



TATACARA PENGENDALIAN PIAWAI KES KESEJAHTERAAN EMOSI DI UNIVERSITI MALAYA

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TATACARA PENGENDALIAN PIAWAI KES KESEJAHTERAAN EMOSI DI UNIVERSITI MALAYA

1. LATAR BELAKANG

Fenomena terhadap tahap kesejahteraan emosi pelajar di Universiti Malaya sejak kebelakangan ini didapati semakin membimbangkan. Hal ini dibuktikan melalui kes yang telah dikesan hasil daripada sesi kaunseling individu dan kelompok yang telah dijalankan oleh Pegawai Psikologi ke atas mereka yang terlibat.

Saringan Minda Sihat yang dijalankan ke atas pelajar juga telah menunjukkan peningkatan kes kemurungan, kebimbangan dan tekanan emosi. Justeru, Tatacara Pengendalian Piawai Kes Kesejahteraan emosi di Universiti Malaya dirangka sebagai panduan kepada semua pihak yang berkaitan semasa mengendalikan kes kesejahteraan emosi yang berkenaan.

2. OBJEKTIF TATACARA PENGENDALIAN PIAWAI KES KESEJAHTERAAN EMOSI DI UNIVERSITI MALAYA

Prosedur ini bermatlamat untuk:

- i. Dijadikan sebagai makluman tentang peranan dan tanggungjawab pihak yang berkaitan semasa kes kesejahteraan emosi di Universiti Malaya.
- ii. Dijadikan garis panduan dan digunapakai oleh PTJ bagi menguruskan pelajar yang terlibat dengan kes kesejahteraan emosi di Universiti Malaya yang merangkumi kes kesejahteraan emosi secara menyeluruh. Bersama-sama ini juga dilampirkan tatacara pengendalian bagi kes seperti pecubaan bunuh diri dan histeria.

3. INTERVENSI BAGI KES KESEJAHTERAAN EMOSI BERPANDUKAN SARINGAN MINDA SIHAT *DASS-21 (DEPRESSION, ANXIETY, AND STRESS SCALES)*.

Seksyen Pengurusan Psikologi & Kaunseling menggunakan prosedur saringan minda sihat daripada *DASS-21* bagi kes yang melibatkan kesejahteraan emosi. *DASS-21* sebenarnya bukanlah merupakan alat klinikal dan ianya tidak dapat digunakan bagi mendiagnosis kes yang melibatkan kemurungan, kebimbangan (*anxiety*) dan tekanan emosi. *DASS-21* hanya digunakan bagi petunjuk status emosi seseorang yang berkaitan dengan kebimbangan, kemurungan dan tekanan emosi. Sekiranya seseorang itu mendapat markah yang tinggi terhadap mana-mana skala, penerokaan yang lebih lanjut akan dijalankan oleh kaunselor dan berkemungkinan dirujuk kepada pakar klinikal/psikiatrik.

SKALA *DASS-21*


SKOR SARINGAN				
SKALA	KEMURUNGAN	ANXIETY	STRES	STATUS
NORMAL	0-5	0-4	0-7	INTERVENSI UMUM
RINGAN	6-7	5-6	8-9	
SEDERHANA	8-10	7-8	10-13	
TERUK	11-14	9-10	14-17	INTERVENSI KHUSUS
SANGAT TERUK	15+	11+	18+	

INTERVENSI

SKALA	INTERVENSI
NORMAL	Keadaan emosi stabil, akan mendapat manfaat jika menjalani sesi kaunseling.
RINGAN DAN SEDERHANA	Perlu menjalani sesi kaunseling individu atau kaunseling kelompok.
TERUK DAN SANGAT TERUK	Perlu: <ol style="list-style-type: none"> 1. Menjalani sesi kaunseling ATAU <ol style="list-style-type: none"> 2. Kes dirujuk kepada pakar psikiatrik untuk diagnosis dan rawatan lanjut jika perlu.

4.0 PERINCIAN TATACARA PENGENDALIAN PIAWAI KES KESEJAHTERAAN EMOSI DI UNIVERSITI MALAYA

4.1 Tatacara Pengendalian Piawai – Kes Kesejahteraan emosi Di Universiti Malaya.

 UNIVERSITI MALAYA	Nama Dokumen	TATACARA PENGENDALIAN PIAWAI – KES KESEJAHTERAAN EMOSI DI UNIVERSITI MALAYA
<p>1.0 OBJEKTIF</p> <p>Prosedur ini disediakan untuk menerangkan proses pengendalian tatacara kes kesejahteraan emosi yang berlaku di Universiti Malaya.</p> <p>2.0 SKOP</p> <p>Prosedur ini digunapakai oleh PTj bagi menguruskan pelajar yang terlibat kes kesejahteraan emosi yang diadakan oleh PTj atau waris pelajar di Universiti Malaya termasuklah pelajar yang mendiami unit kediaman di luar kampus.</p> <p>3.0 TERMINOLOGI</p> <p>3.1 Kesejahteraan emosi - Kesejahteraan emosi oleh pihak Universiti Malaya bagi menggantikan kecelaruan mental atau penyakit mental yang individu sehingga menjadikan tingkahlaku, tumpuan, pertuturan, memori, atau persepsi mangsa menjadi terjejas. Ianya merupakan kebolehpayaan seseorang individu daripada berfungsi dengan sempurna dari sudut sosial, pembelajaran, pekerjaan mahu pun fungsi-fungsi lain di dalam kehidupan seharian.</p> <p>3.2 Intervensi - Proses memberi bantuan atau rawatan mencari jalan penyelesaiannya.</p> <p>3.3 Pelajar - Pelajar yang mengalami masalah/kes kesejahteraan emosi ialah pelajar yang berdaftar dan berstatus aktif. Mereka pelajar asasi, pelajar ijazah dasar dan pelajar ijazah lanjutan.</p> <p>3.4 Waris - Ibu bapa atau penjaga pelajar berkenaan.</p> <p>3.5 PTj - Pusat Tanggungjawab ke atas pelajar berkenaan berdaftar, termasuklah di Fakulti/Institut/Bahagian/Pusat/Kolej Kediaman.</p>		

3.6	KKP	- Klinik Kesihatan Pelajar Universiti Malaya.
3.7	Pegawai Perubatan	- Pegawai Perubatan yang merawat pelajar.
3.8	SPPsK, HEP	- Seksyen Pengurusan Psikologi & Kaunseling. Hal Ehwal Pelajar.
3.9	Staf PTj	Dekan/Timbangan Dekan/Ketua Jabatan/ Pensyarah/Pengetua/Penolong Pendaftar/Penolong Pegawai Tadbir/ Felo
3.10	Kolej Kediaman	- Pejabat Kolej Kediaman (Kediaman pelajar berkenaan).
3.11	Hospital/Klinik	- Hospital kerajaan/klinik kerajaan yang berhampiran dengan tempat kejadian.
3.12	Pegawai Pengiring	- Felo/staf PTj yang mengiringi pelajar semasa aktiviti di luar kawasan/luar kampus.
3.13	Pengetua	- Pengetua Kolej Kediaman Pelajar.
3.14	Pihak Keselamatan	- Pegawai Keselamatan, Penolong Pegawai Keselamatan atau Pengawal Keselamatan (pengawal yang bertugas di pos kawalan setiap pintu masuk ke Universiti Malaya).
3.15	Fail Khas	- Fail yang berstatus SULIT iaitu : i. Fail (KKP) ii. Fail Kes Kesejahteraan Mental (PTj) iii. Fail Kaunseling Individu [SULIT] (SPPsK)

4.0 TANGGUNGJAWAB

- 4.1 Staf PTj bertanggungjawab untuk:
- Memaklumkan kepada ketua PTj berkenaan;
 - Menghubungi KKP/SPPsK bagi kes yang berlaku di dalam kampus;
 - Menghubungi hospital/klinik bagi kes yang berlaku di luar kampus/kediaman unit luar kampus ;
 - Memaklumkan kepada SPPsK/waris pelajar berkenaan;
 - Memantau keadaan pelajar selepas rawatan sebagai langkah berjaga-jaga; dan;
 - Merekod kes pelajar ke dalam fail khas.
- 4.2 Staf KKP bertanggungjawab untuk:
- Menguruskan ambulans (jika perlu) ;
 - Memberikan rawatan kepada pelajar berkenaan;
 - Merujuk kes ke pihak SPPsK;
 - Merujuk kes ke pihak hospital;
 - Memantau keadaan pelajar selepas rawatan (jika perlu); dan
 - Merekod kes ke dalam fail khas.

