

## COMPARISON OF FEAR OF COVID-19, FEAR OF LEAVING HOME, AND ASPECTS OF WORKING ADULTS' LIFE IN REGARD TO GENDER AND WORKING PLACE



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### ABSTRACT

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This study investigated differences related to fear of COVID-19, fear to leave home and ten aspects of working adults' life between genders and working places. 455 working adults in Malaysia participated in the online survey through convenience sampling technique. The results showed that the main effect for gender was significant (Wilks'  $\Lambda = 0.88$ ,  $F_{(2, 375)} = 4.10$ ,  $p = 0.001$ , multivariate  $\eta^2 = 0.12$ ), indicating that fear of COVID-19, fear of leaving home, and aspects of working adults' life tests differ for males and females. Moreover, the results showed that the main effect for working place was significant (Wilks'  $\Lambda = 0.94$ ,  $F_{(2, 375)} = 1.81$ ,  $p = 0.045$ , multivariate  $\eta^2 = 0.06$ ) but the interaction of gender and working place was not significant. Furthermore, individuals working from home reported higher fear to leave home and more severe effect on occupational aspect than those who worked at the workplace.

**Contribution/ Originality:** This study explained how working adults' life were affected by the COVID-19 pandemic during the second phase of Movement Control Order in Malaysia. Since the pandemic has taken place for more than two years, the recovering process might take a long time. Findings from this study provides directions for employers in looking into the mental health care and well-being issues among workers particularly during the current post-pandemic period.

### 1. INTRODUCTION

Ever since the viral pneumonia cases were reported in Wuhan, panic and anxiety were gradually increasing within the global community. The disease is easily transmitted from person-to-person with less-severe to severe illnesses which unfortunately could cause death. Due to the nature of the disease, COVID-19 was starting to spread at an alarming rate due to international travelling. As a result, the situation was causing anxiety among worldwide community and calling for critical actions by the government to prevent infections and save lives while minimizing the impact in various aspects including the health, economy and education. On March 2020, the number of cases in Malaysia were starting to rise at an alarming rate (Barker, 2020). The Malaysian Institute of Economic Research (MIER) estimated the cases to increase at a rate of 12.5% per day but the actual increase is 7.5% per day (Latiff, 2020). In order to flatten the curve of infected cases in Malaysia, the government has imposed several types of Movement Control Order (MCO) depending on the spread pattern of the infectious disease at particular areas.

As such, several measures were being established to prevent the spread of the virus which includes travel restrictions, quarantines, curfews, events postponements and cancellations and lastly facility closures. Besides that, the efforts involve staying at home measures, various border closures or incoming passenger restrictions, screening of passengers at airports and train stations, and lastly travel advisories regarding regions and community transmission. The transmission routes of infectious diseases are crucial to be taken into account and therefore everyone is advised to take self-protective measures against pandemic diseases such as washing hands regularly, using mask and hand sanitizer, and maintaining one-meter social distance (Evirgen, Savas, Motor, Onlen, & Yengil, 2014). Consequently, the psychological effects in pandemic situations can be highly disturbing. In a recent review, several psychological impacts of quarantine found includes fears of infection, fears of longer quarantine duration, frustration, boredom, inadequate supplies and financial loss (Brooks et al., 2020). The reaction of fear during the pandemic is in line with the appraisal theory of emotion that proposed that emotions are the result of the appraisal of stimulus according to expectation, ability to control and external causes (Moors, 2017). Previous research has showed a significant and wide scope of psychosocial impacts on people at the individual, community, and international levels during outbreaks of infection. On an individual level, individuals are probably going to encounter fear of falling sick or dying themselves, feelings of helplessness, and stigma (Hall, Hall, & Chapman, 2008). During one influenza outbreak, around 10 percent to 30 percent of overall population were very or genuinely worried about the possibility of contracting the virus (Rubin, Potts, & Michie, 2010). With the conclusion of business and schools, negative emotions experienced by individuals are compounded (Van Bortel et al., 2016). During the SARS outbreak, numerous studies examined the psychological impact on the non-infected community, uncovering critical psychiatric morbidities which were found to be correlated with youngsters and increased self-blame (Sim, Chan, Chong, Chua, & Soon, 2010). The elder female who were more extremely educated, with higher risk perceptions of SARS, a moderate anxiety level, a positive contact history, and those with SARS-like symptoms were more likely to take precautionary measures against the infection (Leung et al., 2003).

