Journal of Family Sciences **E-ISSN: 2460-2329**
2024, Vol. 09, No. 01, 17-34

The Coping Strategy and Subjective Well-Being of Indonesian Families amid the COVID-19 Pandemic

Megawati Simanjuntak[1*)], Istiqlaliyah Muflikhati[1], Lilik Noor Yuliati[1], Irni Rahmayani Johan[1]
[1]Department of Family and Consumer Sciences, Faculty of Human Ecology, IPB University, Jl. Kamper, IPB Dramaga Campus, Bogor, West Java 16880, Indonesia

*) Corresponding author: mega_juntak@apps.ipb.ac.id

Abstract

Due to the COVID-19 pandemic, economic pressures have forced families to make various adjustments to maintain their well-being. This study investigated economic coping strategies and the subjective well-being of families during the COVID-19 pandemic. A total of 1,125 families in Indonesia participated in an online survey using Google Forms and spoke through social media. The research shows that families experienced a decrease in income, which encouraged them to adopt various economic coping strategies. The coping strategy adopted was cutting expenses while increasing income, mainly by utilizing hobbies or skills. Income changes, education, poverty status, savings withdrawal, selling or pawn assets, asking for aid, and borrowing money significantly influenced subjective well-being. Differences in subjective well-being can be observed in economic status, education level, and changes in income. Changes in income and higher education positively affected subjective well-being. Poverty status also had a negative effect on subjective well-being negatively.

Keywords: coping strategy, poverty, subjective well-being

Abstrak

Akibat pandemi COVID-19, tekanan ekonomi memaksa keluarga melakukan berbagai penyesuaian untuk menjaga kesejahteraannya. Studi ini menyelidiki strategi penanggulangan ekonomi dan kesejahteraan subjektif keluarga di tengah COVID-19. Sebanyak 1.125 keluarga di Indonesia mengikuti *survey* online menggunakan g-form dan disebar melalui media sosial. Hasil riset menyimpulkan bahwa keluarga mengalami penurunan pendapatan, yang mendorong keluarga untuk mengadopsi berbagai strategi koping ekonomi. Strategi koping yang ditempuh adalah memangkas pengeluaran sekaligus meningkatkan pendapatan, terutama memanfaatkan hobi atau keterampilan. Perubahan pendapatan, pendidikan, status kemiskinan, penarikan tabungan, menjual atau menggadaikan aset, meminta bantuan, dan meminjam uang berpengaruh signifikan terhadap kesejahteraan subjektif. Perbedaan kesejahteraan subjektif dapat dilihat dari status ekonomi, tingkat pendidikan, dan perubahan pendapatan. Perubahan peningkatan pendapatan dan pendidikan yang lebih tinggi akan berpengaruh positif terhadap kesejahteraan subjektif. Status kemiskinan juga berpengaruh signifikan terhadap kesejahteraan subjektif secara negatif.

Kata kunci: kemiskinan, kesejahteraan subjektif, strategi koping

Introduction

To protect the community and break the chain of the spread of COVID-19, on March 16, 2020, the government of Indonesia appealed to all communities to implement social distancing. Under this policy, the general public must perform all activities, research, and worship at home and not temporarily engage in public activities.

Generally, only the formal sector can work at home. Social restrictions instantly reduce the daily income of people who work in the informal sector, such as street vendors. If one day does not sell, the daily family needs are likely not met. Over time, social restrictions have also harmed the formal business sector. For example, a significant drop in consumers or clients during a pandemic has prompted businesses to reduce their operating costs. As a result, employee salaries or wages are affected by reducing working hours; some employees may be temporarily laid off, or the possibility of laying off employees.

The COVID-19 pandemic could have severe effects on the poor through multiple channels, including greater vulnerability to declining incomes, increased risk of COVID-19 infection and mortality, and lower availability of essential items due to market disruptions affecting the poor incredibly hard (Barnett-Howell & Mobarak, 2020; World Bank, 2019). Although the social assistance measures implemented in many counties may soften household impacts, they do not fully offset income losses from shutdowns (World Health Organization, 2020). Moreover, the poorest members of society (e.g., day laborers, who tend to be educationally disadvantaged) have little capacity to manage adverse income shocks (Wong et al., 2021). Less than 20% of the poorest workers in Low-Income Countries (LICs) require social security and support for their sizable informal sectors (World Bank, 2019). This suggests that the recent progress in reducing poverty and inequality is likely to be lost (Sumner et al., 2020).

It is undeniable that social restriction policies positively support the increase in COVID-19 cases (Maekelae et al., 2020). However, social restrictions greatly impact a community's economic conditions (Forbil Institute Team and Institute of Governance and Public Affairs (IGPA), 2020). Most people have experienced a decrease in income during the COVID-19 pandemic. A previous study also added that the economic challenges felt by the community were in the form of increased spending (McKinsey & Company, 2020).

As the smallest unit of society, the family also faces these economic pressures. During the pandemic, the family's economic function was increasingly tested so that family well-being was still achieved (Forbil Institute Team and Institute of Governance and Public Affairs (IGPA), 2020). Perceived economic pressure forces families to persist in meeting their needs, even for the most basic needs (Kumalasari et al., 2018).

Economic pressure is a family's inability to meet basic needs, such as clothing, food, shelter, and other requirements, such as recreation (Mistry et al., 2008). In general, economic pressure is caused by instability and even loss of work, low income, instability of financial resources, instability of assets, and debt so that families cannot meet their needs (Fox & Bartholomae, 2000). In addition, financial limitations interfere with meeting needs, increasing the risk of emotional stress and opportunities for conflict in the family and decreasing family resilience and quality of life (Higginbotham & Felix, 2009; Robila & Krishnakumar, 2005).

Families must implement economic coping strategies to meet their living needs even during a pandemic. A coping strategy refers to how a family tries to adjust to economic pressure conditions. Economic coping strategies are generally divided into income savings and expenditure savings. However, previous studies have found that economic coping strategies by families differ depending on their resources, economic status, subjective well-being, level, and duration of economic pressure (Borner et al., 2012; Hasanah et al., 2017; Firdaus & Sunarti, 2009; Sopiah et al., 2017 Rosidah et al., 2012; Silitonga et al., 2018; Ersado et al., 2014).