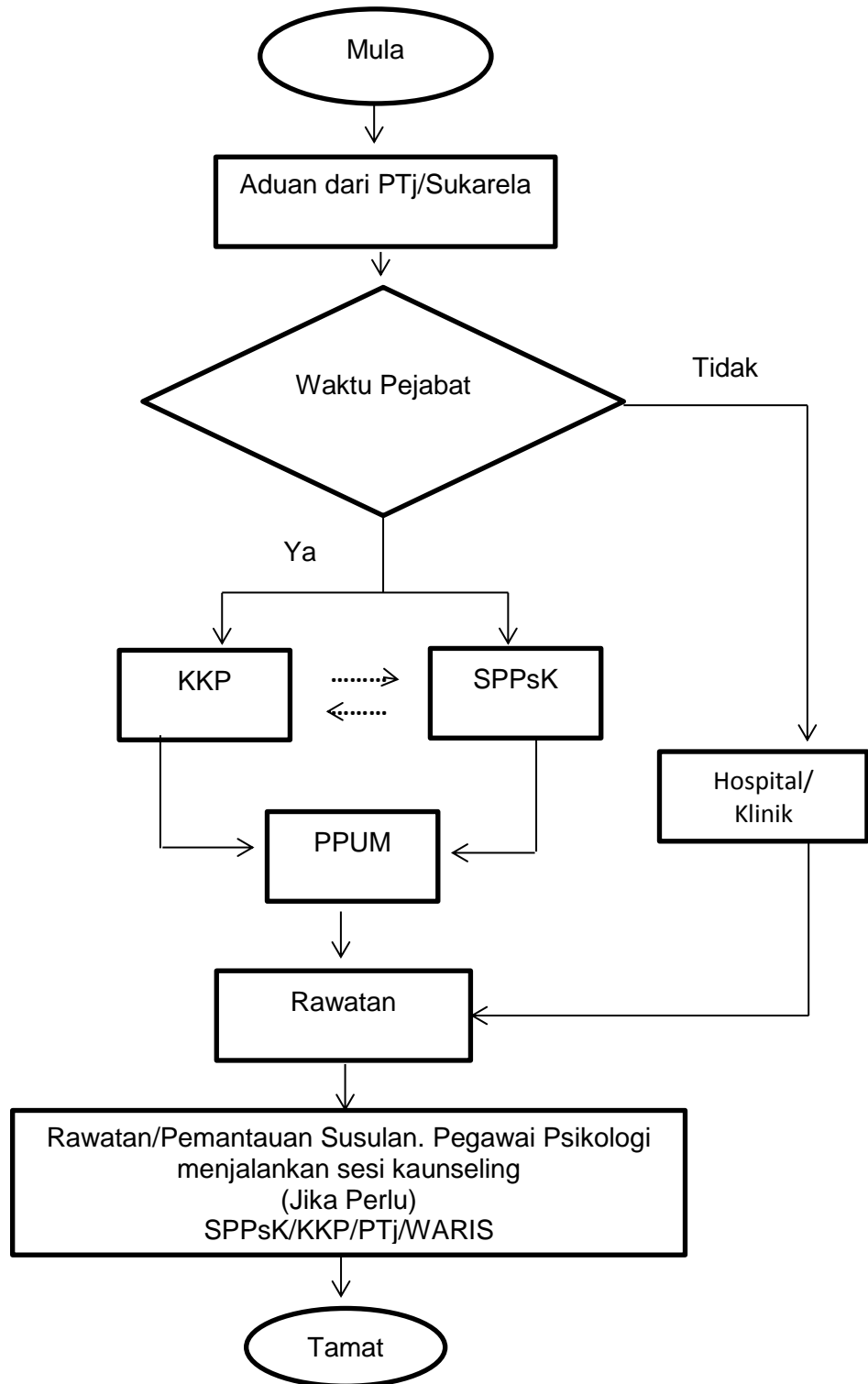
- 4.3 SPPsK bertanggungjawab untuk:
- Merujuk kes pelajar ke pihak KKP (jika perlu)
 - Mengadakan sesi kaunseling dan intervensi ke atas pelajar berkenaan;
 - Memantau keadaan pelajar selepas rawatan melalui sesi kaunseling individu; dan
 - Merekod kes pelajar ke dalam fail khas.

5.0 PROSEDUR TERPERINCI


<u>Bil</u>	<u>Tindakan</u>	<u>Pelaksana</u>
5.1	Pihak SPPsK/KKP menerima kes yang dirujuk daripada PTj atau secara sukarela.	Staf SPPsK/KKP
5.2	Pihak SPPsK memaklumkan kepada KKP atau sebaliknya.	Staf SPPsK/KKP
5.3	Menghantar pelajar ke KKP/PPUM. Sekiranya di luar kawasan, pelajar dihantar ke hospital/klinik berhampiran oleh pegawai pengiring.	Staf PTj/Pegawai Pengiring/ SPPsK
5.4	Pelajar mendapat rawatan di PPUM/ hospital berhampiran.	PPUM/Hospital/ Pelajar
5.5	Memaklumkan kepada pihak PTj/waris.	Staf PTj/SPPsK/Waris
5.6	Menguruskan rawatan dan memantau keadaan pelajar selepas rawatan. Pegawai Psikologi menjalankan sesi kaunseling (jika perlu).	Staf PTj/SPPsK/KKP/ Waris
5.7	Merekod kes pelajar di dalam fail.	Staf PTj/KKP/SPPsK



**CARTA ALIR TATACARA PENGENDALIAN PIAWAI KES KESEJAHTERAAN EMOSI
DI UNIVERSITI MALAYA**



4.2 Tatacara Pengendalian Piawai – Kes Percubaan Bunuh Diri Di Universiti Malaya.

 UNIVERSITI MALAYA	Nama Dokumen	TATACARA PENGENDALIAN PIAWAI – KES PERCUBAAN BUNUH DIRI DI UNIVERSITI MALAYA																											
<p>1.0 OBJEKTIF</p> <p>Prosedur ini disediakan untuk menerangkan proses pengendalian tatacara kes percubaan bunuh diri yang berlaku di Universiti Malaya.</p> <p>2.0 SKOP</p> <p>Prosedur ini digunakan oleh PTj bagi menguruskan pelajar yang terlibat dengan kes percubaan bunuh diri yang diadakan oleh PTj/waris pelajar.</p> <p>3.0 TERMINOLOGI</p> <table border="0" data-bbox="443 981 1439 1921"> <tr> <td style="padding-left: 40px;">3.1</td> <td>Bunuh Diri</td> <td>- Percubaan bunuh diri adalah tindakan untuk mengambil nyawa sendiri.</td> </tr> <tr> <td style="padding-left: 40px;">3.2</td> <td>Intervensi/ Pemulihan/ Rawatan</td> <td>- Proses memberi bantuan mencari jalan penyelesaian atau memberikan rawatan-</td> </tr> <tr> <td style="padding-left: 40px;">3.3</td> <td>Pelajar</td> <td>- Pelajar yang terlibat dan cuba untuk membunuh diri ialah pelajar yang berdaftar dan berstatus aktif. Mereka terdiri daripada pelajar asasi, pelajar ijazah dasar dan pelajar ijazah lanjutan.</td> </tr> <tr> <td style="padding-left: 40px;">3.4</td> <td>Waris</td> <td>- Ibu bapa atau penjaga pelajar berkenaan.</td> </tr> <tr> <td style="padding-left: 40px;">3.5</td> <td>Fakulti</td> <td>- Fakulti pembelajaran pelajar.</td> </tr> <tr> <td style="padding-left: 40px;">3.6</td> <td>PTj</td> <td>- Pusat Tanggungjawab (pelajar berkenaan) termasuk Fakulti/Institut/Bahagian/Pusat/ Kolej Kediaman.</td> </tr> <tr> <td style="padding-left: 40px;">3.7</td> <td>KKP</td> <td>- Klinik Kesihatan Pelajar Universiti Malaya.</td> </tr> <tr> <td style="padding-left: 40px;">3.8</td> <td>Pegawai Perubatan</td> <td>- Pegawai Perubatan yang merawat pelajar.</td> </tr> <tr> <td style="padding-left: 40px;">3.9</td> <td>SPPsK, HEP</td> <td>- Seksyen Pengurusan Psikologi & Kaunseling, Hal Ehwal Pelajar.</td> </tr> </table>			3.1	Bunuh Diri	- Percubaan bunuh diri adalah tindakan untuk mengambil nyawa sendiri.	3.2	Intervensi/ Pemulihan/ Rawatan	- Proses memberi bantuan mencari jalan penyelesaian atau memberikan rawatan-	3.3	Pelajar	- Pelajar yang terlibat dan cuba untuk membunuh diri ialah pelajar yang berdaftar dan berstatus aktif. Mereka terdiri daripada pelajar asasi, pelajar ijazah dasar dan pelajar ijazah lanjutan.	3.4	Waris	- Ibu bapa atau penjaga pelajar berkenaan.	3.5	Fakulti	- Fakulti pembelajaran pelajar.	3.6	PTj	- Pusat Tanggungjawab (pelajar berkenaan) termasuk Fakulti/Institut/Bahagian/Pusat/ Kolej Kediaman.	3.7	KKP	- Klinik Kesihatan Pelajar Universiti Malaya.	3.8	Pegawai Perubatan	- Pegawai Perubatan yang merawat pelajar.	3.9	SPPsK, HEP	- Seksyen Pengurusan Psikologi & Kaunseling, Hal Ehwal Pelajar.
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3.9	SPPsK, HEP	- Seksyen Pengurusan Psikologi & Kaunseling, Hal Ehwal Pelajar.																											

- | | | | |
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| 3.10 | Staf PTj | - | Dekan/Timbangan Dekan/Ketua Jabatan/Pensyarah/Pengetua/Penolong Pendaftar/ Penolong Pegawai Tadbir/Felo. |
| 3.11 | Kolej Kediaman | - | Pejabat Kolej Kediaman (Kediaman pelajar berkenaan). |
| 3.12 | Hospital/Klinik | - | Hospital kerajaan/klinik kerajaan yang berhampiran dengan tempat kejadian. |
| 3.13 | Pegawai Pengiring | - | Felo/Staf PTj/SPPsK yang mengiringi pelajar semasa aktiviti di luar kawasan/luar kampus. |
| 3.14 | Pihak Keselamatan | - | Pegawai Keselamatan, Penolong Pegawai Keselamatan atau Pengawal Keselamatan |
| 3.15 | Fail Khas | - | Fail yang berstatus SULIT iaitu :
i Fail (KKP)
ii Fail Kes Kesejahteraan Mental (PTj)
iii Fail Kaunseling Individu [SULIT] (SPPsK) |

4.0 TANGGUNGJAWAB

- 4.1 Staf PTj bertanggungjawab untuk:
- Memaklumkan kepada ketua PTj berkenaan;
 - Melaporkan kepada pihak keselamatan;
 - Menghubungi KKP/hospital dan menghantar ke PPUM/hospital.
 - Memaklumkan kepada PTj/SPPsK/Waris pelajar berkenaan;
 - Memantau keadaan pelajar selepas rawatan sebagai langkah berjaga-jaga; dan
 - Memaklumkan kepada Pihak Pengurusan Universiti; dan
 - Merekod kes pelajar ke dalam fail khas.
- 4.2 Staf KKP bertanggungjawab untuk:
- Menguruskan ambulans (jika perlu) ;
 - Memberikan rawatan kepada pelajar berkenaan (jika perlu); dan
 - Merekod kes ke dalam fail khas.
- 4.3 SPPsK bertanggungjawab untuk:
- Memantau dan mengadakan sesi kaunseling dan intervensi kepada pelajar berkenaan selepas rawatan (jika perlu); dan
 - Merekod kes pelajar ke dalam fail khas.
- 4.4 Pihak Keselamatan bertanggungjawab untuk:
- Mengendalikan kes semasa kejadian; dan
 - Merekod kes pelajar ke dalam fail berkenaan.

