

## The Relationship Between Intrinsic Religiosity and Resilience Among Tunisian Female University Students

*Salma Derouiche-El Kamel*  
*Yassamine Hentati*

University of Tunis, Faculty of Humanities and Social Sciences,  
Department of Psychology, Tunis, Tunisia

Doi: 10.19044/esipreprint.1.2025.p361

Approved: 25 January 2025  
Posted: 27 January 2025

Copyright 2025 Author(s)  
Under Creative Commons CC-BY 4.0  
OPEN ACCESS

*Cite As:*

Derouiche-El Kamel S. & Hentati Y. (2025). *The Relationship Between Intrinsic Religiosity and Resilience Among Tunisian Female University Students*. ESI Preprints.  
<https://doi.org/10.19044/esipreprint.1.2025.p361>

### Abstract

This study aimed to explore the relatively under-examined relationship between intrinsic religiosity and resilience among Tunisian female university students. A sample of 244 students participated by completing two scales: the "Arabic Scale of Intrinsic Religiosity" (Abdel-Khalek, 2017) and "The Tunisian Resilience Scale" (Derouiche-El Kamel & Hentati, 2021). Data analysis involved correlation and linear regression methods. A significant positive correlation ( $p < 0.000$ ) emerged between the two variables among the students. Moreover, intrinsic religiosity was found to predict resilience scores ( $p < 0.000$ ). These findings suggest a meaningful association between intrinsic religiosity and resilience among Tunisian female students. The study implies that intrinsic religiosity could serve as a predictive factor for resilience, shedding light on its potential role in fostering resilience among this population.

**Keywords:** Intrinsic religiosity, resilience, Tunisia, female students

### Introduction

Coping with adversity can be facilitated by turning to religion and spirituality. A certain form of spirituality driven by religious beliefs, such as repeated references to God and faith in a supreme power held accountable for one's destiny, appears to enhance resilience in young adults dealing with

highly stressful circumstances (Abdel-Khalek & Tekke, 2019; Dolcos et al., 2021; Javanmard, 2013). They entrust their hardships to a “divine and supreme power” and hold firm faith in its guidance throughout their lifetimes. Consequently, they possess a hopeful outlook toward life and do not dread fate, potentially demonstrating a type of resilience.

Religiosity is often linked with spirituality as it encompasses spiritual elements that are significant in religious belief and practice. However, the opposite is not true as spirituality does not necessarily indicate religiosity. Koenig et al (2001) suggest that spirituality involves a personal quest to comprehend end-of-life concerns, their connotations and their connection with the sacred and transcendent. Puchalski and colleagues (2009) describe an element of human nature concerned with how people search for and articulate meaning and purpose in their lives, and how they connect with the present, themselves, others, nature and their surroundings. This quest for significance need not involve religious practices or the creation of religious groups (Koenig et al., 2001; Puchalski et al., 2009).

Religiosity, it refers to behaviours, feelings, thoughts, and experiences arising from the desire to identify, articulate, maintain, or transform one's relationship with a divine being or object, reality, or ultimate truth. Patterns of behaviour are defined and overt religious expression is encouraged by it (Hill et al., 2000). Thus, rituals and overt practices are significant aspects of religion's construction. Religious affiliations indicate membership to a community sharing the same beliefs and practices.

Allport (1963) differentiates between "mature" and "immature" religious orientations, which are now commonly referred to as "intrinsic" and "extrinsic" religious orientations, respectively. The principal characteristic of intrinsic religiosity, as initially proposed, involves practising religion sincerely and intentionally. Extrinsic religiosity, which involves using religion for instrumental purposes, particularly for the maintenance of social relationships, has been defined by Allport and Ross (1967). Intrinsic religiosity has consistently been perceived as more normative than Extrinsic religiosity according to research by Cohen et al. (2005). Numerous studies have indicated a positive correlation between intrinsic religiosity orientation and improved physical and mental well-being (Smith, Richards and Maglio, 2004; Masters et al., 2005; Salsman and Carlson, 2005).

