

MENTAL HEALTH STATE OF INSTRUCTORS IN A WFH SETUP

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DOI No. - 08.2020-25662434

Abstract

With the new regular setup in a pandemic because of the Work from Home (WFH) arrangement established by the higher education institutions, mental health among teachers has been a problem. This study aimed to analyze the instructors' mental health within the WFH system. The 100 respondents were purposefully chosen and divided into two groups of 50 men and 50 women using a quantitative descriptive approach. A test known as the Mental Health Inventory (MHI-38; Davies, Sherbourne, Peterson, & Ware, 1998) was modified by the researchers. Descriptive analysis and the t-test were used to assess the collected data. The findings indicated that respondents' mental health was low and that there were no notable variations between them. The results showed that respondents occasionally felt quiet and calm, felt emotionally secure, occasionally or never felt upbeat and joyous, and virtually never felt content with their personal lives. Additionally, respondents frequently or very frequently felt tight, downhearted, and blue, had trouble focusing, were worried and found it difficult to settle down, and felt downhearted, melancholy, and lonely. The development of students' personalities is negatively impacted by the instructors' bad mental health both indirectly and occasionally directly. To address the mental, psychological, and health-related issues of instructors, this study suggests that more guidance office services be widely advertised and that more mental health-related programs be developed.

Keywords: Mental health, WFH Set-up, Gender Differences

INTRODUCTION

One of the many issues making headlines around the world during this pandemic is mental health. The notion of the work-from-home arrangement was developed in response to the considerable shift in human activities necessary to stop the spread of COVID-19, which has led to several mental health issues. According to Kim et al. (2020) and Pérez-Fuentes et al. (2019), COVID-19 perceptions of threat and risk were found to have an impact on negative mental states and emotions (2020).

It's common to use the word "mental" to describe anything other than a person's purely cerebral functioning. It includes all of a person's emotional affective moods and one's interpersonal relationships mirror the harmony of their sociocultural surroundings.

Similarly, "health" refers to more than just bodily well-being. According to Kaur, it also describes a person's intra-physic balance, or how their physical make-up interacts with the environment and their social environment (2007). For instance, a person who is intelligent and comprehends what has to be taught but occasionally finds it difficult to convey it due to problems adjusting to their environment.

Similar to how mental health implies a wholesomeness of the body, mental health is equivalent to "the wholesomeness of the mind." As a result, just as physical health concerns the health and proper operation of the body's organs, mental health also addresses these issues. A state of psychological wellbeing or the absence of a mental illness is referred to as mental health. Mental health may involve an

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individual's capacity to enjoy life and establish a balance between living activities and attempts to acquire psychological resilience, as defined by 'positive psychology' or 'holism.' Mental health may also be described as the ability to express emotions and the ability to adjust to a variety of demands. According to WHO (2022), mental health displays a person's resiliency, abilities to learn and work, and contribution to the community. It is an essential component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in.

Implementing enhanced community quarantine (ECQ) has shifted face-to-face work to Work from Home Set-up (WFH). This set-up is adjusting the workplace in the comfort of our homes. Many workers in the adjustment difficult due to the lack of proper equipment, furniture, and the extension of working hours. Working in a prolonged WFH setup is bad for our bodies and general health, claims KMC Global Research (2020). To avoid strain from working in a precarious position, one needs to be extra attentive with posture and routine.

In the Philippines, mental illness is regarded as one of the major disabilities. The subject of global mental health has recently come to light. It is defined as "the area of study, research, and practice that prioritizes improving mental health and achieving mental health equity for all people globally." According to Martinez's study (2020), the Philippines has the third-highest rate of mental health issues in the Western Pacific Region, with around 6 million Filipinos suffering from depression and/or anxiety.

According to AlAteeq et al., a novel viral disease known as COVID-19 was declared a public health emergency of major global relevance in January 2020. According to a report from the World Health Organization dated September 11, 2020, there have been 28.040.853 confirmed cases of COVID-19, with 906.092 fatalities (2020). A total of 1.4 million confirmed cases have been reported to the Philippine government.

