

# INTOLERANCE UNCERTAINTY, RELIGIOSITY AND PSYCHOLOGICAL WELL-BEING AMONG ADULTS DURING COVID-19 PANDEMIC

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## **Abstract**

**Aims.** *The aim of the present research was to study the association between intolerance uncertainty, religiosity and psychological wellbeing among adults during COVID-19 Pandemic.* **Methods.** *Intolerance Uncertainty Scale, Muslim Religiosity Scale and Ryff's psychological Well-being Scale were used to assess variables under study. Data was collected from (n=150) adults during pandemic. Correlational research design was used in the present study.* **Results.** *Correlational analysis revealed there is a highly significant negative relationship between intolerance uncertainty and psychological well-being, and religiosity has significant positive relationship psychological well-being. Results also revealed that intolerance uncertainty and religiosity were significant predictors of psychological well-being. Findings revealed that psychological wellbeing scored was higher in males as compare to females.* **Conclusions.** *It is evident from the present study and prior studies that adults who have high level of religiosity leaded them towards high psychological wellbeing. The present research offers valuable information for future generations of researchers and health care providers.*

**Keywords:** *Intolerance Uncertainty, Religiosity, Psychological Well-being, Adults, COVID-19 Pandemic.*

## **1.1 Introduction**

With millions of confirmed cases and many countries implementing different levels of quarantine the novel coronavirus 2019 pandemic has become globally widespread (Cullen, Gulati, & Kelly, 2020). Given the unique situation that has been experienced globally, it is therefore important to investigate the psychological consequences of this process. So, the objective of this study explored whether psychological well-being is linked to intolerance of uncertainty the role of religiosity among adults during COVID-19. As this pandemic is increasing rapidly across the

globe, it is causing a substantial degree of anxiety, apprehension and concern in general public and especially in certain groups, such as older adults, care professionals and people with health conditions. In terms of public mental health, elevated rates of stress or anxiety are the biggest psychological effects to date. But as new initiatives and effects are implemented, especially quarantine and its impacts on the normal activities, habits or livelihoods of many people, levels of isolation, depression, unhealthy use of drugs and self-harm or suicidal activity are also expected to increase (WHO, 2020).

## **1.1 Intolerance of Uncertainty**

The significance of the term intolerance uncertainty is familiar for many years. Intolerance of uncertainty is a dispositional trait that arises from a collection of negative beliefs about uncertainty and its effects and includes the tendency to respond negatively to uncertain circumstances and events at an emotional, cognitive and behavioral level (Buhr & Dugas, 2009). This can also be defined as a negative and fearful way of reacting to ambiguous circumstances at the cognitive, emotional and behavioral level (Freeston, 2014). This is a factor of cognitive

vulnerabilities that involves in the growth and maintenance of stress. Patterns of cognitive behavior indicate that people with IU have basic negative beliefs related to uncertainty, also having biased facts related to it (Jacoby, 2020).

### **1.2 Religiosity**

Religiosity is the condition of being religious, whereas measure of knowledge, faith, beliefs and devotion of individuals. It is the quality of being religious, piety, devoutness. Furthermore, the term religiosity carries an emotional charge of varying degrees dependent upon their historical associations and attitudes. Religiosity is also the extent to which the particular individual believes in venerates the founder, gods or goddesses of the relevant religion, practices the relevant teaching and participates in the relevant activities (Adeyemo & Adeleye, 2008). In order to promoting and conveying spirituality, Faiver et al., (2001) described religion as a social vehicle. Ellison (1993) described religiosity and spirituality as a mechanism used to reduce human anxiety.

### **1.3 Psychological Wellbeing**

Psychological well-being is the most essential psychosomatic factor that it finds out the achievement of an individual in every field. While psychological well-being is just as essential as physiological well-being, so inhabitants must know that the psychological well-being is also essential for success. Psychological well-being includes the short- range and long-standing psychological performance likewise having both positive health (for instance, positive affectivity plus confidence) and unenthusiastic health for example; anxiety, hopelessness, and exhaustion. Hopeful and unenthusiastic affectivity are two points of psychological well-being (Brough, 2005).

