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SOCIOLOGY | RESEARCH ARTICLE

Coronavirus and its effect on Pilgrimage in Iran

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Abstract: The spread of Coronavirus disease in Iran, as an Islamic country, has brought about a large number of problematic issues. Some conflicts have emerged regarding the confrontation between adherence to hygienic measures and the performance of religious ceremonies, especially visit of Imam Reza shrine as the most important religious site in Iran. It seems that these conflicts have not been solved yet and are still at play. This survey study employs a mixed quantitative and qualitative approach to investigate pilgrims' justifications for making a pilgrimage to visit the shrine of Imam Reza during the spread of Coronavirus by means of content analysis. To this end, during the survey phase, 936 questionnaires were completed by the respondents and, in the qualitative phase, 46 pilgrims visiting the shrine of Imam Reza were interviewed in order to study the reasons for their presence in the shrine under such unique circumstances and analyze their justifications regarding their pilgrimage method in the shrine. The findings of the survey revealed that some pilgrims deemed the shrine to be so sacred that, basically, they would consider it free of any kind of disease. In contrast, the other pilgrims, while attesting that the virus can exist in the shrine, believed that it is possible to engage in pilgrimage as long as the required hygienic measures are observed. The findings of the qualitative phase revealed that pilgrims' justifications (rationalities for pilgrimage) can be categorized into four classes: tradition-devotion, repudiation-mitigation, obligation-imitation, and rational methods. What differentiates these four methods is the

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PUBLIC INTEREST STATEMENT

This study investigated the prevalence of coronavirus and its impact on the pilgrimage manner in "Imam Raza" holy shrine which is the most important shrine of Shiite Muslims in Iran and the pilgrims' justifications to attend this place. In this study, 936 subjects responded to the questionnaire items and 46 participants were interviewed. The results showed that although pilgrims were aware of the dangers of this virus, they still made the pilgrimage. What makes these people take such a risk? In this study, it is shown what processes and justifications the minds of the pilgrims of the largest shrine in Iran refer to for presence in the shrine during the corona outbreak. The theoretical insight of the present study can be not only limited to the subject of this research and the study of individuals' actions and justifications in other different situations appears a good theme, as well.

degree of attention paid to the earthly matter, (i.e., the disease) and the extent to which it is taken seriously.

Subjects: Anthropology - Soc Sci; Sociology & Social Policy; Biopsychology

Keywords: Coronavirus; pilgrimage; holy shrine of Imam Reza; pilgrimage style; pilgrimage reasons

1. Introduction

Today, at the outset of the twenty-first century and at the apex of the human technological and medical power, Coronavirus disease (Covid-19) has transformed the modern life. The spread of any kind of pandemic and contagious disease affects various aspects of human life and people's culture and religiosity is one of the most important areas that undergoes such changes.

With the spread of Coronavirus in Iran where most of the population are Muslims, some conflicts have emerged regarding the practices which must be followed in hygiene sphere, on the one hand, and the performance of religious ceremonies on the other hand. In this regard, visiting the shrines of Imams and Imamzadehs (i.e., offspring of Imams) has posed tremendous challenges. In fact, visiting the shrines of Imams (peace be upon them) as perfect human beings and manifests of the sacred, is intertwined with Iranian art and literature in the Islamic sense and Shiite thought, and has always been some part of the Iranian public culture (Talebi & Boragh Alipour, 2015). Following the spread of Coronavirus, making pilgrimage to the tombs of Shiite Imams, which is considered one of the major ceremonies performed by Shiite Muslims, was subject to such conflicts. The shrine of Imam Reza is the most important holy site for Shiites in Iran. It is the most sacred Shiite base in Iran (Marzolph, 2014) and is one of the largest and wealthiest holy shrines in the Islamic world (Farhat, 2014). This shrine welcomes nearly 33 million Muslim pilgrims each year (Eshaghi, 2015).

Since the establishment of a religious and Shiite government in Iran in 1978 following the Islamic Revolution, the performance of rituals, especially the pilgrimage to the shrine of Imam Reza, has been widely promoted through the media, schools, textbooks, and non-textbooks. Hence, based on statistics, in these four decades, religious ritualism, especially pilgrimage, has been seriously developed in Iran. (Ghaffari, 2019). Data from field researches in Iran show that over the years after the revolution while religious beliefs (belief in the hereafter and the power of god in making changes) have decreased, ritualism (i.e. pilgrimages to the shrines and the rituals of the mourning of Muharram) has increased (Taleban & Rafiei, 2010).

The present study aims to gain an understanding of the pilgrims' justifications visiting the holy shrine of Imam Reza in the face of the infectious Covid19 virus. However, with the exception of a few short reports (Burrell, 1984; Etemad al-Saltanah, 1971; Nateq, 1979) which are mainly historical rather than analytical, the author(s) did not find any studies or documents investigating the relationship between these two variables (i.e., pilgrimage and disease) in the Iranian society. For instance, Burrell (1984) only mentions that a group of Iranian pilgrims who had visited Al-Atabat Al-Aliyat (the shrines of six Shiite Imams in Iraq) during the spread of cholera in 1904 disobeyed the border quarantine in their return to Iran and transmitted cholera to Iran. Headed by a religious clergyman named Molla Hassan Mamghani, this group believed that blocking the pilgrims' route would be an affront. The traditional view, which viewed the compulsion of observing the hygienic rules by pilgrims to be an affront, was so dominant that even the king of that time (Mozaffar al-Din Shah) was not able to confront it. Even some religious leaders considered the spread of cholera as a sign of God's dissatisfaction with utilization of light bulbs in the holy shrine of Imam Reza. In addition, in his memoirs, Etemad al-Saltanah (1971) has referred to the quarantine of Mashhad during the spread of Cholera. In another study, Nateq (1979) solely mentioned that cholera entered the city of Boushehr by a pilgrimage convoy from Al-Atabat Al-Aliyat, but he has not pointed to the pilgrimage aspects of this incident.

Based on the points mentioned here, this study has attempted to adopt a new perspective on the studies of religion and disease and also seeks to respond to the question relating to the influence of Coronavirus on the pilgrims' reasons for their pilgrimage to the shrine of Imam Reza. To the best of the researchers' knowledge, no research similar to the topic of the present study was found and it seems that the novelty of Coronavirus disease can, to some extent, justify the dearth of studies in this field.

