







# Socio-Economic Differences in Response to the COVID-19 Pandemic: A Case in Malaysia <sup>†</sup>

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**Abstract:** The COVID-19 pandemic has drastically transformed the human lifestyle and world socioeconomic conditions. It has attracted many scholars to assess the consequences of this pandemic. From a different angle, this study aims to compare the socioeconomic conditions before and during the COVID-19 pandemic; and to assess which socioeconomic indicator was most impacted by the pandemic. This empirical study employed a valid and reliable questionnaire that was randomly distributed to 516 respondents aged 18 to 65 years old in Peninsular Malaysia. Paired sample t-test and frequency analysis were utilised for the data analysis. Results show a significant difference in terms of socioeconomic conditions, namely income, saving, job security, health conditions, security/personal safety, emotional condition, spirituality, and work productivity was observed before and during the COVID-19 pandemic. Furthermore, spirituality (99.4%), food security (96.9%), health (88%), and personal safety (83.5%) were the most affected indicators during the COVID-19 pandemic. The outcomes of this study could provide policymakers with a clear picture of the effective strategy for achieving Sustainable Development Goals (SDG) and aiding Malaysia in its economic and social recovery after the pandemic.

**Keywords:** COVID-19 pandemic; socioeconomic impact; Malaysia



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## 1. Introduction

The COVID-19 pandemic is known as one of the biggest shocks with a remarkable impact on economic, social, health, political, and technological conditions worldwide. The disease has spread to every continent and case numbers continue to rise [1]. The World Health Organization (WHO) reported 212 million infections and about 4.4 million deaths worldwide from the pandemic since its discovery until August 2021. As for Malaysia, 1.5 million infections and 14 thousand deaths have been reported as of 24th August 2021 [1,2]. This never-ending story has created anxiety, tension, and disrupted everyone's life including children and aged individuals. The human lifestyle has changed 360 degrees as a result of this pandemic. Many countries have responded with one or more successive lockdowns (including school closures, workplace, closures, travel bans, and stay-at-home requirements) particularly to avoid overloading the health system which in turn slows down the productivity of affected countries.

Malaysia is no exception. In mid-March 2020, at the beginning of the pandemic in Malaysia, national and federal governments implemented lockdown measures, which resulted in a full halt to public life. These measures included stay-at-home orders, banning outdoor activities, including interstate travel, and shutting down all businesses except a

few designated essential services and the natural resource sectors. The lockdown is turning into an economic knockout. The economy is plummeting with growing negative impacts on jobs, incomes, and livelihoods, disrupting supply chains and upending businesses, and exacerbating inequalities, poverty, and hardships, especially among the most vulnerable [3].

Several explanatory or descriptive studies have been conducted to elucidate the socioeconomic impact of previous pandemics. A previous study [4] reported contradicting results regarding the impact of previous pandemics on different socioeconomic groups. For example, some authors recorded higher illiteracy rates to be associated with an increased risk of mortality during the 1918 pandemic in the USA, whereas other researchers found no differences in the socioeconomic status in New Zealand during the same pandemic. Similarly, the impact of the 2009 influenza pandemic was reportedly higher in lower socioeconomic groups in England but not in France. For COVID-19, several studies have analysed the effects of the pandemic on socioeconomic status in different populations and have yielded mixed results (the detail are reported in the next section). However, there is limited information regarding the impact of the COVID-19 pandemic in developing countries such as Malaysia. This article attempts to fill this research gap by answering the following questions: (1) Is there any difference in terms of socioeconomic conditions before and during the COVID-19 pandemic? (2) Which socioeconomic condition was impacted most by the pandemic? To answer these questions, the current study aims to compare the socioeconomic conditions before and during the COVID-19 pandemic; and to assess the socioeconomic components that were highly impacted by the pandemic. The results will contribute to a rapidly growing body of literature on the effects of the pandemic and assist in elucidating the implications of the policy responses to mitigate them at a critical time. Meanwhile, the main contribution of this study lies precisely in the identification of key socioeconomic and demographic factors and the possible regional mechanisms of action through which COVID-19 spreads at an ecological level.