During the phase of lockdown due to COVID-19, people are experiencing many negative emotions and therefore there is an urgent need of mental health practitioners to attend the call of mental health issue (Bao, Sun, Meng, Shi, & Lu, 2020). Furthermore, one meta-analysis study indicated that the prevalence of stress in 5 studies with a total sample size of 9074 is obtained as 29.6%, the prevalence of anxiety in 17 studies with a sample size of 63,439 as 31.9%, and the prevalence of depression in 14 studies with a sample size of 44,531 people as 33.7% (Salari et al., 2020). This results showed that COVID-19 not only causes physical health concerns but also causes various psychological disorders. Subsequently, it is crucial to preserve the individuals' mental health through developing adequate psychological interventions in order to improve individuals' mental health coping during the COVID-19 pandemic. However, the impact of MCO on working adults' life could be more severe due to multiple responsibilities they hold, particularly among females. In this situation, working adults were directly affected in various ways. There were drastic changes in work practices, some have to work from home while some are still allowed to go to their workplaces. Without a doubt, the pandemic situation is challenging for both employees and employers. It took them variety of coping behaviour strategies like stress management, social coping and cognitive strategies to be able to keep functioning in this pandemic (MacIntyre, Gregersen, & Mercer, 2020). Furthermore, work from home requires full dedication towards tasks since employees are more prone to distractions and laziness thus affecting performance (Kaushik, 2020; Kaushik & Guleria, 2020). However, working adults were also having other responsibilities at home which added more challenges for them to adapt to the new work practices. The reason is that the routine of a family might also change as parents juggling working from home, taking care of family, managing kids and even managing daily living activities on their own since the movement control order might restrict the need to send the kids to the babysitter or kindergarten (Kisely et al., 2020). Inevitably, the uncertainties caused by the pandemic situation triggered various reactions to every individual. The fear of transmission of virus is affecting everyone in their own way in term of social and daily life functioning. Some might

be worry about their own health and the health of loved ones, and others might be more concern of their financial situation or job, or even loss of support services. Hence, the aspects that are worrying to everyone differs based on their needs. Even in term of genders, males and females' responses towards the uncertain situations are disturbing their life functioning differently. Even though responses at work place is not necessarily due to gender, such as perceived stress as reported by [Torkelson and Muhonen \(2010\)](#), it can be assumed that their responses during this pandemic would be different because the priority of each gender is not alike. Hence, this study aims in identifying the differences between genders and working place on their fear to COVID-19, fear to leave home within the pandemic. Moreover, the differences in their reactions according to ten aspects of working life which referring to academic, occupation, social, religion, health, family, activities, emotion, sleep and finance were also compared between gender and working place. These comparisons allowed the authors to understand how working adults were affected differently due to gender roles in Malaysia and their respective work places. Also, this study could provide the knowledge how their emotions and working life were threatened within the pandemic, specifically during the second phase of MCO in Malaysia.

## 2. RESEARCH HYPOTHESIS

Based on the literature review and with regards to the cross sectional and comparative study, three hypotheses were developed as follows:

*H.1: There is no significant difference between the mean of fear of COVID-19, fear to leave home, and aspects of working adults' life among working adults regarding gender differences.*

*H.2: There is no significant difference between the mean of fear of COVID-19, fear to leave home, and aspects of working adults' life among working adults regarding working place differences.*

*H.3: There is no significant difference between the mean of fear of COVID-19, fear to leave home, and aspects of working adults' life among working adults regarding the interaction between gender and working place differences.*

## 3. METHODOLOGY

### 3.1. Study Design

Based on the objectives of this study, a quantitative research design was used to conduct this cross-sectional study. This research was conducted through online survey which was circulated on WhatsApp and Facebook.