Subjective family well-being is one aspect that may have been affected by the COVID-19 pandemic. In the family context, subjective well-being is a feeling of satisfaction and gratitude of family members for their lives, and possible differences in each individual or family (Diener, 2000). Furthermore, various studies have confirmed a positive relationship between subjective family well-being and income, which means that the higher a person's income, the more prosperous the family is (Diener et al., 2013; Stevenson & Wolfers, 2013; Headey & Mark, 2004). Economic pressure is negatively related to subjective well-being (Kumalasari et al., 2018; Raharjo et al., 2015; Simanjuntak et al., 2010). Based on this description, although research on subjective family well-being is multiplying, the COVID-19 situation is still in the early stages of development. As a result, a greater understanding of the impact of COVID-19 on family well-being is needed to understand actions to address family problems during pandemics, as it acts as an assessment of indicators of prosperous families (Raharjo et al., 2015). Therefore, the significance of this study lies in extracting family coping strategies in dealing with the COVID-19 pandemic, socioeconomic circumstances, and their impact on subjective family well-being during the COVID-19 pandemic.

The objectives of this study were to (1) identify coping strategies adopted by families during the pandemic, (2) analyze differences in coping strategies based on demographic characteristics, (3) analyze differences in subjective well-being based on demographic characteristics, and (4) analyze the effect of family socioeconomic and coping strategies toward the subjective well-being of families during the pandemic. The novelty of this research lies in the context of the COVID-19 pandemic, which is the research setting. Previous studies have rarely been conducted in the context of pandemics.

Methods

Participants

The study design was cross-sectional, meaning that the research was conducted within a certain period and was not sustainable. Families involved 1,125 housewives from various COVID-19-affected segments who were chosen using non-probability sampling techniques. The unit analysis of this research was family, with housewives as respondents. Housewives were chosen to represent the family because they understood the situation and frequently managed the resources. Data collection was conducted through an online questionnaire using Google Forms in 2021.

Measurement

The main variables were coping strategies and subjective well-being. In addition, respondent characteristics, such as education, employment, and income, were also analyzed as supporting variables. Previous studies have shown that these three variables affect subjective well-being and how families deal with problems (coping mechanisms). Employment and income were greatly affected during the pandemic, so it would be interesting to observe the shift. In addition, it would be interesting to study whether there are differences in subjective well-being and how families deal with problems with different levels of education.

The coping strategy variable adopted was a questionnaire referred to and modified from Donoghue and Klerk (2013). The coping strategy instrument consisted of 17 statement indicators, including efforts to increase revenue (three items), savings on expenses (three items), use of savings (one item), pawnshops and asset sales (two items), social networking (three items), and debt (five items). The scale for each indicator is 1 = never, 2 = sometimes, and 3 = often (Simanjuntak, 2016). The subjective well-being instrument consists of 29 indicators covering four dimensions of well-being: physical (eight items), economic (eight items), psychological (seven items), and social (six items).

The subjective well-being variable used was a questionnaire referred to and modified from Puspitasari et al. (2013). Subjective well-being was measured based on family satisfaction with the conditions experienced during the pandemic using a five-point scale: 1 = very dissatisfied, 2 = dissatisfied, 3 = fair, 4 = satisfied, and 5 = very satisfied (Silitonga et al., 2018). Instrument characteristics of families consisted of (a) the level of education, which included elementary school, junior high school, high school, and higher education (diploma/bachelor/postgraduate), (b) type of work, and (c) income before and during the pandemic Covid-19.

Each statement in the questionnaire was then assigned an assessment score based on the collected data. Next, the total score of each variable was converted into an index. To provide uniformity in the comparison of the data categorization for each variable, the goal is to equalize the units. Bloom's cutoff point was used to divide the acquired index into three groups: low (index 0.0-60.0), medium (index >60.0-80.0), low (index >60.0-80.0), and high (index >80.0-100.0) (Yimer et al., 2014).

Analysis

The assessment method used to summarize the answer results was the top two boxes, which united the two answers into a single answer. For example, the answer for coping strategy was simplified into two groups: ever (for those who answered sometimes and often) and never. However, the scale of subjective well-being answers was simplified into three groups: dissatisfied (a combination of very dissatisfied and dissatisfied), neutral, and satisfied (a combination of satisfied and very satisfied).

An Independent sample t-test was used to assess the significant differences in coping strategies and subjective well-being based on poverty and employment status to answer the third and fourth research questions. In addition, ANOVA was applied to test the differences in coping strategies and subjective well-being based on education and changes in family income. Finally, a multiple linear regression analysis was used to measure the significant effect of demographic characteristics and coping strategies on subjective well-being to answer the last research objective.

Findings

Demographic Characteristics

In general, families have a good education level, where one-third (34.0%) had graduated from high school (secondary education), and more than half (53.5%) had graduated from college (higher education). Meanwhile, the proportions of employees' and unemployed housewives' were almost balanced. Among the 1,125 families, more than half (55.5%) of housewives stated that income declined during the pandemic, while a small proportion (2.9%) experienced an increase or unchanged income (41.6%). However, overall, the average per capita income per month decreased by 15.6%, from 2,425,679 to 2,048,184 Indonesian rupiah (IDR). Based on the poverty line, it can be seen that the majority (84.5%) of families are classified as not poor. Therefore, although some families experienced decreased income during the pandemic, the families in the study largely did not fall into the poor category (Table 1).

Table 1. Demographic characteristics

Demographic Characteristics	**Categories**	**n**	**%**
Education Level	Elementary and junior high school	136	12.1
	High school	383	34.0
	Higher education (College)	606	53.9
Employment status	Unemployed	571	50.8
	Employed	554	49.2
Changes in income during the Covid-19 Pandemic	Decreased	624	55.5
	Constant	468	41.6
	Increased	33	2.9
Poverty status	Poor	174	15.5
	Not poor	951	84.5

Coping Strategies

In this study, almost three-quarters of families affected by COVID-19 took cutting-back expenses as one of the economic coping efforts during the pandemic. The most frequent income-generating efforts undertaken during the pandemic were the use of hobbies and skills to produce products that could be sold. Meanwhile, less than a third of the families made efforts to sell assets and struggled to find new or additional work (Table 2).

