



Lead researcher: Assoc Prof Dr Adlina Ariffin Team members:



Investigating the Impact of Social Networks on Women Working from Home (WFH) in Alleviating **Psychological Distress** 

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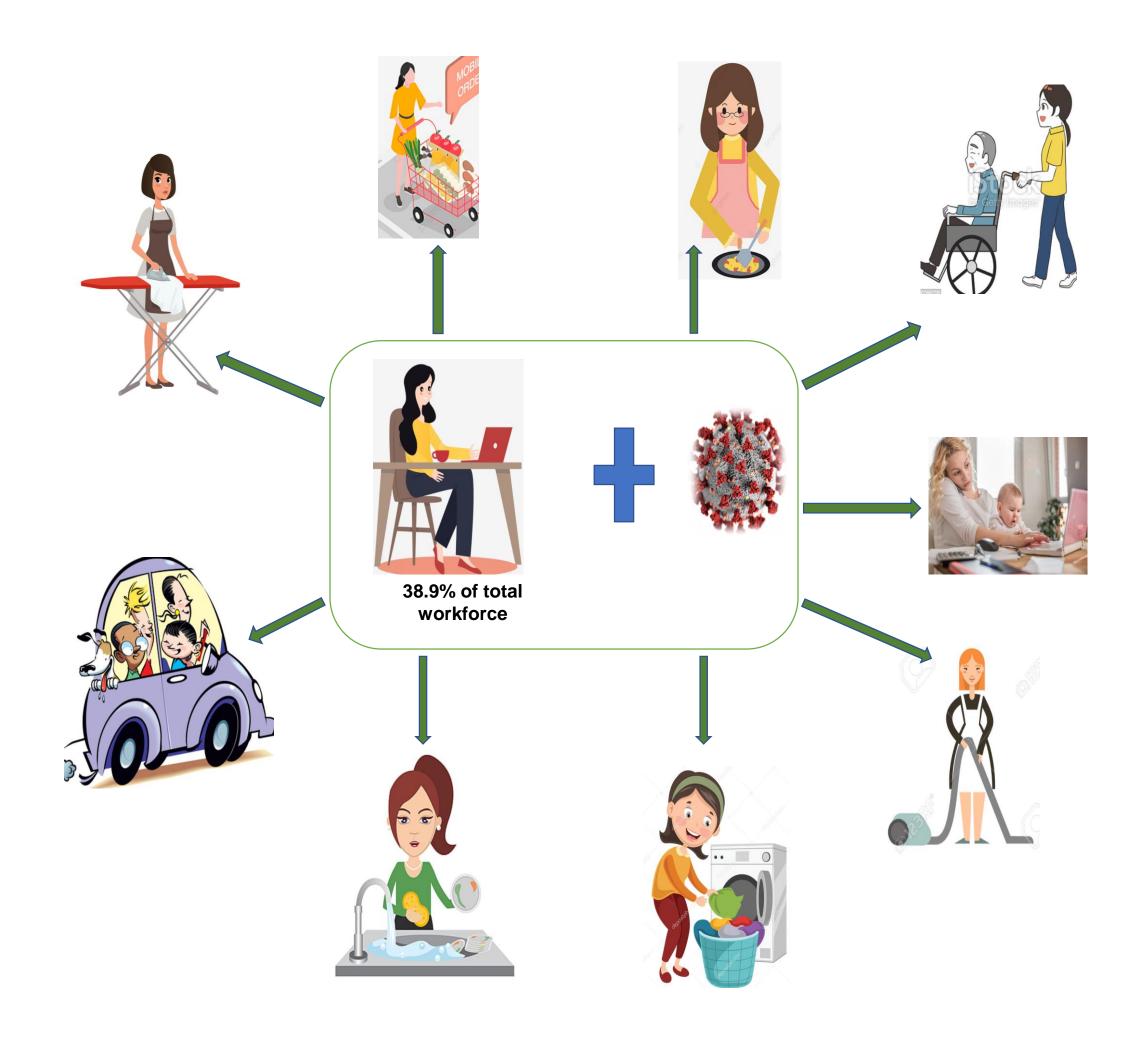








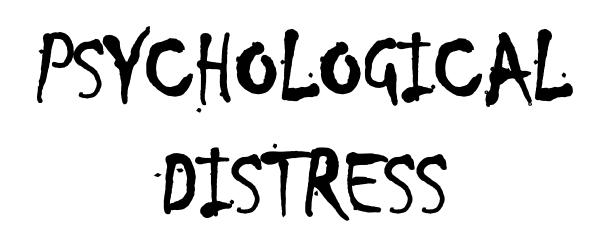








#### Introduction



- 37%(664) emotional distress - 33%(592) depression - 24%(430) stress (Balakrishnan, 2020)

### SOCIAL **NETWORKS** for support

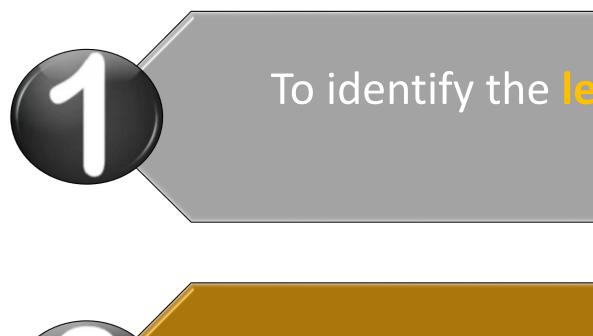
**<u>Main Objectives:</u>** To understand the impact of social networks in assisting women (WFH) to cope with psychological distress and provide suggestions on how the social networks can be further leveraged to develop the women's resilience in facing future health threats.





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To investigate the women's (WFH) perceptions on the effectiveness of social networks to provide support to them in coping with psychological distress



To provide suggestions on how the internet (including social networks) can be further leveraged to provide support to women (WFH) in coping with psychological distress and make them more resilient.

