# COPING STRATEGIES FOR PARENTS WITH SPECIAL NEED CHILDREN DURING COVID-19 LOCKDOWN IN MALAYSIA

**Nesen, J.N, Universiti Kebangsaan Malaysia**
**Bakar, A.Y.A, Universiti Kebangsaan Malaysia**

## ABSTRACT

*The COVID-19 plague has been an open threat to the physical wellbeing and life of people. It has also caused a broad spectrum of psychological symptoms, such as panic, stress and discouragement. Over the time span, pressure, nervousness and other unpleasant feelings began to escalate in the nation and disperse and replicate themselves instantly among individuals from the whole of society. As a result of COVID-19, households' socio-economic condition and the treatment of children with special needs were impacted. This condition will also shake the tension level of childcare givers with special educational needs. Coping strategies are explicit physical and emotional activities that individuals use to ascertain, tolerate, minimize or restrict annoying opportunities. The study has shown that families who are productive in adjusting to an unusual child will plan their inner and outer responses to handle their special needs better. In this study, data is collected from Malaysia on parents whether they spent quality times with their kids or not. Also, analysis of the captured data is done using ANOVA.*

**Keywords**: Coping Strategies, COVID-19, Parents, Special Needs Children, Malaysia

## INTRODUCTION

The COVID-19 pandemic has produced the greatest disruption of education systems in history everywhere in more than 190 nations. The world's student population has been negatively affected by school closures, up to 99% in low and lower-middle income countries (Abdullah et al., 2020). These inequalities are growing because of the lack of affordable educational opportunities affects the most disadvantaged, including those living in poor and rural areas, children, migrants, people with disabilities, and forcibly displaced persons. There could be cognitive and learning loss in whole generations. Millions of children and youth will drop out or not have access to school next year due to the epidemic's economic effect alone (Department of Statistics, 2020).

Similar disruption consequences would have for education outside. Closing schools affects access to healthy food, raises risk of violence against women and children, and affects many parents' ability to work. As fiscal strains rise, and development assistance comes under strain, education funding could also face significant challenges. For low-income countries and low-middle-income countries, the difference reached $148 billion annually, and it could now rise by up to one-third (Department of Statistics, 2020).

Instead of abolishing public education, the crisis has inspired creativity. We have seen developments in education and training: from radio and television to take-home kits. Distance learning strategies were developed in response to the increasing demand by policymakers and stakeholders all over the world, promoting education continuity (DG of Health, 2014; Ministry of Health Malaysia, 2020; Mosley et al., 1994; Aktekin et al., 2001; Cao et al., 2020; Wang et al., 2020, Bayram et al., 2008; Auerbach et al., 2016). We have been reminded of the importance of teachers and the continuing duty of care by governments and other primary stakeholders.



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

There is also the imperative of making sure every student meets the same academic standards. Children and youth without access to resources or enabling environment can find learning difficult. It is true for teachers and their need for better preparation in modern methods of education delivery. This is also true for local communities upon whom education sustainability relies through crises and crucial to building back better (Bruaerts et al., 2018; González et al., 2020; Cornine, 2020; Ayittey et al., 2020; Peng et al., 2012).

The COVID-19 crisis and education disruption are far from over. Countless countries have yet to declare a date for schools to reopen, and several states, unions, parents, and children are trying to come up with a proposal. To reopen schools across the world, countries will also prioritize exam classes and start reopening schools in regions with fewer virus cases. However, considering the continued virus symptoms, most countries will not vote to reopen by the end of June 2020. These decisions would have a long term and profound impact on educators, children and youth, their parents, women, and society as a whole (Gentili et al., 2019).

Lockdown strains include family and friend isolation, loss of independence, fear about the propagation of the infection, lockdown, rancor, a monotonous lifestyle, possible shortage of vital supplies, lack of reliable knowledge, financial loss and stigma (Xiao et al., 2019; Tang et al., 2020). The key aim of this research is to evaluate the extent of anxiety among students and their parents' strategy during the lockdown in Malaysia.

