

Quality of life of Non-Permanent Teachers and Their Coping Strategies During the Covid-19 Pandemic

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ABSTRACT

The COVID-19 pandemic has resulted in tremendous challenges. Education is among the most affected social sectors. Teachers and students are compelled to adapt to the alternative modes of teaching and learning delivery. The Philippines' largest Higher Education Institution in terms of students became the focus of this study, particularly its non-permanent teaching staff. This research is designed to determine the quality of life and coping strategies of non-permanent teachers of the Polytechnic University of the Philippines during the COVID-19 pandemic. Using mixed methods – sequential explanatory research design, 278 respondents were selected out of the 1,926 total population. Quantitative data were collected through the use of the World Health Organization's Quality of Life-BREF (WHOQOL-BREF) Scale and the Filipino Coping Strategies Scale (FCSS) and were analyzed using the Mann-Whitney U test, Kruskal-Wallis H test, and Pearson Product Moment Correlation. Meanwhile, qualitative data were collected through a validated and pilot-tested focus group discussion (FGD) guide with transcripts subjected to content analysis. Data revealed that the lowest dimension of quality of life of the teachers is the physical aspect. Some of the most common coping strategies were cognitive reappraisal, problem-solving, religiosity, and relaxation. The respondents differ in terms of religiosity, relaxation, emotional release, and overactivity along with their age, other sources of income, and marital status. Further analysis indicated a relationship between the four domains of quality of life and some types of coping strategies which showed how the quality of life is affected by specific coping practices. Recommendations as to policies and programs to address the issues identified were set.

Keywords: *challenges, coping strategies, COVID-19, quality of life, new normal, non-permanent teachers, pandemic*

INTRODUCTION

The impact of the Coronavirus disease or COVID-19 on the global population has been very prevalent and has posed significant challenges across the academic community (Moralista & Oducado, 2020). In terms of their professional lives, teachers went through a moment of transition and were obliged to adjust to the new normal of virtual schooling and provide effective remedial instruction for their students (Guillasper et al., 2020; Moralista & Oducado, 2020). Educators' psychological well-being and quality of life must be recognized, and educators must be supported as they adjust to the impact of the COVID-19 pandemic (Rabacal et al., 2020), particularly in terms of worrying about their physical health, teaching issues, personal mental health, and personal finances or financial responsibility (Rada, 2021). Although these studies explored Filipino teachers and their quality of life during the pandemic, studies focusing on teachers who were non-permanent or were teaching on a part-time basis and how they are currently coping are scarcer and few and far in between. Non-permanent teachers were those who are not receiving the same benefits as those who are permanent or working with tenure in schools or universities. They are not entitled to job security since they are not under contract the same way a teacher in a permanent position would be.

Before the COVID-19 pandemic, teachers were experiencing a low quality of life (QOL) with a significant effect on their mental and physical health due to stress brought about by workloads (Lizana et al., 2021). The rapid migration and changes of learning modes increased significantly the burdens for school personnel from teaching content and resources into the online environment, as well as becoming skilled at managing the systems and programs (Allen et al., 2020). The diversification and revolution of education put a mass of work on the part of the teachers and had an impact on their quality of life. The abrupt change in the education system due to the pandemic instigated distress and disruptions in the areas of the teachers' lives.

In April 2020, an article published by Rappler noted that the increased community quarantine implemented in Luzon and other parts of the country affects 409,757 instructors, staff, and school employees in private higher education institutions across the country, as stated by the Coordinating Council of Private Educational Associations (COCOPEA). They are considered "no work, no pay" workers. The department of Education (DepED) in response reaffirmed the inclusion of private school teachers' proposal in the social amelioration program (Magsambol, 2020). Without this, the stress can result in burnout, leading to high absenteeism rates, and even cause some teachers to quit their job, undercutting efforts to enhance school resilience. (UNESCO, 2020).

A comparative study by Mihaela et al. (2020) showed that there is a relationship between the quality of life and emotional distress of teachers during the COVID-19

pandemic, knowing that isolation can qualitatively affect emotional stability and the quality of life. COVID-19 has had significant effects on both wages and employment. As per current statistics, only a small unit of nations' educators has not been compensated (UNESCO, 2020). However, furloughing and delays in salary payments were more common (Education International, 2020). According to the research, educators on contractual basis were particularly affected in the public sector, as contracts were not extended and those paid hourly were laid off. Teachers have lost their jobs in low-income nations, particularly where parents stopped making payments or teachers unable to teach remotely.

According to a poll conducted by Education International (2020), nearly two-thirds of 93 educators from 67 countries said that teaching personnel in private schools were directly impacted, with educators on contractual basis and support staff being particularly affected. Refugee teaching personnel were frequently excluded from the national education system, placing them vulnerable to pay freezes and job losses whenever schools were closed. The inability of non-state institutions in the future, would force public education systems to accommodate a large number of new learners (Global Education Monitoring Report Team, 2020).

Surveys were conducted in the Philippines on how coronavirus affects the life of Filipinos. According to a poll, 37% of Filipinos thought that the coronavirus COVID-19 outbreak had an effect on their daily lives and their relationships with their families. For 33% of the respondents, the spread of the virus also had an influence on their working lives or arrangements (Statista, 2021). In another survey on levels of anxiety, it was found that 61 percent of respondents in the Philippines stated that they worried about the coronavirus in 2020, (Tee et. al, 2020). These changes triggered by the pandemic have greatly affected the perception of Filipinos in terms of lifestyle, family lives, and work-life as well as their mental health.

Mingoa (2017) performed a survey in Metro Manila in which stressors that elementary and high school teachers perceived were paperwork (52%), high cost of living (51%), insufficient salary and other money concerns (46%), oversized classes (43%), and being too busy (5%). With this, results found that teachers in the study generally complained about having fatigue (71%), neck and shoulder muscle ache (41%), lower back pain (39%), sleep difficulties (34%), headaches (22%), and menstrual distress or irregularities (22%). Their stress levels and susceptibility to stress are comparatively higher, and their coping techniques including things such as watching tv or going to the theater, shopping, and relaxation exercises.

The study by Rabacal et al. (2020) shows 139 licensed professional Filipino teachers who measured the pandemic's effect on quality of life. They discovered that the impact of COVID-19 on QoL significantly different by degree program. In comparison,

in terms of age, gender, marital status, work status, monthly income, and circumstances related to COVID-19, it was found that there is no sign on the impact of COVID-19 on QoL. In this study, they also recommended providing support to teachers as they are continuing to adjust on the effect of the COVID-19 pandemic. As the number of cases progressed, people were subjected to heightened levels of stress (Rabacal, et al., 2020).

The findings of the study by Wallengren- Lynch, et al. (2021), highlighted the social work teachers' and students' experiences while learning from home. They found out that most of the respondents perceived that working and studying from home is challenging and utilized constructive and self-regulatory coping strategies (i.e., gardening, acceptance of the situation and associated with spirituality like praying, reading the bible, yoga and meditation). Self-care is regarded as an essential component of social work practice, thus both educators and students need to employ this for their own welfare.

To understand this phenomenon better, the researchers used the Integrative Quality of Life by Ventegodt, et al. (2003) as the main framework. This theory has eight distinct concepts i.e well-being, satisfaction with life, happiness, meaning in life, biological order, realizing life potential, meeting needs, and objective elements. These were all included in the unified theory concerning subjective, objective, and existential measures of life.

According to this theory, a person's personal evaluation of things, feelings, and ideas determine how subjectively wonderful their life is and how they believe it is overall. It is an indicator of someone's level of happiness and contentment with their lives. In addition, existential quality of life refers to how good life is on a deeper level and how one may coexist peacefully with nature. Because of each person's unique nature, this could also be lived in accordance with specific spiritual ideals. The objective quality of life, as the last explanation, shows how people's cultures and how they were seen by the outside world. Adaptability to new situations and social statuses, for example, could be considered. This view of the self and quality of life could impact one's perception and it may have an effect on their mental health. This could be possibly true for the non-permanent teachers who were one of the most affected by the pandemic which shows that their well-being, satisfaction with life, and fulfillment of their needs may also be impacted.