Initially, the concept of psychological resilience was primarily intrinsic, with individual characteristics enabling a person to overcome difficulties (Matsen, 2001). Richardson (2002) referred to this as the first wave of resilience. In recent times, there has been an expansion of studies with regard to community resilience, which considers the influence of an individual's social environment on resilience. Religion and spirituality have been found to contribute to the enhancement of community resilience

(Frounfelker et al., 2020).

Currently, resilience is defined as the capability to deal with, adjust, and grow amidst adversity in a manner that safeguards one's health, well-being, and quality of life (Connor & Davison, 2003; Luthar et al., 2000; Manning & Miles, 2018; Rutter, 2012; Tay & Lim, 2020).

It is also defined as successful adaptation and healing after a disruptive life event, as well as psychological growth after a significant source of stress (Luthar et al., 2000; Manciaux, 2001; Rutten et al., 2013). It encompasses quickly bouncing back from illness and setbacks and requires adapting to significant stressors, such as tragedy, trauma, and adversity.

To sum up, the scientific literature approaches resilience either as a dynamic process influenced by life events and challenges or as an individual personality trait. While it is tempting to adopt a binary approach to determining whether resilience is present or absent, the study of resilience remains complex. Indeed, according to Helmreich et al. (2017), resilience is determined by many factors such as coping skills, self-efficacy, optimism, social support, flexibility, positive emotions, self-esteem and confidence, meaning and purpose in life and religious and spiritual beliefs.

## **Overview of Study**

The main goal of this investigation is to explore the correlation and the linear relationship between intrinsic religiosity and resilience amongst a group of Tunisian female students who are of a young age. In this study, intrinsic religiosity is defined as an orientation in which individuals are wholeheartedly devoted to their religious beliefs, which provide significance and enrichment to their lives. In contrast, extrinsic religiosity is described as an orientation in which individuals use religion to fulfill personal or social needs (Allport & Ross, 1967; Kirkpatrick, & Hood, 1990).

## **Methods**

### **Participants and Procedure**

Analysis was conducted on data collected from 244 female students aged between 19 and 26 years ( $M = 20.75$ ,  $SD = 1.93$ ). This study received ethical approval from the Scientific Committee of the Laboratory of Clinical Psychology: Intersubjectivity and Culture. Participants were recruited voluntarily from the University of Tunis and the University of Jendouba, and all provided informed consent before data collection. The research relies solely on the secondary use of anonymized data, with no possibility of identifying participants, even after data linkage.

Our sample size is considered adequate and able to generate reliable estimates of the connections between variables in our investigation. Moreover, studies employing comparable techniques have adopted larger or

similar sample sizes (Dolcos et al., 2021; Llewellyn et al., 2013; Luberto et al., 2014). It is important to note that focusing exclusively on a female population was not an intentional methodological choice, but rather a result of field constraints, as the majority of students at the targeted universities were female. Furthermore, the literature review indicated a potential gender effect on resilience (Erdogan et al., 2015; Lowe et al., 2022; Yalcin-Siedentopf et al., 2021), reinforcing the decision to exclude male students from the study.

### **Self-report measures**

The Tunisian Resilience Scale (TRS), devised by Derouiche-El Kamel and Hentati (2021) evaluates two personal traits that mirror the degree of resilience, notably “positive adaptation” amid significant hardship and the “ability to recuperate” from it. The scale considers a resilience model that incorporates two dimensions present in nearly all explanations of resilience (Connor & Davidson, 2003; Lee & Cranford, 2008; Leipold & Greve, 2009; Smith et al., 2010). Ten statements were introduced as items, each rated on a five-point Likert scale (1 = not at all true to 5 = almost always true). The collective score on the scale ranged from 10 to 50, with larger scores representing increased resilience.

The Arabic Scale of Intrinsic Religiosity (ASIR), devised by Abdel-Khalek (2017), evaluates intrinsic religiosity without bias towards any particular religion or belief system. The scale comprises 15 statements, each rated on a five-point intensity scale (ranging from 1, indicating 'strongly disagree', to 5, indicating 'strongly agree'). The total score can range from 15 to 75, with higher scores indicating greater religiosity.

