05$).</td>
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<td>Reading the Koran or praying was chosen the most frequently out of all coping options, for both men and women (37.5% and 38.0% respectively).</td>
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</tbody>
</table>
### Problem solving

<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Sample</th>
<th>Findings</th>
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</thead>
<tbody>
<tr>
<td>Sachs et al. (2008)</td>
<td>Quantitative</td>
<td>769 Tibetan refugees in India</td>
<td>The higher level of trauma, the more coping strategies used (including 'situation redefinition,' 'acceptance,' 'religion (meditation, seeking divinations from lamas/performing special prayers/visiting temple, and viewing the trauma as a result of karma) (F(2,766)=8.31, p&lt;0.001, n²p=0.02).</td>
</tr>
<tr>
<td>Araya et al. (2007a)</td>
<td>Quantitative</td>
<td>1200 IDPs in Ethiopia</td>
<td>Men reported significantly more task-oriented coping than women (F=74.30, P&lt;0.001). For both genders, higher task-oriented coping was associated with higher perceived social support. Married participants employed significantly more task-oriented coping than divorced women and never-married men. Among women, high use of task-oriented coping was associated with literacy or attending religious services regularly. Traumatic experiences related to the displacement were significantly correlated with higher task-oriented coping for women, but not for men.</td>
</tr>
<tr>
<td>Araya et al. (2007b)</td>
<td>Quantitative</td>
<td>1193 IDPs in Ethiopia</td>
<td>Task-oriented coping was not significantly correlated to the average quality of life. Path analysis revealed that task-oriented coping increased the quality of life for men (r=0.112, P&lt;0.01) but not for women.</td>
</tr>
<tr>
<td>Araya et al. (2011)</td>
<td>Quantitative</td>
<td>859 female IDPs in Ethiopia</td>
<td>Significantly higher task-oriented coping was found among women residing in community settings versus those in temporary shelters (P=0.018).</td>
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<tr>
<td>Study</td>
<td>Methodology</td>
<td>Sample</td>
<td>Key Findings</td>
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<tr>
<td>Bass et al. (2012)</td>
<td>Quantitative</td>
<td>333 conflict-affected Indonesians</td>
<td>The usage of coping strategies (including 'earning money') increased in the intervention group more than in the control, and more among the males than females.</td>
</tr>
<tr>
<td>Hussain &amp; Bhushan (2011)</td>
<td>Quantitative</td>
<td>226 Tibetan refugees in India</td>
<td>Second generation refugees reported refocusing on planning significantly more often than first generation participants ($t=6.73$, $P&lt;0.001$). Males report refocus on planning significantly more often than females ($t=8.03$, $P&lt;0.001$). The trauma total score significantly predicted refocus on planning after controlling for demographic variables ($R^2=0.485$, $B=0.260$, $p&lt;0.001$).</td>
</tr>
<tr>
<td>Lopes Cardozo et al. (2005)</td>
<td>Quantitative</td>
<td>699 conflict-affected Afghanis</td>
<td>More men than women chose 'having better food security' (3.4% versus 0.9%). Many more men than women chose 'having more income' (35.6% versus 23.4%). Slightly more men than women chose 'living in better housing' (5.6% versus 4.1%). Receiving skills training' was not a commonly-chosen strategy for either men or women (2.9% and 0.1% respectively).</td>
</tr>
<tr>
<td>Punamaki et al. (2008)</td>
<td>Quantitative</td>
<td>92 conflict-affected, IDP, and returnee men in Gaza Strip</td>
<td>Exposure to trauma increased political activity ($F = 5.69$, $p&lt;0.01$).</td>
</tr>
<tr>
<td>Study (Year)</td>
<td>Method</td>
<td>Sample Size</td>
<td>Findings</td>
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<tr>
<td>Punamaki (1986)</td>
<td>Quantitative</td>
<td>174 conflict-affected women in West Bank and Gaza Strip</td>
<td>Exposure to traumatic events due to military occupation increased women's social-political activity ($\chi^2=6.49$, df=2, $p&lt;0.03$). Women who had more protective assets at their disposal (versus more vulnerable women) tended to use mostly social and political activity in dealing directly with the sources of the stress. Women who used this coping strategy tended to have a good education and work outside the home ($\chi^2=16.17$, df=6, $p&lt;0.01$), belong to a high social class ($\chi^2=24.54$, df=10, $p&lt;0.0006$), have fewer than seven children ($\chi^2=14.08$, df=6, $p&lt;0.02$), and not be a Palestinian refugee as of 1948 ($\chi^2=6.07$, df=2, $p&lt;0.04$). Internal locus of control in the personal life was associated with this coping mode ($\chi^2=6.29$, df=2, $p&lt;0.04$).</td>
</tr>
<tr>
<td>Riolli et al. (2002)</td>
<td>Quantitative</td>
<td>38 Kosovar refugees in Albania</td>
<td>Control coping was significantly positively associated with extroverted personality type ($r=0.513$, $p&lt;0.001$), Openness ($r=0.572$, $p&lt;0.001$), Agreeableness ($r=0.528$, $p&lt;0.001$), and Conscientiousness ($r=0.518$, $p&lt;0.001$).</td>
</tr>
<tr>
<td>Sachs et al. (2008)</td>
<td>Quantitative</td>
<td>769 Tibetan refugees in India</td>
<td>The higher level of trauma, the more coping strategies used (including 'direct action') ($F(2,766)=8.31$, $p&lt;0.001$, $\eta^2_p=0.02$).</td>
</tr>
<tr>
<td>Sousa (2013)</td>
<td>Quantitative</td>
<td>122 conflict-affected Palestinian women in West Bank</td>
<td>Usage of proactive coping was significantly positively associated with reliance on self ($r=0.569$, $p&lt;0.001$), reliance on family ($r=0.308$, $p&lt;0.01$), and political/civic engagement ($r=0.368$, $p&lt;0.001$). Reliance on self was significantly positively correlated with reliance on political support ($r=0.201$, $p&lt;0.05$), on family ($r=0.285$, $p&lt;0.01$), proactive coping ($r=0.569$, $p&lt;0.001$), and political/civic engagement. Coping through political/civic engagement was significantly positively associated with reliance on self ($r=0.340$, $p&lt;0.001$) and usage of proactive coping ($r=0.368$, $p&lt;0.001$).</td>
</tr>
</tbody>
</table>
### Appendix F: Associations between coping types and mental health outcomes

<table>
<thead>
<tr>
<th>Study &amp; population</th>
<th>Coping type</th>
<th>Measure(s)</th>
<th>Statistical test</th>
<th>Mental health impact &amp; association</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ahern et al. (2004) Conflict-affected and returnlee Kosovar Albanians</td>
<td>Social support</td>
<td>HTQ</td>
<td>Multiple regression</td>
<td>Social support had a greater protective effect against PTSD for women than for men. Women with high social support and few traumatic events had a predicted posttraumatic stress score of 1.70 (95% C. I. 1.49-1.92), and those with many traumatic events had a predicted score of 1.91 (95% C. I. 1.64-2.19). Men with high social support and few traumatic events had a predicted posttraumatic stress score of 1.58 (95% C.I., 1.41-1.76), and those with many traumatic events had a predicted score of 2.19 (95% C. I. 2.00-2.37). Women with low social support and few traumatic events had a predicted posttraumatic stress score of 2.53 (95% C. I. 2.12-2.93), and those with many traumatic events had a predicted score of 2.74 (95% C. I. 2.38-3.10). Men with low social support and few traumatic events had a predicted posttraumatic stress score of 1.72 (95% C. I. 1.50-1.95), and those with many traumatic events had a predicted score of 2.33 (95% C. I. 2.09-2.56).</td>
</tr>
<tr>
<td>Allden et al. (1996)</td>
<td>Financial assistance from UNHCR</td>
<td>HSC</td>
<td>Mean symptom score difference</td>
<td>Very little association was found between this coping strategy and anxiety and depression symptom scores. Mean symptom</td>
</tr>
</tbody>
</table>

