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主題:新冠疫情下之失落經驗與悲傷調適歷程

主持人:陳如湘

馬來西亞華社輔導協會主席/馬來西亞工藝大學社會科學與人文學院高級講師

發表人(一):陳存福 論文名稱:智障人士對被剝奪的社會需求的悲傷表達 發表人(二):温淑彬 論文名稱:說不出口的再見:男性喪偶者之哀傷歷程 發表人(三):鄒姛伶、陳如湘

論文名稱:新冠疫情下分居夫妻的模糊性失落經驗之初探

發表人 (四): 甄偉詒、陳如湘

論文名稱:新冠疫情下馬來西亞籍員工非死亡失落經驗之初探

評論人:鄧志平

彰化師範大學輔導與諮商學系助理教授

Forum B-3

Paper Presentation:

The Process of Loss and Grief Adjustment in the Midst of Covid 19 Pandemic

Moderator: Dr. Joo-Siang Tan

Senior Lecturer, Guidance and Counselling Program, Universiti Teknologi Malaysia

Presenter I: Chuong-Hock Ting

Title: Yearning for Social Needs: A Case Report of Disenfranchised Grief in an Intellectually Disabled Person

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Presenter II: Siok-Ping Voon

Title: I Don't Want to Say Goodbye: A Man's Journey Through Grief

Presenter III: Shih-Ling Chor, Joo-Siang Tan

Title: A Preliminary Study of Ambiguous Loss Among Couples Who Lived Separately Amidst the Covid-19 Pandemic

Presenter IV: Kenny Wei-Yi Chin, Joo-Siang Tan

Title: A Preliminary Study of Malaysian Workers' Non-Death Loss Experience in the Midst of Covid-19 Pandemic

Commentator: Dr. Chi-Ping Deng

Assistant Professor, Department of Guidance and Counseling, National Changhua University of Education

智障人士對被剝奪的社會需求的悲傷表達

*陳存福1

摘要

智障人士的主觀感受和悲傷能力經常被忽視。多年來,研究人員發現智障人士也同樣 地可感受到喪親之痛的壓力,並可能因此患上精神或身體上的疾病。辨識智障人士的 悲傷和抑鬱症狀經常令臨床醫護人員面臨挑戰,尤其是在面對那些有溝通困難的病患。 因此,家庭成員所提供的報告將成為推測病者的內心想法和心理過程的主要資訊來源。 這也同時幫助醫者制定敏感即適用於病者家庭文化的治療方案。 本案例的目的在於著 重提出智障人士在新冠疫情期間被剝奪權利的悲傷經歷和認知。劉小姐是一名 23 歲的華 裔女子。她從小就患有中度智力障礙和有限的語言表達能力。自從 2020 年 11 月(疫情 期間),她的性格和行為出現了一些明顯的變化。她開始不再對看電視節目和做家務感 興趣,甚至洗澡都需要在母親的協助下進行。她經常在夜裡需要起床好幾次去洗手間, 睡眠也因此受到干擾。劉小姐也不再對食物感興趣, 而且需要家人哄她進食,因而體 重明顯下降。為此,家人感到迷茫無助。起初,她的家人認為這突如其來的轉變可能是 因為邪靈的干擾所致,因此向靈媒尋求治療。然而,這些傳統治療方式只對她的睡眠 有輕微改善。隨後,她經由社區綜合診所轉介到精神專科醫院做進一步評估。母親反 映,由於疫情行動管制措施劉小姐無法如常去到社區康復中心進行日常社交活動。同 時,劉小姐的母親也在外兼職月嫂的工作。劉小姐因此同時失去了生活中僅有的社交 活動和主要照顧者的陪伴。這使她不進食的情況明顯惡化。在診所裡,劉小姐把她的 目光主要投注在母親身上,這可能表示她對母親有著強烈依附的關係。她很安靜,表 達能力屬弱。所有的抽血核對總和腦電圖(EEG)都未顯示異常狀況。醫師在治療劉小 姐時面對多重挑戰,尤其是面對有限的溝通和因家庭文化差異而延遲尋求治療。起初, 她因脫水和體重下降而需要住院留醫。醫治策略包括給予複合維生素以補充營養、為 她定制活動時間表、以及安排職能治療師進行家訪以觀察和為家人演示行為治療的方 式。然而,她的進食狀況只在服用抗抑鬱藥物(sertraline)後才有顯著的改善。在處理 智障人士面臨被剝奪權利的悲傷情形,此案例會是個顯要的發現。智障人士會以非一 般的表達方式來反映他們對社交的需求,並可能因此形成精神疾病。病者的身體症狀 和日常功能下降可能顯示他們正沮喪,因此醫師可儘早考慮藥物治療, 並同時間進行 心理社會介入措施以提高醫療效果。