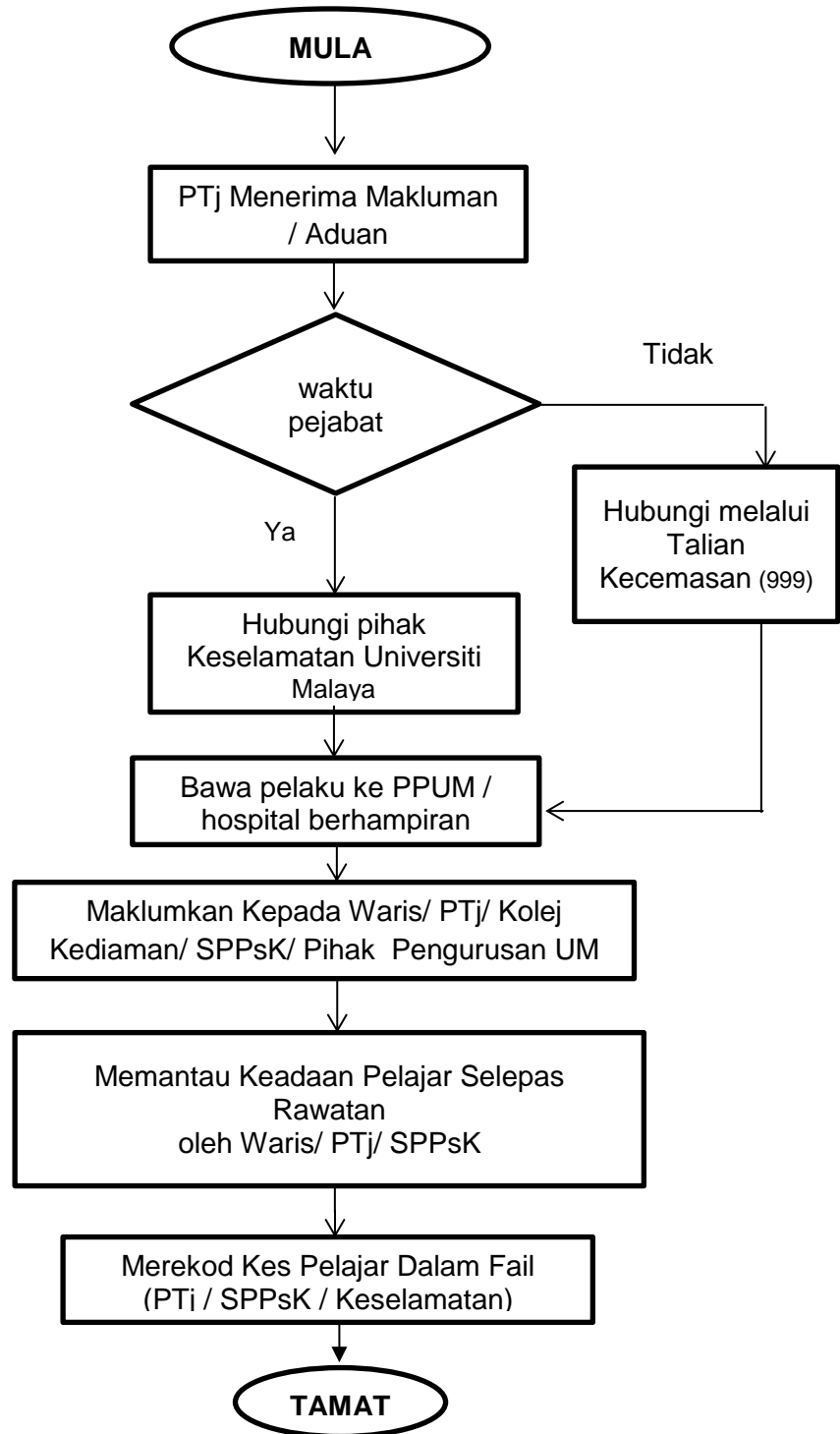


5.0 PROSEDUR TERPERINCI


<u>Bil</u>	<u>Tindakan</u>	<u>Pelaksana</u>
5.1	Pihak PTj menerima aduan/kes yang dirujuk dan mendapatkan maklumat pelajar dan lokasi kejadian.	Staf PTj
5.2	Menghubungi Pihak Keselamatan .	Staf PTj
5.3	Menghantar pelajar ke PPUM/hospital berhampiran.	Staf PTj
5.4	Memaklumkan kepada waris & pihak PTj & pihak SPPsK & pihak pengurusan universiti.	Staf PTj/SPPsK
5.5	Memantau keadaan pelajar selepas rawatan. Pegawai Psikologi menjalankan sesi kaunseling (jika perlu).	Staf PTj/Waris & SPPsK
5.6	Merekod kes pelajar di dalam fail khas.	Staf PTj/SPPsK/Pihak Keselamatan



**CARTA ALIR TATACARA PIAWAI PENGENDALIAN KES PERCUBAAN BUNUH
DIRI DI UNIVERSITI MALAYA**



4.3 Tatacara Pengendalian Piawai – Urusan Semasa Kes Histeria Di Universiti Malaya.

 UNIVERSITI MALAYA	Nama Dokumen	TATACARA PENGENDALIAN PIAWAI – URUSAN SEMASA KES HISTERIA DI UNIVERSITI MALAYA
<p>1.0 OBJEKTIF</p> <p>Prosedur ini disediakan untuk menerangkan proses pengendalian tatacara urusan semasa kes histeria yang berlaku di Universiti Malaya sama ada semasa waktu pejabat dan di luar waktu pejabat.</p> <p>2.0 SKOP</p> <p>Prosedur ini digunapakai oleh semua PTj bagi menguruskan pelajar semasa kes histeria yang diadakan oleh PTj di Universiti Malaya termasuk kediaman unit di luar kampus.</p> <p>3.0 TERMINOLOGI</p> <p>3.1 Histeria - Histeria merupakan satu bentuk kesejahteraan emosi psikogenik yang bercirikan simptom somatik atau fizikal seperti lumpuh, hilang daya penglihatan, hilang deria rasa, halusinasi, dan sering berada dalam keadaan mudah dipengaruhi. Kes yang sama ialah letusan emosi (contohnya jeritan dalam keadaan hilang ingatan) dan perlakuan yang keterlaluan kerana tidak dapat mengawal perasaan.</p> <p>3.2 Pelajar - Pelajar yang mengalami histeria. Berdaftar dan berstatus aktif termasuk pelajar asasi, ijazah dasar dan ijazah lanjutan.</p> <p>3.3 Waris - Ibu bapa atau penjaga pelajar berkenaan</p> <p>3.4 Fakulti - Fakulti pembelajaran pelajar</p> <p>3.5 PTj - Pusat Tanggungjawab (pelajar berkenaan) termasuk Fakulti/Institut/Bahagian/Pusat/ Kolej Kediaman</p> <p>3.6 KKP - Klinik Kesihatan Pelajar Universiti Malaya</p> <p>3.7 Pegawai Perubatan - Pegawai Perubatan yang merawat pelajar</p> <p>3.8 SPPsK, HEP - Seksyen Pengurusan Psikologi & Kaunseling, Bahagian Hal Ehwal Pelajar</p>		

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| 3.9 | Staf PTj | - Dekan/Timbangan Dekan/Ketua Jabatan/Pensyarah/Pengetua/Penolong Pendaftar/ Penolong Pegawai Tadbir/ Felo |
| 3.10 | Kolej Kediaman | - Pejabat Kolej Kediaman (Kediaman pelajar berkenaan) |
| 3.11 | Hospital/Klinik | - Hospital kerajaan/klinik kerajaan yang berhampiran dengan tempat kejadian. |
| 3.12 | Pegawai Pengiring | - Felo/staf PTj/pihak SPPSK yang mengiringi pelajar semasa aktiviti di luar kawasan. |
| 3.13 | Pihak Keselamatan | - Pegawai Keselamatan, Penolong Pegawai Keselamatan atau Pengawal Keselamatan |
| 3.14 | Fail Khas | - Fail yang berstatus SULIT iaitu :
i Fail (KKP)
ii Fail Kes Kesejahteraan Mental (PTj)
iii Fail Kaunseling Individu [SULIT] (SPPsK) |

4.0 TANGGUNGJAWAB

4.1 Staf PTj bertanggungjawab untuk:


- Menguruskan pelajar yang terlibat dalam kes histeria dan memaklumkan kepada ketua PTj yang terlibat;
- Mengasingkan pelajar daripada tempat kejadian ke bilik khas/tempat khas di PTj;
- Menenangkan pelajar (sementara) dan menghubungi serta menghantar pelajar tersebut ke KKP/hospital;
- Menghantar pelajar yang terlibat ke KKP/hospital (jika perlu);
- Memaklumkan kepada pihak PTj/SPPsK/Waris pelajar berkenaan;
- Memantau keadaan pelajar yang terlibat selepas rawatan sebagai langkah berjaga-jaga; dan
- Merekod kes pelajar tersebut ke dalam fail khas.

4.2 Staf KKP bertanggungjawab untuk:

- Menguruskan ambulans (jika perlu);
- Memberi rawatan kepada pelajar berkenaan; dan
- Merekod kes pelajar tersebut ke dalam fail khas.

4.3 SPPsK bertanggungjawab untuk:

- Memantau dan menjalankan sesi kaunseling dan intervensi kepada pelajar berkenaan selepas rawatan (jika perlu); dan
- Merekod kes pelajar tersebut ke dalam fail khas.