### **Research Objectives**

To identify the level of psychological distress faced by women (WFH)

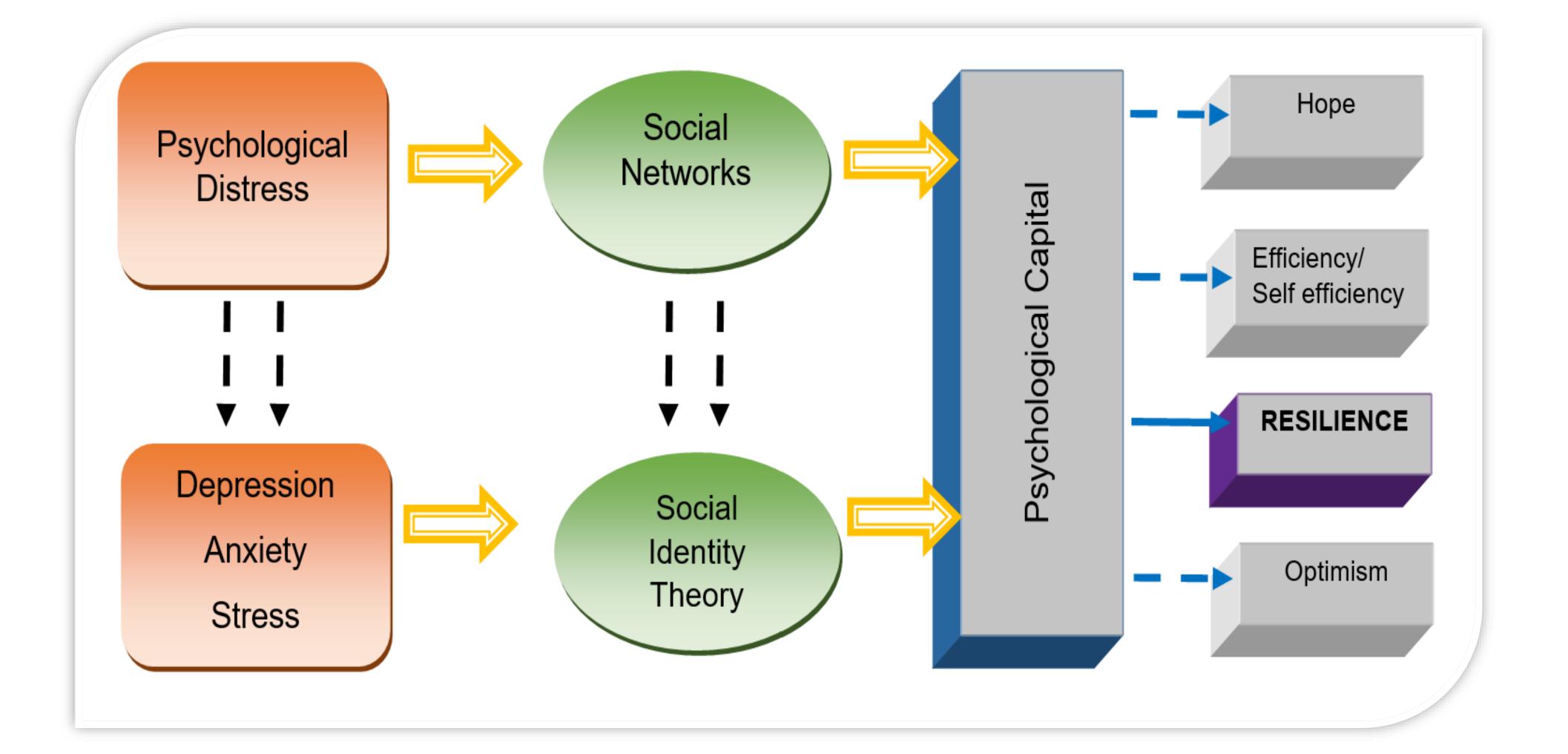
To investigate the extent to which social networks help women (WFH) to cope with psychological distress.





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# **Conceptual Framework**





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#### **Research Objective**

To identify the level of psychological distress faced by women (WFH)



#### **Research Question**

What is the level of psychological distress faced by women (WFH)?

To investigate the extent to which social networks help women (WFH) to cope with psychological distress.



How does social networks help women (WFH) in coping with psychological distress?

To investigate the women's (WFH) perception on the effectiveness of social networks to provide support to them in coping with psychological distress.



What is the perception of women (WFH) on the effectiveness of social networks in providing support to them to cope with psychological distress?

# Methodology

#### Data collection/Analysis

Self-report questionnaire (DASS 21)



#### Participants

Quantitative Convenient sampling No of respondents: 443



1. Online survey questionnaire

2. Online semi-structured interview





1. Online survey – convenient sampling – no of 443 respondents 2. Virtual online semistructured interview - convenient sampling

– no of respondents (20)











