The Rippling Effect of COVID-19 in Malaysia: Now and Then



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1 Introduction

The spread of the COVID-19 pandemic has had a significant socio-economic impact on the lives of people over the past years. Since its onset, the COVID-19 pandemic has caused much havoc to many countries. Social and physical distancing measures and lockdowns of businesses, schools and overall social life became commonplace to curtail the spread of the disease. It also put considerable pressure on healthcare systems worldwide. Malaysians also experienced the same trend, as the pandemic ravaged its economy, affected its healthcare systems and laid bare the vulnerability of many families in the face of the unprecedented crisis.

Malaysia has undergone major waves of COVID-19 outbreaks and months of lockdowns since the announcement of the pandemic in March 2020. Emotional stories of families with depleted savings and surviving on one meal a day also made the news since the pandemic emerged. Police statistics have also showed that suicides went up during the pandemic (Idrus, 2021). Women, alongside the poor, elderly, disabled and migrant populations, have particularly borne the brunt of the fallout from the pandemic. Other vulnerable groups, economically at risk prior to the crisis, include those with lower levels of education and self-employed. Malaysia is currently on the path of challenging recovery, with the impact of COVID-19 remaining a major concern for the country.

The chapter provides an insight into how the pandemic ravaged Malaysia and the interventions the government made to redress the situation. The analysis is made from secondary materials sourced from government statements, policy briefs, media

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reports and other COVID-19 materials. These were complemented with personal observations and discussions with noted authorities.

It begins with a background on the COVID-19 situation in Malaysia. It then explores recent studies done on Covid. The methodology used by the chapter is then described in detail. The chapter analyses the impact of the pandemic in the following areas: health, economy, socio-economic and humanitarian aspects that are important to the country.

2 The Emergence of COVID-19 in Malaysia

Malaysia was quite swift in terms of its response after it recorded its first case of COVID-19 on 25 January 2020. It subsequently introduced social and public health measures, including a nationwide Movement Control Order (MCO) on 18 March 2020. A special session of the National Security Council was convened daily to monitor the COVID-19 situation, and briefings by the Director-General of Health kept Malaysians informed on infection clusters, recoveries and updates on the pandemic response.

The Malaysian government implemented different levels of MCO to effectively control the COVID-19 situation, ranging from high-risk to low-risk areas.

- Phase 1—MCO from 18 March 2020 till 3 May 2020.
- Phase 2—Conditional MCO (CMCO) from 4 May 2020 till 9 June 2020.
- Phase 3—Recovery MCO (RMCO) from 10 June 2020 till 31 December 2020.
- Phase 4—CMCO in the areas with high COVID-19 cases from 14 December 2020 till 31 December 2020.
- Phase 5—RMCO nationwide from 1 January 2021 till 31 March 2021; certain states with high COVID-19 cases were placed under MCO 2.0 from 13 January 2021 till 4 March 2021.
- Recent measures—currently, the borders have been opened and major restrictions have been lifted.

3 General Situation

Malaysia reopened its borders to international tourists on 1 April 2022. It has also lifted the mandatory use of masks, effective 1 May 2022. These are part of measures by the government to ease the restrictions imposed since the emergence of the pandemic. In easing the restrictions, the government explained that the reported cases have gone down considerably. Besides, 81.3% of Malaysia's total population had been fully vaccinated, whilst 68% of the adult population has taken a booster dose. In addition, 42% of the children population (aged 5–12) has completed at least one dose and nearly 20% has completed two doses.

The impact of COVID-19 on the world economy as a whole has been devastating. According to the Organisation for Economic Co-operation and Development (OECD), the COVID-19 pandemic has led to social distress around the world, as well as huge economic disruption (OECD, 2020). The massive spread of the virus in Malaysia significantly disrupted social and business activities. It affected people's incomes and caused economic chaos in the country. To minimise the economic impact of this pandemic, Malaysia took several actions to recover the economy. At the end of February 2020, the government announced a RM20 billion financial stimulus package intended to mitigate the impact of COVID-19. This was based on three major strategies, namely (1) lessen the effect of COVID-19, (2) people-based economic growth and (3) encourage quality investments (The Star, 2020a).