關鍵詞:被剝奪的悲傷,智障人士,社交

1砂拉越大學心理醫學系

* 通訊作者電子信箱:chting@unimas.my

Yearning for Social Needs: A Case Report of Disenfranchised Grief in an Intellectually Disabledperson

*Chuong-Hock Ting¹

Abstract

The capacity to express subjective experience of emotion and grief among people with intellectual disability are often disregarded. Over the years, the researchers had observed that they are equally susceptible to the stress of bereavement and could be at risk of developing psychiatric or somatic illnesses. Clinicians often find it challenging to identify grief and depressive symptoms among individuals with intellectual disability, especially among those with communication difficulties. Therefore, engaging family member to provide a proxy report as the primary source of information to presume their inner thoughts and mental processes will help in formulating culturally sensitive treatment. The objective of this case report is to highlight the importance of recognizing disenfranchised grief among the cognitively challenged population during the COVID-19 pandemic. We report a case of 23 years old Chinese lady, Miss L who experienced a change in personality during the pandemic period. Miss L has moderate intellectual disability with minimal verbal expression since she was a child. Since November 2020, she showed reduced interest in watching television and perform her activities of daily living. She required assistance in taking shower and stopped helping with household chores. Her mother concluded that shehad cognitive decline as she seemingly lost the acquired basic daily living skills. She also had disturbed sleep because she frequently needed to wake up from sleep at night to pass urine. Her mother needed to coax her to take meals and there was significant weight loss noted. Due to the difficulty in comprehension, the family felt helpless and lost in dealing with her condition. The mother sought traditional treatment initially, believing that Miss Lwas possessed in their cultural belief. There was only a slight improvement in sleep, while the other aspects showed no significant change. She was then brought to the health clinic for further assessment. On further questioning, the mother reported Miss L had missed going to the community rehabilitation centre due to the movement control order following the outbreak of the COVID-19 pandemic. Besides, her mother who is the primary caregiver, had to do part-time work as a confinement lady. These imposed losses of meaningful dailyactivities and significant companions from the primary caregiver had contributed to her worsened condition. The initial mental state examination revealed a quiet, young lady whofixed her eye contact mainly on her mother which may indicate a strong attachment to the mother. Her speech was minimal and mainly echolalia. Laboratory investigations of her full blood count and thyroid function were within normal ranges. Computed tomography (CT) of the brain and electroencephalogram (EEG) revealed no significant abnormality. Clinicians faced multiple challenges in treating Miss L, particularly the limitation in effective communication and delayed treatment seeking due to cultural belief. Initially, sherequired hospital admission because of dehydration and significant weight loss. The strategies of our therapeutic interventions include organising an activity schedule for her, prescribing multivitamins to supplement her nutritional needs, and conducting a home visitby an occupational therapist to observe and demonstrate the behavioural intervention to engage her in daily activities. However, her symptoms did not show significant improvement until she was trialled on an antidepressant, sertraline. This case serves an impactful discovery for clinicians who work with the cognitively challenged population in the field of disenfranchised grief. Intellectually disabled persons would convey their socialneeds differently and might develop a comorbid psychiatric condition from unforeseen losses. It is of utmost importance to notice that functional decline may signify depression and worth considering early biological treatment in addition to other psychosocial interventions engaging family members and allied healthcare workers to enhance the treatment outcome.