### FINDINGS (QUANTITATIVE: n=457)



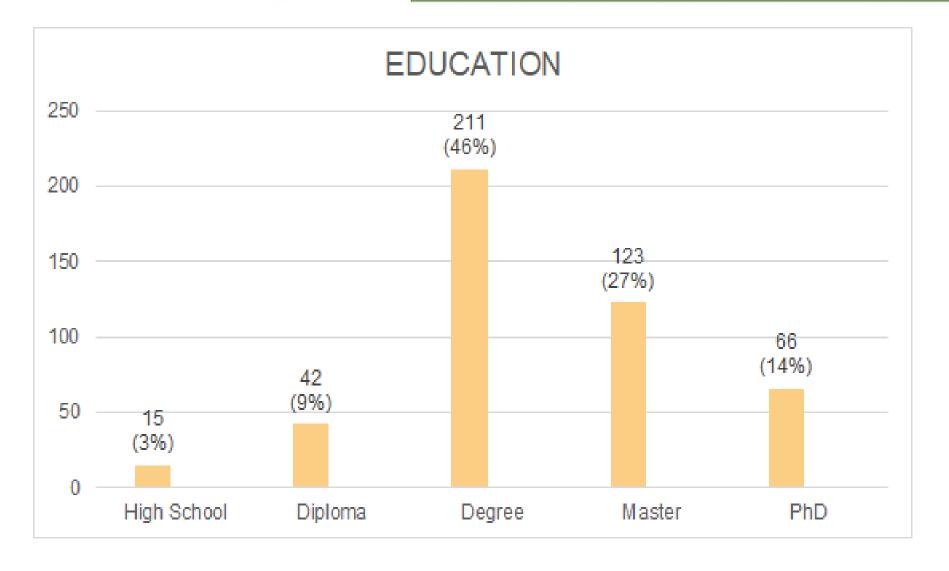


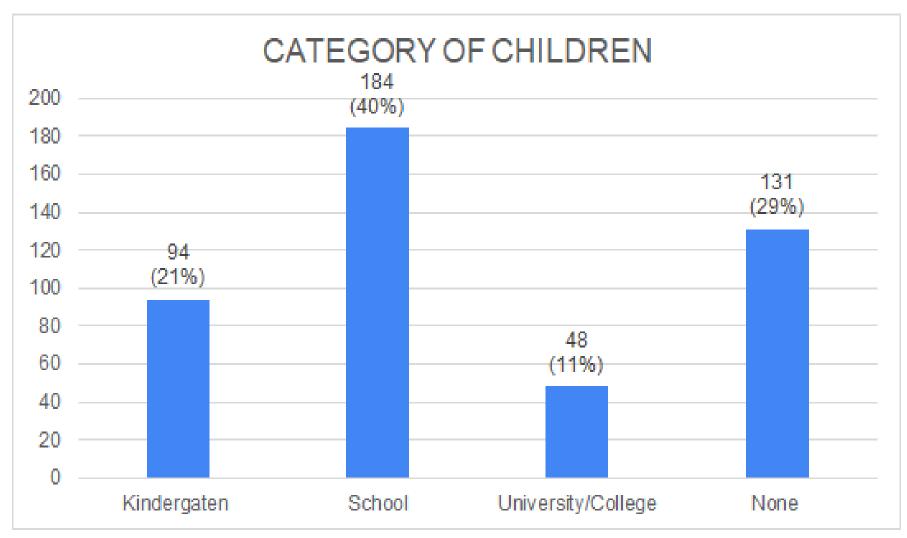
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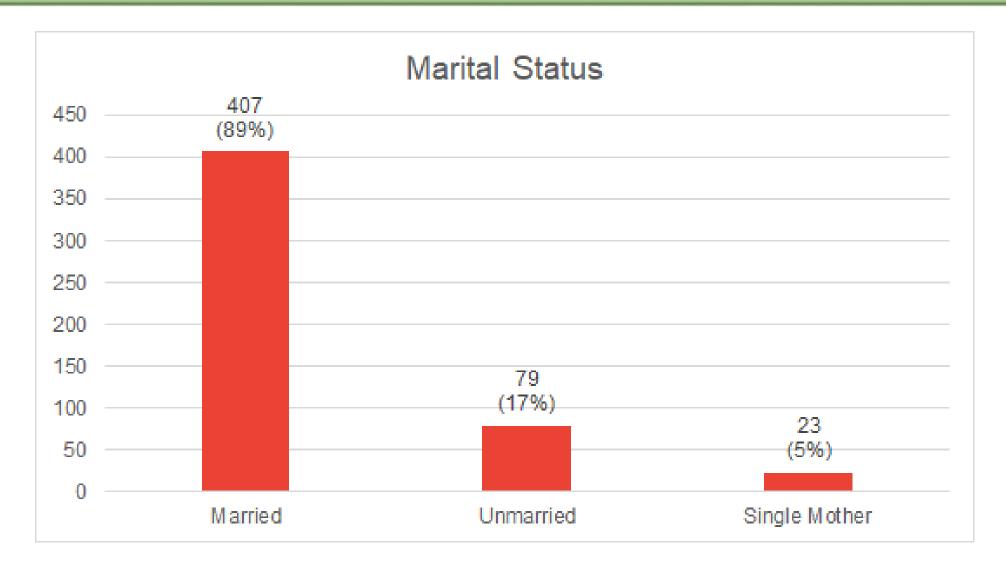
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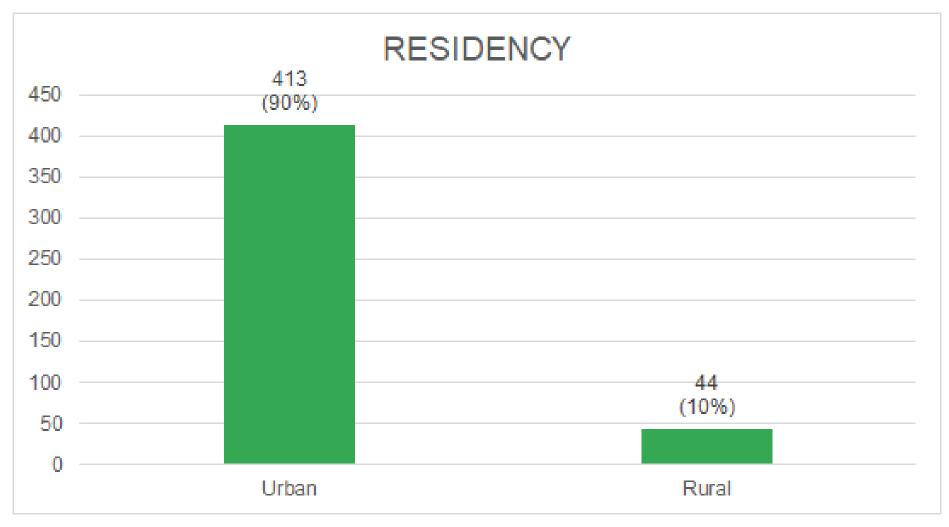






# **Demographic Profile**









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#### **DEPRESSION - Mental Health Status**

	Bandar	Luar Bandar	
Normal	72.88%	68.18%	
Mild	15.50%	18.18%	
Moderate	7.75%	11.36%	
Severe	2.42%		
Extremely Severe	1.45%	2.27%	
Grand Total	100.00% 100.00%		

#### **ANXIETY - Mental Health Status**

	Bandar	Luar Bandar		
Normal	60.53%	50.00%		
Mild	15.50% 20.45			
Moderate	11.38% 13.64			
Severe	6.05% 2.27%			
Extremely Severe	6.54% 13.64%			
Grand Total	100.00%	100.00%		

#### STRESS - Mental Health Status

	Bandar	Luar Bandar	
Normal	79.90%	72.73%	
Mild	7.51%	9.09%	
Moderate	5.33%	13.64%	
Severe	5.57%		
Extremely Severe	1.69%	4.55%	
Grand Total	100.00%	100.00%	



Those in the rural areas experienced higher level of depression, anxiety & stress. However, due to the limited sample size on rural, this finding cannot be generalised.