## Parenting Children with Special Needs during COVID-19

The pandemic of coronavirus disease in 2019 (COVID-19) has interrupted worldwide family habits. These disorders have been exacerbated in households with children with special needs, such as children with psychiatric issues or learning delays. Public instability renders schedules unstable and it is impossible to sustain prior habits.

Children with special needs and their caregivers, much as every family, will feel nervous. Around the same period, families with difficult needs have a secret strength: they are flexible and recognize what it takes to accommodate the unforeseen. If during the COVID-19 pandemic you are in this scenario, realize that you will handle unsafe periods effectively. Here are few proposals:

Explain why everybody works together to avoid and sick the virus that triggers COVID-19. That is why many schools and playgrounds may be locked. There may even be no way to have a play date or head to a friend's home. Explain that children will still be a tremendous benefit by adopting activities like:

a) Clean hands regularly with soap and water every 20 seconds or scrub hands with an alcohol-based sanitiser comprising at least 60% alcohol.
b) Snow or cough into a tissue or a curled forearm, not the palms, and dump used tissue into the garbage.
c) Stay home longer than that
d) Aid washing and disinfecting commonplaces of the household, including doorknobs and light switches.
e) Stop huge crowds of individuals.
f) Hold 6 feet (2 metres) away from the building and other citizens
g) Waving or laughing more than embraces, fist bumps and high-five.
h) Display a face mask in grocery stores and everywhere in public.

All faces added tension after the pandemic. It is good to accept that the conditions certainly will not resolve immediately, and probably the COVID-19 pandemic will not be finished quickly. Yet tension should be handled enough that it is not debilitating. Taking these tips into account:

**Take Breaks:** Take breaks. Mind to waste some time. Wake up early a few minutes to compose your ideas. Stop an or two minutes until bedtime to relax slowly or deeply. Taking the time and collect your emotional reserves.



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

**Limit News Access:** It's nice to be updated. However, overloading knowledge will raise concern about the disease. Limit read, hear or view television. Limit the usage of social media that may subject the children to gossip and misleading facts.
**Keep Safe:** Stay healthy. While routines are good, make resting, eat healthy meals and keep involved a priority. These basics would alleviate depression and boost the state of mind of both.
**Link to Your Loved Ones:** Keep linked *via* telephone or video chat to grandparents and relatives. Or only compose a message. Maintaining the help network of the family is a vital coping mechanism.
**Get Some Pleasure:** Have some fun. Say your family relaxed times where you don't dwell on work or education. Play your children's football, go on sunset hikes, cook projects together and host movie nights at home.
**Leave Unrealistic Aspirations Behind:** During the pandemic, acknowledge that things will not necessarily go as expected and that your child or you will make errors. That's all right. Keep Healthy. Be good to yourself and note that the main thing is to make sure your child is loved.

Through your strengths, you and your family will safely navigate the COVID-19 pandemic. This includes building on your hard-earned stamina, using previous supportive tactics, preparing for medical treatment and needs of your child and taking your time to relieve tension.

## COVID‑19 and the Increased Risk of Poor Nutrition in Malaysia

Access to adequate nutrition physical and cognitive growth from infancy to childhood with long term implications for adult wellbeing and self-sufficiency is essential to balanced childhood. Many children are deprived of basic foods particularly in periods of decent economic circumstances. For example, in Malaysia 20 (Mat et al., 2020; Karim et al., 2020) percent of poor schoolchildren lack sufficient nutrition, almost three times as high as non-income poor children. Overall, one in ten children were unable to obtain fresh fruit or vegetables and/or food like beef, chicken, fish or similar vegetarians at least once daily. COVID-19 linked closures of clinics, schools and after-school clubs for Early Childhood Education and Treatment (ECEC) subjected many members of low-income households to food shortages and low quality. Entry to free or well-funded school meals is a major policy cornerstone for reducing child hunger in many nations, including France and the United Kingdom. Similarly, more than one third of their daily calories is collected from school food and beverages in the USA, sponsored by the National School Lunch programme. When schools are closed, recipient children eat less and eat less healthy food, a so-called holidays malnutrition phenomenon. Bad diet is combined with home containment and decreased physical exercise during COVID-19. This will raise the likelihood of weight gain for certain children other than those who are out of school in the summer months. In Figure 1 has shown the COVID-19 Statistics, Malaysia, 24 January – 27 May 2020 (Hamdy et al., 2018; Ibrahim et al., 2018).

