

An Exploration of Work Anxiety, Adaptability, and Help-Seeking Barriers among University Faculty during the Pandemic

Agnes dR. Crisostomo, Ma. Adora C. Tigno, Estrella Ranas, Josefina C. Ochoa*
Bulacan State University, Bulacan, Philippines

*Corresponding Author Email: josefina.ochoa@bulsu.edu.ph

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Abstract. The Covid-19 pandemic has profoundly impacted the education sector, especially teachers' psychological well-being. This study investigates anxiety, adaptability, and barriers to help-seeking behaviors among 468 Central Luzon teachers from state universities and colleges (SUCs). It also examines the relationships among these variables. Using a mixed-methods approach, quantitative data were gathered through an online survey, while qualitative insights were obtained from a virtual focus group discussion with seven participants. Results indicate that teachers experienced high anxiety levels ($M=3.59$), driven by health concerns, technology-related challenges, and transportation issues. Despite these stressors, their adaptability to work was also high ($M=3.6$), supported by coping strategies such as self-care, seeking support, and acceptance. However, moderate barriers to seeking professional help ($M=3.0$) were identified, linked to self-reliance, social stigma, and faith. The study further reveals that difficulties in seeking mental health support are associated with lower adaptability at work. These findings emphasize the importance of promoting self-care practices and resilience-building initiatives for SUC faculty during and beyond the pandemic.

Keywords: COVID-19; Anxiety; Adaptability; Help-seeking behavior; SUC faculty.

1.0 Introduction

The COVID-19 pandemic has profoundly impacted the educational system, forcing colleges and universities worldwide to transition abruptly to online learning. This shift disrupted traditional teaching methods, requiring teachers and students to undergo significant adjustments to maintain the quality of education. Teachers faced challenges adapting to blended online learning and balancing personal and professional demands. The anxiety level rose to a significant height among employees on almost all workplaces (Eguchi H, Hino A, Inoue A, Tsuji M, Tateishi S, Ando H, Nagata T, Matsuda S, Fujino, 2021)

Workplace pressures have taken a toll on their mental health, contributing to issues such as stress, anxiety, and depression. Research has documented the mental health struggles of teachers during the pandemic, highlighting the prevalence of anxiety (17%), depression (19%), and stress (30%)—levels notably higher than those in the general population (Ozamiz et al., 2021; Cenat et al., 2021). Contributing factors include the sudden shift to emergency e-learning, increased workload (Palau et al., 2021), and school operations uncertainties (Besser et al.,

2020). While adaptability has been identified as crucial for coping with these challenges (Olson, 2020), studies on teachers' help-seeking behaviors and their barriers to accessing mental health support remain scarce.

Studies have reported prevalence of burn-out, stress, anxiety and depression among teachers during the COVID-19 pandemic. The results of the meta-analytic review of studies on teachers' mental health during the pandemic conducted by Ozamiz, Mondragon, Notivol, Moreno & Santabarbara (2021) show that a high percentage of teachers have symptoms of stress, anxiety and depression. The findings which report that the teachers' levels of anxiety (17%), depression (19%), and stress (30%) were somewhat higher than those found in another meta-analysis conducted in general population during the pandemic (Cenat, Rochette, Kpolou, Noorishad, Mukunzi, 2021) where the prevalence of anxiety was 15.5%, depression was 15.75%, and stress was 13.29%.

Some research on this subject has highlighted the factors contributing to their symptoms of anxiety and stress which include emergency e-learning, teachers' overload (Palau, Fuentes, Morgas & Cebrian, 2021) and the uncertainties in school set-up amid the pandemic (Besser, Lotem & Hill, 2020). With the emergence of increasing levels of anxiety and stress, teachers need to level up on their adaptability to navigate new, changing, and uncertain situations effectively (Olson, 2020) to ensure their well-being and maintain their commitment to work during the COVID-19 pandemic. Seeking support from others especially from mental health professionals is found to be vital in dealing with stress, anxiety and depression. The literature about help-seeking behaviors of teachers is scarce. Thus, this study was conducted to add to the literature about teachers' anxiety, their adaptability and barriers to help-seeking behaviors.

With the situation of COVID-19 pandemic, teachers are facing and dealing with new measures of the delivery of instructions, and the insecurities and uncertainties of the times that are generating a great toll on their mental health. The aim of this study is to determine the level of anxiety that the faculty of state university and colleges in Region 3 are experiencing during the pandemic and the level of their adaptability to work performance. It also explores the barriers to their help-seeking behaviors. Further, this study analyzes the relationship among these variables.

