

# Analysis of religious coping relationships with family resilience in utilizing socio-economic resources during the covid-19 pandemic

*by Artikel 4*

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**Submission date:** 29-Dec-2023 09:49AM (UTC+0700)

**Submission ID:** 2265405091

**File name:** lizing\_socio-economic\_resources\_during\_the\_covid-19\_pandemic.pdf (492.21K)

**Word count:** 6013

**Character count:** 32807

11

# Analysis of religious coping relationships with family resilience in utilizing socio-economic resources during the covid-19 pandemic

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## OPEN ACCESS

### Jurnal Keperawatan Padjadjaran (JKP)

Volume 11(1), 35-43  
© The Author(s) 2023  
<http://dx.doi.org/10.24198/jkp.v11i1.2168>

#### Article Info

Received : November 14, 2022  
Revised : February 10, 2023  
Accepted : February 23, 2023  
Published : April 27, 2023

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#### Citation

Prasetyo, Y.B., Faridi, F., Masruroh, N.L., Melizza, N., & Safitri, S.S. (2023). Analysis of religious coping relationships with family resilience in utilizing socio-economic resources during the covid-19 pandemic. *Jurnal Keperawatan Padjadjaran*, 11(1), 36-43. <http://dx.doi.org/10.24198/jkp.v11i1.2168>

#### Website

<http://jkp.fkep.unpad.ac.id/index.php/jkp>

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E-ISSN: 2442-7276

P-ISSN: 2338-5324

## Abstract

**Background:** Religious coping has a very important role in overcoming cult problems in the family.

**Purpose:** The purpose of this study was to determine the relationship between religious coping with family resilience in utilizing socioeconomic sources during the COVID-19 pandemic.

**Methods:** The research design used was analytical descriptive with a cross-sectional approach. The respondents in this study were 242 villagers in East Java Province. Data were collected by SWBS for religious coping and FRAS for family resilience. Data analysis used logistic regression.

**Results:** Factors that influence family resilience in utilizing socioeconomic resources involve religious coping. Families that have adequate religious coping will have a greater opportunity to have resilience in communication and problem-solving compared to families with inadequate religious coping (OR: 1.081; 95% CI: 1.038 – 1.127).

**Conclusion:** Family resilience in utilizing socioeconomic resources is strongly influenced by religious coping factors. Strengthening the community with a religious approach is needed to support the family's line of defense against this pandemic condition.

**Keywords:** COVID-19; religious coping; resilience; utilizing socioeconomic resources

## Introduction

The impact of the COVID-19 pandemic is not only on the spiritual aspect but also on the social and economic factors of the community. During this COVID-19 pandemic, many people are experiencing an economic crisis as a result of declining incomes (Kansime et al., 2020). Socioeconomic problems during the COVID-19 pandemic include limited food (77.1%), disruption of education (86.1%), mental stress due to social stigmatization (62%), and job loss (63.1%) (Haddad et al., 2021; Nuwematsiko et al., 2022). This matter results in as much as 40% psychological stress, such as fear, anxiety and emotional stress (Siette et al., 2021). In addition, Sun et al.'s (2021) research in China reported that people experienced traumatic stress (67%), depressive symptoms (47%), and increased suicidal ideation (20%). Since the COVID-19 pandemic, 22.6% of people in China have suffered from anxiety disorders (Chen et al., 2021).

Decreased income can affect psychological stress in the family caused by conditions of economic decline (Kansime et al., 2020; Nuwematsiko et al., 2022). On the other hand, there is a panic buying phenomenon that causes the price of basic commodities to rise (Nicola et al., 2020). When everyone experiences constant stress with the high price of basic commodities, it causes spirituality in the family to change as economic conditions deteriorate

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(Zarrouq et al., 2021). Individuals who experience stress also find it has an impact on their faith (Büssing et al., 2020). Psychological pressure due to socioeconomic decline can be overcome with the support of religious coping (Hassan et al., 2021). In the social aspect, there is stigmatization by the community toward people who are confirmed to have the COVID-19 virus (Chew et al., 2021). This causes mental stress for the sufferer, which can weaken the body's immunity and slow down the healing process (Yu et al., 2021). However, according to Tao et al. (2022), there is a role for religious coping and environmental support that supports the spirit of sufferers to recover. In this case, proper coping and support from people around can affect the healing of patients with the COVID-19 virus.

Family resilience that fails to maintain family socioeconomic conditions can result in decreased family resilience (Gayatri & Irawaty, 2021; Heo et al., 2021). During the COVID-19 pandemic, people who were affected both socially and economically chose to draw closer to God by praying and asking to make it easier to find income for their families (Desie et al., 2021). The higher the spiritual level of someone, the higher the well-being, both in personal and social relations (Borges et al., 2021). Individuals who have a high level of religiosity will interpret every event positively during the COVID-19 pandemic so that their lives will be more meaningful and avoid stress (Counted et al., 2018).