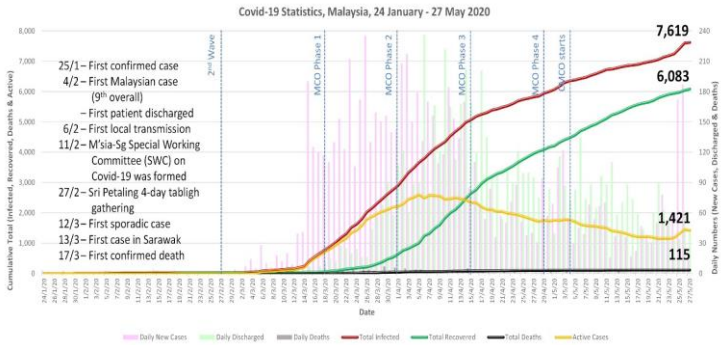


**FIGURE 1**
**COVID-19 STATISTICS, MALAYSIA, 24 JANUARY – 27 MAY 2020**



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

## Children with Disabilities

The COVID-19 epidemic threatens children with disabilities' well-being in school, wellbeing, social and family life. It has caused tremendous tension and uncertainty to the life of children who rely on order and routine under normal circumstances. Children with disabilities can need extra assistance to respond to these many changes and to learn how to stay healthy.

Children with disabilities are most likely to delay their schooling during school openings. For example, the adequacy of remote education depends on the specific interests of children and on the capacity of schools to offer tailor-made teaching. In addition, school break learning loss may be greater for children with disabilities. For children with higher needs, interruption of college and retreat activities may contribute to crises in certain families. Furthermore, the involvement of a disabled sibling in the household is a challenge to parents' capacity to fulfil new home education needs for other children and to handle family tension.

COVID-19 disrupts access to therapeutic services at a moment of transition for children with disabilities and their communities to significant daily adjustments. Most adolescents with impairments require psychological assistance for the improvement of speech and social-emotional abilities and for improved management at school and at home. Those children now need more assistance in creating and sustaining new habits and in relaxing and coping. However, often households lack guidelines and knowledge about the programmes and the sort of help they may obtain, which, over a broad duration of incarceration, is especially troublesome.

## METHODOLOGY

Guardians make the best and best of their children. In this sense, the current research aims to detect the degree of stress occurring among parents who care for children with Special Education Needs (SEN) while COVID-19 in locked down and to figure out how stressed parents cope with stress. Research populations are parents who provide for children with special educational conditions. A sample of N=30 parents is chosen through a purposeful sampling technique. It is an exploratory analysis tool that is used to gather the results. The perceived tension scale and the short COPE inventory was used as a research guide. The Perceived Stress Scale (PSS) Cohen & Williamson (1988) are 10 item questionnaires which measure how stressful circumstances are in one's life. Parents between the ages of 25 and 55 are chosen as a population. Quantitative and quality approaches are utilized to obtain outcomes. During COVID-19 lockout it was not easy for investigators to reach the research sample face to face so that the data were gathered via the internet. Parents were briefly told about the study intent. Parents' approval was sought before tool administration. Questions in Urdu were asked so that respondents could easily comprehend each statement. Parents' answers were registered on a sheet of paper. Statistical research showed that, when locking COVID-19, parents caring for children with special educational needs display moderate to high perceived tension and that the most frequent coping strategy utilized was faith (25 percent) and self-blame (15 percent), usage of informational assistance (14 percent), behavioral d (5 percent ). Parents of children with Special Education Needs (SEN) have thus been found to more frequently utilize faith as a coping mechanism to alleviate the tension intensity of the COVID-19 lock-out. It is also claimed that parents with Special Education Necessities (SEN) prefer to use faith as a coping mechanism in order to overcome the tension level between COVID-19 lockdowns. It is also found that both mother and dad vary significantly in perceived tension, but no substantial gap in the usage of stress coping strategies. It is important to note that parents live in urban and rural areas vary dramatically in perceived tension, but the usage of coping mechanisms to exclude stress may not differ significantly. Parent's age and degree of schooling may not impact depression and strategies for coping. Parents caring for children with Special Educational Needs (SEN) when locking COVID-19 have a high degree of tension. Parents used a number of coping mechanisms, including the most popular faith. Stress management and parents' communication strategies



