

Original Article

Psychological Impact of Movement Control Order during COVID-19 Pandemic among Malaysian Population : An Online Survey

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Background : Coronavirus 2019 Disease widely called as COVID-19 is an infectious disease-causing extreme containment measures, including strict Movement Control Order (MCO), travel ban, social distancing and strict personal hygiene. These act as stressors and tremendously affect the mental. This study investigates psychological impact of MCO during COVID-19 pandemic among Malaysian population.

Materials and Methods : Wakefield Inventory Scale is a self-report questionnaire consisting of twelve items were used to measure the occurrence and intensity often associated with depression. The questionnaire was made available online for three days and circulated through WhatsApp, only those who agree the consent form could take up the survey. The inventory was completed by 536 individuals participated in a study on depression outcomes via Google Doc, Online Survey as self-rated scale.

Results : Over all data suggested that more than 73% of the individual scored high which means they are in depressed state. Our sociodemographic data suggest that females experienced a more psychological impact of the outbreak. Majority of them feel that they are miserable, sad, frightened and panic during the pandemic. Around 50% of them still enjoy the things what they do at home and they get off to sleep easily without any pills but feels that they wake up early and then sleep badly for rest of the night.

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Key words : Depression, Mental health, COVID-19, Wakefield scale, Self-report.

Every human being strives for growth and well-being. More than physical well-being, psychological well-being decides the growth of the people¹. During the period of uncertainty, it's hard for even the strongest person to strive. COVID-19 had created one such uncertainty where individuals developed mental health issues including fear, anxiety and depression. Most of the people undergo psychological distress. Psychiatric disorders such as depression and anxiety have a strong impact on the Mental health status. Depression is the most common psychiatric morbidity that can be diagnosed among all the age groups and

Editor's Comment :

- COVID-19 pandemic is a public health disaster. Studies reveal that the MCO due to pandemic negatively affects depression among Malaysians.
- Awareness and knowledge about its effects and risk factors for depressive symptoms possibly help the people to overcome such situation.
- Health professionals should provide various initiatives to support psychological and mental health issues in order to manage the impact of the COVID-19 pandemic.

is often undiagnosed and underrated. Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by Severe Acute Respiratory Syndrome coronavirus 2 (SAR-CoV-2)². Since the early reports of COVID-19 cases in Wuhan, China in December 2019, the disease has spread too many parts of World like a wild-fire with no cure or vaccine to this end. On 11 March, 2020, the World Health Organization (WHO) declared COVID-19 as a Worldwide Pandemic.

Globally, several countries have imposed travel bans and lockdown, to contain the disease and Malaysia is no exception. The Movement Control Order (MCO) enforced by the Malaysian Government effective 18th March, 2020 has brought about a huge impact on the country in many ways. The nationwide Movement Control Order (MCO) has resulted in enormous economic losses and most of the activities in many industries have come to a halt during the MCO. It is

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believed that the disruptions will influence the mental health due to higher level of stress, anxiety and depression³. It is expected to have a long-term effect also. Intolerance of uncertainty leads to cognitive acceptability of the situation and people would start applying it to future events also^{4,5}. Research reviews were suggestive of the fact that uncertainty is one of the causes for depression. Most of the published literatures have focused on the epidemiological, pathological, clinical and pharmacological aspects of COVID-19 and not on psychological aspect⁶. Hence, the present study intended to explore the psychological aspect and the mental impact of COVID-19 among the Malaysian population.

MATERIALS AND METHODS

There are various scales used to measure the depression. However, Wakefield Inventory Scale is based on Zung's Scale has 12 items based on independent study which examined which of the Zung Scale items were most responsive to change in severity. The Wakefield Self-Report Questionnaire (Table 1) is scored by adding up the numbers selected for each of the 12 items. These items are labelled with Alphabets A to L. Calculations was done by scoring. Scoring for each question except 2, 5, 7 is zero points for No, not at all, 1 point for No, not much, 2 points for Yes, sometimes and 3 points for Yes, definitely. Whereas scoring for questions 2, 5, 7 is zero points for Yes, definitely, 1 point for Yes, sometimes, 2 points for No, not much, 3 points for No, not at all. Most depressed people score 15 or above on the Wakefield, because most non-depressed people score between 0 and 14. It is important to understand that a rating scale such as the Wakefield does not make a diagnosis on clinical depression. The Wakefield measures the frequency and indications often associated with depression. Some high scores may be accomplished by people with other emotional difficulties or physical disabilities. The

questionnaire was made available online for three days and circulated through WhatsApp, only those who agree the consent form could take up the survey. Wakefield self-assessment depression inventory was completed by 536 people participated in a study on depression outcomes via google doc, online survey as self-rated scale.

RESULTS

The calculation of the results was done by summing the scores that everyone has got. Over all data suggested that more than 73% of the individual scored 15 and above. When considering the importance of each, Item A reveals 42% of the people feel that they feel miserable and sad. Item B reveals same percentage feels sometimes they find it easy to do the things that they do. Item C reveals 35.8% feels frightened and panic (Fig 1). When we analyse the Item D, 47% of the individual feels they don't feel weeping spills and Item E reveals more than 50% still enjoy the things that they do. Item F reveals around 40% that is higher group of people feels that they are restless and can't keep still (Fig 2). Analysis of Item G shows that 71.6% individual feels they can get off to sleep easily without tablets. Item H reveals 40% of them do not feel anxious when they go out of the house. Item I show around 40% of them feel they lost interest in things either always or sometimes (Fig 3). Item J reveals around 47.5% feels tired of no reason. Item K shows 37% feels they are not more irritable whereas item L reveals around 40% of them feels that they wake up early and then sleep badly for rest of the night (Fig 4).