Table 2. Indicators of family coping strategies (income-generating)

Economic coping strategies (Income generating)	**%**		
	Never	**Sometimes**	**Often**
1. Forced to cut back expenses	26.7	46.4	26.9
2. Use of hobbies (skills) for selling	62.0	24.6	13.4
3. The head of the family looks for a side job	70.7	20.6	8.7
4. Family members (e.g., mother or child) try to find work	72.0	18.6	9.4
5. Mortgaging jewelry or other valuable assets	81.5	13.0	5.5
6. Selling jewelry or other valuable assets	82.0	12.6	5.4

Table 3 illustrates the frequency of families making economic coping efforts by cutting expenses. Among the three cutting efforts, families prefer reducing snacks compared to reducing the type of side dish served or the frequency of eating by family members.

Table 3. Indicators of family coping strategies (cutting)

Economic coping strategies (Cutting)	%		
	Never	Sometimes	Often
1. Reducing snacks	16.6	40.8	42.6
2. Reducing the type of side dish served for the whole family	50.8	35.6	13.6
3. Reducing the frequency of eating for family members	74.8	18.5	6.8

Families tended to reduce the type of side dishes served and family members' eating frequency. Only about one-third of the families have accessed aid from social networks (online loans or pay later). However, families accessed sibling or relationship assistance more frequently (33.4%) than the other two social networks. Finally, only one-fifth of the family owes a debt. The most often owed to relatives and most rarely done through online applications, indicated that two of the top three coping strategies were cutting expenses.

Table 4 explains how often families make coping efforts by accessing assistance from social networks such as relatives, neighbors, or the government. Only about one-third of the families accessed help from social networks. However, among the three social networks, sibling or relationship assistance is the most frequently accessed by families (33.4%) than the other two social networks.

Table 4. Indicators of family coping strategies (networking).

Economic coping strategies (Network)	%		
	Never	Sometimes	Often
1. Ask for help from relatives	66.6	29.8	3.6
2. Asking for help from neighbors	82.0	16.3	1.7
3. Ask for help from the local government	88.2	10.5	1.3

Table 5 shows how often families make efforts to cope with debt. Only one-fifth of the family owes a debt. It is most often owed to relatives and is rarely done through online applications.

Table 5. Family coping strategy indicators (in debt).

Economic coping strategies (in debt)	%		
	Never	Sometimes	Often
1. Borrow money from relatives	81.3	16.5	2.1
2. Borrow food or household needs in the small shop	87.3	10.5	2.2
3. Borrow to neighbors	91.6	7.2	1.2
4. Borrow to a loan sharks	94.4	4.1	1.5
5. Borrow via online applications	94.1	5.0	0.9

Families' coping strategies most commonly included reducing snacks, withdrawing savings, and reducing the types of side dishes served (Figure 2). This finding indicates that two of the top three coping strategies reduced expenses. In contrast, the three strategies with the smallest index are owned through online applications, loan sharks, and neighbors. The findings show that many families do not use the debt strategy during the pandemic.

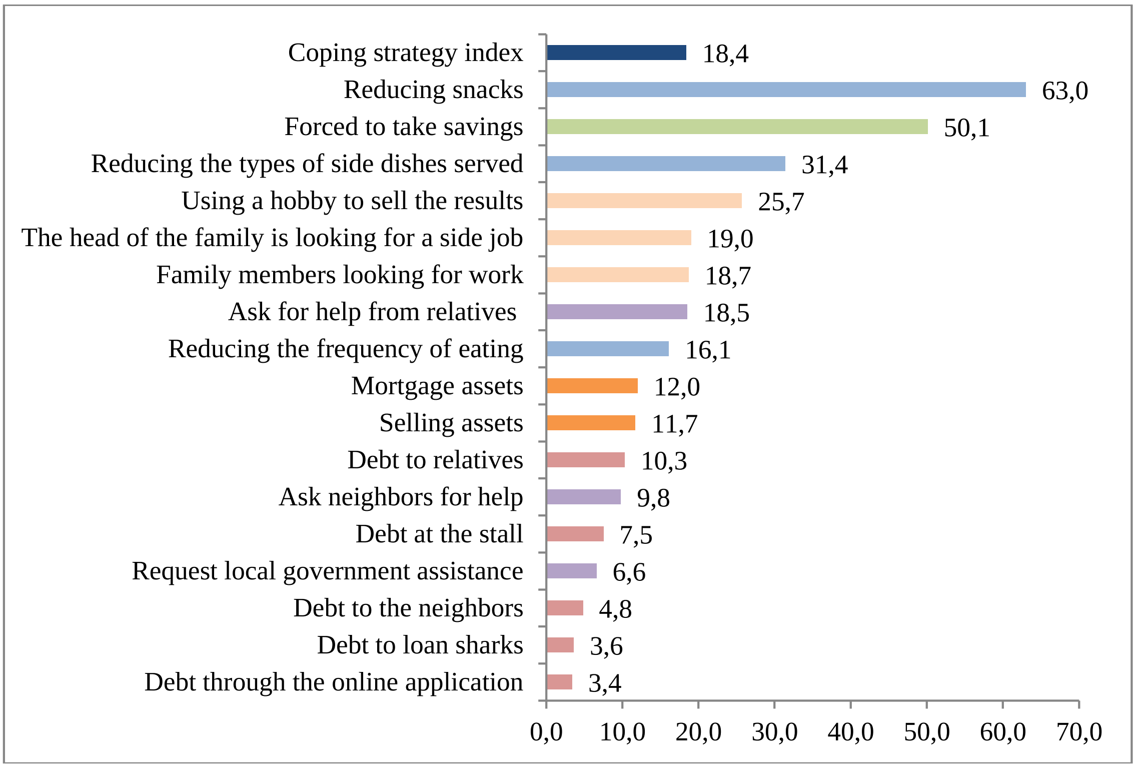

Figure 2. Index of coping strategy indicators (scale of 0 to 100)

Subjective Well-being

In general, families' satisfaction toward the physical dimensions was sufficient, with the largest percentage of families answering 'neutral' to the eight physical dimension indicators, for example, regarding the family residences' condition, the family foods' state, and the family roles' divisions. The top two box values show that satisfaction with the physical dimensions ranged from 47.4 percent to 52.2 percent. Only two of the eight physical dimensions of satisfaction indicators exceeded 50 percent, namely, satisfaction with children's health and living conditions during COVID-19.

Families' satisfaction with the economic dimension is relatively low, which can be seen from the top two box values, under 50.0 percent (17.2% - 38.6%), and the largest percentage of families answered 'neutral' on the eight items. Furthermore, among the eight indicators, the lowest satisfaction was with savings (17.2%), and the highest was with communication media, such as mobile phones (38.6%).