*HSC*: Health Survey Questionnaire; *HTQ*: Harvard Trauma Questionnaire.
<table>
<thead>
<tr>
<th>Burmese refugees in Thailand</th>
<th>HTQ</th>
<th>Mean symptom score difference</th>
<th>Participants who cited this coping strategy had slightly elevated PTSD symptoms (especially on the 'avoidance' subscale) relative to participants who cited other coping strategies. Mean symptom score difference (95% CI) = 0.2 (0.0, 0.4) for 'all symptoms' of PTSD, 0.4 (0.1, 0.7) for 'avoidance' subscale of HTQ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td>HSC</td>
<td>Mean symptom score difference</td>
<td>Participants who cited 'friends' had moderately lower depression and anxiety symptom scores than those who cited other strategies (with the exception of wera). Mean symptom score difference for depressive symptoms = -0.2 (-0.5, 0.1 [95% CI]), for anxiety symptoms = -0.1 (-0.5, 0.2 [95% CI])</td>
</tr>
<tr>
<td></td>
<td>HTQ</td>
<td>Mean symptom score difference</td>
<td>Very little association was found between citing 'friends' and PTSD symptom scores. Mean symptom score difference for 'all' PTSD symptoms = -0.1 (-0.4, 0.2 [95% CI])</td>
</tr>
<tr>
<td>Bryce et al. (1989a) Conflict-affected Lebanese mothers</td>
<td>Socially-oriented</td>
<td>BDI</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Bryce et al. (1989b)</td>
<td>Family-oriented</td>
<td>BDI</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Study</td>
<td>Group/Context</td>
<td>Approach</td>
<td>Outcome Measure(s)</td>
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<tr>
<td>Palestinian refugee mothers in Lebanon and conflict-affected Lebanese mothers</td>
<td>Socially-oriented coping</td>
<td>BDI</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Emmelkamp et al. (2002) Bhutanese refugees in Nepal</td>
<td>Positive coping strategies ('Discussing the problem with friends and family' and 'Visiting a traditional healer')</td>
<td>BSI</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>SCL anxiety</td>
<td>Linear regression</td>
<td>Positive coping strategies were significantly positively associated with symptoms of anxiety.  ( r=0.12^* )</td>
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<tr>
<td></td>
<td>SCL depression</td>
<td>Linear regression</td>
<td>Positive coping strategies were significantly positively associated with symptoms of depression.  ( r=0.13^* )</td>
</tr>
<tr>
<td>Farhood &amp; Dimassi (2012) Conflict-affected residents in Lebanon</td>
<td>Social support</td>
<td>HTQ</td>
<td>Multivariate logistic regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BDI</td>
<td>Multivariate logistic regression</td>
</tr>
<tr>
<td>Farhood et al. (1993) Conflict-affected Lebanese families</td>
<td>Social support</td>
<td>BDI</td>
<td>Multiple regression</td>
</tr>
<tr>
<td>Study</td>
<td>Method</td>
<td>Outcome</td>
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<tr>
<td>Own scale measuring general psychological symptoms</td>
<td>Multiple regression</td>
<td>Social support was not associated with general psychological symptoms for mothers. However, it was significantly related to psychological symptoms among fathers, such that greater levels and satisfaction with social support was associated with lower psychological symptomatology (B=-0.33***).</td>
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</tr>
<tr>
<td>Gavrilovic et al. (2003) Conflict-affected students in the former Yugoslavia</td>
<td>IES intrusion, F test</td>
<td>Participants who dominantly used talking and gathering had significantly higher intrusion scores than those who used other coping strategies. F=3.80*</td>
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<tr>
<td></td>
<td>IES avoidance, F test</td>
<td>Participants who dominantly used talking and gathering did not yield statistically different avoidance scores than those who used other coping strategies. F =1.50 (ns)</td>
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<tr>
<td></td>
<td>SCL-90-R, F test</td>
<td>Participants who dominantly used talking and gathering did not yield statistically different scores on general psychological symptoms than those who used other coping strategies. F=0.56 (ns)</td>
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<tr>
<td>Husain et al. (2007) Refugees and conflict-affected residents in Pakistan</td>
<td>Perceived social support, SRQ-20, Linear regression</td>
<td>Level of perceived support did not mediate the relationship between demographic variables and psychological and somatic symptoms. R=-2.81 (ns)</td>
<td></td>
</tr>
<tr>
<td>Klaric et al. (2008) Conflict-affected</td>
<td>Social support, HTQ, Multiple regression</td>
<td>Social support from coworkers, family, and friends was significantly negatively associated with PTSD symptoms (B = -0.24***, -0.16*, and -0.16* respectively). Only social support</td>
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<tr>
<td>Study</td>
<td>Participants</td>
<td>Organizational memberships</td>
<td>Own scale for PTSD based on diagnostic criteria in DSM IV</td>
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<tr>
<td>Kunovich &amp; Hodson (1999)</td>
<td>Conflict-affected Croatsians</td>
<td>Existence of close personal relationships</td>
<td>Own scale for PTSD based on diagnostic criteria in DSM IV</td>
</tr>
<tr>
<td>Maercker et al. (2009)</td>
<td>Chechen IDPs in Russian Federation</td>
<td>Social acknowledgement</td>
<td>IES intrusion</td>
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<td></td>
<td></td>
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<td>IES avoidance</td>
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<td></td>
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<td>IES Hyperarousal</td>
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</tbody>
</table>