### **Analysis**

The data followed a normal distribution. Bivariate relationships with the target variables were evaluated using Pearson's correlation test. The assumptions of the linear regression model were tested, and coefficients were estimated with ordinary least squares (OLS). The significance of the coefficients was assessed using the Student's t-test, and model fit was evaluated with the  $R^2$  coefficient and residual analysis. All statistical analyses were performed using SPSS for Windows (IBM, version 20).

The validity and reliability of the TRS were assessed in a prior study conducted on a Tunisian population by Derouiche-El Kamel and Hentati (2021). Similarly, Abdel-Khalek (2017) examined the reliability and validity of the ASIR scale.

## Results

In our study, the female participants' ages ranged from 19 to 26 years, with a mean age of 20.75 years and a standard deviation of approximately 1.93 years. The mean score on the Resilience scale among the participants was 34.81, with a standard deviation of 6.17. The information was presented logically with causal connections between statements. The mean score on the Religiosity scale was 54.68, with a standard deviation of 13.73 (see Table 1).

**Table 1:** Descriptive findings of the research sample

Variable	Number	Minimum	Maximum	Mean	S.D
Age	244	19	26	20.75	1.93
Religiosity score	244	15	75	54.68	13.73
Resilience score	244	16	48	34.81	6.17

To examine the association between resilience and religiosity among all students, we conducted a correlation. The purpose of the analysis was to ascertain the relationship between the religiosity variable and the resilience variable (refer to Table 2). Despite a small positive correlation coefficient, the result was statistically significant ( $p < 0.000$ ).

**Table 2:** Pearson's correlation coefficient between religious beliefs and resilience

Variables	1	2
Religiosity	–	0.234***
Resilience	0.234***	–

\*\*\* $p < 0.000$

The purpose of conducting a linear regression analysis was to evaluate the predictability of the religiosity variable on the resilience variable (refer to Table 3). The results in Table 3 indicate that a correlation coefficient of  $R = 0.234$  exists between these two variables. The coefficient of determination, signifying the proportion of variability in the resilience variable explained by regression, is roughly  $R^2 = 0.055$ . In other words, our sample shows that intrinsic religiosity scores account for only 5.5% of the variance in the resilience score ( $R^2 = 0.055$ ). Therefore, religiosity has a comparatively limited impact on resilience. The adjusted coefficient of determination stands at around 0.051. This slight difference from the coefficient of determination may be due to other factors or the sample size. Therefore, religiosity only partly explains the variation in resilience, as other unmeasured variables or contextual factors may have a more significant impact on explaining such variation.

**Table 3:** Summary of linear regression analysis model

Model	R	R <sup>2</sup>	Adjusted R <sup>2</sup>	Estimated standard error
1	0.234	0.055	0.051	6.011

Table 4 shows that there is a linear correlation between the variables, as confirmed by the regression analysis. The results of the variance analysis (see Table 4) support the hypothesis of a linear association between the variables, with  $F_{1 \text{ \& } 242} = 14.078$  and  $p < 0.000$ .

The standardized and non-standardised regression coefficients reveal a substantial correlation between resilience and intrinsic religiosity ( $\beta = 0.234$ ) at the 99% confidence level (see Table 5). The findings indicate that intrinsic religiosity is a reliable predictor of resilience.

Regarding the significance test, since the test set at zero produces a value greater than 0.05, the hypothesis of the coefficient being equal to zero should not be discarded and should be excluded from the regression equation. As a result, the equation for the regression in this study is  $y = 0.105x$ , which means that, while keeping all other variables constant, a unit change in intrinsic religiosity will lead to a 0.234 shift in student resilience ( $\beta = 0.234$ ).

**Table 4:** Regression variance analysis of the predictor variable of religiosity and dependant variable of resilience

Model	Sum of squares	d.f	Mean of Squares	F	Sig.
<b>Regression</b>	508.637	1	508.637	14.078	.000
<b>Remaining</b>	8743.309	242	36.129		
<b>Total</b>	9251.947	243			

**Table 5:** Summary of the resultants of standardized and non-standardized regression of resilience variable prediction by the predictor variable of religiosity

Model	A	$\beta$	T	Sig.
<b>Fixed value</b>	29.045		18.343	0.000
<b>Religiosity</b>	.105	.234	3.752	

Note. Dependent variable: resilience

## Discussion

The current investigation reveals a feeble but noteworthy association between intrinsic religiosity and resilience. This suggests that intrinsic religiosity contributes to an individual's resilience; however, it is not the only predictor. The study focuses on religiosity as a value internalized by individuals, without ethnocentrism or dogmatism (Allport, 1969, 1971).