Women from both urban & rural experienced anxiety more than depression & stress

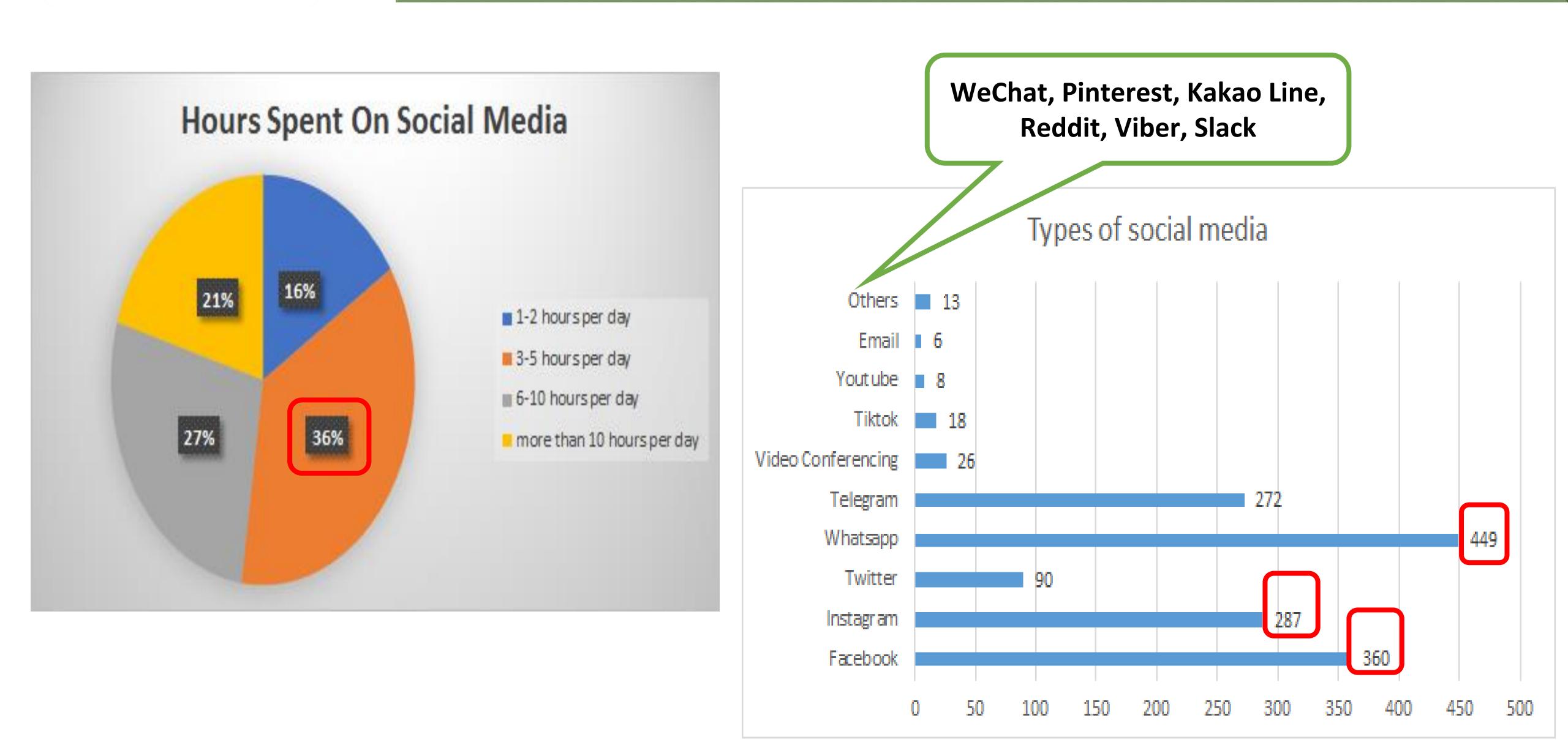
These findings are indicative in nature as DASS 21 is just a screening tool. Clinical assessment needs to be performed in order to reach a more conclusive outcome.