The lack of spiritual resilience in the family causes psychological and mental disorders, especially in people who live in poverty experiencing an economic downturn during this pandemic (Chirico & Nucera, 2020). As a result, when there is a pandemic, people flock to find the strongest grip, namely by seeking support from the creator (González-Sanguino et al., 2020). Since the COVID-19 pandemic, prayer search data experienced a drastic increase, up from about 30% from before the pandemic (Bentzen, 2020). A sense of security, and peace in asking for protection or safety during the COVID-19 pandemic, can be created with religious practices and religious coping (Braam et al., 2021).

A previous study conducted by Fatimah (2021), explained the influence of religious coping during the COVID-19 pandemic but did not explain the influence of religious coping on family resilience. Previous research by Riehm et al. (2021) found religiosity, spirituality, social support, and individual resilience have positive effects in dealing with the COVID-19 pandemic. This study aims to determine the influence of religious coping on family resilience in utilizing socioeconomic resources during the COVID-19 pandemic.

## Materials and Methods

### Design and participants

The research design used an analytic descriptive design with a cross-sectional approach. The research was conducted from December 2021

until February 2022. The population of this study is the entire community in the area of Taman Harjo Village, Singosari District, Malang Regency, East Java Province. The inclusion criteria: are (1) aged above or equal to 17 years; (2) able to be invited to communicate; and (3) willing to be research respondents. The research sample is Indonesian citizens in Taman Harjo Village, Singosari District, Malang Regency with a sample size of 243 respondents determined by G-Power version 3.1 with Z-Test, logistic regression, odds ratio 1.5, power of 80%, and probability error of 0.05. Sampling was done by non-probability sampling with an accidental sampling technique.

### Measures

#### Independent variable

The main independent variable is religious coping. The data collection method is the Spiritual Coping Strategies Scale (SCS) questionnaire from Cruz et al. (2016). In this questionnaire, we use a 9-item questionnaire with a score range of 0 – 3 (0 = never, 2 = rarely, 3 = usually, to 4 = often). Some examples of questions listed in the questionnaire are: "How often do you do individual prayers? How often do you go to a place of worship to carry out worship? The lowest and highest scores for this questionnaire are 9 – 36. Furthermore, they are categorized into two, namely good (> median), and poor (<median). In addition to the main variable, there are other independent variables including age, education, family type, income, occupation, and religious coping. Age was categorized into six categories (1 = 17 – 25 years; 2 = 26 – 35 years; 3 = 36 – 45 years; 4 = 46 – 55 years; 5 = 56 – 65 years; 6 = > 65 years). Education includes 0: no school; 1: SD; 2: Middle school; 3: high school; 4: PT. Family types are divided into nuclear family = 1; extended family = 2; and single parent = 3. Income is divided into two, namely: less than 3 million = 1; more than 3 million = 2.

Based on the reliability and construct validity tests (convergent and discriminant validity) analyzing factor loadings, Average Variance Extracted (AVE), Cronbach's alpha (CA) and Composite Reliability (CR), Dijkstra-Henseler's rho (RhoA), Fornell-Larcker criteria, and Heterotrait-Monotrait ratio (HTMT), the item used in this study is a good indicator. A full collinearity test was also performed to ensure that the model was free from general method bias.

Items from the loading factor can be accepted with a value greater than 0.7. The construction is considered reliable when the CA and CR values are greater than 0.70. RhoA for all constructs is above 0.70, indicating that the items are consistently reliable. In addition, the AVE values for all constructs also exceed the threshold of 0.50, confirming the strong convergent validity (Purwanto & Sudargini, 2021). Validity and reliability tests were conducted on 20 respondents who live in areas with the same

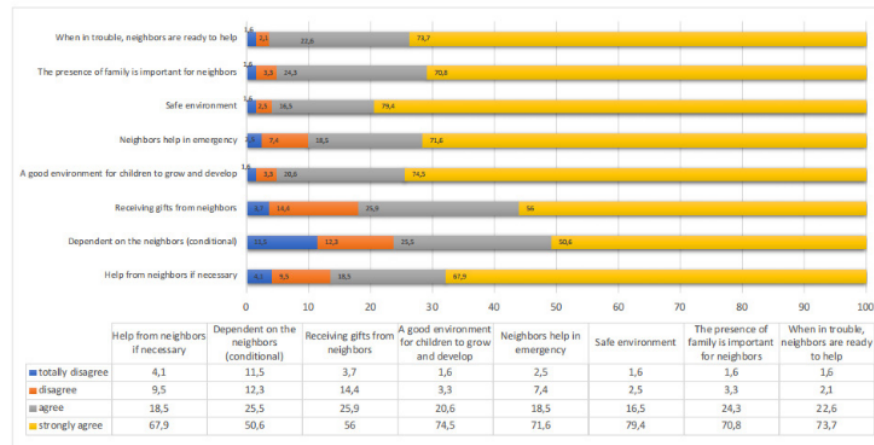
**Table 1. Characteristics of Respondents (n = 243)**

