Religiousity of Rural Muslim Women after Covid-19

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Abstract

This study aims to gain women’s perceptions about Corona or COVID-19 and the factors building their perceptions, as well as its influence on their religiosity after pandemic. This study is a qualitative research. The informants of this study were Muslim women in Ngembal Kulon Village who were purposively selected based on their diverse educational and professional backgrounds. Observation and interview were used to collect the data. After all data were confirmed to be correct through triangulation technique, the data were analyzed through data reduction, data classification, data display, and conclusion or verification. The results show that Muslim women in Ngembal Kulon understand Corona differently. Some of them understand it as a medical fact, as a theological fact, and as a political fact. These differences were caused by their respective pre-structures, namely the level and type of education, personal experience, sources of obtained information, and the environment. Then, it caused variousity to their personal responses towards COVID-19, responding to health protocols and vaccines. After pandemic, they actually felt an increase in religiosity: always maintaining health, obeying the government, and increasing spirituality.

Keywords: After COVID-19, Positive Impact, Rural Muslim Women, Religiosity
A. Introduction

COVID-19 or Corona has become a frequently discussed theme for at least the last two years. The consequences of this outbreak are extraordinary. This incident caused more than 160 thousands of people died in Indonesia till the end of 2022. This number placed Indonesia in the second place with the highest death rate in Asia (https://databoks.katadata.co.id/). People suffering from mental disorders and suicidal tendencies were also increasing. A survey found that 1 of 5 people in Indonesia in the age range of 15 to 29 years thought about ending their lives in 5 beginning months of the outbreak and further data from a different survey found that 2 out of 5 people thought about suicide in 1 year after the outbreak (https://sehatnegeriku.kemkes.go.id/). There was a recession in the economy which caused acute deflation (https://www.djkn.kemenkeu.go.id/). There were also disruptions in various social activities, in education, in religion as a consequence of social distancing which is the main part of the COVID-19 prevention policy. The magnitude of the impact caused by Corona had become a subject of constant discussion among society, including women, even though their voices were not necessarily heard.

Discussions about Corona by the public during and after the pandemic were carried out in various encounter spaces, both directly by word of mouth and through digital media, both in the academic world and in daily conversations, in cities and villages. In general, several studies had discussed it in various written themes, connecting it to physical and mental health (Setyaningrum and Yanuarita, 2020; Levani, et al, 2021; Nasrullah and Sulaiman, 2021: Dharmawan and Argaheni, 2021; Arinda and Herdayanti, 2021; Athena, et al, 2020), to education (Suhendro, 2020; Ansori and Sari, 2020; Mubin, 2021; Pratomo and Gumantan, 2021; Salsabila, et al, 2020), to economy (Sumarni, 2020; Amiruddin and Sabiq, 2021; Fahrika and Roy, 2020; Indayani and Hartono, 2020), to law (Sukur, et al, 2020;
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Based on the wide variety of research on COVID-19, studies that specifically investigated women and Corona or COVID-19 both during and after have been no longer noticed. Research about it seems to be marginalized even though it is very important. So far, women, particularly, in the local context of Indonesian have proven to play a role in the continuity and resilience of family, in the fields of education, economics, health, and religion. Knowing women’s opinions toward Corona or COVID-19, recognizing the factors that cause them to think so, as well as its impact on their religiosity, especially after the outbreak, found significance in helping policy makers resolve the impact of COVID-19 in various areas of life. These problems become the starting point for the entire discussion of this study in order to fill the gap in the study of COVID-19 and women.

This study is a qualitative research. According to Sugiyono (2007:10), it was chosen as an effort to collect in-depth data from a number of informants on various unique and meaningful
social information. This study was carried out in Ngembal Kulon Village, one of 14 villages in Jati District, Kudus. This village is about 5 km from the downtown. Geographically, this village is strategically located, on the edge of the Pantura road, so even though it is rural, the population is heterogeneous, both in the terms of education and livelihood. Nevertheless, the character of rural society is still maintained, such as the tradition of greeting and shaking hands when meeting other residents, the tradition of mutual cooperation is still maintained when they have needs or having difficulties, and still emphasizes the aspect of religiosity above all else (Observations, 5-6 April 2020; 1-3 August 2022). The informants for this study were Muslim women who lived there and were selected purposively. Determination of the informants was based on volunteerism and consideration of ownership of unique and different information. There were nine women as informants with details of their names and identities below. For ethical reasons their names had been withheld.