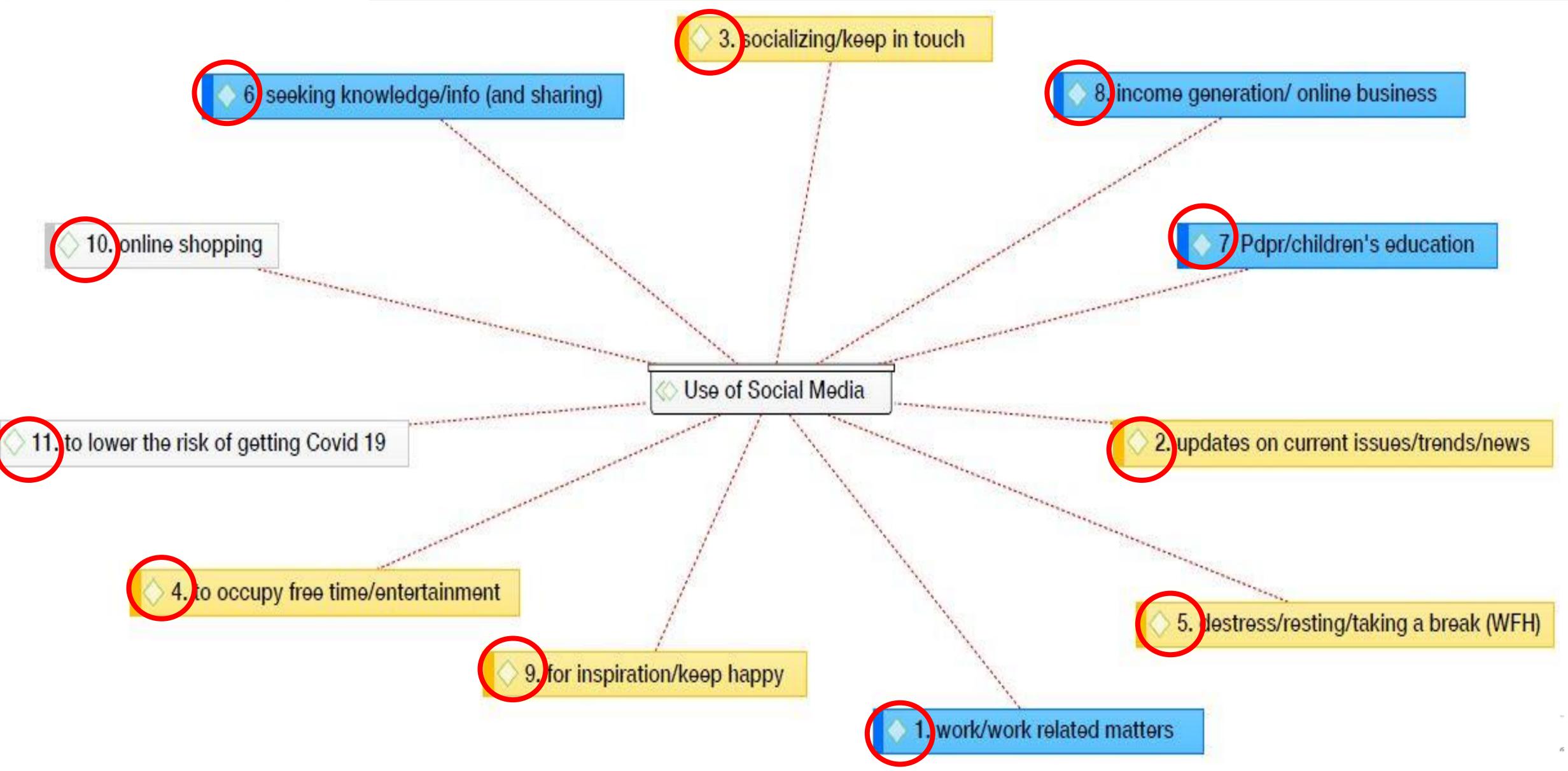
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#### **Use of Social Media**