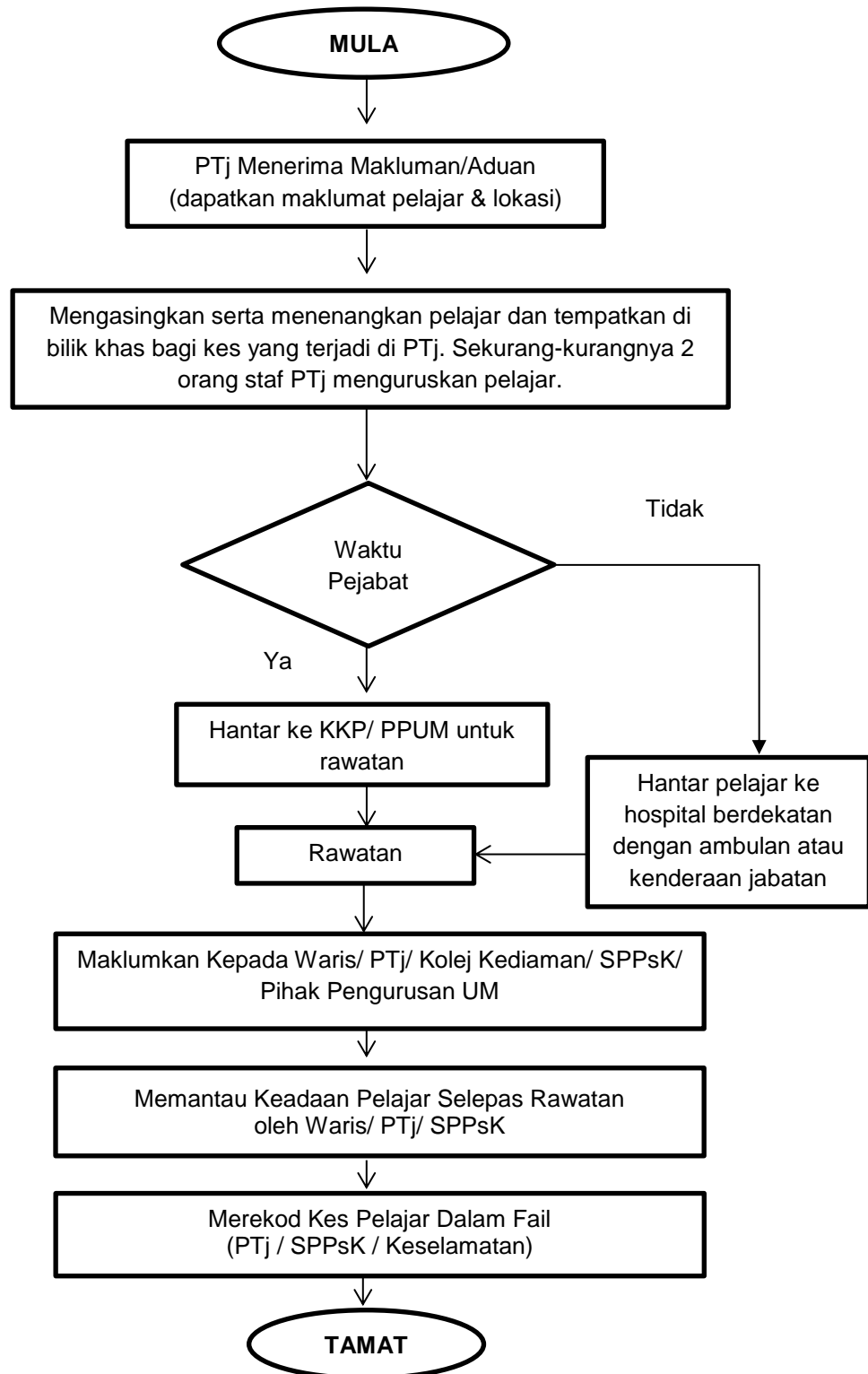
 UNIVERSITI MALAYA	Nama Dokumen	TATACARA PENGENDALIAN PIAWAI – URUSAN SEMASA KES HISTERIA DI UNIVERSITI MALAYA
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5.0 PROSEDUR TERPERINCI

<u>Bil</u>	<u>Tindakan</u>	<u>Pelaksana</u>
5.1	PTj menerima aduan/kes yang dirujuk dan mendapatkan maklumat pelajar serta lokasi kejadian.	Staf PTj
5.2	Mengasingkan dan menenangkan pelajar serta menempatkannya di bilik khas bagi kes yang terjadi di PTj. Sekurang-kurangnya 2 orang staf PTj dikehendaki menguruskan pelajar tersebut.	Staf PTj
5.3	Menghubungi pihak berkenaan sama ada pihak KKP/Pihak Keselamatan/SPPsK.	Staf PTj
5.4	Jika kejadian berlaku pada waktu pejabat: - Hantar pelajar terlibat ke KKP/PPUM/Hospital untuk mendapatkan rawatan.	Staf PTj
5.5	Jika kejadian berlaku di luar waktu pejabat: - Hantar pelajar ke PPUM/hospital yang berdekatan untuk mendapatkan rawatan.	Staf PTj
5.6	Pelajar yang terlibat menerima rawatan di KKP/PPUM/Hospital.	Staf KKP/ Hospital
5.7	Memaklumkan kepada pihak Waris/KKP/SPPsK/ PTj.	Staf KKP/ SPPsK/ PTj
5.8	Memantau pelajar yang terlibat selepas mendapatkan rawatan. Kemudian Pegawai Psikologi akan mengadakan sesi kaunseling (jika perlu).	Waris/ KKP/ SPPsK/ PTj
5.9	Merekod kes pelajar yang terlibat di dalam fail khas.	KKP/ SPPsK/ PTj



**CARTA ALIR TATACARA PENGENDALIAN PIAWAI – URUSAN SEMASA KES
HISTERIA DI UNIVERSITI MALAYA**



DISEDIAKAN OLEH:

Seksyen Pengurusan Psikologi & Kaunseling
Hal Ehwal Pelajar, Universiti Malaya

SEKALUNG PENGHARGAAN

Pengurusan Universiti Malaya
Bahagian Hal Ehwal Pelajar
Semua PTj Universiti Malaya
Seksyen Pengurusan Psikologi & Kaunseling, UM
Jabatan Perubatan dan Psikologi, PPUM
Jabatan Bahasa Melayu, Akademi Pengajian Melayu, Universiti Malaya

10 Ogos 2018/Pengurusan UM



STANDARD OPERATING PROCEDURE ON EMOTIONAL WELL-BEING AT UNIVERSITI MALAYA

1. BACKGROUND

From the individual and group counselling sessions which were conducted on Universiti Malaya students by the Psychology Officer, it was found that lately the level of emotional well-being of the students is of concern. A lot of students say that they are depressed, anxious and stressed and that they need help from the Psychology Officer and some of the cases have been referred to a psychiatrist.

Therefore, a Standard Operating Procedure for Emotional Wellbeing at Universiti Malaya is outlined as a guideline to all parties when handling related emotional well-being cases.

2. OBJECTIVES OF STANDARD OPERATING PROCEDURE FOR EMOTIONAL WELL-BEING CASES AT UNIVERSITI MALAYA

This procedure aims:

- i. To inform of the responsibility of the respective parties when handling emotional wellbeing cases at Universiti Malaya.
- ii. To be used by CoR in handling students that are involved with emotional well-being cases at Universiti Malaya, which includes the overall emotional well-being case and also guidelines on how to handle cases such as suicidal attempt and hysteria.

3. INTERVENTION FOR EMOTIONAL WELLBEING CASES BASED ON HEALTHY MIND SCREENER DASS-21 (DEPRESSION, ANXIETY, AND STRESS SCALES)

Psychology Management & Counseling Section uses healthy mind screener from DASS-21 when it involves emotional wellbeing cases. DASS-21 is not a clinical measurement tool and it cannot diagnose cases of depression, anxiety or stress. DASS-21 only gives a sign on a person's emotion related to depression, anxiety and stress. If a person scores high marks in any scales, a detailed process will be carried out by the counsellor and he/she might be referred to a clinical expert or psychiatrist.

DASS-21 SCALES


SCREENING SCORE				
SCALES	DEPRESSION	ANXIETY	STRESS	STATUS
NORMAL	0-5	0-4	0-7	GENERAL INTERVENTION
MILD	6-7	5-6	8-9	
MODERATE	8-10	7-8	10-13	
SEVERE	11-14	9-10	14-17	SPESIFIC INTERVENTION
EXTREMELY SEVERE	15+	11+	18+	

INTERVENTION

SCALES	INTERVENTION
NORMAL	Stable, will benefit from counselling session.
MILD AND MODERATE	Group/individual counselling session
SEVERE AND EXTREMELY SEVERE	Need to: 1. Go to counselling session OR 2. Refer to psychiatrist for diagnosis and further treatment if needed.