Characteristics	n	%
Age*		
17-25	19	7.8%
26-35	57	23.5%
36-45	56	23.0%
46-55	75	30.9%
56-65	27	11.1%
≥65	9	3.7%
Education		
No school	1	0.4%
Elementary School	46	18.9%
Junior High School	55	22.6%
Senior High School	116	47.7%
College	25	10.3%
family type		
Nuclear family	162	66.7%
Extended family	60	24.7%
Single parent	21	8.6%
Income (IDR)		
<3 million	220	90.5%
>3 million	23	9.5%
Work		
Working	81	33.3%
Doesn't work	162	66.7%
Religious coping		
Poor	101	41.6
good	142	58.4
Family resilience in utilizing socio-economic resources		
Inadequate	115	47.3
Adequate	128	52.7

\* age category based on criteria determined by the Indonesian Ministry of Health (2009)

**Table 2. The final multivariate logistic regression model of family resilience in socioeconomic benefits**

Variable	B	SE	Wald	p-value
Religious coping	0.078	0.021	14,157	0.000
Education	-0.231	0.148	2.429	0.205
Work	0.432	0.207	1.189	0.204
Age	-0.167	0.115	2.129	0.465
Family type	0.103	0.205	0.251	0.800
Income	-0.051	0.460	0.012	0.792
Constant	-3,866	1.069	13.087	0.000



**Figure 1. Family resilience in utilizing socio-economic resources during the COVID-19 pandemic**

characteristics as the study locations.

### Dependent variable

The dependent variable of this study is family resilience in utilizing socioeconomic resources. The data collection method is the Family Resilience Assessment Scale (FRAS) questionnaire from Gardiner et al. (2019). In this study, we use eight question items including help from neighbors, depending on neighbors in certain situations, and others. The questionnaire uses a Likert scale of 1 – 4 (1 = disagree; 4 = strongly agree). The composite score is between 12 – 108. Furthermore, it is categorized into two, namely adequate (> median), and inadequate (<median).

Based on the results of the validity and reliability tests of the Family Resilience Assessment Scale that were carried out in a village with almost the same characteristics as the research location, namely in Karangploso Village, Malang Regency with the questionnaire filled by 20 respondents, Cronbach's alpha results on all scales (consisting of 54 items) is 0.96. Consisting of six subscales, we studied the one about utilizing Social and Economic Resources with USER results, = 0.85, in which there are eight items.

### Procedure

The researcher designed the survey in the form of an electronic questionnaire using Google Forms, distributing these to respondents who have smartphones. Previously the respondent's cellphone number was stored and included in the research WhatsApp group. In addition to using electronic forms, researchers also printed out a questionnaire aimed to get more respondents. Furthermore, the researcher consisted of a team of seven members. Researchers collaborated with the village apparatus

of Taman Harjo in assisting researchers in obtaining participants. Each member was accompanied by one village staff then divided into their respective areas in Taman Harjo village to get respondents. The researcher collected the respondents in one place, the researcher then explained how to fill out the questionnaire and the respondents were given 30 minutes to fill out the questionnaire. Incentives were given to participants to encourage and thank them for completion and after 30 minutes, the questionnaire was collected. Then the researcher entered the results of the completed questionnaire and the data were then downloaded in Excel form. Excel data was input in SPSS.

### Data analysis

All data were analyzed using SPSS software (Statistical Package for Social Science) version 2.1 (IBM USA). Descriptive analysis was used to identify religious coping, age, education, family type, income, occupation, and family resilience with frequency and percentage. Logistic binary analysis was used to select candidate variables. Variables with  $p < 0.25$ , included in the multivariate analysis model, were used to analyze the effect of candidate variables on family resilience in communicating and solving problems during the COVID-19 pandemic. The degree of freedom used is 95% with a standard error of 0.05.

### Ethical considerations

This study received ethical approval from the Health Research Ethics Commission of the University of Muhammadiyah Malang with protocol number E.5.a/007/KEPK-UMM/I/2022. Participants provided written consent for participation before data collection.