One major challenge arising from the spread of Coronavirus within the cultural atmosphere of the Iranian society concerns the way that this issue should be dealt with in religious environments, such as mosques, Friday prayers, and shrines of Shiite Imams. In this regard, the health officials and hygiene experts warn about the dangers of this disease and the need for avoiding any sort of congregation and gathering and make recommendations for closing the religious sites or introducing limitations. However, some pious individuals and officials of religious affairs refuse to accept these limitations and to ban entry to religious sites. It appears that this divergence of opinions is between two approaches: there are some citizens who, by relying on a sanctimonious affair, consider Imams to be mediums of divine blessing and believe in the miraculous healing power of these imams (Yousofi et al., 2012) and the other side is comprised of the individuals who have focused their attention on the disease and consider it to be a dangerous and worldly matter. Considering that human body is the most important transmission method for this virus and the pilgrimage process engages pilgrims' bodies to a large extent (Eshaghi, 2019), it seems important to conduct research on the methods of interaction between pilgrims' body and religious sites and also on pilgrims' justifications for performing religious ceremonies during this pandemic.

Therefore, considering the subjective aspect of pilgrimage, the aim of the present study is to investigate pilgrims' justifications and reasons for visiting the holy shrine and also their understanding of the sacred place (a divine matter) and Coronavirus disease (an earthly or temporal matter). To this end, the following research questions were arranged to be answered in this study: How do the individuals still visiting the holy shrine of Imam Reza (i.e., pilgrims) following the spread of Coronavirus in Iran, view the disease and the divine matter? During the spread of this virus, how and based on which methods are pilgrims justifying their presence in the holy shrine?

2. Study background

The studies conducted on pilgrimage and the influence of infectious diseases on it have mainly been focused on medical and public health spheres (Aldossari et al., 2019; Amini et al., 2014; Mirzaei & Abdi, 2020; Nooh et al., 2020; Qanta & Memish, 2020). For instance, Mirzaei and Abdi (2020) conducted a study on the spread of influenza among Iranian pilgrims during Arbaeen (the fortieth day after the martyrdom of Imam Hossein) and made some personal hygienic recommendations for controlling this disease. In another research, Aldossari et al. (2019) studied pilgrims' general health during the annual Muslim Hajj ceremony and suggested that such a congregation requires international cooperation so that the outbreak of any potential disease would be curbed (Aldossari et al., 2019). In an important publication, Qanta and Memish (2020), with a fifteen-year expertise in investigating diseases during the Hajj ceremony, recommended that the 2020 Hajj should be suspended due to the outbreak of Covid19. With regard to the influence of Covid19 on the closure of religious sites, their study is similar to the present one; however, they considered this issue from a public health and medical perspective and not from a psychological vision.

In addition, some studies have been conducted on disease anthropology (Brown et al., 2011; Johnston & Low, 1984; Langdon & Wiik, 2010; Inhorn & Brown, 1990) where the influence of pandemic diseases on cultural changes in society and the role of anthropology in understanding these phenomena constituted the main themes. In terms of studying the influence of diseases on the culture of societies, these studies are very similar to the present one since changes in the religious behavior of community members are considered to be among the cultural elements of each ethnicity.

Moreover, the changes in pilgrims' behavior have received attention within the empirical realm of pilgrimage studies, as well. For example, Fazeli and Akbari (2017) investigated pilgrims' behavior and their understanding of making pilgrimage to the holy shrine of Imam Reza in the modern era. In fact, they tried to establish a relationship between the act of pilgrimage, modernity, and conventionality in contemporary Iran. Having classified pilgrims as traditional, modern, and tourist pilgrims, they sought to understand these semantic changes. In the same vein, Shariati Mazinani and Gholamreza Kashi (2015) conducted a study entitled socialite and religious ceremonies to understand the relationship between ceremonies and the semantic world of the pilgrims who assigned an aura of sanctity to the individuals or places that had not been deemed sacred by their religious traditions. In fact, these are considered as the changes coming into being in line with the modernization of the present world that focus on the invention of a new experience regarding spirituality and religiosity. In the same way, Hill-Smith (2011) tried to offer an explanation about a new tool, called the Internet and also changes in the behavior of modern pilgrims. In fact, he strived to understand the online pilgrimage experience and the entry to a new world in this field. Investigating the relationship between pilgrimage, pilgrims and the modern world is the main characteristic of all the three aforementioned studies. Since the objective of this study is to gain an insight into the pilgrims' understanding of the pilgrimage action, the three studies reviewed here bear some resemblance to the present study. However, this study should be distinguished from the prior ones as it investigates the pilgrims' rationalities regarding sanctity which are influenced by the spread of an infectious diseases and probes the reasons for making pilgrimage during such a dangerous situation.

3. Pilgrimage and cognitive dissonance theory

The main purpose of this study is to describe the pilgrims' justifications for attending the shrine (as a public and relatively crowded place) during the corona outbreak. In this regard cognitive dissonance theory seems helpful.

Cognitive dissonance theory whose initial outline has been proposed by Festinger (1957), shows that when the cognition or action performed by an individual is deemed to be negative, irrational or dangerous, the individual faces cognitive dissonance. In fact, a kind of contradiction and some lack of mental congruity co-occur and, as a result, negative feelings are brought about in the individual. A common method that is used to overcome such negative feelings is to refute the negativity of the action. For instance, Biek et al. (1996) reported that the individuals who are aware of the risks posed by AIDS but do not use contraceptives in their intercourse (in line with their habits or socialization, or ...) try to portray contracting this virus as unlikely or improbable and downplay the risks posed by it. Individuals are inclined to render the action which leads to dissonance (namely an action which is deemed wrong but is (is going to be) performed in line with individual's preferences, habits, or something similar) as an entity with low risk, low importance or even unimportant. This leads to the reduction of its negativity and, hence, regain of positive feeling about the self (Goleman, 1982).