4.0 THE DETAILS OF STANDARD OPERATING PROCEDURE OF EMOTIONAL WELLBEING AT UNIVERSITI MALAYA

4.1 Standard Operating Procedure – Emotional Wellbeing Cases at Universiti Malaya.

 UNIVERSITI MALAYA	Document Name	STANDARD OPERATING PROCEDURE – EMOTIONAL WELL-BEING CASES AT UNIVERSITI MALAYA																								
1.0	OBJECTIVES This procedure is prepared to explain the standard operating procedure to observe when handling emotional wellbeing cases that occur at Universiti Malaya.																									
2.0	SCOPE This procedure is to be used by CoR to handle students at Universiti Malaya who are considered emotional wellbeing cases as reported by the CoR/student's next-of-kin, this includes students from the off campus unit.																									
3.0	TERMINOLOGY	<table border="0"> <tr> <td data-bbox="437 1055 501 1088">3.1</td> <td data-bbox="533 1055 644 1122">Emotional wellbeing</td> <td data-bbox="807 1055 1442 1323">- Emotional well-being is used to replace mental disorder by Universiti Malaya, it is a disorder or mental illness that disturbs a person and affects his/her behaviour, speech, memory, or perception. It disturbs an individual's capability to function in terms of social, learning, work and other functions in daily life.</td> </tr> <tr> <td data-bbox="437 1346 501 1379">3.2</td> <td data-bbox="533 1346 644 1379">Intervention</td> <td data-bbox="807 1346 1442 1413">- A process that helps in finding a solution (or treatment).</td> </tr> <tr> <td data-bbox="437 1435 501 1469">3.3</td> <td data-bbox="533 1435 644 1469">Student</td> <td data-bbox="807 1435 1442 1570">- A student that has emotional well-being. Registered and has an active status, this includes foundation, undergraduate and postgraduate students.</td> </tr> <tr> <td data-bbox="437 1592 501 1626">3.4</td> <td data-bbox="533 1592 644 1626">Next-of-kin</td> <td data-bbox="807 1592 1442 1626">- A student's parents or guardian.</td> </tr> <tr> <td data-bbox="437 1648 501 1682">3.5</td> <td data-bbox="533 1648 644 1682">CoR</td> <td data-bbox="807 1648 1442 1749">- Centre of Responsibility (of the student) which includes Faculty/ Institute/ Division/ Centre/ Residential College.</td> </tr> <tr> <td data-bbox="437 1771 501 1805">3.6</td> <td data-bbox="533 1771 644 1805">SHC</td> <td data-bbox="807 1771 1442 1805">- Universiti Malaya Student Health Clinic.</td> </tr> <tr> <td data-bbox="437 1827 501 1861">3.7</td> <td data-bbox="533 1827 644 1861">Medical Officer</td> <td data-bbox="807 1827 1442 1861">- A Medical Officer who treats the student.</td> </tr> <tr> <td data-bbox="437 1883 501 1917">3.8</td> <td data-bbox="533 1883 644 1917">PMCS, HEP</td> <td data-bbox="807 1883 1442 1962">- Psychology Management & Counselling Section, Student Affairs Division</td> </tr> </table>	3.1	Emotional wellbeing	- Emotional well-being is used to replace mental disorder by Universiti Malaya, it is a disorder or mental illness that disturbs a person and affects his/her behaviour, speech, memory, or perception. It disturbs an individual's capability to function in terms of social, learning, work and other functions in daily life.	3.2	Intervention	- A process that helps in finding a solution (or treatment).	3.3	Student	- A student that has emotional well-being. Registered and has an active status, this includes foundation, undergraduate and postgraduate students.	3.4	Next-of-kin	- A student's parents or guardian.	3.5	CoR	- Centre of Responsibility (of the student) which includes Faculty/ Institute/ Division/ Centre/ Residential College.	3.6	SHC	- Universiti Malaya Student Health Clinic.	3.7	Medical Officer	- A Medical Officer who treats the student.	3.8	PMCS, HEP	- Psychology Management & Counselling Section, Student Affairs Division
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3.9	Staff of CoR	Dean/ Deputy Dean/ Head of Department/ Lecturer/ Principal/ Assistant Registrar/ Assistant Administrative Officer/ Fellow
3.10	Residential College	- The office of the Residential College (the student's residence)
3.11	Hospital/Clinic	- The nearest government hospital / clinic to the place of incident.
3.12	Officer-in-charge	- Fellow/ staff of CoR who accompanies students when doing out station/off campus activity.
3.13	Principal	- The principal of the Residential College.
3.14	Security	- Security Officers, Assistant Security Officers, or Security Guards (guards who are on duty at guard posts at each entrance of University Malaya)
3.15	Special File	- PRIVATE & CONFIDENTIAL File: <ul style="list-style-type: none"> i. i - (SHC) File ii. Mental Wellbeing Case File (CoR) iii. Individual Counselling File [PRIVATE & CONFIDENTIAL] (PMCS)

4.0 RESPONSIBILITY

- 4.1 Staff of CoR is responsible to:
- inform the head of the respective CoR;
 - call SHC/ PMCS for cases on campus;
 - call hospital/ clinic for cases that occur off campus/ off campus residential units;
 - inform PMCS/ the student's next-of-kin;
 - monitor the student's condition after treatment as a precautionary measure; and;
 - record the student's case in the special file.
- 4.2 Staff of SHC is responsible to:
- manage the ambulance (if needed);
 - treat the student;
 - refer to PMCS;
 - refer to the hospital;
 - monitor the student's condition after treatment (if needed); and
 - record case in the special file.
- 4.3 PMCS is responsible to:
- refer the student's case to SHC (if needed)
 - conduct a counselling session and an intervention for the student;
 - monitor the student's condition after treatment through an individual counselling session; and
 - record the student's case in the special file.

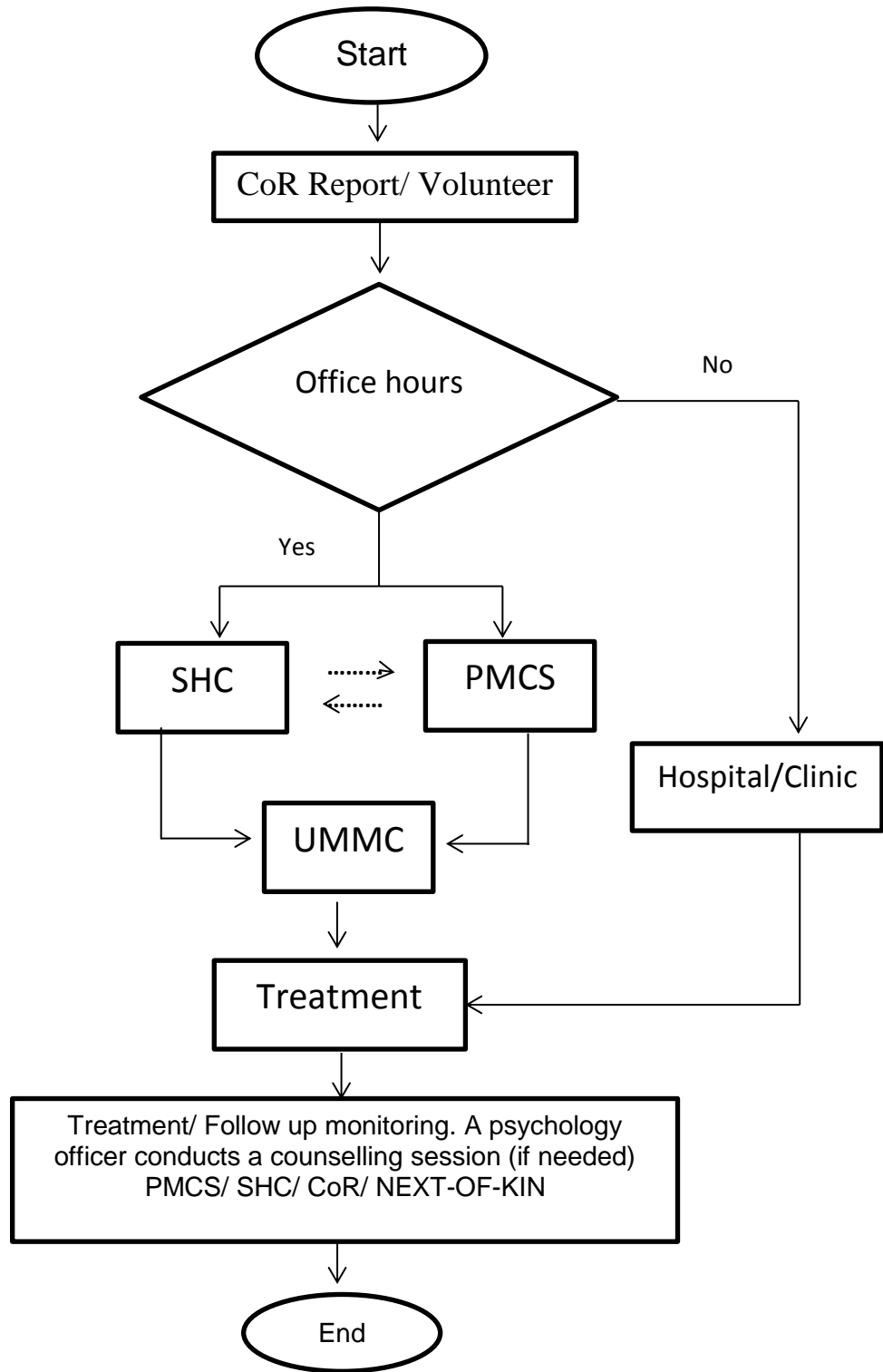


5.0 DETAILED PROCEDURE


<u>No</u>	<u>Action</u>	<u>Executor</u>
5.1	PMCS/ SHC receives the referral case from CoR or a voluntary case.	Staff of PMCS/ SHC
5.2	PMCS informs SHC or vice versa.	Staff of PMCS/ SHC
5.3	Send the student to SHC/UMMC. If it off campus, the students must be sent to the nearest hospital/clinic by the officer-in-charge.	Staff of CoR/ Officer-in-charge/ PMCS
5.4	The student gets treatment at UMMC/ the nearest hospital.	UMMC/ Hospital/ Student
5.5	Inform CoR/ next-of-kin.	Staff of CoR/ PMCS/ Next-of-kin
5.6	Treat and monitor the student's condition after treatment. Psychology Officer can conduct a counselling session (if needed).	Staff of CoR/ PMCS/ SHC/ Next-of-kin
5.7	Record the student's case in a file.	Staff of CoR/ SHC/ PMCS



