

OPTIMISM, ALTRUISM AND RELIGIOUS COPING POST COVID-19 PANDEMIC

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ABSTRACT

Post Covid-19 conditions still leave trauma for some people, especially those who have experienced pain and even loss of family members. The ability to deal with trauma is the ability to adapt to conditions. The aim of this study was to find out how optimism and altruism influence post-pandemic religious coping. The subjects of this study amounted to 820 men and women, aged 23-58 years old. The brief RCOPE, LOT-R and the altruism scale are instruments to find out the level of religious coping, optimism and altruism respectively. Based on the parametric-statistical analysis with product moment correlation from Pearson, there was a correlation between optimism and religious coping and there was also a correlation between altruism and religious coping. Based on multiple regression analysis, this study showed that both variables can simultaneously be predictors of religious coping.

Keywords: Optimism, Altruism, Religious Coping, Post Covid-19 Pandemic

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INTRODUCTION

The psychological pressure in living with a pandemic situation where social changes occur quickly has made almost everyone feel worried and anxious. Even afterwards, it still leaves trauma for some people. After the pandemic, it does not mean that everyone is free from their trauma, especially those who have experienced pain or loss of family members.

When this trauma is prolonged, the risk of mental health problems and medical problems increases. Steel, et al (2002) suggested that people exposed to trauma have a higher risk of mental illness. Trauma exposure is a more important predictor of a person's mental health. Everyone needs to learn how to deal with this pandemic situation in order to adapt until he feels comfortable again. This comfortable condition can be obtained when a person is able to defend himself both physically and psychologically, referred to as a state of balance. In this condition of discomfort, a person's health can

be threatened. Therefore, a coping strategy is one way that can be done. Coping is a person's ability to deal with and solve problems appropriately. Coping is a way that is used to relieve pressure and obstacles that a person feels.

This study uses a religious approach, therefore the more appropriate term to represent it is religious coping. The way a person manages stress and life's problems by using his beliefs is called religious coping (Wong-McDonald and Gorsuch, 2012).

The dynamic and situational understanding of religious coping, which was developed from the transactional model of Lazarus and Folkman, was interpreted by Pargament who stated that religion is a central part of religious coping. In facing and solving life's problem, religion has two roles. First, contribute to the process of managing stress and dealing with problems. Second, religion is the ability to adapt to problems originating from other things that are in progress (Pargament et al, 1992).

Religious coping is not only useful for managing stress and solving problem in life, but it can also help a person find meanings in life, achieve closeness to God, have hopes, gain peace, build relationships with anyone, develop more optimally, and have better self-control. Religious coping includes cognitive, affective and conative aspects that are covered religiously to manage stress (Pargament, 2001). Religious coping is a response of cognition, emotion and behavior that is packaged religiously to manage stress, including various ways and goals with positive and negative aspects (Wortmann, 2013).

Religion is designed as a special system to deal with pressure, because its role in dealing with pressure caused by individual constraints is very much needed (Pargament, 1997). Religiosity has a mediating role in influencing the daily lives of individuals. Not everyone judges a negative thing as a negative thing, and quite a few people judge a negative thing as a positive thing. They have a positive outlook because of the way they think, feel and behave positively. Ano & Vasconcelles (2004) suggested that religious coping is effective in helping individuals who are experiencing stress; religious coping positively related to psychological adjustment (Ano and Vasconcelles, 2005). One form of psychological adjustment in this research is optimism and altruism.

Optimism and altruism can be predicted as psychological attributes that affect coping. Through an optimistic attitude, a person will be able to solve the pressures and problems of life confidently so that they can solve each problem appropriately. Similarly, altruism is an attitude of helping others because of one's own need for a sense of moral responsibility.

Optimism and altruism are behaviors that show a person's condition in his religiosity. The study results showed that belief in religion is very effective as a person's

strategy in solving life's problems, which depends on whether the perspective is positive or negative. As Warren (Warren et al, 2014) stated religious coping affects a person's psycho social adjustment through an optimistic attitude. Optimism is the foundation of positive psychology and is one of the central aspects. People who have an optimistic attitude will look at every problem positively and have good hopes that they will be able to handle all obstacles (Seligman et al, in David Panah, 2009). This concept is in line with everyday life, that humans are dynamic. Every human behavior has a purpose, (Scheier & Carver, 2003). Through an optimistic attitude, everyone will be able to solve pressing life problems and dealing with depression. Optimism boosts the immune system and makes a person less susceptible to disease (Seligman, 2005). According to Baldwin et al (2008) optimism and health are interconnected, both physical and psychological health, life satisfaction and psychological well-being. People with an optimistic attitude will be able to solve their problems better than pessimistic people (Nasab, 2005).

