Conference Paper

COVID-19 Survivors: The Role of Religion and Religiosity

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Abstract.
This study aims to explore the role of religion and determine the impact of using religion and religiosity on COVID-19 survivors. This research was conducted in Lampung Province, Indonesia. This study uses a qualitative method, with a phenomenological approach and data analysis—interpretative phenomenological analysis. The instruments used are in-depth interviews and observations toward eight positive COVID-19 patients with the criteria of experiencing moderate or severe symptoms and undergoing isolation in the hospital. This study found results, namely, 1. A deep belief in the greatness of God, deep appreciation of the sensation of asking and praying to God, surrender and ridho of God’s decree, gratitude and meaning in life; 2. Religious practice (prayer, dhikr, reciting, saying Asma Allah); 3. Social support (information, emotional, instrumental, appreciation appraisal support). The impact of the meaning of religiosity felt by COVID-19 survivors has increased their beliefs in God, feeling more stable emotions, reducing anxiety, being able to think positively, feeling more optimistic about healing, and feeling a deep spiritual sensation. This study concludes that religion and religiosity can provide energy so that a person can survive COVID-19.

Keywords: Religion, COVID-19, Phenomenology

1. INTRODUCTION

The Covid-19 pandemic has changed all aspects of life, including health and a person’s psychology (1). Covid-19 is a phenomenon faced by all countries in the world, with global distribution data stating that there are 222 countries affected by the virus, 219,000,000 confirmed positives, and 4,540,000 people passed away. In Indonesia, the latest data on September 2 2021 states that 4,100,000 people were positive, and 134,000 passed away (2). Lampung, a province in Indonesia, is also one of the areas affected by the Covid-19 pandemic. The latest data states that 47,002 people have been confirmed positive, and 3,595 people have died. (Covid19.lampungprov.go.id).

Being diagnosed as a Covid-19 victim is undoubtedly something uneasy to accept. Dangerous symptoms appear and turn into severe symptoms of Covid-19, such as
persistent fever $\geq 38$ degrees Celsius. It worsens if several respiratory frequencies increase, marking a respiratory tract infection (> 30x/minute). In some cases getting symptoms such as shortness of breath (respiratory distress), cough, loss of consciousness, oxygen saturation <90%, air leukopenia, increased monocytes, and increased atypical lymphocytes make someone have to be treated in intensive care in a hospital (3).

In these times of crisis, humans turn to religion for certainty and comfort, including during the COVID-19 pandemic. Religion is a guideline for its adherents and the centre point for developing religious values. Meanwhile, religiosity has a fundamental theological belief (Godhead) following a particular religion and has guidelines on ways, methods, and functions to help individuals understand their life experiences. Religion and religiosity are two interrelated components; a new person can feel religiosity with religion.

Using daily and weekly data on Google searches for 107 countries, it appears that the COVID-19 crisis is resulting in a massive increase in the intensity of prayer. During the early months of the pandemic, Google searches for prayer relative to all Google searches rose 30%, reaching the highest level ever recorded (4). Increasing religious demands caused the increase because most individuals pray to overcome their difficulties. Thus, the results reveal that religiosity has increased globally due to the Covid-19 pandemic.

2. LITERATURE REVIEW

Religion is a system of human beliefs that are guidelines for life; from religion comes the term religiosity. Religion and religiosity are the most pervasive and central things in society. In times of crisis, humans tend to turn to religion for certainty and comfort. The Covid-19 pandemic is no exception. Religiosity is defined as the depth of one's religious appreciation, the extent of one's knowledge, the strength of one's belief, the diligence with which worship is carried out, and the extent of one's knowledge (5). Religious activity occurs not only when someone prays, but also when they engage in other spiritually motivated activities. It is related to visible and invisible activities in one's heart. The community uses various coping strategies (ways to get away from distress) to ease the psychological burden of this pandemic, including spiritual and religious coping (6).

