

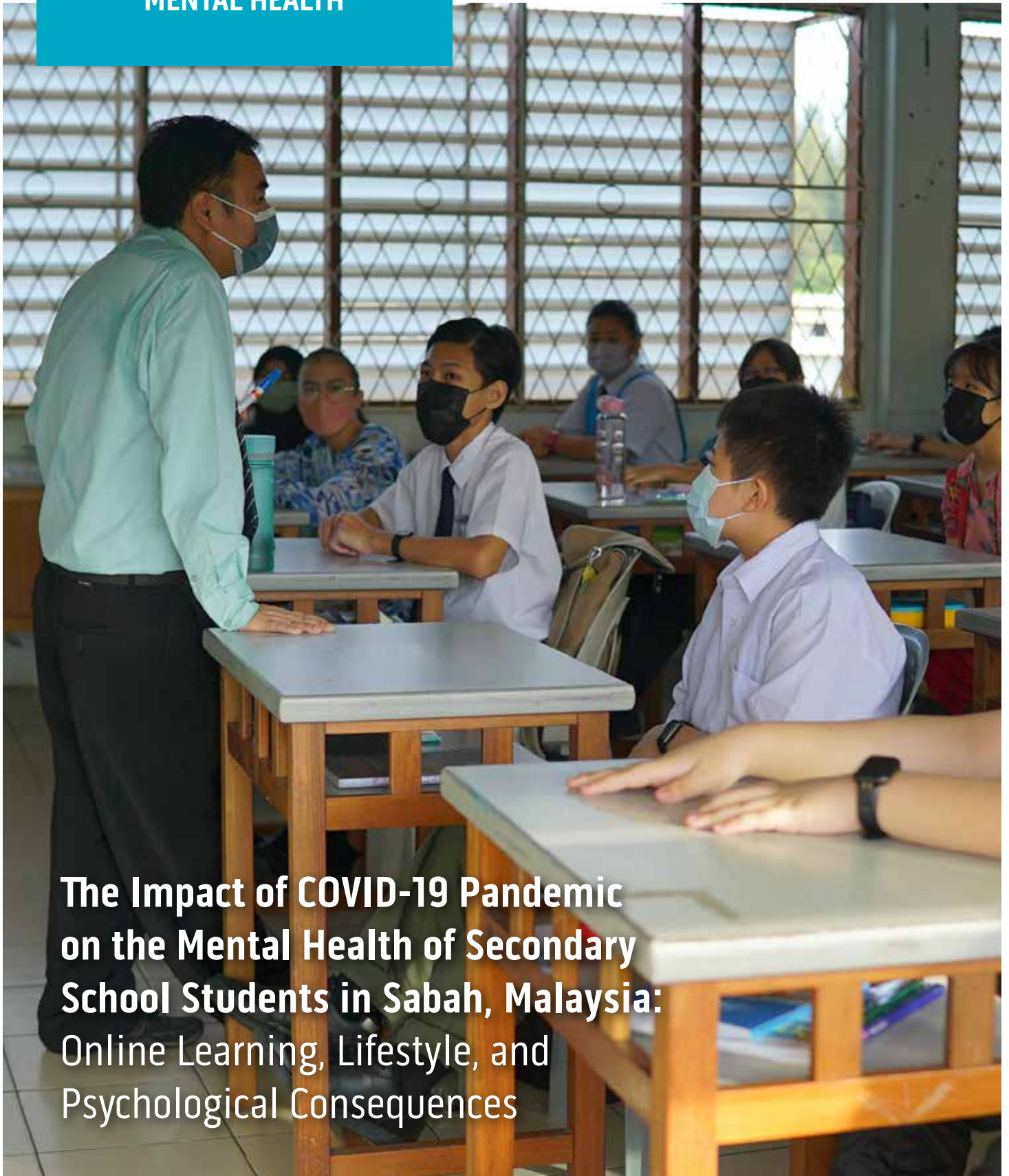
RESEARCH SUMMARY



MENTAL HEALTH

YAYASAN
HASANAH

 A foundation of Khazanah Nasional



**The Impact of COVID-19 Pandemic
on the Mental Health of Secondary
School Students in Sabah, Malaysia:
Online Learning, Lifestyle, and
Psychological Consequences**

ACKNOWLEDGEMENTS

Summary Reports are abbreviated research documents commissioned by Yayasan Hasanah to support evidence-based policy recommendations for its impact areas and the nation. These reports may not necessarily reflect the official views of Yayasan Hasanah.

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INTRODUCTION

When the COVID-19 pandemic hit, the education sector was not exempted. With lockdowns in place, schools shut, and everyone confined to their homes, emphasis was placed on preventing contact with infected patients.

At least 87% of students worldwide, or 1.5 billion students, were affected by school closures as a result of the pandemic (United Nations Educational, Scientific and Cultural Organization, UNESCO). Traditional learning methods were replaced with online classes, and

numerous studies have shown its adverse impact on students' learning, mental health and overall wellbeing.

The restrictions and physical isolation imposed significantly impacted mental health and general wellbeing of the public. Studies have shown an increased risk of death due to inactivity, obesity and substance addiction (Holt-Lunstad, 2022) and isolation has been linked to dread, tension, grief and depression (Shanmugam et al., 2020).



At least
87%
of students worldwide, or
1.5 billion students, were
affected by school closures
as a result of the pandemic



In this study commissioned by Yayasan Hasanah, the impact of the COVID-19 pandemic on secondary school students in Sabah was analysed, with a focus on their mental health, education and lifestyle. Students and support systems were also assessed to determine their readiness for a post-pandemic education environment.

A total of 1,069 questionnaires were collected from nine secondary schools in both urban and rural areas along Sabah's West Coast Division from April to August 2022.

Findings revealed concerning levels of depression and anxiety, with 15% reporting moderate to severe clinical insomnia. More than half complained of a decline in their academic performance since the onset of the pandemic. Four key stressors were also identified: restriction stress (being confined at home), emotional stress, the stress of online studying and stress related to family issues.

This study recommends the development of an evidence-based resilience building module for students, prioritising digital therapies and interactive learning programmes as well as advancing key mental health strategies laid out in the National Strategic Plan for Mental Health 2020-2025.