In general, the families were satisfied with their psychological condition. Satisfaction with the categorized psychological dimensions was sufficient, with percentages ranging from 38.4 percent to 72.8 percent. The highest psychological satisfaction was towards the spiritual condition of the family during the COVID-19 pandemic, and the lowest was towards sexual needs.

Families feel satisfied with subjective well-being's social dimension, which could be seen from the highest percentage of families answering 'satisfied' to three of the six indicators and the top two boxes values ranging from 38.7 percent to 70.3 percent. The highest social satisfaction was the communication relationship with children, while the lowest was the communication relationship with neighbors.

Each indicator was calculated to obtain a picture of subjective well-being as a whole. The subjective well-being index (total) was 60.6 out of 100. Referring to Bloom's cut-off point, a well-being index of 60.6 was still categorized as moderate. However, an index value close to the lower limit of the medium category range also shows that vulnerable families experience low subjective satisfaction during the COVID-19 pandemic (Figure 3).

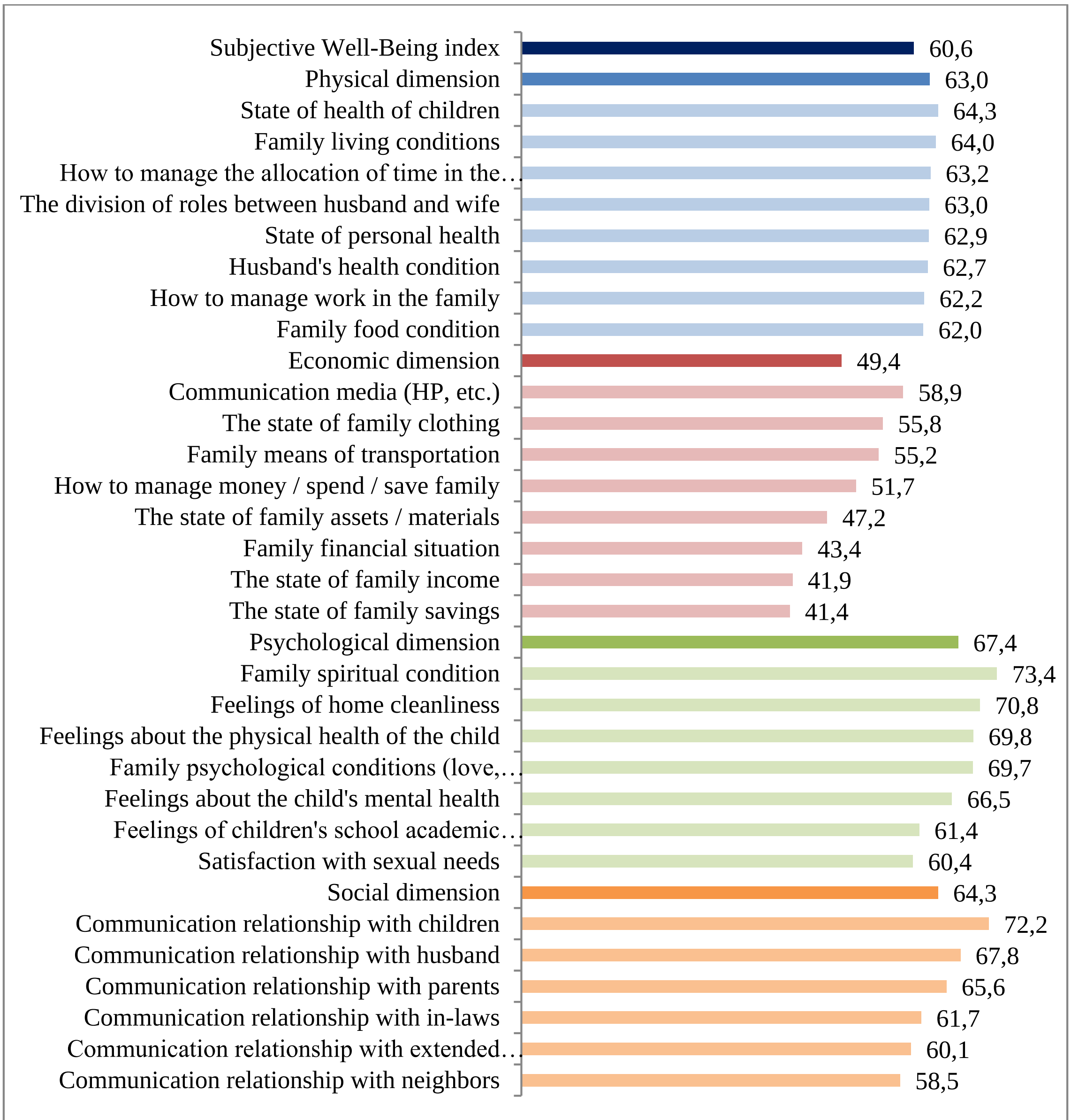

Figure 3. Index of subjective well-being indicators (0-100)

Coping Strategies Based on Demographic Characteristics

The study indicated that the primary coping strategy of poor and non-poor families is to save and increase income (Table 6). Differences in coping strategies between poor and non-poor families can be seen in terms of demographic characteristics. Using ANOVA, different test results showed a significant difference between poor and non-poor families, where non-poor families used fewer coping strategies than low-income families. Through this difference, it can be concluded that non-poor families tend to have a readiness to cope with the COVID-19 pandemic rather than spending on low-income families.

Table 6. Family coping strategies based on poverty status.

Economic Coping Strategies	Poverty status (%)	
	Poor (n=174)	Not Poor (n=951)
Cutting back expenses	94.3	82.0[a]
Increase income (generating income)	70.1	48.4[a]
Withdrawal of savings (dissaving)	83.9	71.4[a]
Selling or mortgaging assets	39.1	20.6[a]
Ask for help on social networks	63.2	31.8[a]
Borrow money	52.9	19.6[a]

Note: [a] = significant difference between poor and poor at the 95% confidence interval.

Based on coping strategies and changes in income experienced during the pandemic, there was a significant difference between non-poor families and low-income families in all coping strategies, whereas the non-poor families did less coping (Table 7).