Religious coping refers to using religion-based strategies for dealing with stressful events; these strategies may include individual and collective religious beliefs,
behaviours, and activities. Spiritual coping involves a broader strategy, not necessarily related to one religion. Religious and spiritual coping is usually associated with more positive outcomes for dealing with stressful events experienced by Covid-19 patients (7). A person tested positive for Covid-19 is not only vulnerable in his physical health but also in his psychological health. This condition greatly affects individuals suffering from it because Covid-19 is a severe stressor (8). Moreover, this stressor may cause people with Covid-19 to feel the pressure of being alone while their psychological health decreases (9). In other words, an individual’s religiosity level can be a predictor that influences a person’s mental state.

Taylor (10) argued that religiosity could improve psychological well-being. People with strong religiosity show higher rates of life satisfaction, personal happiness, and fewer negative consequences of experiencing trauma. Many people report that spiritual beliefs help them when they have to cope with stress. One that influences psychological well-being is the level of carrying out one’s religious rituals, which can be seen from the quality and quantity of called religiosity (11). Religiosity has been widely discussed in conjunction with psychological well-being. Research from Ismail and Soha (12) explains the correlation between religiosity and psychological well-being. In individuals with strong religiosity, higher levels of psychological well-being and fewer negative impacts are felt from traumatic events in life.

Many individuals report that their religious rituals help them when they have to cope with stress. According to Taylor (2018), religious rituals can assist the process of dealing for two reasons: first, religion provides a belief system and a way of thinking about the pressures of life and how to reduce distress, and how humans can find meaning (wisdom) behind the pressures and events they experience. Religion also provides social support (social support). The fact is that when someone is diagnosed positive for Covid-19, at that moment, their mental condition also deteriorates. The emergence of negative emotions, such as anxiety, worry, and fear of death, becomes a separate problem that must be solved by self-management and increased belief in God. Religiosity has a big contribution to the health process of positive patients with Covid-19; a sense of religiosity can be a psychological immunisation that can cure physical fatigue and improve the mental status of someone sick (12).

According to (13), there are five kinds of religious dimensions, namely, the dimension of belief (ideological), the dimension of spiritual practice (ritualistic), the dimension of appreciation (experiential), the dimension of religious knowledge (intellectual), and the dimension of experience and consequences. These dimensions are interconnected and
reinforce one another. From the research above, it can be seen that religion and religiosity are attached to a person’s psychological and physical condition. Understanding how survivors of Covid-19 interpret their religious experience during the difficult period of isolation at the hospital is an interesting matter to be explored further.

3. RESEARCH QUESTION

In general, the problem to be studied in this study is how the role of religion and religiosity on Covid-19 survivors?

4. METHODS

4.1. The Course.

Researchers conducted research in Lampung Province, including Bandar Lampung City, Metro City, East Lampung Regency, South Lampung Regency, and Tandgamus Regency.

4.2. Participants

Sampling type, method used to determine research subjects, is maximum variation sampling, namely, choosing participants according to the criteria and selecting participants quite different from those criteria. The requirements for this type of sampling are when a client who is already negative for Covid-19, has moderate and severe symptoms at the time of initial admission to the hospital, is isolated, and is treated for more than two weeks. Covid-19 survivors will be taken as research subjects, as many as ten people.

4.3. Procedure

This study aims to explore the experiences and meanings of family social support and the impact of family social support on Covid-19 survivors, so the researchers view that the objectives of this research can be answered through qualitative methods, which aim to explore and understand a specific phenomenon (14). The qualitative approach used in this research is phenomenology. Psychological researchers are generally interested in psychic and mental phenomena. This phenomenon is part of the life experiences experienced by participants or research subjects (14). The phenomenological approach was chosen because in exploring the meaning of life events when you are a Covid-19
patient, we need to search from an objective and subjective perspective according to the subject's point of view in interpreting phenomena. Exploring and understanding the meaning of phenomena in one's life requires noema and noesis. Phenomenology as an approach is a study that seeks to find the essence of a phenomenon experienced by several individuals. The study of consciousness aims to clarify the situations individuals face daily. The study seeks to find various psychological meanings contained in phenomena through investigation and analysis of the life journey experienced by participants (15). The data collection method used in this study was in-depth interviews and observation. The researcher first makes a framework of the subject matter that will be submitted to the research subject in the form of interview questions. Observations were made directly; the observations made in this study were directed at activities to pay attention accurately, record the phenomena that arise, and consider the relationship between aspects of the phenomenon, especially among survivors of Covid-19.