In terms of adaptability, the American Psychological Association (APA) Dictionary of Psychology (2015) defines adaptability as "the capacity to make appropriate responses to changed or changing situations" and "the ability to modify or adjust one's behavior in meeting different circumstances". The onset of the COVID-19 pandemic has brought unprecedented changes in the education setup and these have contributed to the anxieties experienced by teachers. In a study conducted by Delgado, Padilla, Zuniga (2021) on teaching anxiety, stress and resilience during COVID-19 Pandemic, teaching anxiety, preparedness and resilience among academic professionals were measured using the adapted COVID-19 stress scales (ACSS). The results showed an absent to mild to moderate level of anxiety among the teaching professionals and the greatest predictor to adaptability to coping with stress is the high level of resilience they developed throughout the quarantine.

In another study conducted by Vergara-Rodriguez, Anton-Sancho and Fernandez-Arias (2022) which measured variables influencing professors' adaptation to digital learning environments during the COVID-19 pandemic through a validated survey that was answered by 908 university professors, results showed a negative correlation between the pandemic stress and the professors' adaptation skills to digital environment. Moreover, the professors' high level of self-confidence and digital competence showed a positive influence on their adaptation skills.

During the onset of the pandemic, however, a study conducted by Desinova, Ermakov, Skirtach and Korkhova (2020) reported less adaptive coping strategies of university teachers during the transition to online education. The study which was conducted to 119 university teachers aimed to examine the severity of their anxiety, stress level, career maladjustment, and coping strategies. The results indicate an increasing level of stress and anxiety over the use of the internet which was causing discomfort. Teachers demonstrate a high level of career maladjustment. Their preferred coping strategy is to openly complain about work. The difficulties experienced by the teachers in their adaptability is determined by their stable characteristics.

Barriers to Help-Seeking Behavior. In the phenomenological study conducted by Topkaya (2015), she reported that the factors inhibiting psychological help seeking in adults include social stigma, unwillingness to share problems with an unfamiliar person, the belief that private problems should be kept in the family, one's belief that he/she can solve his/her problems, and not knowing enough about the psychological help process.

A review of theories and literature on barriers to help-seeking behaviors among Asians reported multiple factors contributing to the development or suppression of help-seeking behaviors (Naito, 2020). Popularly cited in mental health researches is Henderson's four barriers to help-seeking behaviors (2013): (1) lack of knowledge about the features and traceability of mental illness, (2) ignorance about how to access assessment and treatment, (3) prejudice against people who have mental illness, and (4) expectation of discrimination against people who have a diagnosis of mental illness. Race or ethnicity was added as a barrier to help-seeking behaviors of Asians, specifically the Chinese due to the Chinese origin of the Covid-19 (Naito, 2020). Understanding the barriers to mental health help-seeking behaviors is an important step toward designing intervention programs to eradicate these obstacles and promote good mental health.

Addressing this gap, the present study examines the levels of anxiety and adaptability among faculty members of state universities and colleges in Region 3 during the pandemic. It also investigates barriers to seeking help and explores the relationships among these variables. The findings aim to inform the development of a self-care plan for participants with high anxiety and low adaptability, contributing to future mental health awareness campaigns and support programs for educators.

2.0 Methodology

2.1 Research Design

This study employed a mixed-methods research design, integrating quantitative and qualitative approaches to comprehensively explore the relationships among faculty members' anxiety levels, adaptability to work, and help-seeking behaviors during the COVID-19 pandemic. Quantitative data were gathered using a descriptive-correlational design, which provided a detailed analysis of the variables' characteristics, trends, and interrelationships. To complement this, a qualitative phase was conducted through a focus group discussion (FGD) to address gaps and nuances not fully captured in the quantitative analysis. Data from the FGD enriched and added depth to the findings of the quantitative phase, ensuring a holistic understanding of the research problem.

2.2 Population and Sample of the Study

The population for this study consisted of 4,543 faculty members from 12 State Universities and Colleges (SUCs) in Central Luzon, as recorded by the OPRKM-Knowledge Management Division as of July 8, 2019. Using Slovin's formula, the minimum sample size required was calculated to be 368 participants. However, 468 faculty members participated in the online survey during the quantitative phase of the study, exceeding the minimum requirement. Participants were faculty members – both regular and part-time – teaching in the 12 SUCs of Central Luzon. They were invited to participate by responding to an online survey disseminated through Google Forms. For the qualitative phase, seven initial survey cohort participants participated in an online FGD conducted via Google Meet. These participants provided further insights into their experiences during the pandemic.

2.3 Data Collection Tools

The study utilized three objective instruments, all integrated into a single online survey form administered through Google Forms.

Anxiety During Pandemic Scale (ADPS). This instrument, adapted from the Anxiety Scale developed by Deblina Roya Sarvodaya Tripathy (2020), originally consisted of 18 items rated on a 5-point Likert scale. To ensure relevance, 10 items were selected to measure participants' anxiety levels related to the COVID-19 pandemic over the past two years. The reliability of this tool had been further measured using Cronbach's alpha method for the first factor ($\alpha = .79$), the second factor ($\alpha = .71$), and the whole questionnaire ($\alpha = .79$).