Seligman (2008) argued that optimism is a person's belief in his ability to deal with bad events/failures in his life and believes that these events are only temporary which will not affect his activities, and are not entirely caused by himself but can also be caused by situations, fate or someone else. Scheier and Carver (2003) stated optimism certainly bring individuals towards the good of health because of the desire to remain individuals who want to produce something (productive) and this is still used as a goal to successfully achieve what they want. Optimistic people have positive hopes and will maintain these hopes even if they fail (Gibson & Sanbonmatsu, 2004). Optimistic people believe that what will happen is a good thing than a bad thing (Segerstrom et al, 2011).

Another psychological concept is altruism. Altruism is behavior that can provide good benefits to other people, without expecting anything in return (Kerr, et al, 2004). Altruists have sincere intentions to help others, putting the interests of others above their own. According to Stukas, et al (2012) altruism is the act of helping someone sincerely out of care when they get into problem. Religion and altruism have a close relationship, as a form of behavior (Midlarsky, 2012). Besides religion, Schwartz (2013) suggested that altruism affects well being.

Widyastuti (2012) argued that altruism is a behavior that sincerely helps others which is determined by six factors, one of which is religious and moral values. Religiosity and moral values encourage someone to help others. With religion, a person is socially responsible to help others. Religion has taught about mutual help in kindness and patience. Therefore, the aims of this study were to find out how optimism and altruism influence post-pandemic religious coping.

RESEARCH METHODS

This is a quantitative research. The population in this study was individuals who had experienced pain or loss of family members during the Covid-19 pandemic. Our sample consisted of 820 respondents who were selected through a purposive sampling technique, with the criteria: having experienced pain due to the Covid-19 pandemic, or having loss of a family member due to death as a result of the pandemic, aged 21-58 years. Product moment correlation from Pearson was used to determine the correlation between optimism and religious coping and the correlation between altruism and religious coping. Multiple regression analysis was carried out to determine the simultaneous effect on religious coping.

~~The Brief RCOPE was used as a questionnaire to measure religious coping~~

which consisted of 14 items. Religious coping is positively measured through items 1 to 7 based on a Likert scale of 5 scores from strongly agree to strongly disagree. Meanwhile, negative religious coping is measured through items 8 to 14 from strongly disagree to strongly agree. Religious coping used as a measuring tool in this literature has contributed to the development of knowledge about the role of religion in the process of resolving crises, trauma and transitions. Pargament (2001) developed the brief RCOPE which has good internal consistency, concurrent validity, predictive validity and incremental validity. The brief RCOPE is measurement tool that is reliable and valid, and has been widely used in several studies.

Scheier and Carver (1985) constructed the old version of the LOT optimistic questionnaire, which was later revised to become LOT-R (Scheier et all, 1994). This measuring instrument was then standardized by Khodabakhshi (2004). The questionnaire reliability was 0.74 with 6 items measuring optimistic and pessimistic attitudes. This measuring instrument used a Likert scale with 5 scores, from strongly agree to strongly disagree. Items 3, 7 and 9 have reversed scores. Rushton (1981) developed an altruist measuring instrument consisting of 20 items that measures the frequency of person's altruistic actions towards strangers. The measuring instrument uses a Likert scale with five scores, ranking from Never (1) to Very Often (5).

RESULT AND DISCUSSION

The first hypothesis : there exists a correlation between optimism and religious coping.

Table 1- correlation coefficient of optimism and religious coping

N	(r)	Significance
820	0.349	0.00

Table 1 displays a significant and positive correlation between optimism and religious coping with coefficient 0,349 and $P < 0,05$. Therefore, the first hypothesis was confirmed.

The second hypothesis : there exists a correlation between altruism and religious coping.

Table 2- Correlation coefficient altruism and religious coping

N	(r)	Significance
820	0.273	0.00

Table 2 shows there is a significant and positive correlation between altruism and religious coping ($r=0,273$ and $P < 0,05$). Therefore, the second hypothesis was confirmed.

The third hypothesis : there is no correlation between optimism and altruism.

Table 3- correlation coefficient optimism and altruism

N	(r)	Significance
820	0.063	0.13

In table 3 there is no significant correlation between optimism and altruism ($r=0,063$ and $P>0,13$). Therefore, the third hypothesis was confirmed.

The fourth hypothesis : there exists multi variate correlation between optimism, altruism and religious coping.

Table 4- Multivariate correlation coefficient on prediction variables (optimism, altruism) and religious coping

ANOVA^a

Model	Sum of Squares	df	Mean Square	F	Sig.
1	9677.33	2	4838.66	287.91	.000 ^b
Residual	0	5	5	7	

Residual	5377.44	81	12.773
Total	15054.7	81	
	71	9	

a. Dependent Variable: Religious Coping
 b. Predictors: (Constant), Altruism, Optimism

Table 4 shows the regression predictions of optimism, altruism and significant religious coping ($F=287,917$, $P<0,05$). Therefore, the fourth hypothesis was confirmed.