Table 7. Family coping strategies based on changes in income during the pandemic

Economic coping strategy	Changes in income (%)		
	Decreased (n=624)	Constantly (n=468)	Increased (n=33)
Cutting back expenses	90.5	75.2[a]	81.8
Increase income (generating income)	59.3	40.6[a]	66.7[c]
Withdrawal of savings (dissaving)	81.4	63.2[a]	63.6[b]
Selling or mortgaging assets	31.3	13.5[a]	18.2
Ask for help on social networks	42.9	27.6[a]	45.5[c]
Borrow money	30.8	16.2[a]	30.3

Note: [a] = significant difference between decreased and constant values at the 95% confidence interval; [b] = significantly different between decreased and increased at a 95% confidence interval; [c] = significant difference between constant and increased income at 95% confidence intervals

The study indicated significant differences between families with primary and higher education in four coping strategies: housewives with higher education had fewer expenses, increased income, asked for social networking, and debt assistance (Table 8). Thus, families with a higher education have fewer coping strategies than families with other families.

Table 8. Family coping strategies based on level of education

Economic Coping Strategic	Level of education (%)		
	Primary (Elementary/middl e school) (n = 136)	Secondary (High school) (n=383)	Higher education (n=606)
Cutting back expenses	88.2	85.9	81.7[b]
Increase income (generating income)	65.4	57.2	45.2[bc]
Withdrawal of savings (dissaving)	72.8	74.4	72.8
Selling or mortgaging assets	25.7	28.7	19.6[c]
Ask for help on social networks	52.9	45.2	27.6[bc]
Borrow money	39.7	30.8	17.5[bc]

Note: a = significant difference between primary and secondary education at the 95% confidence interval; b = significant difference between primary and higher education at 95% confidence intervals; c = significant difference between secondary and higher education at a 95% confidence interval

Based on coping strategies and maternal employment status, both working mothers and non-working housewives relied on savings as a coping strategy (Table 9). The study also showed no significant differences between coping strategies undertaken by families with working and non-working mothers, except in terms of increased income. However, fewer families with working mothers increased their income compared to those with non-working mothers.

Table 9. Family coping strategies based on employment status.

Economic Coping Strategy	Employment status (%)	
	Unemployed (n=571)	Employee (n=554)
Cutting back expenses	84.6	83.2
Increase income (generating income)	54.8	48.6[a]
Withdrawal of savings (dissaving)	71.3	75.5
Selling or mortgaging assets	24.9	22.0
Ask for help on social networks	38.5	34.7
Borrow money	26.4	22.9

Note: [a] = Significant difference between unemployed and employee

Subjective Well-being based on Demographic Characteristics

This section conducts a different average well-being index test based on three demographic characteristics: economic status, education level, and income changes experienced by families before and during the COVID-19 pandemic. In addition, differences in subjective family well-being between poor and non-poor families were analyzed using demographic characteristics.

Low-income families showed a lower average well-being index value than non-low-income families (Table 10). Based on these findings, it can be interpreted that low-income families tend to be more dissatisfied with the physical, economic, psychological, and social dimensions and are subjectively less prosperous than non-poor families. However, the ANOVA tests showed a significant difference between poor and non-poor families in the economic dimension, where non-poor families felt more satisfied than low-income families. Moreover, there were no significant differences in subjective well-being and its four dimensions between poor and non-poor families. Nevertheless, non-poor families tend to be more prosperous and feel more physically and economically satisfied than families with a reduced income.

Table 10. Comparison test of subjective well-being based on poverty status.

Index of well-being and its dimensions	Poverty status (0-100)		Sig. (2-tailed)
	Poor (n=174)	Not Poor (n=951)	
Physical	55.5	64.4	0.000**
Economic	38.5	51.4	0.000**
Psychological	61.6	68.4	0.000**
Social	58.3	65.4	0.000**
Subjective well-being (total)	52.8	62.0	0.000**

Note: ** significant at $p < 0.01$

A comparison of the subjective well-being index (and its dimensions) based on the level of education showed a significant difference in subjective well-being between families affected by COVID-19 with primary and higher education, where the average number of families with basic education was lower (Table 11). Thus, highly educated families were significantly more prosperous than primary- and secondary-educated families, primarily in the physical and economic dimensions.

Table 11. Mean of well-being index based on the level of education.

Index of well-being and its dimensions	Education level (0-100)		
	Basic (Elementary/middle school) (n = 136))	Intermediate (n = 383)	Higher (n = 606)
Physical	58.41	61.38	65.11[bc]
Economic	43.22	46.76	52.51[bc]
Psychological	65.34	66.44	68.43
Social	60.91	63.23	65.70[b]
Subjective well-being (total)	56.41	58.95	62.56[bc]

The study results indicate that families experiencing decreased income have the lowest subjective well-being compared to families with steady and increasing income (Table 12). The results of the ANOVA concluded that, in general, the subjective well-being of families with fixed incomes was significantly different from those with declining incomes. Furthermore, there was a significant difference ($p<0.05$) between families with fixed income and those with declining physical and economic dimensions. In the economic dimension, families with rising and falling incomes differed significantly ($p<0.05$).

Table 12. Mean well-being index based on income changes.

Index of well-being and its dimensions	Income changes (0-100)		
	Decreased (n=624)	Constantly (n=468)	Increased (n=33)
Physical	60.71	65.94[a]	65.72
Economic	44.43	55.68[a]	55.21[b]
Psychological	66.66	68.38	66.88
Social	63.59	65.46	60.61
Subjective well-being (total)	58.25	63.60[a]	62.04

Note: a = significantly different between decreased and constant income at 95% confidence interval; b = significantly different between decreased and increased income at 95% confidence intervals.

The results of multiple linear regression analysis using the enter method showed that sociodemographic characteristics and coping strategy simultaneously had a significant effect, with a variation of 15.3% (Table 13). Partially, income changes, length of education, poverty status, savings withdrawal, selling or pawning assets, asking for help, and borrowing money significantly influenced subjective well-being. The variable that most influenced the subjective well-being of the family was change in income, with an effect of 13.7%. An increase in income has implications for increasing subjective well-being. Efforts to save, withdraw, sell, or pawn assets and borrow money negatively impact subjective well-being, meaning that the family's coping efforts are unsatisfactory.

