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The Impact of Self-Efficacy and Social Support Towards Resilience Among Malaysian Working Adults During COVID-19 Pandemic

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Abstract: The drastic economic work stoppage during the coronavirus disease (COVID-19) pandemic has totally impacted many especially the working population. Resilience acts as a protective factor that emphasizes the potential to manage stress and promote wellbeing. In the working environment, resilience is an important asset to be possessed by every individual. Therefore, this study aimed to examine the relationship between self-efficacy, perceived social support, and resiliency among working adults in Malaysia. A total of 184 respondents were recruited using convenience and purposive sampling methods to answer online surveys anonymously. Findings revealed that self-efficacy, support from friends and family showed a positive significant relationship towards resilience while on the contrary, significant others showed a weak relationship. To sum up, results illustrated that self-efficacy was the strongest predictor for resilience among working adults in Malaysia. This research was intended to fill the main gaps in finding the avenues that uphold the resilience attitude among working adults. This study hopes to shed light and serves as a guideline for the policymakers and human resource firms in generating useful schemes to develop the self-efficacy and social support to thrive towards the difficult circumstances successfully among employees in Malaysia.

Keywords: resilience, self-efficacy, social support, working adults, Malaysia

1. Introduction

Life is not always a smooth path to travel as it consists of ups and downs. The recent coronavirus pandemic has been a momentous disruption for many lives as it impacted not only one's health but also the economic and social wellbeing of many. These working populations are the group that got affected the most during this pandemic; some underwent job retention, some worked with pay cuts and some were working from home. Looking at the statistics from the Institute of Labour Market Information and Analysis (ILMIA), overall working adults cover around 63% to 67% of the overall population. Notably, as working adults cover the majority of the population, the huge population of working adults who show high productivity loss are given more priority in this study.

High work hours at home on a 'work from home' basis during the pandemic is also believed to cause high work stress among employees. The failure of coping may result in unnecessary social issues like suicide, crimes, and drug abuse. Record from the Ministry of Health (MOH) stated a total of 465 attempted suicide cases between January and June last year (465 Attempted suicide, 2020) while 11791 calls were received by government help hotlines between March 25 and August. Another source showed that 266 people took their lives between March 18 and October 30, 2020, and the majority of them took the decision after losing their rice bowl or due to work stress (Frightening link, 2021). It is undeniable to agree that working adults experienced high stress because of the pandemic since many of them are losing their jobs, facing a financial crisis, reduction in salary, and sudden changes to online-based working routines. The

Department of Statistics Malaysia revealed that the unemployment rate in June 2021 climbed to 4.8% from 4.5% in May 2021 (Department of Statistics Malaysia, 2021).

1.1 Resiliency

Since the coronavirus pandemic causes extensive disruptions to lives and livelihoods all over the world, resilience can be one of the significant factors to help them bounce back despite all the hardships. Resilience is the positive adjustment or the capacity to sustain or regain mental health, despite encountering hardships (Ahmad et al., 2018; Herrman et al., 2011). It serves as an essential coping strategy for every individual to get back to their normal routine and be more productive in their daily functioning. The working adults' resilience needed to manage resources well and deal with workloads. The CEOs of the American Heart Association (AHA) emphasize the importance of resiliency as it enables employees to control workplace stressors and productivity loss (American Heart Association, 2016). Through resilience, employees can efficiently respond and adjust to changing circumstances and challenges (Ojo et al., 2021).

In Malaysia, the study on resiliency among the general public was limited and the available emphasis was more on students and patients. According to Llyod's Register Foundation 2021 World Risk Poll data, Malaysians showed a greater level of resiliency compared to the world average. The poll was conducted among 121 countries and Malaysians scored 0.67 versus the world average of 0.55 (Murugiah, 2022). The COVID-19 pandemic undoubtedly causes disruption in the nation's economy and also the rice bowl of employees. The situation puts many lives at risk and everyone struggles to meet their end. There was much job retention causing Malaysians to lose their jobs. The pandemic has enormously affected psychological wellbeing and requires resilience to cope with the situation. However, many Malaysians had the willpower to continue their lives by starting a small-scale business to feed their family (Bahar Moni et al., 2021).

On the other hand, resilience levels in other nations were quite similar in Malaysia. A study of three cultural groups in Israel namely Jews, Ultra-Orthodox Jews, and Arabs shows a prominent resilience personality through their comeback from psychological distress during the second wave of a Covid-19 Pandemic (Braun-Lewensohn et al., 2021). Another study in Italy revealed lower resilience especially among Healthcare Practitioners during the first wave. Italy was the first country to be hit hard during Covid-19 in Europe (Lisi et al., 2020). In short, with long-tail mental-health deterioration featuring in the news and past studies resulting from the coronavirus pandemic, perhaps this study is focusing on factors that influence resilience among working adults during the covid-19 pandemic.

1.2 Predictors of Resilience

Generally, resilience contains three vital factors which are an individual's innate characteristics, family guidance, and extrinsic support (Masten & Garmezy, 1985). The traditional approach to resiliency is usually focused either on internal attributes like personality traits, behavioral mastery, and capacity to cope with stressors (Bartley et al., 2010) or only on extrinsic social factors (Neill & Dias, 2001).