from friends was significantly negatively associated with the presence of PTSD (rather than only symptoms) (B=-0.18*).
<table>
<thead>
<tr>
<th>Study</th>
<th>Social Support Area</th>
<th>Measure 1</th>
<th>Measure 2</th>
<th>Analysis Type</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nelson et al. (2004)</td>
<td>Social support</td>
<td>HTQ</td>
<td>Bivariate analysis</td>
<td>PTSD symptoms were significantly associated with social support. P&lt;0.001</td>
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<tr>
<td></td>
<td></td>
<td>HTQ</td>
<td>Multivariate regression analysis</td>
<td>PTSD symptoms were not significantly predicted by social support. P=0.117 (ns)</td>
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<tr>
<td></td>
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<td>CES-D</td>
<td>Bivariate analysis</td>
<td>Depression symptoms were significantly associated with social support. P&lt;0.001</td>
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<tr>
<td></td>
<td></td>
<td>CES-D</td>
<td>Multivariate regression analysis</td>
<td>Depression symptoms were significantly predicted by social support. Respondents with moderate and low social support were 1.678 and 3.334 times more likely than those with high social support to have symptoms of depression. P=0.025*</td>
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</tr>
<tr>
<td>Pederson et al. (2008)</td>
<td>Social support networks</td>
<td>GHQ-12</td>
<td>Linear regression</td>
<td>A significant negative association (r=-0.205**) was observed between a strong social support and mental health outcomes. Those with weak social support were significantly more likely than those with strong social support to report mental illness, including anxiety and depression.</td>
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<tr>
<td>Punamaki et al. (2008)</td>
<td>Seeking social affiliation (dispositional coping)</td>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (dispositional) was not significantly associated with PTSD symptoms. B=0.08 (ns)</td>
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<tr>
<td></td>
<td></td>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (dispositional) was not significantly associated with depressive symptoms. B=0.13 (ns)</td>
<td></td>
</tr>
<tr>
<td>Variable</td>
<td>Method</td>
<td>Analysis</td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (dispositional) was positively associated with somatoform symptoms. B=0.21**</td>
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<tr>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (dispositional) was not significantly associated with psychological distress. B=0.02 (ns)</td>
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<tr>
<td>Seeking social affiliation</td>
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<tr>
<td>(situational coping)</td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (situational) was not significantly associated with PTSD symptoms. B=0.02 (ns)</td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (situational) was not significantly associated with depressive symptoms. B=-0.12 (ns)</td>
<td></td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (situational) was not significantly associated with somatoform symptoms. B=0.01 (ns)</td>
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<tr>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Seeking social affiliation (situational) was positively associated with psychological distress. B=0.20**</td>
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<tr>
<td>Religious affiliation</td>
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<tr>
<td>(situational)</td>
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<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Religious affiliation (situational) was not significantly associated with PTSD symptoms. B=0.07 (ns)</td>
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<td></td>
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<td>Study</td>
<td>Measure</td>
<td>Method</td>
<td>Findings</td>
<td></td>
<td></td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Religious affiliation (situational) was not significantly associated with depressive symptoms. B=0.02 (ns)</td>
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<tr>
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<td>Hierarchical regression analysis</td>
<td>Religious affiliation (situational) was not significantly associated with somatoform symptoms. B=0.06 (ns)</td>
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<tr>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Religious affiliation (situational) was positively associated with psychological distress. B=0.19**</td>
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</table>

**Scholte et al. (2004) Conflict-affected residents in Afghanistan**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Method</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSCL-25</td>
<td>Multivariate linear regression</td>
<td>Among males, there was a positive significant association between seeking emotional support from from village health volunteers or traditional health attendents and elevated depression and anxiety scores (p&lt;0.001)</td>
</tr>
<tr>
<td>HSCL-25</td>
<td>Multivariate linear regression</td>
<td>Among females, those with elevated depression symptom scores reported less emotional support seeking behaviour from their direct family (p&lt;0.001), family-in-law (p=0.009), friends (p&lt;0.001), and neighbors (p&lt;0.001) than those with lower depression scores.</td>
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<tr>
<td>Study</td>
<td>Conflict-affected mothers in Afghanistan</td>
<td>PTSD criteria in DSM-IV</td>
</tr>
<tr>
<td>-----------------------------------------</td>
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<tr>
<td>Seino et al. (2008)</td>
<td>Mental health support drawn from health facilities, religious leaders, spiritual healers, and friends</td>
<td>None</td>
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<tr>
<td>Sousa (2013)</td>
<td>Reliance on political support SF-12 Linear regression</td>
<td>Reliance on political support was not significantly associated with mental health. r=-0.144 (ns)</td>
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<tr>
<td></td>
<td>Reliance on political support PC PTSD Linear regression</td>
<td>Reliance on political support was not significantly correlated with PTSD symptoms. r=0.178 (ns)</td>
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<tr>
<td></td>
<td>Reliance on political support K-10 Linear regression</td>
<td>Reliance on political support was not significantly associated with distress. r=0.121 (ns)</td>
</tr>
<tr>
<td></td>
<td>Reliance on religious support SF-12 Linear regression</td>
<td>Reliance on religious support was not significantly correlated with mental health. r=-0.031 (ns)</td>
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<tr>
<td></td>
<td>Reliance on religious support SF-12 Multiple regression</td>
<td>Religious support was a significant protective factor. For people who highly relied on religious support, as political violence in the past month increased, mental health improved. B (standardized)=0.240*</td>
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<tr>
<td></td>
<td>Reliance on religious support PC PTSD Linear regression</td>
<td>Reliance on religious support was not significantly correlated with PTSD symptoms. r=0.160 (ns)</td>
</tr>
<tr>
<td></td>
<td>Reliance on religious support K-10 Linear regression</td>
<td>Reliance on religious support was not significantly correlated with distress. r=-0.005 (ns)</td>
</tr>
<tr>
<td>Reliance on family support</td>
<td>SF-12</td>
<td>Linear regression</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------</td>
<td>-------------------</td>
</tr>
<tr>
<td></td>
<td>PC PTSD</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>K-10</td>
<td>Linear regression</td>
</tr>
</tbody>
</table>

**Usta, Farver & Zein (2008) Predominantly-returnee women in Lebanon**

<table>
<thead>
<tr>
<th>Active strategy</th>
<th>General mental health assessment</th>
<th>F test (Scheffe's method)</th>
<th>Women who reported using an active strategy had lower negative mental health outcomes associated with the conflict than those who tried to forget about their experiences or did not know how to cope. $F(2,309)=10.50^{****}$, Sheffe=0.05</th>
</tr>
</thead>
<tbody>
<tr>
<td>(<em>Support groups for women,</em> <em>Talking to friends or family,</em> <em>Assistance from NGO workers,</em> <em>Legal advice</em>)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Yamout & Chaaya (2011) IDPs in Lebanon**

Coping through socialising had no significant impact on anxiety symptoms versus other coping strategies. $P=0.06$ (ns)

