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In-Text Citation: (Ibrahim et al., 2023)
To Cite this Article: Ibrahim, N. H., Mohamed, S., & Satari, N. (2023). Mental Health among Special Education Teachers During The Period of Movement Control Orders. *International Journal of Academic Research in Business and Social Sciences*, *13*(4), 142 – 160.

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Mental Health among Special Education Teachers During The Period of Movement Control Orders

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Abstract
Mental health encompasses a person's emotional, psychological, and social well-being. However, people can experience mental health problems, including special education teachers. Therefore, this study examined the mental health of special education teachers in Kunak, Sabah. In this study, three main objectives are presented: i) to measure the level of mental health of special education teachers, ii) to identify the factors contributing to mental health problems, and iii) to identify measures to reduce mental health problems among special education teachers during the Movement Control Order (MCO) period. The data of this study were obtained through the questionnaires distributed to 30 special education teachers in Kunak and analyzed using descriptive analysis based on frequency, percentage, mean, and standard deviation. The results showed that the level of mental health of special education teachers was in good condition. In addition, the findings of this study also showed the contributing factors of mental health problems and measures to reduce mental health problems among special education teachers during the period of MCO. Therefore, this study can be disseminated to various parties to recognize the mental health among special education teachers.
Keywords: Mental Health, Special Education Teachers, MCO

Introduction
Mental health refers to a state of dynamic internal balance that allows individuals to use their abilities in accordance with universal values in society (Galderisi et. al., 2015). Mental health problems in Malaysia are predicted to be among the most risky health problems after heart disease. This situation can be proven by the National Survey of Health and Morbidity (2015) which stated that mental health problems among adults are at a rate of 29.2%, while children are at a rate of 12.1%. In addition, data collected by Mercy Malaysia and the National Crisis Preparedness and Response Center has shown that 46.8% of calls received by them were mostly from patients with psychological problems. This situation is very concerning due to the risk of a person acting out of control and can eventually result in death due to mental health problems experienced.

Career groups are among the groups at risk of experiencing mental health problems. Previous studies have proven that the impact of work stress can have a strong influence on the mental health of employees. According to Nurul and Roshanim (2020), stress at work indirectly leads to symptoms and ultimately affects employee psychology. Rabindarang and Khoo (2014) also perceived that the education sector is among the service professions that lead to work stress, especially among teachers. Teachers are often involved in various activities related to the community including students. The stress experienced will have an adverse effect on the level of performance, quality, and satisfaction of the individual, thus the task given cannot be performed properly.

Stress is one of the main factors that lead to mental health problems among teachers. For example, stress that occurs at work will lead to worse problems for teachers and eventually expose them to mental health problems. This situation may also influence work performance and commitment, in addition to influencing students' academic achievement (Mohamed, 2018). The question is, are the contributing factors to mental health problems between mainstream teachers and special education teachers similar? Many studies related to mental health among mainstream teachers have been conducted, but there are still few that examine and explain the issue of mental health among special education teachers, especially in Malaysia. This situation is very alarming as special education teachers also experience unstable emotional stress due to various behavioral problems of students with special needs, and at the same time need to meet their needs (Chao et al., 2017).

Malaysia has been blown by the increase in the number of Covid-19 infection cases from March 2020. This epidemic has become a major health issue that affects all aspects of human life, especially those related to economic and social activities. Therefore, the Movement Control Order (MCO) is an alternative by the Malaysian government in curbing the infection of this epidemic. It is crucial to reduce the interaction between the community and further reduce the number of infection cases. The epidemic can be controlled by restricting the peole movement (Chinazzi et al., 2020; Sohrabi et al., 2020).

Furthermore, educational institutions are also impacted by the implementation of MCO in this country. The Malaysian Ministry of Education has ordered the closure of schools with effect from 18 March 2020, and teaching and learning were conducted in the most suitable way for students. However, the closure of schools has caused various problems for special education teachers. They need to provide initiatives to implement appropriate teaching for students with special needs. Therefore, the readiness of the students should be emphasized by the educator (Zulhasnan et al., 2019). If a student with special needs is not ready, the lesson that has been planned cannot be conducted by the teacher. This situation causes stress to teachers and further leads to mental health problems if not dealt with immediately.

To reduce mental health problems among special education teachers, various measures should be taken comprehensively to reduce the burden experienced by them. However, the study found that measures to reduce mental health problems are not implemented by individuals concerned, including special education teachers. If not emphasized, it will affect individual health, mental well-being, emotions, physical, behavior, performance, quality, and productivity as well as the quality of services, academic performance and student learning (Kamenetz, 2015).