Keywords: disenfranchised grief, intellectual disabled person, social needs

¹Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak

* Corresponding author's email: chting@unimas.my

說不出口的再見:男性喪偶者之哀傷歷程

*溫淑彬1

摘要

哀傷從來就不是一件容易的事,新冠疫情期間更是讓哀傷難上加難。本研究案例講訴 一位 40 歲馬來西亞華裔男子,因至愛罹患癌症去世所經歷之身心並發症的哀傷歷程。 案主自 2020 年 10 月首次發病以來,出現背痛、胃部不適、肩痛、頸部和腹部不適 等多種身體症狀。案主一直尋求各種醫療諮詢,包括接受結腸鏡檢查和食道十二指腸 鏡檢查程式 (OGDS),但都徒勞無功。案主身體上的不適讓他聯想起已故伴侶患癌期 間的種種症狀,並模仿已故伴侶的睡姿讓自己感覺較爲舒服。與此同時,案主呈現了 重度抑鬱症 (MDD) 的症狀,包括食慾和體重明顯下降、對事物喪失興趣、感受到 悲傷、無價值感和絕望感。至愛於去年三月離世給案主帶來巨大的失落與悲傷,讓他 經歷了難以克服的災難性情緒。案主也反復表示對生活感到失去方向,精神與注意力 無法集中而導致工作表現急劇下降。尤其令人擔憂的是,案主展示未完成和復雜性的 哀傷。因疫情緣故個案無法參加葬禮導致他有許多未處理的情緒。個案與往生者處於 戀人關係長達 13 年,他在這親密關係中也呈現強烈的親密和依賴性,案主也對遺忘 往生者表示強烈的內疚感。這些無疑增加了哀傷的複雜性並導致哀傷歷程偏離了原本 的治療歷程。治療師藉著與案主建立一種支持性和高度同理的關係,而助他逐漸走出 傷痛。同理的治療關係讓案主在面對失落和死亡議題的情緒有了一個出口。考量哀傷 歷程和體驗中對所存在的個別差異,治療師為案主結合了包括藥物治療和以哀傷為中 心的多重介入和治療技術以促進健康的哀傷過程。治療過程使用了抗抑鬱藥物,而治 療的目標也不急於讓案主試圖告別過去或與往生者說再見,而是培養與往生者的建設 性持續聯繫。通過懷念已故至愛,記住美好時光,與失去的至愛建立內部對話來實現 並繼續紀念往生者,並想像往生者對案主當前生活事件的反應。幹預的結果顯示,在 經歷了四次治療之後,案主表現出顯著改善且抑鬱症狀也明顯減少。案主更逐步接受 喪失至愛的事實。此外,案主也更為接納並允許自己悲傷和哭泣,逐漸適應至愛不再 存在於世的現實,並在生活中積極向前邁進。案主不會僅因談論已故的至愛而變得更 加沮喪。雖然案主在悲傷過程和恢復自己的生活方面取得了重大進展,但仍然偶爾會 感到身體不適。本研究案例強調了將來訪者概念化為"情境中的自我"的重要性,理解 重要他人死亡所引發的各種身心反應也強調了在治療中'自我'的運用,也識別和治療因 重大失落而導致的生理和心理風險的問題。有效的哀傷治療來自與來訪者建立密切的 關係,同時提供堅固的情感支援並意識到哀傷者的韌性乃至關重要。失去至愛往往是 個非常艱難的時刻,但當哀傷可以更好的被看見,被處理,被療愈時將可以以更健康 的方式來面對失落。