**Positive cognitive restructuring**

**Allden et al. (1996) Burmese refugees in Thailand**

<table>
<thead>
<tr>
<th>Weria (resolve/confidence)</th>
<th>HSC</th>
<th>Mean symptom score difference</th>
<th>Participants who cited weria had consistently moderately lower anxiety and depression symptom scores than those who used other coping strategies. Mean symptom score difference $= -0.3 (-0.5,-0.1 [95% CI])$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HTC</td>
<td>Mean symptom score difference</td>
<td>Participants who cited weria had consistently moderately lower PTSD symptom scores than those who used other coping strategies. Mean symptom score difference $= -0.3 (-0.5,-0.0 [95% CI])$ for 'all symptoms' of PTSD</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Study</th>
<th>Coping Type</th>
<th>Methodology</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Araya et al. (2007b) IDPs in Ethiopia</td>
<td>Emotion-oriented</td>
<td>SCL-90-R</td>
<td>Linear correlation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Emotion-oriented coping was significantly positively correlated with mental distress. $r=0.18^{***}$</td>
<td></td>
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<tr>
<td>Bryce et al. (1989b)</td>
<td>Cognitive coping</td>
<td>BDI</td>
<td>Linear correlation</td>
</tr>
<tr>
<td>Palestinian refugee mothers in Lebanon and conflict-affected Lebanese mothers</td>
<td></td>
<td>Cognitive-oriented coping was not significantly correlated with depressive symptomatology. $r=0.0220$ (ns)</td>
<td></td>
</tr>
<tr>
<td>Emmelkamp et al. (2002) Bhutanese refugees in Nepal</td>
<td>Positive coping strategies (worshipping, accepting the situation)</td>
<td>BSI</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Positive coping strategies were significantly positively associated with symptoms of somatic distress. $r=0.14^{*}$</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Positive coping strategies were significantly positively associated with symptoms of anxiety. $r=0.12^{*}$</td>
<td></td>
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<tr>
<td></td>
<td>Positive coping strategies were significantly positively associated with symptoms of depression. $r=0.13^{*}$</td>
<td>SCL anxiety</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>SCL depression</td>
<td>Linear regression</td>
<td></td>
</tr>
<tr>
<td>Study</td>
<td>Cognitive strategies</td>
<td>Psychological symptoms in DSM III</td>
<td>Linear regression</td>
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<tr>
<td></td>
<td></td>
<td>BDI</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Hussain &amp; Bhushan (2011) Tibetan refugees in India</td>
<td>Acceptance</td>
<td>IES</td>
<td>Linear regression</td>
</tr>
<tr>
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<td>IES</td>
<td>Hierarchical regression analysis</td>
</tr>
<tr>
<td></td>
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<td>IES</td>
<td>Final regression analysis</td>
</tr>
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<td></td>
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<td>Sobel test for mediation</td>
</tr>
<tr>
<td></td>
<td>Positive refocusing</td>
<td>IES</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>Positive reappraisal</td>
<td>IES</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>Putting into perspective</td>
<td>IES</td>
<td>Hierarchical regression analysis</td>
</tr>
<tr>
<td>Study</td>
<td>Measure of Coping</td>
<td>Methodology</td>
<td>Findings</td>
</tr>
<tr>
<td>-------</td>
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<tr>
<td>Pham et al. (2010) Conflict-affected residents in DRC</td>
<td>Sense of coherence</td>
<td>PCL-C Multivariate linear regression</td>
<td>Sense of coherence is inversely associated with PTSD symptoms. B=-1.27***</td>
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<tr>
<td></td>
<td></td>
<td>HDSC Multivariate linear regression</td>
<td>Sense of coherence is inversely associated with depression symptoms. B=-1.20***</td>
</tr>
<tr>
<td>Punamaki et al. (2008) Conflict-affected, IDP, and returnee men in Gaza Strip</td>
<td>Emotional coping (dispositional)</td>
<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Emotional coping (dispositional) was positively associated with PTSD symptoms. B=0.26***</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Emotional coping (dispositional) was not significantly associated with depressive symptoms. B=0.15</td>
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<tr>
<td></td>
<td></td>
<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Emotional coping (dispositional) was positively associated with somatoform symptoms. B=0.14*</td>
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<tr>
<td></td>
<td></td>
<td>SCL-90-R Hierarchical regression analysis</td>
<td>Emotional coping (dispositional) was positively associated with psychological distress. B=0.23**</td>
</tr>
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</table>

The main effect on posttraumatic stress remained significant even after controlling the demographic covariates and trauma total score. B=0.203***

Putting into perspective partially mediates the relationship between trauma and IES scores, such that higher scores on putting into perspective was related to higher IES scores. z=2.635**
<table>
<thead>
<tr>
<th>Study</th>
<th>Coping Strategy</th>
<th>Methodology</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional coping (situational)</td>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Emotional coping (situational) was not significantly associated with PTSD symptoms. B=0.02 (ns)</td>
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<tr>
<td></td>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Emotional coping (situational) was not significantly associated with depressive symptoms. B=0.01 (ns)</td>
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<tr>
<td></td>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Emotional coping (situational) was not significantly associated with somatoform symptoms. B=-0.10 (ns)</td>
</tr>
<tr>
<td></td>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Emotional coping (situational) was not significantly associated with psychological distress. B=0.01 (ns)</td>
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<tr>
<td>Seino et al. (2008)</td>
<td>Reading Quran or praying</td>
<td>PTSD criteria in DSM-IV</td>
<td>Reading the Quran or praying was not significantly associated with PTSD symptoms. OR = 0.94 (ns)</td>
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<tr>
<td>Conflict-affected mothers in Afghanistan</td>
<td>Problem solving</td>
<td></td>
<td>Very little association was found between this coping strategy and anxiety and depression symptom scores. Mean symptom score difference = 0.0 (-0.3, 0.3 [95% CI]) for 'all symptoms' of PTSD</td>
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<tr>
<td>Allden et al. (1996) Burmese refugees in Thailand</td>
<td>Continuing the prodemocracy struggle</td>
<td>HSC</td>
<td>Very little association was found between this coping strategy and anxiety and depression symptom scores. Mean symptom score difference = 0.0 (-0.2, 0.3 [95% CI]) for 'all symptoms' of PTSD</td>
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<tr>
<td></td>
<td></td>
<td>HTQ</td>
<td>Very little association was found between this coping strategy and PTSD symptom scores. Mean symptom score difference = 0.0 (-0.3, 0.3 [95% CI]) for 'all symptoms' of PTSD</td>
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<tr>
<td>Araya et al. (2007b) IDPs in Ethiopia</td>
<td>Helping the people of Burma</td>
<td>HSC</td>
<td>Mean symptom score difference</td>
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<td>Emmelkamp et al. (2002) Bhutanese refugees in Nepal</td>
<td>Positive coping strategies ('working' and 'getting involved in a political movement')</td>
<td>HTQ</td>
<td>Mean symptom score difference</td>
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<tr>
<td>Hussain &amp; Bhushan (2011) Tibetan refugees in India</td>
<td>Planning</td>
<td>SCL-90-R</td>
<td>Linear regression</td>
</tr>
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<td></td>
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<td>SCL anxiety</td>
<td>Linear regression</td>
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<tr>
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<td></td>
<td>SCL depression</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BSI</td>
<td>Linear regression</td>
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<tr>
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<td>Context</td>
<td>Measures</td>
<td>Analysis</td>
</tr>
<tr>
<td>-------------------------------</td>
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<td>------------------------------------</td>
<td>----------------------</td>
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<td>Igreja et al (2009)</td>
<td>Conflict-affected residents in Mozambique</td>
<td>Self Inventory for PTSD</td>
<td>F test</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SRQ</td>
<td>F test</td>
</tr>
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<td>Punamaki et al. (2008)</td>
<td>Conflict affected, IDP, and returnee men in Gaza Strip</td>
<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Active and constructive dispositional coping was not associated with PTSD symptoms. B=-0.03 (ns)</td>
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<tr>
<td></td>
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<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Active and constructive dispositional coping was not associated with depressive symptoms. B=-0.16 (ns)</td>
</tr>
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<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Active and constructive dispositional coping was not associated with somatoform symptoms. B=-0.11 (ns)</td>
</tr>
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<td></td>
<td>SCL-90-R Hierarchical regression analysis</td>
<td>Active and constructive dispositional coping was negatively associated with psychological distress. B=-0.17*</td>
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<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Active and constructive situational coping was not associated with PTSD symptoms. B=-0.10 (ns)</td>
</tr>
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<td>CIDI 2.1 Hierarchical regression analysis</td>
<td>Active and constructive situational coping was not associated with depressive symptoms. B=-0.07 (ns)</td>
</tr>
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<td>Methodology</td>
<td>Findings</td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Active and constructive situational coping was not associated with somatoform symptoms. B=0.03 (ns)</td>
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<tr>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Active and constructive situational coping was not associated with psychological distress. B=-0.14 (ns)</td>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Political activity was negatively associated with PTSD symptoms. B=-0.16*</td>
<td></td>
</tr>
<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Political activity was negatively associated with depressive symptoms. B=-0.19*</td>
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</tr>
<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
<td>Political activity was not associated with somatoform symptoms. B=-0.09 (ns)</td>
<td></td>
</tr>
<tr>
<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
<td>Political activity was not associated with psychological distress. B=-0.04 (ns)</td>
<td></td>
</tr>
<tr>
<td>Punamaki (1986)</td>
<td>Psychiatric screening &amp; MAACL</td>
<td>Attack and confrontation significantly predicted psychiatric symptoms. B=3.88**, R2=0.13, F=6.10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Psychiatric screening &amp; MAACL</td>
<td>Social and political activity significantly predicted psychiatric symptoms. B=3.12**, R2=0.26, F=4.89 (significant at 0.01)</td>
<td></td>
</tr>
<tr>
<td>Study</td>
<td>Coping Strategy</td>
<td>Measure</td>
<td>Statistical Test</td>
</tr>
<tr>
<td>------------------------------</td>
<td>--------------------------</td>
<td>--------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>Riolli et al. (2002)</td>
<td>Control coping</td>
<td>BSI</td>
<td>Multiple regression</td>
</tr>
<tr>
<td>Kosovar refugees in Albania</td>
<td>Proactive coping</td>
<td>SF-12</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PC PTSD</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>K-10</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Sousa (2013)</td>
<td>Proactive coping</td>
<td>SF-12</td>
<td>Linear regression</td>
</tr>
<tr>
<td>Conflict-affected Palestinian women in West Bank</td>
<td></td>
<td>PC PTSD</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>K-10</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td>Self-reliance</td>
<td>SF-12</td>
<td>Linear regression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PC PTSD</td>
<td>Linear regression</td>
</tr>
<tr>
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<td></td>
<td>K-10</td>
<td>Linear regression</td>
</tr>
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</table>

