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RESILIENCE AND HOPELESSNESS: EXPLORING THE MEDIATOR ROLE OF SPIRITUALITY IN THE GLOBAL SITUATION OF COVID-19

KETAHANAN DAN KEPUTUSASAAN: EKSPLORASI PERAN MEDIATOR SPIRITUALITAS DALAM SITUASI GLOBAL COVID-19

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ABSTRAK

Penelitian ini bertujuan untuk mendeskripsikan dan mendefinisikan pentingnya spiritualitas sebagai mediator dalam situasi global Covid-19 di Pakistan yang berkorelasi positif dengan ketahanan dan berkorelasi negatif dengan keputusan. Rancangan penelitian menggunakan data yang dikumpulkan dengan cara simpel random sampling dan menggunakan instrumen standar psikologi untuk mengukur variabel. Jumlah partisipan dalam penelitian ini adalah 540 orang di Pakistan (pria dan wanita) dengan rentang usia 18-60 tahun. Penelitian ini menunjukkan bahwa ketahanan berkorelasi positif dengan spiritualitas ($r = 0.72$; $p < 0.01$) sedangkan spiritualitas berkorelasi negatif dengan keputusan ($r = -0.76$; $p < 0.01$) dan ketahanan berkorelasi negatif dengan keputusan ($r = -0.78$; $p < 0.01$). Analisis mediasi menunjukkan bahwa spiritualitas menjalankan peran mediator yang kuat antara ketahanan dan keputusan. Dampak langsung keputusan terhadap ketahanan adalah -5.9^{**} sedangkan dampak tidak langsung melalui spiritual adalah -1.7^{**} dan dampak secara keseluruhan adalah -7.6^{**} . Kesimpulan dari penelitian ini menunjukkan bahwa spiritualitas memiliki dampak yang kuat pada perilaku ketahanan dan mengurangi keputusan bahkan dalam situasi bencana yang mendunia. Kajian ini menyempurnakan studi literatur sebelumnya terkait dengan studi psikologi dan mendorong peran strategi spiritual khususnya pada kondisi yang tidak pasti seperti pandemi virus corona.

Kata Kunci: *Coronavirus, Covid-19, Keputusan, Ketahanan, Pakistan, Spiritualitas*

ABSTRACT

*This research aims to describe and to define the importance of spirituality as a mediator in the global pandemic situation of COVID-19 in Pakistan while having positive correlation with resilience and inverse with hopelessness. The correlational research design was used and data was gathered by simple random sampling and there was a use of standardized psychological instruments to measure the variables. The participants were (N=540) Pakistani general population (male and female) with the age range of 18–60. The outcomes revealed that resilience was positively correlated with spirituality ($r=0.72$; $p < 0.01$) while spirituality is negatively correlated with hopelessness ($r=-0.76$; $p < 0.01$) and resilience was negatively correlated with hopelessness ($r=-0.78$, $p < 0.01$). Mediation analysis shows that spirituality performed a strong intermediating role between resilience and hopelessness the direct effect of hopelessness on resilience was -5.9^{**} whereas the indirect effect through spirituality was -1.7^{**} and the total effect size was -7.6^{**} . It is revealed that spirituality has a strong impact on the resilience behavior and reduces the hopelessness even in the worldwide disastrous situation. This study enhances the literature related to the psychological research and prompts the role of spiritual coping strategies especially in the state of uncertainty like coronavirus pandemic.*

Keywords: Coronavirus, COVID-19, Hopelessness, Pakistan, Resilience, Spirituality

INTRODUCTION

December 2019, was the flare of coronavirus and its influence is now becoming multifaceted and problematic worldwide. Human beings are searching for robust solutions that meet the challenges. Quarantine, societal segregation, tough treatment, an endless search for medication, remedies, masks and sanitizers, and preventive strategies are really strenuous. Coronavirus is a zoonotic virus and has the capacity of transformation and after knowing this all above resolutions are unmaintainable. New explanations to the problem are necessity of the time which can provide solution for the psychological problems created by this pandemic situation (Buheji, 2020). A man is a combination of mind and body in other words a human being has a spiritual entity along with a physical one (King, 2017). This offered research identified the level of spirituality in the resilient individuals in the worldwide hard

situation of coronavirus in relation with the mental condition of hopelessness.