Informant Identity

<table>
<thead>
<tr>
<th>NO</th>
<th>Name</th>
<th>Educational Background</th>
<th>Job</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MM</td>
<td>Nursing (Undergraduate)</td>
<td>Midwife</td>
</tr>
<tr>
<td>2</td>
<td>SA</td>
<td>Islamic Senior High School/Boarding</td>
<td>Religious figure</td>
</tr>
<tr>
<td>3</td>
<td>FA</td>
<td>Islamic Junior High School</td>
<td>Itinerant vegetable seller</td>
</tr>
<tr>
<td>4</td>
<td>TU</td>
<td>Vocational School Teacher Education/Teacher Education</td>
<td>Retired elementary school teacher</td>
</tr>
<tr>
<td>5</td>
<td>SU</td>
<td>Elementary School</td>
<td>Roof tile worker</td>
</tr>
<tr>
<td>6</td>
<td>CHA</td>
<td>Undergraduate</td>
<td>Housewife cigarette factory worker</td>
</tr>
<tr>
<td>7</td>
<td>LN</td>
<td>Senior High School</td>
<td></td>
</tr>
</tbody>
</table>

Table 1: Processed by the writers
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The data collection was carried out through observation and interview. The observation was carried out in a focused manner by looking at the attitudes and behavior of the informants, while interviews were conducted to obtain data about how they considered about Corona and how they responded to it. Data collection was conducted during the outbreak, in April 2020 and repeated after the outbreak, in August 2022. All obtained data was confirmed for its validity through triangulation. Triangulation is a technique of testing the validity of data from various data sources and data collection techniques to reduce the possibility of bias that occurs when collecting data. After that, the data was analyzed through interactive steps, starting from data reduction, data classification, data display, and conclusion or verification.

This study used Heidegger’s hermeneutical theory, response theory, and religiosity theory. Based on those theories, this study was conducted based on the argument that interpretations of Corona by rural Muslim women are various. The differences were caused by pre-structural factors that built their thinking. Their interpretation of Corona tended to vary their responses when facing Corona, to see the importance of health protocols and vaccines, and ultimately influenced their religiosity after the Corona outbreak ends.

B. Discussion

1. Women Interpret Corona and the Factors That Cause It

The activity of interpreting is the character of human life (Palmer, 1969:42). Therefore, it is impossible for humans to live without interpretation. Basically, interpreting is understanding the message of speech, writing, gesture, or other symbols created by someone called the author. Therefore, the results of one’s interpretation should be the same as the author intended, but in reality, this is not always the case. The results of someone’s interpretation are not completely the same and sometimes even
exceed the author’s message. Finally, a philosophical problem arises, whether interpretation is objective or subjective.

Based on data in the field, it showed that Muslim women in Ngembal Kulon Village interpreted Corona differently. Some stated Corona as a medical fact, some stated it as a theological fact, and some considered it as a political fact. Corona as a medical fact means that the existenced of Corona was associated with the results of medical research, as a disease and virus. Corona was as a theological fact because Corona and the conditions caused it were believed to be part of the will of the Almighty. Meanwhile, Corona was as a political fact that its existence was associated by human power. Various interpretations of Muslim women in Ngembal Kulon Village toward Corona based on the results of interviews are classified in the following table.