This article will be structured as follows: Section 2 presents the past literature on event analysis; Section 3 draws the methodology step; Sections 4 and 5 comprise the findings and discussion respectively; and finally, Section 6 presents the conclusion and policy implications.

## 2. Literature Review

With the rising number of COVID-19 cases, many researchers worldwide have attempted to explore the cause and effect of this pandemic from diverse perspectives. An extensive review [5] was provided on the impact of the COVID-19 outbreak, stating that the pandemic has had a remarkable impact on the environment, economics, mental wellbeing, human health, and socioeconomic conditions. In addition, COVID-19 affected global trade [6]. Nevertheless, the economic consequences of the outbreak are underestimated due to over-reliance on historical parallels of the SARS pandemic or the financial crisis of 2008/2009.

In the case of Bangladesh, there was an immediate impact of the COVID-19 lockdown order on women and families in rural areas, which included a reduction in paid work, increased food insecurity, and heightened levels of depression and anxiety symptoms [7]. People's perceptions of the socioeconomic crisis and human stress in resource-limited settings in Bangladesh during the COVID-19 outbreak were assessed [8]. They revealed that food and nutritional deficiency were present among the vulnerable poorest sections due to the loss of livelihood. Additionally, high mental stress was reported among front-liners such as doctors, healthcare staff, police forces, volunteer organisations, and bankers. In Italy, the impact of the pandemic on hematologic patients (HP) was measured [9]. The results showed that HP experienced extremely severe depression, anxiety, and stress. In fact, 3.7% of HP did not work, and the main reasons were layoffs and lack of jobs. Meanwhile, the association between deprivation and COVID-19 incidence (case-hospitalisation and case-fatality) during pre-lockdown, lockdown and post-lockdown in Italy was in-

vestigated [4]. No significant differences were documented in case-hospitalisation and case-fatality according to deprivation in any of the observation periods.

In Brazil, the impact of the COVID-19 pandemic on the Brazilian electricity distribution market applying a socioeconomic regulatory model was evaluated [10]. The researchers found that both consumer and power distribution companies were significantly affected during the pandemic. Distributors at the concession area that had no access to a COVID-19 account (mitigation policy) were impacted the most. However, a report [11] has identified the most significant risk factors for the spread of COVID-19 in 29 countries (16 in Europe; 8 in Asia; 2 in Australia; and 1 each in South America and North America). Results showed that government interventions and the number of days to impose lockdowns, overweight population, and the presence of air pollution were significantly associated with the spreading rate of the novel virus in these countries. In North Africa, COVID-19 had a strong influence on social contact and economic activities through enforced policies on social isolation in the travel sector, financial market, and health system [12]. Specifically, the global demand for air travel, including travel in and out of Africa, dropped significantly.

Meanwhile, the socioeconomic determinants of COVID-19 for 42 Asian countries were analysed [13]. Net migration and higher economic activities were identified as predictors of the occurrence of COVID-19 cases in Asian countries. The knowledge, behaviour, health, and socioeconomic circumstances in response to the COVID-19 outbreak were assessed [14]. People in south Asian countries displayed good knowledge of COVID-19 symptoms and transmission but access to hygiene and personal protection resources was low. Additionally, the prevalence of unemployment rose and household income declined during the lockdown. The determinants of employee engagement during the COVID-19 pandemic in Vietnam were analysed [15]. A significant and positive effect of perceived organisational support and perceived family support on employee engagement was highlighted. In the same vein, customer purchasing intention on healthcare products during the pandemic in Indonesia was examined and revealed that social influence was a major indicator of consumer intention [16].

Several studies have been conducted in Malaysia to determine the impact of COVID-19. An overview of the measurement taken by the Malaysian government in response to COVID-19 and the effectiveness of the Movement Control Order (MCO) were provided [17]. The MCO and its compliance in mid-April effectively reduced the new number of active COVID-19 cases. A previous study [18] has provided a conceptual discussion and analysis of the impact of COVID-19 on financial crime and regulatory compliance. The number of financial crimes reportedly reduced during the pandemic; however, cybercrime cases increased during the same period. The regulatory compliance was unsatisfactory before and during the COVID-19 outbreak. Financial development scaled down during the COVID-19 outbreak in the Malaysian tourism industry [19]. Likewise, another study [20] investigated the psychosocial impact of COVID-19 on Malaysian families and found that most respondents with no permanent employment status faced a high psychological impact. The association between depression, anxiety, stress, and perceived quality of life among the Malaysia B40 urban community during the COVID-19 lockdown was measured [21]. Significant negative associations were reported between depression, anxiety, stress, and perceived quality of life, with the strongest correlation being observed between depression and psychological domains.