Pakistan recorded a significant number of new coronavirus cases and new deaths, according to official data. With the new cases the overall count rose to 206,512, putting the country at number twelve worldwide in terms of cases by the end of June 2020¹. This data shows that how seriously the COVID-19 pandemic is in Pakistan. There will be many social and physiological effect of the pandemic that should be studied.

Proceedings of COVID-19 were studied and analyzed for the very early months of its eruption, findings are not much optimistic for prevention for this difficulty. The coronavirus, or COVID-19, is inciting panic for a number of reasons. It's a new virus, meaning no one has immunity, and there is no vaccine. Its novelty means that scientists aren't sure yet how it behaves they have little history to go on². The psychological impacts of this pandemic are also under discussion that can appear as a major challenge for

¹ Sajid (2020), Pakistan COVID-19 cases top 206,000

² Realtime Pakistan and Worldwide COVID-19 Situation, retrieved in 1 July 2020 from <http://covid.gov.pk/>

mankind after a worldwide economic, social, and personal recession. People can be in unpredictable situation globally (Wu, Leung, & Leung, 2020). A main feature of human nature which plays an important role in dealing with uncertainty is spiritual; approximately ninety percent of the people worldwide are in performing spiritual and psychic exercises. There are many indications in the history that show the use of spiritual healings in managing the enigmatic matters. Spirituality is closely related the religious faith, even though spreads further than religion, is basically an exploration for the supreme truth. Contemporary time of science and technology is not consistent with the spiritual and psychic practices but why there is perseverance of these performances after many periods? The answer is the quality and reliability of the impact of spirituality that helps people in coping with uncertainty which can produce hopelessness. In dealing with difficulties, one trait is vital of human nature called resilience that can gain strength from spirituality. Generally, there is a clear association among spiritual views and performances and good mental stability, low stress level, worry, and addictive behaviors (Koenig, 2010). The concept of resilience states the human development on normal basis and appropriate modification of mental working when exposed to harsh conditions that raise the hazards in daily living (Luthar, Cicchetti, & Becker, 2000). The conception of spirituality is different from humanitarianism, moralities, ethics, and rationality as it has association with sanctified and the supreme. The supreme

power which belongs to an individual as well as to the whole world and universe and in traditions is called Allah, God, Krishna, or Buddha. Spirituality is closely related the religious faith, even though spreads further than religion, is basically an exploration for the supreme truth (Koenig, 2010). Coping strategies based on spirituality are extensive. A research published in 2001 discovered that there were ninety percent of USA people who moved toward their mystical and religious views after 11th of September to deal with psychological pressure (Schuster et al., 2001). This fact is also evident in medical setting. In a study on three hundred thirty medical patients who were hospitalized, it is found that ninety percent of patients were involved moderately in spiritual performances and views and almost forty percent point out that there is an important role of their spiritual stance in their recovery (Koenig, Pargament, & Nielsen, 1998). Spirituality has a negative relation with hopelessness (Cotton, Kudel, Roberts, Pallerla, Tsevat, Succop, & Yi, 2009).

Spirituality has a negative relation with hopelessness and hopelessness decreases due to spiritual beliefs and practices (Cotton, Kudel, Roberts, Pallerla, Tsevat, Succop, & Yi, 2009). An investigation indicated that the use of supplications was the most shared practice in 64 percent of two hundred ninety two patients who were suffering from cancer in Thunder Bay, Canada (Zaza, Sellick, & Hillir, 2005). A research of four hundred and six patients with chronic mental disorders in USA revealed that eighty percent used their spiritual views as coping strategy it