### Meaning of Corona

<table>
<thead>
<tr>
<th>Interpretation Category</th>
<th>Interview Result</th>
<th>Keyword</th>
<th>Informant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medic</td>
<td>Corona is the name of virus which causes infectious disease. Its transmission can be done via droplets or direct contact with infected people. People infected with this virus do not always show the same symptoms. In general, fever, cough, smell problems, and respiratory problems. The process is very fast, it can only take 4 to 7 days. For those with low body immunity, vulnerable age, having other congenital diseases can cause mortality</td>
<td>Virus</td>
<td>MM, Midwife, Undergraduate</td>
</tr>
</tbody>
</table>
Medic

Corona is the cause of COVID-19 disease. I’ve been reactive. At that time, I was checked at the factory.

Medic

Corona is a disease virus. This virus is very dangerous. I experienced it, making me cough and short of breath. Moreover, I have congenital asthma.

Medic

According to internet, Corona is the name of virus that causes COVID disease. During the Corona season, my body felt weak and I was coughing but I didn’t know whether I got Corona or not. I didn’t dare to go to the health center. I isolated myself at home, didn’t go out.

Teologic

This condition has been predestined by God

Politics

Corona is from the government, tomorrow when the government announces that it doesn’t exist, it will disappear.

Medic-Teologic

According to doctor in community health center (Posyandu), Corona is the name of a disease. Actually, the disease is a test and disaster from God for humans, so that they do not neglect Him.

Table 2: Processed by the writers based on interviews in 2020 and 2022
The results of the interview above show that the majority of Muslim women in Ngembal Kulon Village interpreted Corona as a medical fact, namely MM, LN, CHA, TU, SA. They stated that Corona is the name of a pathogenic virus that causes disease. This disease is contagious and dangerous for those whose immune system is low due to congenital diseases or due to age, as explained by MM, a midwife at a community of health center (Posyandu). This disease generally has symptoms of cough, fever, respiratory problems, but sometimes there is no symptom at all. Apart from being understood as a medical fact, others, namely SA and SU, stated that the existence of Corona cannot be separated from the work of God or as a theological fact. The disease caused by the Corona virus and the pandemic situation are His will, as a test and disaster so that human does not neglect Him. Beyond the medical and theological facts, there was an answer that writers say is unique. FA, an Itinerant vegetable seller, recognized whether Corona existed or not depended on the government. According to FA, the government had an important role in the Corona case. She stated that:

*Korona buatan pemerintah. Menurut saya, penyakit Korona sama dengan penyakit lainnya, cuma beritanya dibesar-besarkan* (Corona is made by Government. In my opinion, Corona disease was the same as other diseases, only the news was exaggerated) (Interview, 19 April 2020).

The interpretation of Corona by Muslim women in Ngembal Kulon Village produced various meanings as described above. The existence of various meanings shows the reality of interpretive subjectivity. This is because their interpretation of the reality of Corona cannot be controlled by anyone. Actually, their respective pre-structures or pre-understandings play a role in constructing interpreting as stated by Heidegger. The pre-structure or pre-understanding can be what had been seen before *(Vorsicht)*. *Vorsicht* is a point of view in seeing a certain
reality. This is usually influenced by education, what has been read, what has been heard, etc.; what was previously owned (Vorhabe) such as social and religious settings; and what has been captured previously (Vorgriff) namely certain concepts that have become integrated with the human mind (Poespoprodjo, 1987: 81; Sumaryono, 1999: 83 and 107).