Social support is the care or help directed from family, friends, or significant others that an individual can feel, be novice, or accept (Wang, 2014). As such, social support is the guidance or love every individual needs to feel more valuable and responsible towards all his/her actions, especially in tough times. Few studies reveal a positive association between social support and resilience (Armstrong et al., 2005; Xu & Ou, 2014). Another study stated that the strong connection between family and friends correlates with resiliency while "significant others" is not a significant factor for resilience (Masten & Reed, 2002). Hence, the available literature on the impact of social support on one's resiliency is still subject to discourse.

On the other hand, individual innate characteristics like self-efficacy also contribute to one's resiliency. Self-efficacy is the inborn characteristic of every individual which acts as a mechanism against unpleasant circumstances (Narayanan & Cheang, 2016). Self-efficacy helps a person trust in his/her fullest potential to succeed when facing hard times. Hung (2010) in his study claims that individuals with high self-efficacy tend to be more resilient. In contrast to that, Todd and Worell (2000) show self-efficacy did not predict resilience in the population of the study. Since past studies showed a mixture of results, the present study aimed to explore if self-efficacy contributes to the resiliency of the working population.

1.3 Present Study

A large number of researches had been conducted on resilience to focus on the process of managing adversity but only a few studies on the factors contributing to resilience with the combination of these variables. However, most of the studies on resilience were conducted in western countries such as 64% in the United States, 18% in Australia, and 7% in the United Kingdom (American Heart Association, 2016). Studies in the Asian context are still scarce. The majority of research on resilience emphasized medical and health care with 21% the highest proportion whereas, only a few pieces of research are conducted on resilience in the workplace which this study would fill up the research gap. Our study will help future employers to identify the main element that enhances more growth on resilience among employees. Hence, the employers can emphasize practicing resilience in the organization by providing more training on self-efficacy/ social support among employees. A strong sense of awareness of the parity of support from the social environment and self-efficacy to live a balanced life will be raised.

The current study is devoted to psychological studies which are intended to fill in some of the main gaps in our current knowledge about the protective factors which are self-efficacy and social support on the growth of resiliency among working adults who are specifically aged 36 to 55 years old.

2. Methodology

2.1 Participants and Procedure

A total of 184 participants in the age range of 36 to 55 years old were recruited from all over Malaysia. The convenience sampling method was used in this study. Research mentioned that convenience sampling compromises several practical requirements such as easy access to the participants near the located place, plus the availability and willingness of the targeted population to participate (Etikan et al., 2016). Besides, the purposive sampling method was applied in this study as researchers targeted a few inclusion criteria for participants. Purposive sampling is widely used to focus on the participants with specific characteristics that will accommodate the research (Etikan et al., 2016). After cleaning the data and removing the outliers there were a total of 184 participants in this study. The samples collected were from Perlis, Kedah, Penang, Selangor, Negeri Sembilan, Pahang, Kelantan and Melaka.

The researchers used the online survey method for this study. Research shows that online survey methods can be easily accessed by large populations, it is more economical, time-saving and errors in data entry can be reduced (Hoonakker & Carayon, 2009). Hence, the online survey method was used for this study to easily reach the respondents and to gain more sample size. The researchers generate the online survey questionnaires through Qualtrics. The survey in this research consists of four sections which are demographics of participants, resilience, self-efficacy, and social support questionnaires. The survey was included with a consent form to obtain approval from the respondents before they begin to answer the survey. Then, the survey continued with the demographic details of the participants and was followed by the questionnaires for the three variables. In the last part, the online survey link of this study was attached for the participants to share among their friends and family along with a gratitude message of thank you was mentioned.

3. Results

3.1 Demographic Details

The descriptive statistic illustrates the frequency distribution of respondents' backgrounds. Each element was analyzed using SPSS. There was no missing data in the study. Most of the respondents were in the age range of 36 to 40 years. More than half of the respondents were female 58.7% (n=108) while 41.3% were male (76) respondents. The majority of the participants were Indians where the result shows 40.2% (n=74), followed by 35.3% of Malays (n=65), 22.8% of Chinese (n=42), and 1.6% also from other ethnicity groups (n=3). Besides, around 139 respondents have more than 10 years of working experience. Moreover, 46.7% (n=86) of respondents are working in the private sector, 42.4% (n=78) of respondents are from the public sector and 10.9% (n=20) doing their own business.

3.2 Level of Self-Efficacy, Social Support, and Resiliency

The mean score for the total scores of resilience is 29.02 (SD=6.062). Followed by the mean scores for self-efficacy is 34.08 (SD=4.836) and 67.75 (SD=11.408) for social support.

Table 1 - The mean and SD of variables

Variable	*M*	*SD*
Resilience	29.02	6.062
Self-Efficacy	34.08	4.836
Social Support	67.75	11.408

3.3 Self-Efficacy, Social Support, and Resiliency

Table 2 shows the results of the Pearson correlation between self-efficacy and resilience among working adults in Malaysia. Findings showed that there is a significant positive relationship between self-efficacy and resilience, r (184) = .620, p = .001 among working adults. The higher the self-efficacy, the higher the resilience. Results prove that self-efficacy and resilience were moderately associated.