The swift measures the government put in place in response to the pandemic also attracted domestic and international praise. The country's anti-Covid blueprint revolved around three pivotal tenets: encompassing the enhancement of screening capabilities and hospitalisation capacity in the public health sector; the adoption of contact tracing technologies aimed at bringing disease clusters under control; as well as the launch of an effective communication strategy to present new Standard Operating Procedures (SOP) and win the support of the population. Other than the loss of hundreds of lives, this pandemic paralysed the country in many aspects. On top of that, the closure of Malaysia's borders also dealt a huge blow to the country's tourism industry, which is the third-largest contributor to Malaysia's gross domestic product (GDP), after the manufacturing and commodities sectors.

4 Literature Review

Numerous studies have been conducted on COVID-19 globally since its inception. Cases involving Malaysia have also been covered extensively too. For instance, Amaran et al. (2021) looked at the early response by the Malaysian authorities to the pandemic. They chronicled the series of events from the time the pandemic got to Malaysia and described the experiences of the Malaysian healthcare system in combatting the pandemic. Meanwhile, Vicknasingam et al. (2021) evaluated how service providers and recipients were adapting and coping during the initial periods of the COVID-19 response. Nga et al. (2021), on the other hand, also examined how policies enacted during the COVID-19 pandemic affected unemployment in Malaysia by focussing on the situation in Sabah, a state in Malaysia. Others such as Cheng (2022) sought to capture the socio-economic impacts of COVID in Malaysia. In effect, numerous studies have been conducted on the pandemic and its impact on Malaysia within particular timeframes and using different methodologies.

5 Methodology

This chapter aims to contribute to the body of knowledge by bringing us up to date on how the pandemic has panned out and its impact on Malaysian society. It uses secondary data in the light of the many studies, which have been done on the subject matter. With a lot of studies done on Covid, the authors felt such information cannot be ignored and therefore ensured these outcomes were also examined in undertaking this project.

A document review was performed to identify publicly available information on the measures employed in Malaysia to address the COVID-19 pandemic. Government and the health ministry websites were also searched for relevant information/documents containing COVID-19 measures/strategies and case occurrence in Malaysia. Besides, WHO global research on the coronavirus disease database (WHO COVID-19 database) and PubMed (https://pubmed.ncbi.nlm.nih.gov/) were searched for relevant literature.

6 Malaysia's Healthcare System

One critical area that has borne the brunt of the pandemic has been Malaysia's healthcare system (KPMG, 2020). The Malaysian government took the responsibility of ensuring that its healthcare system can manage a public health response to the pandemic right from the time that COVID-19 emerged. The National Crisis Preparedness and Response Centre (CPRC) under the Ministry of Health (MOH), Malaysia, was activated on 5 January 2020 in response to that. The centre was established with the aim of minimising the potential impact of the epidemic on healthcare systems, social services and economic activity. These levels of engagements showed the level of preparedness that was put in Malaysia.

Several reasons may contribute to the overall level of preparedness of Malaysia to mitigate and manage the outbreak. One main reason is the structure of centralised commanding authorities at different levels that helped in the implementation of coherent strategies involving many stakeholders. Furthermore, effective communications on decisions undertaken by the government and awareness campaigns made public compliance possible.

Malaysia experienced intense emotions at the beginning of the pandemic, with great uncertainty regarding the pandemic's outcome, as the world saw a frighteningly high COVID-19 mortality (Amaran et al. 2021). However, in view of the fact that Malaysia had learnt from its previous experiences of managing infectious diseases such as Severe Acute Respiratory Syndrome (SARS), Pandemic Influenza 2009, Middle-East Respiratory Syndrome (MERS-CoV), Avian Influenza, Zika and Nipah virus, it was able to have a speedy primary healthcare response. The learning experiences from these outbreaks have strengthened the core public health functions as well as many key healthcare systems areas such as the health workforce, service

delivery, information and technology system, as well as leadership and governance to support a more resilient healthcare system.

In addition, historically, the foundation of the Malaysian healthcare system has created a widespread and integrated public healthcare delivery system, distributed across the country including remote and rural areas that is universal and low cost. Malaysia has a dual public–private healthcare system in which the provision of public health services allows for the mobilisation of appropriate resources from national to state levels to support response at the facilities. This coordination highlights the importance of having a public healthcare system supported by government during a public health crisis, at least in Malaysia. In order to manage the increasing number of COVID-19 cases in Malaysia, rigorous and routine screening efforts and disinfection process in public or overcrowded places were important to control the spread of the infection too. The well-planned vaccination exercises were also quite instrumental in ensuring an effective way to reduce the effect of the pandemic on the people.

