

Exploring the Anxiety Level and Emerging Issues of WFH Mothers Amidst the Pandemic

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ABSTRACT

The COVID-19 pandemic continues to evolve, as does the understanding of the SARS-CoV-2 virus and the response needed to control the spread and impact of the virus (WHO, 2022). The global public health risk was very high in WHO's most recent global rapid risk assessment, conducted on 07 January 2022. The spread of COVID-19 has thrown work and life into terribly uncertain waters. The lockdowns and work-from-home setups brought the already precarious position–family balance into direct conflict for many working parents, with even more significant impact on mothers.

A mixed-method convergent parallel design was utilized to examine the anxiety level using the Burns Anxiety Inventory (BAI) and a questionnaire to explore the issues of work-from-home mothers amidst the pandemic. Quantitative and qualitative data were collected simultaneously and weighed equally in the analysis phase. This study used the epistemological lens as its theoretical contribution to understand and help working mothers cope with stress and be used as a basis for implementing mental health programs amidst and beyond the COVID-19 pandemic. Participants for the quantitative and qualitative phase included work-from-home mothers (N = 276) affiliated in the academic sector in Metro Manila, Philippines.

Results showed most of the respondents scored from (11-20), 57 or 20% have Mild Anxiety while (5-10) 51 or 18% have Borderline Anxiety, followed by respondents (31-50) 50 or 18% with Severe Anxiety, and 24 or 8% of the respondents scored (51-99) with Extreme Anxiety or Panic. This means that

despite the challenges brought about by the pandemic, the majority of the work from home mother respondents still managed to cope and keep up with the work-life difficulties, with only 8% of the sample population suffering from Extreme Anxiety or Panic. The results of this study are expected to give insights for management as it provides care for the mental health of the mother employees through effective and sustainable mental health programs amidst and beyond the pandemic. Emerging issues were time management, explicitly setting boundaries between mother roles and work, non-conductive workspace, and technology-related issues. However, mothers appreciated the opportunity to spend more time with family the convenience and safety of working from home.

Keywords: *Covid-19; Pandemic; Anxiety, work-from-home mothers*

BACKGROUND

The COVID-19 pandemic continues to evolve, as does the understanding of the SARS-CoV-2 virus and the response needed to control the spread and impact of the virus (WHO, 2022). The global public health risk remained very high in WHO's most recent global rapid risk assessment, conducted on 07 January 2022. The spread of COVID-19 has thrown work and life into terribly uncertain waters. In the Philippines, the lockdowns brought the already precarious work–family balance into direct conflict for many working parents, once again with a more significant impact on mothers. While remote working is a well-established aspect of corporate work policies, it has never been attempted at such an unprecedented scale until now. Many researchers acknowledge the differentiated nature of homeworking. Homeworkers are diverse in demographic terms and about gender, skills, and income. In addition, not all homeworkers successfully negotiate the social, personal, temporal, and physical transitions between the boundaries of home and work (Crosbie & Moore, 2004).

Some possible difficulties and struggles come with working from home and other life commitments. Homeworking can increase the permeability of the boundary between work and family domains, making attempts to juggle work and family schedules more complex. (Crosbie & Moore, 2004). Pursuing a balance between work and the rest of our daily lives is a recent concern. It has emerged amid growing concerns over contemporary demographic developments that are bringing about dramatic changes in the gender and age of the workforce (European Commission, 2002; Labour et al., 2001).

On the other hand, women have long reported higher levels of psychological distress than men (Miller, June 2020). However, the COVID-19 pandemic is associated with even greater anxiety and depression among women with children to care for. Women

shoulder the planning, the organizing, and the remembering of everything significant. The mental load that comes with these tasks has grown exponentially in recent years of quarantined life. Parents who could work from home also face new challenges around establishing a new work routine and creating a workspace conducive to productivity while balancing child-care duties and homeschooling (Catalyst, 2020).

Being a working mother is hard – the pandemic made it even harder. Those lucky enough to have avoided or recovered from the virus are juggling the demands of working from home and child care with an intensity that has never existed. They accomplish household chores and prepare three to five meals daily while answering emails and phone calls. They are policing the children’s screen time while attending Zoom meetings and webinars and dealing with the waves of guilt or stress that come with not doing them exceptionally well. Women have shouldered more childcare and housework responsibilities than men since long before the coronavirus era. However, with schools and daycare centers closed, the COVID-19 pandemic has highlighted and exacerbated such disparity. Even with men pitching in more, women are scrambling to balance their work with household obligations (Goldberg, 2020).