Another theory that would help the study is the Macro-Analytic State-Oriented Theory in Coping. One of the earliest macro-analytic state-oriented coping mechanisms is the one referred to by Freud in his work from 1926, the defensive mechanisms. The hypothesis of Richard Lazarus and Susan Folkman is another strategy that has become prominent in this field. According to Lazarus and Folkman's concept, effective coping techniques depend on the emotional functions connected to the issue. Lazarus identified eight of these types of active coping mechanisms. These are the following. Self-Control

is when under stress, we strive to exercise self-control by regulating our emotions. Confrontation is when under pressure, we confront the circumstance and respond to alter it and make it more favorable for us. Social support is when we often turn to social support, where we converse with people and seek out social ties to assist us get through a tough period. Emotional distancing is when we maintain emotional distance, we stop allowing our misery to dictate our behavior and remain unconcerned with what is happening around us. Escape and avoidance is when we deny that stress even exists as a coping mechanism. When one chooses Radical Acceptance, they accept themselves completely for facing challenges. When we endeavor to identify the solution in the struggle and learn from it, we are practicing Positive Reappraisal. Strategic Problem-Solving happens when we utilize particular, solution-focused tactics to get through a difficult period and refocus our efforts appropriately. Based on this theory, it could be a great source in identifying how the teachers cope with the stressful situations like the Covid-19 pandemic.

One of the biggest educational systems in the Philippines is the Polytechnic University of the Philippines (PUP) which is a government-funded university situated in Sta. Mesa, Manila. PUP, with its 22 branches and campuses throughout Luzon, is the largest university in relation to student population serving more than 70,000 students. To cover this vast student population, it deployed more than 2,000 full-time and part-time faculty members who are the institution's outstanding partners in bringing PUP to excellence by placing it in international rankings as one of the top universities in the country. (PUP Website, n.d.). With this background, the researchers thought that PUP will be the best fit as their locale of the study. The population of the faculty most especially the non-permanent teachers will suffice to provide the needed data posed in the areas of concern during the course of the COVID-19 pandemic.

Given the foregoing, this study was conceptualized. Aimed to be highly beneficial to the non-permanent teachers of the AY 2020-2021, this study may disclose their actual situation amidst the pandemic and its consequent effects on their quality of life along with the coping strategies they have adapted to ease the demands of their situations. The findings of the study may serve as the baseline for the formulation of a sound, timely, and proactive teacher development program. As a matter of fact, Hernando-Malipot (2021) reported that some teachers felt that they were not being reciprocated especially by the government for their efforts and sacrifices during the pandemic. With this present study, school administrators and the government may develop a new perspective on how the non-permanent teachers were doing in a time of crisis and hopefully come up with programs supportive of their well-being. Any program supportive of teachers' well-being will certainly have an effect on their performance, and the improvement of teachers will consequently lead to quality education.

To build on this, this research is designed to determine the quality of life and coping strategies of non-permanent teachers of PUP during the COVID-19 pandemic. This sought to (1) identify their demographic profile in terms of age, gender, educational attainment, marital status, family financial obligation (or breadwinner), other sources of income, and length of service in the university; (2) answer how they describe their quality of life during the COVID-19 pandemic in terms of physical, psychological, environmental, and social relationships; (3) explore how do they describe their coping strategies during the COVID-19 pandemic in terms of cognitive reappraisal, social support, problem-solving, religiosity, tolerance, emotional release, overactivity, relaxation/recreation, and substance use; (4) determine differences on the level of QoL when grouped according to their demographic profile; (5) ascertain the differences on the level of coping strategies when grouped according to their demographic profile; and (6) know the relationship between their QoL and coping strategies during the pandemic.

METHODOLOGY

Research Design

This study is a mixed-methods sequential explanatory research. In a mixed-method sequential explanatory design, the data were gathered in two consecutive phases. First, the quantitative data were gathered and evaluated. Then, the qualitative data which is the study's second phase was collected and related to the findings of the quantitative phase. This design emphasizes the quantitative phase (QUAN²qual).

This design was used to respond to the study's research questions. It showed the scores generated from the respondents' responses from survey questionnaires and examined the themes from the sampled participants' interviews or Focus Group Discussions (FGDs) on variables such as quality of life and coping strategies of these non-permanent teachers during the pandemic.

Population, Sample Size, and Sampling Technique

The target respondents are non-permanent teachers with a full-time teaching load at the Polytechnic University of the Philippines (PUP), in its main campus, satellite campuses, and branches. According to the PUP Human Resource Department, the total population of non-permanent teachers was 1,926 as of March 2021.

Using a census or sample survey, only a small portion of the population, known as a sample, is covered by a survey when data are obtained. Out of the total population of part-time faculty members, there were 278 respondents who participated in the

quantitative part of the study. For the qualitative part, ten (10) were selected to fairly represent the various campuses and branches of the university. The inclusion criteria are as follows (1) having a length of service of at least one year in the university; (2) breadwinner of the family; and (3) working as Full-time-Part-time teachers at PUP. They were contacted through their emails or mobile phones to inquire about their willingness to take part in a virtual FGD. When their availability was confirmed, the FGD was set. Informed consent was properly executed prior to the conduct of the FGD. It was digitally recorded for accurate transcriptions.

Instruments

The researchers employed two standardized questionnaires to obtain the data needed in the quantitative part of the study. Specifically, instruments are the following: World Health Organization Quality of Life – BREF (WHOQOL-BREF, 2012) and Filipino Coping Strategies Scale (FCSS, 2018).

The WHOQOL-BREF is an abbreviated version of WHOQOL-100 which initially consists of 6 domains but has now 4 domain scores due to it being too long for practical use. The WHOQOL-BREF contains a total of 26 items with four domains as Physical, Psychological, Social relationships, and Environment. There are also two items that are examined separately: question 1 asks about an individual's overall perception of quality of life and question 2 asks about an individual's overall perception of their health. The four domain scores denote an individual's perception of quality of life in each particular domain. Domain scores are scaled in a positive direction (i.e., higher scores denote a higher quality of life). The mean score of items within each domain is used to calculate the domain score. Mean scores are then multiplied by 4 in order to make domain scores comparable with the scores used in the WHOQOL-100 (WHO, 2012).

On the other hand, Filipino Coping Strategies Scale (FCSS) was written in Tagalog with an English translation for each item so that it can better provide understanding of the content of the scale and observe sensitivity to the local Filipino context. It measures nine coping strategies, such as cognitive reappraisal (*pagsusuri*), social support (*paghingi ng tulong*), problem-solving (*pagtugon*), religiosity (*pagkarelihiyoso*), tolerance (*pagtitiis*), emotional release (*paglabas ng saloobin*), overactivity (*pagmamalabis*), relaxation/recreation (*paglilibang*), and substance use (*pagbibisyo*). The verbs are in the present tense since these are a dispositional scale. It is in a 4-point likert format from 1, indicating Never or Hindi, to 4 indicating Often or *Madalas*. Construct validity was established via factor analysis through principal components analysis extraction method and varimax rotation method and test for convergent validity (Rilveria, 2018). In using these scales, appropriate permission from their respective authors and developers was secured. The researchers used online surveys for the distribution of the questionnaires.

The FGD guide was formulated by the researchers. It underwent expert validation and pilot testing among four (4) faculty members who are not included in the sample. Initially, there were ten (10) FGD questions, and were short-listed to seven (7) major questions. Prompts and follow-up questions were used in the actual conduct of FGD. The FGD was also conducted online due to the restrictions brought by the pandemic.

Data Gathering Procedure and Ethical Considerations

Upon the approval of the research grant from the funding university, the researchers secured approval from the Institutional Ethics Review Committee. After determining the total number of active non-permanent teachers with full-time teaching assignments at the university during AY of 2020-2021 from the HR department, the researchers then obtained permission from the Office of the President and secured certification from the Research Management Office to collect data from the respondents. This was followed by securing permission from the respective college deans and satellite and branch directors in sending the questionnaires (for the quantitative part) to the target respondents. The questionnaire included a consent form explaining the goals, nature, terms, and constraints of the study. The advantages, risks, and process of withdrawal from the study were also explained. After gathering all the completed questionnaires from the identified respondents, the responses for each item were analyzed and tabulated using appropriate statistical tools.