Reality shows that the level and type of education, personal experience, sources of information obtained, and the environment had constructed the pre-structure of Muslim women in Ngembal Kulon Village in understanding Corona. Having higher education makes people more rational in understanding Corona. This is reflected in the answers of MM, LN, CHA, TU, SA who saw it from a scientific perspective, which recognize Corona as a virus that causes disease, especially for those with a medical science background like MM, her understanding of Corona from a medical perspective is more comprehensive. Meanwhile, those who have a religious education background relate the reality of Corona to the existence of God and her relationship with humans as His servants like SA. SA, apart from interpreting Corona as a disease, she also saw it as a form of disaster and a test from God so that humans as servants do not neglect Him. LN, CHA, and TU who had experienced this disease had strengthened their point of view that Corona is a medical fact, while LN, who works as a cigarette worker in PR Djarum, received information about COVID-19 from health counselor at her workplace (Interview, 21 April 2020). It is different from SU and FA. SU has lower education. She is also relatively no longer young. She worked as a laborer for a roof tile craftsman. Being compared to previous informants, she did not have much information about developments in the world around her. Access to information is very minimal for her. She does not own a television, nor is she an internet user. Her social relations are also limited. Every day, she is busy drying and tidying roof tiles. The important thing for her is to get money and be able to fulfill her living needs. She only
depends her life on The Creator. Therefore, it is not surprising that this concept shaped her reasoning when looking at Corona. For her, Corona and the pandemic had become God’s Will. Meanwhile, FA, a Itinerant vegetable seller, certainly had wider access to information. Every day she meets and communicates to many people from different backgrounds. She heard a lot and various information, including about Corona, but because her literacy skills were limited, she tended to be a good listener and received various information without filters. The simplicity of her reasoning because she only had a secondary level of education, especially since she, herself felt in good health, was one of the things that made her reason practically and politically. Corona for her was part of a government conspiracy.

2. Women Facing Corona, Health Protocols and Vaccines

Corona and the pandemic situation had been experienced by Indonesian and the world, regardless of gender, religion, and place of residence, including Muslim women in Ngembal Kulon. As being presented in the data above, they interpret Corona differently. Their diversity of interpretations led to a diversity of attitudes and behavior regarding how to deal with Corona and respond to health protocols and vaccines. An overview of their attitudes and behavior can be seen in the following two tables sequentially.

The first is the attitude and behavior of Muslim women in Ngembal Kulon facing Corona as in the following table.
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Facing Corona

<table>
<thead>
<tr>
<th>Attitude and behaviour category</th>
<th>Interview Result</th>
<th>Keyword</th>
<th>Informant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medic</td>
<td>I was once reactive when being checked at the factory. My body was fine, just my nose could not smell anything. I was furloughed and told to seek treatment but I was afraid of being isolated in Solo. I just stayed at home and every day drank water boiled with ginger, lemongrass and turmeric to get better. Thank God, finally I back to be health again</td>
<td>Self-isolation, herbal medicine</td>
<td>LN, Cigarette factory worker, Senior High School</td>
</tr>
<tr>
<td>Medic</td>
<td>In my opinion, I had a healthy life, often washed my hands, took vitamins too. But I still got Corona. I was immediately taken to the family doctor and given a prescription for medication</td>
<td>Washing hands, vitamins, Doctor, medicine</td>
<td>CHA, Housewife, Undergraduate</td>
</tr>
<tr>
<td>Teologic</td>
<td>The main thing is to increase your prayers so that God will provide salvation in the world and the hereafter</td>
<td>Praying</td>
<td>SU, Roof tile worker, Elementary School</td>
</tr>
</tbody>
</table>
At this time, Corona must be prevented and treated according to medical regulations because it is related to disease, but don’t forget to stay happy so that our body’s immune system is well maintained.

When we are in this difficult time, we are tested by illness. Physical and spiritual effort are necessity. The physical effort is by taking medicine, while maintaining health. The inner effort is by increasing worship to ask God to give you the best.

If we are sick, we have to be patient and make ourselves *tagarrub* (closer to Allah), while being vigilant in looking for a cure.

Get treatment and pray. Believe that for every disease, Allah will definitely provide a cure.

Based on the data above, Muslim women in Ngembal Kulon, whether they had been exposed to COVID-19 or not, based on their experience or knowledge, they trusted preventing and treating Corona disease medically, except for SU. SU only relied on prayers to God to stay healthy and safe in the pandemic. It is relevant to her understanding of Corona which was considered a theological fact. LN and CHA preferred medical solutions when...
getting sick according to their experience, although LN preferred herbal medicines than chemical medicines. Meanwhile, according to MM, apart from using medical methods, psychological conditions also needed to be considered to strengthen physical immunity. TU, SA, and FA had the same opinion that seeking treatment, implementing a healthy lifestyle, and prayer were equally important in situations of illness.

