

APPENDIX A: SAMPLE OF INFORMED CONSENT FORM


UNIVERSITI SAINS ISLAM MALAYSIA
جامعة العلوم الإسلامية الماليزية
ISLAMIC SCIENCE UNIVERSITY OF MALAYSIA

LAMPIRAN C

**BORANG KEBENARAN TEMU BUAL / RAKAMAN SESI
(INFORMED CONSENT)**

Saya, (I) WILLIAM UNG HAN SENG, (No. KP/ IC No.) [REDACTED] bersetuju/ ~~tidak bersetuju~~ untuk menjadi peserta kajian dalam kajian yang bertajuk **"Pengalaman Amalan Penjagaan Kendiri dalam Kalangan Kaunselor Berkait Dengan Kepercayaan Agama"** (*agree/ disagree to participate in the study entitled "The Experience of Self-care Practice among Counselors in Relation to Religious Beliefs"*)

1. Saya bersetuju untuk bertemu dengan pengkaji dan menjawab soalan-soalan yang dikemukakan dan membenarkan sebarang dokumen daripada pihak saya digunakan dalam analisis dokumen. (*I agree to meet the researcher and answer the researchers' question and allow any document from my party to be used in documents analysis*).
2. Saya juga bersetuju membenarkan temubual yang dijalankan ke atas saya dirakam dan seterusnya digunakan sebagai data kajian. Saya juga membenarkan rakaman sesi temu bual ditranskripsikan dalam bentuk verbatim. (*I also agree to allow the interview session conducted on me to be recorded and subsequently used as research data and allow the recorded interview session to be transcribed in the form of verbatim*).
3. Saya faham bahawa penyertaan saya dalam kajian ini adalah sukarela sepenuhnya dan bahawa saya berhak untuk menolak dari menjawab soalan dan saya boleh menarik diri dari ditemu bual pada bila-bila masa sahaja. Saya juga faham bahawa semua soalan antara saya dan pengkaji adalah rahsia. (*I understand that my participation in this study is entirely voluntary and that I have the right to decline from answering questions and I may withdraw from being interviewed at any time. I also understand that all questions between the researcher and I are confidential*).
4. Saya faham bahawa maklumat dari temu bual ini boleh menjadi sebahagian daripada laporan tesis atau di dalam penerbitan lain. Oleh itu, saya hanya membenarkan apa-apa maklumat identiti termasuk nama saya, nama orang lain atau organisasi yang disebut sepanjang temubual dicatatkan secara samaran dalam penulisan tesis atau penerbitan lain. (*I understand that the obtained information from this interview may become a part of thesis report or other publication. Therefore, I only allow any information related to identity including my name, other person's name or organization which are mentioned throughout the interview to be written anonymously in thesis report or other publications*).

5. Saya memahami bahawa saya boleh menghubungi pengkaji jika saya mempunyai sebarang soalan mengenai penyertaan saya dalam kajian ini. *(I understand that I may contact the researcher if I have any question related to my participation in this study).*
6. Saya juga telah membaca maklumat tentang penyelidikan tersebut di atas dan juga telah mendapat penerangan dari penyelidik tentang tujuan dokumen ini. *(I have read the information on the research project stated above and have also been given explanation by the person in charge about the purpose of this document).*
7. Saya telah dimaklumkan dengan sewajarnya tentang tujuan, aturan, tempoh dan risiko kajian. *(I have been adequately informed about the purpose, set-up, course and risk of the study).*
8. Saya sedar bahawa penyelidik bertanggungjawab untuk memberikan saya sebarang maklumat tambahan tentang kajian dan juga berkenaan sebarang kecederaan yang berkaitan dengan kajian. *(I am aware that the researcher is responsible for providing me any additional information about the study as well as in case of study related injury)*
9. Saya juga sedar bahawa saya berhak untuk mengetahui tentang penyelidikan ini termasuk maklumat tentang hasil keputusan kajian. *(I also aware that I have the right to know about the research conducted including information on the results of the research).*

Tanda tangan Pengkaji
Researcher's Signature:

Nama
Name:

Tanda tangan Peserta Kajian
Research Participant's Signature:

Nama: WILLIAM LUNG HAN SENG
Name: Pegawai Psikologi S44
Pejabat Kebajikan Masyarakat
Daerah Tampin

Tarikh
Date:

APPENDIX B: INTERVIEW PROTOCOL

Interview Protocol:

The Role of Religion in Self-Care Experience of Crisis Counselors

1. **Could you briefly describe yourself, your religious background, and your working experience?**
(Bolehkah anda menceritakan secara ringkas tentang diri anda, latar belakang agama anda dan pengalaman kerja anda?)
2. **Could you describe your experience in handling crisis and traumatic stress cases?**
(Bolehkah anda ceritakan pengalaman anda dalam mengendalikan kes krisis dan trauma?)
 - Who are your clients?
 - What type of cases you are handling?
 - How many cases you are dealing with in a day?
 - What is your belief about crisis?
3. **What is the experience of handling trauma and crisis cases that are most memorable to you?**
(Apakah pengalaman mengendalikan kes trauma dan krisis yang sangat diingati bagi anda?)
 - What had happened?
 - What kind of thinking came across your mind while handling the case?
 - How did you see your client at that time?
 - How did you feel every time you met the client?
 - What did you do to help your client?
 - How does this case affect you?
 - Did you share your feelings with anyone? Please describe more
 - If you shared your experience with others, how did you feel about it after the sharing?
4. **What are you doing to cope with the adversities of the cases?**
(Apakah yang anda lakukan untuk menghadapi kesukaran kes yang dikendalikan?)
 - What did you do to control your emotion?