It was immediately followed by the qualitative phase which was conducted via virtual FGDs. There are 10 purposively selected participants from those who participated in the quantitative part. They were formed into two (2) FGDs, morning and afternoon group sessions to answer seven (7) major questions reflective of the domains of quality of life and coping mechanisms. The informed consent section of the online form includes details about the terms, circumstances, nature, and goal of the study. As part of the adherence to research ethics, informed consent was properly secured. As licensed psychology professionals, the researchers strictly adhered to and complied with the Data Privacy Act of 2012. The identity and responses of the respondents were kept private and anonymous. The poll was optional, and respondents are free to opt-out at any moment without penalty. The FGD transcripts underwent two (2) cycles of coding with themes that were consensually agreed upon by the researchers. As a trustworthiness measure, the inquiry audit was conducted by an external researcher whose expertise is inclined with the nature of this study. Research reciprocity was in the form of remuneration.

The collection of data took a total of four (4) months to complete for both quantitative and qualitative phases.

Data Analysis

For the quantitative part, the researchers utilized both descriptive and inferential statistics to present and analyze the data while the qualitative phase was framed through content analysis to make inferences on the participants' narratives. This constituted the two (2) phases of the mixed-methods explanatory sequential design.

In the first phase, quantitative data were analyzed and presented using frequency, percentage, weighted mean, standard deviation, Mann-Whitney U test, Kruskal-Wallis H test, and Pearson Product Moment Correlation.

Then in the second phase, the researchers analyzed the qualitative data using procedures of content analysis. FGD transcriptions were analyzed per line. Two (2) cycles of coding were conducted. Selected verbatims of the FGD participants chosen through the content analysis formed as additional support to the existing literature supportive of the quantitative results. Inquiry auditing through the audit log was used as a trustworthiness measure to ensure the validity of the qualitative data. The summary and the interpretation of the responses were analyzed as significant data and were used to give generalizations to some of the problems.

RESULTS AND DISCUSSION

Data on the demographic profile of the PUP non-permanent teachers shows that most of the respondents were young adults (60.8%), followed by middle adults (31.7%), and the least are from older adults (7.6%). Between age categories, people aged 45 and below presented significant differences during the pandemic and pre-pandemic timeframes in all summary dimensions and measurements (Lizana et al., 2021). Buenaventura et al. (2020) argued older Filipinos become more susceptible to emotional, spiritual, and social issues that result in increased psychological effects because of isolation and lack of social interaction brought by the pandemic.

In terms of gender orientation, the majority of the respondents are heterosexual males (47.5%), followed by heterosexual females (42.5%), then gay and lesbian (6.8%). The lowest in terms of percentage are the bisexuals (3.2%). With the pandemic, a greater impact on women in the mental and physical component has been seen (Lizana et al., 2021) and men feel distressed in different areas of activities compared to women (Mihaela et al., 2020).

Moreover, respondents' educational profiles indicated that most of the respondents were in the master's level (42.8%), followed by master's degree holders

(26.3%), then bachelor's degree holders (16.2%). There are only a few faculty respondents who are at their doctorate level (9.7%), doctorate degree holders (4.3%), and post-baccalaureate degrees (0.7%). In the findings of the study of Rabacal et al. (2020), teachers enrolled in the master's level reported a significant impact of COVID-19 on their overall quality of life than those enrolled in the Ph.D. program. It is possible that teachers enrolled in the Ph.D. program managed better than those in the master's program.

More than half of the respondents were single and never married (56.5). In addition, 37.4% are married while 2.9% are in a domestic partnership. The rest are either widowed (1.8%) or separated (1.4%). The findings of the study by Cabrera et al. (2019) about the challenges of married career women from generation X presented several challenges such as difficulties including having less time for socializing, hobbies, and leisure activities. Even their relationships with their partners and families were called into question as a result of missing their input.

Further, 66.5% of the respondents have financial obligations to their family while 33.5% are otherwise having no obligations. The outbreak of COVID-19 has impacted several lives not only the health of everyone but also had a great impact on employment and salaries (UNESCO, 2020).

The results for sources of income show that more than half (52.5%) really lost their income as they rely only on their salary as teachers. However, some have other sources in the areas of business, education, and social work (45%), engineering profession (1.8%), and technology cluster (0.7%). Many educators may need to look for alternative means of income, according to UNESCO (2020). Teachers have lost their jobs in low-income countries, especially where parents stopped paying fees or educators were unable to teach remotely. Likewise, COVID-19 constitutes the most challenging task that national education systems have ever experienced. Countries across the world, such as those in Africa, Asia, Europe, the Middle East, North America, and South America had put into effect the closure of universities to prevent the virus from spreading. Laying-off employees and salary payment delays have become more common (Education International, 2020), with educators on contractual basis and support staff carrying the majority of the burden. Many governments have obliged to suspend face-to-face instruction for the great majority of its pupils, causing them to transition to online learning and online classes almost overnight (Daniel, 2020).

Lastly, the majorities of the non-permanent teachers are serving the university for 2 years and below (41%), followed by those who are serving the university for more than 2 years to 5 years (33.4%), and some have more than 7 years (20.9%), more than 5 years to 7 years (4.3%), and less than a year (0.4%). Furthermore, the various repercussions of

COVID-19 indicated that teachers on temporary employment were particularly impacted, as contracts were not extended and those who were paid hourly were out of employment (Education International, 2020).

Table 1
Profile of the Respondents

Variables	Frequency (f)	Percent (%)
Age		
Young Adults (18-35 years old)	169	60.8
Middle-aged Adults (36-55 years old)	88	31.7
Older Adults (More than 55 years old)	21	7.5
Gender Orientation		
Heterosexual Female or Straight	118	42.5
Heterosexual Male or Straight	132	47.5
Bisexual	9	3.2
Gay and Lesbian	19	6.8
Educational Attainment		
Master's level	119	42.8
Bachelor's Degree	45	16.2
Post-Baccalaureate	2	.7
Master's degree	73	26.3
Doctorate level	27	9.7
Doctorate degree	12	4.3
Marital Status		
Single, never married	157	56.5
In a domestic partnership	8	2.9
Separated	4	1.4
Married	104	37.4
Widowed	5	1.8
Family Financial Obligation (Breadwinner)		
No	93	33.5
Yes	185	66.5
Other Source/s of Income		
None	146	52.5
Business Education and Social Work Profession Cluster	125	45.0
Engineer Profession Cluster	5	1.8
Technology Cluster	2	.7

Variables	Frequency (f)	Percent (%)
Length of Services		
More than 2 years to 5 years	93	33.4
2 years and below	114	41.0
More than 7 years	58	20.9
More than 5 years to 7 years	12	4.3
More than 1 year	1	.4
TOTAL	278	100

n=278

Table 2 presents the quality of life of the respondents in terms of their physical, psychological, social, and environmental domains. Based on the table, the domain with the highest mean score of 70.2338 (SD=15.1296) was the psychological domain, which was interpreted as high quality of life. This means that the respondents have a positive psychological adjustment in terms of how they manage their stress, emotions, and their overall well-being. Just like one of the participants who said that he is “*always looking at the ‘bright side’, laban lang*”. This indicates that he is hopeful that this pandemic will end and to continue living. To support this claim, Lamiani et al. (2022) said that people had to reposition their negative emotional experiences brought by the COVID-19 pandemic. They need to deal with lockdown, exhaustion, sadness, worries, and feeling of social disconnection and resort to some coping strategies. In the contrary, Mukhtar (2020, as cited in Cabrera & Daya, 2022), said that the fear of getting sick or dying can make people feel more helpless, dejected, exhausted, burnt out, and anxiously anticipatory. This is, however, the negative impact of the pandemic on people but as time went by, one was able to adapt and cope with the situation.

Next to the psychological domain was the social domain which obtained a mean score of 69.9041 (SD=18.5330), which was gauged within high quality of life. This suggests that the respondents experienced beneficial interaction and relationships with the people they encounter, both face-to-face and online. For instance, one of the interviewees said; “*Family ang nakakapagpasaya. Since work from home, kasama ang pamilya. Minsan lang nahabol ang anak habang may online class ako.*” This is supported by the study of Corpuz (2021) which discovered that the people had been adjusting and going towards the “new normal”. The respondents are starting to adjust to and restore their life, health, and society. They are finding effective ways to cope with stress.