Escape/avoidance

"Escape/avoidance"
<table>
<thead>
<tr>
<th>Study</th>
<th>Group</th>
<th>Coping Style</th>
<th>Measure</th>
<th>Method</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Araya et al. (2007b) IDPs in Ethiopia</td>
<td>Avoidance-oriented</td>
<td>SCL-90-R</td>
<td>Linear regression</td>
<td>Avoidance-oriented coping was significantly negatively correlated with mental distress. ( r = -0.09^{**} )</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SCL-90-R</td>
<td>Path analysis</td>
<td>Avoidance-oriented coping significantly reduced mental distress for women, but not for men. ( r = -0.104^{**} )</td>
<td></td>
</tr>
<tr>
<td>Bryce et al. (1989a) War-affected mothers in Lebanon</td>
<td>Emotion-oriented</td>
<td>BDI</td>
<td>Linear correlation</td>
<td>Emotion-oriented response style was significantly positively correlated with depressive symptomatology. ( r = 0.28^{****} )</td>
<td></td>
</tr>
<tr>
<td>Bryce et al. (1989b) Palestinian refugee mothers in Lebanon and conflict-affected Lebanese mothers</td>
<td>Emotion coping</td>
<td>BDI</td>
<td>Linear correlation</td>
<td>Emotion-oriented coping was significantly positively correlated with depressive symptomatology. ( r = 0.3101^{***} )</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Diversion/denial</td>
<td>BDI</td>
<td>Linear regression</td>
<td>Diversion or denial was not significantly correlated with depressive symptomatology. ( r = 0.0373 ) (ns)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Passive coping</td>
<td>BDI</td>
<td>Linear correlation</td>
<td>Passive coping was not significantly correlated with depressive symptomatology. ( r = 0.0349 ) (ns)</td>
<td></td>
</tr>
<tr>
<td>Emmelkamp et al. (2002) Bhutanese refugees in Nepal</td>
<td>Negative coping strategies ('blaming oneself,' 'drinking alcohol,' 'smoking or chewing tobacco,' 'isolating from other people,' 'fighting or arguing,' 'hitting children,' 'ignoring the problem,' 'obsessing</td>
<td>BSI</td>
<td>Linear regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of somatic distress. ( r = 0.20^* )</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>BSI</td>
<td>Multiple regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of somatic distress. ( b = 0.17^* )</td>
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<td></td>
<td></td>
<td>SCL anxiety</td>
<td>Linear regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of anxiety. ( r = 0.19^* )</td>
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<td></td>
<td></td>
<td>SCL anxiety</td>
<td>Multiple regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of anxiety. ( b = 0.17^* )</td>
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<td>Researchers and Location</td>
<td>Predictor Variable</td>
<td>Methodology</td>
<td>Regression Analysis</td>
<td>Findings</td>
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<td>Farhood &amp; Dimassi (2012) Conflict-affected residents in Lebanon</td>
<td>SCL depression</td>
<td>Linear regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of depression. $r=0.28^*$</td>
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<td></td>
<td>SCL depression</td>
<td>Multiple regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of depression. $b=0.27^*$</td>
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<td></td>
<td>SCL somatization</td>
<td>Linear regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of somatization. $r=0.13^*$</td>
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<td></td>
<td>SCL somatization</td>
<td>Multiple regression</td>
<td>Negative coping strategies were significantly positively associated with symptoms of somatization. $b=0.12^*$</td>
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<td>Hussain &amp; Bhushan (2011) Tibetan refugees in India</td>
<td>Smoking cigarettes</td>
<td>HTQ</td>
<td>Multivarite logistic regression</td>
<td>Smoking cigarettes was positively significantly associated with PTSD. OR = 2.69***.</td>
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<td></td>
<td>Self-blame</td>
<td>IES</td>
<td>Linear regression</td>
<td>Self-blame was significantly positively associated with avoidance and intrusion. $r=0.541^{**}$</td>
<td></td>
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<tr>
<td></td>
<td>Rumination</td>
<td>IES</td>
<td>Linear regression</td>
<td>Rumination was significantly positively associated with avoidance and intrusion. $r=0.156^*$</td>
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<tr>
<td></td>
<td>Other-blame</td>
<td>IES</td>
<td>Linear regression</td>
<td>Other blame was significantly negatively associated with avoidance and intrusion. $r=-0.189^{**}$</td>
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<tr>
<td>Kellezi, Reicher &amp; Cassidy (2009)</td>
<td>Self-blame</td>
<td>HADS (anxiety)</td>
<td>Linear regression</td>
<td>Self-blame was significantly positively associated with anxiety. $r=0.393^{**}$</td>
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<td>Study</td>
<td>Group</td>
<td>Measure</td>
<td>Type</td>
<td>Results</td>
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<tr>
<td>Conflict-affected Kosovar Albanians</td>
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<td></td>
<td>Multiple regression</td>
<td>Self blame significantly predicted anxiety, which moderated primary appraisal. Primary appraisal had a stronger effect on anxiety when self blame levels were low. Conversely, when self blame levels were high, positive appraisal contributed little to reducing anxiety. ( b=-0.38^{*\ast\ast\ast}, t_{105}=-4.45 )</td>
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<tr>
<td></td>
<td>HADS (depression)</td>
<td></td>
<td>Linear regression</td>
<td>Self blame was significantly positively associated with depressive mood. ( r=0.367^{*\ast\ast} )</td>
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<td></td>
<td>Multiple regression</td>
<td>Self blame significantly predicted depressive mood. ( B=0.41, t_{109}=-4.76^{*\ast\ast\ast} )</td>
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<tr>
<td>Morina (2010)</td>
<td>Avoidance</td>
<td>MINI (major depressive episode)</td>
<td>Hierarchical regression analysis</td>
<td>Avoidance was significantly positively associated with major depressive episode. ( t=2.40^{*} )</td>
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<tr>
<td>Conflict-affected Albanian Kosovars</td>
<td></td>
<td>MINI (PTSD)</td>
<td>Hierarchical regression analysis</td>
<td>Avoidance was significantly positively associated with PTSD. ( t=2.37^{*} )</td>
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<td>PHQ (somatization)</td>
<td>Hierarchical regression analysis</td>
<td>Avoidance was significantly positively associated with somatization. ( t=2.70^{*\ast\ast} )</td>
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<td>Morina, Stangier &amp; Risch (2008)</td>
<td>Avoidance</td>
<td>IES-R</td>
<td>Linear correlation</td>
<td>Avoidance was significantly correlated with symptoms of PTSD. ( r=0.47^{*\ast\ast} )</td>
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<tr>
<td>Conflict-affected Albanian Kosovars</td>
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<td>IES-R (avoidance)</td>
<td>Linear correlation</td>
<td>Avoidance was significantly correlated with the avoidance domain of PTSD. ( r=0.48^{*\ast\ast} )</td>
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<tr>
<td><strong>Morina (2007)</strong> Conflict-affected Kosovars</td>
<td><strong>Avoidance</strong></td>
<td><strong>IES-R</strong> (intrusion)</td>
<td>Linear correlation</td>
<td>Avoidance was significantly correlated with the intrusion domain of PTSD. r=0.42**</td>
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<tr>
<td><strong>IES-R</strong> (arousal)</td>
<td>Linear correlation</td>
<td>Avoidance was significantly correlated the arousal domain of PTSD. r=0.43**</td>
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<tr>
<td><strong>BSI-GSI</strong></td>
<td>Linear correlation</td>
<td>Avoidance was significantly correlated with psychopathology and psychological distress. r=0.37**</td>
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</tbody>
</table>