關鍵詞:未解決的悲傷,自我使用,悲傷治療

1砂拉越大學認知科學與人類發展學院

* 通訊作者電子信箱: spvoon@unimas.my

I Don't Want to Say Goodbye: A Man's JourneyThrough Grief

*Siok-Ping Voon¹

Abstract

Grieving is hard. Grieving during Covid-19 pandemic is even harder. The purpose of this case study is to illustrate the grieving journey of a 40 years-old Malaysian Chinese man who experienced physical and mental complications after the death of his loved one from cancer. The client was presented with several somatic symptoms such as backache, stomachupset, shoulder pain, neck and abdominal discomfort since first onset in October 2020. Hehad been seeking various medical consultations including undergone colonoscopy and Oesophagus Duodenoscopy Procedure (OGDS), but to no avail. Client identified his physical symptoms with his late partner and adopted his late partner sleeping posture to feel better. He reported symptoms of major depressive disorder (MDD) with significant loss of appetite and weight, loss of interest, sadness, sense of worthlessness and hopelessness. After the death of his loved one in March last year he found it hard to overcome the devastating feelings related to the loss and reported feeling loss of directionin his life. His work performance has dropped drastically since then. Of particular concern, client was susceptible to unresolved and complicated grief. He was not able to attend the funeral due to the pandemic, leaving him a great deal of unsettled feelings. Client was in relationship with the deceased for 13 years, he showed great closeness and high dependency in the relationship with the decedent. He reported strong sense of guilt to forget her. These increased the complexities of grief and caused the grieving process to be derailed. The therapist created a supportive, empathic relationship with client and helped him to face hisloss gradually. The therapeutic alliance drew out client's emotions and feelings in relation to his loved one's death. By taking into the broader sense of how grief manifests itself and individual differences in the grief experience, the custom-tailoring of intervention integrated different modalities and techniques to facilitate healthy grieving process, these include pharmacotherapy and grief focused therapy. Treatment was initiated with antidepressants. Instead of gaining closure or trying to say goodbye, the goal of therapy fostered a constructive continuing bond with the deceased person, this was accomplished through honouring the deceased loved one, remembering the good times, setting up an internal dialogue with the lost loved one, continuing to think of that person on a regular basis and imagining the person's reactions to current life events. The outcome of the intervention revealed that client demonstrated marked improvement with reduced depressive symptoms. After attending four sessions, he began to accept the reality of his loss. He managed to allow himself to grieve and cry if needed, adjust to a new reality in which the deceased is no longer present and moved forward positively in his life. He became able to talk about his deceased loved one without becoming overly upset. While the client has made significant progress in his grieving process and resuming his own life, he still occasionally experiences physical discomfort. This case study highlighted the importance of conceptualizing the client as "the self-in-context", understanding the biopsychosocial impact of the death of a loved one has emphasized the use of self in therapyon identifying and treating people at risk for physical and psychological issues as a result of their significant loss. Establishing the emphatic relationship with client, providing solidemotional support and recognizing the resilience in griever are essential to providing effective therapy to client with unresolved loss. Facing the loss of loved one can be difficult the althy ways to cope with loss are possible.

Keywords: Unresolved grief, use of self, grief therapy

¹ Psychology Programme, Faculty of Cognitive Science & Human Development, Universiti MalaysiaSarawak

* Corresponding author's email: spvoon@unimas.my

新冠疫情下分居夫妻的模糊性失落經驗之初探

 $鄒 姮 伶^{1} * 陳 如 湘^{2}$

摘要

新冠肺炎引發了全球的鎖國、封城、旅行禁令和邊境關閉。馬來西亞行動管制令導致 馬來西亞和新加坡之間的國際邊界關閉。這限制直接衝擊了平日需通勤新馬兩地工作 的夫妻。因抑制疫情而落實的行動控制令,讓已婚夫妻分居兩地,進而威脅夫妻之間 的依附關係。經歷持續分離的情況下,使已婚夫妻經歷許多的不確性從而被迫進行調 整。疫情下分居的夫妻不僅「人不在」,還可能「心不在」,受影響的夫妻因而經歷了 生活各方面的失落和悲傷。過去的研究稱不確性的失落為模糊性失落。模糊性的失落, 所帶來的不確定性和混亂可能會衝擊個人信念,造成身份和角色的混亂,給未來蒙上 陰影,阻礙悲傷反應並挑戰夫妻的日常生活和功能。過去有些研究涉及新冠疫情期間 的遠距離關系,但是較少針對新冠疫情期間被迫分居兩地的夫妻經驗。盡管過去有不 少針對模糊性失落的研究,但也少於關注因疫情下分開生活的夫妻所面對的失落 和 悲傷經驗。因此,本研究旨在探討夫妻間的依附和分離、以及在疫情下的生活經驗。 本研究用現象學取徑的架構,從經歷者的角度探討夫妻的生活經歷。此研究通過立意 抽樣的方式在網絡平臺招募五對已婚夫妻進行深度訪談。此外,由 Hazen 和 Shaver 擬定的簡化成人依附形式問卷用於理解受訪者的依附形式。訪談議定採用 Seidman 的訪談結構。訪談內容先予以錄音,並根據簡化的 Hycner 模型對訪談進行逐字騰稿和 分析。研究的現象也與目前的新冠疫情下的情況息息相關。此研究試圖描繪夫妻面臨 的掙扎、疫情下的失落、生活及分居發生的變化,從而加深對模糊性失落的理解。實 際上,在配偶不在身邊的情況下夫妻如何掙紮著維系家庭,凸顯了心理和情感干預的 必要性。心理健康工作者需擬定合適的干預措施,以協助受到模糊性失落影響的夫妻。 夫妻分居經歷所產生的積極變化和可能的意義或許會加強婚姻關係並增強他們的適 應能力。在疫情下互相依附的分居夫妻對伴侶的「人不在、心在」,或「人不在、心也 不在」的知覺,將有助於擴展既有的模糊性失落理論框架。