All these mean that individuals are biased in processing information and distort the information in such a way that it is in line with their pre-established thoughts (Edwards & Smith, 1996; Lord et al., 1979). The way people interpret information depends on the depth of their commitment to a specific belief or action. Those who are highly committed to religious issues, regardless of the strength and balance of the opposing arguments, would never look at an issue from the opposing perspective, which means that a large part of human behavior is not rational, although it might seem to be rational (Aronson, 2014, pp. 212-215). They are inclined to portray beliefs, ceremonies, and accustomed methods as rightful, self-evident and natural. Cognitive distortion and selective information acquisition can lead individuals not to take objective dangers and threats seriously or even can pave the way for the death of individuals (Aronson, 2013, p. 219).

Thus, Pilgrims during Corona outbreak are known as the individuals who, in case of performing an action which seems to be irrational (such as increasing the probability of contracting the disease both for themselves and others), try to resolve and reduce this dissonance through different methods and strategies in such a way that their previous intuition and action undergo minimum changes. In fact,

they use such methods that can be explained by the theory of cognitive dissonance, like “denying the irrationality of that action”, “making it seem insignificant” or “forcing oneself”, and “deprivation of authority from the self” when(and after) performing that action (Aronson, 2014, p. 259).

4. Method

In this study, a mixed-method, employing both quantitative and qualitative approaches, has been used. In the qualitative phase, practical changes in pilgrimage and pilgrims’ justifications for their presence in the shrine were studied through observation and interview. In the quantitative phase, a survey method was employed.

In the survey phase, the population of the study consisted of all the pilgrims who visited the shrine of Imam Reza from 28 February 2020 to 4 March 2020. From among this population, 963 individuals were randomly selected through time sampling. The researchers tried to be present at the four main entrances of Imam Reza’s shrine during the rush hours when most pilgrims came for pilgrimage. They selected one person at random every 7 minutes. In addition, the researchers had been asked to choose respondents from both genders and different age groups in order to maintain the maximum diversity in the sample. In this method, it was sought to gain a comprehensive and generalizable view of the pilgrims’ understanding of the pilgrimage action in the shrine of Imam Reza during the days of this virus.¹ In the next step, a deep understanding of this view is achieved using a qualitative research method.

In the qualitative phase, in-depth individual interviews were conducted from 26 February 2020 to 1 March 2020. During the interviews, pilgrims’ actions in the shrine were observed and the participants were interviewed during their visit to the shrine. In-depth and semi-structured individual interviews were conducted with 46 pilgrims regarding the main research questions where each interview lasted about 30 minutes. The interviews as well as the coding were conducted by the authors of the present paper. No one other than the interviewer and the interviewee was present during the interviews. The interviews were recorded by the consent of the interviewees and immediately transcribed and coded. Due to the normative pressure that arose in the early days of the corona virus outbreak, some of the interviewees were reluctant to introduce themselves. Hence, the objectives of the interview were clearly and comprehensibly explained in all interviews emphasizing their right to participate or withdraw at any time. Thus, verbal consent was obtained for the interviews. The participants were asked to participate in the interviews using any small name they wished without their last names. The interviewees consisted of 16 males and 30 females and were in different age groups. Seventeen interviewees were residents of Mashhad and 29 ones had come from other cities.

In this section, the sample units were selected in different locations of the shrine and had the greatest variety in terms of age and gender. Moreover, every day after the conduct of the interviews, they were implemented and coded. After about 30 interviews, thematic repetition emerged, 16 others were interviewed for more confidence. The following are the background specifications of the samples in the qualitative section (Figure 1)

Figure 1. Background specifications of the samples in the qualitative section

Specifications	Age					Residence		Education						
	14-20	21-30	31-40	41-50	Above 50	Adjacent	Pilgrim	Below high school	High school	Bachelor's	Master's	Theological seminary	Unknown	
Female	30	3	8	7	6	6	8	22	1	3	4	1	0	21
Male	15	3	5	4	1	2	7	8	1	3	6	1	4	0
Total	45	6	13	11	7	8	15	30	2	6	10	2	4	21

Thematic analysis was employed for the analysis of the qualitative data. It is noteworthy that thematic analysis is an induction-based analysis in which analytical typology is achieved through data classification and the identification of within- and between-data patterns. It is based on a multi-step coding process that aims to provide an understanding of the core content of the data. This type of analysis seeks to find patterns in the obtained data and extract themes from the data.

The present research has employed the Attride-Stirling coding method. This method of coding is based on forming thematic networks and is used in different kinds of research. The thematic network consists of three themes and concepts which are basic, organizing and global themes. Basic themes entail the key points and codes in the text. After studying the text thoroughly, the smallest codes should be identified and selected as a basic theme. Organizing themes include those themes which are derived from the combination and summarization of basic themes. Basic codes should be reviewed and similar concepts have to be put together. The researcher must then choose an appropriate name for each category of codes based on his/her recognition ability and mastery. Finally, the global themes include the super themes which govern the text as a whole (Attride-Stirling, 2001).

5. Findings

5.1. Findings of the survey phase

In this section, it has been sought to respond to this question: What understanding have the pilgrims' had about the availability of the disease in the shrine during the increasing trend of Coronavirus. A sample of 963 individuals, out of whom 40.6% were male and 59.4% were female, was chosen for this phase of the research. On average, the respondents were 40 years old and most of them were placed in the 35-to-45-year-old age group. The majority of them held a high school diploma or a lower education degree. Moreover, 55 percent of the sample units were residents of Mashhad and the remaining 45 percent had come from other cities and areas (Table 1).

Table 1. To what extent do you agree or disagree with the following statements?

Disagree	Neither agree nor disagree	Agree	Item
61.4	8.9	29.7	The shrine of Imam Reza is free from any sort of contamination and does not need to be disinfected.
52.0	11.2	36.7	The shrine of Imam Reza has a healing power for patients and no one will contract any disease in this place.
5.9	4.6	89.5	In such circumstances, Astan Quds Razavi (the custodian of Imam Reza Shrine) should obey the rules and guidelines set by the Ministry of Health.
18.2	6.4	75.4	In my opinion, in such circumstances, pilgrims should avoid crowding around the tomb and pay their respect to Imam Reza from less crowded areas, such as different courtyards.

Pilgrims’ opinions about four different domains, which can be observed in the above table, were examined where the participants were asked to express their agreement or disagreement with the statements. While nearly 90 percent completely agreed that “In such circumstances, Astan Quds Razavi (administrative organization of Imam Reza shrine) should obey the rules and guidelines set by the Ministry of Health”, nearly 30 percent of pilgrims who visited the shrine during the spread of Coronavirus in Iran believed that “The shrine of Imam Reza is free from any sort of contamination and does not need to be disinfected”, and 37 percent of them believed that “No one will contract any disease in this place”.