- What is your preparation before you start crisis intervention or crisis counseling sessions?
 - What do you do if you got stuck during crisis intervention or crisis counseling sessions?
 - Do you think your religious belief plays a role in guiding yourself toward self-care? If yes, could you describe how it guides you to self-care? If not, could you give an opinion on why your religious belief does not play a role in guiding toward self-care?
 - What do you do after every crisis intervention or crisis counseling session ended?
 - What are your routine self-care practices?
 - What did you do to maintain your physical health?
 - How do you balance your personal life and professional life?
- 5. How these activities help you to cope with the adversity of your cases?**
(*Bagaimana aktiviti-aktiviti ini membantu anda untuk menghadapi kesukaran dalam kes-kes anda?*)
- How do you balance up the adversities of your cases with self-care activities?
 - What your religion suggests you to do while facing adversities in your cases?
 - Do the self-care activities help you to function well as a professional counselor? Please describe more.
- 6. How do you view about your role as a professional counselor?**
(*Apakah pandangan anda berkaitan peranan anda sebagai seorang kaunselor professional?*)
- What is your perception of your job?
 - How do you view your job based on your religion?
 - How do you interact with your colleague or supervisor in your working environment?
- 7. How do you view your personal life?**
(*Bagaimana anda melihat kehidupan peribadi anda?*)
- How do you see yourself in your family?
 - How do you spend time with your family?
 - What kind of social activities you involve in with your family, friends, and community?
 - What is the role of your religious belief in your personal life?
- 8. What can you conclude after we talk about self-care and religious belief?**
(*Apakah yang boleh anda simpulkan selepas kita berbual tentang penjagaan sendiri dan kepercayaan agama?*)
- What do you think about self-care and religious belief?
 - How do these elements bring meaning to you?

APPENDIX C: SAMPLE OF REFLECTIVE FORM

 UNIVERSITI SAINS ISLAM MALAYSIA جامعة العلوم الإسلامية في ماليزيا ISLAMIC SCIENCES UNIVERSITY OF MALAYSIA		LAMPIRAN B
BORANG REFLEKSI PESERTA KAJIAN (RESEARCH PARTICIPANTS' REFLECTIVE FORM)		
1.	Apakah perasaan tuan/ puan selepas melalui proses temu bual bagi kajian ini? (What do you feel after going through the interview process for this study?) tenang seperti biasa, sebab kajian ini berkaitan dengan bidang tugas hakiki	
2.	Sejauh manakah kandungan temu bual ini memberi makna kepada tuan/ puan? (To what extent does the content of this interview make sense to you?) Membantu saya imbas kembali pengalaman yang telah dilalui sepanjang perkhidmatan dan cabaran	
3.	Bagaimanakah amalan penjagaan sendiri tuan/ puan sebelum ini? (How was your self-care practices before this?) Sangat positif sebab self care @ self Cleansing @ self protection merupakan amalan penting bagi pengamal agama hindu	
4.	Apakah pandangan tuan/ puan sebagai seorang kaunselor tentang amalan penjagaan sendiri? (What is your view as a counselor on self-care?) Self care merupakan amalan penting dalam memastikan perkhidmatan kualiti	
5.	Apakah pandangan tuan/ puan tentang peranan kepercayaan agama dalam amalan penjagaan sendiri? (What is your view on the role of religious beliefs in self-care practice?) Soalan ini telah terjawab dalam soalan 3	
6.	Bagaimanakah amalan penjagaan sendiri berperanan dalam kefungsiannya tuan/ puan sebagai seorang kaunselor? (How does self-care practice play role in your functioning as a counselor?) Amalan self care sangat penting kepada semua kaunselor supaya kesan negatif daripada sesi sesi sebelum tidak lagi menjadi bebas @ gangguan emosi.	

7. Bagaimanakah kepercayaan agama berperanan dalam kefungisian tuan/ puan sebagai seorang kaunselor?
(How does religious belief play role in your functioning as a counselor?)

Agama merupakan asas kepada keperibadian manusia , agama juga memainkan peranan penting dalam hubungan manusia untuk menghormati isu @ masalah individu lain. Sebab dalam agama Hindu ada istilah penting iaitu KARMA , dimana setiap manusia tidak terkecuali daripada karma ini dan kepercayaan agama akan memberi ketenangan jiwa dan fokus kepada kaunselor semasa membantu orang lain .

Tandatangan Peserta Kajian/
Signature of Research Participant:



Nama/ name:

SABARAMNAIDU A/L SATHIARIVOO
Penolong Pengarah Kanan
Bahagian Psikologi Dan Kaunseling
Jabatan Kebajikan Masyarakat
Negeri Selangor

Tarikh/ Date:

20/11/2021

APPENDIX D: EXAMPLE OF INTERVIEW TRANSCRIPT

Interview Transcript

Participant's Nickname: Anju

Date of Interview: 17/2/2022

Mode: Face to Face/ ~~Online Platform~~

Line	Verbatim
1	Good morning Puan Anju. Terima kasih kerana sudi menjadi saya punya research participant
2	Okey, good morning. Bless morning Husna. Nice to see you and actually I feel honored that you have chosen me as your participant.
3	Okey bagi memulakan kita punya temubual pada hari ini, bolehkah puan ceritakan secara ringkas tentang latar belakang diri puan, latar belakang agama puan dan juga pengalaman kerja puan?
4	Okey saya Anju. Merupakan Pegawai Psikologi.
5	Sebelum ni saya bekerja selama 9 tahun di Jabatan Kebajikan Masyarakat.
6	And then sekarnag dah 3 tahun di PDRM.
7	And then about my religion, I'm Hindu by birth.
8	I practice Hinduism although I don't know how authentic my practice is lah. Okey aaa ya that's...that's all.
9	Okey puan, boleh tak puan ceritakan pengalaman puan mengendalikan kes trauma dan krisis sebelum ni di JKM dan PDRM?
10	Okey, sebenarnya pengalaman saya dalam trauma dan krisis bermula ketika saya jadi pelajar practical lagi untuk degree.
11	Saya buat practical di Hospital Tunku Jaafar.
12	So, that was my first step into trauma and crisis.
13	So di situ kita jumpa mangsa rogol, suicidal attempt cases, ibu mengandung luar nikah yang disebabkan rogol and everything.
14	That was my first aa break through dalam trauma and crisis.
15	So kalau tengok siapa klien dia, okey untuk rogol of course mostly la majority ya majority, I won't say it is only female.
16	Memang kebanyakannya perempuan. Majoriti adalah perempuan.
17	But saya pernah tengok 2 cases sodomize lelaki.
18	Okey. Otherwise macam suicidal attempt lelaki dan perempuan, variety of races, Malay, Chinese, Indian semua ada.
19	And then age also I see of everything. Dia taka da a particular gender or particular age group or particular race. Tak de.
20	And then bila saya mula bekerja di aaa JKM say amula handle cases rogol,
21	rogol yang disebabkan oleh strangers even worse rogol yang berlaku dalam keluarga sendiri, okey.
22	And then suicidal attempt, aa keganasan rumah tangga.