shows that not only the common normal people and medical patients use psychic practices as a treatment but also with mental disturbances practice these kind of views (Tepper, Rogers, Coleman, & Malony, 2001). Similarly, explored in a research at Boston University of one hundred and fifty seven grownups with acute mental disorders, the very advantageous act was spiritual performances only “meditation” exceeds it in rate of practicing (Ruscinova, Wewiorski, & Cash, 2002). Additionally, a research in Australia discovered the fact that eighty percent of sufferers with mental problems believed their counselor have to be known of their psychic views and sixty seven percent showed their positive attitude towards spiritual coping techniques to get rid of mental stress due to their illness (D’Souza, 2002). Generally, there is a clear association among spiritual views and performances and good mental stability, low stress level, worry, and addictive behaviors. Specially in mid of stress and problems, spiritual acts, and performances improves societal backing, gives recommendations for well-being and in connecting with people and offers aims to life. Occasionally, on the other hand, mystical opinions are not enough to solve persons’ entire problems. Particularly, in a hard situation of mental problem, they may not rely on their spiritual activities and means as a coping strategy and so specialized help will be required to gain a mental condition in which they can practice their spiritual beliefs to maintain their health. It is the responsibility of mental and physical health professionals that they should make efforts

incorporating the spiritual coping strategies with other treatments and helping sufferers in any disease or disorder to apply their spiritual beliefs (Koenig, 2010). Mental health professionals considers spirituality as a coping strategy against stress especially in hopelessness (Abdollahi, Talib, Yaacob, & Ismail, 2015, Talib & Abdollahi, 2017).

Many past studies established that there is an converse relation present between spirituality and hopelessness (Mystakidou, Tsilika, Parpa, Pathiaki, Patiraki, Galanos, & Vlahos, 2007). According to the hopelessness theory, the person with hopelessness pays attention negatively to personal, constant, and general life happenings (Abramson, Seligman, & Teasdale, 1978). Spirituality is established as one of the elements that add to growth of resilience. Depression and hopelessness have inverse relation with resilience. Contemporary researches documented the direct relation of spiritual and religious participations to deal with stress related problems such as hopelessness in Christian and Jewish countries. The consideration is needed to other spiritual orientations and religions to explore possible variances that emerge from various cultural backgrounds (Ozawa et al., 2017). A cross-sectional research revealed the direct relation of spirituality and resilience in sufferers of psychotics and mania, along with in normal persons (Mizuno et al., 2016). The findings are replicated in Pakistan in search of the positive relation between resilience levels and spirituality levels in contrast with hopelessness levels in the worldwide situation of coronavirus. Iran and China the neighbor

countries of Pakistan vastly affected. In these countries, the corona outburst experienced first time. Italy is in highest number of deaths due to corona whereas Iran is after the Italy (Saqlain, Munir, Ahmed, Tahir, & Kamran, 2020).

On February 26, the first case of corona diagnosed in Karachi and confirmed by the Ministry of Health, Pakistan. At present, the cases are rising by high rate and the condition is awful. The entire confirmed cases have travel history from London, Iran, and Syria. The number of patients reached to twenty within fifteen days and four hundred are doubted numbers, broadcasted by the Geo News Pakistan. The ministry of Health Pakistan declared that 3,277 are confirmed number of corona patients in the country whereas eighteen are in serious condition and deaths are fifty in the month of April, 2020. The rate of mortality and recovery in Pakistan are 1.3% and 4.8% respectively. According to the National Institute of Health, the government is providing facilities against COVID-19 to the public since the first day when corona case appeared and provided the mitigation plans, such as initial detection, finding and chasing of connections, risk communiqué, social distancing, and segregation to elude the corona outbreak. Pakistan is an Islamic country and Muslims set up the world's second-largest religious cluster, creating around a one fourth section of the world populace. Pakistani have typical conviction and values as Muslims, relating to their religious views and spiritual performances they pay exceptional devotion, in conditions

such as present corona epidemic (Ashraf, Faraz, Raihan, & Kalra, 2020). People have more varied wellbeing and healing systems than developed countries and an even larger variety of choices for reacting to signs of illnesses. There are homeopaths, spiritual healers, and herbalists, but the relations among prescribed and informal healthcare is diminutive identified or recognized (Anwar, Green, Norris, & Bukhari, 2015). In Pakistan, people use their spiritual connection to God to cure the physical and mental problems. They do many practices to show their spirituality, like regular prayers and charity, to take guidance from a spiritual or religious personality, to follow the *Tib e Nabwi* (the healing methods and medications by The Prophet Muhammad) (Monette, 2012; Sohail, 2020).