An article on SMB Mental Health in the COVID Era Paychex Survey (2020) revealed that a notable percentage of employees have experienced a decline in their mental health compared to pre-COVID-19 levels across many issues. Employers should be aware of the percentage of employees who reported feeling worse about the following issues: Increased anxiety: 31%; Decreased enthusiasm: 24%; Reduced focus: 21%; Increased depression: 20%; Decreased teamwork: 16%

Added to conventional stressors of parenting, stressors caused by the threat or reality of parental unemployment, financial insecurity, low levels of social support, increased social isolation, lack of leisure time, and lack of alone time characterizing pandemic-related conditions can amplify normative stress and trigger significant psychological distress (Brooke et al., 2020; Parkes et al., 2015; Sorkkila & Aunola, 2020). Research has consistently demonstrated a link between parental burnout and increased rates of exhaustion, somatic complaints, poor quality sleep, a sense of incompetency as a parent (Mikolajczak et al., 2017, 2018; Roskam et al., 2017, 2018); feeling of being trapped in an uncomfortable situation with no way out (Hubert & Aujoulat, 2018); parental depression and anxiety, and child neglect and abuse (Cluver et al., 2020; Mikolajczak et al., 2017, 2018). Further, research indicates that in the face of social distancing requirements and the resulting unavailability of previous social support and assistance sources, many parents are experiencing burnout (Griffith, 2020). Another US study demonstrated worsening parental mental health functioning throughout the pandemic, with 1 in 4 parents reporting increased psychological distress (Patrick et al., 2020). Lastly, another study found that 1 in 4 quarantined parents report negative mental health symptoms compared to 1 in 20 non-quarantined parents (Brooks et al., 2020).

Researchers from the University of Alberta interviewed 900 new mothers and found that 40.7% of new moms had depressive symptoms compared to 15% before the pandemic. The study also said that 72% of new mothers felt moderate to high anxiety, a 43% increase from the number of new mothers reporting anxiety before the pandemic (Carrington, 2020).

However, not all parents experiencing cumulative stressors from COVID-19 may be at risk of higher perceived stress, which may result in anxiety, suggesting that protective factors may mitigate the impact of COVID-19 on mental health. Specifically, adaptive coping strategies and supportive family environments may serve as protective factors for families experiencing stress and may differentially influence mental health. For example, perceived control is critical in understanding stress and coping (Dijkstra & Homan, 2016). Indeed, the belief that one influences life events is related to different psychological and behavioral outcomes. Perceived control over present events is associated with decreased overall stress, anxiety, and depression and better adjustment across situations (et al.; Frazier et al., 2004; et al.). Similarly, other coping strategies, such as acceptance or the ability to accept negative thoughts or experiences without judging them, are strongly and negatively associated with perceived stress (Donald & Atkins, 2016). In addition to adaptive coping strategies, supportive family environments may also be promotive in the context of parenting. Previous research shows that mother's perceptions of family support are associated with less parenting stress; thus, parents with more support can better engage in positive parenting (Deater-Deckard, 1998; Sanders et al., 2014).

Mental health problems are increasingly recognized as a significant and concerning secondary effect of the COVID-19 pandemic. Research on previous epidemics/pandemics suggests that families, particularly mothers, may be at increased risk, but this population has yet to be examined. The current study described prevalence rates of maternal depressive and anxiety symptoms from an online convenience sample during the COVID-19 pandemic, identified risk and protective factors for elevated symptoms, and (3) described current mental health service use and barriers (Cameron et al., 2020). Results further show clinically relevant depression was indicated in 33.16%, 42.55%, and 43.37% of mothers of children aged 0-18 months, 18 months to 4 years, and 5 to 8 years, respectively. Prevalence of anxiety was 36.27%, 32.62%, and 29.59% for mothers across age groups, respectively. Binary logistic regressions indicated significant associations between risk factors and depression/anxiety across child age groups.

Although COVID-19 is not the only global public health challenge threatening society, it will likely negatively impact parents and their children. At the same time, it is necessary to focus on the current crisis; maternal mental health must be protected through research, advocacy, and practice. The greater awareness of the impact of anxiety as the human race experiences a global pandemic offers an opportunity to understand

better what mothers go through and the issues and concerns they deal with as they work from home during the pandemic.