“HEADACHE, PAIN IN EVERY [PART OF MY] BODY, SLOWED THINKING, STRESS, TIREDNESS, ANXIETY ATTACKS, OVERTHINKING AND SOCIAL ANXIETY.” - LING, SMK RANAU

MENTAL HEALTH AND THE COVID-19 PANDEMIC: ISSUES STUDENTS FACED



ANXIETY AND DEPRESSION

High levels of anxiety were recorded among students who participated in remote online learning because of the COVID-19 pandemic (Sundarasan et al., 2020). Social isolation has also been linked to emotional harm, but when students wish to express themselves, no one is willing to listen (Lee, 2020).

DOMESTIC ABUSE

With remote learning, students had to spend much of their time on technological devices for classes, homework and tests. However, parents may misinterpret their children's behaviour and begin to question their veracity (Bahar Moni et al., 2021), at times amounting to verbal abuse. Some parents have gone so far as to punish their children (Ministry of Education, 2020c) by prohibiting activities such as watching television on the weekends.

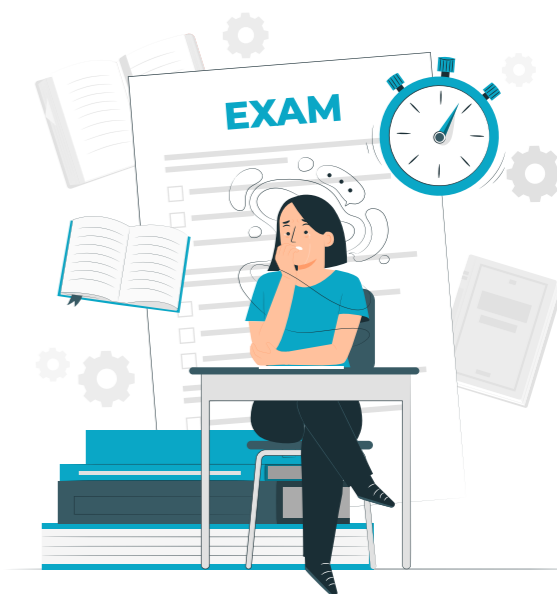


CYBERSECURITY THREATS

Students were also exposed to cybersecurity threats that crept in through online purchasing sites (Billah, Rahman, & Hossain, 2020), purchasing online items through illegal sites that invaded on their privacy and purchasing activity, resulting in unauthorised payments (Karnalim & Wijanto, 2021). Many only realise later that their bank accounts have been partially or fully drained, resulting in further mental strain.

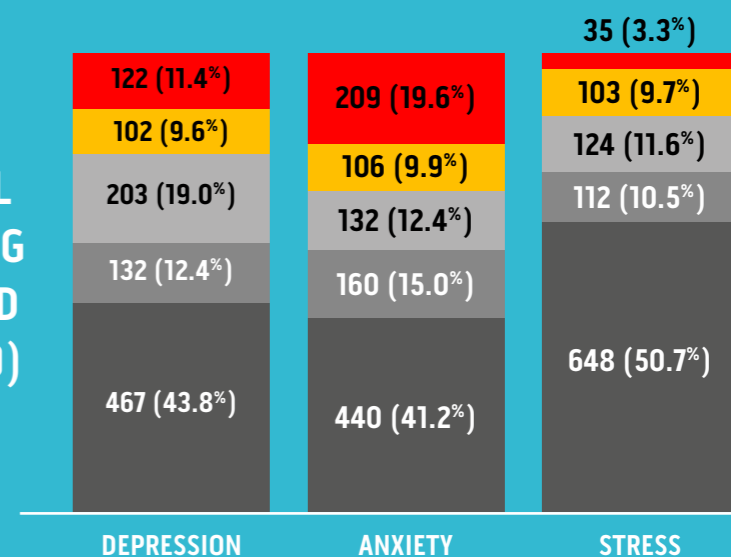
STRESS

Studies of the impact of COVID-19 on Malaysian students have revealed that students experienced various varying levels of stress, anxiety and depression throughout the pandemic (Al-Kumaim et al., 2021; Sundarasan et al., 2020; Yunus et al., 2021). Several reasons were linked to academic-related stressors, such as poor internet connections, burnout from too many assignments and financial constraints. Sundarasan et al. (2020) also highlighted that students spent six to eight hours of online classes every day via mobile phone, contributing to heightened stress and health issues.



LEVEL OF DEPRESSION, ANXIETY, AND STRESS AMONG SECONDARY SCHOOL STUDENTS IN SABAH DURING HOME-BASED LEARNING AND TEACHING (PDPR) (N=1.069)

■ EXTREMELY SEVERE ■ SEVERE
■ MODERATE ■ MILD ■ NORMAL



“PRESTASI AKADEMIK [SAYA] MAKIN LAMA MAKIN BURUK JUGA...MULAI TAHUN KEDUA MENJADI LAGI TERUK.”
- SAI, SMK A



RESEARCH QUESTIONS

To examine the effects of the COVID-19 pandemic on the mental health, education and lifestyle of Sabah’s secondary school students, as well as investigate the readiness of students and support systems for a post-pandemic educational environment, the study aimed to answer the following questions:

QUESTION 1

To what extent has the COVID-19 pandemic impacted the education system (e.g. online learning, time spent for online study, the medium used for online study, time spent for self-study [hours/days], and the levels of satisfaction with online learning) of secondary school students in Sabah?

QUESTION 3

To what extent has the COVID-19 pandemic impacted the lifestyle (time spent on sleep, sport, social media [not related to online learning], internet, video games, praying, and resting/relaxing) of secondary school students in Sabah?

QUESTION 2

To what extent has the COVID-19 pandemic impacted the mental health (e.g. well-being, depression, anxiety, and stress) of secondary school students in Sabah?

QUESTION 4

How prepared are students and their support systems for the post-COVID-19 education environment?