The rise of despair and hopelessness in the modern context (modernism, capitalism) should also be addressed. Despair is near to the concept of anomy that people have to deal with this problem. In other words, we can describe the problems of modernity not only to be societal or political, but also more personal such as despair and hopelessness. In short, despair is something that is realized by the feeling that life has no meaning but to believe that there is another life after this life.

Pakistan is located in South Asia. Official name of the country is the Islamic Republic of Pakistan. It has historically and culturally been associated with its neighbors Iran, Afghanistan, and India. Islam is the largest and the state religion of Pakistan. In

terms of pillars of faith in Islam, Muslims believe in one God, angels, prophets, scriptures, destiny, and the life after death. In relation with hope, believing in hereafter is one of the very fundamental pillars of faith in Islam. According to this faith, when a person dies, the next life starts. If there is no next life then there will be a huge meaningless in the life. People will be in a state of despair. Those who do not believe in resurrection and hereafter (next life), in general, fear death because it will be the end of everything. For Muslims, the life we live and the difficulties we go through, the relationships we have, love, family, friends, all of which will not come to an end when we die. There will be continuity of life in the future. Therefore spirituality and believing in life after death is an important key to the relief of despair. So in this study, the resilience in the Pakistan context will be analyzed to see how the spirituality affects resilience during the outbreaks. The Islamic description of spirituality refers the sanitization of thoughts, physique and emotions. As spirituality is crux of sentiments near to God and spirituality in Islam is achieving closeness to God is the action that indicates to content and pleased mental life. It is an open and innovative discussion in the background of mental health nowadays that views spirituality as mediator to gain psychological well-being to reduce stressors of life like hopelessness and attaining life energy such as resilience (Abidi & Majeed, 2019).

From the previous two decades, a general attitude to considerate personalities has focused on investigation to discover

spirituality as one element of the all behavioral, cognitive and physical aspects that constitute a person. There is a strong association amid spirituality and well-being has been documented in Eastern beliefs. The concentration in the association between spirituality and psychological health is being discovered in a number of means. Investigators in a variety of fields, comprising psychology, are discovering the influences of numerous components of these both parts of human nature. People in numerous belief groups are also totaling their opinions in the favor of spirituality. It is said that spirituality is a special human capability that is formed and focused by the practices of persons and groups by which they spend their lives. Therefore, its contact with an individual's psychological wellbeing is expected to be compound, shared, and vibrant. Though certain investigation inclines to stare at a simple association of spirituality with specific psychological wellbeing results but it is accepted the worth of an combined methodology to considerate an individual's psychological condition (Cornah, 2006).

Muslim spiritual and religious commitments are used as coping strategies against mental health problems, like hopelessness, which is relevant in the state of the state of uncertainty in Pakistan. The explanation of positive spiritual coping recommends that nearer associations with God should have mental and emotional profits. In effort to explain the spiritual practices can be use of the personal (intrinsic) and social (extrinsic) spiritual practices. In a personal placement, spirituality describes

the vital drive in an individual's life such as personal relationship and belief called Eman, whereas the social extrinsic aspect depend on physical and material resources for attaining a feel of particular welfare and happiness like obligatory prayers, charity, fasting, and pilgrimage. Investigation in Muslim cultures proposes that intrinsic and extrinsic spiritual practices foretell regulation of mental health like reduces hopelessness and enhances life resilience (Khan, Watson, & Chen, 2016).