23	<i>So semua ni saya mula handle dan lebih banyak how to say exposure di JKM.</i>
24	<i>Dan JKM dia mempunyai satu struktur training untuk Pegawai Psikologi yang I feel really well-planned.</i>
25	<i>Dia bagi training macam mana nak handle kanak-kanak, macam mana kita nak handle keganasan rumah tangga.</i>
26	<i>And JKM sebab dia ada MSIOS, so dia memang sangat teratur. Dia sudah ada satu standard operating procedure.</i>
27	<i>So we have to follow that untuk how..how do we handle cases, kita akan follow SOP.</i>
28	<i>But how do we handle it in term of kita nak pastikan klien tu mendapat kesejahteraan emosi</i>
29	<i>then we have to come into practice with your knowledge, your experience and most...</i>
30	<i>how to say like...genuinely saya rasa it is also a try and error on counselors' part what might work for that client.</i>
31	<i>Okey kalau dia datang dia memang seorang mangsa keganasan rumah tangga yang memang teruk</i>
32	<i>sampai suami dia dah nak bunuh dia, samapi pukul dia pun samapai dia pengsan dua tiga hari kan, koma,</i>
33	<i>macam mana kita nak...apa yang kita nak buat dengan dialah.</i>
34	<i>Adakah kita nak bantu dia fikir what im going to do next</i>
35	<i>atau kita nak bantu dia here and now, feel your emotion so that you will be able to let go and move on.</i>
36	<i>Sama juga untuk mangsa rogol. What happened?</i>
37	<i>Are you going to process the trauma or are you going to ask the client to forget the trauma, put it behind?</i>
38	<i>Kita macam ada satu part kita minta klien avoid juga kan. Relieving the traumatic experience.</i>
39	<i>Adakah kita nak buat macam tu but in JKM with their training more or less walaupun masa tu saya freshy saya dapat belajar what to do.</i>
40	<i>Dan cases dia memang banyak, you get practice a lot.</i>
41	<i>You get called anytime. Dia orang ada mangsa rogol dekat hospital,</i>
42	<i>ada ibu ni apa...ada ibu hamil tanpa nikah ye, dia akan panggil.</i>
43	<i>So, kita terus pergi. Then you have to handle that.</i>
44	<i>So we have a lot of practice.</i>
45	<i>Di situ pun kita ada jumpa orang yang..yang saya cakap lah</i>
46	<i>macam dekat hospital kan suicidal attempts, rogol, keganasan rumah tangga, semua kita jumpa</i>
47	<i>and then yang I find demografi dia all over.</i>
48	<i>All over the races, all over the age group, all over the gender, semuanya ada.</i>
49	<i>Okey, so I cannot particularly say ini female banyak ke apa.</i>
50	<i>Tapi dari segi reporting untuk keganasan rumah tangga, rogol, female is more who report the crime,</i>
51	<i>who report the situation who report the event itself.</i>
52	<i>Tapi kalau suicidal attempt no choice bila dia orang dibawa ke hospital,</i>
53	<i>memang get reported automatically.</i>
54	<i>So kita oleh nampak prevalence untuk lelaki banyak dekat suicidal attempt.</i>
55	<i>Not for keganasan rumah tangga ataupun rogol tak ada. Jaranglah.</i>

56	<i>And then di PDRM pula. Sebab JKM is more towards the community. Hospital community. So we see everybody.</i>
57	<i>Tapi dekat PDRM, we're more towards organizational. Maksud kita cater untuk warga PDRM.</i>
58	<i>So saya di kontinjen Negeri Sembilan kita hanya cater kepada warga kontinjen Negeri Sembilan</i>
59	<i>termasuklah kita punya pegawai kanan polis, anggota, pegawai awam dan their aaa keluarga.</i>
60	<i>Kalau dibandingkan dengan JKM, di PDRM aa kita kurang sikit exposure terhadap trauma and crisis.</i>
61	<i>Tapi trauma and crisis yang saya tengok di sini adalah seperti keganasan rumah tangga tu ada, and then suicidal attempt ada.</i>
62	<i>And then yang memang committed suicide ada.</i>
63	<i>So provide psychological care for the family. Aa itu yang kita ada.</i>
64	<i>But rogol and all that is not under my jurisdiction.</i>
65	<i>So they are under another department. So we don't handle that. So this is my all my thing la.</i>
66	<i>Daripada pengalaman awal tu community and then pergi ke skop yang lebih kecil, tapi masalahnya, isunya lebih kurang sama lah?</i>
67	<i>Yes.</i>
68	<i>Okey, Satu hari atau pun satu bulan, berapa banyak kes yang puan kendalikan?</i>
69	<i>Secara umum in a month ten to twenty. Itu individual lah.</i>
70	<i>Sebab aa dekat..dekat saya punya jabatan ni I mean dekat kontinjen ni pun saya hanya ...kita ada dua kaunselor</i>
71	<i>dan saya kaunselor yang kena cover kebanyakan daerah sebab kebanyakan daerah tak ada kaunselor.</i>
72	<i>So, kita punya workload agak banyaklah.</i>
73	<i>So, untuk...untuk memastikan lebih ramai mendapat perkhidmatan kita terpaksa buat banyak kelompok.</i>
74	<i>So kelompok is a lot and then kita banyak kepada online supaya orang still dapat perkhidmtan psikologi</i>
75	<i>secara I mean walaupun kita tak ada personal touch but at least dia ada satu exposure. Dia sentiasa in touch with us.</i>
77	<i>So banyak jugalah workload yang puan kena cover setiap hari?</i>
78	<i>Yes</i>
79	<i>How do you feel?</i>
80	<i>It is tiring and satisfying at the same time.</i>
81	<i>Okey, so bila puan lama mengendalikan kes trauma dan krisis apa yang puan percaya tentang krisis? What do you believe about crisis?</i>
82	<i>Krisis ni adalah satu anjakan where it shifts the life of that individual.</i>
83	<i>Dia rasa tiba-tiba hidup dia berubah.</i>
84	<i>For some people it happened suddenly secara tiba-tiba.</i>
85	<i>Contohnya mangsa rogol kan. Dia sedang dalam perjalanan balik dari sekolah tiba-tiba dia ditarik dalam semak dan dirogol.</i>
86	<i>Itu berlaku secara tiba-tiba. But it's not the case for everybody.</i>
87	<i>Ada yang sebenarnya dia berlaku secara slow.</i>
88	<i>Like slow poison. Dia memang dah bermula.</i>