Moreover, the domain that received the lowest mean score is the environmental domain with a mean score of 62.6237 (SD=16.3522). This is interpreted within the moderate level. Since financial resources are under this domain, it explains how people perceive their resources whether they were able to meet their needs and live a convenient life that might impact their quality of life. (WHOQOL, 2012). As one of the statements

of the participant in the interview, *“stressful one because, I don’t have monthly income, iniwanan ko dating school so, wala akong monthly income.”* This means that she was experiencing so much stress as having no income especially during the pandemic will greatly affect her and her family’s quality of life. One of the studies done by UNESCO (n.d.) shows that this COVID pandemic affected half of the respondents. It was concluded that this crisis had an effect on teacher compensation. Most respondents also stated that contractual instructors and private educators were most impacted.

Lastly, the physical domain of the respondents received a mean score of 66.5189 (SD=14.3338) which was gauged within the moderate level. This shows that the respondents have some difficulties adjusting to their environment and they have physical discomforts during the COVID-19 pandemic. As one of the participants claims: *“Sobrang stressful, yung katawan ko gusto nang bumigay. Hindi ako natutulog, as in,”* narrating her experiences about losing her father. Similarly, this is reinforced by the study of Algahtani et al. (2021) that states, a wide variety of unbearable emotions, including fear, anger, guilt, and a sense of being out of control, are more likely to be experienced by those who are in quarantine. People may practice excessive hand- and face-washing, surface disinfection, and other health practices as a result of these reactions, which make them feel less secure in their physical surroundings. Another study conducted by the group of Dai et al. (2021) indicated that due to the COVID-19 pandemic and lockdown procedures, the Chinese people’s general well-being, psychological health, and physical health were all impacted. Interventions may lessen detrimental psychological effects, hence enhancing quality of life. In order to improve one’s quality of life, one can use emotional regulation to control their feelings in social situations.

Table 2
Level of Quality of Life

Domain	Mean	Std. Deviation	Interpretation
Physical	66.5189	14.3338	Moderate
Psychological	70.2338	15.1296	High
Social	69.9041	18.5330	High
Environmental	62.6237	16.3522	Moderate

Legend: 0.0-3.33 = Low; 33.34-66.67 = Moderate; 66.68-100 = High

Table 3 shows the levels of coping strategies of non-permanent teachers during the COVID-19 pandemic. The respondents were assessed within a moderate level in terms of cognitive reappraisal (M=3.1835; SD=0.5879), social support (M=2.6319; SD=0.7013), problem solving (M=3.4406; SD=0.5421), religiosity (M=3.4730; SD=0.7230), tolerance (M=2.6709; SD=0.7399), overactivity (M=2.4050; SD=0.7189), and relaxation (M=3.1216; SD=0.5491). Whereas, their level of coping strategies in terms of emotional release (M=2.0009; SD=0.5984) and substance use (M=1.3482; SD=0.5633) are low.

Based on the results, the least used coping strategies are emotional release and substance use. Emotional release (*paglabas ng saloobin*) is a Filipino coping strategy with which one vent out emotions. This means the respondents rarely practice coping strategies which involve expressing emotions through anger, humor, cry, and others (Rilveria, 2018). For instance, one of the participants shared that when he had periods of confusion about his feelings, he would try to assess himself and his thoughts and would find someone to talk to:

“yung part na hindi ko din alam bakit ako stressed. Siguro may times na nalulungkot ako, naiiyak ako pero hindi ko maidentify ano yung problem. Hindi ko alam saan ba may kulang, kung saang part ba ako nalulungkot. So siguro yung natutunan ko sa part na yun na ano na talk to ano— huwag kang makipag usap dun sa mga negative people. Try to find someone na pwede mong mapagkwentuhan pero hindi yung mas lalo kang mada-down.”

The natural process of emotional release or discharge is usually interfered with by well-meaning people as they view it as equal to hurting oneself (Good Therapy Australia, 2022). In effect, most of the time, the individual changes this coping strategy by seeking outside help to resolve the confusion caused by the problem. On the other hand, substance use (*pagbibisyo*), a coping strategy in which one uses substances to ease physical and mental manifestations of stress, got a small number of respondents who are practicing this coping strategy. Meaning, that they rarely use this approach and seldom resort to the use of drugs, alcohol, cigarettes, or even take medicines to alleviate stress.

Cognitive reappraisal (*pagsusuri*) is a Filipino coping strategy characterized by looking at different perspectives about the problem (Rilveria, 2018). The respondents are adequately practicing coping strategies under this domain such as optimism and hopeful thinking, alterations of goals and values, and meaning-making. For instance, a participant appreciated what happened during the pandemic:

“gaya ng sinabi ko panget man pong pakinggan, the pandemic is like a blessing for— me ah personally, but I know that – that’s a negative thing for— for most of us, ayun po.”

While respondents use cognitive reappraisal to look at different perspectives on how the pandemic is impacting their life, they also seek help outside of themselves. Social support (*paghingi ng tulong*) refers to self-seeking behavior. This means that they are seeking help from experts or professionals, accepting support from family and friends, and communicating their problem to others is adequately practiced by the respondents. One of the participants acknowledged the need to seek help from an expert when one experiences difficulty in processing one’s thoughts and feelings, he said:

“it’s really good to seek professional help. I think most of us tingin natin hindi valid yung nararamdaman natin. Mahirap po ‘pag hindi natin nararecognize ‘yung feelings or emotion so, it’s really important po.”

Social support as an effective coping strategy is supported by the result of a study conducted in Indonesia among university students during the COVID-19 pandemic. The results revealed that improved social support was substantially connected with reduced psychological distress (Akbar & Aisyawati, 2021).

Problem-solving (*pagtugon*) is a Filipino coping strategy when one plans and takes action to resolve a problem. Meaning, that the respondents adequately practice coping strategies such as planning and taking action to remove stress. For instance, some of the participants instead of getting stressed with the situation choose to solve the problem and strategize to resolve the things that may arise: *“i-solve mo na lang ‘yung pwede mong i-solve. Ayun po so, gawin na lang ‘yung pwedeng gawin tapos pag-isipan na lang yung hindi kayang gawin.”* Another response from one of the participants: *“Niready ko na rin yung family ko na may times na made-delay ang sahod gano’n pero nando’n lang po ako lagi sa side na kung made-delay ano dapat yung gagawin ko.”* While respondents face the problem head-on and strategize, they also tolerate or endure some situations that they have no control over. Tolerance (*pagtitiis*) refers to endurance in stressful and difficult situations (Rilveria, 2018). The respondents adequately practice coping strategies such as enduring difficult and stressful situations without the effort of resolving or confronting it. For instance, one of the participants tolerated the situation as he has no choice but to do it and motivate himself to keep going:

“Pera’, yun talaga ang aking coping mechanism, parang ano, parang stressful talaga diba pag nagtuturo tayo, andyan magagalit tayo sa mga bata yan, so makikipag meeting ka dito, makikipag meeting ka sa ganyan. Yung coping mechanism ko po habang ginagawa ko sya, ang nasa isip ko, babayaran ko dito, babayaran ako dito, babayaran naman ako dito.”

In an article written by Simpson (2018), she said that people with strong stress tolerance can thrive in high-pressure situations and can effectively wrestle with problems and resolve them. This means that the respondents having a moderate level of these coping strategies, problem solving, and tolerance, seems to have developed a healthy approach to the stress caused by the COVID-19 pandemic.

Overactivity (*pagmamalabis*) is a Filipino coping strategy that involves putting much effort and time into an activity to divert attention away from stress. This means that they adequately practice coping strategies such as overworking and overextension

to distract themselves during stressful situations (Rilveria, 2018). One of the participants shared that he is feeling more relieved from stress when he is preoccupied:

“siguro sa iba po nakaka-stress po yung pagdadagdag ng trabaho pero sa akin po kasi naging way siya to somehow mawala po sa isip ko yung pangyayari. At least ma—occupied po ako ng trabaho.”