### **1.4 Rationale of the Study**

The aim of the present research was to study the relationship between intolerance uncertainty, religiosity and psychological well-being among adults during COVID-19. There are less studies conducted on adults with intolerance uncertainty, religiosity and psychological well-being in Pakistan, and that is why there is need to work on this domain to complete this gap. And the present research is an effort to fulfilling this gap. The present study was directed to assist adults during pandemic to understand in what way intolerance uncertainty and religiosity play a significant effect on the psychological wellbeing among adults during pandemic. The main purpose of the current study was to provide insight to societal and clinical setting about religiosity and its effect on the psychological wellbeing among adults. Though, a positive sense of religiosity the present study was crucial for personal's development in relations of communication, problem solving in pandemic, understandings and psychological wellbeing. Therefore, the core aim of the current research is to provide insight to people, social workers and policy makers especially mental health professionals to understand that how much religiosity and intolerance uncertainty show a significant influence on the psychological wellbeing of adults during pandemic. This insight information can be particularly useful for mental health professionals that provides mental health care services, as well as, for policy makers who make strategies and polices for better psychological wellbeing in the society.

## **2. Method**

### **2.1 Research Design**

Correlational research design was used in present study.

### **2.2 Sample and Sampling Strategy**

Purposive sampling strategy was utilized to recruit sample of (n=150) adults during COVID-19.

### **2.3 Procedure**

Firstly, researcher got official ethical clearance letter from University. Consent was taken from the authors of scales. Researcher prepare the booklet comprising on the informed consent hold

demographic sheet and scales, provided to the members and collect data then pilot study and main study was conducted.

## 2.4 Assessment Measures

### 2.4.1 The Intolerance of Uncertainty Scale (IUS)

The Intolerance of Uncertainty Scale (IUS) was originally developed (Freeston et al., 1994). This scale has 12 items relating to the idea that uncertainty is unacceptable, reflects badly on a person, and lead frustration, stress, and the inability to take actions. Five-point Likert scale ranging from (1= not at all characteristics of me to 5= entirely characteristics of me) was used in this scale. Reliability of IUS was ( $\alpha = .81$ ). The Intolerance of Uncertainty Scale (IUS) was used to measure the level of Intolerance Uncertainty variable in the present study.

### 2.4.2 Muslim Religiosity Scale

Muslim religiosity scale was originally developed by (Abdurrahman, 1997). This scale has 30 items. Five-point Likert scale ranging from (1= Strongly Agree to 5= Strongly Disagree) was used in this scale. Reliability of IUS was ( $\alpha = .73$ ). Muslim Religiosity Scale was used to measure the level of Religiosity variable in the present study.

### 2.4.3 Psychological Well-Being Scale.

This scale was developed by Ryff, (1989). The original version consists of six extents of 20 items each. This scale consists of 84 items. Each statement using 6-point Likert scale (1=strongly agree) to (6=strongly disagree). The current research found reliability of psychological wellbeing scale was ( $\alpha = .52$ ). Psychological wellbeing scale was used to measure the Psychological Wellbeing variable in the present study.

## 3. Results

**Table 1**

*Pearson Product Moment Correlation Analysis between Study Variables among Adults During COVID-19 (n=150)*

Variables	1	2	3
1.Intolerance Uncertainty	-	.23	-.37
2.Religiosity	-	-	.21
3.Psychological Wellbeing	-	.21**	-

\*\*  $P < 0.01$ , \* $P < 0.05$

Results showed that intolerance uncertainty has significant ( $p < .05$ ) negative relationship with psychological wellbeing among adults during Covid-19. However, religiosity has significant positive relationship with psychological wellbeing among adults during Covid-19.

**Table 2**

*Hierarchal Regression Analysis Used to Predicting Psychological-Wellbeing (n=150)*

Predictors	Psychological Wellbeing	
	R <sup>2</sup>	$\beta$
Step 1	.13	
Intolerance Uncertainty		-.37***
Step 2	.22***	
Religiosity		.31***
Total R <sup>2</sup>	23%	

Note: \* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$ .

a. Dependent Variable: Psychological Wellbeing

b. Predictors in the Models: Intolerance Uncertainty, Religiosity.