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

instruction will be more successful as it was taken into the schooling of children with special needs. Taking the implications of this research into consideration, psychiatrists may use faith and other coping mechanisms to achieve positive results of their psychotherapy. These preparation approaches are utilized in the Multinational Personal Day and Annual Outcome Day plans. These services may sometimes be built with an even greater effort from the school leadership and family input and encouragement.

## RESULTS

The following questionnaire was made to parents and asked them to put percentage marks, *i.e.*, out of 100. After that, these marks are placed in 0 to 1 scale, as illustrated in Table 1, whereas Figure 1 depicts the response of all the 30 respondents in pictorial chart.

**Table 1**
**DATA OF 30 RANDOM PARENTS AND THEIR MARKS**

| Parents | Volunteering kids homework | Participated parent teacher meeting | Present during online classes | Spent times with kids for academic psychological motivation | Evaluating kids performance |
|---|---|---|---|---|---|
| P1 | 0.53 | 0.77 | 0.77 | 0.28 | 0.13 |
| P2 | 0.33 | 0.94 | 1 | 0.14 | 0.68 |
| P3 | 0.41 | 0.05 | 0.63 | 0.93 | 0.37 |
| P4 | 0.46 | 0.8 | 0.73 | 0.1 | 0.92 |
| P5 | 0.43 | 0.51 | 0.51 | 0.65 | 0.62 |
| P6 | 0.8 | 0.08 | 0.79 | 0.87 | 0.43 |
| P7 | 0.76 | 0.01 | 0.69 | 0.67 | 0.94 |
| P8 | 0.9 | 0.22 | 0.19 | 0.72 | 0.64 |
| P9 | 0.73 | 0.74 | 0.68 | 0.59 | 0.03 |
| P10 | 0.04 | 0.34 | 0.65 | 0.02 | 0.84 |
| P11 | 0.06 | 0.46 | 0.76 | 0.88 | 0.43 |
| P12 | 0.96 | 0.71 | 0.77 | 0.61 | 0.28 |
| P13 | 0.21 | 0.46 | 0.72 | 0.37 | 0.2 |
| P14 | 0.18 | 0.09 | 0.59 | 0.54 | 0.15 |
| P15 | 0.9 | 0.05 | 0.66 | 0.23 | 0.62 |
| P16 | 0.69 | 0.98 | 0.41 | 0.83 | 0.95 |
| P17 | 0.37 | 0.54 | 0.5 | 0.12 | 0.72 |
| P18 | 0.5 | 0.35 | 0.77 | 0.98 | 0.99 |
| P19 | 0.25 | 0.71 | 0.08 | 0.29 | 0.19 |
| P20 | 0.68 | 0.28 | 0.31 | 0.47 | 0.76 |
| P21 | 0.45 | 0.57 | 0.8 | 0.65 | 0.64 |
| P22 | 0.52 | 0.48 | 0.3 | 0.87 | 0.85 |
| P23 | 0.72 | 0.98 | 0.09 | 0.67 | 0.59 |
| P24 | 0.72 | 0.88 | 0.23 | 0.45 | 0.96 |
| P25 | 0.01 | 0.19 | 0.14 | 0.88 | 0.93 |
| P26 | 0.1 | 0.66 | 0.16 | 0.03 | 0.2 |
| P27 | 0.92 | 0.14 | 0.73 | 0.58 | 0.31 |
| P28 | 0.31 | 0.35 | 0.29 | 0.1 | 0.84 |
| P29 | 0.52 | 0.03 | 0.26 | 0.8 | 0.78 |
| P30 | 0.71 | 0.29 | 0.03 | 0.69 | 0.93 |