Despite a robust literature on risk and protective factors implicated in parent-perceived stress, little research has been done to examine the extent to which cumulative stressors from global pandemics affect anxiety levels and impact motherhood. This study examined maternal mental health, specifically the anxiety levels and the issues and concerns mothers face while working from home during the COVID-19 pandemic. As such, it offers evidence to address the following research questions: (1) What is the profile of working mothers according to Age, Marital Status, Number of children, and Income? (2) What is their level of Anxiety? 3) What do mothers face the issues as they work from home? (4) What is the significant relationship between the level of anxiety about their Age, Marital Status, and Number of children? The findings of this study may serve as a guide to further understand and help working mothers cope with stress and be used as a basis for implementing maternal health services amidst and beyond the COVID-19 pandemic.

METHOD

Sample

With the approval of the appropriate Institutional Ethics Board Committee and in collaboration with a state university, a total of 276 work-from-home mothers (married or living with heterosexual partners and having children) served as the sample for both the quantitative and qualitative parts of the study. An online survey was carried out through a Google Form. All participants filled out a form for informed consent before completing the Survey and the Burns Anxiety Inventory (BAI). Likewise, the researchers guarantee the anonymity of data.

MEASURES

Socio-Demographics

Through the semi-structured survey questionnaire, participants provided information regarding their age, marital status, number of children, and income.

Anxiety

The **Burns Anxiety Inventory (BAI)** is a 33-question multiple-choice inventory that measures the common symptoms of anxiety and panic.

Issues

To assess the issues of work-from-home moms, the participants were asked to answer the questions: (1) What is their experience working from home during the pandemic?

Data Analysis

A mixed-method convergent parallel design examined work-from-home mothers' anxiety levels and issues amidst the pandemic. Quantitative and qualitative data were collected simultaneously and weighed equally in the analysis phase.

The statistical analyses were performed using IBM SPSS Statistics for Windows, version 27(IBM Corp., USA). Descriptive statistics (frequency and percentages) were used to describe the sample Demographic characteristics (Age, Marital status, Number of children, and Income). Also, Mean was used to describe the respondents' overall anxiety level (work-from-home mothers).

The Kruskal-Wallis H test was used to determine significant differences between the anxiety level and the respondents' profile variables (Age, Marital status, Number of Children, and Income). The level of significance was set at $p=.05$.

RESULTS

Table 1 presents the frequency and percentage distribution of the respondents in terms of Age. The table shows that most respondents have an age group of 31-40 years old, with 89 or 32.2%, followed by 41-50 years old, 83 or 30.1%, and 21-30 years old, with 54 or 19.6%. Also, 41 or 14.9% of the respondents belong to the age group of 51-60 years old, and only 9 or 3.3% of the population belongs to the age group of 61 years old and above.

Table 1

Frequency and percentage distribution of the respondents in terms of age

Age	Frequency	Percentage (%)
21-30 years old	54	19.6
31-40 years old	89	32.2
41-50 years old	83	30.1
51-60 years old	41	14.9
61 years old and above	9	3.3
Total	276	100.0

Table 2 presents the frequency and percentage distribution of the respondents in terms of Marital Status. It shows that most respondents are married with 199 or 72.1%, followed by single mothers with 48 or 17.4%, separated with 11 or 4.0%. Also, 10 or 3.6% of the respondents are widows, and only 8 or 2.9% of the population belongs to the group of common law.

Table 2

Frequency and percentage distribution of the respondents in terms of marital status

Marital Status	Frequency	Percentage (%)
Single Mom	48	17.4
Married	199	72.1
Separated	11	4.0
Common Law	8	2.9
Widow	10	3.6
Total	276	100.0

Table 3 displays the frequency and percentage distribution of the respondents in terms of Number of Children. The table shows that almost all respondents have one child, with 99 or 35.9%, while 98 or 35.5% have two children. Also, 46 or 16.7% have three children, and only 33 or 12.0% of the respondents have four children and above.

Table 3

Frequency and percentage distribution of the respondents in terms of number of children

Number of Children	Frequency	Percentage (%)
1	99	35.9
2	98	35.5
3	46	16.7
4 and above	33	12.0
Total	276	100.0

Table 4 presents the frequency and percentage distribution of the respondents in terms of Income. It shows in the table that most of the respondents Income fall within (Php 21,000-30,000) with 102 or 37.0%, followed by (Php 10,000-20,000) with 82 or 29.7%, (Php 41,000 and above) with 60 or 21.7%. Moreover, only 32 or 11.6% of the population belongs to the Income bracket of (Php 31,000-40,000).