Results revealed intolerance uncertainty was significant ( $p < .05$ ) predictor  $F(1, 147) = 23.95$   $p < .05$ ,  $R^2 = .14$  and accounted for 14% of variance in psychological wellbeing. Moreover, religiosity was significant ( $p < .05$ ) predictor  $F(1, 146) = 22.58$   $p$

< .05,  $R^2 = .23$  and accounted for 23% of variance in psychological wellbeing among adults during COVID-19.

**Table 3**

*Independent Sample T-Test (n=150)*

Gender	t	df	p	Confidence Interval	
				LL	UL
	2.24	138	.01	2.06	19.58

*Note.*  $p$  = Significant Value,  $df$  = degree of freedom, LL = Lower Limit, UL = Upper Limit, CI = Confidence Interval  
Findings revealed a statistically reliable and significant difference of psychological wellbeing between males ( $M = 160.32$ ) and females ( $M = 149.49$ ). Psychological wellbeing score was higher in males as compared to females.

#### 4. Discussion

Results of the present research revealed intolerance uncertainty and psychological wellbeing has significant negative relationship. Another study was conducted by Sakir, (2020) on effects of COVID-19 pandemic on psychosomatic complaints and mediating role of intolerance of uncertainty. Results of this study revealed that there is a negative relationship between intolerance of uncertainty and psychological well-being. Mukhtar, (2020) conducted a research on mental health and psychosocial aspects of coronavirus in Pakistan and results showed that there is a negative relationship between intolerance of uncertainty and psychosocial well-being.

In addition, results of the present research showed religiosity and psychological wellbeing has significant positive relationship with each other. Another study was conducted by Sarah (2020) on response of religious communal organization and implications for public health during the COVID-19 pandemic. Results showed that there is a positive relationship between psychological well-being and religion. The end result showed that the firm involvement in religiosity and spirituality are linked directly with optimistic psychological health and well-being (Ellison & Levin, 1998). Previous studies concerning the topic field of religiosity and psychological well-being, significantly cover the dimension completely and provide proof to support the positive relationship between religiosity and psychological well-being (Mickely, Carson & Soecken, 1995).

Furthermore, findings also revealed intolerance uncertainty and religiosity were significant predictors of psychological wellbeing. A research was conducted by Bishop, (2008) conducted a research on a study of religiosity and psychological well-being and findings revealed that religiosity was significant predictor of psychological wellbeing. Diener and Seligman (2008) conducted a research on the role of spirituality and religiosity in subjective well-being of individuals with different religious status. Results revealed that, when life circumstances were difficult, greater religiosity predicted greater subjective wellbeing via greater social support and meaning in life. Another study was conducted by Cevik (2018) to examine the prediction between intolerance uncertainty and psychology wellbeing proved that intolerance uncertainty was significant predictor of psychological wellbeing among individuals (Yip et al. 2010).

Moreover, findings of the current study showed that score of psychological wellbeing was higher in males as compared to female. Previous studies support this finding and showed that men scored higher than women in self-acceptance, autonomy and psychological wellbeing as compared to women (Matud, Curbelo & Fortes, 2019). Another study showed men scored higher on physical self-concept, automatic thoughts (positive), constructive thinking, cognitive flexibility, total self-concept, fortitude and psychological wellbeing as compared to women (Roothman, Kirsten & Wissing, 2003).

#### 4.1 Limitations and Recommendations

The sample size of current study was 150. And the sample of current research was short for better understanding. A huge sample size would permit researchers to have more data to evaluate which would provide a better understanding of the topic. It will also improve the validity and reliability of study. When a research is directed with a small sample size there is more margin of error which decreases the validity.

#### 4.2 Conclusions

It is evident from the present study and prior studies that adults who have high religiosity level during pandemic led towards them to high psychological wellbeing. It is important to understand how these adults are able to adapt to various changes in their lives, and how environmental, physiological, and psychological factors may affect adult's intolerance uncertainty and psychological wellbeing. My hope is that the present research will offer valuable information for future generations of researchers and health care providers.

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