89	<i>Contohnya kalau aaa rogol tu berlaku dalam kelaurga sendiri di mana dia orang dah groom sexually dia groom.</i>
90	<i>Dia bagi budak tu duduk atas riba dia, dia buat macam dia shake the girl and all that kan.</i>
91	<i>Buat touching. Dia fingering and the child soon believes that's normal.</i>
92	<i>So it happened like slowly sebab klien tu tak ada awareness.</i>
93	<i>Dia tak tau that this is the wrong touch.</i>
94	<i>And dia tak tahu yang this person especially orang yang dia percaya ni especially tak boleh sentuh dia macam tu.</i>
95	<i>Sebab kadang-kadang individu tu dia benarkan atau dia tolerate sebab dia rasa orang ni orang yang dia kenal</i>
96	<i>so dia boleh masuk dalam ruang personal dia.</i>
97	<i>But it hits, it become a crisis bila dia..dia dapat awareness tu bahawa actually orang yang kita trust la tak boleh buat ni.</i>
98	<i>Haaa then it becomes the crisis. And normally they will feel like some people they feel blur,</i>
99	<i>dia mungkin cakap dia rasa terlalu terkejut.</i>
100	<i>Some people they don't feel anything at that moment.</i>
101	<i>It takes time for them to even digest apa yang sebenarnya sedang berlaku.</i>
102	<i>And then baru dia rasa kehidupan dia telah pun berubah dalam sekelip mata tanpa dia sedar.</i>
103	<i>Okey sama juga yang macam suicidal attempt.</i>
104	<i>It just one decision like taken in few second yang mengubah dia punya kehidupan.</i>
105	<i>Sebab saya pernah jumpa patient yang masa dekat hospital, patient yang memang dia regret</i>
106	<i>dia attempt to suicide to sebab dia tak mati. Kalau dia mati masalah dia selesai.</i>
107	<i>But the thing is dia tak mati dan racun yang dia minum tu telah pun menghakis dia punya organ dalaman kan.</i>
108	<i>So dia jadi terlantar. You have no way dying on your own right now. You are at mercy of God. Right?</i>
109	<i>So dia akan regret bukan sahaja keputusan dia.</i>
110	<i>And then dia regret what happened afterwards.</i>
111	<i>Kebanyakan mereka dia menjadi krisis yang lebih teruk</i>
112	<i>sebab dia tak ada kemahiran untuk handle the after effect of the that particular event.</i>
113	<i>And then it's become traumatic.</i>
114	<i>So kalau dalam agama puan sendiri, apakah kepercayaan agama Hindu terhadap krisis yang berlaku kepada manusia?</i>
115	<i>Okey, I'm not really an expert to talk about aa Hinduism but Hinduism is actually a way of life.</i>
116	<i>And Hinduism is actually very internalized. Okey kita ada banyak jenis religion kan. Many religion.</i>
117	<i>Some religions they say okey you buat macam ni and then you can go to heaven.</i>
118	<i>Or you buat macam ni you akan masuk neraka.</i>
119	<i>Actually Hinduism ada juga dia cakap if you do something bad you're sinful.</i>
120	<i>Okey you buat dosa, you akan dapat dia punya emmm...apa...aa dia punya hukuman. Mungkin selepas you mati.</i>
121	<i>Or ataupun mungkin masa you hidup lagi. We call it karma.</i>
122	<i>So bila ada orang, ini terpulanglah aa sebagai pandangan dia sendiri kan.</i>
123	<i>Contohnya bagi saya, contoh ada somebody buat salah dekat saya.</i>

124	<i>And then I feel like you will pay for it.</i>
125	<i>And then something bad happened to that person so I might say you got this because you did this to me.</i>
126	<i>So it's actually a payback to you but universe did it. Right?</i>
127	<i>But if I have better understanding of my own religion, I will believe that person is paying for what they did, your thought yang you rasa orang tu patut dapat,</i>
128	<i>dia patut dapat hukuman untuk apa yang dia buat.</i>
129	<i>Even that thought is also wrong.</i>
130	<i>So, you will also pay for it because every single thing is actually dia ada satu apa aa every action got the reaction.</i>
131	<i>This is very true in Hinduism. So even your thought will manifest.</i>
132	<i>May be because you have better relationship with God, universe kan you think will manifest.</i>
133	<i>But, is it the right thing to manifest? Okey, itu yang kalau kita dengan orang lain.</i>
134	<i>But bila diri kita sendiri, we are more kind to ourselves right? Not everyone.</i>
135	<i>Ada orang dia very kind to themselves so dia rasa bila something berlaku kepada dia, benda jahat kan...</i>
136	<i>then dia fikir kenapa tuhan bagi saya ujian yang macam ni.</i>
137	<i>I couldn't go through that. Sebab dia tak boleh fikir dia mungkin ada buat something wrong and he's paid for it.</i>
138	<i>Tapi ada orang yang lebih moderate dia rasa, they still can be positive.</i>
139	<i>Okey God wouldn't test me with something I cannot endure.</i>
140	<i>Okey may be there is something good for me after this.</i>
141	<i>Okey so dia akan fikir macam tu. And then there will be the other part of a person yang agak pathetic</i>
142	<i>dia rasa ini semua adalah saya punya karma.</i>
143	<i>Whatever tempting people do to them also dia rasa maca ini adalah dosa saya masa kelahiran lepas.</i>
144	<i>Because in Hinduism we believe in rebirth, reincarnation.</i>
145	<i>So dia akan kata oh ini sebab saya punya dosa kelahiran lepas</i>
146	<i>ataupun ada something yang saya buat dosa pada orang.</i>
147	<i>And in Hinduism it is very well said you will pay for it even if you don't know that you're doing wrong thing.</i>
148	<i>Contohnya kita bersekongkol dengan somebody. Kita rasa kawan kit ani bagus dah ni saya kena pertahankan dia.</i>
149	<i>And then disebabkan dia saya mencaci orang lain.</i>
150	<i>Even you feel benda tu dah betul untuk you. You ada justifikasi</i>
151	<i>and then you buat unintentionally. You will still pay for it.</i>
152	<i>So if kita nak relate dengan trauma and crisis, although you will find aa I don't want to say they deserve it</i>
153	<i>but if you want to take it in a religion way I prefer to think if you want to make peace with the trauma and the crisis</i>
154	<i>then you may be thinking that's okey. May be something I did is coming back to me</i>
155	<i>or by this person doing this to me that is that person karma and they will also pay for it.</i>
156	<i>So you can look at in that way okey. Hinduism will never go and tell you like this is this...this is what you do, this is where you don't know.</i>
157	<i>Hinduism tak akan cakap macam tu sebab dia sangat internalize process</i>