The coronavirus has been widely and persistently disseminated, making the Philippines one of Asia's hardest-hit nations. Worldwide efforts were made to get ready for the health, economic, and educational issues that the highly contagious virus would bring. According to the study by Moralista & Oducado, COVID-19 cases are increasing in the Philippines despite the government's valiant efforts to stop the disease from spreading (2020). According to Zhang & Ma's study, it is crucial to know how COVID-19 impacts people's lives in severely affected countries like the Philippines (2020). According to Kim et al. (2020); Pérez-Fuentes et al. (2019); COVID-19's danger and risk perceptions, negative mental states, and emotions are influenced by these perceptions (2020). In addition to the apparent physical issues, Rabaca et al. claim that COVID-19's psychological effects offer significant hazards and dangers to mental health and well-being since higher levels of worry and stress are exacerbated by the continual ambiguity of the situation (2020).

According to Alidong & Toquero (2020), the pandemic's profound impact on education resulted in unexpected concern among teachers due to forced school closures and social isolation that occurred all over the world. According to Allen et al., teachers are going through an uncertain time in both their personal and professional life (2020).

The change of the Philippine school systems to a "new normal" vector brought about certain mental and physical transitional challenges. Everyone is affected by the epidemic in different ways. Examples of psychological difficulties include stress, anxiety, and depression. According to DepEd, DRRMS, depression may be pre-existing or may be brought on by the crisis. It can also become severe enough to interfere with daily activities (2020). In order to provide better care and service to others, educators



must first prioritize their own needs, according to Rayco. "Self-care is merely a concept, not a selfish deed," she says (2020). It is crucial that teachers have good physical and mental health since they are crucial to the success of their students.

The Philippine Mental Health Act was approved by Congress in our nation in 2017 and became a law on June 21st, 2018. The Philippines was one of a small number of nations without mental health legislation before this bill. The mental health bill offers basic mental health care in public venues as well as psychiatric, psychosocial, and neurological services in all hospitals. Under its mandates, this act protects the following; right to freedom from discrimination, right to protection from torture, cruel, inhumane, and degrading treatment; right to aftercare and rehabilitation; right to be adequately informed about psychosocial and clinical assessments; right to participate in the treatment plan to be implemented; right to evidence-based or informed consent; right to confidentiality; and right to counsel, among others. The Act also incorporates rights for 'concerned individuals,' incorporating patient relatives and mental health professionals.

The Commission on Higher Education (CHED) has decided to deploy the flexible learning delivery mode for higher education as a result of the extraordinary disruptions in people's lives across the globe brought on by COVID 19. In this flexible learning model, the teachers chose to deliver the lessons from their homes while utilizing technology. Prior to the quarantine, it was alleged that Filipino teachers wanted to spend more time with their families, according to Talidong & Toquero (2020). The relationship between teachers in upper secondary and high school and workplace stress, mental health, and coping mechanisms is examined by Kaur (2007). According to the research, instructors occasionally become stressed out as a result of their increasing workload, additional responsibilities, and physical stressors in the classroom. Conversely, teachers who maintain good mental health employ coping strategies to lessen the consequences of work-related stress. Through leisure pursuits like watching television, listening to music, and getting social support from friends, they seek relief from mental tension. The results also indicated a detrimental relationship between job stress and mental health. The effects of workplace stress and coping mechanisms are frequently negative. A positive and significant association exists between coping mechanisms and mental health.

To ascertain the impact of mental health on the level of burnout experienced by teachers at various levels of education, Srivastava and Khan (2008) conducted research. They found that teachers with average or good mental health were less likely to burn out than instructors with poor mental health. In a different study, Srivastava (2010) discovered that personality types and attributes have an impact on teachers in primary and secondary schools, with extrovert teachers reporting better mental health than introvert teachers. Additionally, according to Kumar (2013), results from the t-test show that teachers in urban elementary schools had higher mean mental health scores (t = -16.06; p.01), whereas teachers in rural elementary schools had lower mean mental health scores. Therefore, being aware of one's own mental health helps elementary school teachers handle challenging situations more skillfully and puts them in a better position to evaluate primary school pupils' undesirable behavior.