| **Morina (2007)** Conflict-affected Kosovars | **Avoidance** | **t-test** | Kosovars who used avoidance had significantly higher levels of symptoms of PTSD than those who did not use avoidance. t = -3.27** |
| **IES-R** | t-test | Kosovars who used avoidance had significantly higher levels of symptoms of depression than those who did not use avoidance. t = -4.42*** |
| **BSI** (depression) | t-test | Kosovars who used avoidance had significantly higher levels of symptoms of anxiety than those who did not use avoidance. t = -5.02*** |
| **BSI** (anxiety) | t-test | Kosovars who used avoidance had significantly higher levels of symptoms of somatization than those who did not use avoidance. t = -4.88*** |

<p>| <strong>Punamaki et al. (2008)</strong> Conflict affected, IDP, and Avoidance and denial (dispositional) | <strong>Avoidance</strong> | <strong>CIDI 2.1</strong> Hierarchical regression analysis | Avoidance and denial (dispositional) was not significantly associated with PTSD symptoms. B=0.01 (ns) |</p>
<table>
<thead>
<tr>
<th>returnee men in Gaza Strip</th>
<th>Avoidance and denial (dispositional) was not significantly associated with depressive symptoms. B=0.01 (ns)</th>
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<tr>
<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>CIDI 2.1</td>
<td>Avoidance and denial (dispositional) was not significantly associated with somatoform symptoms. B=0.02 (ns)</td>
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<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>SCL-90-R</td>
<td>Avoidance and denial (dispositional) was not significantly associated with psychological distress. B=0.01 (ns)</td>
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<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>CIDI 2.1</td>
<td>Avoidance and denial (situational) was negatively associated with PTSD symptoms. B=-0.24**</td>
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<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>CIDI 2.1</td>
<td>Avoidance and denial (situational) was not significantly associated with depressive symptoms. B=-0.15 (ns)</td>
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<td>CIDI 2.1</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>CIDI 2.1</td>
<td>Avoidance and denial (situational) was negatively associated with somatoform symptoms. B=-0.28***</td>
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<td>SCL-90-R</td>
<td>Hierarchical regression analysis</td>
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<tr>
<td>SCL-90-R</td>
<td>Avoidance and denial (situational) was not significantly associated with psychological distress. B=-0.03 (ns)</td>
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<td>Punamaki (1986) Conflict-affected women in West Bank and Gaza Strip</td>
<td>Avoidance and withdrawal</td>
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<tr>
<td>Inaction and passivity</td>
<td>Psychiatric screening &amp; MAACL</td>
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<td>General apprehension</td>
<td>Psychiatric screening &amp; MAACL</td>
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<tr>
<td>Defence mechanisms</td>
<td>Psychiatric screening &amp; MAACL</td>
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<td>Riolli et al. (2002) Kosovar refugees in Albania</td>
<td>Escape coping</td>
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<td>Usta, Farver &amp; Zein (2008) Predominantly-returnee women in Lebanon</td>
<td>Trying to forget about the experience</td>
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<td>Distraction</td>
<td>Positive coping strategies (‘playing with</td>
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<td>Reference</td>
<td>Description</td>
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<td>Emmelkamp et al. (2002) Bhutanese refugees in Nepal</td>
<td>'Children or watching children play,' 'going for a stroll,' 'listening to the radio,' and 'singing songs'</td>
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<td>Gavrilovic et al. (2003) Conflict-affected students in the former Yugoslavia</td>
<td>Leisure activities</td>
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<td>Kellezi, Reicher &amp; Cassidy (2009) Conflict-affected Kosovar Albanians</td>
<td>Humour</td>
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<td>Population</td>
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<td>Kunovich &amp; Hodson (1999)</td>
<td>Conflict-affected Croatians</td>
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<td>Khamis (1998)</td>
<td>War-affected women in Palestinian territories</td>
</tr>
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<td>Sachs et al. (2008)</td>
<td>Tibetan refugees in India</td>
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<td>Source</td>
<td>Method</td>
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<td>HTQ</td>
<td>Linear regression</td>
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<td>HSC</td>
<td>Linear regression</td>
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<tr>
<td>HSC</td>
<td>Linear regression</td>
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<tr>
<td>SCL somatization HTQ, &amp; HSC</td>
<td>Multiple regression</td>
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</tbody>
</table>

* significant at \( P<0.05 \), ** significant at \( P<0.01 \), *** significant at \( P<0.001 \), **** significant at \( P<0.0001 \)

(ns) = non-significant

[1] Sachs et al. (2008) and Khamis (1998) used a sum of coping activities rather than disaggregated coping types in predicting mental health outcomes. Therefore, it is not possible to categorize their findings into positive cognitive restructuring, problem solving, support seeking, escape/avoidance, or distraction coping domains.
Appendix G: Early draft topic guide for IDP women

1. Introductory questions

Possible questions:
Where are you from originally?
Do you have any children? (If yes, how many and ages)
How long have you been living here?
How old are you?
What does your daily routine look like?