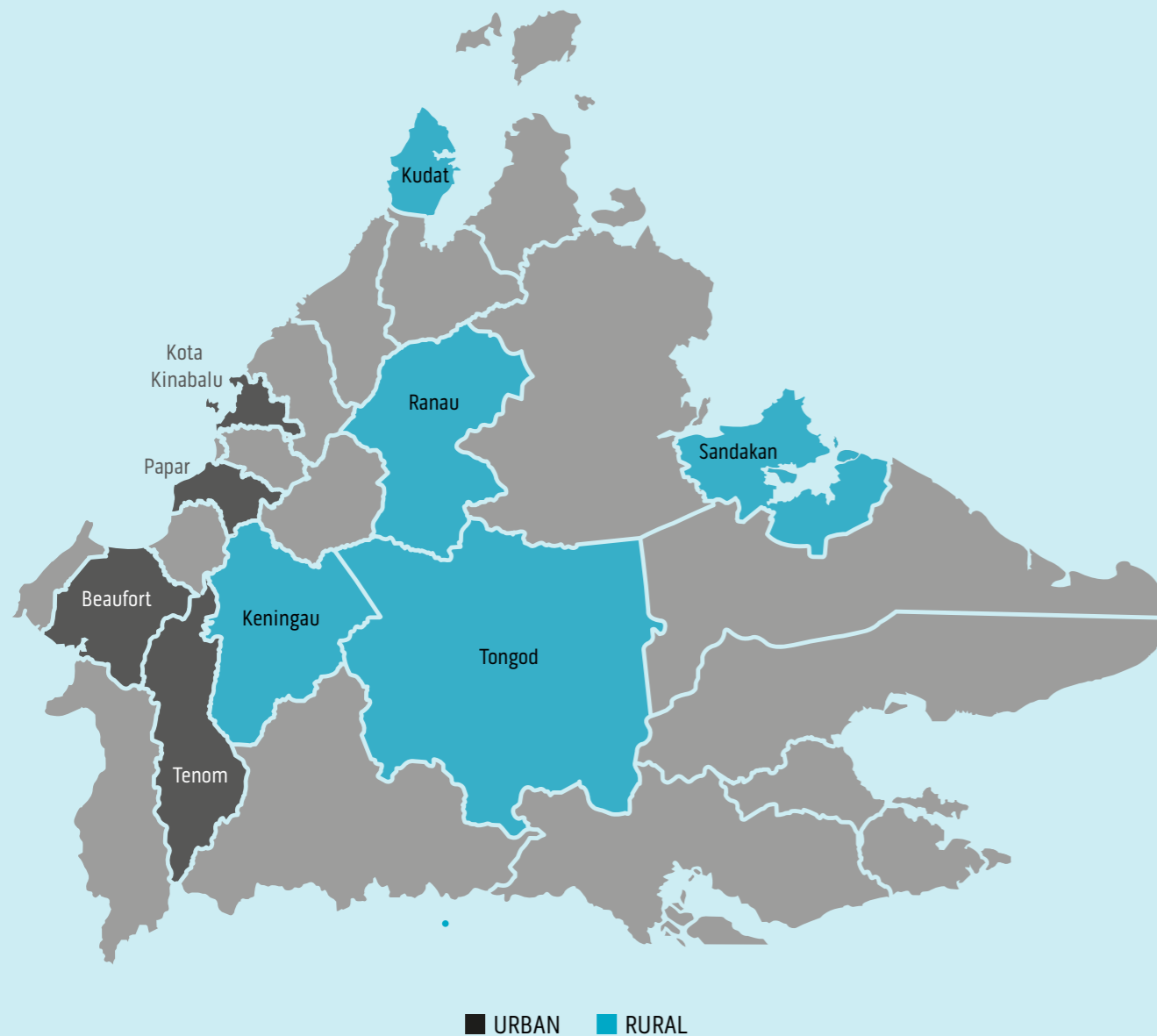
METHODOLOGY

Students from participating schools were given self-administered questionnaires by their teachers. Focus group discussions (FGD) were also held in June 2022 with students and teachers to evaluate the life and academic stressors faced and to assess the readiness of support systems post-pandemic.