Thus, this study was conducted to review the level of mental health and contributing factors to this problems as well as measures taken to reduce these problems among special education teachers throughout the MCO period. The objectives of this study are:

a.   To measure the level of mental health of special education teachers throughout the

period of the MCO.

b.   To identify contributing factors to mental health problems among special education teachers throughout the MCO period.

c.   To identify measures to reduce mental health problems among special education teachers throughout the MCO period.

Mental Health Issues among Special Education Teachers

Mental health is included in the aspects of health that should be emphasized by humans as it can affect a person's emotional, psychological, and social well-being. Scholars defined mental health as a function of whether an individual feels comfortable or not with themselves and their way of life (Aldan & Filmer, 2013). In fact, mental health also refers to the cognitive, behavioral, and emotional well-being experienced by individuals (Felman, 2020). However, mental health problems can affect social relationships and physical health in an individual's daily life.

In addition, mental health can be described as a combination of a person's feelings and functionality in life (Mental Health Foundation, 2013). A combination of feelings refers to the emotional states and life satisfaction in real life, while functionality is characterized by an individual's relationship with other individuals, personal control, life goals, and also the ability to live independently. Therefore, mental health is a dynamic state of an individual who is able to develop their potential, work productively and creatively, build strong and positive relationships with other individuals, and can work together in society. This well-being can be improved when a person is able to meet personal needs, and social goals and achieve success in society.

Every layer of society regardless of race, religion, and profession is no exception to experiencing mental health problems. Every individual who experiences delirium and extreme stress is at risk of developing mental health problems. Special education teachers are among the most challenging career fields that are not exempt from experiencing mental health problems. They guide and facilitate the learning of children with special needs systematically in a formal or informal learning environment (Zalizan, 2009). Special education teachers include teachers who teach students with special needs in special education schools, inclusive education, and integrated special education programs (PPKI) in regular day schools. Special education is divided into three main areas, namely learning difficulties, hearing impairment,s and vision impairments (Ministry of Education Malaysia, 2013). Therefore, special education teachers face various challenges in educating students and managing classes that require physical and mental preparation as well as research in developing individual lesson plans for students with special needs.

The career of a special education teacher in educating students with special needs has its own challenges in dealing with various behaviors and disabilities of the students. The challenges experienced by these teachers sometimes lead to stress and then mental health problems. For example, the most challenging task for special education teachers is to design learning plans to meet the curriculum that suits the level and cognitive abilities of each student with special needs (Gee & Gonsier-Gerdin, 2018). Individual teaching planning by special education teachers requires in-depth research covering the following dominant factors, namely communication, psychomotor, adaptive, cognitive, social, emotions, and behaviors which must be according to the ability of each student with special needs. This situation causes special education teachers to be stressed as they are burdened with excessive tasks and have

to deal with a group of students with various behavioral problems (Faridah et al., 2001; Yahaya et al., 2010).

In addition, the entire country was shaken by the existence of a virus known as Coronavirus Disease (Covid-19) at the end of 2019. Following the spread of the virus, the World Health Center (WHO) has declared this virus as a pandemic as it has a negative impact on human health. Therefore, the MCO is an alternative for the Malaysian government in curbing the infection of this epidemic. The interaction between people is mitigated and in turn, can reduce the number of infection cases. The number of Covid-19 infection cases can be reduced by restricting the movement of people in an area (Chinazzi et al., 2020; Sohrabi et al., 2020). Consequently, the restrictions implemented by the government caused the non-service and social sectors to not be allowed to operate. Accordingly, the Malaysian Ministry of Education has ordered the closure of schools from 18 March 2020 to control the spread of Covid-19, especially in schools.

However, the closure of schools during the MCO period has given challenges to various parties including special education teachers. Face-to-face teaching and learning cannot be implemented to reduce the rate of Covid-19 infection that is currently sweeping the country (Salleh, 2020). This certainly puts pressure on special education teachers as they need to think about how to handle and teach students with special needs without teaching face-to-face during the MCO. According to Bao (2020), as a result of the Covid-19 pandemic, most teachers face challenges due to a lack of experience and knowledge about online teaching platforms. School closures have a negative impact on teachers (Amri et al., 2020). Special education teachers have experienced burnout symptoms resulting from fatigue, the use of new information and communication technologies, work or family conflicts, social support, and workload during distance learning. This situation is very concerning as the mental health problems experienced can affect the resilience, level of optimism, confidence, hope, and self-efficacy of special education teachers.