Second, the attitudes and behavior of Muslim women in Ngembal Kulon in responding to health protocols and vaccines are mapped in the following table.

Response to Health Protocols and Vaccines

<table>
<thead>
<tr>
<th>Response Category</th>
<th>Interview Result</th>
<th>Keyword</th>
<th>Informant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medic</td>
<td>My family strictly implement health protocols because of the experience of being sick. My husband and I have also been vaccinated for our health and that of our toddler children.</td>
<td>Health</td>
<td>CHA, Housewife, Undergraduate</td>
</tr>
<tr>
<td></td>
<td>The government’s recommendations to use masks, clean your hands frequently, keep your distance or avoid crowds, etc., are all to prevent the transmission of COVID, so they must be adhered to, including for vaccines. Of course my family and I must be role models for society because I am a health worker. It’s all for health</td>
<td>Preventing transmission of COVID, health</td>
<td>MM, Midwife, Undergraduate</td>
</tr>
<tr>
<td>Politic</td>
<td>I always use a mask, finally it has become a habit. Because I work in a factory, I follow the factory rules, including mandatory vaccines to be healthy too. If you don’t want to follow, you can be expelled</td>
<td>Obey to the rule of factory, health</td>
<td>LN, Cigarette factory worker, Senior High School</td>
</tr>
<tr>
<td>---</td>
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<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Politic</td>
<td>Whether there was COVID or not, it was normal for me. If I didn’t go out, I didn’t eat. I wore a mask so that I would not be allowed to enter the housing complex. I was also vaccinated because I didn’t need to pay</td>
<td>Afraid of the rules, No payment for vaccines</td>
<td>FA, Itinerant vegetable seller, Islamic Junior High School</td>
</tr>
<tr>
<td>Teologic - Politic</td>
<td>I lived as usual, surrendering this life to God. But because the Village Head had told me to get the [vaccine] injection, I just went along with it</td>
<td>Obey to the government</td>
<td>SU, Roof tile worker, Elementary School</td>
</tr>
<tr>
<td>Medic - Politic - Teologic</td>
<td>In maintaining my health, I was increasingly motivated in taking morning walks and sunbathing. As much as possible, fulfill government recommendations to always comply with health protocols and vaccine. I believed it is for the good of the Indonesian. Increasing worship and asking for the best from God must be done as a religious people</td>
<td>Live healthy, obey to the government, praying</td>
<td>TU, Retired elementary school teacher, Vocational School / Teacher Education</td>
</tr>
</tbody>
</table>
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Table 4: Processed by the writers based on interviews in 2020 and 2022

| Medic-Politic-Teologic | Trying to implement government recommendations, always wore a mask and tried to keep your distance and be patient. We can only strive, the best thing was following the government, the rest was up to fate. As for vaccines, I didn’t dare yet. The important thing was to take care of your health | Obey to the government, be patient, healthy | SA, Religious Figure, Islamic Senior High School/Boarding School |

Based on the data in the table above, Muslim women in Ngembal Kulon agreed with the government’s recommendations regarding health protocols and vaccines, although for different reasons. CHA and MM for health reasons. According to LN, SU, FA, it was only because of relations or obedience to the bos, leader, or head. In details are LN followed the rules of her workplace, SU obeyed the village head as the representative of the government in the village, and FA followed recommendations for the sake of continued income and did not burden her. TU and SA realized that because the goal was good and for the sake of health, apart from that we must not neglect God.

Based on the two tables and the brief description above, it shows that the understanding of Muslim women in Ngembal Kulon about Corona as described in table 2 vary their attitude and behavioral responses in facing and experiencing Corona as in table 3 and 4. The response went hand in hand with the initial understanding, although having several developments. Several examples, SU who recognized Corona as a theological fact have varied her attitude in dealing with Corona by surrendering herself to God’s power and praying, even though in the development she was also willing to be vaccinated because she followed the government’s recommendations, in this case, the Village Head.
Likewise, LN initially saw Corona as a medical fact, so when facing Corona, she tended to believe in medical solutions too, but her attitude developed political nuances when responding to health protocols and vaccines, because she followed the rules of her workplace. Thus, TU and SA finally understand Corona and the pandemic issue as a more complex reality, as medical, theological and political factors, whereas previously TU saw Corona as a medical fact, while SA saw it as a medical and theological fact.