Can you tell me about some of the events that have happened leading up to living here? (possible probes: exposure to violence, displacement, loss of property, loss of friends or family).

2. Questions on current challenges with daily living

Possible questions:
What are some of your daily challenges due to displacement?

   Possible probes:
   • Power access?
   • Water access?
   • Economic situation?
   • Child care?
   • Food access?

3. Questions related to areas of coping (related to significant events and daily living challenges identified above)

   • Relating to others

   Possible question:
i. How has being displaced impacted your relationships with family and friends?

Possible probes:
1. Closer relationships?
2. Greater willingness to accept help and support?
3. Greater willingness to express emotions?
4. Greater compassion for others?
5. Greater effort into relationships?

• Realizing new possibilities

Possible question:
i. How has displacement lead to new interests or opportunities?

Possible probes:
1. Developed new interests and/or skills?
2. New opportunities which otherwise would not have been available?
3. Greater willingness to change things which need changing?

• Reflecting on personal strength

Possible question:
How has displacement impacted your personal strength?

Possible probes:
1. Emotional growth?
2. Feeling stronger, confident, assertive, self-reliant?
3. Increased self-esteem?
4. Greater willingness to accept how things work out?

• Spiritual change

Possible question:
How has displacement impacted your spirituality?

Possible probes:
1. Stronger faith?
2. Finding meaning in past events?
3. Better understanding of religious matters?

- **Appreciation of life**

  Possible question:
  How has displacement impacted how you appreciate life?

  Possible probes:
  1. Greater appreciation of others?
  2. Enjoying life more?
  3. Change of priorities in life?
  4. Greater appreciation of value of own life?
  5. Appreciating each day?

4. **Reflection on how personal coping has been influenced by external or community-level factors.**

Possible questions:
How has the community helped you cope with challenges due to displacement?

Possible probes:
- Support from family?
- Support from community members (religious figures such as priests, teachers, etc)?
- Resources in community (availability of child care, support for farming and gardening activities, women's groups, recreational opportunities, educational opportunities)?
- Geographic features of community (availability of common/public spaces, level of crowdedness, designated buildings for recreation or education)?

5. **Impact of coping on personal growth**

Possible questions:
How have you changed or grown as a result of being displaced?

Possible probes:
- What are some of the positive things that have happened because of the displacement?
- Do you think you have always used the same coping strategies, or have these changed over the years?
Appendix H: Interview participant information sheet and consent form

In case of any questions, please contact:
1) [Georgian affiliation to be added here], Global Initiative on Psychiatry
   Tel. #####. Email
2) Maureen Seguin, London School of Hygiene and Tropical Medicine
   Tel. 55 596 6820. E-mail maureen.seguin@lshtm.ac.uk.

Interview Participant Information Sheet

Study title: “Coping strategies among internally displaced women in Georgia: A qualitative study”

This sheet provides information on a study which you have been asked to participate in. The London School of Hygiene and Tropical Medicine in the United Kingdom is conducting interviews which seek to explore coping strategies of displaced women. We would like to ask you some questions on how you have managed to cope with the hardships of war and displacement. In addition, we are asking some women to complete an audio diary to record challenges and coping strategies.

Your participation is completely voluntary so you should feel completely free to refuse to participate, to stop the interview at any time, or to not answer questions you do not feel comfortable with. If you do withdraw there will be no effect, positive or negative, on you or your household. The study does not give any benefits for you or other people in the household.

The interview will be held in a private space, and all the answers you provide are anonymous and confidential. We will not write down any names on the forms so answers cannot be connected to individual persons. We will keep all the forms securely stored and they will not be shared with anyone outside of the research team.

If you have any questions on this study in the future or would like further information you can contact us on the details at the top of this sheet. Thank you for your kind help.
In case of any questions, please contact:
1) [Georgian affiliation to be added here], Global Initiative on Psychiatry
Tel. ####. Email
2) Maureen Seguin, London School of Hygiene and Tropical Medicine
Tel. 55 596 6820. E-mail maureen.seguin@lshtm.ac.uk.

Interview Participant Consent Form

Study title: “Coping strategies among internally displaced women in Georgia: A qualitative study”

I have read the information sheet concerning this study [or have understood the verbal explanation] and I have a copy of it for me to keep, and I understand what will be required of me to take part in the study.

I understand that at any time I may withdraw from this study without giving a reason, and that if I do withdraw there will be no effect, positive or negative, on me or my household.

My questions concerning this study have been answered by:……………………..……………..

[Name of interviewer]

I agree to take part in this study

Signature of participant: ………………………………… Date:
……/……/……

[dd / mm / yyyy]

Signature of investigator: ………………………………… Date:
……/……/……

[dd / mm / yyyy]
Appendix I: Audio diary participant information sheet and consent form

In case of any questions, please contact:
1) [Georgian affiliation to be added here], Global Initiative on Psychiatry
Tel. ######. Email

2) Maureen Seguin, London School of Hygiene and Tropical Medicine
Tel. 55 596 6820. E-mail maureen.seguin@lshtm.ac.uk.

Interview Participant Information Sheet

Study title: “Coping strategies among internally displaced women in Georgia: A qualitative study”

This sheet provides information on audio diaries for a study which you have been asked to participate in. The London School of Hygiene and Tropical Medicine in the United Kingdom is asking women to keep an audio diary for one week, which you may use to record examples of the daily challenges you face, and how you cope with these challenges. After you have had the tape recorder for one week, the research team will pick up the recorder and tape and ask how it went.

Your participation is completely voluntary so you should feel completely free to refuse to keep an audio diary. Though you will be given a 90 minute cassette tape, you can speak as much or as little as you wish. If you do not wish to record anything, there will be no effect, positive or negative, on you or your household.

The tapes will be held in a private space, and everything you say will be completely anonymous and confidential. We will not write down any names on the tapes so your comments cannot be connected to you. We will keep all the tapes securely stored and they will not be shared with anyone outside of the research team. After the recording has been transcribed, the tape will be erased.

If you have any questions about audio diaries in the future or would like further information you can contact us on the details at the top of this sheet. Thank you for your kind help.
Audio Diary Participant Consent Form

Study title: “Coping strategies among internally displaced women in Georgia: A qualitative study”

I have read the information sheet concerning the audio diaries [or have understood the verbal explanation] and I have a copy of it for me to keep, and I understand what will be required of me to keep an audio diary.

I understand that at any time I may stop keeping an audio diary, and that if I do withdraw there will be no effect, positive or negative, on me or my household.

My questions concerning this study have been answered by:……………………………………. [name of interviewer]

I agree to take part in this study

Signature of participant: ……………………………………… Date: …………………………

[dd / mm / yyyy]

Signature of investigator: ……………………………………… Date: ……………………………

[dd / mm / yyyy]
Appendix J: Audio recording instructions

Study title: “Coping strategies among internally displaced women in Georgia: A qualitative study”

This sheet provides information on a research study which you have been asked to participate in. The purpose of the study is to look at the ways in which women cope and manage with the difficulties resulting from the 2008 war with Russia, and having to leave your home and living here in the settlement. We are from the London School of Hygiene and Tropical Medicine, and are doing this research in partnership with the Georgia office of the Global Initiative on Psychiatry. This study has received approval from the Government of Georgia. We are asking women to use a voice recorder for one week. We are giving a small payment of 15 Lari to compensate you for your time. The study does not give any benefits for you.