### 3.2. Population and Sampling

This research was conducted through online survey which was circulated on WhatsApp and Facebook. It was carried out using convenience sampling, targeting Malaysian adults from all 14 states in Malaysia. The sample size on the base of G\*Power 3.1.9.2 for MANOVA Special effects and interactions analysis by considering effect size of 0.062,  $\alpha$  err probability of .05, power ( $1-\beta$  err prob) of .95, number of groups 4, and number of predictors 12, was 272 participants. The total required sample size is calculated as 272 cases, which confirmed the adequacy of collected questionnaires and Critical F as 1.537, Numerator *df* with 24, Denominator *df* with 536, and Actual power with .95. Although, on the base of total required sample size, 272 subjects were enough for this study, to avoid of mortality 455 working adults were selected by convenience sampling to attend in this study.

### 3.3. Measure

In this study, a set of questionnaire named Fear of COVID-19 and Working Adults' Life Questionnaire (FCWALQ), was developed by the researchers. The first section of this questionnaire consisted of eight questions asking about the respondents' background, including if they were required to do work from home or to go to their respective working place during MCO. Another section of the questionnaire presented all the main variables of the research, in which the participants were asked to indicate the extent to which they agreed with the statement

relating to their fear, using a 10-point scale ranging from not at all to very much. Another ten questions are asking about how much COVID-19 pandemic has interfered their life using a 6-point Likert rating scale as the response format. The specific ten aspects that were included in this research were academic, occupation, social, religion, health, family, daily activity, emotion, sleep and financial. The structured questions were prepared in English Language and Bahasa Melayu. The data was collected during the second phase of MCO due to COVID-19 pandemic in Malaysia.

### 3.4. Procedure

The convenience sampling was applied in selecting the respondents through online survey. All the respondents were participated voluntarily in this study. An instrument named FCWALQ which consists of demographic information, fear of COVID-19, fear to leave home and ten aspects of working adults' life. In order to ensure that the respondents understand all the items and answered it truthfully, all the items of each dimension will be stated in bilingual which were English version and Malay version. The reliability of both versions also have checked by Cronbach's alpha. Informed consent was sent to the respondents to read and understand before answering the questionnaire. They were free to ask anything about the study and they can withdraw from the research if they are not interested. The approval for the present study was obtained from Sultan Idris Education University.

## 4. RESULT

Data obtained were analysed using descriptive and inferential statistics. According to Gurnsey (2018), descriptive statistics are used solely to describe the characteristics of a collection of scores and it includes the mean and standard deviation.

Table 1. Characteristics of respondents.

Demographic Variable	Category	Frequency (n)	Percentage (%)
Gender	Male	128	28.10
	Female	323	71.00
	No Information	4	0.90
Income	RM6001 and above	187	41.10
	RM5001 – RM6000	40	8.80
	RM4001 – RM5000	60	13.20
	RM3001 – RM4000	62	13.60
	RM2001 – RM3000	50	11.00
	RM1001 – RM2000	43	9.50
	RM1000 and below	7	1.50
Marital Status	No Information	6	1.30
	Single	178	39.10
	Married	266	58.50
	Widow	9	2.00
Religion	Others	2	0.40
	Islam	412	90.50
	Christian	12	2.60
	Buddha	13	2.90
	Hindu	13	2.90
Status of Work	Others	5	1.10
	Working Full Time	426	93.60
Sector of Work	Working Part Time	29	6.40
	Private	176	38.70
	Government	220	48.40
	Self-employed	41	9.00
	NGO	10	2.20
Working Place	Others	8	1.80
	Work at Home	262	57.58
	Work at Respective Workplace	122	26.81
	No Information	71	15.60

Note: Respondents under the categories of No Information and Others were not included in the subsequent analyses, hence the total number of the respondents vary.