The results of the Pearson correlation showed that there is a significant positive relationship yet the weak association between social support (significant others) and resilience, r(184) = .384, p = .001 among working adults (refer to Table 2). The results of the Pearson correlation showed that there is a significant positive relationship between social support

(family) and resilience, r (184) = .443, *p* = .001 among working adults. The higher the support from the family, the higher the resilience. Social support from family and resilience showed a moderate association.

Table 2 - Matrix correlation of the variables understudied

Measure	1	2	3	4	5
1. Resilience	1	.620**	.357**	.443**	.451**
2. Self-efficacy		1	.296**	.390**	.372**
3. Significant others			1	.761**	.530**
4. Family				1	.576**
5. Friends					1

** Correlation is significant at the 0.01 level (2-tailed).

The results of the Pearson correlation showed that there is a significant positive relationship between social support (friends) and resilience, r (184) = .451, *p* = .001 among working adults. The higher the support from friends, the higher the resilience. The present study states that social support (friends) and resilience have a moderate association.

4. Discussion

Current study indicates a higher level of resiliency among the participants. In line with that, past studies also show that resilience is an important construct among working adults (Rees et al., 2015; Shueh-Yi & Cai, 2014; Wang et al., 2017). A high level of resilience among working adults acts as a protective factor against stress in the workforce. Plus, the growth of workplace resilience is based on the success or failure of handling everyday stress.

However, on the other hand, earlier studies also stated that the level of resilience may not be consistent all the time; instead, it will be changed and developed over some time according to the availability of resources for resilience (Schetter & Dolbier, 2011). The Pearson correlation test shows a moderately significant relationship between self-efficacy between resilience. The result of the correlation test is also similar to the past study conducted at Shanghai Jiao Tong University, China which shows greater general self-efficacy which shows that greater general self-efficacy enhances the level of resilience among nurses (Wang et al., 2017).

The present study is also supported by two studies (Lau et al., 2014; Taylor & Reyes, 2012) which also mentioned being persistent in overcoming the frustrations and challenges in the task. Those who have a higher level of self-efficacy perceive themselves as someone who can cope and do the task better. Since the individual can handle their negative thoughts better, they will use the opportunity to master the task rather than avoid it which eventually increases the level of resilience.

In this current study, a few limitations can be highlighted. Primarily, uncontrollable external situations such as the Movement Control Order (MCO) period that occurred in Malaysia hugely impacted the study. Due to the MCO period, survey distribution was difficult as it was a tough time to seek participants. During this period, this circumstance reduced our ability to search for participants, which results in a low sample size in the current study.

Moreover, the current study did not set the target to distribute the questionnaire equally to all 13 states in Malaysia. This is due to participants not being recruited from Terengganu, Johor, Sabah, and Sarawak. Therefore, this can ultimately lead to bias which may affect the results. To add on, the present study design is a cross-sectional study where the participants were recruited in a certain duration of time which is in the MCO period. This can influence participants' resilience during the specific period by disregarding their actual resiliency. Thus, this might affect the level of resilience among working adults.

Finally, a lack of English language proficiency might affect the findings. This is due to not all participants are experts in English as some might prefer other languages such as the Malay language. The use of the Malay language might help to gain more participants. Hence, it can bring the consequences of potential bias which might influence the results. Overall, these are the limitations that have been addressed by this research.

Based on the limitation stated above, the sample size numbers can be increased by using social media platforms in depth to collect more participants to acquire strong and consistent results. The surveys should be uploaded on platforms such as Linked In, Twitter, direct groups, and even the company's official web that could help promote and gain the attention of working adults which will attract them to participate. Thus, researchers should utilize social media thoroughly to receive a greater number of respondents.

Plus, the recruitment of participants should be done evenly to avoid biassed results. The surveys should be distributed equally to all 13 states in Malaysia which would help to gain more precise results. Besides that, the number of respondents in each state should be coordinated evenly so that the findings and suitable intervention can reflect the whole population in Malaysia.

In addition, future researchers can carry out longitudinal studies to attain more accurate findings. Longitudinal studies will provide knowledge on the impact of self-efficacy and social support towards resilience in-depth in different phases of external situations. This is said because some respondents might have low levels of resiliency during the MCO period. Data should be collected pre, during, and post-MCO to receive accurate findings.

Lastly, the questionnaire should be in a bilingual language because some participants are not proficient in English. Lack of English understanding, participants could misinterpret the words or sentences which will affect the results. Thus, the questionnaire should contain both English and Malay languages which would be easier for respondents to answer. Therefore, by providing bilingual language surveys' participants could understand the questions and will be able to answer well.

In conclusion, this research has fulfilled the objectives of the study in identifying the level of resilience among working adults in Malaysia. It also supported the rest of the objectives in examining the relationship between the variables (self-efficacy, significant others, family, and friends) and resilience among working adults.

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