Table 4

Frequency and percentage distribution of the respondents in terms of income

Income	Frequency	Percentage (%)
Php 10,000-20,000	82	29.7
Php 21,000-30,000	102	37.0
Php 31,000-40,000	32	11.6
Php 41,000 and above	60	21.7
Total	276	100.0

Table 5 presents the frequency and percentage distribution of the respondents' level of Anxiety. It shows in the table that most of the respondents scored from (11-20), 57 or 20.7% have Mild Anxiety, while (5-10) 51 or 18.5% have Borderline Anxiety, followed by respondents (31-50) 50 or 18.1% with Severe Anxiety, and 24 or 8.7% of the respondents scored (51-99) with Extreme Anxiety or Panic. A relative study done by Zahara and Hidayat (2022) tested the mediating role of COVID-19 anxiety on mothers' information seeking and information forwarding, referred to as active communication action of problem-solving, as well as preventive behavior; and second, by predicting the effect of information seeking on preventive behavior. The results suggest that Indonesian mothers perceive COVID-19 as personally relevant, motivating them to solve the problem by seeking and forwarding related information. In addition, COVID-19 anxiety was found to play a significant role in predicting information seeking, information forwarding, and preventive behavior.

Table 5

Frequency and percentage distribution of the respondents' level of anxiety

Score	Level of Anxiety	Frequency	Percentage (%)	Mean
0-4	Minimal or No Anxiety	46	16.7	21.64 (Moderate Anxiety)
5-10	Borderline Anxiety	51	18.5	
11-20	Mild Anxiety	57	20.7	
21-30	Moderate Anxiety	48	17.4	
31-50	Severe Anxiety	50	18.1	
51-99	Extreme Anxiety or Panic	24	8.7	
Total		276	100.0	

Table 6 presents the test of significant difference in the level of anxiety when the respondents are grouped according to Age using Kruskal-Wallis H. It can be gleaned from the table that the p-value computed is more significant than the level of significance set at 0.05. This means there is no significant difference in the respondents' level of anxiety when grouped according to Age.

Table 6

Test of Difference: Comparison on the Level of Anxiety when the Respondents are Grouped According to Age

Variable	Age	Mean Rank	Kruskal-Wallis H	p-value	Decision	Remarks
Level of Anxiety	21-30 years old	125.78	7.291	0.121	Accept H_0	Not Significant
	31-40 years old	144.98				
	41-50 years old	146.84				
	51-60 years old	136.54				
	61 years old and above	82.72				

Note: If p-value is less than or equal to the level of significance which is 0.05 reject the null hypothesis otherwise failed to reject H_0 .

Table 7 presents the test of significant difference in the level of Anxiety when the respondents are grouped according to Marital Status using Kruskal-Wallis H. As shown in the table, the p-value 0.472 is greater than the level of significance set at 0.05. This means that there is no significant difference in the respondents' level of anxiety when grouped according to Marital Status.

Table 7

Test of Difference: Comparison on the Level of Anxiety when the Respondents are Grouped According to Marital Status

Variable	Marital Status	Mean Rank	Kruskal-Wallis H	p-value	Decision	Remarks
Level of Anxiety	Single Mom	125.20	4.504	0.472	Accept H_0	Not Significant
	Married	143.58				
	Separated	109.36				
	Common Law	155.25				
	Widow	119.9				

Note: If p-value is less than or equal to the level of significance which is 0.05 reject the null hypothesis otherwise failed to reject H_0 .

Table 8 presents the test of significant difference in the level of Anxiety when the respondents are grouped according to the Number of Children using Kruskal-Wallis H. As shown in the table, the p-value 0.934 is greater than the level of significance set at 0.05. This means that there is no significant difference in the respondents' level of anxiety when grouped according to the Number of Children. In the study conducted by Crosbie and Moore (2020), they found that most homeworkers felt that homeworking afforded them some level of flexibility in how they used their time, which allowed them

to balance the responsibilities of their paid work with their responsibilities of care for others. The responsibilities homeworkers said they could manage more easily including the care of spouses, children, older people or disabled relatives as well as household tasks, such as cleaning, washing, shopping, gardening and paying bills. However, there are tensions inherent in these advantages, as being with the children does not support working undisturbed.