The results of bivariate tests showed that there is a statistically significant difference between males and females in their response to the statement “The shrine of Imam Reza is free from any sort of contamination and does not need to be disinfected” where the females tended to agree more with the statement.² Moreover, there was a statistically significant difference in terms of participants’ levels of education and their response to this statement and individuals with a seminary degree constituted the group with the highest degree of agreement with the above statement and it was followed by the individuals with a primary school education or illiterate individuals.³ The groups with the highest level of disagreement with the above statement were comprised of the individuals with an associate’s degree, university students and those with a master’s degree or higher.

Concerning the statement “The shrine of Imam Reza has a healing power for patients and no one will contract any disease in this place”, it should be mentioned that there was a statistically significant difference between males and females⁴ opinions where females showed higher rates of agreement with this statement. In addition, illiterate individuals or those with a primary school or seminary education showed higher levels of agreement with this statement while this difference was also statistically significant.⁵

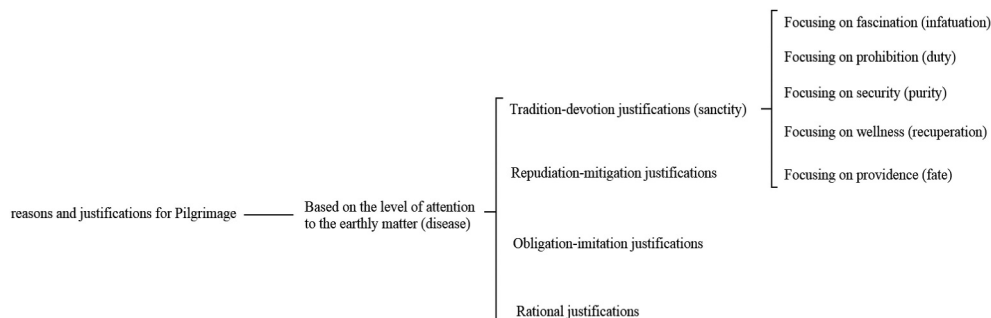
There was no statistically significant difference among various age groups, genders or levels of education in their response to the statements “Astan Quds Razavi should obey the rules and guidelines set by the Ministry of Health” or “In my opinion, in such circumstances, pilgrims should avoid crowding around the tomb and pay their respect to Imam Reza from less crowded areas, such as different courtyards”.

5.2. Findings of the qualitative phase

The rationalities for pilgrimage refer to the reasons and justifications that pilgrims provide for visiting the holy shrine of Imam Reza. These are referred to as visiting justifications for the sake of brevity. After studying and analyzing the conducted interviews and observations, the following conceptual model was obtained with regard to the reasons for performing the pilgrimage action.

As it can be seen in [Figure 2](#), four visiting justifications are obtained based on the level of attention that pilgrims of the holy shrine of Imam Reza (performers of the divine action) assign to

Figure 2. Conceptual model of the reasons for pilgrimage during the spread of Coronavirus.



the Coronavirus (the earthiness element). These four justification methods are as follows: tradition-devotion, repudiation-mitigation, obligation-imitation, and rational.

The tradition-devotion justification method, which is identified by the central concept of sanctity, is comprised of five sub-concepts, namely Concepts: fascination (infatuation), prohibition (duty), security (purity), wellness (recuperation), and providence (fate).

It is noteworthy that this classification of justifications has an abstract and qualitative aspect, and the boundaries between the concepts specific to each category, like quantitative findings, are not quite clear and distinct from each other. However, there is some degree of overlap between some themes (while being different and distinct). In the external reality, one may use an integration of the obtained justifications with or without a tendency towards one category as the central justification. Thus, the proposed classification is an ideal version of the variety of justifications observed between the interviewees and is, indeed, the result of the themes and contents derived from the interviews during the coding process.

5.2.1. *Tradition-devotion justifications (sanctity)*

Tradition-devotion justifications can be defined by the concept of sanctity. Such justifications refer to the reasons that favor the side of religion and the divine world in the duality of science and religion (tradition) or that of earthiness and divine. Here, sanctity, highness, servitude, devotion, triviality, being fused into a greater good, and having no volition take precedence over responsibility, aptitude, volition, and the ability to control the disease. Such justifications turn their back on the disease and embrace the divine matter and consider pilgrimage to be a matter of paramount importance which should not be abandoned under any circumstance. By assigning a sublime aura to the holy realm together with pilgrimage, such justifications deem the pilgrimage environment to be free of any sort of disease or contamination or consider its stature to be a force that reduces the effect of disease. When pilgrims justify their presence based on the sanctity of pilgrimage, they are not speaking about a single topic, or more specifically, about a single aspect of a single topic. In fact, each one has a specific characteristic or aspect (s) of that concept in mind, and together, they create the concept of sanctity. As it was mentioned previously, the following five major concepts are at the center of various tradition-devotion justifications: fascination (infatuation), prohibition (duty), security (purity), wellness (recuperation), and providence (fate). It should be reiterated once more that although the differences among these five themes form the five different categories of justification, there is always a degree of semantic overlap and approximation among them. This so because all the themes can be defined under the general concept of “sanctity”

5.2.1.1. *Justifications focusing on fascination (infatuation).* The concept of fascination (infatuation) deals with affection and fondness. One argues that his/her presence in the shrine derives from his/her love for the subject of pilgrimage. Fascination and keen interest in the sacred matter attract pilgrims to the shrine and justify their presence. Such a pilgrim is a lover whose presence is defined by the existence of the beloved one; s/he is dependent upon the beloved one and is ready to accept any potential dangers on his/her way to reach the beloved. Some examples of justifications focusing on fascination (infatuation) are as follows:

- (1) *I am not saying that you won't contract the disease (in the shrine), but even if it happens, it has been for the holy Imam. Whatever happens on this way is nothing but blessing.* Male, 39
- (2) *Even if there is fear, while making a pilgrimage to the holy shrine of Imam Reza, one accepts it wholeheartedly. Yes! I myself touched (the doors and walls of the shrine), but I'm not afraid since it's been for visiting Imams.* Female, 25
- (3) *I love Imam Reza. How can we give up on Imam Reza? We owe our entire being to Imam Reza. We are here due to his presence.* Male, 19