158	<i>and you have to deal with aa whatever comes after you make that process.</i>
159	<i>Bila you cakap okey saya punya experience ni disebabkan saya buat something jahat</i>
160	<i>that you have to accept then you will be peaceful. If you cannot accept then you're going to suffer. Haa macam tu.</i>
161	<i>Oh.. faham. It's not really macam A and B. A cause B. Tak ada macam tu kan?</i>
162	<i>No such thing. Hinduism is actually self-control. Aa Hinduism is not religion control.</i>
163	<i>Okey puan, bolehkah puan ceritakan apakah pengalaman yang aa dalam puan mengendalikan kes trauma dan krisis yang tak dapat puan lupakan?</i>
164	<i>Hmmm (deep breath okey then I have to mention my first ever case.</i>
165	<i>Okey. Masa tu saya pelajar practical.</i>
166	<i>So this my first ever case trauma and crisis</i>
167	<i>and I'm still traumatized because of that, that time aa masa tu.</i>
168	<i>And then saya balik saya menangis.</i>
169	<i>Okey kita ada seorang kanak-kanak berumur 3 tahun, perempuan.</i>
170	<i>Dibawa oleh ibu dia. Ibu dia mengandung. Perut dia dah sarat.</i>
171	<i>I still remember the lady and she looked so pitiful.</i>
172	<i>Dia datang aa sebenarnya dia orang dirujuk oleh ENR laa , emergency punya.</i>
173	<i>Aa dia datang tu sebenarnya anak dia ada kesan apa what's that word in Malay</i>
174	<i>macam dia punya virginal tu memang ada kesan-kesan luka la.</i>
175	<i>So anak ni masa dia nak urin tu sangat sakit. Anak dia menangis-nangis.</i>
176	<i>So mak dia pergi tengok, dia tanya kenapa ni? Dan dia kata bapa buat.</i>
177	<i>So isteri dia terlalu dia tak boleh percaya what she's hearing sebab anak tu kecik dia ingat</i>
178	<i>you know la kita fikir bapa sepatutnya sayang anak. And then dia juga rasa dia punya relationship dengan suami dia sangat elok.</i>
179	<i>Kenapa suami dia nak tiba-tiba buat macam ni.</i>
180	<i>Dia rasa suami dia tiba-tiba tu macam stranger.</i>
181	<i>Tapi dia bawa anak dia datang hospital dekat emergency and then doktor dah check,</i>
182	<i>doktor kata memang betul ini adalah kesan aa sama ada dia gunakan jari atau masukkan alat apa sebagainya kan.</i>
183	<i>And then dia dihantar untuk kaunseling sebab dia nampak sangat traumatize masa tu.</i>
184	<i>Dia very unstable, keep on crying and dia mengandung sarat.</i>
185	<i>So doktor was worried anything might be happened to her or she might do something to herself.</i>
186	<i>So bila dia hantar tu imagine me being 23 years old macam tu, lebih kurang macam tu la masa tu.</i>
187	<i>And then tapi saya punya supervisor masa tu Mr S, he such a gem of person and he's very cool.</i>
188	<i>Actually masa tu la saya nampak sebenarnya when you're in trauma and crisis work</i>
189	<i>you need to be the source of patience and peace to your client.</i>
190	<i>So you tak boleh macam...aaa kenapa ni kak..? then you follow menangis. No.</i>
191	<i>Because when I did that the client also like terlalu dia pun...dia share saya punya vibe.</i>
192	<i>So dia macam jadi...itulah akak tak fikir macam ni macam ni macam ni.</i>
193	<i>But when that counselor came, and he spoke to her. He just listens to her and he asked her only one thing</i>
194	<i>it's okey, apa yang kamu nak saya buat untuk tolong kamu sekarang? That's only he asked her</i>