7 Pandemic Misinformation

In spite of the major efforts made in the vaccination exercise, there were some people who felt at odds with or were quite hesitant to undergo the vaccination. A key element in the rise of vaccine hesitancy and refusal, therefore, was the widespread misinformation and disinformation that went with that. This led to a widening trust deficit on vaccination, resulting in a decrease in vaccine confidence. As a result, the need for more active rebuttals to anti-vaccine messaging so as to reduce vaccine hesitancy and refusal in order to maintain high vaccination rates became necessary. The MOH and other relevant agencies in Malaysia such as National Security Council and Malaysian Communications and Multimedia Commission, therefore, utilised both conventional and digital media to communicate with the public to allay the fears of the public.

Despite the measures that the allied agencies took to dispel the wrong impressions of vaccinations, rumours and fake news were still circulated privately on social media, such as WhatsApp or Facebook posts, that required clarification from MOH and these agencies. The need, therefore, arose for a consistent and standardised presentation of information to the public to avoid any misinformation and also to ensure public confidence in the government's handling of the pandemic.

8 The Impact of Covid on Health Workers

The COVID-19 pandemic has tested the medical fraternity in Malaysia as it posed quite a serious challenge to those involved in handling it. The uncertainty of COVID-19, high risk exposure and other emerging issues made the situation quite

a challenging one for the healthcare team. Many health workers suffered tremendously at the beginning of the pandemic. A total cumulative number of 224 health workers were diagnosed with COVID-19 as of 11 April 2020 (Nienhaus & Hod, 2020). Incidentally, 80% of these cases were community acquired. They got infected whilst attending religious and social gatherings. They, in turn, infected their colleagues when they started working at their various health facilities. Globally, surveillance data reported to World Health Organization (WHO) between January 2020 and May 2021 showed 6643 health and care workers died as a result of the pandemic (reliefweb, 2021). This is the officially reported figure; however, indications are that this could even be higher since the reporting processes are somewhat different in some countries.

Apart from the infection rate, which was quite noticeable amongst Malaysian health workers, many were also deemed to have experienced burnout. Roslan et al. (2021) attribute this to the high demands that came from their jobs. In order to provide care for the growing number of COVID-19 cases, healthcare professionals had to work with a great deal of pressure due to their increasing workload. They were also exposed to risk of getting infected by COVID-19 patients. Aside from that, there were inadequate personal protection equipment (PPE) for them and, more particularly, they also had less time to rest and spend with their families. Exhaustion appeared to be the major issue, whilst many others also reported of physical, occupational, psychological, and socially related negative impacts emanating from burnout.

Healthcare workers also experienced discomforting situations in view of their risk attached to their role as COVID-19 frontline health workers. The risky nature of their work compounded their stress levels and also led to severe depression among some of them. In order to reduce the high level of burnout of healthcare workers at their workplace, strategies such as increasing the availability of PPE and giving psychological support to them were made. Some also had their workload reduced. In addition, individual and organisational wellness strategies were implemented for healthcare providers throughout the country.

9 The Impact of Covid on Health Tourism

Given Malaysia's position as a fast-growing competitor in the global health and medical tourism sector, the advent of COVID-19 was indeed quite devastating for the country. In the years before COVID-19, this sector had shown a great potential as a major foreign exchange earner for the country. As a result, the government had taken a series of proactive measures to enhance Malaysia as a preferred health tourism destination. Health tourism in Malaysia consists of two main categories, which are medical tourism and wellness programme. Patients often opt for medical treatments in one of the country's internationally recognised hospitals and stay on during the convalescence or recovery period. Others come for a holiday by exploring the various forms of wellness programmes that are available in Malaysia.

Competitive medical fees and modern medical facilities remain two vital factors that make Malaysia a popular destination among health tourists. It offers a wide choice of state-of-the-art private medical centres boasting an impressive array of sophisticated diagnosis, therapeutic and in-patient facilities. These establishments are well-equipped and staffed to ensure the highest level of professionalism, safety and care to patients. Most private medical centres have certifications for internationally recognised quality standards or have been accredited by the Malaysian Society for Quality of Health.