5.2.1.2. *Justifications focusing on prohibition (duty).* This type of justification is not about love and fondness, but it is rather spoken about a red line. Here abandoning pilgrimage owing to the spread of Coronavirus is deprecated. For those who utilize such justifications, abandoning the pilgrimage is the red line. In this view, the disease is considered to be serious as long as it does not stop people from visiting the shrine since a shrine bereft of crowds is synonymous with isolated pilgrimage which is a disregard for one of the major pillars of Shiism. To maintain this red line as a taboo, pilgrimage continues as a duty. Here, pilgrimage is assumed to be a duty and obligation instead of a mystical or amorous state. Some of the justifications provided by the individuals in this group are indicative of a conspiracy-laden understanding of the disease. The spread of Coronavirus is deemed to be a plot whose aim is to close down religious ceremonies and distance people from religiosity. Therefore, it is the duty of firm and honest believers not to abandon the shrine and to continue their pilgrimage under any circumstances at any cost. Instances of such justifications are as follows:

- (1) *We are fulfilling our duty (pilgrimage) and performing prostration. They know themselves. We put our faith into the hands of God, first, and into the hands of Imam Reza after that.* Female, 38
- (2) *I myself didn't use [mask or gloves] since it creates a sense of fear and terror.* Male, 35
- (3) *It [pilgrimage] is necessary. If it was not necessary, it would be declared a permissible and not a recommended action. It is necessary and hence recommended. Visiting the shrine is also a necessity. It is a place that we have to visit. It is our duty. Otherwise it wouldn't be highly recommended and emphasized in Islamic narratives.* Male, 39
- (4) *This is what enemies want [to stop us from visiting the shrine]. They want to separate us and to chip away at our spirituality ... We visited the shrine in the morning and saw it empty of people; it made us sad. We didn't intend to come back in the afternoon; but to make it more crowded, all four of us came back.* Male, 30

5.2.1.3. *Justifications focusing on security (purity).* In this tradition-devotion concept, neither the amorous state nor the duty of pilgrimage as a divine matter is pointed out, but rather its aspect of being a refuge and sanctuary. In this type of justification, pilgrimage is understood to be a pure sanctuary during which individuals are free of sufferings and hardships and cannot be tainted by any disease; indeed, the shrine is viewed as a place where diseases are repelled. Pilgrimage is like a secure stronghold against heinous corporeal matters. It should be noted that the justifications that focus on the purity and security of pilgrimage are distinct from those relating to the recuperative and healing nature of pilgrimage (i.e., the next classification that will be explained under its pertinent heading). According to this type of justification, pilgrimage is similar to a protective vest or disinfectant. Some instances of such justifications are as follows:

- (1) *Prayer and pilgrimage, like gloves and masks, are some parts of preventing and treating the disease. Just as one washes his/her hands to prevent the disease, one should pray and establish a relationship with God and Ahl al-Bayt (family of Prophet Muhammad) to repel illness.* Female, 20
- (2) *This place is some part of paradise. It's a safe and wholesome place. Even if the virus exists, entering this place will make it lose its impact ... Just passing through the gates and entering the courtyard takes you to another world. It is the place where angles fly; divine mercy, wellness, and health descend; and any contaminations or microbes are absent. Even if it exists, it will lose its effectiveness and will become ineffective.* Female, 54
- (3) *We should resort to Ahl al-Bayt, to their shrines. In such difficulties, we should come to Imam Reza shrine instead of abandoning it. It is our firm belief. There is a narration from Imam al-*

Sadiq or Imam al-Baqir . . . saying that: Do not abandon the mosque even if there is cholera in the mosque. Male, 35

(4) *It has also been scientifically proven and ma Just passing through the gates and entering the courtyard takes you to another world. It is the place where angles fly; divine mercy, wellness, and health descend; and any contaminations or microbes are absent. Even if it exists, it will lose its effectiveness and will become ineffective. ny scientists have asserted that no microbe exists near the tomb of Imam Reza. Male, 25*

(5) *[Although] the disease exists; Imam Reza has the upper hand. When we enter the shrine of Imam Reza and its courtyards, Imam Reza himself will definitely bestow favors upon us. A host will never let his guests have a bad time. It is immoral to visit the shrine and, God forbidden, be harmed by it. Male, 30*

(6) *We even kiss the walls and doors. This is the safest place in the world. Male, 51*

5.2.1.4. *Justifications focusing on wellness (recuperation).* Here the divine matter is understood as a healing and recuperative existence, which is one step beyond the justifications of the previous step (i.e., security and purity). Such justifications are focused on the problem-solving and salutatory nature of pilgrimage. The pilgrimage action reduces hardships and alleviates pains. In such justifications, pilgrims consider the place of pilgrimage to be a healing place and pilgrimage to be a problem-solving source. Moreover, they may find the acts of pilgrimage to be effective in reducing the possibility of being infected with the disease. In the previous concept, i.e. security and purity, the immunizing effect of the sacred matter was highlighted, and here, that is wellness and recuperation, its therapeutic effect is emphasized. When it comes to the category of wellness and recuperation, pilgrimage does not have a preventive effect (like a vest or disinfectant), but beyond that it has a recuperative and healing effect (something similar to pills and medication). Instances of such justifications are as follows:

(1) *Ever since childhood, for all our needs and diseases, we were healed in the holy shrine. How can we stop visiting the shrine now? Imam Reza even heals non-Muslim foreigners, let alone us. Female, 60*

(2) *In fact we've come here to ask Imam Reza this very thing to wipe out this disease; Female, 18*

(3) *Many people come here to be healed. To say that we've gotten sick in here is sort of laughable; Male, 39*

(4) *Cancer patients come here and are healed. We shouldn't give up on this place. Male, 35*

(5) *There is no need to wear masks or gloves. The physician of the whole world is here. Male, 30*

(6) *They come here and are healed by Imam Reza. It is not right (to use hygienic materials). Male, 53*