195	<i>and she became suddenly she became very calm. She started to think.</i>
196	<i>Then dia cakap saya nak keluar daripada rumah saya but saya tak tahu nak pergi mana.</i>
197	<i>That's when I realize that being a counselor there, you need to be the counselor.</i>
198	<i>You're not the person who's going to be traumatized or going to get absorbed into the crisis.</i>
199	<i>Although masa tu saya rasa macam alamak budak kecik kan. Kita tengok budak kecik macam angel kan.</i>
200	<i>Budak perempuan. Kita nak main. Comelnya. How can? Saya punya question.</i>
201	<i>How can the father do it to their own daughter kan. Then I pun composed myself.</i>
202	<i>And the aa Mr Sivaraju tu pun cakaplah okey Anju, you pergi telefon ni, telefon ni and then you panggil pekerja sosial perubatan.</i>
203	<i>Cuba tanya macam ni, macam ni, boleh tak.</i>
204	<i>And the we had to arrange things for her. And then she left.</i>
205	<i>I won't say happily but she completely seemed relief.</i>
206	<i>Like sometime yes, they want to talk about the trauma but the same time dia orang tak ada...</i>
207	<i>they are not entitled to indulge themselves into that emotion at that moment</i>
208	<i>because they need to see what's next.</i>
209	<i>This..this was the first trauma that I handle.</i>
210	<i>Walaupun masa tu saya dah buat sebab aaa fortunately saya ada supervisor yang macam tu kan.</i>
211	<i>So dia bagi instruction okey Anju, buat macam ni, buat macam ni.</i>
212	<i>It was a completely priceless learning point for me.</i>
213	<i>Tapi bila balik tu, I couldn't forget it, I did cry.</i>
214	<i>Then I told myself, the next time I see like this I'm going to be like Mr S.</i>
215	<i>Bila puan dapat kes tu apa yang puan fikir ketika itu?</i>
216	<i>Hah... actually I was thinking like any other person. Not like a counselor.</i>
217	<i>I was tingking like any other person so much of judgmental, so much into my emotion not the client's emotion.</i>
218	<i>Macam saya fikir macam mana bapa dia boleh buat macam ni eh? Kesiannya budak ni.</i>
219	<i>Kemudian saya fikir macam mana perasaan isteri dia.</i>
220	<i>Ditipu oleh suami dia, suami dia sendiri buat kat anak dia.</i>
221	<i>Kalau saya kat tempat dia, apa yang saya akan buat.</i>
222	<i>These were my thinking. That are not helpful.</i>
223	<i>So what was your feeling masa tu?</i>
224	<i>Oh actually it's mixed up. Marah, confused, a lot of questions, curious. Very curious.</i>
225	<i>And very self-absorb (giggling). I couldn't handle my emotion. I was not ready for it.</i>
226	<i>Selepas tu how you improve yourself untuk berdepan denagn situasi macam ni lagi?</i>
227	<i>Okey, then I knew... actually it was my first week at the hospital.</i>
228	<i>Oh the first week...</i>
229	<i>Yes, so I realize hospital is not the place for you to go if you don't have heart to handle it.</i>
230	<i>Hospital is...hospital is the apedom of trauma and crisis.</i>
231	<i>So if you're going there, you have to be ready.</i>
232	<i>And one thing about me is I'm a very self-motivated person and I learn very fast.</i>
233	<i>So when I... although I sad. I did la. Balik tu saya macam menangis kan.</i>

234	<i>Then told my mother, ma, you know or not like this like this happened. And then my mother was...</i>
235	<i>Of course she's also like me because my mother is not a counselor.</i>
236	<i>My goodness, really? tu la saya pun selalu dengar cerita-cerita macam ni tapi sekarang you kena deal la macam tu.</i>
237	<i>She couldn't, she couldn't do anything to me but she's listening to me. Such a good thing.</i>
238	<i>Then apa yang saya fikir sebelum saya tidur.</i>
239	<i>Saya tengok oooh Mr S tengok eh dia boleh cakap cam ni cam ni eh dengan klien ni.</i>
240	<i>ok good. Next time I want to be that kind of counselor,</i>
241	<i>I'm going to be the source of calmness, peace for that client. Itu yang saya fikir.</i>
242	<i>And the next day I was prepared.</i>
243	<i>So dekat hospital, you have to be ready because they can call you from emergency anytime of time.</i>
244	<i>Orang yang rasa suicidal they can actually walk to the emergency.</i>
245	<i>Dia boleh cakap I feel suicidal. The doctors will talk to them.</i>
246	<i>Then they will call the counselors, can you handle this client?</i>
247	<i>Or you will find the client is too violent or anything</i>
248	<i>dia akan hantar dekat psychiatrist ward.</i>
249	<i>They just put them there. So I was ready for it.</i>

APPENDIX E: TRANSCRIPT REVIEW CONFIRMATION FORM



LAMPIRAN E

BORANG PENGESAHAN PENYEMAKAN TRANSKRIPSI TEMU BUAL (TRANSCRIPT REVIEW CONFIRMATION FORM)

Saya telah menyemak transkripsi yang telah dituliskan oleh Cik Nur Husna binti Mohd. Hafiz. Saya bersetuju untuk dimuatkan dalam tesis PhD dengan penyuntingan yang telah dipersetujui bersama. Saya mengesahkan bahawa transkripsi ini adalah hasil temu bual yang telah dijalankan oleh Cik Nur Husna binti Mohd. Hafiz ke atas saya.

(I have checked the transcript written by Ms. Nur Husna binti Mohd. Hafiz. I agreed to be included in the PhD thesis with some editing agreed by both parties. I confirm that this transcription is the result of the interview conducted by Ms. Nur Husna binti Mohd. Hafiz on me)

Saya yang benar,
Yours faithfully,

Tandatangan/ signature:

Nama/ name: WILLIAM LING HAN SENG

No. KP/ IC. No. : 830703-13-5255

Tarikh/ Date: 8/3/2022

APPENDIX F: AUDIT TRAIL

Phase	Research Activities	Date/ Duration
Registration for Ph.D. study	Enrolling as a USIM student	14 October 2020
Proposal Preparation	Conducting a comprehensive review of existing literature and studies	Oktober 2020 – March 2021
	Identifying the gap in knowledge	
	Developing theoretical framework, research question, and research objectives	
Methodology Designation	Designing the overall approach of the qualitative study including a specific research design and methodology aligned with research questions.	
Sample Selection	Designing sampling method	March – May 2021
	Establishing the inclusion criteria for selection	
	Identifying suitable candidate	
	Getting consent from potential participants and their agencies	
Data collection Preparation	Determining data collection methods	May – August 2021
	Preparing interview protocol, informed consent form, and other related documents.	
	Assigning two experts from USIM specifically Dr. Nurhafizah Mohd Sukor and Dr. Dini Farhana Baharudin to validate the interview protocol	
	Receiving comments from Dr. Dini Farhana Baharudin on 21 May 2021	
	Receiving comments from Dr. Nurhafizah Mohd Sukor on 31 May 2021	