Adaptability Scale: This scale, adapted from Charbonnier-Voirin and Roussel's (2012) assessed faculty adaptability during the pandemic. The scale demonstrated reliability (Cronbach's $\alpha = 0.81$) and construct

validity, with five key factors: (a) creative problem-solving, (b) handling emergencies, (c) interpersonal adaptability, (d) training and learning effort, and (e) stress management.

Barriers to Help-Seeking Scale (BHSS): Adapted from Mansfield et al. (2005), this 31-item instrument was reduced to 15 items to focus on barriers to general help-seeking. Responses were measured on a 5-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). The scale's internal consistency was robust, with Cronbach's alpha ranging from 0.75 to 0.85.

Prior to data collection, a pilot test was conducted with 25 SUC faculty members not included in the main study to evaluate the instruments' feasibility and ensure their clarity and reliability. The actual data gathering took place from March- May 2021.

2.4 Data Collection Procedures

Data collection proceeded in two phases. In Phase 1, participants were invited to complete an online survey through Google Forms. Consent was sought, and participants were assured of the confidentiality and anonymity of their responses. The survey included the three instruments measuring anxiety, adaptability, and help-seeking behaviors. Phase 2 involved an online FGD with seven participants selected from the survey respondents. Conducted via Google Meet, the FGD sought to gain deeper insights into faculty experiences during the pandemic and gather qualitative data that enriched the quantitative findings. Verbatim responses from the FGD were transcribed and analyzed thematically to extract meaningful patterns and insights.

2.5 Data Analysis

Quantitative data were analyzed using the Statistical Package for the Social Sciences (SPSS) software (version 23.0). Descriptive statistics, including frequencies, means, and standard deviations, were used to summarize the demographic characteristics of respondents and key study variables. Pearson correlation analysis was performed to examine the relationships between anxiety levels, adaptability, and barriers to help-seeking behavior. Qualitative data from the FGD were processed by transcribing verbatim responses and summarizing them into thematic categories. This thematic analysis added depth and context to the quantitative findings, enhancing their overall interpretability.

2.6 Ethical Consideration

The study followed the rules that maintained the ethicality of the entire study. Confidentiality of data was carried on as well as anonymity of the participants. Risks were minimized and managed when there was minimal occurrence. Data was managed privately in accordance with the Data Privacy Act of 2012 and RA 10173 applicable in the Philippine setting.

3.0 Results and Discussion

3.1 Profile of the SUC Faculty Participants

Table 1 presents the profile of the Central Luzon SUC faculty participants. It shows that more than 40% of the participants are middle-aged adults (41 to 60 years old), while barely 3% are in their late adulthood. People from Generation Y and Z (21 to 40) comprise more than half (56%) of the participants.

Female participants dominated the study with a count of 274, almost 60% of the entire sample. More than half of the SUC faculty participants are married, while less than half are single. Approximately 3% are either widows, widowers, or separated. 2 out of 468 did not report their civil status. Most faculty participants (35.05%) have been teaching for 3 to 10 years. Those 10 to 20 years in the teaching profession (24.36%) and beyond two decades (23.93%) were almost a quarter of the total sample. Barely 17% of the sample are newbies in the teaching profession, possibly possessing less than 24 months of experience.

More than 60% of the total sample are tenured by academic personnel (regular) in their respective institution, while 35.47% temporarily possess tenure security or work part-time. Almost 60% of the total sample are Instructors, while only less than 6% are at the Professorial level. Those in the Assistant (15.81%) and Associate Professor (19.66%) Levels are less than 20% of the total participants. More than half of the participants hold

master's degrees, while a quarter possess a doctoral degree. More than 23% of them possess only a bachelor's degree.

Table 1. *Profile of the SUC faculty participants*

Profile	Indicator	Frequency	Percentage
Age	21-30 years old	140	29.9
	31-40 years old	122	26.0
	41-60 years old	192	41.0
	61 years old and above	14	2.99
Gender	Male	192	41.0
	Female	274	58.5
	Other	2	0.43
Civil Status	Married	260	55.5
	Separated	4	0.85
	Surviving Spouse	10	2.14
	Single	192	41.0
	Unidentified	2	0.43
Number of Years in Service	More than 20	112	23.9
	10 to 20	114	24.3
	3 to 10	164	35.0
	Less than 2	78	16.6
Employment Status	Regular	302	64.5
	Temporary	76	16.2
	Part-Time	90	19.2
Academic Rank	Instructor	276	58.9
	Assistant Professor	74	15.8
	Associate Professor	92	19.6
	Professor	26	5.56
Highest Educational Attainment	Baccalaureate	108	23.0
	Master	242	51.7
	Doctorate	118	25.2

3.2 Anxiety Among SUC Faculty During Pandemic

Table 2 presents anxiety's mean and standard deviation among SUC faculty during a pandemic.