**FLOW CHART OF STANDARD OPERATING PROCEDURE ON HANDLING
EMOTIONAL WELL-BEING CASES AT UNIVERSITI MALAYA**




4.2 Standard Operating Procedure – Suicidal Attempt Cases at Universiti Malaya

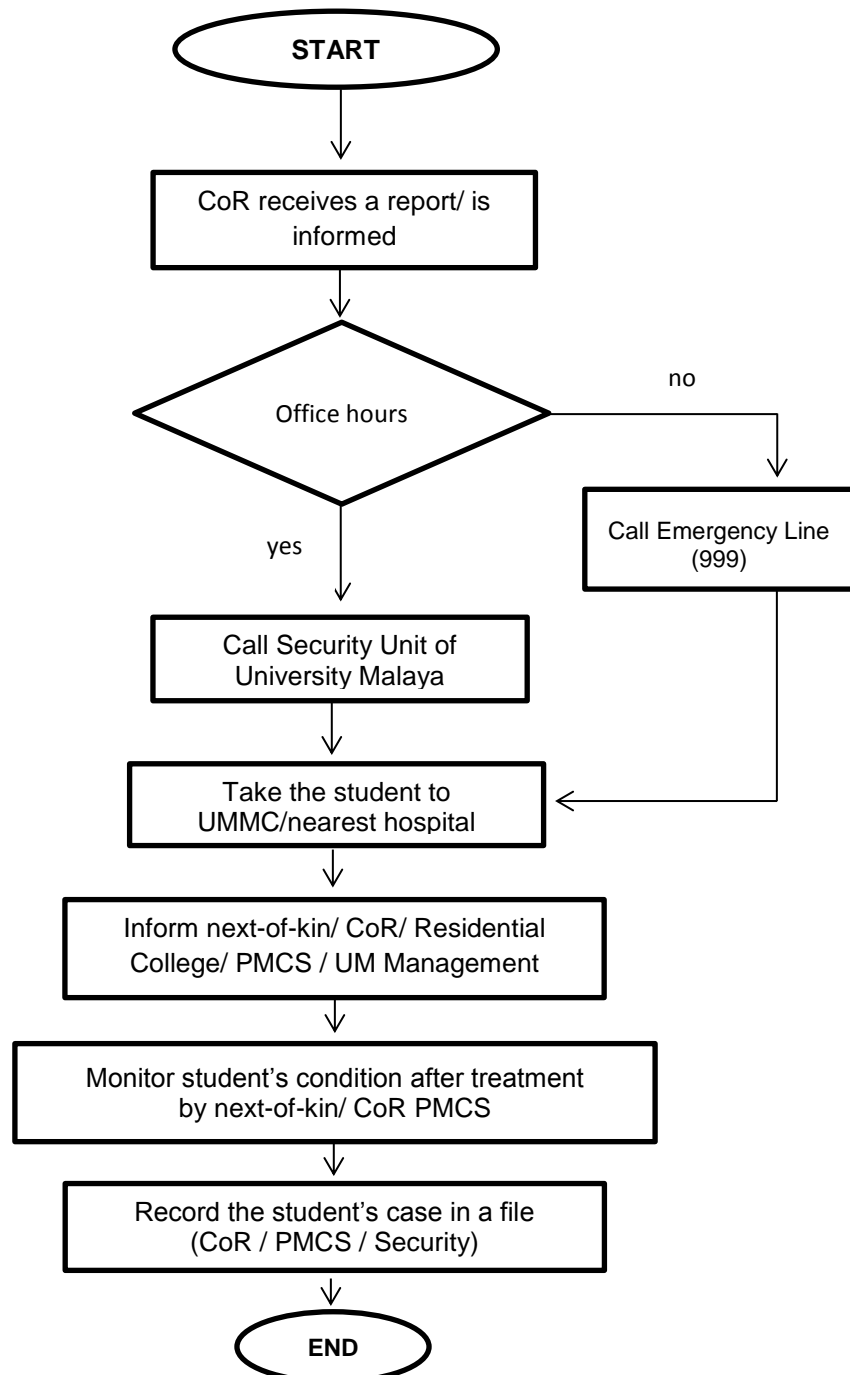
 UNIVERSITI MALAYA	Document Name	STANDARD OPERATING PROCEDURE – SUICIDAL ATTEMPT CASES AT UNIVERSITI MALAYA
<p>1.0 OBJECTIVE</p> <p>This procedure is prepared to explain the process of how to manage suicidal attempt cases which occur at Universiti Malaya.</p>		
<p>2.0 SCOPE</p> <p>This procedure is used by CoR to manage students who are involved in suicidal attempt cases which are reported by CoR/student's next-of-kin.</p>		
<p>3.0 TERMINOLOGY</p>		
3.1	Commit suicide	- Attempt to commit suicide is an act of taking ones own life.
3.2	Intervention	- A process that helps in finding a solution (or treatment).
3.3	Student	- A student that has emotional well-being. Registered and has an active status, this includes foundation, undergraduate and postgraduate students.
3.4	Next-of-kin	- A student's parents or guardian.
3.5	Faculty	- A faculty where the student's learning process takes place.
3.6	CoR	- Centre of Responsibility (of that particular student) which includes Faculty/ Institute/ Division/ Centre/ Residential College.
3.7	SHC	- Universiti Malaya Student Health Clinic.
3.8	Medical Officer	- A Medical Officer who treats the student.
3.9	PMCS, HEP	- Psychology Management & Counselling Section, Student Affairs Division
3.10	Staff of CoR	- Dean/ Deputy Dean/ Head of Department/ Lecturer/ Principal/ Assistant Registrar/ Assistant Administrative Officer/ Fellow

3.11	Residential College	The office of the Residential College (the student's residence)
3.12	Hospital/Clinic	The nearest government hospital / clinic to the place of incident.
3.13	Officer-in-charge	Fellow/ staff of CoR who accompanies students while doing out station/off campus activity.
3.14	Security	- Security Officer, Assistant Security Officer or Security Guards.
3.15	Special File	- PRIVATE & CONFIDENTIAL File: <ul style="list-style-type: none"> i. i - (SHC) File ii. Mental Wellbeing Case File (CoR) iii. Individual Counselling File [PRIVATE & CONFIDENTIAL] (PMCS)


4.0 RESPONSIBILITY

- 4.1 Staff of CoR is responsible to:
- inform the head of the respective CoR;
 - report to Security;
 - call SHC/ hospital and send to UMMC/ hospital.
 - inform CoR/ SHC/ the student's next-of-kin;
 - monitor the student's condition after treatment as a precautionary measure; and;
 - inform University's Management
 - record the student's case in the special file.
- 4.2 Staff of SHC is responsible to
- manage the ambulance (if needed);
 - treat the student (if needed); and
 - record the case in the special file.
- 4.3 PMCS is responsible to:
- monitor and conduct counselling session and intervention for the student after the treatment (if needed); and
 - record the student's case in the special file.
- 4.4 The Security is responsible to:
- handle the case; and
 - record the student's case in the respective file.

 UNIVERSITI MALAYA	Document Name	STANDARD OPERATING PROCEDURE – SUICIDAL ATTEMPT CASES AT UNIVERSITI MALAYA																					
5.0 DETAILED PROCEDURE																							
	<table border="1"> <thead> <tr> <th data-bbox="438 392 550 504"><u>No</u></th> <th data-bbox="550 392 1220 504"><u>Action</u></th> <th data-bbox="1220 392 1439 504"><u>Executor</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="438 504 550 638">5.1</td> <td data-bbox="550 504 1220 638">CoR receives a report/ referral case and gets information of the student and incident's location.</td> <td data-bbox="1220 504 1439 638">Staff of CoR</td> </tr> <tr> <td data-bbox="438 638 550 705">5.2</td> <td data-bbox="550 638 1220 705">Call Security.</td> <td data-bbox="1220 638 1439 705">Staff of CoR</td> </tr> <tr> <td data-bbox="438 705 550 772">5.3</td> <td data-bbox="550 705 1220 772">Send the student to UMMC/the nearest hospital.</td> <td data-bbox="1220 705 1439 772">Staff of CoR</td> </tr> <tr> <td data-bbox="438 772 550 884">5.4</td> <td data-bbox="550 772 1220 884">Inform the next-of-kin & CoR & PMCS & the university's management.</td> <td data-bbox="1220 772 1439 884">Staff of CoR / PMCS</td> </tr> <tr> <td data-bbox="438 884 550 1019">5.5</td> <td data-bbox="550 884 1220 1019">Monitor the student's condition after treatment. Psychology Officer conducts a counselling session (if needed).</td> <td data-bbox="1220 884 1439 1019">Staff of CoR / Next-of-kin & PMCS</td> </tr> <tr> <td data-bbox="438 1019 550 1086">5.6</td> <td data-bbox="550 1019 1220 1086">Record the student's case in the special file.</td> <td data-bbox="1220 1019 1439 1086">Staff of CoR / PMCS / Security</td> </tr> </tbody> </table>	<u>No</u>	<u>Action</u>	<u>Executor</u>	5.1	CoR receives a report/ referral case and gets information of the student and incident's location.	Staff of CoR	5.2	Call Security.	Staff of CoR	5.3	Send the student to UMMC/the nearest hospital.	Staff of CoR	5.4	Inform the next-of-kin & CoR & PMCS & the university's management.	Staff of CoR / PMCS	5.5	Monitor the student's condition after treatment. Psychology Officer conducts a counselling session (if needed).	Staff of CoR / Next-of-kin & PMCS	5.6	Record the student's case in the special file.	Staff of CoR / PMCS / Security	
<u>No</u>	<u>Action</u>	<u>Executor</u>																					
5.1	CoR receives a report/ referral case and gets information of the student and incident's location.	Staff of CoR																					
5.2	Call Security.	Staff of CoR																					
5.3	Send the student to UMMC/the nearest hospital.	Staff of CoR																					
5.4	Inform the next-of-kin & CoR & PMCS & the university's management.	Staff of CoR / PMCS																					
5.5	Monitor the student's condition after treatment. Psychology Officer conducts a counselling session (if needed).	Staff of CoR / Next-of-kin & PMCS																					
5.6	Record the student's case in the special file.	Staff of CoR / PMCS / Security																					

FLOW CHART OF STANDARD OPERATING PROCEDURE COMMIT SUICIDE
ATTEMPT AT UNIVERSITI MALAYA

4.3 Standard Operating Procedure – Matters During Hysteria Cases at Universiti Malaya

 UNIVERSITI MALAYA	Document Name	STANDARD OPERATING PROCEDURE – DURING HYSTERIA CASES AT UNIVERSITI MALAYA
<p>1.0 OBJECTIVE</p> <p>This procedure is prepared to explain the process of how to manage cases of hysteria which occur at Universiti Malaya either during office hours or outside office hours.</p> <p>2.0 SCOPE</p> <p>This procedure is used by all CoRs to manage students at Universiti Malaya during hysteria which is reported by CoR which includes students from the off-campus unit.</p> <p>3.0 TERMINOLOGY</p> <p>3.1 Hysteria</p> <p>3.2 Student</p> <p>3.3 Next-of-kin</p> <p>3.4 Faculty</p> <p>3.5 CoR</p> <p>3.6 SHC</p> <p>3.7 Medical Officer</p> <p>3.8 PMCS, HEP</p>		<p>- Hysteria is a type of psychogenic emotional well-being that has somatic or physical symptoms such as paralysis, loss of vision, loss of sense and taste, hallucination, and always in a condition where they can be easily influenced. Also included in this definition is emotional eruptions (for example screaming and memory loss condition) and aggressive behaviours because they cannot control their feelings.</p> <p>- Student who has hysteria. Registered and has an active status, this includes foundation, undergraduate and postgraduate students.</p> <p>- A student's parents or guardian.</p> <p>- A faculty where the student's learning process takes place.</p> <p>- Centre of Responsibility (of that particular student) which includes Faculty/ Institute/ Division/ Centre/ Residential College.</p> <p>- Universiti Malaya Student Health Clinic.</p> <p>- A Medical Officer who treats the student.</p> <p>- Psychology Management & Counselling Section, Student Affairs Division</p>