Religions often promote the idea of divine justice and an afterlife, with many world faiths—whether monotheistic or not—offering the promise of redemption and a second chance in the afterlife. Such beliefs resonate strongly among people worldwide, especially those living in poverty and hardship. A key teaching in the Qur'an emphasizes that the soul returns to its

Creator after death, promising abundant rewards for the most steadfast and courageous believers. As Allah says in the Qur'an: 'O ye My servants who believe, fear your Lord. It is good for those who do good in this life. And Allah's earth is spacious. Verily the steadfast will have their reward without measure (Sher Ali, 2021, Qur'an 39:11). These teachings can offer comfort and alleviate feelings of injustice, fostering resilience in the face of adversity.

Based on the findings of this study, religiosity is identified as a prognostic factor for resilience. This is in line with prior academic research which has linked religiosity to several factors, including mental health (Koenig, 2007, 2009; Mosqueiro et al., 2015; Smith et al., 2003), happiness, and well-being (Francis et al., 2003; Francis et al., 2016; French & Joseph, 1999; Myers & Diener, 1995; Rusman et al., 2023). Daclos et al. (2021) conducted a study that indicated that religious adaptation protects against emotional distress and promotes resilience.

Nevertheless, outcomes from research into the relationship between religiosity and resilience can be inconsistent. Schwalm et al. (2022) conducted a thorough review of 2468 articles, including 34 observational studies, investigating the association between Spirituality/Religiosity (S/R) and resilience. The analysis revealed a moderate positive correlation between S/R and resilience. However, some studies did not find any evidence of a positive relationship between religious or spiritual practices and resilience (Burnett & Helm, 2013; Connor et al., 2003). Furthermore, a study undertaken on a sample of 185 Singaporean pupils during the Covid-19 pandemic has highlighted the absence of a link between religiosity and resilience, whilst revealing a distinct affirmative correlation between religiosity and well-being (Gan et al., 2023).

The study highlights a statistically significant but weak correlation between intrinsic religiosity and resilience, indicating the fluctuation in the link between these factors. Moreover, the linear regression analysis indicates that while religiosity may influence resilience, other significant factors also contribute to shaping resilience levels. Thus, religiosity seems to have a defensive role in easing physical and mental distress, aligned with Koenig's (2009) hypothesis. The influence of religiosity and spirituality varies based on an individual's interpretation, which is shaped by their cultural background. Tunisia's rich and diverse heritage, blending Arab, African, and Mediterranean influences and shaped by historical interactions with both Eastern and Western traditions, offers a distinctive perspective on religiosity. Unlike many other Muslim nations in the Middle East and Gulf regions, Tunisian religiosity is characterized by a pluralistic belief system rather than religious fundamentalism.

## Conclusion

This study contributes to the existing body of literature by exploring the relationship between resilience and intrinsic religiosity among Tunisian female students from North African and Arab Muslim backgrounds, addressing a significant research gap on the African continent (Schwalm et al., 2022).

Nevertheless, it is important to acknowledge the limitations of our data in interpreting the study's findings. Notably, the absence of data on male students warrants attention, as our sample was limited to those studying psychology and education sciences fields that traditionally attract a higher proportion of women.

**Acknowledgments:** The authors are very grateful to the student volunteers from the University of Tunis and the University of Jendouba.

**Declaration of conflicting interests:** The authors declare that there are no potential conflicts of interest regarding the research, authorship, and publication of this article.

**Funding:** The authors received no financial support for the research, authorship, and/or publication of this article.

**Data sharing statement:** The current article is accompanied by the relevant raw data generated during and/or analysed during the study, including files detailing the analyses and either the complete database or other relevant raw data. These files are available in the Figshare repository and accessible as Supplemental Material. Ethics approval, participant permissions, and all other relevant approvals were granted for this data sharing.