Table 1 indicates a total of 455 working adults whose age ranged between 21 and 67 years old ( $M = 35.92$ ,  $SD = 9.54$ ) participated in the research. Most of them are females (71%), married (58.5%) and are Muslims (90.5%). Almost half of them earn more than RM6000 monthly (41.1%), and almost all respondents are working full time (93.6%) at government agencies (48.4%).

Referring to Table 2, the highest fear of COVID-19 was reported by male respondents who work at office ( $M = 7.79$ ,  $SD = 2.88$ ), then female respondents working from home ( $M = 7.74$ ,  $SD = 1.98$ ), followed by female respondents working at office ( $M = 7.39$ ,  $SD = 2.42$ ), and the lowest fear of COVID-19 was reported by male respondents who work from home ( $M = 7.16$ ,  $SD = 2.30$ ). Furthermore, the results showed that the highest fear of leaving home was reported by female respondents who work from home ( $M = 7.24$ ,  $SD = 2.08$ ), then female respondents work at office ( $M = 6.72$ ,  $SD = 2.22$ ), followed by male respondents work from home ( $M = 6.17$ ,  $SD = 2.36$ ), and the lowest fear of leaving home was belonged to male respondents work at office ( $M = 5.74$ ,  $SD = 3.07$ ). Apart from that, COVID-19 has affected almost all areas of working adults' life (i.e. academic, occupation, social, religion, health, family, activities, emotion, sleep and finance) in both male and female participants equally.

Table 2. Means and standard deviations for fear of COVID-19, fear of leaving home, and aspects of working life as a function of gender and working place.

Variable	Gender	Working Place	n	M	SD
Fear of COVID-19	Male	Work from Home	58	7.16	2.31
		Work at Office	42	7.79	2.88
	Female	Work from Home	201	7.74	1.98
		Work at Office	79	7.39	2.42
Fear of Leaving Home	Male	Work from Home	58	6.17	2.36
		Work at Office	42	5.74	3.07
	Female	Work from Home	201	7.24	2.09
		Work at Office	79	6.72	2.22
Interfere Education Studies	Male	Work from Home	58	2.41	1.81
		Work at Office	42	2.52	1.77
	Female	Work from Home	201	3.06	1.93
		Work at Office	79	2.77	1.87
Interfere Occupation	Male	Work from Home	58	4.86	1.25
		Work at Office	42	4.24	1.48
	Female	Work from Home	201	4.56	1.37
		Work at Office	79	4.18	1.47
Interfere Social	Male	Work from Home	58	4.64	1.36
		Work at Office	42	4.19	1.64
	Female	Work from Home	201	4.39	1.45
		Work at Office	79	4.20	1.50
Interfere Religion	Male	Work from Home	58	4.31	1.51
		Work at Office	42	3.95	1.77
	Female	Work from Home	201	3.49	1.73
		Work at Office	79	3.61	1.75
Interfere Health	Male	Work from Home	58	3.55	1.56
		Work at Office	42	3.62	1.81
	Female	Work from Home	201	3.31	1.65
		Work at Office	79	3.42	1.69

Table 2. (Continued).

Variable	Gender	Working Place	n	M	SD
Interfere Family	Male	Work from Home	58	3.72	1.67
		Work at Office	42	4.10	1.77
	Female	Work from Home	201	3.74	1.73
		Work at Office	79	3.76	1.73
Interfere Activities	Male	Work from Home	58	4.98	1.19
		Work at Office	42	4.38	1.67
	Female	Work from Home	201	4.50	1.36
		Work at Office	79	4.46	1.44
Interfere Emotion	Male	Work from Home	58	3.74	1.41
		Work at Office	42	3.38	1.67

Variable	Gender	Working Place	<i>n</i>	<i>M</i>	<i>SD</i>
	Female	Work from Home	201	3.83	1.47
		Work at Office	79	3.75	1.64
Interfere Sleep	Male	Work from Home	58	3.02	1.79
		Work at Office	42	3.00	1.91
	Female	Work from Home	201	3.11	1.70
		Work at Office	79	2.88	1.56
Interfere Financial	Male	Work from Home	58	3.57	1.56
		Work at Office	42	3.29	1.77
	Female	Work from Home	201	3.26	1.68
		Work at Office	79	3.44	1.76

Table 3. Univariate effects of gender and working place on study variables.