Table 8

Test of Difference: Comparison on the Level of Anxiety when the Respondents are Grouped According to Number of Children

Variable	Number of Children	Mean Rank	Kruskal-Wallis H	p-value	Decision	Remarks
Level of Anxiety	1	135.16	0.304	0.934	Accept H_0	Not Significant
	2	141.34				
	3	138.97				
	4 and above	139.45				

Note: If p-value is less than or equal to the level of significance which is 0.05 reject the null hypothesis otherwise failed to reject H_0 .

Table 9 presents the test of significant difference in the level of Anxiety when the respondents are grouped according to Income using Kruskal-Wallis H. As shown in the table, the p-value 0.140 is greater than the level of significance set at 0.05. This means that there is no significant difference in the respondents' level of anxiety when grouped according to Income.

Table 9

Test of Difference: Comparison on the Level of Anxiety when the Respondents are Grouped According to Income

Variable	Income	Mean Rank	Kruskal-Wallis H	p-value	Decision	Remarks
Level of Anxiety	Php 10,000-20,000	146.51	2.126	0.140	Accept H_0	Not Significant
	Php 21,000-30,000	140.37				
	Php 31,000-40,000	130.70				
	Php 41,000 and above	128.53				

Note: If p-value is less than or equal to the level of significance which is 0.05 reject the null hypothesis otherwise failed to reject H_0 .

Emerging Issues

To assess the issues of work-from-home moms, the participants were asked to answer the question: What is their experience working from home during the pandemic?

Several themes were identified from the above open-ended question.

BREAK or ESCAPE - Social life and not thinking of Mother/home duties

- *“Di nila alam mahirap kasi mas less yung social life”*
- *“Kapag may problema ka sa bahay, pagdating mo ng opisina mawawala eh. Pero dahil nga naka WFH na, wala ng takas.*
- *“Sometimes i feel tired being imprisoned at home”*

TIME MANAGEMENT - Boundaries between mother roles and work

- *“The time came that quality time for family was borrowed for additional time to work.”*
- *“Big adjustment juggling work and household chores simultaneously.”*
- *“I cannot focus because I need to care for my son first.”*
- *“Everything is mixed up; we cannot separate work from family*
- *“Long Zoom meetings.”*

Non-conductive workspace

- *“Stressful even more than the former work set-up.”*
- *“They are not considering that the environment at home is all mixed up.”*
- *“Noises during meetings.”*
- *“Stressful, even more stressful than former work set-ups.”*
- *“Kids will want to use my laptop.”*

TECHNOLOGY ISSUES - Unstable or lack of internet connection

- *“Struggle with internet connectivity.”*
- *“Ma support ang employee ng needs na gamit at easy access sa internet.”*
- *“Mabagal na internet.”*
- *“Mahirap mag klase online lalo na at di maiwasang madisconnect ang line sa kasagsagan ng klase.”*

01	BREAK or ESCAPE - Social life and not thinking of Mother/home duties	<ul style="list-style-type: none"> - "Di nila alam mahirap kasi mas less yung social life" - "Kapag may problema ka sa bahay, pagdating mo ng opisina mawawala eh. Pero dahil nga naka WFH na, wala ng takas." - "Sometimes i feel tired being imprisoned at home"
02	TIME MANAGEMENT - Boundaries between mother roles and work	<ul style="list-style-type: none"> - "The time came that quality time for family was borrowed for additional time to work." - "Big adjustment juggling work and household chores simultaneously." - "I cannot focus because I need to care for my son first." - "Everything is mixed up; we cannot separate work from family" - "Long Zoom meetings."
03	Non-conducive workspace	<ul style="list-style-type: none"> - "Stressful even more than the former work set-up." - "They are not considering that the environment at home is all mixed up." - "Noises during meetings." - "Stressful, even more stressful than former work set-ups."
04	TECHNOLOGY ISSUES - Unstable or lack of internet connection	<ul style="list-style-type: none"> - "Struggle with internet connectivity." - "Ma support ang employee ng needs na gamit at easy access sa internet." - "Mabagal na internet." - "Mahirap mag klase online lalo na at di maiwasang madisconnect ang line sa kasagsagan ng klase."