People of Pakistan have more wide-ranging welfare and healing systems, most of the people have faith in the Sufis stay mystically active even after their death and are sanctified by God with the influences to help as a transitional force amid God and people. It is a popular belief in Pakistan that Sufis realize the difficulties of the followers and therefore can interconnect their supplications to God and probabilities of reception of their supplications are amplified but the relations among the formal and informal well-being and healthcare practices are little identified or recognized (Anwar, Green, Norris, & Bukhari, 2015). In Pakistan, people use their spiritual connection with God to cure the physical and mental problems; they do many practices to show their spirituality like regular prayers, sadaqat, to take guidance from a spiritual or religious personalities, to follow the Tib e Nabwi (the healing methods and medications by The Prophet Muhammad PBUH (Monette, 2012; Sohail, 2020).

SAMPLE AND STUDY DESIGN

The correlational study design was used in Pakistan during COVID-19. Before responses,

all participants were informed and consent was obtained before the study. Informed consent was sent by Email, Facebook, Instagram, Twitter, and Whatsapp. The entire information provided by the contributors was retained confidential and participants could withdraw from the research at any time. Online questionnaire Google form sent to the various areas of Pakistan, including Punjab, Sindh, and Azad Kashmir, that conveniently helpful to get informed consent was attached to the questionnaire form protocol received online. The study was conducted by 540 people from Pakistan's general population aged 18–60 years. The investigators draw the sample by convenience sampling technique due to the pandemic situation. The data was collected from March 28 to April 8, 2020 by online protocols. The participants were informed about the purpose of the study. Participation in the research was deliberate and anonymous; participants could leave the research in any way. The numbers of educated people as PhD scholars participated more because of conveniently available.

MEASUREMENTS

The population of participants was recorded through an online form provided for age range, gender, income, residence (province) education, and religion.

DATA ANALYSIS

The research used Statistical Package for the Social Sciences (SPSS) 23.0 for data analysis, while descriptive statistics and frequency table to describe participant's

demographics. Descriptive statistics and reliability were calculated for major variables that were resilience, hopelessness and spirituality, including means and standard deviations for outcome variables. Pearson correlation analysis was performed to assess correlations among resilience, hopelessness, and spirituality.

Mediating effect and mediating role described by Hayes model to describe spirituality as mediator between hopelessness and resilience within the correlation framework. Mediating effects was analyzed with two steps, which has been recycled in many researches; analyze mediating effects between variables and mediating role of mediation between variables.

Instruments

All of these scales are permitted and used before being checked on any type of population.

25-item Resilience Scale (RS)

Main evaluation measure in this research was the 25-item Resilience Scale (RS) that is used for measuring the resilience level of people's lives in different domains. planning can be checked by ranging, for independence level that people ahead go and their thinking. In response to life stressors very successfully. People's mental well or not and the choices that make them safe also be checked. Items are counted on seven point scale with range 25 to 175; higher scores indicate greater levels of resilience. According to the authors of this scale, the resilience is a trait refers to the mental resistances, audacity, and

flexibility in the sufferings of life (Wagnild & Young, 1993).

The Daily Spiritual Experience Scale (DSES)

This instrument was used to measure the personal practices that a person faces in the relationship with supreme divine power. This survey form contains sixteen items which enclose personal involvements and views in the presence of the superior entity. It precisely aims to ration usual, or daily, spiritual practices, and how they are an everyday part of the individual's life. All items are founded on a 6-point Likert scale from 1 to 6. The range of score 16–94 with higher score shows a more recurrent spiritual involvement and practice (Underwood & Teresi, 2002).

Beck Hopelessness Scale (BHS)

Beck Hopelessness Scale (BHS) was used to measure the level of participants' hopelessness. Hopelessness is defined as the degree to which a person is future frustrated. This gauge stands a self-report tool used to check measuring a person's negative expectations concerning the future.

It is 20-items self-report inventory with true false items to gauge the hopelessness aimed to assess the age range of almost 17–80. This scale measures the effective, motivational, and cognitive factor of hopelessness with range score is 0 to 20 (Beck, Weissman, Lester, & Trexler, 1974).