Stress is one of the main factors that cause mental health problems among special education teachers. Therefore, stress management should be applied to the individual who experiences it and the surrounding community. Waltz (2016) explained that stress cannot be eliminated from the surroundings, especially when teaching, but stress can be reduced with good management strategies and techniques which in turn can deliver effective teaching to students. Waltz proposed the ABC (activating event, beliefs, consequences) stress management module introduced by Albert (1977) to reduce the stress experienced by an individual. The module was developed to explain the concept of A (event), B (belief), and C (emotional and behavioral effects). Most teachers will go through the process A and C only, which is to blame events that cause strons to the teacher's emotions and behavior. Teachers do not go through process B before entering process C which causes a lack of rationality of belief, thus causing a negative effect on emotions and behavior, such as anger, depression, and so on. This situation leads to stress and subsequently has a negative impact on the mental health of special education teachers.

FREQUENTLY USED CONCEPTS
A $\longrightarrow$ C   Activation event   Consequences
ABC STRESS MANAGEMENT MODEL (ALBERT ELLIS, 1997)
A $\longrightarrow$ B $\longrightarrow$ C   Activation event   Believe   Consequences
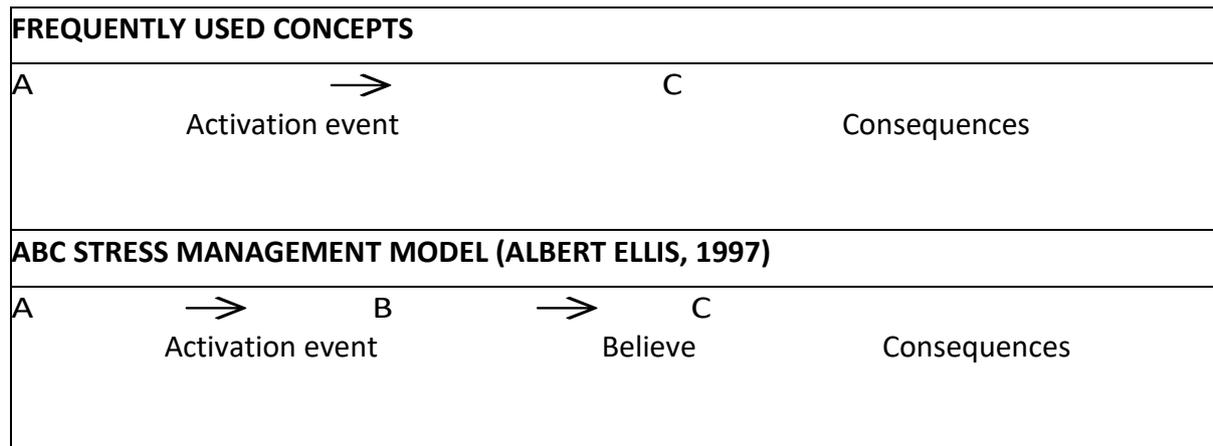
This model is seen as a medium to educate individuals to see a self-belief system that can cause them to believe rationally and well-being, and further reduce the sense of pressure on themselvesahman et al., 2013). Stress problems if not managed well can cause individuals to be at risk of experiencing mental health problems, and subsequently become the main factor in early retirement among teachers, especially special education teachers.

A career as a special education teacher has its own challenges, thus appropriate initiatives should be taken in managing mental health problems. Support from the organization plays an important role in assisting teachers to manage stress caused by various factors. Based on previous studies, organizational support is essential in increasing motivation and helping to reduce mental health problems experienced by special education teachers. Scholars stated that academic staff who receive support from organizations will be less cynical about the education revolution that was introduced (Walid & Noor, 2011). Employees perceive that if they are treated well, it means that their contribution has been appreciated by the organization. Thus, it can be concluded that organizational support is one of the important measures that can assist teachers to reduce their mental health problems during the MCO.

Research Methodology
The research design selected by the researchers was in the form of a survey. A survey is a procedure where the researcher administers a survey of a sample or population to describe the attitudes, views, beliefs, behavior, or characteristics of a population. Therefore, the researchers used a cross-sectional survey via a questionnaire for data collection of the selected sample.

Sample Study
A survey was conducted in this study, where samples were required from a large population. Before determining the sample size, the researchers must identify the population in the study area. The entire population and sample of the study consisted of 30 special education teachers working in a selected district in the state of Sabah.