Source	Dependent Variable	<i>df</i>	<i>F</i>	<i>p</i>	$\eta^2$
Gender	Fear of COVID-19	1	4.83	0.029	0.013
	Fear of Leaving Home	1	13.73	0.000	0.035
	Interfere Education Studies	1	3.90	0.049	0.010
	Interfere Occupation	1	1.16	0.283	0.003
	Interfere Social	1	0.43	0.513	0.001
	Interfere Religion	1	7.99	0.005	0.021
	Interfere Health	1	1.26	0.262	0.003
	Interfere Family	1	0.52	0.472	0.001
	Interfere Activities	1	1.45	0.229	0.004
	Interfere Emotion	1	1.49	0.223	0.004
	Interfere Sleep	1	0.01	0.934	0.000
	Interfere Financial	1	0.14	0.709	0.000
Working Place	Fear of COVID-19	1	1.75	0.187	0.005
	Fear of Leaving Home	1	2.96	0.086	0.008
	Interfere Education Studies	1	0.16	0.689	0.000
	Interfere Occupation	1	9.04	0.003	0.023
	Interfere Social	1	3.22	0.074	0.008
	Interfere Religion	1	0.33	0.565	0.001
	Interfere Health	1	0.16	0.693	0.000
	Interfere Family	1	0.94	0.332	0.003
	Interfere Activities	1	3.71	0.055	0.010
	Interfere Emotion	1	1.42	0.234	0.004
	Interfere Sleep	1	0.37	0.542	0.001
	Interfere Financial	1	0.06	0.809	0.000
Gender x Working Place	Fear of COVID-19	1	0.00	0.970	0.000
	Fear of Leaving Home	1	0.02	0.881	0.000
	Interfere Education Studies	1	0.78	0.377	0.002
	Interfere Occupation	1	0.51	0.477	0.001
	Interfere Social	1	0.52	0.470	0.001
	Interfere Religion	1	1.34	0.248	0.004
	Interfere Health	1	0.00	0.952	0.000
	Interfere Family	1	0.78	0.377	0.002
	Interfere Activities	1	2.72	0.100	0.007
	Interfere Emotion	1	0.58	0.446	0.002
	Interfere Sleep	1	0.28	0.598	0.001
	Interfere Financial	1	1.30	0.254	0.003

Inferential statistics on the other hand strive to make inferences and predictions based on the data gathered (Cohen, Manion, & Morrison, 2011) by testing the proposed hypotheses. In this study, all the hypotheses were tested by using Two-way MANOVA regards to gender and working place for all variables. To assess whether males and females with different working place have different fear of COVID-19, fear of leaving home, and aspects

of working adults' life test scores and whether there was an interaction between gender and working place, a multivariate analysis of variance was conducted. The assumptions of independence of observations and homogeneity of variance / covariance were checked and met. Bivariate scatterplots were checked for multivariate normality.

The main effect for gender was statistically significant, Wilks'  $\Lambda = 0.88$ ,  $F_{(2, 375)} = 4.10$ ,  $p = 0.001$ , multivariate  $\eta^2 = 0.12$ . This indicates that the linear composite of fear of COVID-19, fear of leaving home, and aspects of working adults' life test differs for males and females. The main effect for working place is also statistically significant, Wilks'  $\Lambda = 0.94$ ,  $F_{(2, 375)} = 1.81$ ,  $p = 0.045$ , multivariate  $\eta^2 = .06$ . This indicates that the linear composite differs for different levels of working place. The interaction was not statistically significant, Wilks'  $\Lambda = 0.958$ ,  $F_{(2, 375)} = 1.35$ ,  $p = .19$ , multivariate  $\eta^2 = 0.04$ .