關鍵詞:模糊性失落,依附,分居,已婚夫妻,新冠疫情

1 馬來西亞工藝大學社會科學與人文學部教育學院輔導與諮商學系

² 馬來西亞工藝大學社會科學與人文學部教育學院輔導與諮商學系

* 通訊作者電子信箱: joosiang@utm.my

A Preliminary Study of Ambiguous Loss Among Couples Who Lived Separately Amidst the Covid-19 Pandemic

Shih-Ling Chor¹ *Joo-Siang Tan²

Abstract

The Covid-19 pandemic had triggered worldwide national lockdown, travel bans and border closure. The movement control order in Malaysia had resulted in international border closure between Malaysia and Singapore. This restriction had a direct hit on the daily border commuters, involving married couples who worked across the border. The attachment formed between the couple is threatened with an enforced separation triggered by the movement control order. The married couples had to live apart, enduring uncertainties and force to make adjustment. The separation involved loss of physical presence and possible psychological presence that weaved foreseeable loss and grief into many aspects of their lives. Previous research studied ambiguous loss as a situation of unclear loss. The uncertainty and confusion over the ambiguous loss could disrupt belief, create identity and role confusion, cloud the future, hinder grieving, and challenge couples' daily routine and functioning. Few research addressed the long-distance relationship during pandemic. However, the experience of married couple who live separately due to pandemic is underrepresented. Although research about ambiguous loss is abundant, little attention has been placed on the loss and grief of couples living separately amidst pandemic. Therefore, this study aims to explore couples' experience of attachment, separation and adjustment within the loss brought about by the pandemic. Phenomenological approach is used to study the lived experiences from the couples' perspective. Purposive sampling technique is used to recruit five married couples for in-depth interview via online platform. Besides, a simple adult attachment styles questionnaire developed by Hazan and Shaver is used to assess the respondents' attachment style. The interview protocol adopted Seidman's interview structure. The recorded interviews will be transcribed and analyzed according to the simplified Hycner's model of explication process. The phenomenon discussed is highly relevant in the recent pandemic. This study intends to depict couples' struggle, the experience of living apart due to the Covid-19 pandemic and changes that took place during separation in order to broaden the understanding of the ambiguous loss. In reality, couples struggled to maintain their family without the physical presence of their spouse highlighted the need for psychosocial and emotional intervention. Mental health practitioners are urged to support married couples affected by ambiguous loss. On the contrary, the positive changes that took placed and possible meanings derived from the experience of living apart among couples might strengthen the marital relationships and enhance their resilience. The experience of non-physical and nonpsychological presence, as well as the non-physical and psychological presence of attached married couples intended to contribute to the existing conceptual framework of ambiguous loss.

Keywords: ambiguous loss, attachment, separation, married couple, Covid-19 pandemic

¹ Guidance and Counselling Program, School of Education, Faculty of Social Sciences, Universiti Teknologi Malaysia, Malaysia

² Guidance and Counselling Program, School of Education, Faculty of Social Sciences and Humanities, Universiti Teknologi Malaysia, Malaysia