Research sampling is a process of selecting a sample from a population to be used as respondents (sample) of the study. For sample selection, a census sampling technique was used. Typically, census sampling involves all respondents in the population as a study sample without any selection bias. This study used census sampling by selecting 30 special education teachers of the Integrated Special Education Program (PPKI) either in primary or secondary schools in Kunak district in the state of Sabah. The district chosen is the Kunak district which is located on the east coast of the state of Sabah as the study sample. The number of schools

that have PPKI in Kunak district is 7: 5 in primary schools and 2 in secondary schools. The schools in this district are categorized into rural and inland 1.

Instrument of Study
This study was conducted quantitatively using a questionnaire as the instrument. The questionnaire can be used as an instrument if large sample size is involved, and efficient administration and time management are required (Cresswell, 2005). The questionnaire was divided into four sections: Section A comprised the demographics of the respondents, section B assessed the level of mental health, section C presented the contributing factors to mental problems, and Section D consisted of the measures taken to reduce mental health problems among special education teachers throughout the MCO period.

Table 1
Questionnaire Distribution

Section	Question Section	Number of Item
A	Demographic	6
B	Level of mental health	10
C	Contributing factors to mental health problems	10
D	Measures to reduce mental health problems	9

a.   Respondent demographics
This section aims to collect information about the respondent's background. A total of 6 items were presented to respondents which included gender, age, race, level of education, type of school served, and length of experience teaching special education.

b.   Level of mental health
This section identifies the level of mental health of special education teachers throughout the MCO period to achieve the first objective of this study. A total of ten items are presented in this section.

c.   Contributing factors to mental health problems
In this section, the researchers presented a total of ten items to the respondents. This section is to identify contributing factors to mental health problems among special education teachers throughout the Movement Control Order period. This section is to include information to achieve the second objective of the study.

d.   Measures to reduce mental health problems
This section identified appropriate measures to reduce mental health problems among special education teachers throughout the MCO period. This section has nine items to achieve the third objective of this study.
This questionnaire was adopted and modified from Deemah et al., (2020) and Mas et al., (2017). A Likert scale was used in the questionnaire and the scores used for section B to assess the level of mental health were never (1), rarely (2), often (3), and frequently (4). Meanwhile,

for sections C and D, the scores used were based on strongly disagree (1), disagree (2), agree (3), and strongly agree (4).

Data Collection and Analysis Procedures
The data collection process in this study was conducted by distributing questionnaires to the respondents in the district online through google forms using email or Whatsapp applications. This method is used to curb the spread of the Covid-19 epidemic. The data collection process took 2 weeks. Google Spreadsheet was used to collect all the data and information from the respondents.

Subsequently, all research data were analyzed using the Statistical Package for Social Science (SPSS) software version 23. Sections A, B, C, and D were analyzed using descriptive analysis based on frequency, percentage, mean, and standard deviation. According to Herman (2007), descriptive analysis is a means to summarize and classify data so that the data researcher can be easily understood. Descriptive analysis was used by the researchers to answer the objectives of this study. The mean score obtained from each section was interpreted with reference to Riduwan (2012) as shown in Table 2.

Table 2
Interpretation of mean score

Mean score	Mean interpretation
1.00-1.50	Very good
1.51-2.50	Good
2.51-3.50	Not good
3.51-4.00	Very not good

Source: Riduwan (2012)

Findings
The descriptive analysis used in this study involved mean, frequency, percentage, standard deviation, and mean interpretation. The research findings are explained in detail according to each section in the questionnaire.

a. **Demographic Profile**
This section presents basic information about the background of the respondents according to gender, age, race, education level, type of school served, and teaching experience in special education. A total of 30 special education teachers who are currently teaching in Kunak, Sabah was selected as shown in Table 3.
It was found that 20% of the respondents were male and 80% of the respondents were female. In terms of age groups, 40% of the respondents were from 20 - 30 years old, 36.7% of the respondents were from 31 - 40 years old, 20% were from 41 - 50 years old, and 3.3% of the respondents were from 51 - 60 years old. For the race category, 53.3% of the respondents were Malay and 46.7% of them were Bumiputera. Moreover, all respondents had Bachelor's degrees.
In the category of type of school served, 53.3% of respondents taught in primary schools and the remaining 46.7% taught in secondary schools. Of the 30 special education teachers, 40% of them have less than 5 years of teaching experience, 26.7% have 6 to 10 years of experience,

26.7% have 11 to 15 years of teaching experience and 6.7% have more than 21 years of teaching experience in Special Education field.