While some participants see overworking as an effective way to relieve stress, some use relaxation/recreation as their way to cope with it. Relaxation/recreation (*paglilibang*) refers to one’s engagement in activities that would relieve and reduce the effects of cognitive and emotional load of the stress. The participants practice coping strategies such as walking in the park, taking enough rest, and others. A participant shared that he spends time outside to experience the beauty of their place and nature to relieve stress and gain more confidence in facing his problems:

“Kase malapit po kami sa dagat, magagandang tanawin so pagtingin mo lang po sa mga yun narerelax ka na po at nalilimutan mo na po yung problem then pagbalik mo po sa bahay you have mas higher confidence na masosolve yung problem na yun or situation po na yun.”

This means that even though the participants may be different in terms of how they urgently respond to resolve a problem, they would always face it and make sure to have the right frame of mind.

The most common coping strategy is religiosity (*pagkarelihiyoso*). It is a Filipino coping strategy that involves some religious behaviors which means that they are mostly practicing coping strategies such as praying, entrusting everything to God, and believing in His will. For instance, one of the participants who lost his father due to COVID-19 said,

“but I am so thankful with my faith, because I can say that even though I went through with all of those... those things, I still have joy and peace within my heart and it gives me the courage to do the same.”

It was supported by the findings of Edara et al. (2021) in their research of the relevance of religiosity in teacher contentment in the Philippines, as reflected by the effects of resilience, optimism, and well-being. They discovered that religiosity and its facets might be utilized as a positive coping technique to cope with academic difficulties brought by the COVID-19 pandemic.

Table 3
Level of Filipino Coping Strategies

Coping Strategies	Mean	Std. Deviation	Interpretation
Cognitive Reappraisal	3.1835	0.5879	Moderate
Social Support	2.6319	0.7013	Moderate
Problem Solving	3.4406	0.5421	Moderate
Religiosity	3.4730	0.7230	Moderate
Tolerance	2.6709	0.7399	Moderate
Emotional Release	2.0009	0.5984	Low
Overactivity	2.4050	0.7189	Moderate
Relaxation	3.1216	0.5491	Moderate
Substance Use	1.3482	0.5633	Low

Legend: 1-2.33 = Low; 2.34-3.67 = Moderate; 3.68-5.00 = High

Table 4 shows the comparison results in determining the significant differences in the quality of life of the respondents when they were grouped according to their demographic profile

The computed p-value of the Mann-Whitney U and Kruskal Wallis H test shows no significant differences in the quality of life of the respondents across groups of demographic categories. This implies that the study does not have sufficient evidence to conclude that there is a significant difference in the level of quality of life when grouped according to their demographic profile. The demographic categories showed no variation in the quality of life of the respondents regardless of age groups, gender orientations, level of educational attainment, marital status, being a breadwinner, sources of income, and length of years in service at PUP. On the contrary, the study conducted by Rabacal et al. (2020) found that there is a significant difference on the impact of COVID-19 on the quality of life of the participants along with degree programs. However, there is no difference in terms of sex, age, marital status, employment status, monthly salary, presence of the medical condition, the perceived threat of presence of a COVID-19 case near their residence, and personal knowledge about someone they know who got infected or died of COVID-19.

Table 4

The Difference in the Level of Quality of Life of the respondents when grouped according to the Demographic Profile

Qol***	Age*	Gender Orientation*	Highest Education Attainment*	Marital Status*	Being a Breadwinner**	Other Source/s Income*	Years of Service*
PHYS	0.2655	0.8855	0.2569	0.3114	0.5776	0.1623	0.8519
PSYCH	0.8924	0.9034	0.7244	0.3719	0.0816	0.4288	0.1913
SOC	0.3446	0.5288	0.2151	0.5481	0.2660	0.4735	0.9444
ENVIR	0.4883	0.5170	0.8988	0.6812	0.2753	0.7902	0.0954

*computed p-value using Kruskal Wallis H Test

**computed p-value using Mann-Whitney U Test

***Legend:PHYS – PHYSICAL, PSYCH-PSYCHOLOGICAL. SOC- SOCIAL, ENVIR - ENVIRONMENTAL

Table 5 shows the comparison results in determining the significant difference in the level of coping strategies when grouped according to their demographic profile. Data shows that there are differences in the religiosity of the respondents across age groups ($p < 0.05$). Whereas, across groups of different sources of income, emotional coping shows a variation ($p < 0.05$). There are also differences among groups of respondents according to their marital status when it comes to overactivity ($p < 0.05$). Lastly, the respondents' relaxation varies across age groups ($p < 0.05$). Other demographic categories are not significant measures of assessing the variance in coping strategies of the respondents.

Table 5

The Difference in the Level of Coping Strategies when grouped according to the Demographic profile

Coping Strategies	Age*	Gender Orientation*	Highest Education Attainment*	Marital Status*	Being a Breadwinner**	Other Source/s Income*	Years of Service*
Cognitive Reappraisal	0.5964	0.2361	0.5520	0.8494	0.2049	0.3002	0.1288
Social Support	0.7116	0.5184	0.6863	0.5112	0.5627	0.2407	0.1017
Problem Solving	0.9120	0.2018	0.6592	0.8816	0.5952	0.2675	0.6092
Religiosity	0.0403	0.1672	0.5204	0.7032	0.1251	0.5022	0.2328
Tolerance	0.2748	0.5196	0.2925	0.7757	0.4287	0.4942	0.0693
Emotional Release	0.2252	0.7425	0.1942	0.0846	0.4415	0.0009	0.2588

Quality of life of Non-Permanent Teachers and Their Coping Strategies
During the Covid-19 Pandemic

Coping Strategies	Age*	Gender Orientation*	Highest Education Attainment*	Marital Status*	Being a Breadwinner**	Other Source/s Income*	Years of Service*
Overactivity	0.7062	0.9556	0.9271	0.0069	0.4792	0.7628	0.7183
Relaxation	0.0435	0.5789	0.6207	0.6392	0.3784	0.1938	0.0732
Substance Use	0.3286	0.5829	0.1193	0.1267	0.6291	0.8165	0.0786

*computed p-value using Kruskal Wallis H Test

**computed p-value using Mann-Whitney U Test

To further analyze the extent of difference across demographic groups, a post hoc analysis through a comparison of means was conducted. The data are presented in Table 6. In terms of religiosity, although the three age groups were all at a moderate level, the highest is the middle-aged adults (M=3.5142), followed by the young adults (M=3.4941), and the lowest is the older adults (M=3.1310). This indicates that middle-aged adults relatively use religious practices more to cope with COVID-19 compared to the two age groups. Religiosity is a common coping strategy of Filipinos. This was explained by Krok (2015) who stated that religious beliefs and behavior can be a powerful source of stability and support to an individual's goals and values because they offer a solid existential foundation for interpreting and evaluating one's experience as well as guiding one's behavior. Middle-aged people may see religion as a moral and social "compass" that helps them navigate life's events and get used to the many adult transitions. To support this claim, one of the participants narrated, *"mas reliant ka kay God na everything has a reason and everything has an end. During the pandemic, from January to April, natapos ko po yung straight 9 Sunday's ng Panata kay Santa Rita."* This means that faith and trust in God serve as a guide and hope that this crisis will not last while finding reasons why it happened. On the contrary, the study of Koenig et al. (1988) showed that religious practices were common in the older adult population, both in private and public social religious behaviors. Nearly half (45%) of respondents said that their religious beliefs or behavior played a significant role in how they adjusted. For instance, one of the participants relayed her experience,

"yung feeling na any time of the day madaling araw, gabi, tanghali when I feel like I missed my dad, or so stressful, I just worship and talk to God and write out everything. It's like a relief parang healing part sya— na yung — kahit parang lalo 'pag galit na galit ka, wala kang magawa, yung— basta lahat ilabas mo na lang lahat. I sing out loud I cried out loud and pray out loud in whatever stressful times."

This kind of claim was also emphasized by Malone and Daswell (2018) that religion, spirituality, and/or belief have a positive impact on older adults as it becomes a source of strength, comfort, and hope in times of need.