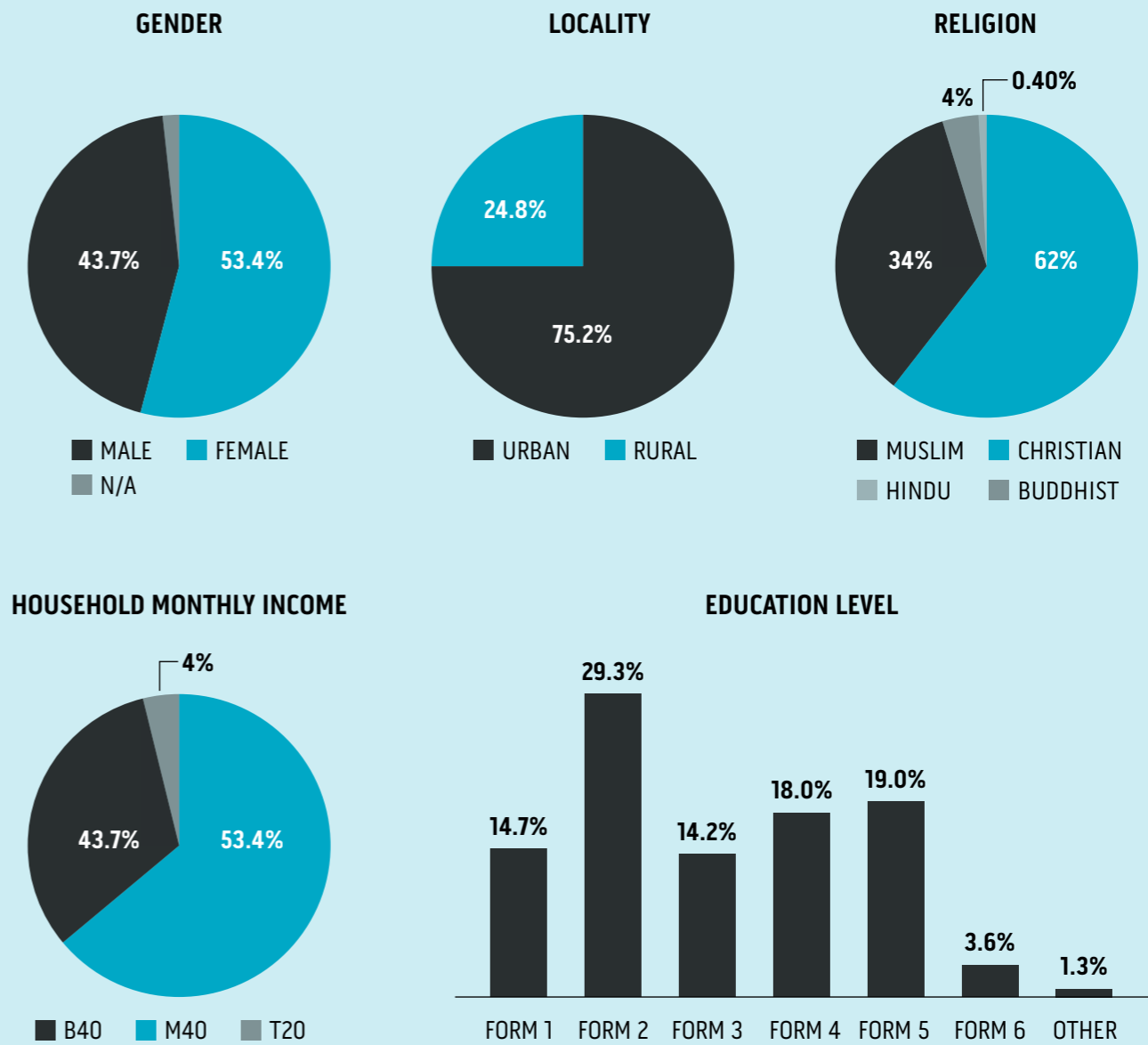


STUDENT QUESTIONNAIRES

Survey questionnaire respondents were recruited from 9 secondary schools across Sabah



PARTICIPANT DEMOGRAPHICS



DATA ANALYSIS

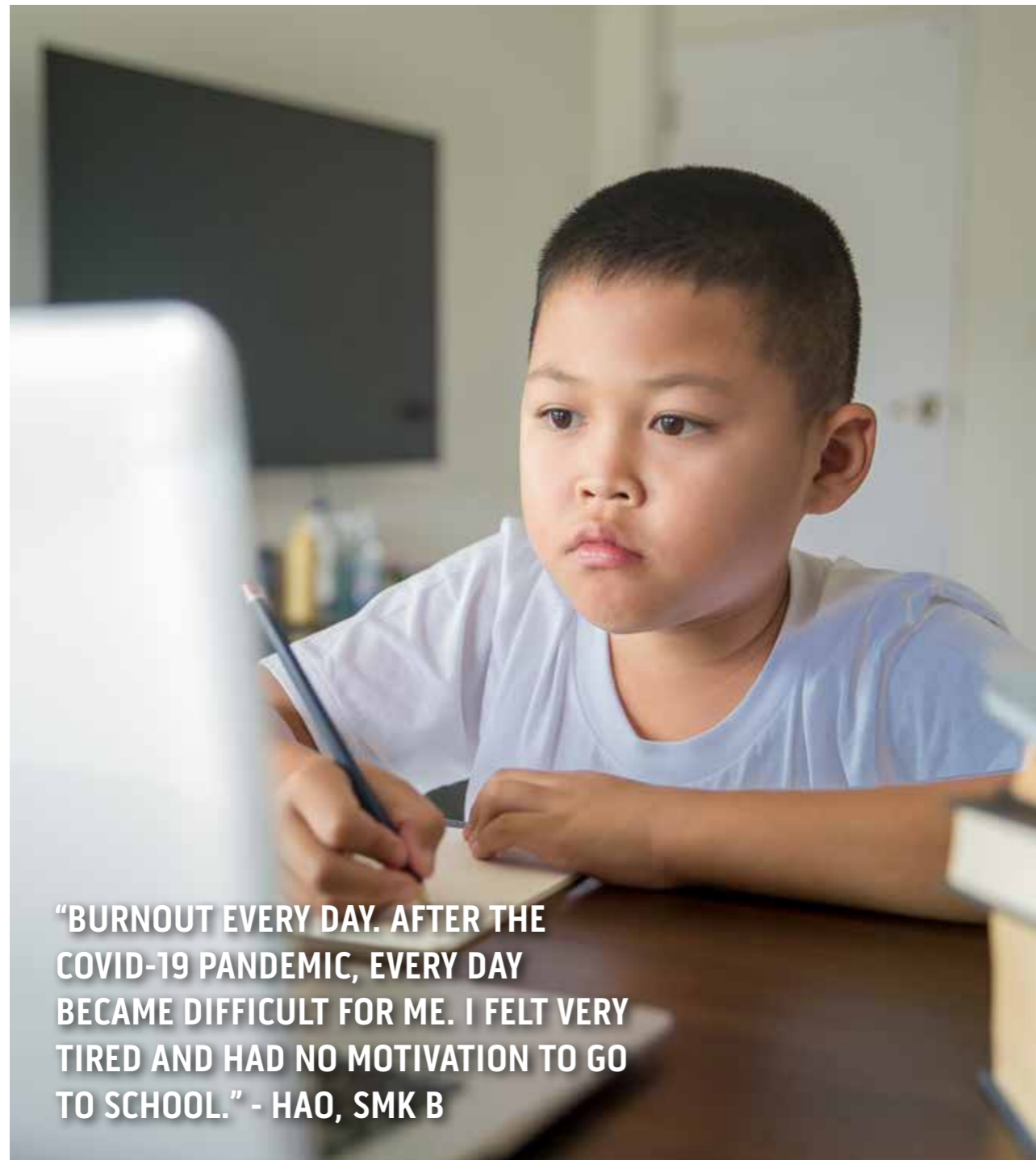
The questionnaire consisted of 8 parts:

1. Demographic Data
2. Life Activities
3. Stress & COVID-19 (open-ended question)
4. Insomnia Severity Index (ISI)
5. Depression, Anxiety and Stress Scale (DASS-21)
6. Well-being Scale
7. Quality of Life Scale
8. Life Satisfaction Scale

Statistical analysis of the data was performed using IBM SPSS Statistics v. 26.0, while qualitative data were analysed according to steps by Braun and Clarke (2006) for thematic analysis to identify repeated meaning patterns through data coding. These patterns and themes were then studied for both the individual level and across the data set.

RESEARCH FINDINGS

Study findings revealed that whilst more than half of the respondents indicated moderate levels of life happiness and satisfaction (61.8%), several alarming trends surfaced across the four areas identified in the research questions.