The reality above proves that a meaning believed to be a truth by a person or group of people encourages them to produce a certain response in a more concrete form. The meaning that trusted and believed shows interest and interest motivates concrete actualization (Soekamto and Winataputra, 1997: 39) in the form of a response. According to Steven M. Chafe, quoted by Rahmat, there are 3 (three) types of responses, they are cognitive responses, affective responses, and psychomotor responses. Cognitive responses are responses related to knowledge and information about something. Affective responses are responses related to emotions and a person’s attitude towards assessing something. Psychomotor responses are responses related to real behavior which include actions or habits (Rahmat, 1999: 118).

3. Women’s Religiosity After Corona Outbreak

The various thoughts, attitudes and behavior of Muslim women in Ngembal Kulon toward how they understand and deal with Corona, responding to health protocols and vaccines have been described as above. Their various responses reflect and are part of their religiosity as well. Dilawati (2020:57) used the term religiosity or religiousness as the attitude of a religious person to behave in accordance with the teachings of the religion he believes in. A similar opinion was expressed by Kadir (2003: 44) that it is the response of religious humans to something that
is believed to be Absolute Reality. This response takes the form of all thoughts, attitudes and behavior, both as an individual and as a group. Another term that is often used to refer to religiosity is worship. The response of religiosity or worship in Islam covers all religious human activities in the world (Kadir, 2003: 145), when interacting to Allah, interacting to other humans, and also interacting to the universe. This is as stated in the Word of Allah which means:

*And I did not create jinn and humans only that they serve [worship] Me (QS. al-Dzariyat: 56).*

Based on this basic framework, the scope of religiosity in Islam is not only prayer, fasting, and Hajj, but all the activity of religious people, including the attitude of protecting from disease and healthy life, the attitude and behavior of obeying the government, as well as the attitude and another behavior in social relations are religiosity. This behavior is an order and has a religious basis. In this case, the attitude of Muslim women in Ngembal Kulon when protecting themselves from the COVID-19 disease and living a healthy lifestyle is religiosity, in response to God’s commands. This is as stated in the Word of Allah which means:

*O people, eat of what is lawful and good from what is on earth, and do not follow the steps of Satan; because actually Satan is a real enemy for you (QS.al-Baqarah: 168).*

It is also seen in their compliance with government recommendations to be willing to be vaccinated. Obeying the government as well as religious recommendations is stated in QS. Al-Nisa: 59 which means:
O believers, obey Allah and obey (His) messenger, and the ulil amri (government) among you. Then, if you have different opinions about something, then return it to Allah (the Qur’an) and the Messenger (Sunnah), if you truly believe in Allah and the Last Day. That is more important (for you) and the consequences are better) (QS. al-Nisa: 59).

The Corona outbreak and the pandemic situation left many problems, not only health problems but caused an impact on other areas of life, such as economy, education, politic, social and even religion. Muslim women in Ngembal Kulon experienced socio-religious disruption. Spaces for encounters between people that were originally part of their daily lives must be avoided, such as: buwuh (attending invitations and donating items at weddings, circumcisions, or other events), melayat (visiting and empathizing when a family is in trouble), rewangan (helping neighbors or relatives who have certain needs), ngejekno (recitation to send prayers for seven days when a family member passed away), congregational prayers, shaking hands, and so on. This change is hard for them.

In this case, FA compared the market to a mosque, as both are meeting places for many people. It is as if she did not agree with the government’s policy on social distancing, which had built recommendations to do worship at home and avoid going to mosques. FA asked:

Mengapa pergi ke pasar dibolehkan, pergi salat berjamaah ke masjid dilarang (Why is it permitted for going to the market, while going to congregational prayers at the mosque is prohibited) (Interview, 19 April 2020).