3.9	Staff of CoR	- Dean/ Deputy Dean/ Head of Department/ Lecturer/ Principal/ Assistant Registrar/ Assistant Administrative Officer/ Fellow
3.10	Residential College	- The office of Residential College (the student's residence)
3.11	Hospital/Clinic	- The nearest government hospital / clinic to the incident place.
3.12	Officer-in-charge	- Fellow/ staff of CoR who accompanies students while doing out station/off campus activity.
3.13	Security Unit	- Security Officer, Assistant Security Officer or Security Guards.
3.14	Special File	- PRIVATE & CONFIDENTIAL File: <ul style="list-style-type: none"> i. i - (SHC) File ii. Mental Wellbeing Case File (CoR) iii. Individual Counselling File [PRIVATE & CONFIDENTIAL] (PMCS)

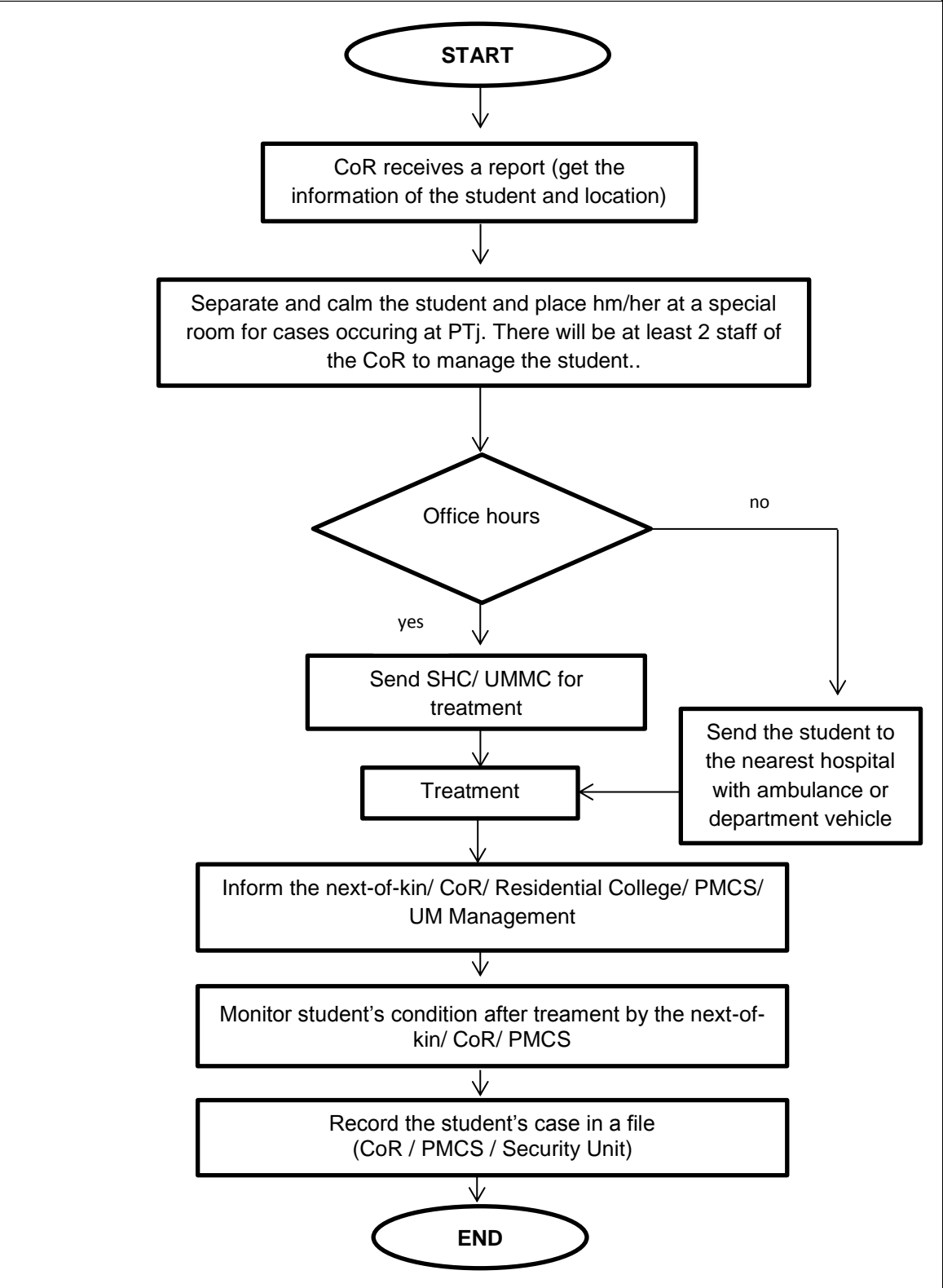
4.0 RESPONSIBILITY

- 4.1 Staff of CoR is responsible to:
- manage students that are involved in hysteria cases and inform the Head of the respective CoR;
 - move the student from incident place to a special room/ place at CoR;
 - calm the student (temporarily) and call and send to SHC/ hospital;
 - send to SHC/ hospital (if needed);
 - inform CoR/ PMCS/ the student's next-of-kin;
 - monitor the student's condition after treatment as precautionary measures; and;
 - record the student's case in a special file.
- 4.2 Staff of SHC is responsible to:
- manage the ambulance (if needed);
 - treat the student; and
 - record the student's case in a special file.
- 4.3 PMCS is responsible to:
- monitor and conduct a counselling session and intervention for the student (if needed); and
 - record the student's case in a special file.

 UNIVERSITI MALAYA	Document Name	STANDARD OPERATING PROCEDURE – MATTERS DURING HYSTERIA CASES AT UNIVERSITI MALAYA
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5.0 DETAILED PROCEDURE		
<u>No</u>	<u>Action</u>	<u>Executor</u>
5.1	CoR receives a case / referral case and get information from the student and incident place.	Staff of CoR
5.2	Separate and calm the student and place him/her in a special room for cases occurring at CoR. There will be at least 2 staff of CoR to manage the student.	Staff of CoR
5.3	Call the relevant party. (SHC/ Security Unit/ PMCS).	Staff of CoR
5.4	If the incident occurs during office hours: - Send the student to SHC/ UMMC/ Hospital for treatment.	Staff of CoR
5.5	If the incident occurs outside office hours: - Send the student to the UMMC or nearest hospital to get treatment.	Staff of CoR
5.6	The student receives treatment from SHC/ UMMC/ Hospital.	Staff of SHC/ Hospital
5.7	Inform the next-of-kin / SHC/ PMCS/ CoR.	Staff of SHC/ PMCS/ CoR
5.8	Monitor the student's condition after treatment. Psychology officer conducts a counselling session (if needed).	Next-of-kin/ SHC/ PMCS/ CoR
5.9	Record the student's case in a special file.	KKP/ PMCS CoR

FLOW CHART OF STANDARD OPERATING PROCEDURE – DURING HYSTERIA CASES AT UNIVERSITI MALAYA



PREPARED BY:

Section of Psychology Management & Counseling

Division of Students Affairs

Universiti Malaya

SPECIAL THANKS TO

Universiti Malaya Management

Division of Students Affairs

All CoR of Universiti Malaya

Section of Psychology Management & Counseling, UM

Medical & Psychology Department, UMMC

Jabatan Bahasa Melayu, Akademi Pengajian Melayu, Universiti Malaya

10 August 2018/UM Management



PANDUAN PEMANTAUAN KES KESEJAHTERAAN EMOSI UNIVERSITI MALAYA PENJAGAAN DIRI & SISTEM SOKONGAN

Pengurusan bagi pemantauan kes kesejahteraan emosi Universiti Malaya merangkumi dua aspek yang dicadangkan iaitu:

1. Penjagaan Diri (Self Care)
2. Sistem sokongan

1.0 PENJAGAAN DIRI

Penjagaan diri merupakan keupayaan manusia berfungsi dengan berkesan di dunia di samping memenuhi pelbagai cabaran kehidupan setiap hari dengan rasa bertenaga, cergas, dan berkeyakinan. Ia meliputi pelbagai isu-isu dari segi fizikal, emosi, intelek dan rohani. Konteks penjagaan diri mengambil kira dimensi minda, badan dan semangat merangkumi dimensi pemikiran, perasaan, dan tingkah laku. Ia dipecahkan kepada aspek peribadi dan pekerjaan - dirujuk sebagai "kesejahteraan", "keseimbangan yang sihat", "daya tahan" dan "kesihatan mental". Penjagaan diri merangkumi aspek yang berikut:

1.1 Penjagaan Fizikal

- Makan secara sihat
- Makan makanan sihat
- Senaman
- Pemeriksaan kesihatan secara regular & sebagainya

1.2 Penjagaan Emosi

- Hargai diri
- *Timeout*
- *Self reward*
- *Positive talk*
- Benarkan diri menangis
- Luahan perasaan

1.3 Penjagaan Psikologikal

- Terapi personal
- Refleksi
- Kemahiran daya tindak
- Aktiviti riadah
- Kaunseling

1.4 Penjagaan Spiritual

- Ketuhanan
- Solat
- Meditasi
- Alam semulajadi
- Refleksi sendiri

2.0 SISTEM SOKONGAN

Sokongan sosial merupakan sumber psikologi dan fizikal yang diberi oleh orang lain untuk membantu individu yang menghadapi kesukaran. Kajian menunjukkan mereka yang menghadapi tekanan hidup / melalui pengalaman pahit akan melaluinya lebih mudah jika mereka mempunyai rangkaian yang berkesan dari rakan-rakan atau keluarga untuk sokongan sosial berbanding sebaliknya (Billings & Moos, 1985).