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

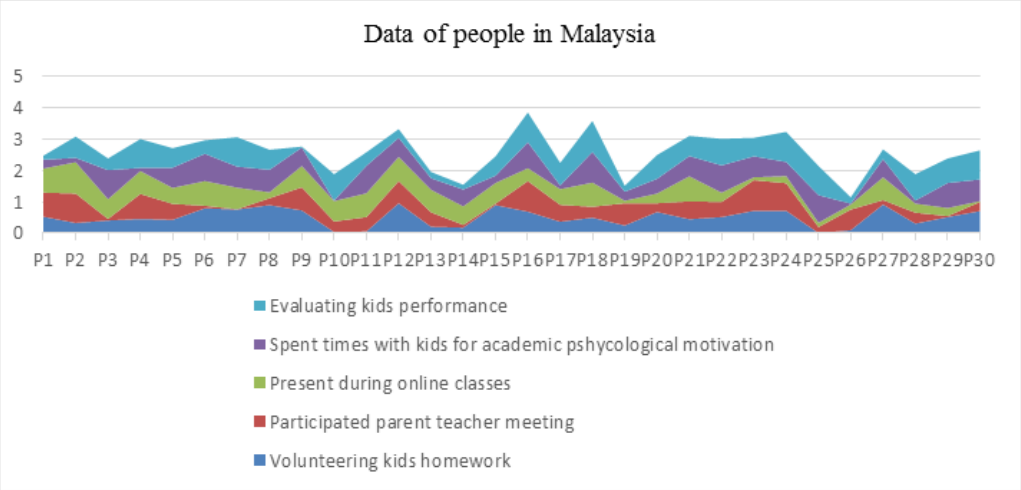


**FIGURE 2**
**PICTORIAL REPRESENTATION OF RESPONDENTS' FEEDBACK**

Moreover, Table 2 shows that the mean of all parameters is nearby 50%. That means 50% of the parents spent quality times with their children. But the range of the stats is high, that means, there were few serious parents in terms of education care.

**Table 2**
**DESCRIPTIVE STATISTICS OF THE COLLECTED DATA**

| Volunteering Kids Homework | | Participated Parent Teacher Meeting | | Present During Online Classes | |
|---|---|---|---|---|---|
| Mean | 0.505667 | Mean | 0.455333 | Mean | 0.508 |
| Standard Error | 0.051214 | Standard Error | 0.056336 | Standard Error | 0.049941 |
| Median | 0.51 | Median | 0.46 | Median | 0.61 |
| Mode | 0.9 | Mode | 0.05 | Mode | 0.77 |
| Std. Dev. | 0.280513 | Std. Dev. | 0.308564 | Std. Dev. | 0.273539 |
| Sample Variance | 0.078687 | Sample Variance | 0.095212 | Sample Variance | 0.074823 |
| Kurtosis | -0.98968 | Kurtosis | -1.16672 | Kurtosis | -1.25025 |
| Skewness | -0.15319 | Skewness | 0.177843 | Skewness | -0.29233 |
| Range | 0.95 | Range | 0.97 | Range | 0.97 |
| Minimum | 0.01 | Minimum | 0.01 | Minimum | 0.03 |
| Maximum | 0.96 | Maximum | 0.98 | Maximum | 1 |
| Sum | 15.17 | Sum | 13.66 | Sum | 15.24 |
| Count | 30 | Count | 30 | Count | 30 |

Correlation among the questionnaire is also shown in Table 3. Besides, the p-value of the ANOVA test is 0.44522, which is well ahead of 0.05. Thus all the questions were related. Therefore the study is stable. The result has mixed opinions.