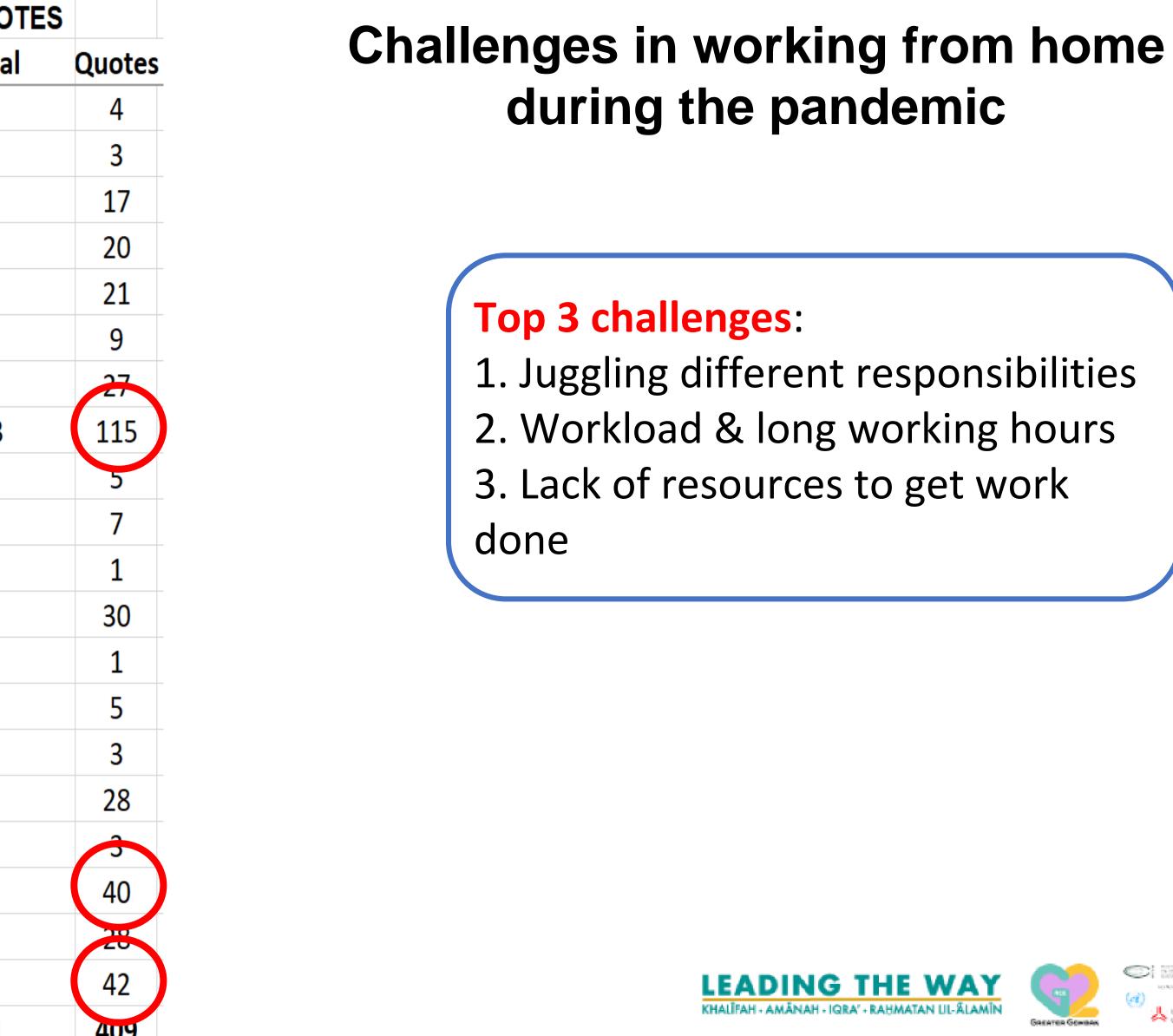
### **Use of Social Media**





CHALLENGES	NUMBER OF QUOTES		
	Urban	Rural	C
Adapt to new norm - stressful	4	0	
Boring routine	3	0	
Children online learning- stressful	17	0	
Lack of interaction	17	3	
Family matters/handling children	18	3	
Unconducive working environment	9	0	
Internet connection	23	4	
Juggling different responsibilities (work/family/study	102	13	
Lack of energy, sleep, rest and eat.	3	2	
Lack of social support	6	1	
Long hours of being indoor	1	0	
Lack of focus on work due to family	27	3	
Low self-esteem, not confident	1	0	
Need for more gadget/upgrade IT skill	5	0	
Limited activity & dormant life	2	1	
Time management-too many things to handle	28	0	
Difficult to remain positive/discipline	3	0	
Lack of resources to get work done	38	2	
Work related (teaching challenges)	26	2	
Workload & long working hours	35	7	
	368	41	

### **Perceptions on Social Media**









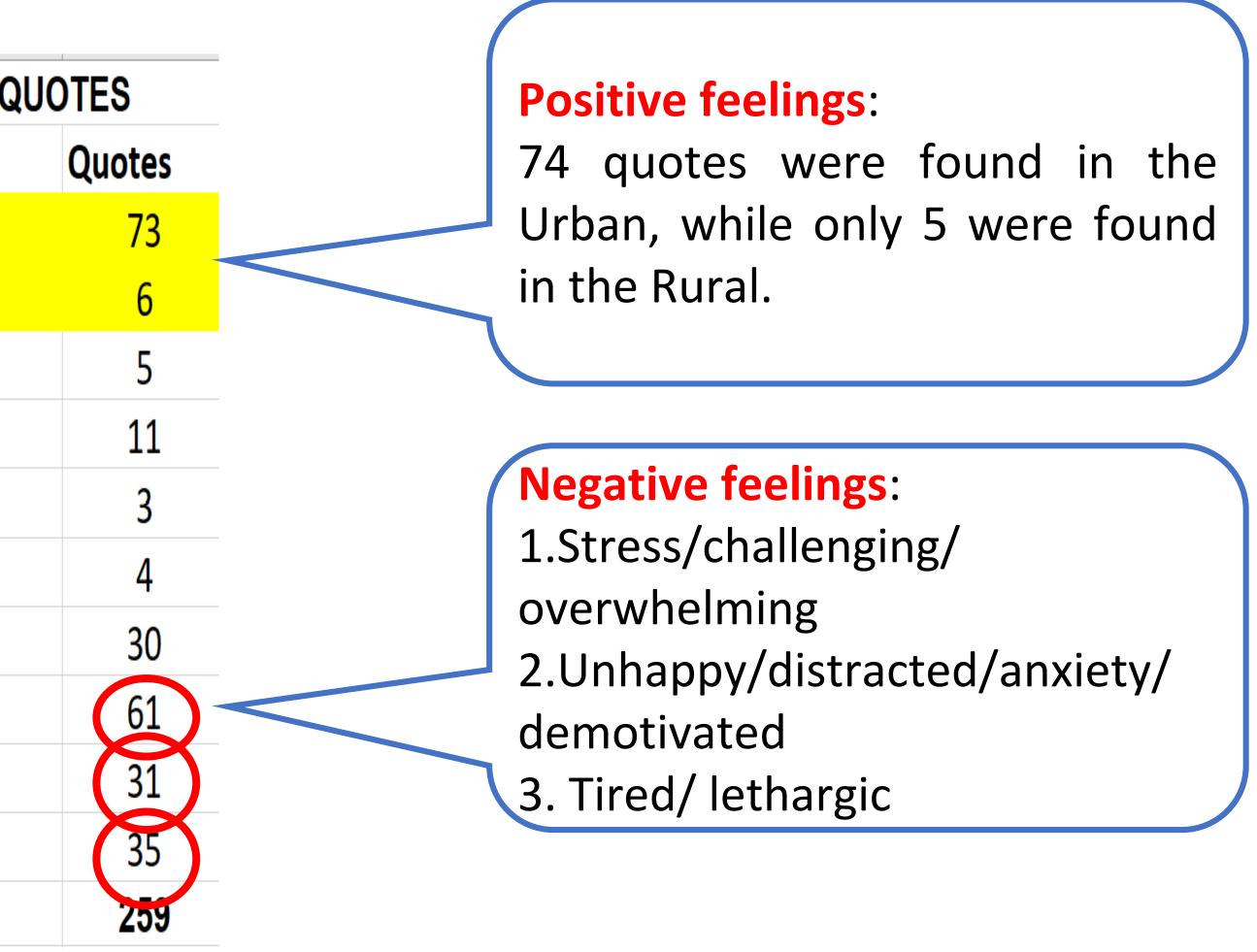




#### Feelings on working from home during the pandemic

FEELINGS	NUMBER OF G		
	Urban	Rural	
Happy/okay/positive (+ve)	68	5	
More relax after some time (+ve)	6	0	
Agitated/annoyed or angry	4	1	
Bored	9	2	
Guilty	3	0	
Lonely	4	0	
Mixed feeling	27	3	
Stress/challenging/overwhelming	53	8	
Tired/lethargic	29	2	
Unhappy/distracted/anxiety/demotivated	31	4	
	234	25	