Another coping strategy that showed variation in level across age groups is relaxation. When compared across age groups, they are all at a moderate level but young adults are the highest ($M=3.1775$), next are older adults ($M=3.1333$), and last is middle-aged adults ($M=3.0114$). During this time of the pandemic, it is important that Filipinos partake in leisure and relaxation activities as ways to lessen the emotional stress brought on by this crisis. For instance, one of the participants narrates:

“I was just happy that I was able to get back in physical activities, have my free time going for bikes around—kasi kung—before the pandemic, mas gusto ko po talaga mag roam around with no place or definite place to go, basta gusto ko lang po nagiikot ikot.”

This is supported by Polizzi et al. (2020) as who claimed that people performed better when they engaged in activities that established control, coherence, and connection. Control entails daily activity planning and organization. Long-distance communication is necessary to keep up connections, and mindful practices like deep breathing and meditation help to preserve coherence. The participants elaborate: *“tulog po muna, ire-relax ko muna yung sarili ko bago ako mag-isip ng mga pwedeng gawin para masolusyunan yung problema ko.”* This proves how important relaxation and recreation are to a person’s daily life and well-being.

The next coping strategy is emotional release which showed a significant difference when the respondents are grouped according to their other income sources. This refers to the other sources of income of the respondents aside from teaching especially during the time of pandemic that they have no compensation from PUP. These sources of income are then categorized in clusters according to their field of profession. Although all the clusters in sources of income signify low emotional release, the highest came from the technology cluster ($M=2.1250$), next are those who have no other source of income ($M=2.1096$), followed by those who have a business or are engaged in education and social work ($M=1.9020$), and lowest came from the engineering cluster ($M=1.2500$). A study by Santihastuti et al. (2022) states that teachers are aware of their emotionally demanding jobs so they struggle to regulate their emotions. Aside from teaching skills, they need to learn other skills that are essential to their jobs like portraying different roles and showing positive characteristics. It requires them to modify their behaviors whenever they experience cognitive dissonance for them to handle their classes effectively. One

participant narrates his feelings during this pandemic, *“minsan naiiyak pero di ko alam bakit”*. Sometimes teachers become emotional but need to know how to manage them properly. Attention and consciousness management is a self-regulation ability of a person to control their emotional disposition and behavior in times of hardships. Teachers need to conduct emotional control in their work and make it their priority (Sipeki et al., 2022).

Also in the same table, the marital status of the respondents showed differences in the coping strategy of overactivity. Overactivity is highest among respondents in a domestic partnership (M=3.0250), next are those who are separated (M=2.9000), followed by widowed (M=2.8400), single (M=2.4408), and married (M=2.2635), respectively with married respondents at the lowest. In order for people to distract themselves from the problem brought about by the pandemic situation, one way is to do some activities or extend their time working that can relieve the stress they were experiencing. For instance, one interviewee who is a single said,

“siguro sa iba po nakaka-stress po yung pagdadagdag ng trabaho pero sa akin po kasi naging way siya to somehow mawala po sa isip ko yung pangyayari. At least ma—occupied po ako ng trabaho.”

This statement was backed up by the study of Hidalgo-Andrade et al. (2021) which states that career changes like working and studying in times of pandemic might be helpful to cope with economic burdens and limitations. The teachers may feel more productive when they find some activities like these and see this as beneficial to their mental health and well-being during this time of crisis.

Table 6
Post Hoc Analysis for the Difference on the Level of Coping Strategies when grouped according to the Demographic profile

Coping Strategies	Age Groups	Mean	Std Deviation	Remarks
Religiosity	Young Adults (18-35 years old)	3.4941	.72578	Moderate
	Middle-aged Adults (36-55 years old)	3.5142	.67313	Moderate
	Older Adults (More than 55 years old)	3.1310	.84269	Moderate
Relaxation	Young Adults (18-35 years old)	3.1775	.53471	Moderate
	Middle-aged Adults (36-55 years old)	3.0114	.55199	Moderate
	Older Adults (More than 55 years old)	3.1333	.60773	Moderate

Coping Strategies	Other Source/s of Income	Mean	Std Deviation	Remarks
Emotional Release	None	2.1096	.62627	Low
	Business Education and Social Work Profession Cluster	1.9020	.53496	Low
	Engineer Profession Cluster	1.2500	.25000	Low
	Technology Cluster	2.1250	.88388	Low
Coping Strategies	Civil Status / Marital Status	Mean	Std Deviation	Remarks
Overactivity	Single, never married	2.4408	.71959	Moderate
	In a domestic partnership	3.0250	.54968	Moderate
	Separated	2.9000	.11547	Moderate
	Married	2.2635	.68224	Low
	Widowed	2.8400	1.11714	Moderate

Table 7 shows the co-varying relationships (CVR) between the four dimensions of quality of life and the nine coping strategies. In terms of physical quality of life, most coping strategies are correlated except for social support and emotional coping release. Cognitive ($r = 0.2190, p < 0.05$), problem-solving ($r = 0.2330, p < 0.05$), religiosity ($r = 0.2990, p < 0.05$), and relaxation coping ($r = 0.2420, p < 0.05$). strategies positively correlate with the physical quality of life. Meanwhile, within the same domain of quality of life, tolerance ($r = -0.1440, p < 0.05$), overactivity ($r = -0.1700, p < 0.05$), and substance use ($r = -0.1280, p < 0.05$) were negatively correlated. As these coping strategies increased in use, the lower the physical quality of life.

To support the findings, Danhauer et al. (2009) explained that positive cognitive restructuring was the most used coping strategy by women diagnosed with breast cancer. The study showed that over time, through the consistent use of positive cognitive restructuring, the patient’s tendency to seek social help, feeling of detachment, and wishful thinking decreased. Just like one of the married participants said about how he combats his problems,

“I-solve mo na lang ‘yung pwede mong i-solve. Ayun po so, gawin na lang ‘yung pwedeng gawin tapos pag-isipan na lang yung hindi kayang gawin. And then malaking tulong po kasi yung-- dinner. Kasi ‘pag nagdi-dinner kami ng asawa ko, nag-didiscuss kami. Sinasabi ko ‘yung mga problema ko, stresses ko, tapos sinasabi niya rin yung kaniya. Nalalabas mo parang ganun.”

This means that social support can assist reduce stress and improve mental health and well-being. To support the abovementioned understanding of problem-solving, Sone et al. (2017) reported that excellent social problem-solving abilities can contribute to a lower risk of poor mental health. Based on the study, physical activity and social problem-solving abilities can combine to assist maintain mental health, hence increasing physical quality of life. To relate to this, one participant shared:

“I was just happy that I was able to get back in physical activities, medyo lumuwag po dito sa may Calamba area. So, what I did was really to have my free time going for bikes around—kasi nung before the pandemic, mas gusto ko po talaga - I’d rather roam around with no place or definite place to go, basta gusto ko lang po nagiikot-ikot.”

This entails that these kinds of physical activities are effective ways to decrease the impact of the pandemic and thereby help attain good physical health.

In terms of religiosity as a coping strategy for improved physical wellbeing, in Koenig’s (1998) study of the incidence of religious beliefs and practices among hospitalised patients medically ill older individuals, over 40% of the participants who reported that their religious faith was the most essential factor that aided them deal with their illness, and over 85% held inherent religious attitudes. As narrated:

“More on prayer, worship song, alam mo po yung feeling na anytime of the day madaling araw, gabi, tanghali when I feel like I missed my dad, I am so stressed, I just worship and talk to God and write out everything. It’s like a relief parang healing part sya— na yung — kahit parang lalo ‘pag galit na galit ka, wala kang magawa, — basta lahat ilabas mo na lang lahat. Andami kasing worship song na alam mo na parang saktong sakto para sayo,] ganun po yung ginagawa ko parang I sing out loud I cried out loud and pray out loud whatever stressful times.”

This means that when faced with obstacles in life, religious faith or beliefs support individuals more in expressing frustrations through various rituals and practices that religion has taught people to cope with life’s most trying events.