* Corresponding author's email: joosiang@utm.my

新冠疫情下馬來西亞籍員工非死亡之失落經驗

甄偉詒1 *陳如湘2

摘要

失落是每個人在一生中必會經歷的歷程,它不僅涉及死亡或與親人的分離,還包括不同 形式的非死亡性失落。新冠疫情給全球各國造成了全面損失,並對員工的生活造成了極 大的影響。許多員工也因遏制新冠肺炎的預防措施,而經歷了多重的非死亡性失落其中 包括失去經濟保障、社會支持以及社會認同。這些多重的非死亡性失落迫使許多員工在 生活中進行調整,並在經歷失落的同時對自身的福祉帶來了負面影響。延長的封鎖措施 使許多人對即將到來的失落感到悲痛。此外,密切社交接觸的禁止也進一步影響悲慟過 程。文獻強調經歷非死亡和喪親之痛的悲慟過程有相似之處。它們皆會導致強烈的身體、 情緒和心理反應,並需要進一步的心理協助與臨床介入。然而,社會對於非死亡性失落 的理解和關注的不足也導致了目前的文獻缺乏專門研究非死亡性失落所產生的悲慟反 應。此外,文獻也強調不將悲慟反應病態化,而需關注探索員工經歷悲慟反應的獨特與 差異性。此外,過去文獻缺乏研究經歷失落後所產生的功能性失調或應對反應。因此, 本研究旨在探討新冠疫情下員工所經歷的非死亡性失落與其經歷的悲慟過程。此外,本 研究也旨在瞭解這些非死亡性失落將如何影響員工的身心健康,並試圖探索員工的失落 經驗與適應歷程。哀傷的雙軌模型為本研究的研究理論框架。這項質性研究將採用現象 學方法以深入瞭解員工在新冠疫情下的失落經驗。研究訪談將採半結構化方式並採用線 上方式來進行。研究將以立意取樣法招募至少六名目前或曾經在新加坡工作的馬來西亞 藉員工。訪談內容進行騰稿後將以解釋現象學分析法進行分析。這項研究有望更好地瞭 解員工在新冠疫情下所經歷的多重非死亡失落和其悲慟歷程並試圖探討他們的適應和 經驗反應。最後,這項研究旨在協助實務工作者為在新冠疫情期間員工所經歷的非死亡 性失落制定合適的心理干預策略。

關鍵詞:非死亡性失落,悲恸反應,員工,新冠疫情

¹馬來西亞工藝大學社會科學與人文學部教育學院輔導與諮商學系 ²馬來西亞工藝大學社會科學與人文學部教育學院輔導與諮商學系 * 通訊作者電子信箱: joosiang@utm.my

Malaysian Workers' Non-Death Loss Experience in the Midst of Covid-19 Pandemic

Kenny Wei-Yi Chin¹ *Joo-Siang Tan²

Abstract

Loss is a common experience that everyone goes through in life. It does not solely encompassdeaths and separations from our loved ones but also involve different forms of nondeath losses. The Covid-19 pandemic has resulted in pervasive loss to global nations and greatly influenced many aspects of working adults' life. Preventive measures to curb the Covid-19 pandemic have caused working adults to experience multiple non-death loss including loss of financial security, social support and social identity. These multiple nondeath loss has negative impact on their overall wellbeing as many are forced to make adjustments while grieving over the loss. The extended lockdown measures have caused many to grief for the anticipated losses that is approaching. Moreover, the prohibition of close social contact has further deteriorated the usual grieving process. Past literatures have shown that the grieving process between death and non-death loss is similar where both would lead to profound physical, emotional and psychological responses that require clinical attention and intervention. However, there is limited research on understanding the grief responses toward non-death loss due to the limited social awareness toward non-death loss. Furthermore, it is important not to pathologize the grieving responses but focus on exploring the idiosyncratic nature of the grief work in working adult group. Furthermore, there is a lack of emphasis in the adaptive responses to loss in grief literature to uncover more about the functional and dysfunctional reaction followed after experiencing loss. The purpose of this study is to explore the non-death loss and the grieving process experienced by working adults during the Covid-19 pandemic. This study aims to understand how multiple non-death loss affects working adults' physical and mental health as well as their adaptation and response to these losses. The Dual Process Model (DPM) of grief is employed as the theoretical framework in this study. This qualitative study endorses a phenomenological approach to obtain in-depth understanding of the participants' experiences. Semi-structured interviews will be conducted through online platforms. At least six Malaysian working adults that are currently or were once working in Singapore will be recruited purposively based on specific selection criteria. The interviews will be transcribed and analyzed using interpretative phenomenological analysis approach. This study is expected to provide a better understanding about the grieving processes that working adults undergo when facing non-death loss. The type of adaptive responses that were taken by them in response to the challenges in the midst of the Covid-19 pandemic will be explored. This research intends to assist practitioner in developing suitable intervention strategies for working adults who are suffering from non-death loss during this pandemic.

Keywords: non-death loss, grief, adaptive responses, working adult, Covid-19 pandemic

¹ Guidance and Counselling Program, School of Education, Faculty of Social Sciences and Humanities, Universiti Teknologi Malaysia, Malaysia

² Guidance and Counselling Program, School of Education, Faculty of Social Sciences and Humanities, Universiti Teknologi Malaysia, Malaysia

* Corresponding author's email: joosiang@utm.my