Table 5- Model summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.580 ^a	.436	.461	3.271	1.687

a. Predictors: (Constant), Altruism, Optimism

b. Dependent Variable: Religious Coping

In table 5, the value of R Square is 0,436. This means the proportion of optimism and altruism toward religious coping is 43,6%. Religious coping influenced by other variables outside the estimation of the linear regression model, but the effect is relative at 56,4%.

CONCLUSION

The aim of this study was to find out the influence of optimism and altruism correlations on religious coping in pandemic situation. Confirmation of the first hypothesis is in line with the results of research conducted by Warren that Religious coping influences psycho social adjustment through optimism (Warren, et al, 2014). The results of the second hypothesis are in line with the results of research conducted by Midlarsky that religion and altruism have a very strong connection

(Midlarsky, 2012). The third hypothesis is in accordance with Ali and Bazorgi's research (2016) that altruism not directly related to optimism, but through happiness. Happiness as one of the most basic positive feelings has an important role in creating altruism in individual and society. Altruistic behavior makes individuals feel happy. Happiness is always associated with hopes, satisfaction and trust. The fourth hypothesis is in accordance with Seligman (2008), Pargament (1997), Midlarsky (2012) and Warren (2012).

Religion is designed as a special system to deal with pressure, because of that its role in dealing with pressure caused by individual strength constraints is very much needed (Pargament, 1997). Religiosity acts as a mediating role in influencing the daily lives of individuals. Not everyone judges a negative thing as a negative thing, and quite a few people judge a negative thing as a positive thing. They have a positive outlook because of the way they think, feel and behave positively.

Ano & Vasconcelles (2004) suggested that religious coping in helping stressed individuals give better results. Religious coping relates positivism with psychological adjustment. One form of psychological adjustment in this research is optimism and altruism.

Through an optimistic attitude, everyone will be able to solve pressing life problems and dealing with depression. Optimism can boost the immune system so that a person will not be easily infected with disease (Seligman, 2005). People with an optimistic attitude will be able to solve their problems better than people who are pessimistic. (Nasab, 2005). Positive expectations are owned by people who are optimistic. Even though it has failed, the hope will still be maintained (Gibson and Sanbonmatsu, 2004). Optimistic people believe that what will happen is a good thing than a bad thing (Seegerstrom et al, 2011).

This belief systems form their belief that God will help them, God gives them the ability to finish life's problems. They try to accept God's plan for themselves and carry out their plan together with God. People who are optimistic have a different perspective from others in general. By positive thinking, positive prejudice and positive behavior they try to see how God might try to strengthen himself in the situation that occurs.

Like when this pandemic situation occurs, optimistic people see that this is only temporary, they believe God has given them the ability to be able to deal with this situation. With closeness and faith in God, it will make them more calm, so that the body's condition will reach balance, not under pressure. This optimistic condition will increase their body's resistance, so that they are not susceptible to disease and are not easily infected even though the pandemic is still ongoing.

Altruism is a behavior that can provide good benefits to others, without expecting anything in return (Kerr, et al, 2004). Altruism is based on a sincere intention to help others, prioritizing the interests of others over their own interests. According to Stukas, et al (2012) altruism is the behavior of helping others sincerely because of concern for them when they get into trouble. Religion and altruism have a close relationship, as a form of behavior. Myers (2012) argues that altruistic people care and help even though there are no benefits offered or do not expect that they will get something back. Widyastuti (2012) argues that altruism is a behavior that sincerely helps others which is determined by six factors, one of which is religious and moral values. Religious and moral values encourage someone to help others. With religion, a person is socially responsible to help others. Religion has taught about mutual help in kindness and patience.

The pandemic condition has taught us that in living together, humans need to help and

care for each other. Caring for others leads us to good behavior which is one of the values in religion. Humans cannot live alone, they need other people to help each other. Therefore it is necessary to care for the people around him. Caring attitude is the beginning of the realization of altruistic behavior.

A pandemic situation is a divine destiny, it cannot be avoided and must be faced. Then caring for others to help each other and staying optimistic to be able to get through it is the best way. By still believing that God will help get through all the problems of life.

The religious coping approach is suitable for dealing with life problems with psychological pressure, including rapid social changes due to a pandemic so that almost everyone is worried and anxious. Optimists and altruists make an effective contribution to their influence on religious coping by 43.6%, the rest of 56.4% are many other factors not examined in this study. Therefore it is suggested for further research to look at external factors that can affect religious coping.

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