5.2.1.5. *Justifications focusing on providence (fate).* Such justifications refer to the power of the sacred matter in determining one's fate and are indicative of a sort of destinism on the part of pilgrims. Accordingly, one has no volition or free will in contracting or not contracting the disease. There is a higher and superior power that dominates all affairs and controls them all. The pilgrim is a servant and submits to the fate and providence that is written by a sacred and supernatural hand. In fact, the pilgrims deem their presence in the shrine justified since they assume no role in defining the situation and contracting the disease neither for themselves nor for others. Instances of such justifications are as follows:

- (1) *No matter how often you wash your hands or wear a mask, there is still a chance to get sick. As the saying goes, what God decrees shall come to pass. Many people didn't pay attention and remained healthy and many people stayed at home to prevent the disease, but just accelerated their death.* Female, 34
- (2) *The disease is in God's hands. Health is in His hands, too. Without His permission, a single leaf wouldn't fall from a tree, you need to resign yourself to Imam Reza.* Male, 22

5.2.2. Repudiation-mitigation justifications

If tradition-devotion justifications lead to the action of pilgrimage by emphasizing the sublime nature of the “sacred matter” and highlighting the existence of a “supernatural” power, the repudiation-mitigation justifications rationalize pilgrimage by degrading the “earthly matter” and belittling the “real” existence. In fact, in the first type of justification, pilgrims have turned their gaze toward the sky and come to the shrine since they consider pilgrimage to be a matter of significance; however, in the second type of justification, pilgrims turn their eyes toward the earth and visit the shrine since they trivialize the disease and its effects. Although these are both sides of the same coin and constitute the negative and positive aspects of a single approach, this difference in choosing one aspect to emphasize and justify the pilgrimage is a significant point that represents the difference in one's position in the divine-earthly vector: one who considers the disease more as a reality which is insignificant is one step closer to the earthly matter than one who considers the disease more as a sacred matter and a supernatural and sublime phenomenon. As a result, there is also some difference between these two types of justification, despite their closeness. These types of justifications deviate from the divine world and come close to the earthly matter (are focused on the disease not on the subject of pilgrimage). Here the pilgrim strives to downplay the risk of the disease and assume it to be easy to avoid, contain and cure, or at a higher level, s/he tries to question its existence if possible. By adopting such a view, the pilgrim justifies his/her presence in the shrine. Instances of such justifications are as follows:

- (1) *The social media have created a lot of hype; they tend to exaggerate everything. If you wash your hands and keep calm, nothing will happen.* Female, 33
- (2) *Influenza is more dangerous than this disease, but have you ever seen anyone not visiting the shrine for that?* Female, 23
- (3) *None of the people around us got this disease and I haven't seen any patients in person.* Male, 53
- (4) *We went everywhere and visited many places but didn't get the disease. How can we get it here?* Female, 55
- (5) *One should be physically very weak to be affected by this disease. It is said that the observance of hygienic practices suffices.* Male, 33
- (6) *You shouldn't take this disease seriously. If you take it too seriously, you will contract it. In psychology, which is my field of study, it is said that you attract what you expect. If you're too concerned with the disease, you may really get sick. If we try not to be pessimists, nothing will happen.* Male, 26

5.2.3. Obligation-imitation justifications

These justifications come one step closer to the earthly and worldly matter, that is, the contamination and disease in such a manner that contamination and disease are no longer viewed in a degrading and denialistic light. Here no effort is made to denigrate or belittle the disease; rather, its existence, influence, and even its concomitant dangers are fully recognized. This view tries to provide a rationale for visiting the shrine by accepting the disease and presupposing its dangers in the first place. Here, the proposed reasons are indicative of some kind of obligation as if individuals visit the shrine because of being in a compulsory situation or having no other alternatives. Some of the justifications that are placed in this category convey a concept of imitation. In such

circumstances, the pilgrim makes use of others' actions as a pretense for his/her pilgrimage and draws on the presence of others as a justification for and projection of his/her own presence. Instances of such justifications are as follows:

- (1) *When the issue of Coronavirus came to light, we had bought our tickets. It would have been very expensive to cancel them. We would be fined nearly ten million Rials. Female, 40*
- (2) *We came in a group; I cannot say that I'm not visiting the shrine. Female, 14*
- (3) *You cannot stay at home all the time and do not visit anywhere. Male, 61*
- (4) *I'm visiting the shrine with stress and anxiety, but what else can I do? I seek consolation in Imam Reza. Female, 58*

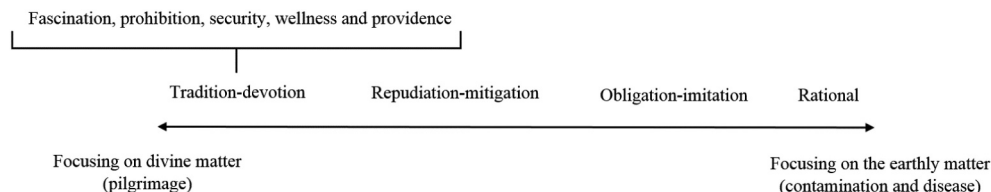
Instances of imitation justifications are as follow:

- (1) *In these times, all these people are here to visit the shrine; it's not just us. Thousands of people have come; we're like them too. Female, 24*
- (2) *You can see that the number of servants in the shrine has not decreased, maybe even it has increased. They know better than anyone else what is going on. Why aren't they wearing any masks or gloves? Why are they still coming to the shrine? Female, 35*
- (3) *We have been told to visit the shrine, but not to kiss the tomb or any other place. Male, 16*

5.2.4. Rational justifications

This type of justification is mainly concerned with the earthly matter, that is, the disease. According to this approach, the danger of the disease is serious and one should be aware of that. In such circumstances, individuals justify their presence in the shrine merely by adhering to preventive hygienic measures and highlighting the adoption of such measures (limitations such as putting on gloves and masks, not touching or kissing objects along with spatial limitations like being constantly on the move, not approaching the tomb, and standing away from the crowds). Similar to the justifications pertaining to the obligation-imitation category the presence of the disease and its dangers are pointed out in this type of justification; however, its severity and the attention assigned to it are higher than those of the previous category. This is so because the presence of the individual in the shrine is neither obligatory nor an imitation, but is formalized only by adhering to common hygienic practices; otherwise pilgrimage is not relevant and should not be performed. The pilgrim placed in this category asserts: I have allowed myself to visit the shrine since I have adhered to the practices which, in my opinion, are hygienic and preventive (Figure 3). Instances of this category include:

Figure 3. Categories of the justifications provided by Imam Reza pilgrims for visiting the holy shrine during the spread of Coronavirus.