## References:

1. Abdel-Khalek, A. M. (2017). The construction and validation of the Arabic Scale of Intrinsic Religiosity (ASIR). *Psychology and Behavioral Science: International Journal*, 4(4), 555644. <https://doi.org/10.19080/PBSIJ.2017.04.555644>
2. Abdel-Khalek, A. M., & Tekke, M. (2019). The association between religiosity, well-being, and mental health among college students from Malaysia. *Revista Mexicana de Psicología*, 36(1), 5-16.
3. Allport, G. W. (1963). Behavioral Science, Religion, and Mental Health. *Journal of Religion and Health*, 2(3), 187-197. <http://dx.doi.org/10.1007/BF01533333>
4. Allport, G. W., & Ross, J. M. (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, 5(4),

- 432-443. <http://dx.doi.org/10.1037/h0021212>
5. Allport, G. W. (1969). *The Person in Psychology: Selected Essays* (2nd ed.). Beacon Press.
  6. Allport, G. W. (1971). *Personality: A Psychological Interpretation* (3rd ed.). Constable.
  7. Burnett, H. J., Jr, & Helm, H. W., Jr (2013). Relationship between posttraumatic stress disorder, resilience, and religious orientation and practices among university student earthquake survivors in Haiti. *International journal of emergency mental health*, 15(2), 97–104.
  8. Connor, K. M., & Davidson, J. R. T. (2003). Development of a new Resilience scale: The Connor-Davidson Resilience scale (CD-RISC). *Depression and Anxiety*, 18(2), 76–82. <https://doi.org/10.1002/da.10113>
  9. Cohen, A. B., Hall, D. E., Koenig, H. G., & Meador, K. G. (2005). Social Versus Individual Motivation: Implications for Normative Definitions of Religious Orientation. *Personality and Social Psychology Review*, 9(1), 48–61. [https://doi.org/10.1207/s15327957pspr0901\\_4](https://doi.org/10.1207/s15327957pspr0901_4)
  10. Connor, K. M., Davidson, J. R., & Lee, L. C. (2003). Spirituality, resilience, and anger in survivors of violent trauma: a community survey. *Journal of traumatic stress*, 16(5), 487–494. <https://doi.org/10.1023/A:1025762512279>
  11. Derouiche-El Kamel S and Hentati Y (2021) Portrait of resilience among Tunisians locked down in times of COVID-19. *Traumatology* 27(1): 70–77.
  12. Dolcos, F., Hohl, K., Hu, Y., & Dolcos, S. (2021). Religiosity and Resilience: Cognitive Reappraisal and Coping Self-Efficacy Mediate the Link between Religious Coping and Well-Being. *Journal of religion and health*, 60(4), 2892–2905. <https://doi.org/10.1007/s10943-020-01160-y>
  13. Erdogan, E., Ozdogan, O., & Erdogan, M. (2015). University Students' Resilience Level: The Effect of Gender and Faculty. *Procedia-Social and Behavioral Sciences*, 186, 1262-1267. <https://doi.org/10.1016/j.sbspro.2015.04.047>
  14. Francis, L. J., Robbins, M., & White, A. (2003). Correlation between religion and happiness: A replication. *Psychological Reports*, 92(1), 51-52. <https://doi.org/10.2466/pr0.2003.92.1.51>
  15. Francis, L. J., Tekke, M., & Robbins, M. (2016). The psychometric properties of the Sahin-Francis Scale of Attitude towards Islam revised among Sunni students in Malaysia. *Mental Health, Religion & Culture*, 19(5), 433-439. <https://doi.org/10.1080/13674676.2016.1193480>