In summary, the effects of the COVID-19 pandemic on socioeconomic conditions have yielded mixed results. The effects of the pandemic appear to vary from one country to another. Nevertheless, no study has investigated the socioeconomic differences in response to the COVID-19 pandemic in Malaysia to date. In other words, the socioeconomic perspective of the impact of the pandemic needs to be elucidated. This study tends to fill the gap in the literature; hence, it was hypothesized that socioeconomic conditions were significantly different before and during the COVID-19 pandemic in Malaysia.

### 3. Methodology

Quantitative data were used to measure the variables in this study. The Malaysian population between the ages of 18 and 65 years was targeted for the survey. The minimum sample size for this study was determined as a rule of thumb [22]. A 95% confidence level was employed for the sample size calculation using Raosoft software, which was estimated as 385. To avoid bias and incomplete responses, a calculated working sample of 516 was drawn for the survey. Convenience sampling was used in this study due to the enforcement of the MCO in Malaysia to reduce the spread of COVID-19. Convenience sampling is a non-probability sampling technique that is used to select respondents based on availability [23]. Data were collected using Google forms, which has a flexible and practical web interface for designing and developing a web-based survey or questionnaire [24]. Respondents were sent a URL link via a WhatsApp group and an email in order to access and complete the questionnaire.

This study used a combination of multiple-choice and scaled questionnaires to answer the research questions and achieve the research objectives. COVID-19 was also examined in relation to socioeconomic factors in Malaysia. The researchers also collected demographic information, including age, gender, marital status, ethnicity, academic qualification, type of residence, and household income. Information was gathered on respondents' income, savings, job security, food, health, personal safety, emotion, spirituality, and productivity, among other socioeconomic factors. The questionnaire for the current study comprised five sections; demographic items were presented in section A, while section B contained yes/no closed questions relating to pre- and post-COVID-19 socioeconomic conditions. Meanwhile, section C included closed and multiple-choice questions on socioeconomic factors before and during the COVID-19 pandemic with "yes" or "no" responses. Sections D and E were presented using a 5-point Likert scale. Examples of studies that used 5-item Likert scales are [25–30]. Data analysis was performed using paired sample T-tests to detect if significant differences existed in the respondents' socioeconomic status before and during the COVID-19 outbreak. Frequency analysis was utilised to determine the socioeconomic component that was significantly impacted by the pandemic.

### 4. Findings

#### 4.1. Descriptive Analysis

This section describes the unit of analysis in this case the Peninsular Malaysian population aged 18 and 65 years old. The survey included 34.1% and 65.9% of male and female respondents, respectively. The majority of respondents were between 40 and 49 years old (65.9%) and 52.7% of them were married. Meanwhile, Malay represented the largest ethnic group percentage and academic qualifications at 96.5% and 41.9%, respectively. A higher proportion of the respondents (40.1%) had an income less than RM 4360, whereas 31.2% earned a monthly income between RM 4361 and RM 9619. Descriptive analysis of respondents' socioeconomic factors revealed that emotion (with the highest mean scores;  $M = 3.77$ ,  $SD = 1.081$ ) and personal safety ( $M = 3.76$ ,  $SD = 1.095$ ) were the most dominant socioeconomic factors to a significant degree. Following that, socioeconomic moderate factors included productivity ( $M = 3.72$ ,  $SD = 1.119$ ), health ( $M = 3.68$ ,  $SD = 1.161$ ), savings ( $M = 3.64$ ,  $SD = 1.163$ ), and spirituality ( $M = 3.61$ ,  $SD = 1.186$ ). Income ( $M = 3.54$ ,  $SD = 1.200$ ), food ( $M = 3.54$ ,  $SD = 1.207$ ), and job ( $M = 3.52$ ,  $SD = 1.236$ ) recorded the lowest mean scores. Overall, all dimensions in this study achieved acceptable or satisfactory levels of implementation.