Such is the state in which the government holds the health and medical tourism sector that when COVID-19 emerged, it clearly derailed the ambitions and set targets made in connection with the potential of the sector. Before COVID-19, the MOH set up a Corporate Policy and Health Industry Division to promote medical tourism and related healthcare products including traditional medicine, etc. The Ministry's promotional efforts are more focused with the support from relevant government agencies and the private sector.

In 2019, health tourism in Malaysia achieved more than MYR1.7 billion in hospital receipts, resulting in total economic impact of MYR7 billion. The pandemic disrupted several of the nation's key economic sectors including healthcare travel, which saw an impact of over 50% in revenue reduction. However, the sector is expected to pick up shortly by playing to its strengths and ensuring industry resilience through digital services and platforms to address the needs of healthcare travellers. It is predicted and expected that the numbers might return to at least RM1 billion by 2022.

10 The Impact of Covid on the Economy

Malaysia remains an attractive investment destination, with the availability of well-educated labour, investor-friendly policies and incentives, well-developed infrastructure and a preferred gateway to the Southeast Asia market. In addition, Malaysia's technologically inclined economy has been quite robust until the pandemic set in. The pandemic has derailed the huge achievements Malaysia was set to achieve. The economy was suffered greatly during the implementation of the first MCO. For the first quarter of 2021 when the second MCO was implemented, the country's GDP contracted by 0.5%, which is significantly lower than that of 2020 (The Malaysianreserve.com, 2021).

The movement restrictions caused disruptions to workflow and service delivery, especially to vulnerable groups. Adapting to new ways of remote working also proved quite challenging for some staff, and many reported working longer hours to accommodate the needs of clients. Furthermore, workers were also expected to frequently participate in virtual meetings and discussions. The lockdown also disrupted family life and daily routines, with severe consequences for children's welfare and well-being. Measures to prevent transmission of COVID-19 clearly exacerbated existing vulnerabilities.

The sudden enforcement of the MCO put various sectors of the economy in jeopardy. The direct damage caused by the virus can be seen in the tourism and travel industries, manufacturing, construction, mining and agriculture, with many workers being laid off and others being placed on unpaid leave (Murugiah, 2020). The tourism industry suffered an estimated loss of RM3.37 billion in the first 2 months of the year (Dzulkifly, 2020). The forced closure of small businesses, mainly the small- and medium-sized enterprises (SMEs) and services, also led to shutdowns and many losing their jobs, as well as individuals going bankrupt (Cheng, 2020).

Malaysia's government responded by promptly introducing the Prihatin Rakyat Economic Stimulus Package or PRIHATIN. This initiative was meant to ensure a level of support for businesses and strengthening the economy. In addition to enhancing the support for households and businesses, various programmes were also initiated, such as the Wage Subsidy Programme, moratorium on loan repayments, waivers or discounts to Small and Medium Scale Enterprises (SMEs) and a discount scheme on monthly electricity bills for 6 months, commencing 1 April 2020.

11 The Impact of Covid on the Lives of Malaysians

The real impact on the economy and people's lives, however, has been quite immense. The length of 'stay-at-home' policy and the duration of the MCO created a lot of difficulties for many people. Jobs have since been lost, workers have been retrenched or had their pay cut and aside that, many businesses have had to close. COVID-19 has also shown deep societal differences. Existing inequalities and inequities deepened, impacting hard on vulnerable groups. The pandemic impacted seriously on disadvantaged communities and different income groups quite differently. Following the first reported cases, the situation was compounded by some groups such as migrants or homeless people with poor living conditions who were living in overcrowding environments (Kluge et al., 2020).

There is every indication that the health and economic impacts of the virus are being borne disproportionately. People without access to running water, as well as refugees, migrants and displaced people, reportedly suffered disproportionately both from the pandemic and its aftermath, due to limited movement, fewer employment opportunities, and other Covid-induced problems. Signs of economic distress started appearing in neighbourhoods across Kuala Lumpur, the capital, and other Malaysian cities in the course of the pandemic, with people putting up white flags outside their houses to call for assistance either for food or for other pressing issues. The flags, sometimes little more than T-shirts or strips of cloth, were a cry for help from mostly low-income families who were financially affected by the second lengthy coronavirus lockdown. The campaign, shared on social media as #benderaputih (white flag), was a way for families to appeal for food, work or other essentials as many businesses closed and joblessness rose.