RESULTS

Participant's Descriptive Analysis

The research accomplished a sequence of analyses the socio-demographic variables with SPSS. There were 540 participants (N) from 18 to 60 years, 65.4% participants are in age range 18–24 and 46% are in 46–52. Participants were dominated by females with a percentage ratio of 61.9% compared to 38.1%.

Participants' educational background percentage ratio are 61.9% graduated, 25.6% master graduated, and 12.6% doctorate degree holders. There were one ninety seven participants from Sindh (36.5%), Azad Kashmir (8.7%), and Punjab (54.8%). Religion background data showed that 93.5% participants are Muslims and 6.5% are non-Muslims. This research also recorded income source of participants with the percentage ratio of 34.4% for self-earners and 62.6% for sponsored participants. Other demographic data are presented in Table 1.

Reliability and Descriptive Analysis

The simple descriptive statistics of variables as resilience, hopelessness, and spirituality are presented in Table 2. The mean score for resilience was 126.5 (SD=25.6; range 70–175) 11.63 (SD=3.42; range=4–19) for hopelessness, and 72.8 (SD=17.09; range=34–94) for spirituality. The variable showed Cronbach's alpha (α) with a strong range, 0.91 for resilience; 0.74 for hopelessness; 0.85 for spirituality. Hopelessness scale (BHS) have 25 items with possible range of 25–175, resilience

scale with 20 items with the possible range of 0–20, and spirituality have 16 items with possible range of 16–94.

Correlation Analysis

The correlations among resilience, hopelessness, and spirituality are presented in Table 3. Resilience and hopelessness were found to be highly related to spirituality. Resilience was positively correlated with spirituality ($r = 0.72$; $p < 0.01$) and negatively correlated with hopelessness ($r = -0.76$; $p < 0.0$). Spirituality had the highest positive correlation coefficient with resilience, but negatively correlated with hopelessness ($r = -0.78$; $p < 0.01$).

The Mediating Effect of Spirituality on the Relation between Resilience and Hopelessness

The mediating effect of spirituality on hopelessness and resilience shown in Table 4.1 and the results also indicated that spirituality can perform a partial mediator role between resilience and hopelessness (as shown in Table 4.2). In the first step, hopelessness (IV) was regressed on resilience ($b = -5.9$; $p < 0.000$). It showed that hopelessness have a direct strong negative effect on resilience (DV) (-5.9) and it involved regressing spirituality on the independent variable (hopelessness) (-1.7) as shown Table 4.1. Spirituality significantly was regressed on resilience ($b = -1.7$; $p < 0.000$), which represented that spirituality has an indirect effect on the dependent variable (resilience) through independent variable that was hopelessness and indirect

effect become less (-1.7) because of the mediator (spirituality). It strongly represents that spirituality plays an effective mediator to overcome the hopelessness. Spirituality significantly was regressed on resilience and hopelessness by Hayes model 4 ($b = 7.6$) $R^2 = 0.61$, which predict 61% of combine effect of spirituality on resilience and hopelessness with the variance ($F = 7.1$; $p < .000$).

Two-step regression showed that it had a significant mediating role which represented in Table 4.2, which also showed that spirituality plays as a mediator role between resilience and hopelessness. Frequency (F) of hopelessness and spirituality is -12.3) with $p < 0.000^*$ and coefficient of -3.9 which showed that those whose spirituality is low will have higher hopelessness. Hopelessness and resilience with coefficient of -0.46, $p < 0.000^*$, and frequency of -17.1 represent that hopelessness can play a vital role in less the resilience level. Addition with mediator (spirituality) ($F=7.1$), $p < 0.000^*$ represents strong existence as mediator. Results of ($R^2=0.61$) also showed that spirituality had strong

mediating effect.