## Results

Characteristics of respondents the age of the respondents are mostly in the range of 46-55 years as much as 30.9%, with the last education level of the majority being Senior High School as much as 47.7%. Meanwhile, the type of family is dominated by the nuclear family by 66.7%. Most of the respondents earn less than 3 million rupiahs (90.5%), while the working population is 33.3%. Based on the results of collecting data it also shows that many of the respondents have good religious coping 58.4% and adequate family resilience in socioeconomic resources 52.7% (Table 2).

Figure 1 shows the resilience of families in utilizing socioeconomic resources during the COVID-19 pandemic in the form: most respondents (79.4%) strongly agree that their living environment is economically and socially safe. In line with this statement, it was also found that most of the respondents (74.5%) also strongly agreed that their environment supports the growth and development of children. Furthermore, most respondents (71.6%) stated that neighbors are an important element to assist in an emergency, and as many as 73.7% stated strongly agree that they can ask neighbors for help when they have economic problems. More than half of the respondents (67.9%) stated that under certain conditions they get help from neighbors when needed.

One factor that affects family resilience in utilizing social and economic resources is religious coping. Families that have adequate religious coping will be more likely to have resilience in utilizing resources social and economic resources compared to families with inadequate religious coping (OR: 1.081; 95% CI: 1.038-1.127) (Table 2).

The selection of candidates who entered the model was religious coping, education, and work with  $p$ -value < 0.25, respectively 0.000, 0.205, 0.204, while the variables are not included in the model because they had a  $p$ -value > 0.25, namely age ( $p$ : 0.465), family type ( $p$ : 0.800), income ( $p$ : 0.792). However, only religious coping was  $p$  < 0.05.

## Discussion

The results show that religious coping affects family resilience in utilizing socioeconomic resources. This can be seen from the test results which show a significant relationship between the two. Furthermore, the answers to the questionnaire also explained that families are very dependent on socioeconomic assistance from their surroundings, from their own families, neighbors, and the surrounding community. Studies by Molenaar et al. (2020) and Hossain et al. (2022) explain that the effect of the economic crisis due to the COVID-19 pandemic has an impact on high medical costs while many companies are laying off employees thereby increasing the economic crisis. According to some previous research (Harrop et al., 2020; O'Neill et al.,

2021; Van Der Boor et al., 2020), the psychological pressure experienced due to economic demands during the pandemic increased mental and spiritual stress, so that an emotional and spiritual approach was needed.

To deal with stress due to the economic crisis that occurred during the COVID-19 pandemic, the use of religious coping has proven to be effective in increasing family resilience in overcoming the stress caused by the economic crisis (Abu Khait & Lazenby, 2021). This is similar to the research of about family welfare in India related to economic factors. The study proved that one of the coping methods used by families in maintaining family resilience is by strengthening spirituality, and by performing rituals that aim to pray so that they are closer to God to strengthen family resilience in the face of economic crises (Kabir et al., 2019). Thus, it can be concluded that families with adequate religious coping will have a greater chance of having resilience in social and economic use compared to families with inadequate religious coping.

Religious coping is very important; strong religious coping makes individuals feel they have a strong grip as a support in various conditions. On the other hand, during the COVID-19 pandemic, many individuals were affected by the economic crisis, and individuals who have weak religious coping will seek solutions that focus on stress and do not think about their mental and spiritual condition (Fatima et al., 2022). The majority of individuals with weak religious coping think about how to get money, whereas in the pandemic economic conditions have drastically decreased, which has an impact on all parts of the world, so finding income during the pandemic is not as easy as it was before. Difficulty generating income causes anxiety, depression, and stress.

The existence of religious coping has been proven to provide comfort and reduce stress in individuals (Pirutinsky et al., 2020). This is supported by Bentzen (2020) who explained that religious coping done by praying and asking God so that the COVID-19 pandemic would end soon was often done by the community during the pandemic. Meanwhile, individuals who do not use religious coping tend to have high levels of stress (Pirutinsky et al., 2020). With this, a weak spiritual level and high-stress levels have an impact on individual resilience, and decreased individual resilience has an impact on family resilience. Fatima et al. (2022) also mentioned that positive religious coping can improve the quality of life and individual optimism that took place due to the COVID-19 pandemic.

Based on the results of this study, work does not impact family resilience during the COVID-19 pandemic. During the COVID-19 pandemic, there were many terminations of work contracts by companies/factories, and this had an impact on family resilience (Pit et al., 2021). The loss of a job causes income in the family to drop dramatically to the point of causing a crisis of family resilience; if the

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problem is not addressed immediately it can cause a psychological impact on the family (Ameis et al., 2020). In overcoming family psychological factors, religious coping is needed to create well-being in the family (Olashore et al., 2021). However, previous research has shown that work has no effect on family resilience during the COVID-19 pandemic. This is in line with the research (Toledano-Toledano et al., 2017; Xiao et al., 2021) which explains that there is no relationship between work and family resilience during the COVID-19 pandemic. On the other hand, social, religious, cultural, and mental health support greatly affects family resilience during the COVID-19 pandemic (Plenty et al., 2021).