	Revising the interview protocol with the supervisor's guide	
	Setting appointments with research participants	
Proposal Defense	Defending proposal	9 September 2021
	Preparing corrections of the proposal	September – October 2021
Pilot Study	Conducting an in-depth interview with Participant 1 (Zudi) in face-to-face mode	17 November 2021
	Conducting an in-depth interview with Participant 2 (Lai) in an online mode	19 November 2021
	Conducting an in-depth interview with Participant 3 (Ram) in face-to-face mode	22 November 2021
	Conducting an in-depth interview with Participant 4 (Wince) in an online mode	24 November 2021
	Conducting data analysis to form meaning units	December 2021 – January 2022
Revision of Interview Protocol	Revising interview protocol for improvement	
	Restructuring the flow of interview protocol	
Data Collection	Conducting an in-depth interview with Participant 5 (Arul) in face-to-face mode	20 January 2022
	Conducting an in-depth interview with Participant 6 (Athy) in face-to-face mode	25 January 2022
	Conducting an in-depth interview with Participant 7 (Geena) in an online mode	27 January 2022
	Conducting an in-depth interview with Participant 8 (Reina) in an online mode	27 January 2022

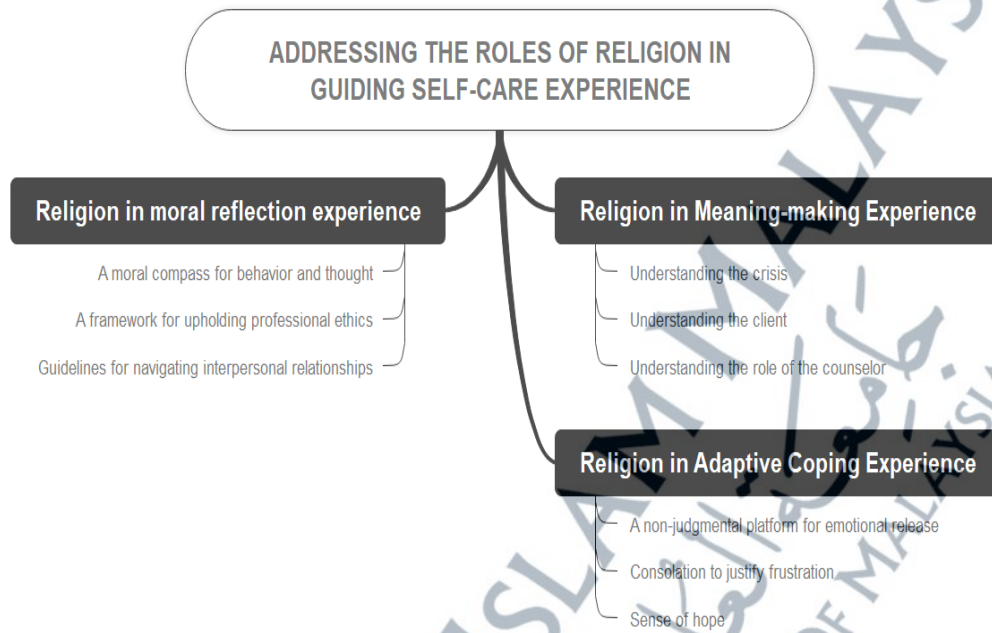
	Conducting an in-depth interview with Participant 9 (Nora) in face-to-face mode	7 February 2022
	Conducting an in-depth interview with Participant 10 (Ying) in face-to-face mode	11 February 2022
	Conducting an in-depth interview with Participant 11 (Anju) in face-to-face mode	17 February 2022
	Conducting an in-depth interview with Participant 12 (Dil) in an online mode	3 March 2022
	Conducting a second in-depth interview with Participant 1 (Zudi) in face-to-face mode	16 March 2022
	Conducting an in-depth interview with Participant 13 (Azna) in an online mode	21 March 2022
Data Analysis and Interpretation	Transcribing interview verbatim	November 2021 – April 2022
	Analyzing the data	November 2021 – August 2022
	Translating participants' quoted statements	August 2022 – February 2023
	Validating the translation	April 2023
Data verification	Data saturation checking	November 2021
	Performing member checking	November 2021 – April 2022
	Conducting Interrater Review	July 2023
	Conducting Peer Review	October 2023
Report writing	Documenting and reporting research findings in detail, adhering to thesis guideline	November 2022 – November 2023