#### 4.2. Frequency Analysis

For robustness of the earlier findings, frequency analysis was conducted. The frequency analysis indicated that there was a significant difference in terms of socioeconomic conditions, such as income, savings, job stability, health, security/personal safety, emotion, spirituality, and working productivity, before and after the COVID-19 pandemic. This means that the COVID-19 pandemic has the potential to affect the above-mentioned

socioeconomic indicators, as well as cause other types of socioeconomic failures. Specifically, COVID-19 negatively impacted 26.6% of the 516 respondents' income through job loss (25%), pay loss (36.8%), overtime loss (24.3%), pay cut (20.8%), and allowance cut (24.3%). Further, 42.1% of respondents expressed that their savings were affected during the COVID-19 pandemic due to employment cutback (14.5%), loss of pay (20.4%), loss of overtime (13.1%), pay cut (11.8%), allowance cut (13.6%), support for food (64.7%) and an increase in current bills (53.8). In summary, the portion of job losses before and during COVID-19 increased from 34.2% to 52.2%, which highlights the impact of the pandemic on respondents' income and savings.

The majority of respondents' food security was also affected by the COVID-19 pandemic (96.9%) resulting from a lack of funding (50%), health concerns (34.2%), and food supply difficulties (34.2%). In terms of health conditions, 88% of respondents were impacted by the COVID-19 pandemic, comprising lack of sleep (55.1%), family problems (22.4%), loss of appetite (14.3%), shortage of money to buy medicines (10.2%), shortage of medical supply (10.2%), and others (34%). Approximately 83.5% of respondents felt the MCO (66.7%), social media attack (28.7%), fraud (16.1%), theft (9.2%), burglaries (4.6%), and others (21%) affected their personal safety. In addition, 39.7% had their emotion disturbed (ranging from slightly to frequently) due to the MCO (57.4%), domestic violence (0.6%), lack of social activities (51.1%), concern of infection (64.6%), loss of income (23.4%), and others (35.8%). Almost all (99.4%) of the respondents experienced an increase in their spiritual activities, where 97.8% prayed or worshipped God, 76.9% read a religious book, 70.4% did zikr, 19.7% performed song/nasyeed, 52.9% did meditation, 60% made sadaqah, and 2.4% performed activities. As for productivity, 57.4% of respondents felt there were changes in productivity due to the MCO (76.7%), lack of social activities (57.3%), the concern of infection (45.8%), loss of income (18.5%), and others (5.2%).

In conclusion, the socioeconomic factor that was most impacted was spirituality (99.4%), followed by food security (96.9%), health (88%), and personal safety (83.5%), which is consistent with the findings of [7,20,21]. (See Table 1, for details).

**Table 1.** Frequency analysis: Socioeconomic factors.

No.	Socioeconomic Factors	Is This Factor Affected by COVID-19?		If Yes, What Are the Causes of the DV?	%
		YES	NO		
1	Income	26.6% (137)	73.4% (379)	Loss of job	25% (36)
				Loss of pay	36.8% (54)
				Loss of overtime	24.3% (36)
				Pay cut	20.8% (30)
				Allowance cut	24.3% (35)
				Loss of job	14.5% (32)
2	Savings	42.1% (217)	57.9% (299)	Loss of pay	20.4% (46)
				Loss of overtime	13.1% (30)
				Pay cut	11.8% (26)
				Allowance cut	13.6% (30)
				Support for food	64.7% (144)
				Increase in current bill	53.8% (120)
3	Job	Yes, affected. The percentage not working has increased from 34.2% (177) to 52.2% (269).			