The results showed that there was no influence of the factors of age, family type, income, and education on family resilience. Based on the results of the research above, it was found that most families were aged 46–55 years; this indicates that the average age of the respondents is in the adult category. Adults generally have good mental readiness for thinking and making decisions (Riehm et al., 2021). According to previous research (Gayatri & Irawaty, 2021; Khesroh et al., 2022), a person's age does not affect family resilience because each individual can gradually adapt to their environment, including the problems they are facing from time to time (Suzuki et al., 2018). In this study, it was found that age and the respondent's last education do not guarantee the respondent's ability to maintain family resilience. Khesroh et al. (2022) said education did not affect family resilience. For individuals who have a history of higher education, it does not mean that there is a lot of knowledge that can be used to strengthen family resilience, and vice versa, a low level of education does not mean that family resilience is weak. Family resilience also cannot be influenced by the type of family, both large family and single parent families, this is because respondent's family type does not guarantee family resilience in the COVID-19 pandemic era. This statement is supported by research (Gardiner et al., 2019; Radetić-Paić & Černe, 2020), which states that compared to family type and family income, support from family members is more influential to strengthen family resilience.

In this study, the type of religion and belief that is adhered to has not been identified, so discussions related to the relationship with the religion that is adhered to cannot be explained. In addition, this research was conducted in rural areas where religious activities may be carried out more than in urban areas, so further research for different locations or urban areas can be carried out as a comparison.

However, this research is novel, so it can be used as a guideline, reference, and development for further research with a similar theme.

## Conclusion

This study concludes that family resilience in utilizing

socioeconomic resources is strongly influenced by religious coping factors. Strengthening the community with a religious approach is needed to support the family's line of defense against this pandemic condition. Religious coping serves as a backbone in various conditions, especially in an economic crisis; holding on to religious teachings that fortune has been arranged by God makes people believe more that God will not give difficulties that his people cannot go through. They believe that fortune also does not only turn into money but also other assistance from both extended family and neighbors who can help with existing problems.

## Acknowledgments

The author would like to thank the Education Fund Management Institute of the Indonesian Ministry of Finance for allowing us to participate in the selection and being selected to conduct this research. We also thank the University of Muhammadiyah Malang for supporting us in our research. As well as the research team, both lecturers and students involved. And thanks also to the respondents who are willing to be the subject of our research.

## Conflict Of Interest

The authors declare no conflicts of interest in this study.

## Funding

The research received Productive Innovative Research Funding/Riset Inovatif Produktif (RISPRO) from the Ministry of Finance's Education Fund Management Institute.

## References

- Abu Khait, A., & Lazenby, M. (2021). Psychosocial-spiritual interventions among Muslims undergoing treatment for cancer: An integrative review. *BMC Palliative Care*, 20(1), 1–22. <https://doi.org/10.1186/s12904-021-00746-x>
- Ameis, S. H., Lai, M. C., Mulsant, B. H., & Szatmari, P. (2020). Coping, fostering resilience, and driving care innovation for autistic people and their families during the COVID-19 pandemic and beyond. *Molecular Autism*, 11(1), 1–9. <https://doi.org/10.1186/s13229-020-00365-y>
- Bentzen, J. S. (2020). In crisis, we pray: Religiosity and the COVID-19 pandemic. *Economic Behavior and Organization*, 192(January), 541–583. <https://doi.org/https://doi.org/10.1016/j.jebo.2021.10.014>
- Borges, C. C., dos Santos, P. R., Alves, P. M., Borges, R. C. M., Lucchetti, G., Barbosa, M. A., Porto, C. C., & Fernandes, M. R. (2021). Association between spirituality/religiousness and quality of life among healthy adults: A systematic review. *Health and Quality of Life Outcomes*, 19(1), 1–13. <https://doi.org/10.1186/s12955-021-01878-7>
- Braam, D. H., Srinivasan, S., Church, L., Sheikh,