Regarding univariate effects, Table 3 indicates that effects of Fear of COVID-19, Fear of Leaving Home, Interfere Education Studies, Interfere Religion and gender were statistically significant among Malaysian working adults. Besides, the results showed that only Interfere Occupation and working place was statistically significant among Malaysian working adults.

## 5. DISCUSSION AND CONCLUSION

This study analysed the responses toward the pandemic during the COVID-19 phase of MCO. Based on descriptive analysis, there was high fear toward COVID-19 as well as fear of leaving home among female adults workers which is understandable because COVID-19 does not only affect a small population. It is declared as a pandemic and as of October 2020, the disease has caused a worldwide pandemic in more than 200 countries, with more than 41.50 million confirmed human cases and more than one million deaths. According to Hale et al. (2021) over 90% countries of the world have implemented workplace closures between January to December 2020, impacting the world's working population. Several other countries have implemented localized institutions closures and, should these closures become nationwide, millions of additional workers are experiencing disruption and reported negative effect on different scales related to fear of COVID-19 pandemic. The closure of work places was a massive issue as there is a need to adopt with new online working system. Thus, COVID-19 pandemic has affected one's life in many aspects.

Based on the findings, most of the aspects are affected from low to moderate level only and education studies, religion and occupations of working adults interferes significantly by COVID-19. It may be due to the systematic management by Malaysian government in which several effective actions have been taken in order to control the spreading of the virus. Sufficient information was and still being circulated based on daily analysis of the pandemic so that no one is lacking of any input regarding the crisis. By now, it is clear that this pandemic has intensely damaging effects on both the Malaysian macro-economy which involves higher and bigger institutions as well as on the economic welfare of the people itself. The main sources of economic damage in Malaysia are two folded where the first is the knock-on effect from the impacts of the coronavirus abroad, and the second is generated domestically due to the newly-imposed movement control measures (Cheng, 2020). The population of Malaysia has respondent significant impact on their occupational activities during this movement control order of COVID-19.

In regard to the hypotheses testing, gender comparisons revealed that females reported higher fear of COVID-19 and higher fear to leave home compared than male. It is in line with other studies that revealed female do experience greater fear of COVID-19 than men (Broche-Pérez, Fernández-Fleites, Jiménez-Puig, Fernández-Castillo, & Rodríguez-Martin, 2020; Rossi et al., 2020; Wang et al., 2020). This is perhaps because females are more fragile when it comes to physical threat. It is the nature of women to be more dependent on other but at the same time in a family circle, women have more responsibilities such as to look after the health of other family members. It is common to see when one member of the family is sick, the ladies in the family would be the one who will urge to respond to the situation. Thus, combining the emotion and the responsibilities of women, it may be the reason why they are the ones who have greater fear of the virus and are more cautious of the danger.

Besides that, females reported more severe effect on academic matters than males. Unfortunately, the authors could not verify if this particular finding relates to issues of female employees who are pursuing studies or to working mothers with school-going kids. However, the effect of MCO on both parties is a real suffer as many learning institutions have closed their normal operation and instead emphasizing on online learning modes. This means that first and foremost, both parties need to have a strong and stable internet connection. Adjusting from the conventional style to an almost totally new way of learning is indeed time consuming and tiring particularly for working mothers with school-going kids as they themselves need to ensure that their work responsibility is also completed as requested by their superordinate. When being at home with no other adults to care for the kids or to do the house chores, it is affecting the flow of performing tasks related to studying and lastly add further burden to the psychological well-being (Columbus, Brust, & Arroliga, 2020). One may not able to delegate tasks efficiently as everything seemed important and may lead to the slow progress of completing tasks given.