Table 3
Demographics of respondents

Demographic Profile		Frequency (*n*)	Percentage (%)
Gender	Male	6	20
	Female	24	80
Age	20 – 30 years old	12	40
	31 – 40 years old	11	36.7
	41 – 50 years old	6	20
	51 – 60 years old	1	3.3
Race	Malay	16	53.3
	Chinese	0	0
	Indian	0	0
	Bumiputera	14	46.7
Education level	Diploma	0	0
	Bachelor's Degree	30	100
	Master's Degree	0	0
	Doctor of Philosophy	0	0
	Primary school	16	53.3
Type of school	Secondary school	14	46.7
Special Education teaching experience	Less than 5 years	12	40
	6 – 10 years	8	26.7
	11 – 15 years	8	26.7
	16 – 20 years	0	0
	More than 21 years	2	6.7

**b.	The level of mental health of special education teachers throughout the MCO period**
Table 3 shows detailed information about the level of mental health of special education teachers throughout the MCO period. Based on the mean interpretation, it was found that the mental health level of the special education teacher was at a good level. This was evidenced by the disagreement of 8 items in the questionnaire with the statements given, namely items 1, 2, 3, 4, 7, 8, 9 and 10.
For item 1, it was found that 50.0% of respondents rarely feel disappointed when unexpected things occur, while item 2 found that 40.0% of respondents are rarely unable to control important things in their lives. In addition, there were 43.3% of respondents rarely feel nervous in item 3, and in item 4, 50.0% of respondents rarely experience depression. Moreover, the statement of item 7 recorded that 53.3% of respondents are rarely unable to manage all the things that need to be done, while 46.7% of respondents are also rarely unable to control their feelings in item 8. In addition, items 9 and 10 exhibited that respondents rarely

experience feelings of anger and difficulty focusing as indicated by 46.7% and 43.3%, respectively.

Furthermore, the majority of respondents were able to control their level of mental health throughout the MCO period. This was proven through the responses in items 5 and 6 which indicated that 46.7% of respondents often feel confident in their ability to deal with personal problems and 30.0% of respondents often feel that their planning is going smoothly. The factor that leads to the level of mental health of special education teachers in good condition could be due to the number of Covid-19 infection cases in this district is still under control. As a result, teachers can send assignments to students' homes without stress.

Table 4
Level of mental health of special education teachers throughout the MCO period

Statement	n (%)			
	Never	Rarely	Often	Frequently
Since last month, I feel disappointed when unexpected things occur.	8 (26.7)	15 (50.0)	2 (6.7)	5 (16.7)
Since last month, I have not been able to control the important things in my life.	11 (36.7)	12 (40.0)	2 (6.7)	5 (16.7)
For the past month, I often feel nervous.	11(36.7)	13 (43.3)	1(3.3)	5 (16.7)
Since the last month, I often feel depressed.	6 (20.0)	15 (50.0)	4 (13.3)	5 (16.7)
Since the last month, I feel confident in my ability to deal with my personal problems.	2 (6.7)	7 (23.3)	14 (46.7)	7 (23.3)
Since the last month, my planning has been going smoothly.	4 (13.3)	9(30.0)	9(30.0)	8 (26.7)
Since the last month, I have found that I cannot manage all the things that need to be done.	7 (23.3)	16(53.3)	2 (6.7)	5 (16.7)
Since the last month, I have not been able to control my feelings.	10 (33.3)	14 (46.7)	1 (3.3)	5 (16.7)
Since the last month, I get angry when things are out of my control.	8 (26.7)	14 (46.7)	3 (10.0)	5 (16.7)
Since the last month, I find it hard to focus that I cannot control what	10 (33.3)	13 (43.3)	2 (6.7)	5 (16.7)

is happening.	
Overall mean	2.24
Standard deviation	0.87
Mean interpretation	Good

c.   Contributing factors to mental health problems among special education teachers throughout the MCO period

This section explains the contributing factors to mental health problems among special education teachers based on the percentage and frequency obtained from the questionnaire. From 10 items, it was found that the majority of respondents did not agree with the statements given.

This can be proven based on 40.0% of respondents who disagreed with the statement of being burdened with school workload, 43.3% disagreed with being burdened with family problems and 40.0% of respondents also disagreed with financial problems. About 30.0% disagreed with the statement being burdened by the submission of homework by students, 40.0% disagreed with personal problems, 40.0% of respondents disagreed with social pressure and 43.3% of respondents disagreed with health problems.