Meanwhile SA stated that

Dulu saat pandemi, kalau mendatangi pengajian, buwuh, saya telah berusaha membatasinya, tetapi ada tetangga atau kerabat yang
meninggal, saya sulit tidak melayat dan ngejekno, bu (In the past, during the pandemic, when I went to go buwuh, I tried to confined it, but when a neighbor or relative died, it was difficult for me not to melayat and ngejekno, mom) (Interview, 5 Agustus 2022).

The Corona outbreak and pandemic situation taught us many lessons. Washing hands is a simple activity, healthy way of life as an effort to cleanse disease germs that stick to the hands, but this way of life is often not applied in family. Since the Corona outbreak occurred, CHA and her husband have started to get used to themselves and their two toddlers always washing their hands before eating and washing their feet when they want to come into the house even though the pandemic is over (Interview, 28 August 2022). Meanwhile, TU, who is a retired teacher, is still continue practicing morning walking and sunbathing after the pandemic to maintain her body fitness (Interview, 11 August 2022). Apart from that, regarding government policies, health protocols and vaccines, even though some parties have responded negatively, Muslim women in Ngembal Kulon realized that government regulations are good and beneficial for the people. Currently, people in Indonesia feel healthy again and can start carrying out their daily activities normally. TU said:

Mengikuti pemerintah itu memang yang paling baik, karena pemerintah itu memiliki banyak ahli. Ibarat orang tua dengan anaknya, tidak ada orang tua yang ingin anaknya menderita (Obeying to the government is indeed the best, because the government has many experts. Like a parent and a child, no parent wants their child to suffer) (Interview, 11 Agustus 2022).

The Corona outbreak and pandemic situation were a test so that humans did not forget to God. In this case the SA stated:
Alhamdulillah ya, sekarang ini kita sudah bisa melewati ujian dari Allah berupa pandemi. Berarti sekarang kita sudah lulus. Semoga derajat kita semua dinaikkan Allah. Kita semakin banyak ibadahnya dan selalu meningkatkan perbuatan baik kita sehingga nilai kita semakin sempurna di sisi Allah (Thank God, now we have been able to pass the test from Allah in the form of a pandemic. That means now we have graduated. May Allah raise our level. We do worship more and more and always increase our good deeds so that our value becomes more perfect in the sight of Allah) (Interview, 5 August 2022).

For FA, the pandemic event made her more patient in facing any life problems and taught her the lesson that depending on humans for life is useless. Surrender ourselves only to Allah. Based on her experience, the Corona outbreak made the economy difficult, her income was declining, her merchandise was often not soldout. One day, she had leftover vegetables that were supposed to be sold, but because they were not soldout and she was worried they would rot, she then cooked them to share with her neighbors who were sick and isolated at the village hall. Unexpectedly, over the next two weeks she received a catering order for a week from the village government (Interview, 16 August 2022).

From the description above, the challenges faced by women during the Corona outbreak and the pandemic situation left positive legacies in the field of religiosity, especially in the post-pandemic era, in terms of paying more attention to health, increasing trust and loyalty to leaders, increasing the spirit of patience and submission, and foster love for others.

C. Conclusion

This study focused on the opinions of Muslim women in Ngembal Kulon toward Corona, to find out the factors that
made them think that way, as well as the influence on their religiosity after the pandemic showed the results that Muslim women in Ngembal Kulon interpret Corona differently: some interprete it from a medical, theological, political perspective, or a combination of two or even all three. These differences were caused by pre-structural factors or their pre-understanding which was built from the level and type of education, personal experience, sources of information obtained, and the environment. This diversity also varied their religious response in the context of responding to Corona, health protocols and vaccines. Finally, even though the Corona outbreak left many problems behind, they actually felt an increase in religiosity after the pandemic ended i.e. more obedient to practicing religious teachings. They also try to always maintain health, obey *ulil amri* (government) in terms of goodness, and increase spirituality. Their experiences became a kind of broader mental revolution for themselves and their families for the sake of a healthy, nationalist and religious future.
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