THE IMPACT OF COVID-19 ON STUDENTS' MENTAL HEALTH

Through the study, the impact of the pandemic on the mental health of Sabah's students was undeniable. A concerning finding was that over half (51.6%) of the respondents reported severe and extremely severe levels of depression during the pandemic or home-based learning and teaching (PdPR), while 15% reported moderate to severe clinical insomnia, a sleep disorder.

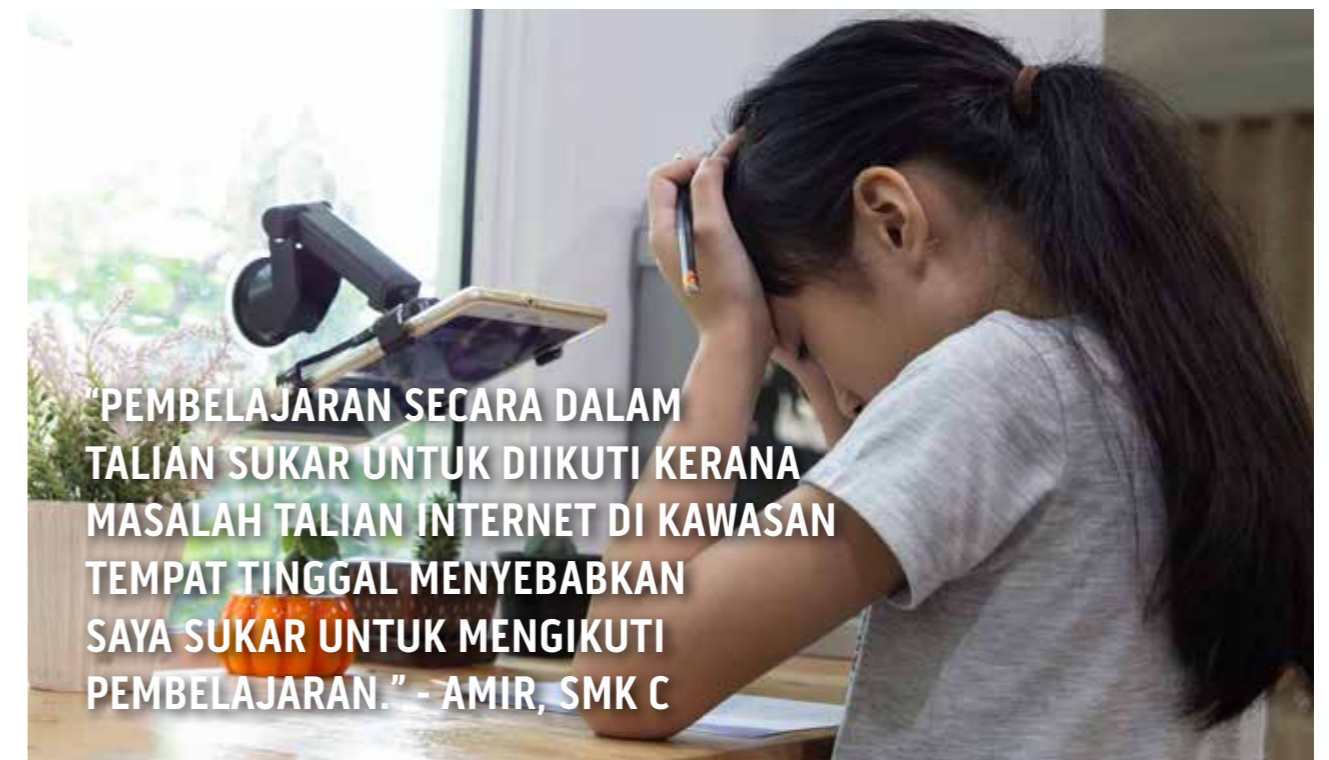
Four main life stressors were also identified: restriction stress (related to being confined at home), emotional stress, online study, and family-related stress.

51.6%

Severe and extremely severe levels of **depression**

15%

Moderate to severe clinical insomnia, a **sleep disorder**



RESTRICTION STRESS

Being confined at home, restricted movement, hindered family, friendship, and outdoor activities, as well as a lack of freedom, ranked highest among students as the leading source of stress in their lives due to the COVID-19 pandemic.

EMOTIONAL STRESS

Boredom, anxiety and depression, fear of losing family, health worries, lack of motivation and anger were some of the stressors identified by students.

FAMILY-RELATED STRESS

Financial challenges, relational issues and chores were identified as stressors.

ACADEMIC STRESS

Poor online courses, a poor internet connection, a lack of in-person interaction, too many assignments, decline in academic performance and home environments were linked to academic stress.

In the FGD, students reported experiencing stress, lack of motivation, helplessness and mental health struggles such as anxiety due to online learning. General awareness webinars and forums on mental health were conducted, but attendance for teachers was not compulsory and these were mostly attended by school counsellors.

THE IMPACT OF COVID-19 ON

STUDENTS' ACADEMIC EXPERIENCES

The sudden pivot from in-person to online learning greatly affected students and their education. From poor online courses to difficulty in understanding lessons, many struggled to adapt, and more than half (54.9%) saw a decline in their academic performance since the pandemic.

Students mainly raised four struggles in relation to online learning: difficulty in understanding lessons, role conflict between school and home, too many assignments, home environments and internet connectivity challenges. Several of these factors also caused academics-related stress.

OTHER KEY FINDINGS:

On a daily basis, students spent an average of 4.45 hours on online study and 2.49 hours on self-study, but a significant number reported spending only 1-2 hours daily on online study.

73.5% of students used smartphones, **22.4%** used laptops or desktops and **1.9%** used tablets, showing low household preparedness in transitioning to online learning.

78.6% indicated that they were satisfied or extremely satisfied with physical, face-to-face classes in school learning, with **24.7%** leaning towards online study.

In terms of support, students identified the provision of devices, financial support and mental health support from family, teachers/school counsellors and friends.