Volunteering kids homework Participated parent teacher meeting Present during online classes Spent times with kids for academic psychological motivation Evaluating kids performance.



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

**Table 3**
**CORRELATIONS OF THE COLLECTED DATA**

| | Volunteering Kids Homework | Participated Parent Teacher Meeting | Present during Online Classes | Spent Times with Kids for Academic Psychological Motivation | Evaluating Kids Performance |
|---|---|---|---|---|---|
| Volunteering kids homework | 1 | | | | |
| Participated parent teacher meeting | -0.03984 | 1 | | | |
| Present during online classes | 0.04343 | -0.02173 | 1 | | |
| Spent times with kids for academic psychological motivation | 0.264722 | -0.30357 | -0.05631 | 1 | |
| Evaluating kids performance | 0.062306 | -0.06492 | -0.24079 | 0.13306 | 1 |

## DISCUSSION AND CONCLUSION

Empirical data from this research reveals that, during the COVID-19 pandemic and lockout time, 20.4 per cent, 6.6 per cent, and 2.8 per cent of students had low to mild, strong to intense and most severe anxieties. Age, sex, academic and living environments have been directly related to levels of anxiety. Stressors primarily were financial restrictions, remote online learning and confusion about academic success, graduation and potential job opportunities. The Centers for Disease Control (CDC) have suggested recommendations to alleviate student anxiety—repeat viewing and reading, and listening to new COVID-19 news, particularly from inaccurate sources of social media; sustain healthier diets, exercise, sufficient sleeping hours; and keep the mind's tension-free through almost communicating to friends and family members; and end the anxiety level between students; As suggested, it encourages us to believe like "all are involved together."

All players in the educational field are highly urged to understand the need for an urgent and holistic policy to recognize and mitigate the psychological effect of COVID-19 or any potential pandemic on students. Both higher education organizations and related ministries play a crucial position in this regard. Universities may play a vital role in helping students deal with these anxieties. Fresh recommendations are obligatory for counselling. Universities, together with other resources, such as text messaging, chatlines, platforms and telephone calls, can establish goals for implementing modern psychology approaches such as applications and online programmes. The student body should be clearly conscious of the existence of such measures. Universities can therefore provide intimate or remote psychological resources to reduce physical and behavioral effects on students. It is important to stay in contact with the students constantly. Universities can embark on standardized services to alleviate anxiety, including instruction in life skills and consciousness counselling, validated with anxiety reduction. It is also critical that the universities re-examine their curricula, learning results and methods for evaluation of courses and programmes that are offered online as well as those that are planned for personal teaching. Through a wider standpoint, departments and relevant organizations in collaboration with the WHO, UNESCO and the CDC need to step up the community's understanding of pandemics through the usage of artificial intelligence.

All in all, it is crucial to urgently consider an all-inclusive curriculum and learning plan during pandemics, as this research indicates that remote emergency training has led to substantial student anxiety. The Standard Operational Procedures (SOPs) should be set in order to inform students in a condensed, straightforward and welcoming way on the triggers and effects of a pandemic, without inducing fear and depression. It is essential to share accurate and



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

timely information through the right channels. Elections should also be based on finding novel methods for preserving social attachment among students while also pursuing public health guidance to curb the spread of the pandemic. Strict steps and punishments against unscrupulous persons should be implemented to curtail disinformation *via* social networking, which continues to be a key source of unnecessary concern among students.

## ACKNOWLEDGEMENT

The authors are thankful to the Faculty of Education, Universiti Kebangsaan Malaysia that funded this article publication *via* research grant (Code: GG-2020-023).