# **Perceptions on Social Media**



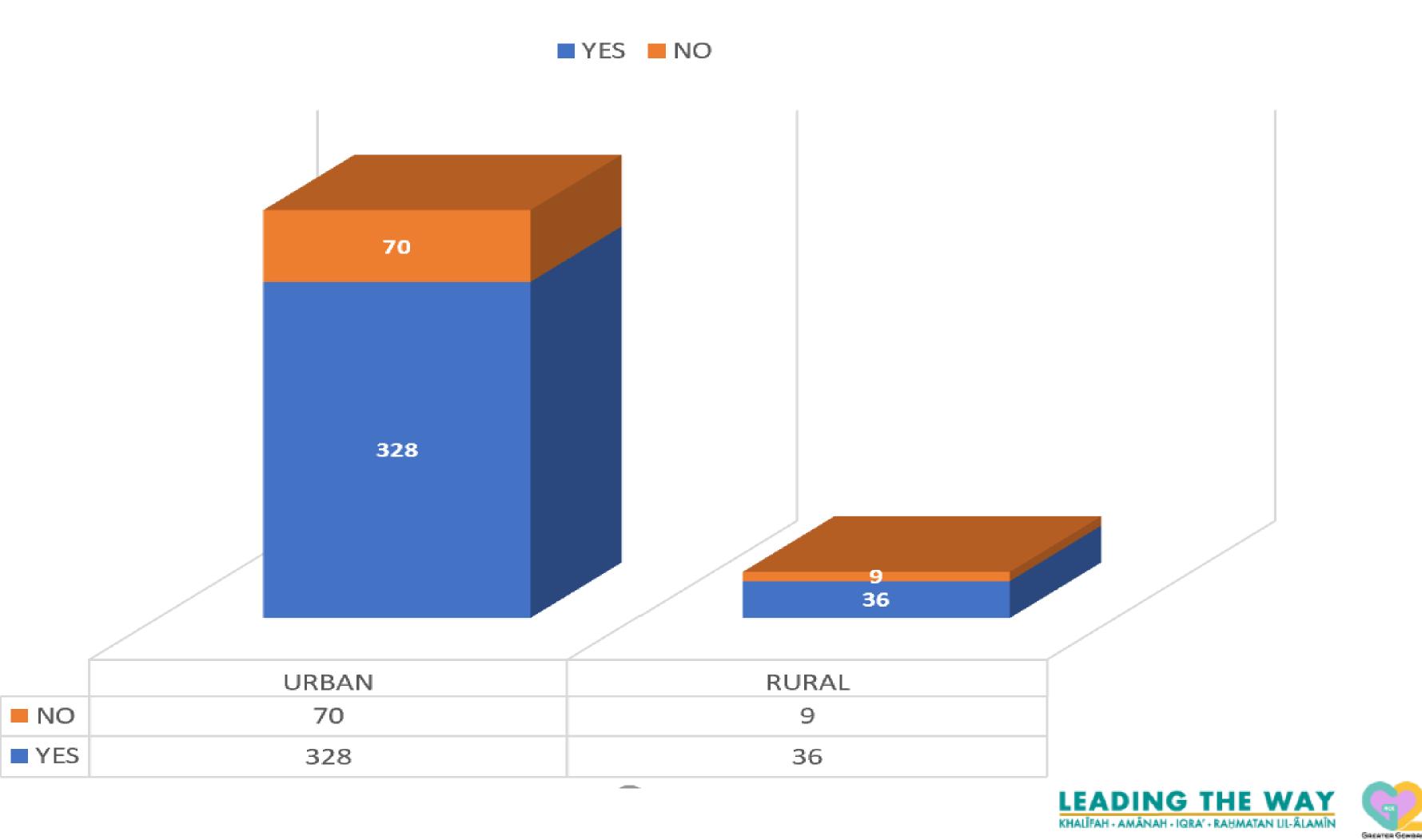








#### Effectiveness of social media to provide support to women in handling emotional distress



### **Perceptions on Social Media**



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YES	NUMBER OF QUOTES		
	Urban	Rural	Quotes
If you choose wisely/right content	33	2	35
If you know how to handle yourself/emotion	10	3	13
It helps in doing my work	7	2	9
It's a sharing platform	27	3	30
It's convenient/necessity	4	0	4
It's informative/full of knowledge	49	8	57
Connected with others	60	8	68
Finding solutions	6	1	7
Gain income	1	0	1
Get moral/emotional support	17	1	18
Learn from others	11	0	11
Release stress/relaxing	76	6	82
Remain positive/motivated	23	2	25
Shop online	4	0	4
	328	36	364

### **Perceptions on Social Media**

Effectiveness of social media to provide support to women in handling emotional distress

#### **Top 3 reasons for effectiveness:**

- 1. Release from stress
- 2. Connected with others
- 3. Social media is informative













NO	NUMBER OF QUOTES		UOTES	Effectiveness of social media
	Urban	Rural	Quotes	provide support to women in
Distraction from work	4	0	4	handling emotional distress
Started comparing with others	4	1	5	
Support too general, not individualised	3	0	3	Top 2 reasons for non-
Never ending workload	6	1	7	effectiveness: 1. Social media is toxic
Not a healthy way of healing oneself	4	1	5	2. Too much info can create
Social media is toxic	12	1	13	anxiety/uneasiness
Too much info can create anxiety/uneasiness	8	1	9	2. Virtual bonding is difficult to
Too much pressure	6	1	7	form
Virtual bonding is hard to form	9	0	9	
No (no reason provided)	8	3	11	
Other means are better.	6	0	6	
	70	9	79	LEADING THE WAY