Banyak kajian menunjukkan kuasa sokongan sosial dalam mengurangkan *vulnerability* kita kepada pelbagai keadaan tertekan. Apabila kita mempunyai seseorang yang boleh kita berharap / merujuk, secara psikologi kita lebih berupaya untuk mengendalikan tekanan (pekerjaan, pengangguran, gangguan perkahwinan, penyakit yang serius dan bencana lain, serta masalah harian hidup). Oleh itu, sangat penting kita mempunyai dan mengekalkan sistem sokongan yang baik dan meningkatkan atau membina sistem sokongan sosial dari semasa ke semasa.

Bentuk sokongan sosial termasuklah:

2.1 Sokongan sosioemosi

Memberi mesej anda disayangi, diambil berat, dihargai dan berhubung dengan orang lain dalam rangkaian komunikasi & tanggungjawab bersama.

2.2 Sokongan nyata (tangible)

Kewangan, pengangkutan, perumahan dan bantuan/ sokongan lain yang nyata.

2.3 Sokongan Maklumat

Nasihat, respon peribadi, bimbingan pakar atau sesiapa yang mempunyai hubungan signifikan boleh membantu di masa memerlukan.

Sistem sokongan yang dicadangkan bagi setiap PTj apabila berhadapan dengan kes kesejahteraan emosi di Universiti Malaya telah dimurnikan hasil sumbangan idea/pandangan para peserta bengkel **Pemantauan Kes Kesejahteraan Emosi Universiti Malaya** terdiri daripada wakil-wakil PTj (Fakulti/ Kolej Kediaman / PTj berkaitan). Lampiran adalah seperti berikut:

SISTEM SOKONGAN	PERINCIAN	TINDAKAN PTJ
1. Rakan	<ul style="list-style-type: none"> • Adalah orang yang mengenali anda dengan baik dan dapat menyedari apabila tingkah laku anda menjadi luar biasa atau tidak sihat. • Orang-orang positif dan memberi galakan serta membantu anda supaya menjadi lebih optimistik, berkeyakinan dan kuat. 	Melantik kelompok rakan (AKRAB/ <i>Buddies</i>) di kalangan pelajar bagi mewakili PTJ masing-masing.
2. Keluarga/ waris	<ul style="list-style-type: none"> • Menghubungi keluarga & waris • Memberi maklumat & konsultasi 	PTJ Pegawai Psikologi
3. Fakulti/Pusat	<ul style="list-style-type: none"> • Mewujudkan jawatankuasa <i>adhoc</i>/khas bagi pengendalian kes kesejahteraan emosi pelajar 	PTJ Melantik beberapa ahli di kalangan PTJ dan mana-mana pakar bidang yang terlibat bagi membantu pelajar yang berkenaan. Contohnya : Pengerusi : Dekan Ahli : Timb Dekan Ketua Jabatan Penasihat Akademik Pensyarah yang terlibat Pakar bidang Kaunselor Pegawai kebajikan Pegawai agama Pakar Psikiatri
4. Kumpulan sokongan	<ul style="list-style-type: none"> • Dicadangkan setiap fakulti/ Kolej kediaman menyediakan <i>peer support group</i>. • Menawarkan interaksi dengan orang-orang yang mungkin mempunyai pengalaman yang sama dan dapat memahami apa yang sedang kita lalui. • Boleh mempelajari kemahiran baru untuk menangani dan berhubung dengan orang-orang dalam persekitaran kita yang mungkin terlibat secara langsung atau tidak langsung dengan permasalahan kita. 	PTJ SPPsK

<p>5. Kerohanian dan Keagamaan</p>	<ul style="list-style-type: none"> • Hubungan rohani atau pegangan agama memberikan sumber sokongan yang sangat bermakna apabila sedang bergelut dengan kesukaran. • Kerohanian boleh memberikan harapan dan tujuan / makna dalam hidup dan membantu mencari kekuatan dan ketahanan. Juga boleh berhubung dengan komuniti yang lain yang mempunyai kepercayaan yang sama. 	<p>Pegawai Hal Ehwal Islam BHEP</p> <p>Akademi Pengajian Islam</p> <p>Rawatan alternatif (Agama/spiritual)</p>
<p>6. Rujuk Pakar bidang</p> <ol style="list-style-type: none"> 1) kaunselor 2) Agama 3) Psikiatrik 4) Lain-lain bidang 	<ul style="list-style-type: none"> • Ada kalanya kawan-kawan dan keluarga tidak cukup untuk membantu melalui masa yang sukar. Ada masanya kawan-kawan dan keluarga mempunyai terlalu banyak hal mereka sendiri untuk berurusan dengan masalah. • Pada masa-masa ini individu mungkin memerlukan sokongan profesional. Terapis dan kaunselor boleh menjadi sokongan yang baik untuk membantu anda melalui kesukaran yang dihadapi. • Merujuk kes kepada profesional lain (jika perlu) 	<p>Pegawai Islam</p> <p>Pegawai Psikologi</p> <p>Pakar Psikiatrik</p> <p>Lain-lain bidang</p>

*Hasil perbincangan daripada Bengkel Garis Panduan Pemantauan Kesejahteraan Emosi Universiti Malaya yang telah diadakan pada 17 Ogos 2020 bertempat di Rumah Kelab Alumni Universiti Malaya.



MONITORING GUIDELINES FOR EMOTIONAL WELL-BEING CASE IN UNIVERSITI MALAYA SELF CARE & SUPPORT SYSTEM

Management for the monitoring of the Universiti Malaya's emotional well-being case covers two proposed aspects, namely:

- 1) Self-care
- 2) Support system

1.0 SELF-CARE

Self-care is the ability of human beings to function effectively in the world while fulfilling various challenges of daily life with a sense of energy, vitality, and confidence. It covers a wide range of physical, emotional, intellectual and spiritual issues. The context of self-care takes into account the dimensions of the mind, the body and spirit which encompasses dimensions of thought, feeling, and behavior. It is broken down into aspects of personal and occupational - referred to as "well-being", "healthy balance", "resilience" and "mental health".

Aspects in self-care:

1.1 Physical care

- Eat healthily
- Practice well balanced diet
- Exercise
- Undergo regular medical check-up

1.2 Emotional care

- Self-appreciation
- Timeout / break
- Self-reward
- Allow yourself to cry
- Express your emotions

1.3 Psychological care

- Personal therapy
- Reflections
- Outdoor activities
- Coping skills
- Counseling

1.4 Spiritual care

- Praying
- Meditations
- Self- reflections

2.0 SUPPORT SYSTEM

Support system is the psychology and physical resources given by the surrounding to the individual who is in need. Individuals who face life challenges/ through bad experiences will face the challenges easier if they have effective networking from family or friends who extend the support to them compared to those who do not have such support. (Billings & Moos, 1985)

Prior studies showed the power of social support in our reducing vulnerability in any pressuring situations. Psychologically, we are able to manage our stress (occupation, jobless, marriage issues, chronic diseases) when we have someone to rely on. Therefore, it is essential for us to have, to maintain, to improve and to build a strong support system from time to time.

Types Of Support System:

2.1 Socioemotional Support

Sending message about how everyone deserves to be loved and appreciated in the same communication networking and responsibilities.

2.2 Tangible Support

Financial, transportations, house and essential needs.

2.3 Information Support

Advice, personal response, expert guidance or anyone with a significant relationship can help in times of need.

Support system proposed to every PTJ (Faculty/ College/ Centre) in handling emotional well-being cases in University Malaya from Emotional Well-being Case Monitoring Workshop are as followed:

SUPPORT SYSTEM	DETAILS	ACTION FROM PTJ
1.Friends	<ul style="list-style-type: none"> • Individual who knows us and notices when something changes. • Positive circle who will encourage us to be more optimist, more confident and stronger. 	Appointing Buddies among students/AKRAB to represent respective PTJ.
2.Family / Next of Kin	<ul style="list-style-type: none"> • Contact family or next of kin • Give information and consultation 	PTJ Psychology Officer
3.Faculty/ Centre	<ul style="list-style-type: none"> • Appoint an adhoc committee to manage emotional well-being case among students. 	PTJ Appoint few members from PTJ and any relevant field expert in helping a particular student. Chairman: Dean Members: Deputy Dean Head of Department Academic Advisor Lecturer Field Expert Counselor Welfare Officer Religious Officer Psychiatric
4.Group Support	<ul style="list-style-type: none"> • It is advisable for every faculty/ college to create a peer support group. • Offers interaction with people who may have similar experience and able to understand what the student is going through • Can learn new skills in dealing and communicating with people in our environment who have the possibility to be directly or indirectly involved with our problems. 	PTJ SPPsK
5.Spirituality and Religious	<ul style="list-style-type: none"> • Spiritual relationships or religious beliefs • provide a great source of support when struggling with difficulty. • Spirituality can also give hopes and meaning in one's life in order for them to find strength. Advisable to ask for guidance from the same religion or faith. 	BHEP officer (Muslim Affairs) Muslim Academy Studies Alternative Treatment (Religion/ Spiritual)

<p>6.Refer experts a) Counselor b) Religion c) Psychiatric d)Others</p>	<ul style="list-style-type: none"> • Sometimes, family and friends are occupied with their own business. Therefore, it is challenging to get support from them only. • At this time, some individuals might need a professional support. Therapist and counselor can be a great support for them to go through their issues. • Individual might need to be referred to other professionals in the relevant field if needed. 	<p>Muslim Officer Psychology Officer Psychiatric Others Field</p>
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*These are the matters discussed in the Universiti Malaya Emotional Well-being Case Monitoring Workshop on 17th of August 2020 at Rumah Kelab Alumni Universiti Malaya.