**Table 1.** *Cont.*

No.	Socioeconomic Factors	Is This Factor Affected by COVID-19?		If Yes, What Are the Causes of the DV?	%
		YES	NO		
4	Food	96.9% (500)	3.1% (16)	Insufficient money	50% (19)
				Concern of affected health	34.2% (13)
				Difficulty in getting supply	21.1% (8)
				Others	31% (12)
5	Health	88% (454)	12% (62)	Lack of sleep	55.1% (27)
				Family problem	22.4% (11)
				Loss of appetite	14.3% (7)
				Shortage of money to buy medicines	10.2% (5)
				Shortage of medical supply	10.2% (5)
				Others	34% (17)
				MCO	66.7% (58)
6	Personal Safety	83.5% (431)	16.5% (85)	Social media attack	28.75% (25)
				Fraud	16.1% (14)
				Theft	9.2% (8)
				Burglaries	4.6% (4)
				Others	21% (19)
				MCO	57.4
7	Emotion	Normal/Stable 60.3 Slightly disturbed 36.4 Frequently disturbed 3		Domestic violence	0.6
				Lack of social activities	51.1
				Concern of infection	64.6
				Loss of income	23.4
				Others	35.8
				Pray or worship God	97.8
				Read religious books	76.9
8	Spirituality	99.40%	0.60%	Zikr	70.4
				Spiritual song/Nasyeed	19.7
				Meditation/Self-reflection	52.9
				Sadaqah	60
				Others	2.4
				MCO	76.7
				Domestic violence	0
9	Productivity	57.4	42.6	Lack of social activities	57.3
				Concern of infection	45.8
				Loss of income	18.5
				Others	5.2
				MCO	76.7

**4.3. Paired T-Test Analysis**

Based on these findings, the t-test demonstrates robust validity relative to previous findings. A total of nine factors, namely income, savings, job security, food, health, personal safety, emotion, spirituality, and productivity, were tested to determine if they were

significantly different before and during the COVID-19 pandemic. The results depicted that respondents' income ( $M = 0.347$ ,  $SD = 0.640$ ,  $t = 12.314$ ,  $p = 0.00$ ), savings ( $M = 0.372$ ,  $SD = 0.627$ ,  $t = 13.477$ ,  $p = 0.000$ ), and job security ( $M = 0.180$ ,  $SD = 0.414$ ,  $t = 9.891$ ,  $p = 0.000$ ) significantly differed between the two periods. In other words, the pandemic had a significant impact on respondents' income, savings, and job security. Further analysis revealed that there was a statistically significant difference in respondents' food security ( $M = 0.019$ ,  $SD = 0.196$ ,  $t = -2.245$ ,  $p < 0.0$ ) before and during COVID-19 with an effect size of 0.0969 (small effect). Meanwhile, a large effect size (2.2700 and 1.3607) was recorded for the significant differences in health ( $M = 0.849$ ,  $SD = 0.374$ ,  $t = -51.494$ ,  $p = 0.05$ ) and personal safety ( $M = 0.713$ ,  $SD = 0.524$ ,  $t = -30.901$ ,  $p = 0.05$ ) before and during the pandemic. Subsequent dimensions demonstrated significant differences in emotion ( $M = -0.614$ ,  $SD = 0.547$ ,  $t = -25.499$ ,  $p < 0.0$ ), spirituality ( $M = 0.029$ ,  $SD = 0.179$ ,  $t = 3.682$ ,  $p < 0.0$ ), and productivity ( $M = -0.368$ ,  $SD = 0.179$ ,  $t = -16.395$ ,  $p < 0.0$ ) between the respondent' situations before and during COVID-19. Specifically, the levels of emotion, spirituality, and productivity were significantly lower before COVID-19 than during the pandemic. The detailed results are presented in Table 2.

**Table 2.** Paired Samples Test.

Before and After COVID-19		Paired Differences					t	df	Sig. (2-Tailed)
		Mean (M)	Std. Deviation (SD)	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Income	-0.347	0.640	0.028	-0.402	-0.292	-12.314	515	0.000
Pair 2	Saving	-0.372	0.627	0.028	-0.426	-0.318	-13.477	515	0.000
Pair 3	Job Security	-0.180	0.414	0.018	-0.216	-0.144	-9.891	515	0.000
Pair 4	Food	-0.019	0.196	0.009	-0.036	-0.002	-2.245	515	0.025
Pair 5	Health	-0.849	0.374	0.016	-0.881	-0.816	-51.494	515	0.000
Pair 6	Personal Safety	-0.713	0.524	0.023	-0.759	-0.668	-30.901	515	0.000
Pair 7	Emotion	-0.614	0.547	0.024	-0.662	-0.567	-25.499	515	0.000
Pair 8	Spirituality	0.029	0.179	0.008	0.014	0.045	3.682	515	0.000
Pair 9	Productivity	-0.368	0.510	0.022	-0.412	-0.324	-16.395	515	0.000