- (1) *I try to sit in uncrowded locations. If it becomes crowded, I change my place. Female, 24*
- (2) *I didn't approach the tomb and paid my respects from a distance. Female, 49*
- (3) *If you visit the shrine wearing a mask and gloves, God willing, nothing will happen.*
- (4) *There is no difference between the holy shrine and other places. Is it made up of anything other than silver and metal? These can also be contaminated and one should be careful. Male, 26*

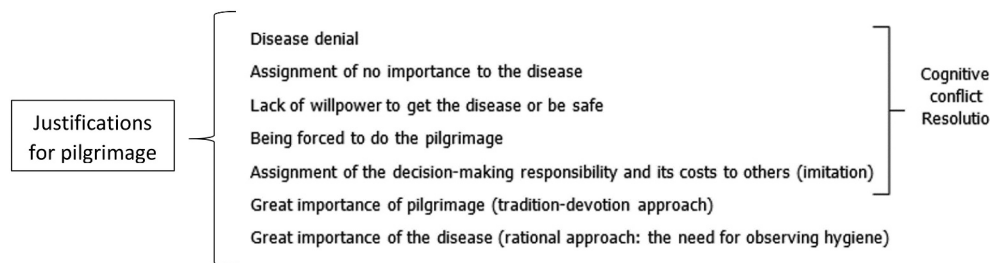
- (5) *We brought our Turbah (a small piece of clay tablet used during prayer) with us. I read the supplication from my own phone (I didn't use the shared booklets that are used in the shrine). Female, 50*
- (6) *Shiite Imams have advised us not to attend a place where the possibility of danger or disease exists or not to greet individuals with kisses when suffering from herpes. The cause-effect relationship is not aborted in the shrine. One should be careful as far as possible, there is no reason to do the otherwise. I wore gloves and didn't kiss the tomb. Making pilgrimage doesn't mean to kiss the tomb. As long as you feel the connection from a distance, it will suffice. [Viruses cannot be ineffective] because the Imam himself was poisoned. I'm sincerely devoted to Imam Reza and have come with the hope of being healed. God willing I will be healed by Imam Reza. However, [being healed and not contracting the disease are two separate things] and we need to adhere to hygienic practices. Imam always observed the hygienic rules himself, too. Male 24*
- (7) *When we kiss the doors or the tomb in normal circumstances, it is because we consider it to be a sign of devotion; otherwise, [during the outbreak of the disease] we do not insist [on doing this]. Male, 49*

6. Conclusion

According to the Iranian Students' Opinion Polling Center, in October 2020, 48% of Iranians believed that the importance of religion and God has not changed for them during corona outbreak, and about 47% of people stated that the importance of religion and God has increased for them. Only 3% believed that the importance has decreased for them (Fazeli, 2020). This shows that the importance of pilgrimage as a religious and consolation act for Iranian society has increased. On the other hand, scientific institutions forbid people from attending gatherings, especially religious places. This has created a conflicting situation among religious individuals.

The quantitative findings of the present study identified a related and highly significant conflict. On the one hand, nearly 90 percent of the respondents completely agree that, in these circumstances, Astan Quds Razavi should obey the hygienic rules and guidelines set by the Ministry of Health and 75 percent believe that pilgrims should not approach the tomb and only feeling a connection from a distance will suffice. On the other hand, 37 percent of the respondents believed that nobody contracts a disease in the shrine and 30 percent are of the opinion that the shrine of Imam Reza is free from any sort of contamination and does not need to be disinfected. Considering these statistics, how can one believe that the virus does not exist and, simultaneously, assert that hygienic guidelines should be necessarily observed in the holy shrine? It seems that pilgrims resort to various justifications and reasons in order to resolve any contradiction or justify their presence in the shrine. These justifications were classified into four categories as follows: tradition-devotion, repudiation-mitigation, obligation-imitation, and rational methods. What distinguishes these categories from each other is the degree of attention that each of the categories pays to the disease and its danger. It is noteworthy that the tradition-devotion method, in which visiting the shrine is justified by drawing on the concept of sanctity, is in itself comprised of five sub-categories, each of which focuses on a specific aspect of sanctity as the core and basis of justification. (Figure 4).

Figure 4. Types of pilgrimage justifications in Corona outbreak using cognitive dissonance theory.



The different pilgrimage justifications during the corona outbreak can be summarized as follows:

The four obtained methods of justification are explained using the cognitive dissonance theory and based on the level of significance that pilgrims place on either side of “pilgrimage-disease” duality (sacred-earthly)⁶:

Tradition-Devotion Method: In this viewpoint, pilgrimage is so sublime that the disease finds no opportunity to disrupt it, as if there is basically no contradiction between the two ones (i.e. pilgrimage and disease). In such justifications, it is believed that individuals are never exposed to the disease because the sanctity of the shrine reduces this possibility of catching the disease to zero. The degree and depth of individuals’ commitment to a specific belief or action influence the way they process information and lead to the formation of bias in them. As a result, such pilgrims’ understanding and interpretation of pilgrimage neither interferes with the act of pilgrimage nor creates any danger for the pilgrims since the sanctity of pilgrimage and its superiority to the disease are considered to be obvious and indisputable. If any contradiction is formed between pilgrimage and the disease, it is quickly nipped in the bud by shifting the individuals’ attention toward the sacred matter and its unworldly power. Accordingly, as corroborated by the cognitive dissonance theory, the individuals who feel deeply committed to religious issues regardless of the strength and balance of the opposing arguments almost always fail to fully look at the issues from another perspective. Thus, the possibility of cognitive conflicts and its concomitant negative feelings are reduced and approach to zero. In conclusion, the possibility of taking the disease into account is reduced to zero due to the individuals’ specific beliefs about pilgrimage and its rigidity; hence, making pilgrimage during the spread of the disease is justified.

Another point is that the individuals who draw on the justifications pertaining to security and wellness (purity and recuperation) strongly tend to generalize a divine and sacred state to all corporeal, physical, and spatial elements of the pilgrimage environment. The generalizability of sacred matters has the highest power in these individuals. In fact, they convey the divine feature to earthly matters to a large degree and conform them to it.