16. French, S., & Joseph, S. (1999). Religiousness and its association with happiness, purpose in life, and self-actualisation. *Mental Health, Religion & Culture*, 2(2), 117-120. <https://doi.org/10.1080/13674679908406340>
17. Frounfelker, R. L., Tahir, S., Abdirahman, A., & Betancourt, T. S. (2020). Stronger together: Community resilience and Somali Bantu refugees. *Cultural Diversity and Ethnic Minority Psychology*, 26(1), 22–31. <https://doi.org/10.1037/cdp0000286>
18. Gan, S. K., Wong, S. W., & Jiao, P. D. (2023). Religiosity, Theism, Perceived Social Support, Resilience, and Well-Being of University Undergraduate Students in Singapore during the COVID-19 Pandemic. *International journal of environmental research and public health*, 20(4), 3620. <https://doi.org/10.3390/ijerph20043620>
19. Helmreich, I., Kunzler, A., Chmitorz, A., König, J., Binder, H., Wessa, M., & Lieb, K. (2017). Psychological interventions for resilience enhancement in adults. *Cochrane Database of Systematic Reviews*, 2017 (2), 1–43. <https://doi.org/10.1002/14651858.CD012527>
20. Hill, P. C., Pargament, K. I., Hood, R. W., Jr., McCullough, M. E., Swyers, J. P., Larson, D. B., & Zinnbauer, B. J. (2000). Conceptualizing religion and spirituality: Points of commonality, points of departure. *Journal for the Theory of Social Behaviour*, 30(1), 51–77. <https://doi.org/10.1111/1468-5914.00119>
21. Javanmard, G. H. (2013). Religious beliefs and resilience in academic students. *Procedia - Social and Behavioral Sciences*, 84, 744–748. <https://doi.org/10.1016/j.sbspro.2013.06.638>
22. Kirkpatrick, L. A., & Hood, R. W. (1990). Intrinsic-extrinsic religious orientation: The boon or bane of contemporary psychology of religion? *Journal for the Scientific Study of Religion*, 29(4), 442-462. <http://dx.doi.org/10.2307/1387311>
23. Koenig, H. G., McCullough, M., & Larson, D. B. (2001). *Handbook of Religion and Health*. New York: Oxford University Press. <http://dx.doi.org/10.1093/acprof:oso/9780195118667.001.0001>
24. Koenig, H. G. (2007). Religion and remission of depression in medical inpatients with heart failure/pulmonary disease. *The Journal of nervous and mental disease*, 195(5), 389–395. <https://doi.org/10.1097/NMD.0b013e31802f58e3>
25. Koenig, H. G. (2009). Research on religion, spirituality, and mental health: a review. *Canadian journal of psychiatry. Revue canadienne de psychiatrie*, 54(5), 283–291. <https://doi.org/10.1177/070674370905400502>
26. Lowe, S. R., Hennein, R., Feingold, J. H., Peccoralo, L. A., Ripp, J.

- A., Mazure, C. M., & Pietrzak, R. H. (2021). Are Women Less Psychologically Resilient Than Men? Background Stressors Underlying Gender Differences in Reports of Stress-Related Psychological Sequelae. *The Journal of clinical psychiatry*, 83(1), 21br14098. <https://doi.org/10.4088/JCP.21br14098>
27. Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: a critical evaluation and guidelines for future work. *Child development*, 71(3), 543-562. <https://doi.org/10.1111/1467-8624.00164>
28. Manciaux, M. (2001). La résilience Un regard qui fait vivre. *Études*, 395(10), 321-330. <https://doi.org/10.3917/etu.954.0321>.
29. Manning, L. K., & Miles, A. (2018). Examining the Effects of Religious Attendance on Resilience for Older Adults. *Journal of Religion and Health*, 57(1), 191-208. <https://doi.org/10.1007/s10943-017-0438-5>
30. Masten, A. S. (2001). Ordinary magic. Resilience processes in development. *The American psychologist*, 56(3), 227–238. <https://doi.org/10.1037//0003-066x.56.3.227>
31. Masters, K. S., Lensegrav-Benson, T. L., Kircher, J. C., & Hill, R. D. (2005). Effects of Religious Orientation and Gender on Cardiovascular Reactivity Among Older Adults. *Research on Aging*, 27(2), 221-240. <https://doi.org/10.1177/0164027504270678>
32. Mosqueiro, B. P., da Rocha, N. S., & Fleck, M. P. (2015). Intrinsic religiosity, resilience, quality of life, and suicide risk in depressed inpatients. *Journal of affective disorders*, 179, 128–133. <https://doi.org/10.1016/j.jad.2015.03.022>
33. Myers, D. G., & Diener, E. (1995). Who is happy? *Psychological Science*, 6(1), 10-19. <https://doi.org/10.1111/j.1467-9280.1995.tb00298.x>
34. Peres, J. F., Moreira-Almeida, A., Nasello, A. G., & Koenig, H. G. (2007). Spirituality and resilience in trauma victims. *Journal of Religion and Health*, 46(3), 343–350. <https://doi.org/10.1590/S0101-60832007000700017>
35. Puchalski, C., Ferrell, B., Virani, R., Otis-Green, S., Baird, P., Bull, J., Chochinov, H., Handzo, G., Nelson-Becker, H., Prince-Paul, M., Pugliese, K., & Sulmasy, D. (2009). Improving the quality of spiritual care as a dimension of palliative care: the report of the Consensus Conference. *Journal of palliative medicine*, 12(10), 885–904. <https://doi.org/10.1089/jpm.2009.0142>
36. Richardson, G. E. (2002). The metatheory of resilience and resiliency. *Journal of clinical psychology*, 58(3), 307–321. <https://doi.org/10.1002/jclp.10020>