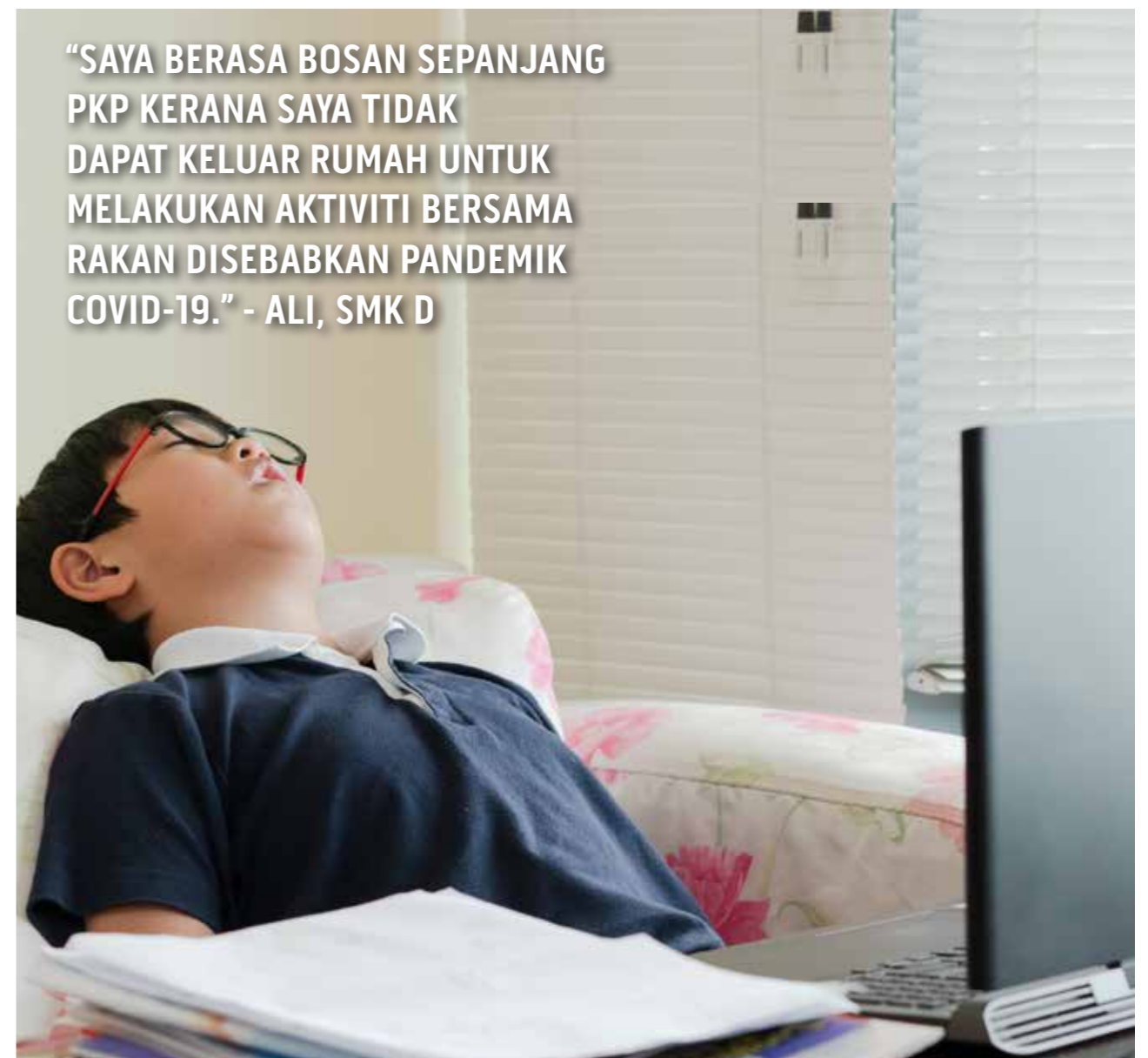
THE IMPACT OF COVID-19 ON

STUDENTS' LIFESTYLE

With movement restrictions in place, students reported an overall increase in sedentary activities, with a significant increase of non-study time spent on the internet (64.6%), social media (47%) and video games (38.5%) compared to before the pandemic.

Over half (56.8%) spent more time relaxing or resting, while 46.2% logged more hours of sleep. 45.3% reported that they spent more time praying.

Students also stated that they spent more time on household chores, but less time in income generation or sports activities. Based on these results, unhealthy lifestyle changes have been adopted which may increase the risk of obesity among these adolescents.



THE PREPAREDNESS OF STUDENTS AND SUPPORT SYSTEMS IN

STUDENTS' ACADEMIC EXPERIENCES

All participating teachers in the FGD responded that facilitating online learning during the movement control order (MCO) was challenging and raised struggles including having to adapt to new teaching methods and gadgets, poor internet connection, decreased effectiveness in lesson delivery, financial challenges, dealing with students and parents, burnout and disrupted sleep.

Additionally, no specific training on mental health or suicide prevention programmes was reported for both teachers and students. School counsellors involved in the FGD also reported being ill-equipped to conduct e-counselling sessions. Many had to provide counselling through email or text, which proved challenging due to the absence of non-verbal cues.

Students and teachers suggested ways to improve the online learning experience should a future pandemic or crisis occur, starting with proper support via devices and internet connection alongside more engaging pedagogy, proper deadlines for assignments as well as effective use of software and apps for interactive learning.

RECOMMENDATIONS

1. DEVELOPING A RESILIENCE-BUILDING MODULE



STAKEHOLDERS



Schools and Educational Institutions

This study recommends the development of an **evidence-based resilience-building module**. Such a module can assist secondary school students in building positive, sustained and resilient traits both at the personal (internal) and supra-personal (external) levels.

The module can be developed based on Beck's approach (1976) and following definitions of resilience interventions by Stice et al. (2009); these interventions cover:

- Cognitive restructuring (reducing negative thoughts)
- Behavioural activation (encouraging participation in pleasant activities)
- Problem-solving skills
- Social skills

This module can be **integrated into extracurricular programmes administered by the Ministry of Education to build and improve students' resilience**. During times of adversity, resilience serves as a protective mechanism, mitigating and preventing school-related mental health risks among students. Overall, building resilience amongst students will promote mental health and well-being.

2. PRIORITISING DIGITAL PSYCHOLOGICAL THERAPIES AND DIGITAL INTERACTIVE LEARNING PROGRAMS



STAKEHOLDERS



Schools and Educational Institutions



Government and Local Agencies



Healthcare

In line with research findings, this study recommends a **collaboration with relevant agencies, such as the Ministry of Education and the Ministry of Health, to prioritise the development of digital psychological therapies and digital interactive learning programs**. These are in addition to existing services such as text messages, chatlines, forums, and phone calls and other offline programs that are available to students at any time and place of their choosing.