Table 13. Regression result

Independent Variables	Unstandardized Coefficients Beta	Standardized Coefficients Beta	Sig.
(Constant)	55.672		0.000
Income Changes (1=Increased; 0= Unchanged /Decreased)	3.767	0.137	0.000**
Length of education (year)	0.338	0.080	0.007**
Poverty status (1=Yes, 0=No)	4.834	0.129	0.000**
Cutting Back Expenses (1=Yes, 0=No)	-1.411	-0.038	0.200

.

Continue from Table 13

Independent Variables	Unstandardized Coefficients Beta	Standardized Coefficients Beta	Sig.
Income Generating (1=Yes, 0=No)	-0.232	-0.009	0.783
Withdraw the saving (1=Yes, 0=No)	-3.642	-0.119	0.000**
Sell or pawn assets (1=Yes, 0=No)	-3.092	-0.097	0.002**
Asking for help (1=Yes, 0=No)	0.474	0.017	0.608
Borrow money (1=Yes, 0=No)	-3.508	-0.112	0.001**
Adjusted R Square	0.153		
Sig.	0.000**		

Note: significant at p<0.01

Discussion

The results of this study show that there has been a decrease in income during the COVID-19 pandemic. This finding is in line with other studies that state that the decline in income and family financial conditions worsened during the Covid-19 pandemic. (BPS, 2020; McKinsey & Company, 2020). This decline in income was caused by reduced or lost daily income, cuts in salaries and wages, reduced working hours, and even the loss of work due to layoffs. In addition, families need to implement various economic coping strategies because economic pressure continuously increases individual anger, hostility, depression, anxiety, physical health, and relationship quality (Fox & Bartholomae, 2000).

The study indicated that families' most critical economic coping strategy during the COVID-19 pandemic was cutting back expenses. The findings can be understood because when a family experiences a decrease in income, as during this pandemic, a strategy to reduce spending will be more often implemented, bearing in mind that this is easier to do than a generating income strategy that requires human resources and social networking (Herawati et al., 2017; Herawati et al., 2011; Rosidah et al., 2012). In addition to using savings, a strategy that is pretty much done is to increase revenue. This strategy was classified as difficult to implement because it depends on the availability of resources owned by the family, whether there are access or job opportunities. However, around one-fifth of families continue to implement this strategy, mainly by utilizing their hobbies or skills to produce products that can be sold. Therefore, this strategy tends to be more comfortable than finding new or additional jobs that are limited during a pandemic (Herawati et al., 2017).

The study also found that coping strategies of families affected by COVID-19 differed significantly in terms of economic status, education level, and changes in income during the pandemic. Differences in family resources result in differences in the ability of families to implement coping strategies (Herawati et al., 2017). Families below the poverty line (poor) who had primary education and experienced a decline in income were the highest groups implementing coping strategies. Meanwhile, differences in maternal employment status (working and not working) did not show significant differences in coping, except for income-increasing strategies; families with non-working mothers made significantly more efforts to increase their income than families with working mothers.

The debt strategy difference in coping strategies between poor and non-poor families was apparent. The percentage of low-income families in debt is higher (approximately 2.5 times) than that of non-poor families. Even though the way to borrow was not done mostly by non-poor families, this strategy was mainly implemented by low-income families to overcome family financial problems. The results of this study are supported by previous studies that have shown a negative relationship between coping strategies and income (Kabbaro et al., 2014; Rosidah et al., 2012). Low-income families had a greater chance of being classified as poor; therefore, it was possible to implement more coping strategies.

Differences in coping strategies can also be observed in the changes in income during the pandemic. Families with declined income generally had the most coping strategies compared to other families. These findings are understandable given the family's most significant economic difficulties due to declining income. Moreover, the economic hardships experienced by these families may have increased with the possibility of increased spending during the pandemic, as recognized by some people (BPS, 2020; McKinsey & Company, 2020).

Differences in coping strategies adopted by families were also seen in the differences in education levels. Families with primary and secondary education tend to cope more than those with highly educated families. These results align with the study of Simanjuntak (2016), who found that the higher the wife's education, the lower the coping strategies. This can be understood as the level of education being crucial in determining a person's economic status and employment, where families with higher education had better jobs, so they had better employment and income (Yadollahi et al., 2009). With better work and income, highly educated families did not need economic coping as secondary and essentially educated families.

Among the eight physical dimension indicators, the highest satisfaction was for the health condition of children. High satisfaction is related to increased consumption of healthier food and increased cooking habits at home for families (Yuswohady et al., 2020). With the increasingly guaranteed health of children's food, their health is also likely to be maintained. Among the eight economic dimension indicators, the highest satisfaction level was for communication media, cell phones, and smartphones. Since there have been social restrictions, the function of mobile phones and communication media has become increasingly important and urgent because almost all activities outside the home change the pattern of activities in the house. Finally, the highest satisfaction with the psychological dimension was spiritual condition. The high spiritual satisfaction of the family during the pandemic increased the togetherness between family members to carry out worship activities at home.

The highest level of satisfaction with the social dimension was communication with children. This was a positive impact of implementing permanent policies at home. Family members, especially children, have a higher chance of communicating with and interacting with their parents. The findings aligned with the Hakuhodo Institute’s (2020) study, where almost half of the community felt a significant impact on relations with people during the pandemic. In addition, parents who can work from home tend to be more satisfied with managing their time allocation because they have more opportunities to spend time with their family and children (Yuswohady et al., 2020).

The family was still well off based on subjective well-being despite being in the Covid-19 pandemic. However, satisfaction did not appear in the economic dimension. A significant decrease in income and the possibility of increased expenditure were thought to be double the economic pressure for the family, which caused economic dissatisfaction. A decrease in savings, income, and expenditure (McKinsey & Company, 2020) are also thought to contribute to economic dissatisfaction. The study also showed that higher-income families, categorized as not poor or unchanged income, tended to have higher subjective well-being. Previous research has also found that income positively affects well-being (Murdiani et al., 2017; Yulfa & Herawati, 2017).

Furthermore, the study found that the length of education positively affected well-being. This result is in line with a study that showed a positive relationship between education and subjective well-being, in which families with higher education had higher subjective well-being (Puspitawati et al., 2012; Sabania & Hartoyo, 2016; Sunarti et al., 2020). In addition, education level is a critical determinant of a person's economic status and employment, where families with higher education tend to have jobs with better income (Yadollahi et al., 2009).

The limitation of this research is that it is not possible to generalize the results because the technique of taking respondents is non-probability sampling. Furthermore, in-depth interviews were not conducted to investigate the phenomenon behind the statistical findings.