Lastly, for relaxation, research by Hassanpour-Dehkordi & Jalali (2016) on Iranian aging persons investigated the effect of muscular progressive relaxation in which the patients contract a set of muscles, relax them after five seconds, and then release all muscle contractions, and then proceed to take five deep breaths. The study revealed that there was a statistically significant difference in the mean score of physical performance, ability, and quality of life in general between Iranian aging persons who practice muscular

progressive relaxation and those who do not. Physical activities benefit the person's quality of life in terms of relaxation: "*Natutuwa ako pag nagkakazumba, pinapawisan feeling ko pumapayat ako.*" This refers to physical exercise, which explains why the body relaxes when engaged in the pastime or sport of choice. On the other hand, the three coping strategies that reflect the negative relationship with the physical quality of life are tolerance, overactivity, and substance use. The description of the opposite direction movement is further proven in a few published studies. For instance, a study on the relation between substance use and quality of life in a community sample of adults shows that cocaine use impacts the health of several Brazilian adults negatively (Bernardes, 2018).

Table 7
Relationship between Quality of Life and Coping Strategies

Coping Strategies	QOL***							
	PHYS		PSYCH		SOCIAL		ENVIR	
	Person	p-value	Person	p-value	Person	p-value	Person	p-value
Cognitive	0.2190**	0.0002	0.432**	0.0000	0.309**	0.0000	0.338**	0.0000
Social Support	0.0439	0.4662	0.0992	0.0990	0.168**	0.0049	0.161**	0.0070
Problem-solving	0.2330**	0.0001	0.370**	0.0000	0.408**	0.0000	0.287**	0.0000
Religiosity	0.2990**	0.0000	0.387**	0.0000	0.291**	0.0000	0.298**	0.0000
Tolerance	-0.1440*	0.0163	-0.126*	0.0360	-0.0350	0.5611	-0.1081	0.0721
Emotional	-0.0735	0.2218	-0.0606	0.3142	0.0506	0.4007	0.0631	0.2944
Overactivity	-0.1700**	0.0046	-0.171**	0.0043	-0.0617	0.3050	-0.0720	0.2313
Relaxation	0.2420**	0.0000	0.343**	0.0000	0.344**	0.0000	0.368**	0.0000
Substance	-0.1280**	0.0336	-0.0930	0.1220	-0.0790	0.1892	0.0041	0.9454

*Significant at 0.05 level

**significant at 0.01 level

***Legend: PHYS – PHYSICAL, PSYCH-PSYCHOLOGICAL. SOC- SOCIAL, ENVIR - ENVIRONMENTAL

The next domain shows relationships with six coping strategies. Psychological quality of life is positively related to cognitive reappraisal ($r=0.432, p<0.05$), problem-solving ($r=0.370, p<0.05$), religiosity ($r=0.387, p<0.05$), and relaxation ($r=0.343, p<0.05$). Meanwhile, negative correlations were noted with psychological quality of life and tolerance ($r=-0.126, p<0.05$) and overactivity ($r=-0.171, p<0.05$). This indicates that the use of cognitive reappraisal, problem-solving, religiosity, and relaxation coping strategies result in better psychological quality of life.

Several studies suggest similar results. The relationship between the cognitive coping mechanism and psychological quality of life was reflected in a study conducted by Lábadí et al. (2022). It was found that the elderly who used positive refocusing during the pandemic brought experiences of less negative emotional change than those who did not. Concerning problem-solving coping mechanisms and psychological quality of life, Cuncic (2021) stated that problem-solving is a type of therapy that addresses challenges related to life stress and is focused on aiding in the solving of concrete problems. This methodology can be utilized to address problems linked with a variety of psychological and physiological conditions. Problem-solving therapy may aid in the treatment of mental health concerns such as anxiety and depression; hence, it has been demonstrated that problem-solving promotes psychological well-being. For example, one of the participants narrates:

“Sa coping mechanism po siguro po the no.1 is right attitude towards work, saka work towards the situation tsaka yung right resources or right person to talk, particular don sa situation na yon yung best coping mechanism natin—cope during those situations. Sa attitude siguro kase na try nating i-understand how are we doing during that situation tapos yung sa second yung right resource, vinavalidate ba natin kung tama ba yung attitude natin towards dun sa particular situation ayun po.”

This means that the ability to deal well with stressful situations, whether at work or in personal relationships, depends on having the proper attitude. This also applies to how effectively one uses the resources available to them as a coping technique.

Furthermore, the relationship between the psychological quality of life and religiosity as a coping strategy is backed by the research of Tepper et al. (2001) examining the prevalence of religious coping among persons with persistent mental illness. The results show that more than 80% of the participants coped with their daily difficulties and frustrations with the help of religious beliefs or activities, and the majority performed religious activities in as much as half of their coping time, concluding that religion may serve as a potentially effective coping method for persons with mental illness. To further relate to this, some of the interviewees narrate their faith and realizations;

“I am so thankful with my faith, because I can say that even though I gone through with all of those... those things, I still have joy and peace within my heart and it gives me the courage to do the same. Actually, this start of the semester, I become more jolly.”

This means that having faith had so much benefits like peace, joy and courage which are helpful to one's mental state. Also, another participant said:

“Siguro po ang realizations ko with these experiences in this pandemic - we just need to trust everything to God, siguro po ginawa po ng Diyos itong situation natin na ito po para mas mabigyan nating pansin yung mga bagay na madalas naneneglect natin kase sobrang busy tayo sa trabaho, sa mga bagay bagay na gusto natin. Ngayon po mas nagkaroon po tayo ng focus sa family natin, sa mga pinahalagahan na po natin yung mga bagay na dati binabalewala lang natin. Siguro isa po yun sa mga bagay na— isang mabuting nagawa ng sitwasyon natin, is to prioritize the thing we usually neglect po and yun po na laging pinapaniwalaan po na everything happens for a reason po talaga.”

This statement only shows that this pandemic gives both bad and good experiences and many lessons in life like trusting God and a deeper sense of faith, more valued time with family, and learning how to prioritize things that are important in life.

Also, when relaxation is used more as a coping strategy, there is a reliable tendency for a better psychological quality of life. In research by Valikhani et al. (2020) on the relationship between mindfulness, quality of life, and mental health, it was found out that mindfulness has been shown to improve people's quality of life and mental health by lowering their perceived stress levels. For instance, one interviewee shared;

“Siguro po yung coping mechanism ko po yun, playing ML (mobile legend). And then, yun po since sabi ko nga po nakatira kami malapit sa pala-isdaan. So, yung environment po siguro isa po yun sa mga factor kung bakit medyo relaxing po yung lugar.”

This means that relaxation can take many different forms, from general activities to highly specialized hobbies like playing video games. One suggestion is to travel outside of the city to reconnect with nature in the form of environmental modifications, which could significantly affect the behavior of a person exposed to stressful situations. Furthermore, tolerance ($r = -0.126$, $P < 0.05$) and overactivity as coping strategies ($r = -0.171$, $p < 0.05$) posit poor psychological quality of life.

On the social dimension of quality of life, cognitive reappraisal ($r=0.309$, $p<0.05$), social support ($r=0.168$, $p<0.05$), problem-solving ($r=0.408$, $p<0.05$), religiosity ($r=0.219$, $p<0.05$), and relaxation ($r=0.344$, $p<0.05$) were correlated. The study by Raypole (2020) states that the individual develops increased compassion and empathy, as well as strong interpersonal relationships through emotion-focused coping strategies in dealing with a

situation. For instance, one of the participants has shared his experiences during the peak of the pandemic;

“Sinabihan na lang rin ako ng principal ko kasi tumatawag sila every week or every two weeks, tumatawag yung mga kasamahan ko para at least gabayan ako or bigyan ako ng pampalakas ng loob.... So, ‘yun talagang usap kami ng father ko, ng half-sister ko, and also yung kaniyang friends, magtulungan po ba. ‘Yun yung isang management na ginawa namin. Although, habang nakaburol ‘yung mommy ko alam mo yun tatagan lang ng loob. So, yun yung isa sa mga way namin eh, patatagan kami ng loob. Talagang kung ito yung problema, eto muna isipin muna natin, wag muna problemahin yung andiyan at kami naman ang bahala doon. So ‘yun, ‘yun yung isa sa magandang management namin eh, distribution of work...Tapos ngayon ayon talagang ang taas ng bilib nila sa akin lalo na yung mga faculty dahil sa ayun nakaka relief na ako doon sa sitwasyon. So tuloy tuloy sila nagbibigay ng support, verbal support na motivational support na ginagawa nila and yun talaga ang pinakakailangan ko ngayon para at least tuloy tuloy yung pagbangon ko. And then siguro eventually after a year or two talagang masasabi ko na nakabangon na ako.”