37. Rusman, A. A., Zaharim, N. M., & Hashim, I. H. M. (2022). Examining the relationship between religiosity and happiness in Medan, Indonesia: The mediating role of self-control, self-regulation, and life satisfaction. *Asian Social Work and Policy Review*, 17(1), 27–38. <https://doi.org/10.1111/aswp.12267>
38. Rutten, B.P., Hammels, C., Geschwind, N., Menne-Lothmann, C., Pishva, E., Schruers, K., Van Den Hve, D., Kenis, G., Van Os, J. & Wichers, M. (2013). Resilience in mental health: linking psychological and neurobiological perspectives. *Acta Psychiatrica Scandinavica*, 128(1), 3-20. <https://doi.org/10.1111/acps.12095>
39. Rutter, M. (2012). Resilience as a Dynamics Concept. *Development and Psychopathology*, 24(2), 335-344. <http://dx.doi.org/10.1017/S0954579412000028>
40. Salsman, J. M., & Carlson, C. R. (2005). Religious Orientation, Mature Faith, and Psychological Distress: Elements of Positive and Negative Associations. *Journal for the Scientific Study of Religion*, 44(2), 201–209. <https://doi.org/10.1111/j.1468-5906.2005.00276.x>
41. Schwalm, F. D., Zandavalli, R. B., de Castro Filho, E. D., & Lucchetti, G. (2022). Is there a relationship between spirituality/religiosity and resilience? A systematic review and meta-analysis of observational studies. *Journal of health psychology*, 27(5), 1218–1232. <https://doi.org/10.1177/1359105320984537>
42. Sher Ali, M. (Trans.). (2021). *The Holy Qur'an*. Islam International Publications Limited. Retrieved from <https://www.alislam.org/quran/view/?region=E2&CR=&page=675>
43. Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: evidence for a main effect and the moderating influence of stressful life events. *Psychological bulletin*, 129(4), 614–636. <https://doi.org/10.1037/0033-2909.129.4.614>
44. Smith, M. H., Richards, P. S., & Maglio, C. J. (2004). Examining the Relationship between Religious Orientation and Eating Disturbances. *Eating Behaviors*, 5(2), 171-180. [http://dx.doi.org/10.1016/S1471-0153\(03\)00064-3](http://dx.doi.org/10.1016/S1471-0153(03)00064-3)
45. Tay, P., & Lim, K. K. (2020). Psychological Resilience as an Emergent Characteristic for Well-Being: A Pragmatic View. *Gerontology*, 66(5), 476–483. <https://doi.org/10.1159/000509210>
46. Yalcin-Siedentopf, N., Pichler, T., Welte, A. S., Hoertnagl, C. M., Klasen, C. C., Kemmler, G., Siedentopf, C. M., & Hofer, A. (2021). Sex matters: stress perception and the relevance of resilience and perceived social support in emerging adults. *Archives of women's mental health*, 24(3), 403–411. <https://doi.org/10.1007/s00737-020-01076-2>