Furthermore, the majority of respondents strongly disagreed with the statements in items 8, 9 and 10. There were 33.3% of respondents who strongly disagreed with the burdensome due to having two responsibilities as parents or children and teachers at the same time, 53.3% of respondents strongly disagreed with being bullied by colleagues, and 46.7% of respondents strongly disagreed with being disturbed by other colleagues. From the findings of this study, it can be concluded that the majority of respondents were able to control the level of mental health throughout the MCO period and were subsequently able to control external and internal factors that may lead to mental health problems.

Table 5
Contributing factors to mental health problems among special education teachers throughout the MCO period

Statement	n (%)			
	Strongly disagree	Disagree	Agree	Strongly agree
I am burdened by the workload at school.	5 (16.7)	12 (40.0)	6 (20.0)	7 (23.3)
I am burdened with family problems	8 (26.7)	13 (43.3)	3 (10.0)	6 (20.0)
Financial problems cause me to fee stressed, depressed or anxious.	10 (33.3)	12 (40.0)	2 (6.7)	6 (20.0)
I am burdened with homework submissions by students.	9 (30.0)	9 (30.0)	5 (16.7)	7 (23.3)
Personal problems cause me to fee stressed, depressed or anxious.	7 (23.3)	12 (40.0)	4 (13.3)	7 (23.3)
Social pressure makes me feel stressed, depressed or anxious.	6 (20.0)	12 (40.0)	6 (20.0)	6 (20.0)
Health problems cause me to feel stressed, depressed or anxious.	6 (20.0)	13 (43.3)	4 (13.3)	7 (23.3)
Carrying out responsibilities as a child or parent and teacher while at home causes me to be burdened.	10 (33.3)	8 (26.7)	5 (16.7)	7 (23.3)
I am bullied by other colleagues.	16 (53.3)	7 (23.3)	0	7 (23.3)
I am disturbed by other colleagues.	14 (46.7)	9 (30.0)	0	7 (23.3)

d. Measures to reduce mental health problems among special education teachers throughout the MCO period

This section provides explanations related to percentage and frequency analysis of measures to reduce mental health problems among special education teachers throughout the MCO period. Based on the responses obtained from 9 items, it was found that 53.3% of respondents agreed to speak their problems to family members and 63.3% of respondents agreed to speak their problems to friends. In addition, 30.0% of respondents spoke their problems to counselors and 33.3% of respondents spoke their problems to advisors or mentors. Moreover, 46.7% of respondents agreed to receive advice and support from employers and 50.0% of respondents sought solace through a religious approach. Furthermore, 60.0% of respondents strongly agreed that carrying out favorite activities can calm their mind.

However, out of 9 question items, there were 2 question items, namely itemd 5 and 6, which received negative responses from the respondents. The majority of respondents practiced

measures to reduce mental health problems throughout the MCO period. This was evidenced through the statement of item 5, which was to use the service line to speak their problems, where 36.7% of respondents strongly disagreed with the statement given. In addition, 30.0% of respondents also disagreed with item 6, which was receiving advice and support from doctors. This was likely due to the limitations of health centers and online services to express all the problems faced by the respondents.

Table 6: Measures to reduce mental health problems among special education teachers throughout the MCO period

Statement	n (%) Strongly disagree	Disagree	Agree	Strongly agree
I speak to my family members about my problem.	1 (3.3)	4 (13.3)	16 (53.3)	9 (30.0)
I speak to my friend about my problem.	1(3.3)	3 (10.0)	19 (63.3)	7 (23.3)
I speak to the counselor about my problem.	7 (23.3)	8 (26.7)	9 (30.0)	6 (20.0)
I speak to to an advisor or mentor about my problems.	4 (13.3)	8 (26.7)	10 (33.3)	8 (26.7)
I used the service line to speak about the problem encountered.	11 (36.7)	10 (33.3)	3 (10.0)	6 (20.0)
I receive advice and support from the doctor.	8 (26.7)	9 (30.0)	5 (16.7)	8 (26.7)
I receive advice and support from the employer.	6 (20.0)	2 (6.7)	14 (46.7)	8 (26.7)
I seek solace through a religious approach.	0	1(3.3)	15 (50.0)	14 (46.7)
I carry out favorite activities that calm my mind.	1 (3.3)	1 (3.3)	10 (33.3)	18 (60.0)