DISCUSSION

Coronavirus Disease (COVID-19) is a pandemic Global Health Warning. Within the few weeks of its epidemic the number of infected cases and deaths exceeded tremendously. In Malaysia, its outbreak was first revealed in late January, 2020. COVID-19 was first spotted on 25th January in the travellers from China arriving via Singapore. In the same month, the World Health Organization (WHO) declared the COVID-19 outbreak a public wellbeing emergency of International concern⁷. In Malaysia the cases remained relatively at a low level until localised clusters began to emerge in March, 2020. Symptoms of infection include fever, chills, cough, sore throat, breathing difficulty, myalgia, nausea, vomiting and diarrhoea. In severe cases it leads to respiratory failure, acute respiratory distress syndrome and death^{8,9}.

In response to the outbreak, the Malaysian Government has imposed a Movement Control Order starting from 18th March for two weeks, with travel

Table 1 — *The Wakefield Self-Report Questionnaire*

■ I feel miserable and sad.
■ I find it easy to do the things I used to do.
■ I get very frightened or panicky feeling for apparently no reason at all.
■ I have weeping spells or feel like it
■ I still enjoy the things I used to.
■ I am restless and can't keep still.
■ I get off to sleep easily without sleeping tablets.
■ I feel anxious when I go out of the house on my own
■ I have lost interest in things.
■ I get tired for no reason.
■ I am more irritable than usual.
■ I wake early and then sleep badly for the rest of the night.

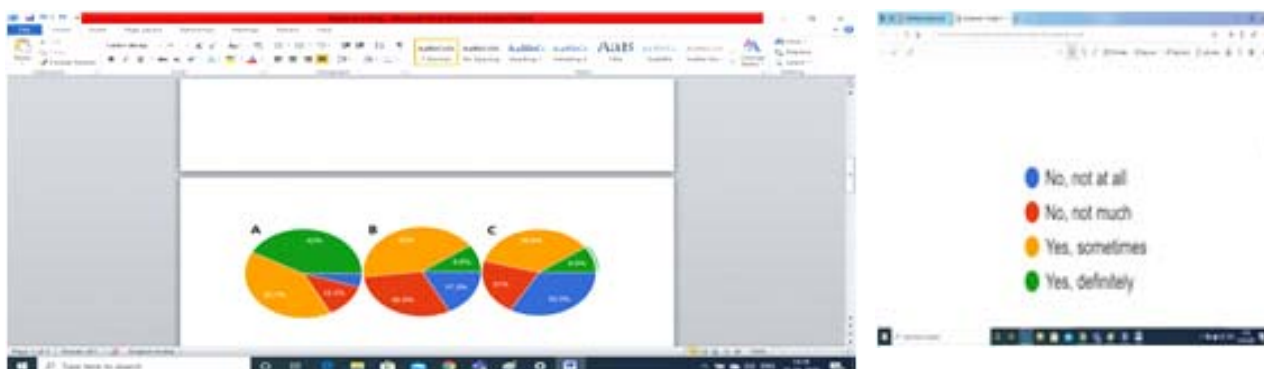


Fig 1 — A is I feel miserable and sad; B is I find it easy to do things I used to do; C is I get very frightened for no reason



Fig 2 — D is I have weeping spells or feel like it; E is I still enjoy the things I do; F is I am restless and can't keep still



Fig 3 — G is I get off to sleep easily without sleeping tablets; H is i feel anxious when I go out of the house; I is i have lost interest in things



Fig 4 — J is I get tired for no reason; K is i am more irritable than usual; L is i wake early and then sleep badly for rest of the night

restrictions to control the spread of infection. Within days, the quarantine was extended to another one month¹⁰. Many stayed at home and socially isolated themselves to prevent being infected, leading to a desperate plea. Fear and worry about a disease can be tremendous and cause strong emotions in adults and especially children. How people respond to the outbreak can depend on their background. People who may respond more sharply to the stress of a crisis include older people with chronic diseases, children and teens educations, working persons financially, health care providers and people who have mental health conditions including problems with substance use^{11,12}. So, in our study we focussed on the teenagers and working persons, so we selected the age groups between 18 to 35 years. Another reason is that they are more accessible to electronic instruments for online survey.

In this study Wakefield self-assessment inventory scale was used as it can measure the depressive which was already used in a study to assess the severity of primary depressive illness¹³. Our study reveals that majority of the people feel miserable, sad frightened and panic during which means during the movement control with less or no exposure to the outside made them emotionally weak, which also contributed to their mental health. Similar to our study, it was suggested that Government need pay more consideration to mental health problems, especially related to depression and anxiety problems among general population while fighting during public health emergency^{15,16}. However, in our survey majority of them still enjoy the things what they do at home and they get off to sleep easily without any pills but feels that they wake up early and then sleep badly for rest of the night which is the clear sign of disturbed sleep, that leads to depression as described earlier that sleep disorders are the core symptoms of depression^{11,14}.

To conclude our findings, show there is more prevalence of mental health problems that are more likely to be associated during the COVID-19 outbreak. Malaysian Government need pay more interest to Psychological Health among general population at the same time as battling with COVID-19.

Ethical clearance- Since the data collection was not done in any organisation or institutional ethical clearance was not obtained. However, confidentiality of the participants was maintained as no questions reveal their identity was asked. Participants were explained about the research only those who agree the consent form could take up the survey. Rights of participants were preserved. Data obtained from them

was used only for the research purpose.

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Conflict of Interest : NIL

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