Emerging Issues

More time with family

- *"More quality time with the kids."*
- *"I enjoy Working from home because it gives me ample time to be with my family. I do not need to commute for 2.5 hours to get to work."*

Safety

- *"Feeling safe and secure."*
- *"Working from home protects us from the virus, lessens exposure from the outside."*

Flexibility

- *"I enjoy the flexibility that working from home allows. When I can set my own hours, it helps me stay on task for a specific amount of time."*
- *"Good to work at home because I can multitask, like caring for my son."*
- *"I love the WFH setup because you can manage your time efficiently, and it benefits everybody."*

Convenience

- *"Hindi mo kailangang gumising ng maaga para hindi ma-late sa pagpasok."*
- *"More relaxed since I do not need to go out to commute to work."*
- *"Hindi kailangang makipag-siksikan sa byahe."*
- *"Wala ng long hours ng travel."*

01	More time with family	<ul style="list-style-type: none">- "More quality time with the kids."- "I enjoy Working from home because it gives me ample time to be with my family. I do not need to commute for 2.5 hours to get to work."
02	Safety	<ul style="list-style-type: none">- "Feeling safe and secure."- "Working from home protects us from the virus, lessens exposure from the outside."
03	Flexibility	<ul style="list-style-type: none">- "I enjoy the flexibility that working from home allows. When I can set my own hours, it helps me stay on task for a specific amount of time."- "Good to work at home because I can multitask, like caring for my son."- "I love the WFH setup because you can manage your time efficiently, and it benefits everybody."
04	Convenience	<ul style="list-style-type: none">- "Hindi mo kailangang gumising ng maaga para hindi ma-late sa pagpasok."- "More relaxed since I do not need to go out to commute to work."- "Hindi kailangang makipag-siksikan sa byahe."- "Wala ng long hours ng travel."

LIMITATIONS

Done amidst the pandemic and with limited access to face-to-face data gathering, several methodological limitations should be acknowledged when considering the findings of this research. First, the study did not employ a longitudinal design. As such, the researchers cannot determine if impairments in parental mental health functioning were maintained over time or if they improved or worsened throughout the pandemic. Future research should examine the long-term mental health impact of the pandemic on parental mental health. Second, this study did not explore gender role issues among couples as a variable that may impact moms' anxiety levels as they work from home during the pandemic. Further explorations are needed.

CONCLUSION

In connection with the findings of the study, the following conclusions were drawn:

- The results showed that most of the respondents (20%) have Mild Anxiety, 18% have Borderline Anxiety, 18% have Severe Anxiety, and 8% have Extreme Anxiety or Panic. This means that despite the challenges brought about by the pandemic, the majority of the work from home mother respondents still managed to cope and keep up with the work-life challenges, with only 8% of the sample population suffering from Extreme Anxiety or Panic.
- There is no significant difference in the respondents' level of anxiety when grouped according to age, marital status, number of children, and income.
- The results of this study are expected to give insights for management as it provides care for the mental health of the mother employees through effective and sustainable mental health programs amidst and beyond the pandemic.

RECOMMENDATIONS

When the line between work and home life is essentially non-existent, employers can help. Management needs to check with their employees proactively and offer targeted support. Companies should offer tools and resources and be concerned not only with maintaining productivity levels amidst the new normal but also caring for the mental health of the mother employees through effective and sustainable mental health programs amidst and beyond the pandemic.

A. Proposed Mental Health Program

Below, mental health initiatives are worth exploring as easy-to-implement and affordable resources that can significantly and positively impact the mental health of employees.

OBJECTIVES

I. Enhance mental health support

- Build internal capabilities to address well-being and ensure improvements in employee mental health through enhanced face-to-face, virtual, and digital support with gender-specific programs.

- Work with partner experts to ensure that available mental health services match the institution's standards, especially regarding access to high-quality, culturally competent, and gender-informed treatment providers.

II. Communicate what is available

- Conduct an information drive and cascade to all employees how to access available mental health services.

III. Measure progress and outcomes

- Active tracking of employee well-being by determining employee experience and satisfaction with the programs offered and the impact benefits on the workforce's mental health, especially those experiencing higher stress levels like working mothers.
- Surveys and further research may be conducted to measure progress in employee mental health.

B. Provide mental health resources

Provide a list of support groups, wellness programs, their associated activities, phone numbers to hotlines and websites of local social services, and posting easy-to-find information on health network providers.

C. Employee Assistance Program (EAP)

Give employees access to free and confidential services, which may also be accessed virtually:

- Screenings/Assessments
- Counseling
- Referrals and follow-up services

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Dr. Santos started her career in Recruitment and Training with United Laboratories (Unilab) and has twenty-six years of consultancy experience specializing in Psychological Assessment, Testing and Evaluation - primarily for talent acquisition, selection, promotion, career counseling and training.