### **Perceptions on Social Media**

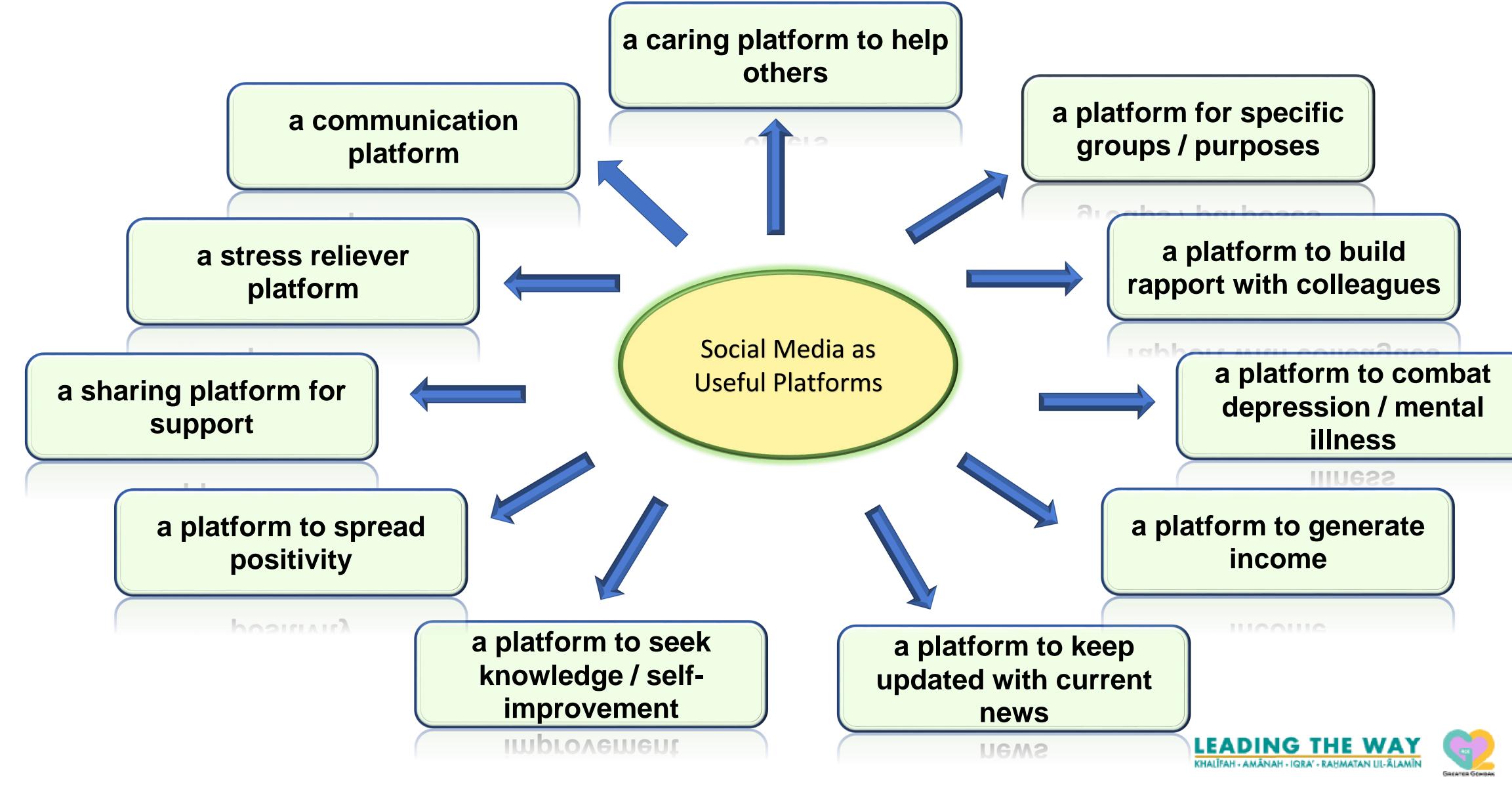








#### Suggestions on how the social media can provide psychological & emotional support during a pandemic











#### Suggestions on how the social media can provide psychological & emotional support during a pandemic

Info should be filtered

Learn from others but don't compare





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# **FINDINGS (QUALITATIVE: n = 17)**





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Respondents were selected based on their DASS 21 scores and their income brackets.

B40: 3 respondents M40: 6 respondents T20: 8 respondents

# **Some Background Information**

#### Interview Questions:

- 1. After almost two years, how do you find working from home (WFH)?
- 2. In your opinion, do you think social media plays a role while you're working from home? If yes or no, ask why.
- 3. Overall, do you find social media to be helpful or not for your mental health? Can you give reasons and examples?
- 4. Do you prefer face to face or online support? (Assuming things get better / number of cases reduced)
- 5. Are you aware of any social support for mental health issues? Describe.
- 6. If WFH is introduced as an option at your workplace, would you agree to it? Why?









 Most of the respondents agreed that the use of social media is beneficial for personal and work purposes.

3. They have limited awareness on the kind of support available (only Talian Kasih & Befrienders).

5. The support should not be generalised, rather it should be personalised.

**Key Findings** 

2. They had mixed reactions on mental health support whether it should be face-to-face or online.

4. The respondents admitted that social media can add to the stress when it disrupts their work-life balance. On the other hand, it can be a stress reliever.







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1.Those in the rural areas experienced higher level of depression, anxiety & stress. However, due to the limited sample size on rural, this finding cannot be generalised.

3. The feelings and challenges faced by the respondents clearly indicated that they are in need of support to handle emotional distress.

5. Most of them welcomed the idea of **flexible or hybrid working condition** where they can work-from-home a few days a week.

### Conclusions

2. Women from both urban & rural areas experienced **anxiety** more than depression & stress. Based on the literature on mental health status and COVID-19, many people developed anxiety symptoms due to their apprehension about the future. The uncertain, unpredictable, and uncontrollable situations of COVID-19 maintained the symptoms.

4. Social media can be an effective means to provide support to working women in facing mental distress.







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Based the on review of literature & the key findings of this study, in order to develop women's resilience facing future IN health threats, it is suggested that:

embody the following criteria: approach.

2. a flexible or hybrid working condition should be implemented where they can work-from-home a few days a week. (This corresponds with the amendments that shall be made to the Employment Act on flexible schedules and shorter work week for working women, The Star, 29 Nov 2021)

#### **Recommendations**

- 1. a National Mental Health support platform be established which may
- a. One single platform which is wholistic in nature, integrating and synergising the involvement of various related Ministries, agencies, NGOs, employers. b. The platform should be a combination of online and face-to-face or hybrid mode since "virtual bonding is difficult to form".
- > A systematic approach where the diagnosis could be done online followed by in-depth assessment and treatment done face-to-face & online.
- $\succ$  A personalised approach is adopted, not generalised or one-size fits all
- c. Awareness of the platform needs to be created at the national level.





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