Conclusion and Recommendation

Conclusion

During the pandemic, families experienced a decreased income, which encouraged them to adopt various economic coping strategies. The economic coping strategy was implemented mainly by cutting expenses, using savings, and increasing income. The most efficient cutting expense strategy was to reduce snack purchasing, while the strategy to increase income was mainly done by utilizing hobbies or skills to run a family business. Coping strategies differed according to economic status, education level, and income changes. Families categorized as not poor, highly educated, and have not experienced changes in income have implemented fewer coping strategies than other families.

The family was physically, psychologically, and socially prosperous, but not economically, based on the subjective well-being dimensions. Low economic well-being was mainly due to low satisfaction with family savings and income conditions during the COVID-19 pandemic. As explained earlier, most families were forced to take savings to overcome the financial problems caused by the pandemic. Differences in subjective well-being can be observed in economic status, education level, and changes in income.

Income changes, length of education, poverty status, savings withdrawal, selling or pawn assets, asking for help, and borrowing money significantly influenced subjective well-being. The variable that most influenced the subjective well-being of the family was income change, with an effect of 13.7%. Changes in income and higher education positively affected subjective well-being. Poverty status also had a negative effect on subjective well-being negatively. Efforts to save, withdraw, sell, or pawn assets, and borrow money negatively impacted subjective well-being, meaning that coping efforts dissatisfied the family.

Recommendation

Based on the research results, families could cut back expenses as a coping strategy and generate income by looking for a side job. This recommendation is given because the family has sold assets or withdrawn savings; therefore, cutting back expenses and generating income will be the most feasible option in the future. Practitioners and policymakers should pay more attention to people affected by Covid-19 should be given more attention. Although government policies have been implemented to address the community's economic gap with social assistance, there needs to be an evaluation of the policy, especially regarding recipients who are not on the target. The government can also collaborate with local institutions or organizations to formulate policies related to strategies to increase household income. For future research, objective welfare, quality of life, and typological differences, for example, between urban and rural areas, can be studied.

References

Barnett-Howell, Z., & Mobarak, A. M. (2020). *The benefits and costs of social distancing in rich and poor countries*. Ithaca (NY): Cornell University.

Borner, Shively, J., Wunder, G., & Wyman, S. (2012). How do rural households respond to economic shocks? Insight from hierarchical analysis using global data. *International Association of Agricultural Economics,* 1-27. http://dx.doi.org/10.22004/ag.econ.126143

[BPS] Badan Pusat Statistik. (2020). Hasil survei sosial demografi tentang dampak Covid-19. Retrieved from https://www.bps.go.id/publication/2020/06/01/669cb2e8646787e52dd171c4/hasil-survei-sosial-demografi-dampak-covid-19-2020.html

Diener, E. (2000). Subjective well-being: The science of happiness and a proposal for a national index. *American Psychologist, 55*(1), 34-43. https://doi.org/10.1037/0003-066X.55.1.34

Diener, E., Tay, L., & Oishi, S. (2013). Rising income and the subjective well-being of nations. *Journal of personality and social psychology, 104*(2), 267-276. Retrieved from https://psycnet.apa.org/buy/2012-29078-001

Donoghue, S., & Klerk, H.M. (2013). Consumers' Anger and Coping Strategies Following Appraisals of Appliance Failure. *Old Agricultural Building*. 3-14.

Ersado, L., Alderman, H., & Alwang, J. (2003). Changes in consumption and saving behavior before and after economic shocks: Evidence from Zimbabwe. *Economic Development and Cultural Change, 52*(1), 187-215. https://doi.org/10.1086/380136

Firdaus, F., & Sunarti, E. (2009). The relationship between economic pressures and coping mechanisms with the family well-being of tea-picking women. *Jurnal Ilmu Keluarga dan Konsumen*, *2*(1), 21-31. https://doi.org/10.24156/jikk.2009.2.1.21

Forbil Institute Team and Insitute of Governance and Public Affairs (IGPA). (2020). Informal workers in the midst of the Covid-19 pandemic. Governance of Covid-19 handling in Indonesia: Preliminary review. Yogyakarta (ID): Gadjah Mada University Press.

Fox, J. J., & Bartholomae, S. (2000). Families and individuals coping with financial stress. In McKenry, P. C. & Price, S. J (eds.), *Families & Change Coping With Stressful Events and Transitions*. (2nd ed). (pp 250-271). California (USA): Sage Publication, Inc.

Hakuhodo Institute. (2020). Covid-19 and its impact on ASEAN sei-katsu-sha: Quantitative studies. Hakuhodo Institute of Live and Living ASEAN.

Hasanah, U., Nadiroh, & Neolaka, A. (2017). The influence of couple interaction, role differences, and social-economic status on mothers' stress coping. *American*

Scientific Publisher, *23*(11), 10868-10870. https://doi.org/10.1166/asl.2017.10173

Headey, B. Wooden M. (2004). The effects of wealth and income on subjective well-being and ill-being. *Melbourne Institute of Applied and Social Research*: IZA DP No.1032.

Herawati, T., Sugihen, B. G., Asngari, P. S., Susanto, D., & Puspitawati, H. (2011). Family resource management of community empowerment program participants in Bogor Regency. *Jurnal Penyuluhan*, *7*(2), 38-47. https://doi.org/10.25015/penyuluhan.v7i2.9801

Herawati, T., Tyas, F. P. S., & Trijayanti, L. (2017). Economic pressures, coping strategies, and resilience of families who marry young age. *Jurnal Ilmu Keluarga dan Konsumen*, *10*(3), 181-19. http://dx.doi.org/10.24156/jikk.2017.10.3.181

Higginbotham, B. J., & Felix, D. (2009). Economic predictors of marital quality among newly remarried rural and urban couples. *Family Science Review*, *14*(2), 18-30. Retrieved from https://www.familyscienceassociation.org/wp-content/uploads/2021/07/2009-14-2-Ecomnomic-Predictors-of-marital-quality-among-newly-remarreid-rural-and-urban-couples_Brian-Higginbotham-Final.pdf

Kabbaro, H, Hartoyo, & Yuliati, L. N. (2014). Social capital, coping strategies, and objective welfare of families with women as the head of the family. *Jurnal Ilmu Keluarga dan Konsumen*, *7*(3), 164-173. http://dx.doi.org/10.24156/jikk.2014.7.3.164.