- Z., Jephcott, F. L., & Bukachi, S. (2021). Lockdowns, lives and livelihoods: the impact of COVID-19 and public health responses to conflict affected populations - a remote qualitative study in Baidoa and Mogadishu, Somalia. *Conflict and Health*, 15(1), 47. <https://doi.org/10.1186/s13031-021-00382-5>
- Büssing, A., Rodrigues Recchia, D., Hein, R., & Dienberg, T. (2020). Perceived changes of specific attitudes, perceptions and behaviors during the Corona pandemic and their relation to wellbeing. *Health and Quality of Life Outcomes*, 18(1), 1–17. <https://doi.org/10.1186/s12955-020-01623-6>
- Chen, H., Gao, J., Dai, J., Mao, Y., Wang, Y., Chen, S., Xiao, Q., Jia, Y., Zheng, P., & Fu, H. (2021). Generalized anxiety disorder and resilience during the COVID-19 pandemic: Evidence from China during the early rapid outbreak. *BMC Public Health*, 21(1), 1–10. <https://doi.org/10.1186/s12889-021-11877-4>
- Chew, C. C., Lim, X. J., Chang, C. T., Rajan, P., Nasir, N., & Low, W. Y. (2021). Experiences of social stigma among patients tested positive for COVID-19 and their family members: A qualitative study. *BMC Public Health*, 21(1), 1–11. <https://doi.org/10.1186/s12889-021-11679-8>
- Chirico, F., & Nucera, G. (2020). An Italian Experience of Spirituality from the Coronavirus Pandemic. *Journal of Religion and Health*, 59(5), 2193–2195. <https://doi.org/10.1007/s10943-020-01036-1>
- Counted, V., Possamai, A., & Meade, T. (2018). Relational spirituality and quality of life 2007 to 2017: An integrative research review. *Health and Quality of Life Outcomes*, 16(1), 1–18. <https://doi.org/10.1186/s12955-018-0895-x>
- Cruz, J. P., Baldacchino, D. R., & Alquwez, N. (2016). Validity and reliability of the spiritual coping strategies scale arabic version in Saudi patients undergoing haemodialysis. *Journal of Renal Care*, 42(2), 107–114. <https://doi.org/10.1111/jorc.12155>
- Desie, Y., Habtamu, K., Asnake, M., Gina, E., & Mequanint, T. (2021). Coping strategies among Ethiopian migrant returnees who were in quarantine in the time of COVID-19: A center-based cross-sectional study. *BMC Psychology*, 9(1), 1–17. <https://doi.org/10.1186/s40359-021-00699-z>
- Fatima, H., Oyetunji, T. P., Mishra, S., Sinha, K., Olorunsogbon, O. F., Akande, O. S., Srinivasan, & Kar, S. K. (2022). Religious coping in the time of COVID-19 pandemic in India and Nigeria: Finding of a cross-national community survey. *International Journal of Social Psychiatry*, 68(2), 309–315. <https://doi.org/10.1177/0020764020984511>
- Fatimah, F. (2021). Higher order thinking reading strategies: An alternative to improve students' reading comprehension in the Indonesian EFL context. *Alphabet*, 4(2), 54–61. <https://doi.org/10.21776/ub.alphabet.2021.04.02.01>
- Gardiner, E., Mâsse, L. C., & Iarocci, G. (2019). A psychometric study of the Family Resilience Assessment Scale among families of children with autism spectrum disorder. *Health and Quality of Life Outcomes*, 17(1), 1–10. <https://doi.org/10.1186/s12955-019-1117-x>
- Gayatri, M., & Irawaty, D. K. (2021). Family Resilience during COVID-19 pandemic: A literature review. *Family Journal*, 1. <https://doi.org/10.1177/10664807211023875>
- González-sanguino, C., Ausín, B., Ángel, M., & Saiz, J. (2020). Mental health consequences during the initial stage of the 2020 Coronavirus pandemic (COVID-19) in Spain. *Brain, Behavior, and Immunity*, 87(January), 172–176. <https://doi.org/10.1016/j.bbi.2020.05.040>
- Haddad, C., Bou Malhab, S., Malaeb, D., Sacre, H., Saadeh, D., Mourtada, V., & Salameh, P. (2021). Stigma toward people with COVID-19 among the Lebanese population: A cross-sectional study of correlates and mediating effects. *BMC Psychology*, 9(1), 1–15. <https://doi.org/10.1186/s40359-021-00646-y>
- Harrop, E., Scott, H., Sivell, S., Seddon, K., Fitzgibbon, J., Morgan, F., Pickett, S., Byrne, A., Nelson, A., & Longo, M. (2020). Coping and wellbeing in bereavement: Two core outcomes for evaluating bereavement support in palliative care. *BMC Palliative Care*, 19(1), 1–15. <https://doi.org/10.1186/s12904-020-0532-4>
- Hassan, S. M., Ring, A., Tahir, N., & Gabbay, M. (2021). The impact of COVID-19 social distancing and isolation recommendations for Muslim communities in North West England. *BMC Public Health*, 21(1), 1–11. <https://doi.org/10.1186/s12889-021-10869-8>
- Heo, S., Desai, M. U., Lowe, S. R., & Bell, M. L. (2021). Impact of changed use of greenspace during covid-19 pandemic on depression and anxiety. *International Journal of Environmental Research and Public Health*, 18(11). <https://doi.org/10.3390/ijerph18115842>
- Hossain, A., Alam, M. J., Mydam, J., & Tareque, M. (2022). Do the issues of religious minority and coastal climate crisis increase the burden of chronic illness in Bangladesh? *BMC Public Health*, 22(1), 1–19. <https://doi.org/10.1186/s12889-022-12656-5>
- Kabir, A., Datta, R., Raza, S. H., & Maitrot, M. R. L. (2019). Health shocks, care-seeking behaviour and coping strategies of extreme poor households in Bangladesh's Chittagong Hill tracts. *BMC Public Health*, 19(1), 1–12. <https://doi.org/10.1186/s12889-019-7335-7>
- Kansiime, M. K., Tambo, J. A., Mugambi, I., Bundi, M., Kara, A., & Owuor, C. (2020). COVID-19 implications on household income and food security in Kenya and Uganda: Findings from a rapid assessment. *January*. <https://doi.org/10.1016/j.worlddev.2020.105199>