Non-governmental organisations (NGOs) actively helped those who were affected by this pandemic. They provided food, shelter for the homeless, and even gave out money to help those in need. Some NGOs also helped by providing protective masks, disinfection chambers (The Star, 2020b), whilst others helped to educate citizens on COVID-19 (The Star, 2020c). Several NGOs and public figures have helped to prepare PPE for medical frontliners. For example, several Malaysian fashion designers associated with the Malaysian Official Designers Association (MODA) have produced PPE for local medical staff (Cheong, 2020). Volunteer tailors also helped to prepare PPE for frontline staff.

Malaysia's repeated lockdowns, meanwhile, lowered demand for labour, with the number of registered jobs dropping by 130,000 in just the first quarter of the year, according to government data from the Department of Statistics Malaysia (2022). Suicide rates also increased significantly during the first 5 months of 2021, which was partly attributed to the pandemic (Idrus, 2021). According to Idrus, the phenomenon of suicide showed that people were in critical conditions following the pandemic.

Like elsewhere, the lockdown in Malaysia disrupted family life and daily routines, with severe consequences for children's welfare and well-being. Measures to prevent the transmission of COVID-19 exacerbated existing vulnerabilities and also took a toll on families. Other vulnerable groups such as migrants or homeless people with poor living conditions became increasingly susceptible towards the spread of the disease (Kluge et al., 2020). Meanwhile, the execution of institutional quarantining of people who have been in contact with confirmed or probable cases overwhelmed the system until the authorities realised that self-quarantine could be a more realistic measure (Ebrahim et al., 2020).

12 The Impact of Covid on Education

School closures affected pre-schooling, lower primary schools, secondary schools and universities. Online schooling became the norm, which proved to be a new experience for many families and their children. Malaysia, like elsewhere, turned to technology as an alternative to in-school instruction. Although there was relative success in the transition to remote learning in general in urban areas, it did not turn out to be the panacea for children in rural areas and remote indigenous areas during the time of the COVID-19 crisis. Some parents reportedly found online schooling challenging or tedious and were unable to support their children to learn from home. Parents with limited education, especially, struggled to supervise and assist students. There were issues too in some rural areas where people lacked the use of smartphones, laptops, tablets or access to the internet.

The pandemic's impact on higher education was also quite paramount. Although higher education institutions were quick to replace face-to-face lectures with online learning, these closures affected learning and examinations as well as the safety and legal status of international students in the country.

13 The Supportive Role of Business During the Pandemic

Local companies stepped up their efforts to assist communities following the outbreak of the pandemic. They contributed to the Food Aid Foundation to help feed people who were suffering from severe hunger. Others provided gloves and sanitisers to both the public and healthcare workers. Alongside that, the companies also contributed to the government's COVID-19 fund, which was aimed at supporting government efforts in easing the burden faced by the pandemic.

Support from companies covered many areas. For instance, the Axiata Group launched a RM150 million COVID-19 programme to give immediate assistance to micro-SMEs in financial difficulties. The Sunway Group also provided more than RM34 million to help Malaysians cope with the pandemic. As part of its Corporate Social Responsibility (CSR) initiatives, UDA Holdings Berhad contributed goods, equipment and electronics worth more than RM100,000 to Sungai Buloh Hospital to care for COVID-19 patients under its watch. Petronas, an oil and gas company in Malaysia, contributed RM20 million worth of medical equipment and supplies, including ventilators, hospital beds and mattresses, thermal imaging cameras, digital thermometers, virus test kits and PPE, to healthcare frontline workers in Malaysia, as well as hand sanitisers to senior citizens at selected homes.

Many companies have proactively engaged in various CSR activities, particularly those that can offer immediate help and assistance to the fight against the virus. Undoubtedly, the current pandemic offers a wide range of significant opportunities to those with a more mindful and acumen approach to CSR. Some of these companies have maintained their commitment to CSR throughout the pandemic as they saw this as an opportunity to display their citizenry. The businesses invested in CSR to achieve a meaningful engagement with society at a crucial period of the pandemic. As often the case, moral obligation and inter-industry collaboration are key solutions driving supportive organisational level responses to global health crises. Besides, since businesses are an integral part of society, it is also their responsibility to ensure that they take care of society in difficult times. These philanthropic CSR actions have further confirmed that business and society are intertwined (McLennan & Banks, 2019).