## REFERENCES

Abdullah, J.M., Ismail, W.F.N.M.W., Mohamad, I., Ab Razak, A., Harun, A., Musa, K. I., & Lee, Y.Y. (2020). A critical appraisal of COVID-19 in Malaysia and beyond. *Malaysian Journal of Medical Sciences, 27*(2), 1.

Department of Statistics. (2020). "Malaysia Population Clock." https://www.dosm.gov.my/v1/index.php?r=column/cthree&menu_id=aXFLWERmeDJ5elQ a0Y 0N3FqT0t2UT09. Accessed 15th May 2020.

Department of Statistics. (2020). "current population-age structure." https://www.dosm.gov.my/v1/index.php?r=column/cthemeByCat&cat=155&bul_id=aWJZRk J4UEdKcUZpT2tVT090Snpydz09&menu_id=L0pheU43NWJwRWVSZklWdzQ4TlhUUT09 Accessed 15th May 2020.

DG of Health. (2014). From the desk of the director-general of health Malaysia: What is Crisis Preparedness and Response Centre (CRPC). https://kpkesihatan.com/2014/08/04/crisispreparedness-and-response-centre-cprc/. Accessed 18 May 2020

Ministry of Health Malaysia (2020). COVID-19 (Latest Updates). https://www.moh.gov.my/index.php/pages/view/2019- ncov-wuhan. Accessed 18 May 2020.

Mosley, T.H., Perrin, S.G., Neral, S.M., Dubbert, P.M., Grothues, C.A., & Pinto, B.M. (1994). Stress, coping, and wellbeing among third-year medical students. *Academic Medicine, 69*, 765–767.

Aktekin, M., Karaman, T., Senol, Y.Y., Erdem, S., Erengin, H., & Akaydin, M. (2001). Anxiety, depression and stressful life events among medical students: A prospective study in Antalya, Turkey. *Medical Education, 35*, 12–17.

Cao,W., Fang, Z., Hou, G., Han, M., Xu, X., Dong, J., & Zheng, J. (2020). The psychological impact of the COVID-19 epidemic on college students in China. *Journal of Psychiatric Research, 287*, 112934.

Wang, G., Zhang, Y., Zhao, J., Zhang, J., & Jiang, F. (2020). Mitigate the effects of home confinement on children during the COVID-19 outbreak. *Lancet, 395*, 945–947.

Bayram, N., & Bilgel, N. (2008). The prevalence and socio-demographic correlations of depression, anxiety and stress among a group of university students. *Social Psychiatry and Psychiatric Epidemiology, 43*, 667–672.

Auerbach, R.P., Alonso, J., Axinn,W.G., Cuijpers, P., Ebert, D.D., Green, J.G., & Nock, M.K. (2016). Mental disorders among college students in the World Health Organization world mental health surveys. *Psychological Medicine, 46*, 2955–2970.

Bruaerts, R., Mortier, P., Kiekens, G., Auerbach, R.P., Cuijpers, P., Demyttenaere, K., & Kessler, R.C. (2018). Mental health problems in college freshmen: Prevalence and academic functioning. *Journal of Affective Disorders, 225*, 97–103.

González, O.P., Gómez, P.A., Irurtia, M.J., & de Luis-García, R. (2020). Psychological effects of the COVID-19 outbreak and lockdown among students and workers of a Spanish university. *Journal of Psychiatric Research, 290*, 113108.

Cornine, A. (2020). Reducing nursing student anxiety in the clinical setting: An integrative review. *Nursing Education Perspectives, 41*, 229–234.

Ayittey, F.K., Ayittey, M.K., Chiwero, N.B., Kamasah, J.S., & Dzuvor, C. (2020). Economic impacts of Wuhan 2019-nCoV in China and the world. *Journal of Medical Virology, 92*, 473–475.