Repudiation-Mitigation Method: The cognitive conflict between pilgrimage and disease is resolved and settled by repudiating and mitigating the disease. Pilgrims engage in pilgrimage while health authorities have banned visiting shrines or any congregation, visiting the shrine means that it is possible to contract the disease or transmit it.

Now if pilgrims engage in pilgrimage just like before, cognitive dissonance is likely to emerge since they have made an unwise action and, thereby, have increased the chance of contracting and transmitting the disease. Such an image runs contrary to the logic and is unpleasant to the individual’s rationality; thereby, it conveys a negative feeling to the individual. In this regard, the individual resolves this conflict by adopting the repudiation and mitigation strategy. As the cognitive dissonance theory argues, pilgrims restore their positive feelings by trivializing and downplaying the chance of contracting the disease in order to escape from the negative feeling arising from involvement in an irrational action. By downplaying the disease, the conflict available between the self (tendency to go on pilgrimage) and the objective world (possibility of disease) is resolved. In this way, it justifies pilgrimage.

Obligation-Imitation Method: This method resolves the cognitive conflict resulting from the pilgrimage-disease duality neither by assigning superiority to pilgrimage nor belittling the disease. Another strategy is to unburden the individual from the pressure arising from this conflict and somehow deprives the individual of any authority. Individuals in this method believe that they are obliged to engage in pilgrimage and, therefore, their negative feeling about conducting a contradictory action is reduced. In this vein, Aronson (2014, p. 295) conducted an experimental study and stated that individuals resolve this conflict and reduce their own negative feelings by reminding themselves that they had no volition in performing the action when they feel coerced to

perform an action in a real situation that is cognitively in contradiction with other behaviors or knowledge of theirs. Similarly, in the present study, some pilgrims considered themselves to be obliged and stated that they had no other options but to acquiesce to pilgrimage. In this way, they regain a positive feeling and justify their action. In addition, another method which is very close to the mentioned strategy but has some subtle differences is that individuals evade the decision-making responsibility and delegate it to another individual who they usually respect. Therefore, the individuals nullify the possible negative feeling arising from an unwise or incorrect action by not considering themselves as the final decision makers. This strategy differs from the previous one in that the individual in the former was obliged, but there is no obligation in the latter and only a sense of voluntary acquiescence exists. In summary, assuming no responsibility to oneself either through obligation or by acceding to someone else's opinion is a method through which the pilgrims settle the cognitive dissonance and justify the act of pilgrimage.

Rational Method: This method can be considered as the opposite of tradition-devotion method. Here, in the pilgrimage-disease duality, any potential cognitive conflict is resolved by assigning importance to the disease. The belief of such individuals in the existence of the disease and its threat is so strong that engagement in pilgrimage is not rational in their opinion unless hygienic practices (measures that they think prevent the disease) are fully observed. In this way, the possibility of negative feelings created by the cognitive conflict, that is, the feeling created by making a pilgrimage during the spread of the disease, becomes low in these individuals. Even if such a feeling exists, individuals rationalize their action and resolve the conflict. Individuals in this category provide justification from within the religion and rationalize their pilgrimage by reminding themselves of the health advice offered in Hadiths narrated from Shiite Imams and adhering to them. In this way, they resolve the conflict between the divine (pilgrimage) and the earthly matter (disease) through a religions interpretation of adherence to hygienic measures.

It appears that individuals using this method of justification opt for the generalization of the divine matter to worldly objects to a smaller extent compared to previous groups, especially the tradition-devotion category. The holy shrine and its material components are solely perceived as the symbols, monuments, and sings that liven up the recollection of a sacred and supernatural matter which is far away from the individual and are deemed to be sacrosanct owing to their commemorative nature. In fact, for these individuals, the doors and walls of the shrine are no different from any other doors or walls. Their difference merely lies in the point that various parts of the shrine are sings and monuments of a divine matter, which are bereft of their sources of sanctity and holiness during the spread of the disease. This means that the disease has somehow overcome the divine aspect of objects.

Early in the outbreak of the coronavirus in Iran, when medical authorities and the mainstream media invited people to stay home and away from public places, and when there were whispers of closing of the shrine of Imam Reza (AS) and this was not realized yet, a number of people still went on pilgrimage and were present in this public space.

From the point of view of an outside observer (an observer with modern intellect), this seems contradictory with logic, because it means increasing the likelihood of illness for oneself and others. Thus, the authors decided to get a description of the pilgrims' opinions about the disease, the pilgrimage and the holy place and their relationship with each other and to understand how this apparent contradiction is resolved and how these people would justify their dangerous presence in the shrine these days. The items presented above were a categorized descriptions of the pilgrims' justifications that are made easier to understand through the theory of cognitive conflict.

Regarding the limitations of this study, it is necessary to mention the conditions of the interview (place and time of the interviews), which in some cases made it difficult to conduct individual in-depth interviews in its full form. The interviews were conducted when people wanted to make a pilgrimage or return from it, and this sometimes made it difficult to conduct long interviews with them. Another point is that the findings of the present study focus on the justifications that the pilgrims have given to the authors

“after the performance of the action of pilgrimage” (ie, presence in the shrine) as the reason for their action, thus, the present research is not claiming to have found explanations and the real reasons for their presence in the shrine. This study also makes the attempt to provide an accurate and categorical description of the differences between the justifications. However, based on the findings the researchers do not claim to have found the main and exact reasons for the differences regarding why some people tend to have one style of justification (for instance, some tend to pay more attention to the sacred actions) while others justify pilgrimage in another way (and emphasize the materiality of the disease and its danger). In fact the present paper is reason-based rather than cause-based. This is in line with the Cognitive Dissonance Theory which presents justifications related to an action “after an action is performed” and does not provide us with the “reasons to do an action”.

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Notes

1. The survey data were analyzed by the SPSS software.
2. Sig = .001 chi-Square.
3. Sig = .000 (KENDALL CORRELATION COEFFICIENTS).
4. Sig = .000 chi-Square.
5. Sig = .000 (KENDALL CORRELATION COEFFICIENTS).
6. Note that we do not explain why people pilgrim and visit the shrine during Corona crisis. We do not discuss causes. We just try to understand and describe the ways that pilgrims justify their action.

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