The WFH setup has been adopted at the majority of the institutions with the new configuration of the educational system. The standard routine techniques in instructing have been drastically altered by this platform. Instead of receiving instruction in person as normal, students now work from home while performing a variety of housework. Because of the close-knit family ties in the Filipino society, work from home setup was first appreciated. However, the length of the Work from Home Setup led to a number of physical and mental health problems that had an impact on the female teachers from



different universities. Teachers' physical and mental health has suffered as a result of a lack of exercise and prolonged use of laptops and other technology. The ability of teachers to manage and lead their classrooms holistically depends heavily on their mental health and stress levels. When it comes to delivering its curriculum, services, and opportunities for skill development to students, the Department of Education (DepEd) relies heavily on its teachers. Despite the fact that Asio & Bayucca believe that schools are not yet ready to use remote education (2021).

Many teachers in every institution have mental health problems, which have been made more prevalent by this conundrum. The university's guidance services were made aware of social media posts about the mental health problems that instructors were having. The recent focus on sadness and anxiety has brought attention to the mental health concerns that educators face. In this light, it is important to investigate the instructors' mental health in the WFH system at this point in the pandemic.

OBJECTIVES

This study aimed to explore the mental health state of male and female instructors in work from home set up.

Specifically, it sought to answer the following objectives;

- How do female instructors' mental health state in a WFH setup be described in this pandemic?
- How do male instructors' mental health state in a WFH setup be described in this pandemic?
- Is there a significant difference among female and male instructor's mental health in a WFH setup in this pandemic?

III. METHOD

Research Design

The study utilized a quantitative descriptive design that collected quantifiable information for statistical analysis of the population sample.

The technique utilized for selecting the sample was purposive sampling. The respondents were selected with the following criterion; (a) instructors who had experience with WFH Set-up, (b) have at least 18 units of teaching loads (c) have at least rendered.

Six months in the institution. The researchers selected 100 respondents from the university's main campus and satellite campus; for the final testing, 100 participants were equally divided into two groups, male and female (50 in each group).

Instrument

The researchers adapted an instrument from **Mental Health Inventory** [MHI-38; Davies, Sherbourne, **Peterson, & Ware (1998)**]. The questionnaire was modified into categories of level of satisfaction and level of dissatisfaction. All 38 MHI items are also modified and scored on a six-point scale (range 1-6), wherein 1-always, 2-very often, 3- often,4- sometimes, 5-almost never, 6- never.

Data Collection

The researchers sought permission from the respondents of concerned institutions by sending a formal letter via email; data was collected via a google form. The respondents were briefed about the nature and the purpose of the research, as stated in the attached letter, in order to receive reliable data. They were assured about the confidentiality of the data. Instructions were given regarding the questionnaires. The scale was filled by the participants while they were on duty and were collected immediately after



completion.

Data Analysis

Descriptive analysis and t-test were used to assess the instructor's mental health. The data was analyzed with the help of SPSS-25. Obtained statistical results were treated, analyzed, and interpreted by the statistician.

participants in the data gathered. As stated by Arifin (2018), In all scientific studies, it is important to protect human subjects by following ethical guidelines; because of the in-depth aspect of qualitative possible costs of research and the expected advantages of research, ethical considerations must be considered at all levels of qualitative research. As a result, when conducting the research study, the researchers adhere to a series of ethical guidelines in order to maintain the participants' confidentiality as well as the outcome findings in the said study. Data privacy act will be strictly observed.

RESULTS AND DISCUSSIONS

The result of the statistical treatment of the study is presented with the help of tabulation, showing the descriptive statistical values for the said variables. The results are based on the scale provided in the adapted instrument; 1-always, 2-very often, 3- often, 4- sometimes, 5-almost never, 6- never. The instrument was categorized into two tables indicating their level of satisfaction and level of dissatisfaction concerning their mental health state.