Table 1. Frequency (F) Table for Demographic Variables

Variables	F	%
Gender		
Male	206	38.10%
Female	334	61.90%
Age		
18–24	353	65.40%
25–31	88	16.30%
32–38	59	10.90%
39–45	35	6.50%
46–52	2	0.40%
53–60	3	0.60%
Education Background		
Graduation	334	61.90%
Masters	138	25.60%
Doctorate	68	12.60%
Income of respondent		
Self	202	37.40%
Sponsored	338	62.60%
Province		
Punjab	296	54.80%
Sindh	197	36.50%
AJK	47	8.70%
Religion of respondent		
Muslim	505	93.5%
Non-Muslim	35	6.50%

Table 2. Reliability and Descriptive Analysis

Scale	Number of items	Possible Range of Scores	Actual Range of Scores	Mean±SD	Cronbach's Alpha Spirituality
16	16–94	34–94	72.8±17.0	0,85 Hopelessness	20
0–20	04–19	11.6±3.4	0,74 Resilience	25	25–175
70–175	126,3±25.6	0,91			

Table 3. Correlation between Resilience, Hopelessness, and Spirituality

	1	2	3
Resilience	1	-0,76**	0.72**
BHS		1	-0.78**
DSES			1

Notes:

** Correlation shows significant at the 0.01 level $p < 0.01$ (2-tailed)

Daily Spiritual Experience Scale (DSES), Beck Hopelessness Scale (BHS)

Tabel 4.1 Mediating Effects of Spirituality between Resilience and Hopelessness

Effects of spirituality between resilience and hopelessness			
Effect	B	CI 95%	
		Upper	Lower
Total	-7.6**	6.8	4.5
Direct	-5.9**	-4.5	-3.3
Indirect	-1.7**	-2.3	-1.2

Note: $p < 0.05$; * $p < 0.01$; ** $p < 0.000$

a nearby association with God as the affectionate authority supporting persons in the difficulty. So, spiritual persons are less probable to practice sense of hopelessness even in the hectic circumstances (Abdollahi et al., 2015). Researchers recommend that spirituality is a defensive factor from suicidal thoughts and negative thinking. Moreover, the mediation effect of spirituality in the relation of hopelessness and resilience is similar that reported in a study that there is a negative association

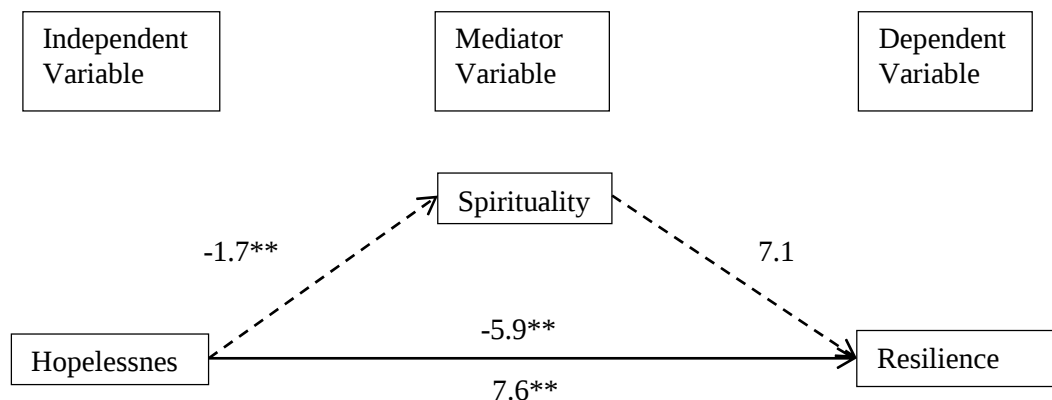
Table 4.2 Mediating Role of Spirituality between Resilience and Hopelessness

Variables	Spirituality			Resilience		
	Coefficient	F	P-value	Coefficient	F	P-value
Hopelessness	-3.9	-12.3	.000	-0.46	-17.1	0.000
Spirituality				4.3	7.1	0.000
R ² (DSES)= 0.61						