During crises, such as the pandemic for instance, society and local communities have emergent needs and require prompt assistance for a full recovery. Thus, companies with the capacity and resources to mobilise promptly and systemically can be especially effective in executing disaster relief and recovery management (Ballesteros et al., 2017).

COVID-19 pandemic has, indeed, exposed and exacerbated some ingrained social issues, such as poverty and inequality. CSR contributions have been quite remarkable and have helped such vulnerable people to survive in the face of adversity. Corporate philanthropy has been visible everywhere in Malaysia. Although companies also face their own financial challenges, they have shown their concerns and continue to fulfil their corporate citizenship. Through the

implementation of CSR initiatives, companies have highlighted their significance in society and also helped to ease the government's burdens.

14 The New Norm for Malaysians

The recent pandemic has changed the way people live in Malaysia. It led to social distancing measures, the crave for personalised space, small group-based activities as well as an increase in the use of digital platforms in the country. People's lives remained on hold for a quite a long time as the disease held out. This disease has altered and even devastated many facets of people's lives. Now, Malaysians would need to turn the current situation into real opportunities to do things that can usher them into the future with renewed hope.

15 Overcoming the Economic Downturn due to COVID-19

Malaysia's Budget 2022 is about bolstering economic recovery by building resilience and driving reform after the strict lockdown measures that were used to curb COVID-19. Themed as 'Malaysian Family, Prosperous and Peaceful', it has a focus on job creation initiatives to support many Malaysians to transition back into the workforce and also to assist businesses to recruit the people they need to support their recovery.

To minimise the impact of the COVID-19 pandemic on businesses, several actions to restore business capabilities including access to financing, driving strategic investments and reviving targeted sectors are also expected to be rolled out with a 40-billion-ringgit package. This includes direct loans, financing guarantees and equity-based schemes. The aim is to benefit all businesses regardless of their size. Meanwhile, a total of 1.6 billion ringgits has been provided to drive economic recovery in the tourism sector, which has been severely affected by the pandemic. Initiatives in the budget include wage subsidy, financing, special assistance and maintenance of tourism infrastructure.

Despite these extraordinary challenges that the pandemic brought along, there are also opportunities to drive positive change through these difficult times (KPMG, 2020). New ways of doing business and diversifying the economy are highly required by embracing technological advances and digitalisation of business. This pandemic has created opportunities too for Malaysian researchers to play their part by developing different technologies to help Malaysians facing the pandemic. Examples of these developments include COVID-19 rapid test kits (Gomes, 2020), creation of face shields using 3D printing, laser cutting or DIY builds (Tariq, 2020) and manufacture of sanitizing tunnels (Mohamad, 2020). All of these creative ideas show that Malaysians are acting together to battle against COVID-19.

The pandemic has precipitated both comprehensive strategic reviews and the use of every investment lever by companies to position themselves for a reshaped competitive landscape. The movement restriction orders and the aggressive screening exercises have given the much needed hope to Malaysia in fighting the COVID-19 pandemic.

In the immediate term, protecting jobs and workers has to be at the core of the crisis response. Immediate action is also needed to ensure that people can effectively access healthcare whilst social protection should be a central element of the immediate stimulus package. An employment strategy for the medium- to long-term recovery of jobs and incomes would also be needed. Addressing the needs of the most vulnerable groups should remain a major priority too, with particular focus on informal and non-standard workers. Pre-existing inequalities and discrimination have exacerbated the vulnerabilities of these groups, which has been compounded by the impact of COVID-19.

Malaysia's post-pandemic recovery phase is also expected to work the accomplishment of productive development strategies, that is, to bring the potential of green economy solutions, e-commerce, the digital economy and the paid care economy into sharper focus. These potentials should be identified and developed in the longer term. Interestingly, Malaysia has young people who are technologically savvy and innovative.

16 Conclusion

Malaysia has come a long way since the inception of COVID-19. It has endured a lot since. It is now on a path to recovery. As such, it has shown a keenness to support its businesses and people to have a renewed hope. To be able to better prepare for any future health and economic shocks of this nature, Malaysia needs to continue with enhancing its healthcare system and an economy that is stronger, greener and more resilient and a society that is inclusive. Support for new strategic sectors and business models would require attention to addressing underlying structural and institutional weaknesses, including improving the data monitoring system, simplifying bureaucratic processes, promoting social dialogue and addressing inequality and discrimination.

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