Rural schools, educators, and students also face unique challenges, and priority should be given to the development of innovative mental health services for this demographic. These may include mental health programs conducted via telephone or mobile technology, which can be adapted according to context and integrated into the primary healthcare system.

Such therapies and programs not only make mental health services accessible and affordable, but they also increase communities' awareness by encouraging early detection (and therefore quick referral to primary healthcare services) and prevention of mental illness.

At the same time, it is important to **plug any gaps in support systems**. Established job descriptions, financial incentives, intensified recruitment efforts and proper training can help to address the shortage of certified school counsellors. E-counselling services (not email or text-based counselling) needs to be made more available.

Efforts must also be made on every level to **eliminate the stigma that still surrounds mental health issues amongst schoolchildren and their parents or guardians**.

3. IDENTIFYING KEY STRATEGIES FROM THE NATIONAL STRATEGIC PLAN FOR MENTAL HEALTH 2020-2025



STAKEHOLDERS

-  Schools and Educational Institutions
-  Government and Local Agencies
-  Healthcare
-  Corporations / Private Sector
-  Families and Communities

The Malaysian government has established the National Strategic Plan for Mental Health 2020–2025 as a guide for all stakeholders involved in the provision of mental health care and services.

The Strategic Plan outlines eight key areas and is essential because it can assist ministries, stakeholders, non-governmental organizations, and private companies in matters pertaining to Malaysians' mental health (Azuar, 2021). **Six strategies have been identified which public and private schools, with the support of other stakeholders, can employ to identify, reduce, and address mental health issues among students:**



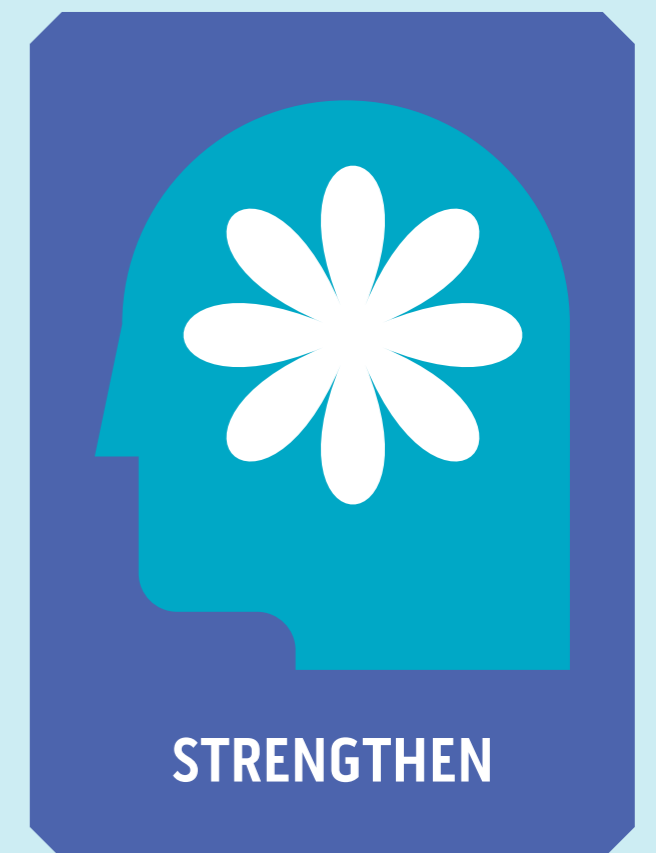
STRATEGY 1 Ensuring the Availability and Accessibility of Comprehensive and Quality Mental Health Services

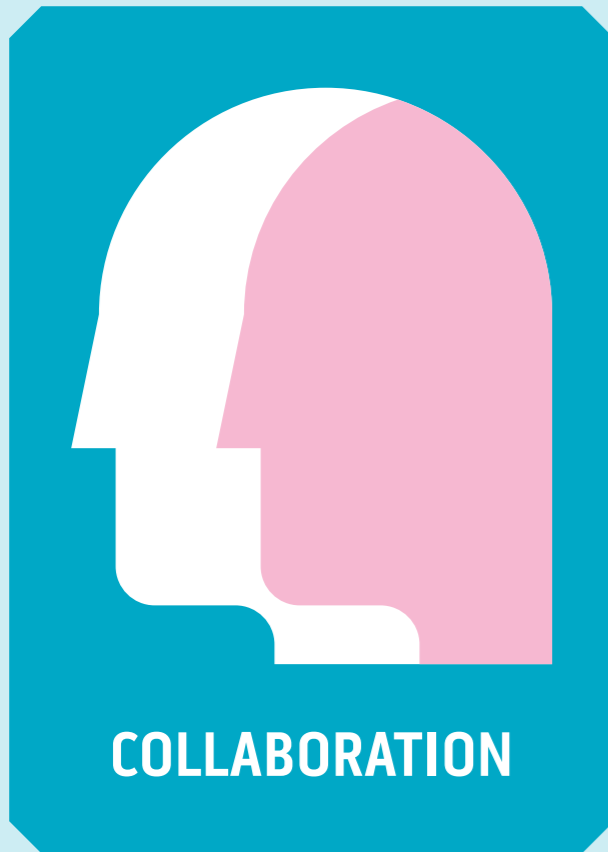
Ensuring the availability of mental health counselling services at primary health care clinics and district health offices, along with an increased number of counsellors, will help to raise awareness and advance community-based mental health services.

STRATEGY 2 Strengthening Mental Health Resources

Health workers should be provided with general and specialised training to provide mental health and social care services that are evidence-based, culturally appropriate, and centred on human rights. Training for students and teachers in elementary, secondary, and post-secondary education, as well as general workers and medical workers, should also be considered.