4.4. Data Analysis

The data analysis steps carried out include three stages: (1) horizontalisation; (2) Development of various groups of meaning (from important statements to multiple themes, from textual and structural descriptions); (3) Combination of descriptions is then made to interpret the essence of the phenomenon called the essential invariant structure or essence (15). Several strategies were used to strengthen research credibility, namely, member checking and triangulation to strengthen trust in the data resulting from the qualitative research (14).

5. Findings and Discussion

5.1. Findings

Eight participants who meet the research characteristics have been interviewed. Participant demographic data can be seen in Table 1. The interview transcript data analysis results found three main themes with 12 superordinate themes. The summary of the main and superordinate themes found in this study can be seen in Table 2.
TABLE 1: General Description of Research Subjects.

<table>
<thead>
<tr>
<th>No.</th>
<th>Initials</th>
<th>Age</th>
<th>Gender</th>
<th>Current address</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SP</td>
<td>50 Yrs</td>
<td>Man</td>
<td>Lampung Timur</td>
</tr>
<tr>
<td>2</td>
<td>MD</td>
<td>31 Yrs</td>
<td>Man</td>
<td>Bandar Lampung</td>
</tr>
<tr>
<td>3</td>
<td>AQ</td>
<td>39 Yrs</td>
<td>Man</td>
<td>Bandar Lampung</td>
</tr>
<tr>
<td>4</td>
<td>DM</td>
<td>54 Yrs</td>
<td>Man</td>
<td>Bandar Lampung</td>
</tr>
<tr>
<td>5</td>
<td>SA</td>
<td>53 Yrs</td>
<td>Woman</td>
<td>Bandar Lampung</td>
</tr>
<tr>
<td>6</td>
<td>SW</td>
<td>62 Yrs</td>
<td>Woman</td>
<td>Tanggamus</td>
</tr>
<tr>
<td>7</td>
<td>ST</td>
<td>65 Yrs</td>
<td>Man</td>
<td>Tanggamus</td>
</tr>
<tr>
<td>8</td>
<td>SR</td>
<td>33 Yrs</td>
<td>Man</td>
<td>Lampung Selatan</td>
</tr>
</tbody>
</table>

TABLE 2: Parent and Superordinate Themes.

<table>
<thead>
<tr>
<th>Parent Theme Focus</th>
<th>Superordinate theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spiritual experience</td>
<td>A deep belief in the greatness of God Deeply experience the sensation of begging and praying to God Surrender and be pleased with God’s decrees Gratitude and meaning in life.</td>
</tr>
<tr>
<td>Religious practice</td>
<td>Pray Meditate Recite Saying Asma Allah</td>
</tr>
<tr>
<td>Social Support</td>
<td>Emotional support, compassion, care, concern, emotional warmth, and empathy. Information Support; health information, drug information, suggestions, and advice, Instrumental Support; Direct assistance, bringing food and drink and equipment needed during isolation at the hospital, free time Award Rating Support; positive expressions, words of encouragement, words of motivation, invites to exercise.</td>
</tr>
</tbody>
</table>

TABLE 3: The Impact of the Meaning of Religiosity.

The Impact of Meaning of Religiosity on Covid-19 Survivors

<table>
<thead>
<tr>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increasing belief in God Feeling emotions become more stable Reducing anxiety The ability to think positively Feeling more optimistic about recovery Experiencing deep spiritual sensations.</td>
</tr>
</tbody>
</table>

5.1.1. Discussion Spiritual Appreciation

Being diagnosed as a Covid-19 survivor is under great pressure because those previously used to interact directly with people are now undergoing a period of independent isolation alone. The lonely feeling of the Covid-19 survivors indicated a sense of sadness, which affects a person’s physical condition; this is in line with what was conveyed by (16), who stated that a person’s psychological state could affect the condition a person’s physical condition, prolonged stress conditions will make a person enter into a state of distress.