APPENDIX G: ESTABLISHING RIGORS AND TRUSTWORTHINESS

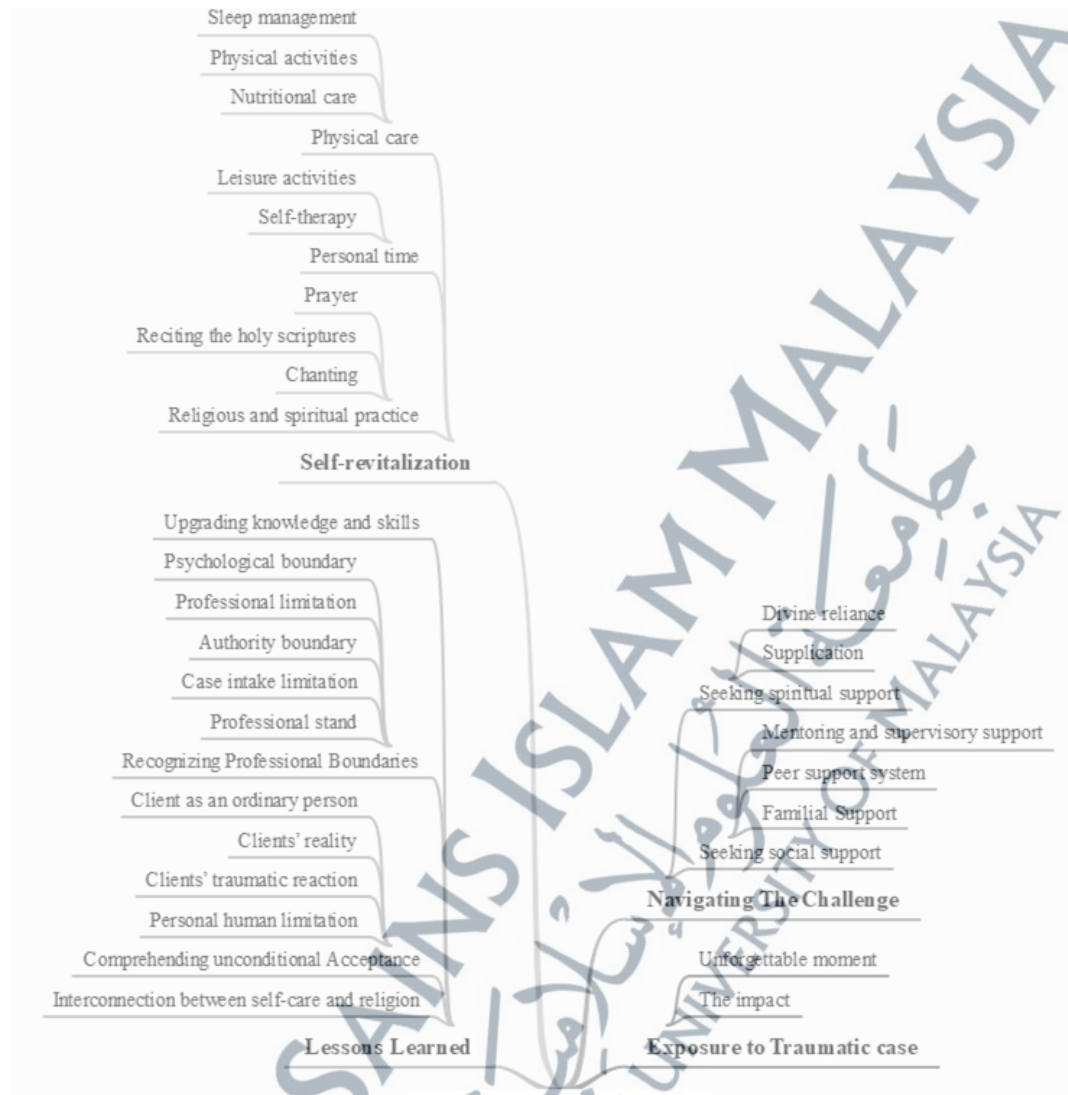
Method	Process and Procedure	Date
Member checking	Receiving Transcript Review Confirmation Form from Research Participant 1 (Zudi)	22 November 2021
	Receiving Transcript Review Confirmation Form from Research Participant 2 (Lai)	24 November 2021
	Receiving Transcript Review Confirmation Form from Research Participant 3 (Ram)	8 March 2022
	Receiving Transcript Review Confirmation Form from Research Participant 4 (Wince)	8 March 2022
	Receiving Transcript Review Confirmation Form from Research Participant 5 (Arul)	24 January 2022
	Receiving Transcript Review Confirmation Form from Research Participant 6 (Athy)	28 January 2022
	Receiving Transcript Review Confirmation Form from Research Participant 7 (Geena)	24 March 2022
	Receiving Transcript Review Confirmation Form from Research Participant 8 (Reina)	24 March 2022
	Receiving Transcript Review Confirmation Form from Research Participant 9 (Nora)	10 February 2022
	Receiving Transcript Review Confirmation Form from Research Participant 10 (Ying)	21 February 2022
	Receiving Transcript Review Confirmation Form from Research Participant 11 (Anju)	8 March 2022

	Receiving Transcript Review Confirmation Form from Research Participant 12 (Dil)	7 March 2022
	Receiving Transcript Review Confirmation Form from Research Participant 13 (Azna)	19 April 2022
	Receiving second Transcript Review Confirmation Form from Research Participant 1 (Zudi)	14 April 2022
Interrater Reliability Coefficient	Receiving Cohen's Kappa Coefficient Reliability Validation Form from the first reviewer, Dr. Muhammad Asyraf Che Amat from Universiti Putra Malaysia (UPM).	10 July 2023
	Receiving Cohen's Kappa Coefficient Reliability Validation Form from the second reviewer, Associate Professor Dr. Nor Shafrin Ahmad from Universiti Sains Malaysia (USM).	3 July 2023
	Receiving Cohen's Kappa Coefficient Reliability Validation Form from the third reviewer, Dr. Mazita Ahmat from Universiti Perguruan Sultan Idris (UPSI).	19 July 2023
Audit Trails	Preparing audit trail documentation, consisting of four separate files: documentation related to proposal development, interview and participant selection process, interview transcripts, and rigor and trustworthiness of the research. These documents were used during the peer review sessions.	August – September 2023
Peer Review	Peer review evaluation of the research process by Dr. Norazura Ahmad, Psychology Officer from the Public Service Department.	6 October 2023
	Peer review evaluation of the research process by Dr. Wan Nurayunee Wan Zulkifli, Psychology Officer from the Social Welfare Department	12 October 2023

APPENDIX H: THEMATIC ANALYSIS MAP



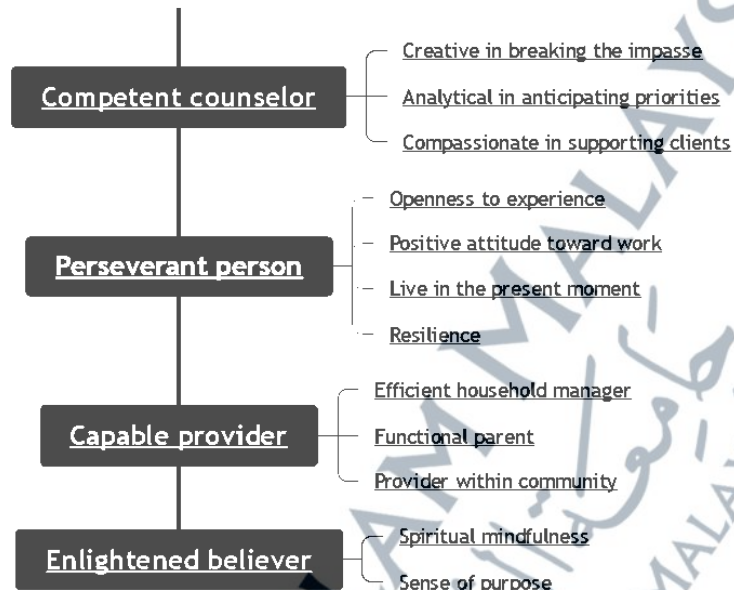
THEMATIC ANALYSIS MAP FOR THEME 1



EXPERIENCE OF SELF-CARE IN CRISIS WORK

THEMATIC ANALYSIS MAP FOR THEME 2

Empowerment of Functioning



THEMATIC ANALYSIS MAP FOR THEME 3