In the current study, males reported more severe effect on religion than females. This may be due to the nature of respondents in which the majority respondents were Muslim. Muslim men and women can perform their prayer anywhere which is suitable and convenient to them. Many would prefer to pray at home as all necessities for prayer are easily assessable. Some might pray at their working place as well. On top of that, it is better to perform prayer as a group, and therefore it is advised to pray in mosque together with fellow Muslims. However, during COVID-19, there was a phase when Muslim men were not allowed to perform religious responsibilities particularly the Friday Prayer as they usually did before due to MCO. The closure of religious places due to the implementation of social distance is also affecting individuals psychologically, as to most, they believe that praying at the religious place is more comforting for their religious beliefs. Thus, it may be the reason why male reported more severe effect on religion compared to females.

In term of emotion, females reported more severe effect on emotion domain as compare to males perhaps because females are more delicate and emotionally concerned when it comes to confronting a physical threat. Besides that, women show relatively stronger emotional expressivity compared to men (Deng, Chang, Yang, Huo, & Zhou, 2016). It has also been found that the emotions of happiness, sadness and fear are believed to be more characteristic of women, whereas men are believed to be more characteristically angry (Parkins, 2012). The feeling of uneasiness and fear come when females are curious of the possibilities in the future and in this case the possibilities may be related to the rate of the COVID-19 spreading among the community, other than the possibility of infection. Hence, females are the one that will make sure that the health of other family members is guaranteed. Other than that, females are more careful in managing tasks involving households and hence, when things might go sideways, the emotion will be disrupted and lastly leading to other problems later on.

For comparisons between working places, those who were working from home reported higher fear to leave home than those who continue working at their respective workplace. This may be due to the fear of possibility of infection when being outside from home. Some studies reported that individuals who are quarantined are fears about their own health or fears of infecting others (Cava, Fay, Beanlands, McCay, & Wignall, 2005; Desclaux, Badji, Ndione, & Sow, 2017; Reynolds et al., 2008) and were more likely to fear infecting family members than those who were not quarantined (Bai et al., 2004). Home here seemed to be the safest place because one would know the level of hygiene practiced in home. When being outside from home, one might be in close contact to stranger and more susceptible to the virus compared to when staying indoors.

Besides that, those who were working from home reported more severe effect on occupation than those who were working at their respective workplace. Respective workplace is a conducive place to work at as its surrounding and facilities can help maintain good focus and increase productivity for employee to do daily target tasks. It is common that employees think that they can perform better at the work place rather than at home. Thus, being unable to work in one's working space or workplace may cause irritation and one might feel uncomfortable to work at other places. Working from home can lead to more emotional reaction because of many factors that need to be



taken into consideration. Being at home means one may need to look after the kids, aging parents or family members with illnesses. Work-family imbalance may cause stress which in turns decrease one's performance (Bamba, 2016). Furthermore, one need to do extra house chores such as cooking, laundry and even cleaning. These additional works consume energy and time that are supposed to be directed towards work. Some residential areas may have poor internet connections and lack of resources that can refrain working men and women from doing work efficiently from home compared to working at workplace, increasing level of negative emotion within an individual.

## 6. CONCLUSION

The year 2020 has significantly changed everyone's life with the presence of COVID-19 virus. This research has explored the differences in the effects of the spread of COVID-19 and the implementation of MCO to both male and female working adults to their emotions and occupations. The differences between employees that were required to work from home and at their work places were also discussed. The statistics which increases day by day has significantly increases fear towards COVID-19 and even fear to leave home among people particularly females. Females also reported to be affected in term of academic and emotion, whereas males reported more severe effect on religion than females. Those who were required to work from home reported higher fear to leave home and more severe effect on occupation than those who were working from their respective workplace.

However, as previously mentioned, this research could not confirm whether the academic aspect of females was caused by their own study or their children's. Other than that, this study has not explained precise effect of the fear to COVID-19 and the fear to leave home to their occupational well-being. Thus, this study recommends that the effect of the fear that instigated by COVID-19 to the occupational well-being of working adults to be explored in future research.

In sum, it is unavoidable that this pandemic has changed the norms of everyone and affected the social, psychological and other aspects of life. Hence, it is crucial that everyone is able to practice good hygiene in order to minimize the tendency to be infected and also practice the new norms of living as this pandemic is not over yet.

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