### 5. Discussion

The results from paired t-tests on income, savings, and job security revealed that there were significant differences between respondents' conditions before and during COVID-19. This crisis has disrupted not only many lives but also socioeconomic factors such as income, savings, and job stability. Some actions are needed to counter the negative impact of COVID-19 to elevate the socioeconomic status of those affected by the crisis, especially the poor. The research findings on income, savings, and job security are consistent with a previous study [31] in which individuals and households faced high economic risk as their financial sources and savings were severely affected during the crisis. According to them, some did experience a cut to their basic income while others were forced to depend on their savings to pay for necessary items, especially among the B40 households. Some Malaysians were reported to have experienced a loss of income due to COVID-19 [32]. Additionally, movement restrictions have affected daily incomes and some of them have lost their jobs. These findings are pertinent for the relevant agencies to introduce appropriate plans or policies to ensure the well-being of those impacted by the pandemic or any future crisis. COVID-19 has impacted individuals and businesses, especially small and medium enterprises following massive lay-offs and loss of income [33]. The researcher concluded that government intervention is vital to ensure recovery and growth so that Malaysia can be sustainable and resilient for any upcoming crisis. In brief, COVID-19 has impacted income, savings, and job security, especially during the event of the crisis. Therefore, relevant government agencies should undertake proactive actions and policies to mitigate the impacts of COVID-19 or any upcoming crisis.

Although there was a small difference in respondents' food security before and during COVID-19, the current data emphasises the need to investigate the issue to implement adequate measures in the future to alleviate hunger, reduce malnutrition, and other serious

impacts of food insecurity on the poor. This finding is also in line with another study [8] which reported the prevalence of food and nutritional deficiencies during the COVID-19 pandemic and measures to address the issue. The government and other relevant authorities should support affected individuals in diversifying their sources of income in order to strengthen food security. The government's national food security programmes should be well-planned and focused to reduce the burden of food insecurity among affected groups. Integrated farming entrepreneurship and rural empowerment programmes should be established and intensified to eliminate food insecurity of the public. Admittedly, COVID-19 remains a public health emergency worldwide. The current study revealed that there is a remarkable difference in public health before and during the pandemic. This finding is consistent with research [12] in which COVID-19 was reported to have a significant impact on healthcare systems. This study highlights the need for more comprehensive health education, focusing on information consistency from the government to the general public. Health educational efforts are urgently needed to reach the general population. New education systems need to be deployed to increase general population awareness of COVID-19 and its preventative practices to reach its elimination targets. Knowledge and awareness of the disease are crucial characteristics for the implementation of protective measures to reduce the risk of illness exposure. This study also revealed that personal safety demands urgent attention. The current study depicted a large difference in the personal safety of the public before and during COVID-19. Most respondents in the present study asserted that the pandemic affected their personal safety. In other words, their safety has declined since the MCO was implemented. There are also issues of social media attacks, fraud, and theft, which make them feel traumatised. Another previous study [20] reported the psychosocial impact of COVID-19 on Malaysian families. The term "safety" refers to a situation in which there is no threat, thus, meaning it is described as the ability of an individual to go about their daily lives without fear of psychological, emotional, or physical harm from others. It is necessary pertaining to one's personal experience. This sense of safety is important to individuals who are substantially not at risk of being a victim due to the pandemic. Therefore, it is pertinent for the government to consider how to improve individual safety during the pandemic. A personal safety plan could assist the victims in individual protection and aid in the preparation for future violence and abuse. The sample safety plans should be adapted to fit the specific needs during the pandemic, for example, a self-guide for domestic violence, safety planning for children and youth, programmes for domestic abuse, an educational toolkit for domestic abuse victims and survivors, and many more.