Discussion

This study used a quantitative method in the form survey to assess the mental health among special education teachers throughout the MCO period. The objectives of this study are to measure the level of mental health, identify contributing factors to mental health and identify measures to reduce mental health problems among special education teachers throughout the MCO period. Descriptive analysis was used in this study in terms of percentage, frequency, mean, and standard deviation. Data were obtained through questionnaires distributed to 30 special education teachers in Kunak, Sabah. Thus, this section discusses each objective.

a. Level of Mental Health

Findings showed that the level of mental health of special education teachers in this study was at a good level. The good mental health among special education could be influenced by the acceptance of changes in teaching methods implemented during the MCO period. The teachers believed in the benefits of change from various aspects. It is well known that the Malaysian Ministry of Education has made appropriate changes in the country's education system during the MCO period. The intention was to reduce Covid-19 infection cases, especially in schools. This may explain the feeling of half of the special education teachers (50.0%) who were rarely disappointed when unexpected things occur. Teachers know that this change has its own advantages and avoids future health risks. This statement is reinforced by Tai (2013) stating that teachers' attitudes toward change are based on internal factors that influence teachers' choices to respond to change. Quality teachers are teachers who truly understand the importance of change and are able to accept the changes made (Aizat et al., 2018), especially during the implementation of PdPR during the Covid-19 pandemic.

In addition, the level of mental health is also affected by the level of confidence in dealing with personal problems. This situation involves internal motivation which is intrinsic to a person in influencing mental health to deal with various problems faced including personal problems. The better the level of mental health of a teacher, the higher their level of motivation to teach throughout the MCO period. This statement is in line with the view of Mahdavi et al (2021) who found a positive and significant relationship between mental health and motivation during online learning during the pandemic. Mental health and high motivation in a person are two very important factors during online learning, especially during the Covid-19 pandemic. A good level of mental health can increase a person's motivation during the teaching and learning process either face-to-face or online (Kotera et al., 2021).

Furthermore, Covid-19 infection cases in the Kunak district were not at an alarming level even though the number of infection cases throughout Malaysia was very high. According to the Sabah State Health Department (2020), there were only 8 cases of Covid-19 infection in the Kunak district compared to 18 in the neighboring district of Tawau on April 25, 2020. Thus, special education teachers in the Kunak district could send assignments to students' homes without worrying about epidemic infection. If MBK is unable to enter the class online, the special education teacher will send assignments to each student's home and ask the student's parents directly. Therefore, it can be seen that special education teachers carry out various alternatives to ensure that MBK does not lag in learning throughout the MCO period. This made special education teachers less likely to experience mental health problems due to students not carrying out their duties during the Covid-19 pandemic.

b. Contributing Factors to Mental Health Problems

In general, there are various factors that can contribute to mental health problems among special education teachers. Nevertheless, the overall findings of this study showed that the respondents disagreed with all the statements related to contributing factors to mental health problems. This was also proven through the findings that the respondent's mental health level was still in good condition. However, there were also a few special education teachers suffering from mental health problems following the education reform implemented by the Malaysian Ministry of Education to ensure that students do not omit lessons during the MCO period.

Among the contributing factors to mental health problems was the workload at home and at school. The workload is one of the factors that can cause feelings of anger, restlessness,

frustration, and dissatisfaction among teachers. As a result, the teacher's motivation will decrease and may eventually affect the level of efficiency in carrying out a task (Hong & Ismail 2015). Throughout the MCO period, teachers carried out their duties not in the normal school environment but at home. At the same time, teachers should perform duties as parents or children while at home. This leads to an increased workload while at home and further affects the mental health of special education teachers. The increasing workload will cause teachers to feel frustrated and act out of control unintentionally. Teachers cannot carry out their duties efficiently when the teacher's motivation is disturbed which is caused by such negative feelings. Maria (2011) viewed that the feeling of frustration experienced by teachers will affect their motivation in performing work and indirectly affect their level of efficiency.