DISCUSSION

In supposition, despite the restrictions noted above, this is the first study to explore these variables and their role, spirituality in the relationship between resilience and hopelessness among Pakistanis in COVID-19. The results suggest that spirituality mediates between resilience and hopelessness and positive commitment to resilience is explained by $r = 0.72\%$ of variability. Empirical conclusions displayed that spirituality has effect on the behaviors in stressful situations. Consequently, spirituality also delivered a significant defensive influence against hopelessness and depression as results also shown strong negative correlation between them ($r = -0.78$). According to religious understanding, spirituality offers

between spirituality and hopelessness (Mystakidou et al., 2007). Persons with a nearer perceived association with The God practice greater psychological wellbeing and have low levels of mental pressure. Spirituality is established as one of the elements that add to growth of resilience. Depression and hopelessness have inverse relation with resilience (Ozawa et al., 2017). The true sources of spirituality should be evaluated and valued before and during every delicate issue. Precisely, counseling is the one of the imperative systems for everyone to fight with hopelessness. Hence, resilience also should be equipped to fight in related strategies. A cross-sectional research revealed the direct relation of spirituality and resilience in sufferers



Picture 1. Mediator Model of Spirituality

Notes: The first phase represents spirituality regressed on the hopelessness (-1.7), the second stage represents resilience on hopelessness (-5.9), and the third phase symbolizes spirituality regressed on hopelessness and resilience (7.6).

of psychotics and mania, along with in normal persons (Mizuno et al., 2016). The conclusions of the present investigation approve the studies who establish that persons who have an adjacent connection with the greater supremacy called God informed low levels of worry and sadness. Persons with spiritual orientation prone to think that the consequences will be auspicious and progressive (Cotton et al., 2009).

The presented data suggests that hopelessness can be diluted by the enhancement of resilient behaviors by the mediation of spirituality. As a final point, suitable strategies of spirituality should be delivered to persons in pandemic situations that should be helpful with hopelessness, seek effective support, and enhance their resilience to improve their mental health in chronic situations and later Increase their flexibility. Additional investigations and inquiries are essential in the context of spirituality to find out that whether spirituality plays an effective role

in treating other mental problems other than hopelessness and increases other optimal attitudes other than resilience.

Implications for Practice

Important suggestions can be drawn from this study for coping strategies and treatment plans. Initially, when there is a presence of hopelessness, spirituality can play a protective sheet and enhances the resilient attitude because the persons with spiritual thinking have more adaptability. The current results propose that increasing spirituality may decrease the possibility of hopelessness, and increases resilience among Pakistani general population in the tough global situation of coronavirus.

Strengths and Limitations

The main strong point of the present research is the assessment of the factor of spirituality as the mediator between hopelessness and resilience in the large general population of Pakistan in the tough

global situation of coronavirus. The results of this study highlight the share of spirituality as a strong correlate of resilience in the Pakistani population in the worldwide situation of the coronapandemic. The chief drawback of the present investigation is its requirement of online self-report questionnaires. It is suggested that forthcoming studies should use a proper testing conditions. Further studies can use experimental design to assess the correlations between resilience, spirituality and hopelessness. Upcoming research might increase the domain and can add new variables to the projected model to enhance the effect of spirituality on other variables.

CONCLUSION

The problem of modernity comes from the meaninglessness of life, it is the problem of nihilism, denial of values, and these problems exist in many Muslim countries and the West too. Spirituality must be respected and valuable as an important component of sensitive situations and psychological issues for the improvement of resilience and also overcome hopelessness of survivors. As the results suggest, the negative influence of hopelessness has a strong effect on resilience, but mediator spirituality plays an important part to control the negativity and enhance resiliencies during the outbreaks such as pandemics. Mental health professionals in psychology departments have also an important source of enhance resiliencies and spirituality to overcome hopelessness that enhances

psychological issues.

ETHICAL CONSIDERATIONS

All ethical standards took into account during the study. Participants provided online consent form before the procedure.

CONFLICT OF INTEREST

The declaration was given by all the authors that there is no any conflict of interest from their side.

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