“SAYA KENA DISURUH UNTUK KERJA DI KEDAI...JADI BILA ADA CUSTOMER, KADANG-KADANG SUSAH MAHU FOKUS BELAJAR.”
- NUR, SMK E



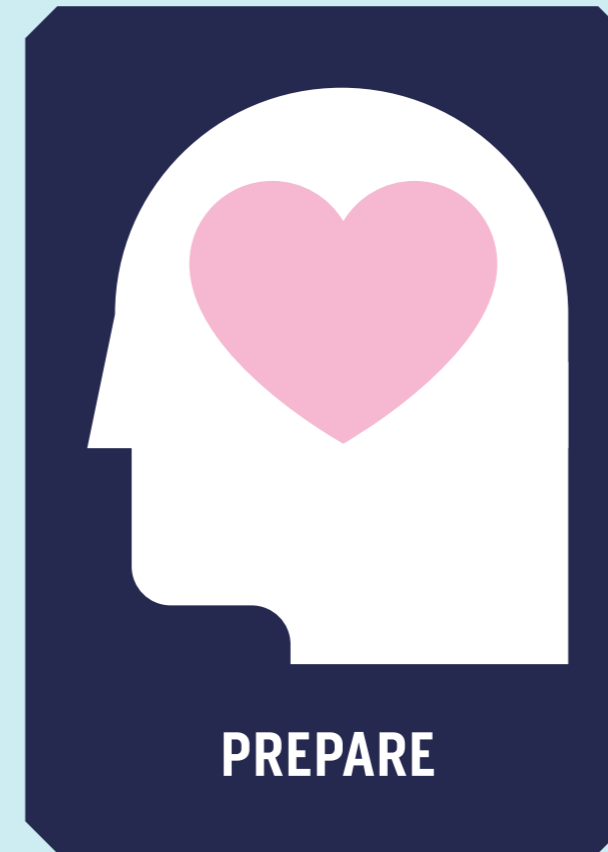


STRATEGY 3

Establishing and Nurturing Intra and Inter Sectoral Collaboration

Education on topics such as mental illness, suicide, and emergency preparedness should be incorporated into the core and supplemental curriculum of schools to reduce the prevalence of mental health problems.

The inclusion of Mental Health Life Skills as a subject in schools would be beneficial to a student's overall education. Early detection of mental health issues is also helpful to identify populations at risk of developing mental illness.



STRATEGY 5

Strengthening Mental Health Preparedness and Services during Emergencies, Crisis, and Disasters

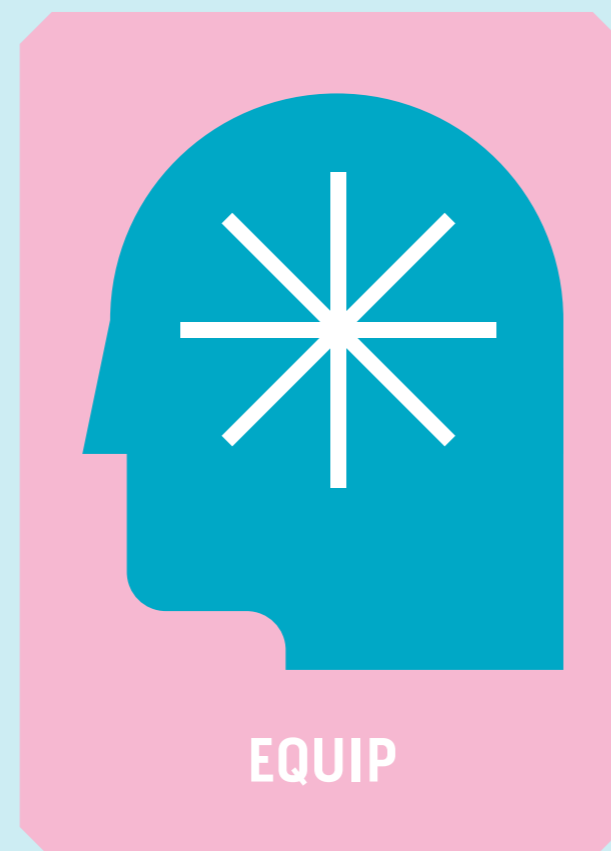
This strategy covers three stages: preparedness, response to an occurring emergency, and recovery after an emergency has occurred. Preparedness refers to the state of being mentally healthy and having access to adequate psychosocial support in the event of an emergency, crisis, or natural disaster.

Establishing a mental health and psychological response team in schools is one way to improve mental health preparedness and to make schools more resilient overall.

STRATEGY 4

Promoting Mental Health and Well-being in All Settings and Target Groups

For students (pre-school to tertiary level) to improve their overall academic performance, they should be equipped with the knowledge, attitude, and skills necessary to care for their mental health and seek help when necessary.



STRATEGY 6

Addressing Suicide and Suicidal Behaviour

Suicide awareness needs to be greatly improved in schools. Implementing the Suicide Prevention Program in secondary schools, workplaces, and communities is one way to reduce the risk of suicidal behaviour and contribute to general prevention efforts.



LOOKING AHEAD: A POST-PANDEMIC LEARNING ENVIRONMENT



“PEMBELAJARAN SECARA DALAM TALIAN SUKAR UNTUK DIKUTI KERANA MASALAH TALIAN INTERNET DI KAWASAN TEMPAT TINGGAL MENYEBABKAN SAYA SUKAR UNTUK MENGIKUTI PEMBELAJARAN.”
- AMIR, SMK F

As Malaysia's school-aged children move into a post-pandemic learning environment, this study has shown the imperative need for students to be provided with an education that covers soft skills, coping mechanisms and resilience in the face of extraordinary circumstances.

High rates of depression and a decline in academic performance of more than half of the respondents indicate the need for Malaysia's students to be better equipped and empowered in crises. They need to know potential threats to their health and safety, and be confident in reaching out for help when necessary.

Educators also faced challenges switching to an online system due to a lack of technical capacity, resources and required support for a smooth transition. With no specific training on mental health or suicide prevention programmes reported for teachers and counsellors, many struggled to cope. Sadly, their own mental health was also impacted as they had to juggle conflicting responsibilities of caring for and educating their own children while being expected to fulfil their new responsibilities in a remote-learning environment.

The COVID-19 pandemic has revealed the fragility of the current education system, and the mental health impact of interrupted, confined and remote-learning education amongst students. In addition to the continuing advancement of mental health awareness in schools, the development of a resilience-building module as well as digital psychotherapies and learning programmes is urgently recommended.

The authors of this study therefore also wish to emphasise the critical need for an **immediate and comprehensive policy to identify and manage the psychological effects of COVID-19 and possible future pandemics on school-aged children** alongside the recommendations listed above.



References

List of References is available within the full research report, which is available upon email request at mle@hasanah.org.my.

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