Peng, L., Zhang, J., Li, M., Li, P., Zhang, Y., Zuo, X., Miao, Y., & Xu, Y. (2012). Negative life events and mental health of Chinese medical students: The effect of resilience, personality and social support. *Journal of Psychiatric Research, 196*, 138–141.

Gentili, D., Bardin, A., Ros, E., Piovesan, C., Ramigni, M., Dalmanzio, M., ... & Cinquetti, S. Impact of communication measures implemented during a school tuberculosis outbreak on risk perception among parents and school sta, Italy, 2019. *International Journal of Environmental Research. Public Health, 17*, 911.

Xiao, H., Zhang, Y., Kong, D., Li, S., & Yang, N. (2020). The effects of social support on sleep quality of medical statreating patients with coronavirus disease 2019 (COVID-19) in January and February 2020 in China.



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.

Medical Science Monitor. *International Medical Journal of Experimental and Clinical Research*, *26*, e923549.

Tang, B., Wang, X., Li, Q., Bragazzi, N.L., Tang, S., Xiao, Y., & Wu, J. (2020). Estimation of the transmission risk of the 2019-noV and its implication for public health interventions. *Clinical Medicine*, *9*, 462.

Reger, M.A., Stanley, I.H., & Joiner, T.E. (2020). Suicide mortality and coronavirus disease 2019—A perfect storm? *JAMA Psychiatry*.

Thunström, L., Newbold, S.C., Finno, D., Ashworth, M., & Shogren, J.F. (2020). The benefits and costs of using social distancing to flatten the curve for COVID-19. *Journal of Benefit-Cost Analysis*, 1–27.

Gardner, P.J., & Moallef, P. (2015). Psychological impact on SARS survivors: Critical review of the English language literature. *Canadian Psychology*, *56*, 123.

Brooks, S.K., Webster, R.K., Smith, L.E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G.J. The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. Lancet 2020.

Hawryluck, L., Gold, W.L., Robinson, S., Pogorski, S., Galea, S., & Styra, R. (2004). SARS control and psychological effects of quarantine, Toronto, Canada. *Emerging Infectious Diseases*, *10*, 1206 1212.

Wheaton, M.G., Abramowitz, J.S., Berman, N.C., Fabricant, L.E., & Olatunji, B.O. (2012). Psychological predictors of anxiety in response to the H1N1 (swine flu) pandemic. *Journal of Cognitive Psychotherapy*, *36*, 210–218.

Xiang, Y.T., Yang, Y., Li, W., Zhang, L., Zhang, Q., Cheung, T., & Ng, C.H. (2020). Timely mental health care for the 2019 novel coronavirus outbreak is urgently needed. *Lancet Psychiatry*, *7*, 228–229.

Mat, N.F.C., Edinur, H.A., Razab, M.K.A.A., & Safuan, S. (2020). A single mass gathering resulted in massive transmission of COVID-19 infections in Malaysia with further international spread. *Journal of Travel Medicine. Online early publication, 27*(3), taaa059. https://doi.org/10.1093/jtm/taaa059

Karim, W., Haque, A., Anis, Z., & Ulfy, M. A. (2020). The Movement Control Order (MCO) for COVID-19 Crisis and its Impact on Tourism and Hospitality Sector in Malaysia. *International Tourism and Hopitality Yournal*, *3*(2), 1-7.

Hamdy, M.S., & Yusuf, M.M. (2018). Review on public long-term care services for older people in Malaysia. *Health and Technology*, *2*(Special).

Ibrahim, R., Tan, J.P., Hamid, T.A., & Ashari, A. (2018). Cultural, demographic, socioeconomic background and care relations in Malaysia. In Care Relations in Southeast Asia, 41-98, Brill.



**Citation Information**: Nesen, J.N., & Bakar, A.Y.A. (2021). Coping strategies for parents with special need children during covid-19 lockdown In Malaysia. *Journal of Management Information and Decision Sciences, 24*(S1), 1-9.