These narratives reflect that a lot of people going through hardships in life find that receiving social and emotional assistance improves their quality of life. One advantageous factor is that they can obtain input from those close to them and use it as leverage to deal with the current predicament. Social and emotional support can help a person feel better even when it is not a perfect answer to their condition.

A study conducted by Miao et al. (2022) discovered that, unlike social distancing, support seeking, and personal hygiene were positively associated with an individual’s well-being during a pandemic, which is considered as coping through cognitive reappraisal, showing the coherence with the implications of the data given with the cognitive coping strategy. The social support coping strategy, on the other hand, is supported by Helgeson (2003), whose study states that the functional aspects of support demonstrate the stress-buffering hypothesis. When people are allowed to take their time processing their issues when social support strategies are used, there is a positive change in the social quality of life. This relates to one of the participants that narrate:

“isolve mo na lang ‘yung pwede mong i-solve. Ayun po so, gawin na lang ‘yung pwedeng gawin tapos pag-isipan na lang yung hindi kayang gawin. And then malaking tulong po kasi yung ano dinner. Kasi ‘pag nagdi-dinner kami ng asawa ko, nag-discuss kami. Sinasabi ko ‘yung

mga problema ko, stresses ko, tapos sinasabi niya rin yung kaniya. Nalalabas mo parang ganun.”

The covarying relationship between the social quality of life and problem-solving as a coping strategy implies that problem-solving improves the social quality of life. As per Gutierrez (2012), good problem-solving strategies can assist children avoid confrontation with others in the school and in their daily lives, develop children’s initial empathy skills, and enable them to make more positive attributions about another person’s intentions. The abovementioned studies state that utilizing cognitive reappraisal and social support gives a person more time to understand and deal with life’s most challenging experiences, enhancing their quality of life by providing them more focus and options to choose from. The application of cognitive reappraisal and social support initiates the coping mechanism in the problem-solving capabilities of a person.

A reliable tendency that the social quality of life improves when religiosity is used as a coping strategy is shown with the positive and statistically significant relationship of the pair. Nezelek (2020) investigates the relationship between religiosity and naturally occurring social interaction and found that religiosity is positively related to the quality of their daily social experiences. For instance, one participant said:

“isa pang way na ginawa ng laboratory high school is nagkaroon sila ng parang recollection ang dating. Parang mayroon silang in-invite from PUP parang father—sorry hindi ako catholic—pero ano naman kahit na pari yung nagpe-preach sa amin, parang ang dating is to everyone. Na-address to any religion. Sobrang nakatulong ‘yon kasi binigyan kami ng aral tapos nagkaroon ng parang group para pag-usapan namin. Then pina-pagusapan yung bagay na problema mo kahit papano nakakagaan eh. So ayun yung isa sa mga way na nakakapagmanage ng sitwasyon na ‘yun.”

This qualifies that social support through group sharing and psychospiritual activity relieves the individual by leading them to deal with the most stressful and challenging situations in life.

Lastly, as relaxation is used more as a coping strategy, there is also a reliable tendency for a better quality of social life. According to an article by Levitan (2017), people’s social brains are malleable, and some types of meditation and contemplative techniques that promote relaxation may help develop social intelligence, minimize social stress, and have a better quality of social life in general. For example, one of the interviewees shared their experiences in the province during the pandemic:

“nasa province kami, hindi ganun ka-strict, we still go with friends, go to the beaches, mga ganun po, falls etc. So, hindi po ganun ka restricted yung movement namin dito sa province basta meron po kaming certificate — wala na pong masyadong pagbabago dun sa konsepto ng network of friends and family during the pandemic, di po sya masyadong naapektuhan.”

This proves that recreational activities like going out with friends or going to the places like the beach and waterfalls are another type of coping mechanism that affects the quality of life, which may lead to social contacts that allow the person to momentarily shift attention away from dealing with the most stressful problems in life.

The last column of table 7 showed the co-varying relationships (CVR) between the environmental quality of life and the nine coping strategies. Similar to the social dimension, environmental quality of life positively correlates with cognitive reappraisal ($r=0.338, p< 0.05$), social support ($r=0.161, p< 0.05$), problem-solving ($r=0.287, p< 0.05$), religiosity ($r=0.298, p< 0.05$), and relaxation ($r=0.368, p< 0.05$).

In terms of environmental quality of life, as what the results reflect although may have happened by chance, the direct proportionality of the quality of life and emotional release coping strategies is manifested in terms of distraction. When an individual wants to take their mind off the problematic situation, they tend to focus on relaxation such as focusing on a task, preferably cleaning to make a healthy environment for themselves, or simply taking a walk or appreciating the environment—in that case, both are improved (Morin et al., 2021). For instance, one of the informants said:

“I had the time to stop and to reconnect — that is one of the things I missed back when i was studying kase po nasa don bosco ako dati, so we have yearly recollection and retreats that really help me be grounded pa rin as a person. not only like professionally and academically parang ibinabalik niya ako sa grounding root — the pandemic made us stop with everything, during the pandemic it help me regain my balance.”

This means that the environmental aspect may have influenced an individual’s quality of life allowing the person to reconnect with his surroundings, and allowing him to focus on developing emotional support that is readily available when needed. It also provides a grounding impact for oneself in establishing work-life balance, whether professionally or intellectually.

CONCLUSIONS

The COVID-19 pandemic has resulted in unprecedented challenges for all. To the non-permanent teaching personnel of PUP, this posed a threat to their quality of life and compelled them to use strategies to cope. Among the four domains of quality of life, the physical aspect of the non-teaching personnel was the most affected one. Given the nature of the pandemic, the fear about one's own physical health due to the deadly virus affects a person's quality of life. Interestingly, the profile of the non-permanent teaching staff of PUP commands a high level of quality of life. This is due to the use of various types of coping strategies to maintain their resiliency amidst the pandemic. Positively, they cope through cognitive reappraisal, problem-solving, and relaxation. Typical of Filipinos, they are distinctly religious. However, overactivity also became an avenue to divert their fear of the pandemic.

Some of their demographic characteristics showed some degree of differences in the coping strategies. Religiosity is high among middle-aged adults but lower among older adults. Relaxation was more common among young adults but lower among older adults. Meanwhile, emotional release was more common among those whose other sources of income is coming from the technology cluster. Further, overactivity was most common among those in domestic partnerships.

Linking quality of life and coping, the study revealed that physical quality of life is related to cognitive reappraisal, problem-solving, religiosity, and relaxation. However, a lower level of physical well-being is experienced with tolerance, overactivity, and substance use. Whereas, psychological quality of life is determined by cognitive reappraisal, problem-solving, religiosity, and relaxation. However, it is negatively affected when using tolerance and overactivity. Further, social and environmental well-being is both affected by cognitive reappraisal, social support, problem-solving, religiosity, and relaxation.

RECOMMENDATIONS

Due to various limitations caused by the pandemic, this study used a similar group of participants from the university for easy access. Also because of the data privacy regulation and the inability to conduct face-to-face interviews, the researcher was unable to completely utilize and saturate the entire population. Therefore, the researchers suggests for future studies to increase the number of population to cover the other state universities in Metro Manila.

Moreover, some participants were distracted and multitasking during the focus group discussion, while others requested a specific time slot for their scheduled interview due to prior commitments, and one participant had to leave early and was unable to complete the interview, forcing the researcher to reschedule and complete the interview. The researchers thus recommend for future studies to explore a one-on-one interview to create a more private atmosphere that encourages openness and focus of the interviewee. Consequently, it would provide the researchers unfiltered and distinctive experiences from the participants, extracting more information that would help the study. It would also be beneficial to the participants since the time will be used efficiently and would not consume their time compared with FGD.

These recommendations could be applied to design strategies and programs that will act as catalysts to address the issues identified during the study. It is further recommended that the institution should enforce policies and programs that will support the non-permanent teaching personnel's quality of life positively. Programs should target behavior modification and habit formation that will prevent reliance on maladaptive coping. A similar study may also be conducted in the context of the current state of the pandemic.

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