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- Khesroh, E., Butt, M., Kalantari, A., Leslie, D. L., Bronson, S., Rigby, A., & Aumiller, B. (2022). The use of emotional intelligence skills in combating burnout among residency and fellowship program directors. *BMC Medical Education*, 22(1), 1–7. <https://doi.org/10.1186/s12909-022-03187-z>
- Molenaar, J., Hanlon, C., Alem, A., Wondimagegn, D., Medhin, G., Prince, M., & Stevenson, E. G. J. (2020). Perinatal mental distress in a rural Ethiopian community: A critical examination of psychiatric labels. *BMC Psychiatry*, 20(1), 1–10. <https://doi.org/10.1186/s12888-020-02646-5>
- Nicola, M., Alsafi, Z., Sohrabi, C., Kerwan, A., Al-Jabir, A., Iosifidis, C., Agha, M., & Agha, R. (2020). The socio-economic implications of the coronavirus pandemic (COVID-19): A review. *International Journal of Surgery*, 78(April), 185–193. <https://doi.org/10.1016/j.ijsu.2020.04.018>
- Nuwematsiko, R., Nabiryo, M., Bomboka, J. B., Nalinya, S., Musoke, D., Okello, D., & Wanyenze, R. K. (2022). Unintended socio-economic and health consequences of COVID-19 among slum dwellers in Kampala, Uganda. *BMC Public Health*, 22(1), 1–13. <https://doi.org/10.1186/s12889-021-12453-6>
- Olashore, A. A., Akanni, O. O., & Oderinde, K. O. (2021). Neuroticism, resilience, and social support: correlates of severe anxiety among hospital workers during the COVID-19 pandemic in Nigeria and Botswana. *BMC Health Services Research*, 21(1), 1–7. <https://doi.org/10.1186/s12913-021-06358-8>
- O'Neill, A., Jayawickreme, N., Blackie, L. E. R., Demaske, A., Goonasekera, M. A., & Jayawickreme, E. (2021). Knowing when someone is resilient: Development and validation of a measure of adaptive functioning among war-affected Sri Lankan Tamils. *SSM - Mental Health*, 1(September), 100026. <https://doi.org/10.1016/j.ssmmh.2021.100026>
- Pirutinsky, S., Cherniak, A. D., & Rosmarin, D. H. (2020). COVID-19, mental health, and religious coping among American orthodox jews. *Journal of Religion and Health*, 59(5), 2288–2301. <https://doi.org/10.1007/s10943-020-01070-z>
- Pit, S., Fisk, M., Freihaut, W., Akintunde, F., Aloko, B., Berge, B., Burmeister, A., Ciacăru, A., Deller, J., Dulmage, R., Han, T. H., Hao, Q., Honeyman, P., Huber, P. C., Linner, T., Lundberg, S., Nwamara, M., Punpuing, K., Schramm, J., ... Yap, J. C. H. (2021). COVID-19 and the ageing workforce: global perspectives on needs and solutions across 15 countries. *International Journal for Equity in Health*, 20(1), 1–22. <https://doi.org/10.1186/s12939-021-01552-w>
- Plenty, S., Bracegirdle, C., Dollmann, J., & Spiegler, O. (2021). Changes in young adults' mental well-being before and during the early stage of the COVID-19 pandemic: Disparities between ethnic groups in Germany. *Child and Adolescent Psychiatry and Mental Health*, 15(1), 1–14. <https://doi.org/10.1186/s13034-021-00418-x>
- Purwanto, A., & Sudargini, Y. (2021). Partial Least Squares Structural Equation Modeling (PLS-SEM) analysis for social and management research: A literature review. *Journal of Industrial Engineering & Management Research*, 2(4), 114–123. <https://doi.org/10.7777/jiemar.v2i4>
- Radetić-Paić, M., & Čerme, K. (2020). The influence of family income on students' family resilience in Croatia. *Economic Research-Ekonomska Istraživanja*, 33(1), 1172–1181. <https://doi.org/10.1080/1331677X.2019.1697332>
- Riehm, K. E., Brenneke, S. G., Adams, L. B., Gilan, D., Lieb, K., Kunzler, A. M., Smail, E. J., Holingue, C., Stuart, E. A., Kalb, L. G., Thrul, J., & Resilience, L. (2021). Association between psychological resilience and changes in mental distress during the COVID-19 pandemic. *Journal of Affective Disorders*, 282(December 2020), 381–385. <https://doi.org/10.1016/j.jad.2020.12.071>
- Siette, J., Seaman, K., Dodds, L., Ludlow, K., Johnco, C., Wuthrich, V., Earl, J. K., Dawes, P., Strutt, P., & Westbrook, J. I. (2021). A national survey on COVID-19 second-wave lockdowns on older adults' mental wellbeing, health-seeking behaviours and social outcomes across Australia. *BMC Geriatrics*, 21(1), 1–16. <https://doi.org/10.1186/s12877-021-02352-1>
- Sun, S., Goldberg, S. B., Lin, D., Qiao, S., & Operario, D. (2021). Psychiatric symptoms, risk, and protective factors among university students in quarantine during the COVID-19 pandemic in China. *Globalization and Health*, 17(1). <https://doi.org/10.1186/s12992-021-00663-x>
- Suzuki, K., Hiratani, M., Mizukoshi, N., Hayashi, T., & Inagaki, M. (2018). Family resilience elements alleviate the relationship between maternal psychological distress and the severity of children's developmental disorders. *Research in Developmental Disabilities*, 83, 91–98. <https://doi.org/10.1016/j.ridd.2018.08.006>
- Tao, Y., Yu, H., Liu, S., Wang, C., Yan, M., Sun, L., Chen, Z., & Zhang, L. (2022). Hope and depression: The mediating role of social support and spiritual coping in advanced cancer patients. *BMC Psychiatry*, 22(1), 1–9. <https://doi.org/10.1186/s12888-022-03985-1>
- Toledano-Toledano, F., Moral de la Rubia, J., McCubbin, L. D., Liebenberg, L., Vera Jiménez, J. A., Rivera-Rivera, L., Hart, A., Barajas Nava, L. A., Salazar García, M., Martínez Valverde, S., Rivera Aragón, S., Sánchez Gómez, C., Villavicencio Guzmán, L., Granados García, V., & Garduño Espinosa, J. (2017). Validity