RESULTS	Level Of Satisfaction	Level of Dissatisfaction				
GRAND	4.38	2.91				
MEAN						
STANDARD	1.0904	1.2887				
DEVIATION						

Table 1: Level of Satisfaction/Dissatisfaction

Table 1 shows descriptive statistics of a grand mean of 4.38 that fall between sometimes and almost never on the descriptive interpretation of the data. The mean results revealed that the respondents are sometimes or almost never satisfied with their personal life; that they sometimes or never felt that there were people close to them; that they sometimes or never generally enjoyed the things they do, felt loved and wanted, felt control of their behaviour, thoughts, emotions, feelings, felt calm and peaceful, felt emotionally stable and sometimes or never felt cheerful and light-hearted.

A combined mean of 2.91 was yielded from respondents, which means that the respondents very often or often felt tense or high-strung, became confused, felt they had nothing to look forward to, felt downhearted and blue, felt left out and crying during the past months, easily forget, felt restless, fidgety or impatient, been moody or brooded, got rattled, upset and flustered, had troubled to keep their attention, been anxious and difficult to calm down, had low spirits, depressed and felt isolated.

Table 2: Level of Significance in Mental Health (Level of Satisfaction)

Level of Significance (Level of Satisfaction)						
Gender	Mean	Std. Deviation	t-value	р	Significance	
Male	4.31	0.2346	0.9221	0.367	Not significant	
Female	4.45	0.4004				

Table 3 illustrates that there is no significant difference between male and female respondents' levels of



satisfaction (t = 0.9221; $p \le 0.367$). Both genders revealed that the respondents are sometimes or almost never satisfied with their personal life; that they sometimes or never felt that there were people close to them; that they sometimes or never generally enjoyed the things they do, felt loved and wanted, and felt control of their behavior, thoughts, emotions, feelings, felt calm and peaceful, felt emotionally stable and sometimes or never felt cheerful and light-hearted. With that, there is no significant difference between the mental health state of male and female respondents. Otten et al. (2021) stated that there adifferences that are found between men and women in the universality of their emotions in 37 countries

that are found between men and women in the universality of their emotions in 37 countries.

Level of Significance (Level of Dissatisfaction)							
Gender	Mean	Std. Deviation	t-value	р	Significance		
Male	2.95	1.3009	0.641	0.524	Not significant		
Female	2.86	1.2764					

Table 2.1 Level of Significance on Mental Health (Level of Dissatisfaction)

Table 2.1 shows no significant difference between male and female respondents' levels of dissatisfaction (t = 0.641; p \leq 0.524). Male and female respondents experienced very often or often felt tense or high-strung, became confused, felt they had nothing to look forward to, downhearted and blue, left out and crying during the past months, easily forgotten, felt restless, fidgety, or impatient, been moody or brooded, got rattled, upset, and flustered, had troubled to keep their attention, been anxious, and difficulty to calm down had low spirits, depressed, and felt isolated. The study resulted that there is no significant difference between the mental health state of male and female respondents.

CONCLUSION AND RECOMMENDATION

The male and female instructors experienced a poor state of mental health. It was revealed that the respondents sometimes felt calm and peaceful, felt emotionally stable, sometimes or never felt cheerful and light-hearted, and almost never satisfied with their personal life. Further, respondents experienced very often or often felt tense downhearted, and blue had trouble keeping their attention, were anxious and had difficulty calming down, had low spirits, depressed, and felt isolated.

The poor mental health of instructors has a negative impact indirectly and sometimes directly on the improvement of a learner's personality. All the university administrators and higher authorities must take an eager interest in growing and maintaining the good mental health of instructors and students, as Anand opines (1989).

Therefore, promoting the guidance services established in the guidance office and more counseling programs for university instructors is necessary. It will help address instructors' mental, psychological, and health-related problems. Furthermore, workshops, seminars, group discussions, and conferences are recommended for mental health promotion. The good mental health of instructors must be treated as an important qualification of academic competence.

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