She is, for 14 years, a Faculty Member of the Department of Psychology and for a year, was designated as Psychologist in the Office of Counseling and Psychological Services of the Polytechnic University of the Philippines. She recently joined as a Faculty Member of the university's Graduate School, Psychology Program and is a certified Trainer of the Strong Families Program of United Nations Office on Drugs and Crime (UNODC). At present, she is the Chairperson of the Doctor of Philosophy in Psychology program of PUP.

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AIMEE ROSE ARGUELLES-MANDA is an International Certified Addiction Professional, Global Satir Coaching and Mentoring Specialist, and a licensed Psychometrician who have been in the helping field for almost 18 years conducting trainings, workshops, providing therapeutic interventions, psychoeducation to individuals and their families dealing with Substance Use Problems.

Dr. Manda has acquired specialization in the Substance Use Treatment and Therapy from various trainings here and abroad. Aside from being an Addiction specialist, she is also one of the first batch of Certified Mental Health First Responder Trainer and Provider, also an internationally certified Satir Global Coaching and Mentoring Specialist and part of the United Nations Office on Drugs and Crime (**UNODC**) Drug Demand Reduction Global Trainers (Cohort IV). She is an LGBT ally and involved Drug Use Prevention advocacy, certified facilitator for UNODC's Strong Families Program and Caring for Your Child during Covid programs.

Prior entering the Academe and the Helping profession as interventionist and Therapist, Dr. Manda has worked in private organizations and had 11 years of experience in government agencies with functions including Vice Presidential Staff officer, Technical Assistant in Malacañang, and her last post was as Public Relations Officer V at the Manila International Airport Authority.

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Ms. De Guzman was born on July 4, 1991, in Manila. She attended Ramon Magsaysay High School in Espana, Manila, where she completed her high school education. She completed a Bachelor of Science program in Industrial and Organizational Psychology at the Polytechnic University of the Philippines in May 2011.

During her college years, she served as a student assistant for three years at PUP Community Relations Office and Campus Project Management Office. After she graduated from college, she worked as a Human Resources Assistant at Landmark Corporation's Makati Branch and was assigned to the Recruitment Corporate Division in August 2011. She also worked as an administrative employee at PUP in April 2012 and was assigned to work in the President's Office.

She's pursuing a master's degree in Psychology specializing in I/O Psychology at the same university and hoping to graduate within the year. For her, teaching and studying in PUP at the same time have provided her with opportunities to grow and develop both in her personal and professional life. She resides in Pasig City with her husband, Niccolo, and her two children, Anika and Kyrie.

Assistant Professor CYNTHIA PEREZ EQUIZA is an accomplished professional with a diverse educational background and a passion for understanding the intricate workings of the human mind. Armed with a Bachelor of Science in Mathematics and a Master's degree in Psychology at the Polytechnic University of the Philippines, Sta. Mesa, Manila. Professor Equiza possesses a unique blend of analytical thinking and empathetic understanding.

Throughout Professor Equiza's academic journey, an insatiable curiosity led her to explore the realms of both numbers and the human psyche. Her undergraduate studies in Mathematics honed her logical reasoning and problem-solving abilities, providing a solid foundation in critical thinking and data analysis. Equipped with a strong mathematical background, Professor Equiza has continued teaching Statistics and Mathematics in the Modern World up to date.

Building upon her mathematical expertise, Professor Equiza pursued a Master's degree in Psychology, driven by an unwavering desire to comprehend the intricacies of human behaviour, cognition, and emotional processes. The integration of her mathematical background with the study of human psychology has empowered Professor Equiza to approach psychological research and analysis with a unique perspective. Her multidisciplinary approach allows her to leverage quantitative methods to gain deeper insights into human behaviour, as well as apply psychological principles to solve complex problems.

Driven by a genuine passion for unlocking the mysteries of the human mind through a fusion of mathematics and psychology, Professor Equiza continues to explore new horizons, seeking innovative ways to bridge the gap between these disciplines. Her unwavering commitment to knowledge, combined with her unique skill set, positions her as a valuable asset in any field that demands analytical thinking, research expertise, and a deep understanding of human behaviour. Currently, she has 15 years of service to the College of Science Department of Mathematics and Statistics.