Subjects SP, MD, AQ, and DM stated that they felt heavy pressure both physically, which meant that their body condition was not feeling well, coupled with psychological
pressure, namely, feeling anxious and worried about being afraid of infecting others, SA, SW, and ST felt anxiety and pressure, and worry about their health status.

Spiritual needs are the basic needs of all human beings; in difficult and critical times, one’s spirituality will play an important role. The multifaceted construct of ‘spirituality’ is identified as a relevant resource for coping with stressful situations (17). Spirituality becomes a stronghold that can keep one mentally stable.

During the isolation treatment in the hospital, the subjects SA, SW, ST, and AQ felt that one of the things that made them able to survive in this difficult time was to surrender to God’s provisions; this became strong and formed because at the time of Covid-19 starting to bloom and the death rate is high no hope can be cultivated except to surrender by continuing to endeavour to God.

MD, SP, DM, and SR felt a sensation of religious appreciation in the form of increasing their belief in the greatness of God, their great gratitude for their health status, and a deep spiritual sense when praying to God. This result aligns with research studies on the role of spirituality in building resilience and can facilitate understanding a person’s adaptation to trauma and their most difficult experiences (18).

5.1.2. Religious Practices

After carrying out independent isolation and there is no decrease in the clinical symptoms of Covid-19, the Covid-19 patient will be rushed to the hospital for professional treatment. The dynamics of pressure felt in the hospital has its meaning for Covid-19 patients, one of which is the emergence of fear and excessive worry because they have entered a room full of sick people. The condition of the body that is getting weaker makes the patient experience increasingly mental distress.

The critical period that a person goes through will be a predictor. According to (19), religiosity is the extent of knowledge, how strong the belief is, how diligently the implementation of worship, and how deeply one’s religious appreciation is. Religious activity occurs not only when someone performs a prayer ritual but also when carrying out other activities driven by spirituality. It is not only related to activities that are visible and visible, but also invisible activities that occur in one’s heart.

Subjects SP, MD, AQ, SA, ST, SW, DM, and SR stated that their overall level of implementation of their religious ritual practices was going better, even though they were in a sick physical condition; SP and MD said that they carried out their prayers on the bed. While sleeping, ST and SR still tried their best to take ablution even though it
was difficult for him to walk to the bathroom because of the drip installed. SA and AQ try to keep praying even while sitting.

The subjects also stated that they did dhikr by reciting it clearly or in their hearts. SA and AQ said that they also included mentioning Asmaul Husna. When the body’s condition feels better than reading the Koran, some things done by people experiencing a critical period wait for a miracle for the disease they are experiencing to increase their religiosity (20). Some things that are done are to study religious beliefs or materials and recite prayers individually or in groups (20).

Religion or religiosity could improve psychological well-being. People with strong spiritual beliefs show higher rates of life satisfaction, personal happiness, and fewer negative consequences of experiencing trauma than people who lack spirituality. Many people report that spiritual beliefs help them when they have to cope with stress. Religion can help the coping process for two reasons: first, religion provides a belief system and a way of thinking about the pressures of life and how to reduce distress, and second, how humans can find meaning (wisdom) behind the forces and events they experience. Religion also provides social support (social support) (21).

5.1.3. Social Support

The experience faced by survivors of Covid-19, apart from religion and religiosity, is social support from their environment. SP, MD, AQ, DM, SA, SW, and ST stated that they felt increasingly depressed during the initial period of hospitalisation. The feeling of fear and anxiety made them feel weaker, and the feeling of loneliness made them feel more sinking into a state of negative emotions experienced. There are many reasons why individuals feel lonely. One of the causes is the condition when separated or living far away from family, relatives, or even friends and relations. (22) stated that the situation in which a person has to work away from home and is separated from his family and friends could cause loneliness. The cause is in line with what was said by (23) that moving to a new location can be lonely. This response is different from what SR felt. He felt more secure when he was treated at the hospital, and he believed that the hospital was the right place for him to get treatment because he would be treated by experienced medical personnel.