In the recording, we are interested in the challenges you have faced in the past and currently, and the ways in which you manage and cope with these challenges. After you have had the tape recorder one week, we will pick it up, give you 15 Lari, and ask you how it went. You may record as little or as much as you like, though the tape will last only 90 minutes. You can choose to record every day, or perhaps just a few times during the week you have the voice recorder. You may find it best to do the recording in a private space, to make sure that what you say remains private and confidential.

If you become upset because of the voice recording, you are completely free to stop using it. If you are troubled by anything to do with the recordings, we will discuss and can help you receive services that may help. You should not feel that you have to talk about things you do not want to talk about, or that may put you in a difficult position.

Your participation is completely up to you. You are completely free to refuse to participate. If you decide not to complete the voice recordings, there will be no effect, good or bad, on you.

We will not keep track of your name on the voice recording tape, so there will be no way to identify what you have said in any documents resulting from this project. Only the research team will have access to the information that you provide. We may use anonymous quotes from the voice recorder in written works, but there will be no way to tell which respondents said these quotes.

If you have any questions on this study in the future or would like further information you can contact us on the details at the top of this sheet. Thank you for your kind help.
Appendix K: Topic guide for IDP women

1. Introductory questions
   - Village or town of origin
   - Age
   - Family details (marital status, children, grandchildren)
   - Occupation and educational background

2. Experiences during and immediately after 2008 displacement
   - Order of events and who they fled with
   - Loss of property and belongings
   - Loss of friends or family
   - Exposure to violence

3. Current daily routine
   - Child care
   - Economic activities
   - Caring for parents or elderly

4. Daily challenges
   - Economic situation
   - Power access
   - Water quality and access
   - Child care
   - Food access
   - Access to washing facilities
   - Emotional challenges

5. Community characteristics
   - Support from community members such as priests or teachers
   - Community resources
   - Common or public spaces in the community
6. **Coping responses**

- Responses to challenges - behavioural or mental
- Difficulties before versus after displacement
- Coping strategies before versus after displacement
- Differences in coping based on gender

7. **Impact of displacement**

- Relationships with family and friends
- New opportunities
- Personality
- Spirituality
Appendix L: Simplified audio recording instructions

Please try to do the recording alone, without other people listening or talking. Try to record something once per day, and if possible, fill up the tape. After you have had the tape recorder for a week, we will pick it up and ask you how it went, and give you 15 GEL.

We are interested in learning what sorts of problems and challenges you face on a regular day. For example, do you face problems with your physical or emotional health? Do you have problems with money or paying bills? Are there problems with your house or village?

We are interested in what you do to try to solve these problems. For example, some people get in arguments, or read, or pray, or drink alcohol, or talk to neighbours. What do you do?

Men and women may try to solve problems differently. We are interested in your opinion about this. Do you notice men and women using different ways to solve problems? Are men more ‘active’ problem solvers, or are women more ‘active?’ What are the ways that men try to solve problems, versus the ways that women try to solve problems? We would like you to give examples on the tape recording.

Thanks very much for participating in this project!
Appendix M: Georgian National Council on Bioethics ethical approval

National Council on Bioethics

30300, Tbilisi, Georgia
Tel: +995 599 14 14 14
info@ncb.gov.ge
საქართველოს ეთიკური საბჭო

National Council on Bioethics

1. კლასის თანხის არ არსებობს. არაფერი წარმოადგენს რიცხოვნობა.

2. ჯამშედი, რომ კლასის პირველი ხელმძღვარი (ღირსშესანიშნაობით) დაფარულობის ფოსტერური განმარტების მინიჭების შემდგომში მიმართული რაიონი ახორციელობა კლასის თავმჯდომარე და მოქალაქე ოთხი თანდანათან, მენეჯერისთვის შესთავაოს მისი უფლებების შესახებ.

3. კლასის ყველა დანიშვნა გამოიყენულია თანდათან, რომ გამოიყენოს პირველი ხელმძღვარის გამოთხრილები და შემდგომში თანდათანი ფორმირები, ხელმძღვარის თანხის გამოყენება მოქალაქე ოთხი თანდანათან შესთავაოს ყველა უფლება.

4. ჯამშედი, რომ შეიძლო საშუალეო ოთხმერი ოთხმუშაობა კლასის ინდივიდუალურ ფორმალობაში დამხმარე უფარსები შეშეკრულ სახელში განსხვავებით.

5. შენახვა მოქალაქეზე მენეჯერის მიერ და კლასის პირველი ხელმძღვარს, მისი შეთქმული ყველა მხარის თანხით დამხმარება. კლასის შეთქმული მიერ რაიონი ახორციელობა იჭირდება აღმოჩენილი სპეციფიკური თანხით.

გარე ჯამშედი

პირდაპირი გრაფიკული ხელმძღვარის თანხები ხელმძღვარში.

14 თებერვალი, 2012 წლით
Appendix N: London School of Hygiene and Tropical Medicine ethical approval

Observational / Interventions Research Ethics Committee

Maureen Seguin  
PhD Research student  
HSRP/PHP LSHTM

6 December 2012

Dear Ms Seguin,

Study Title: Coping strategies used by internally displaced women in Georgia: A qualitative study

LSHTM ethics ref: 6301

Thank you for your emails of 3 December and 5 December 2012, responding to the Observational Committee’s request for further information on the above research and submitting revised documentation. The further information has been considered on behalf of the Committee by the Chair.

Confirmation of ethical opinion

On behalf of the Committee, I am pleased to confirm a favourable ethical opinion for the above research on the basis described in the application form, protocol and supporting documentation as revised, subject to the conditions specified below.

Conditions of the favourable opinion

Approval is dependent on local ethical approval having been received, where relevant.

Approved documents

The final list of documents reviewed and approved by the Committee is as follows:
After ethical review

Any subsequent changes to the application must be submitted to the Committee via an E2 amendment form. All studies are also required to notify the ethics committee of any serious adverse events which occur during the project via form E4. At the end of the study, please notify the committee via form E5.

Yours sincerely,

Professor Andrew J Hall
Chair ethics@lshtm.ac.uk
http://intra.lshtm.ac.uk/management/committees/ethics/

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References


Attwood, L. (1997). 'She was asking for it': Rape and domestic violence against women. In M. Buckley (Ed.), Post-Soviet women: From the Baltic to Central Asia (pp. 99-118). Cambridge: Cambridge University Press.


IDMC. (2015b). Forgotten displacement: Why it's time to address the needs of West Timor's protracted IDPs. Geneva.


Inter-Agency Working Group on Reproductive Health in Crisis. (2010). Inter-agency field manual on reproductive health in humanitarian settings


on findings from the National Vietnam Veterans Readjustment Study. New York: Brunner/Mazel.


Migration Policy Centre Team. (2013). MPC migration profile: Georgia MPC: Migration profile (pp. 1-13). Florence, Italy: The Migration Policy Centre.


Mollica, R. F., McInnes, K., Poole, C., & Tor, S. (1998). Dose-effect relationships of trauma to symptoms of depression and post-traumatic stress disorder among


402


Observational Studies in Epidemiology (STROBE): Explanation and Elaboration. *Epidemiology* 18(6), 805-835. doi: 10.1371/journal.pmed.0040297