- and reliability of the Mexican resilience measurement scale in families of children with chronic conditions. *Health and Quality of Life Outcomes*, 15(1), 1–9. <https://doi.org/10.1186/s12955-017-0817-3>
- Van Der Boor, C. F., Amos, R., Nevitt, S., Dowrick, C., & White, R. G. (2020). Systematic review of factors associated with quality of life of asylum seekers and refugees in high-income countries. *Conflict and Health*, 14(1). <https://doi.org/10.1186/s13031-020-00292-y>
- Xiao, Y., Liu, F., Ran, H., Deng, W., Che, Y., Fang, D., & Donald, A. R. (2021). Resilience mediates the association between self-harm and suicidal ideation in Chinese left-behind children. *BMC Public Health*, 21(1), 1–8. <https://doi.org/10.1186/s12889-021-12153-1>
- Yu, M., Tian, F., Cui, Q., & Wu, H. (2021). Prevalence and its associated factors of depressive symptoms among Chinese college students during the COVID-19 pandemic. *BMC Psychiatry*, 21(1), 1–8. <https://doi.org/10.1186/s12888-021-03066-9>
- Zarrouq, B., Abbas, N., Hilaly, J. El, Asri, A. El, Abbouyi, S., Omari, M., Malki, H., Bouazza, S., Moutawakkil, S. G., Halim, K., & Ragala, M. E. (2021). An investigation of the association between religious coping, fatigue, anxiety and depressive symptoms during the COVID-19 pandemic in Morocco: a web-based cross-sectional survey. *BMC Psychiatry*, 21(1), 1–13. <https://doi.org/10.1186/s12888-021-03271-6>

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