Survivors of Covid-19 feel that they cannot be separated from the support they get through the social relationships that are built. The main role of social support is the support obtained from the family. The role of the family is crucial as a place to channel complaints while undergoing treatment at the hospital. Support through social media
for being unable to meet in person is an encouragement and motivation to stay strong and survive. The desire to quickly complete the treatment period and recover as usual is the main dream and motivation for survivors of Covid-19 because of their desire to meet their families. In line with this, as stated by (24), passion, in other words, motivation, can be interpreted as a person's strength (energy) which can lead to a level of persistence and enthusiasm in carrying out an activity, both from within the individual itself (intrinsic motivation) and from outside the individual (extrinsic motivation). Strengthened by (25), motivation is a change in energy within a person characterised by the emergence of feelings and reactions to achieve goals.

Social interactions carried out by Covid-19 survivors, even though only through social media, are a form of social support carried out by Covid-19 survivors with family, friends, and co-workers which is a form of social support. Because previously, they interacted directly in the environment, and now interacting via social media makes them happy; with this interaction, Covid-19 survivors can share, tell stories, do activities together, and encourage one another. Covid-19 survivors are given motivation and support to keep their spirits up during the treatment period. This aligns with the opinion expressed by (26) that social support is defined as a psychological phenomenon in social interactions that occur between individuals in the form of assistance or attaching them to social relations that are felt in the form of feelings of wanting to love, care, and willingness. This view is also reinforced by (27) that social support is also interpreted as the role played and carried out by friends in providing advice and assistance. Some of them share relative personal feelings.

Social support from the family also impacts the psychological health of Covid-19 survivors. This is because seeing the enthusiasm and care of the family through communication through social media and meeting the needs of hospital survivors so that the survivors of Covid-19 still feel valued and cared for even though they are in a fallen condition. The family social support continuously given to Covid-19 survivors makes them feel loved, cared for, valued, and considered that they exist. This is as stated by (28) that social support is a form of acceptance from a person or group of people towards an individual who creates the perception in himself that he is, loved, cared for, valued, and helped. The availability of social support will make individuals feel loved, cared for, and valued and become part of the group.

The social support that Covid-19 survivors get allows them to interact socially and build positive things. This can affect the mindset, influencing how one starts to be enthusiastic about re-entering the social environment, even though it is more careful building the interaction back into the social climate by getting various forms of social
support from family, friends, and the community. It bears sweet fruit, and warm relationships are reestablished with people in the surrounding environment, so that good relationships begin to be rebuilt through this intensity. Sources of social support can come from family members (husband, wife, parents, brothers, sisters, relatives), close friends, neighbours, co-workers, or an expert/professional. In line with this (29) conveyed that family is the most important source of social support, followed by the presence and support of friends.

5.2. Impact of Religious Experience on Covid-19 Survivors

Religious experience significantly impacts the lives of Covid-19 survivors to undergo a period of independent isolation, a period of treatment, even after treatment. The effect of this meaning is increasing belief in God, feeling emotions become more stable, reducing anxiety, being able to think positively, feeling more optimistic about recovery, and feeling a deep spiritual sensation.

6. CONCLUSION

In summary, each survivor of Covid-19 has his or her meaning for his experience. This meaning varies because each individual also experiences various events from the time of diagnosis to the completion of the treatment and treatment process. The importance of the experience felt by survivors of Covid-19 is a spiritual appreciation of religious practices and social support. The impact of the meaning of religiosity is increasing belief in God, feeling emotions become more stable, reducing anxiety, being able to think positively, feeling more optimistic about recovery, and feeling a deep spiritual sensation.

Research conducted by (30) states that religiosity correlates with one's positive feelings, like encouragement, motivation, and happiness, which are manifestations of positive mental health. This is in line with the research conducted by Tanamal (2021), who gratefully accepts that all situations during a pandemic are an effort to maintain mental health. Therefore, religiosity is essential in the current case, so this change strengthens the value of belief and social relations between people to keep each other awake.
References