The current findings have elucidated the impact of COVID-19 on socioeconomic factors, comprising emotion, spirituality, and productivity. Regarding emotion, the majority of respondents agreed that one of the reasons their emotions were disturbed was their fear of contracting COVID-19. Infection with COVID-19 might disrupt individual health, limit daily routine and activities, and the most feared outcome is death. In parallel, it has been reported by Forbes that lockdown and social distancing measures to prevent the spread of COVID-19 have heightened fears of increasing levels of domestic violence, which includes physical, emotional, and sexual abuse [34]. Meanwhile, a study [7] found that over half of the women experiencing emotional or moderate physical violence reported an increase in these events since the lockdown. With no job, no income, and limited mobility, individuals' emotions are affected, as highlighted by the respondents of this study. This can be seen where, on average, they consider this pandemic to be unexpected. Therefore, it is a great challenge for the respondents to continue surviving, especially during the pandemic. Although COVID-19 had a significant impact on the majority of the respondents, it is interesting to note that they strive to be closer to their God in terms of spirituality. These people may believe that the pandemic is a test from their God to see how strong and patient they are in the face of adversity. In a previous study [35], spirituality or faith was one of the tools for dealing with stress and the negative effects of life problems and illnesses. Indeed, a prior study demonstrated that families rely on their spirituality for emotional,



mental, and physical well-being [36]. In fact, spiritual practices have long been recognised as an effective coping mechanism for dealing with life-altering and traumatic events [36]. In Indonesia, the rise in COVID-19-related anxiety cases necessitated increased advocacy for holistic mental health services, with spirituality being recommended among people suffering from anxiety [37]. Moreover, in the present study, most respondents stated that practicing prayer, dhikr, and reading religious books could help their emotions to be calmer and more stable. These respondents have been able to reflect on why COVID-19 is occurring as a result of the emphasis on spirituality. Consequently, productivity among respondents was also affected during the COVID-19 outbreak. Following the MCO announcement by the government, respondents were unable to perform their usual activities. This has resulted in declining productivity specifically if working from home (WFH). In the same vein, workers who worked from home had lower productivity than those who did not [38]. Second, the same study also revealed that poor WFH setups and communication issues are the primary causes of productivity losses. According to Stanford economist, Nicholas Bloom, the global WFH attempts to maintain output and efficiency during the COVID-19 pandemic may cause a worldwide productivity slump and threaten economic growth for many years [39]. WFH is undeniably not the same as working in an office or outside. The respondents were in a similar situation, where they felt unproductive when sitting at home alone given that most of them were self-employed while others run their own businesses to make ends meet.

## 6. Conclusions and Policy Implications

This research aimed at comparing the socioeconomic conditions before and during the COVID-19 pandemic and determining the most affected socioeconomic indicator. This empirical study used a valid and reliable questionnaire that was purposely distributed to 516 respondents aged 18 to 65 years in Peninsular Malaysia. The findings revealed a significant difference in socioeconomic conditions, such as income, savings, job stability, health, security/personal safety, emotion, spirituality, and working productivity. Other conditions included spirituality, food security, health, and personal safety. The results impys that the COVID-19 pandemic did affect the socioeconomic conditions of most of the respondents due to loss of income and challenges in paying for their expenses. Nevertheless, the findings are inconclusive since no causal relationship or effect could be determined on respondents' socioeconomic conditions. In the future, advanced techniques and methodologies, such as the structural equation model (SEM) and a combination of primary and secondary data analysis could be employed. Such analyses will assist in yielding advanced recommendations, primarily related to the post-COVID-19 challenges and prospects of the Malaysian economy. Therefore, to overcome the impact of COVID-19 on socioeconomic conditions among Malaysians, the government and NGOs need to come up with post-pandemic policies and initiatives, which include providing constant support to enterprises, jobs, and incomes through appropriate fiscal and monetary policies. Additionally, Malaysian firms can increase OSH safeguards, reschedule or reorganise working hours, and change their working styles to protect their employees in the workplace. For example, keep a specific number of employees at their workstations while allowing others to telework or work from home. By improving the employees' working environment, it is expected that productivity will increase and contribute to a better economic rebound.

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