Kumalasari, B., Herawati, T., & Simanjuntak, M. (2018). Gender relations, economic pressures, financial management, livelihood strategy, and quality of life in fishing families. *Jurnal Ilmu Keluarga dan Konsumen*, *11*(2), 108-119. https://doi.org/10.24156/jikk.2018.11.2.108

Kustiningsih, W., & Nurhadi. (2020). *Strengthening social capital in Covid-19 mitigation. Governance of Covid-19 handling in Indonesia: Preliminary review*. Yogyakarta (ID): Gadjah Mada University Press.

Mækelæ, M. J., Reggev, N., Dutra, N., Tamayo, R. M., Silva-Sobrinho, R. A., Klevjer, K., & Pfuhl, G. (2020). Perceived efficacy of COVID-19 restrictions, reactions and their impact on mental health during the early phase of the outbreak in six countries. *Royal Society open science*, *7*(8), 1-23. https://doi.org/10.1098/rsos.200644

McKinsey & Company. (2020). *COVID-19 Indonesia Consumer Pulse Survey*.

Mistry, R. S., Lowe, E. D., Benner, A. D., & Chien, N. (2008). Expanding the family economic stress model: Insight from a mixed-methods approach. *Journal of Marriage and Family*, 70(1), 196-209. https://doi.org/10.1111/j.1741-3737.2007.00471.x

Murdiani, S., Sunarti, E., & Herawati, T. (2017). Potential Fire Hazard, Vulnerability and Family Wellbeing of Jatinegara Public House's Residents. *Journal of Family Sciences*, *2*(1), 59-71. https://doi.org/10.29244/jfs.2.1.59%20-%2071

Puspitawati, H., Simanjuntak, M., & Hayati, L. (2012). Economic contributions and the dual role of women and their effect on subjective well-being. *Jurnal Ilmu Keluarga dan Konsumen*, *5*(1), 11-18. https://doi.org/10.24156/jikk.2012.5.1.11

Raharjo, I. R., Puspitawati, H., & Krisnatuti, D. (2015). Economic, financial management, and well-being pressures on young families. *Jurnal Ilmu Keluarga dan Konsumen*, *8*(1), 38-48. https://doi.org/10.24156/jikk.2015.8.1.38

Puspitasari, N., Puspitawati, H., & Herawati, T. (2013). Peran Gender, Kontribusi Ekonomi Perempuan, dan Kesejahteraan Keluarga Petani Hortikultura. *Jurnal Ilmu Keluarga dan Konsumen*, 6(1), 10-19.

Robila, M., & Krishnakumar, A. (2005). Effects of economic pressure on marital conflict in Romania. *Journal of Family Psychology, 19*(2), 246–251. https://psycnet.apa.org/doi/10.1037/0893-3200.19.2.246

Rosidah, U., Hartoyo, & Muflikhati, I. (2012). Study of coping strategies and child investment behavior in the working families of jasmine gambir pickers. *Jurnal Ilmu Keluarga dan Konsumen, 5*(1), 77-87. https://doi.org/10.24156/jikk.2012.5.1.77

Sabania, H., & Hartoyo, H. (2016). Economic Pressure, Livelihood Strategy, and Family Well-being in Cimanuk Watershed, Garut and Indramayu, West Java, Indonesia. *Journal of Family Sciences*, *1*(1), 24-38. https://doi.org/10.29244/jfs.1.1.24-38

Silitonga, M., Puspitawati, H., Muflikhati, I. (2018). Social capital, economic coping, symptoms of husband stress, and subjective well-being of the migrant labor family. *Jurnal Kesejahteraan dan Pendidikan, 5*(1), 20-30. https://doi.org/10.21009/JKKP.051.03

Simanjuntak, M. (2016). The economic pressure and coping strategy of the family of cash conditional transfer recipients. *Journal of Family Sciences*, *1*(1), 39-49. https://doi.org/10.29244/jfs.1.1.39-49

Sopiah, N. N., Krisnatuti, D., & Simanjuntak, M. (2017). Vulnerability, coping strategies, and children's adjustment in child-specific fostering institutions (LPKA). *Jurnal Ilmu Keluarga dan Konsumen, 10*(3), 192-203. https://doi.org/10.24156/jikk.2017.10.3.192

Stevenson, B., & Wolfers, J. (2013). Subjective well-being and income: Is there any evidence of satisfaction? *American Economic Review, 103*(3), 598-604. https://doi.org/10.1257/aer.103.3.598

Sumner, A., Hoy, C., & Ortiz-Juarez, E. (2020). *Estimates of the Impact of COVID-19 on Global Poverty (No. 2020/43).* WIDER working paper.

Sunarti, E., Kamilah, D., Almas, H., & Pitriani, S. (2020). Family subjective well-being of health workers women during the covid-19 pandemic. *Journal of Family Sciences*, *5*(2), 103-120. https://doi.org/10.29244/jfs.v5i2.33152

Wong, B. Y. M., Lam, T. H., Lai, A. Y. K., Wang, M. P., & Ho, S. Y. (2021). Perceived benefits and harms of the Covid-19 pandemic on family well-being and their sociodemographic disparities in Hong Kong: A cross-sectional study. *International journal of environmental research and public health, 18*(3), 1217-1230. https://doi.org/10.3390/ijerph18031217

World Bank. (2019). *Global economic prospects: Darkening skies*. January. Washington DC: World Bank.

Yadollahi, M., Paim, L., Othman, M., & Suandi, T. (2009). Factors affecting family status. *European Journal of Scientific Research, 37*(1), 99-109.

Yimer, M., Abera, B., Mulu, W., & Bezabih, B. (2014). Knowledge, attitude, and practices of high-risk populations on louse-borne relapsing fever in Bahir Dar city, north-west Ethiopia. *Science Journal of Public Health, 2*(1), 15-22. https://doi.org/10.11648/j.sjph.20140201.13

Yulfa, R., & Herawati, T. (2017). The influence of social support and financial management toward family well-being in early marriage. *Journal of Family Sciences*, *2*(2), 45-57. https://doi.org/10.29244/jfs.2.2.45-57

Yuswohady, Fatahillah, F., Rachmaniar, A., & Hanifah, I. (2020). *Consumer behavior new normal after Covid-19: The 30 predictions*. Inventure Knowledge.