In addition, mental health problems among special education teachers were also likely to be caused by being bullied by other colleagues. There is a theory of bullying among employees which is the "victim precipitation theory" which states that conflict will cause stress, anger, hatred, and irritation that lead to bullying behavior among employees (Samnani & Singh, 2016). In the context of employees working in the same unit, conflict among members acts as an emotional threat that causes members to engage in bullying behavior as a physical response to the conflict. Although the majority of respondents (53.3%) in this study strongly disagreed with the statement "I am bullied by my colleagues", a few strongly agreed. Colleagues are the closest support system at work. If negative things occur with colleagues, it can affect the teacher's mental health. Based on a study by Hoel & Cooper (2001), the highest bullying behavior by upper management is behavior through unreasonable workload and assignment deadlines. The findings of Hoel & Cooper (2001) also revealed that civil servants of Grades 41 and above will be given unreasonable workloads and assignment deadlines compared to other job grades. Although colleagues are close individuals at work, with different grade positions can lead to a culture of bullying at work, especially during the MCO period. Finally, it can affect mental health problems, especially for special education teachers.

c.   Measures to Reduce Mental Health Problems

Seeking peace through a religious approach is seen as one of the steps used by respondents in reducing mental health problems. The foundation for every human being is based on religious nature. For Muslim individuals, prayer is a pillar of religion that helps organize life. This is based on the words of Allah SWT in Surah Al-Mukminun verses 1-3 which means: 'Successful indeed are the believers, that is, those who are devoted in their prayers, and those who stay away from vain deeds'. This point is supported by the study of Pashtoon et al (2012) who found that religious strategies by following their respective religious practices are the most implemented prevention approaches. Therefore, it can be concluded that a religious approach can help special education teachers to think relevantly if something negative happens, especially during the Movement Control Order. Negative things can be reduced by adopting a religious approach in life.

Seeking peace through a religious approach is seen as one of the measures used by respondents in reducing mental health problems. The foundation for every human being is based on religious nature. For Muslim individuals, prayer is a pillar of religion that helps organize life. This is based on the words of Allah SWT in Surah Al-Mukminun verses 1-3 which means: 'Truly successful are the believers, that is, those who are devoted in their prayers, and those who avoid vain actions'. This is supported by Pashtoon et al (2012) who found that religious strategies by following their respective religious practices are the most implemented prevention approaches. Therefore, it can be concluded that a religious approach can help

special education teachers to think relevantly if something negative happens especially during the MCO. Negative situations can be reduced by adopting a religious approach in life.

In addition, the findings of this study showed that speaking to close individuals such as family members about their problems was also a measure to reduce mental health problems. The family is the main unit of society that takes care of each family member to meet the needs and desire in daily life. Based on previous research conducted by Mohamad et al (2011), emotional support by family is the most important element in informal care. If a person experiences a problem that can lead to mental health problems, the main measure should be taken is to express the problem to the closest people who can be trusted, especially family members. Family members are the closest support system, and most people live with family members. Therefore, choosing a reliable family member to express problems can help in reducing mental health problems.

However, most respondents disagreed to use the service line to help reduce mental health problems. There are several studies that revealed the limitations in the use of service lines for customers to express problems. For example, Childress (2000) stated that the factors that cause people to be less interested in using online services are time and place. The difference in time and location between the client and the counselor will cause a delay in the response process, especially from the counselor. This situation will affect the counseling process between the two parties. In fact, meetings that are not conducted face-to-face cause the use of the service line to be less effective. This means will make it difficult for counselors to see clues in terms of emotions, facial expressions and body language. This will cause weakness in expressing accurate emotions and may cause misinterpretation between both parties (Chang & Chang, 2004). Therefore, it can be concluded that the special education teachers in this study less used the service line to express their problems to reduce mental health problems during the MCO period.

Conclusion
It is expected that this study provides implications to various parties in recognizing mental health among special education teachers. The findings of this study help identify mental health among special education teachers during the MCO period, especially in Kunak, Sabah.

However, this quantitative study was limited to a small sample of 30 special education teachers in Kunak district, Sabah only. The findings of this study cannot be generalized to a wider context such as special education teachers across the country. Therefore, there are several suggestions for further studies such as expanding the involvement of districts close to Kunak district. This is to increase the number of respondents to diversify the findings obtained in this study. Actually, the context of this is of a general nature, which is mental health. It is suggested that specific studies will be conducted on components of mental health problems such as stress or depression.

Overall, special education teachers play a great role in educating students with special needs in school. Their mental health care needs to be emphasized so that these teachers are mentally prepared to carry out their duties and so on. Knowledge in terms of mental health needs to be enhanced by special education teachers as it can help them act sensibly should undesirable event occur in the future. In addition, special education teachers should identify the contributing factors to mental health problems, especially during the MCO period. These factors may consist of internal or environmental factors that can influence a person's behavior and communication. Moreover, among the measures that should be taken to reduce mental health problems is through a religious approach and finding people who can be trusted to

express problems. If special education teachers can manage stress well, it can raise their motivation, enthusiasm and quality of work in the future.

Acknowledgment

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