Table 2. *Level of anxiety during the pandemic*

Indicators	Mean	Interpretation	SD
1. I feel paranoid about contracting the COVID-19 infection.	3.51	High	1.16
2. I avoid going out of home.	3.66	High	1.11
3. I avoid gatherings.	3.94	High	1.06
4. I order food online.	3.04	Moderate	1.28
5. I have difficulty sleeping.	2.66	Moderate	1.27
6. I need to buy and stock all essentials at home.	3.48	High	1.15
7. I feel scared when a friend is reported to be sick.	3.53	High	1.22
8. I feel the need to follow basic health protocols religiously.	4.32	Very High	0.96
9. I feel worried about myself and my loved ones.	4.16	High	1.00
10. News and posts on social media regarding COVID-19 affect me.	3.59	High	1.04

A close examination of the table shows that faculty seems highly anxious about religiously following basic health protocols ($M=4.32$). They feel worried about themselves and their loved ones, so they avoid gatherings and leave their homes. News and posts on social media regarding COVID-19 affect them, and they feel paranoid about contracting the COVID-19 infection and feel scared when a friend is reported to be sick. A weighted mean of 3.59 indicates that, generally, SUC faculty respondents showed a *high level of anxiety towards the COVID-19 pandemic*. With these findings, discussions conducted with the participants through the following FGD questions further revealed the following qualitative data.

The participants were asked, *"What are you most anxious about during the COVID-19 pandemic?"* This question aimed to elicit responses that focused on the determinants of high anxiety among the participants. The following themes were arrived at.

Health Concerns

The outbreak of COVID-19 brought panic and anxiety to the teachers. The need to physically go to work made them anxious about exposing themselves to the virus, getting sick, and even risking their families towards contracting the virus. Their anxieties led them to take extra precautions, like following the basic health protocols to protect themselves and their families. Sample responses of the participants include

"What if I contract the Virus? What if I get my family infected with the virus?"

Technology Issues

The transition to online teaching has brought great challenges to teachers. They struggled to adapt technology to their students. Poor internet connectivity was the primary source of difficulty for teachers. Some teachers need to transfer to other locations to get a better connection. Others spend more money on data connection. Another struggle with technology is that teachers were forced to learn and be trained in using different learning management systems. The time and effort they spent attending webinars and the difficulty coping with the new setup have been too much for the teachers to handle. Sample responses include:

"What I am most anxious about is the internet connection. I have difficulty getting an internet connection because I live in a secluded place. I must go to other places to get better connectivity. I need to find tutorial videos on YouTube to learn more about Google Suite because the webinars were not enough."

Transport Limitations

Many teachers take public transportation to school. Since the quarantine had limited the means of transportation, it had been difficult to get a ride to and from school. This contributed to the worries they felt and the struggles they went through every day. Sample responses include:

"My anxiety stems from where I can get public transport. Community mobility is truly difficult. There is no ride, but we need to report it."

3.3 Level of Adaptability to Work

Table 3 presents levels of adaptability toward work among SUC faculty. While working during the pandemic and encountering various emergencies, risks, or even situations like this pandemic, the faculty analyzes possible solutions and consequences highly (M=4.0) and decides on actions to resolve the problem quickly (M= 3.94). They looked for solutions by having a calm discussion with colleagues (M= 3.96) and that having to take on additional work unexpectedly does not make them anxious anymore (M=2.88). In the face of innovations that were introduced in the academe during this pandemic, faculty looked for every opportunity to enable them to improve their performance (M= 4.12) and prepare themselves for change by participating in webinars and training (M=4.06). When it comes to interpersonal adaptability, faculty try to understand the viewpoints of their counterparts to improve their interaction with them. They develop good relationships with all their counterparts, adapt their work practices to the new normal requirements, and adjust their work practices if someone points out a better solution. The participants generally show high adaptability (M=3.6) towards their work despite the challenges they experienced during the COVID-19 pandemic.

Table 3. Level of adaptability to work

Indicators	Mean	Interpretation	SD
Dimension 1. Handling Emergencies and Crises			
1. I can achieve total focus to act quickly.	3.85	High	0.85
2. I analyze possible solutions and their consequences quickly.	4.00	High	0.84
3. I quickly decide on actions to resolve the problem.	3.94	High	0.86
4. I suppose I am not able to respond quickly.	2.97	Moderate	1.02
Weighted Mean	3.69	High	0.62
Dimension 2. Managing Work Stress			
5. I feel at ease even if my tasks change.	3.37	Moderate	0.99
6. I keep my cool when I am required to make decisions.	3.74	High	0.94
7. Having to take on additional work unexpectedly makes me very anxious.	2.88	Moderate	1.09
8. I look for solutions by having a calm discussion with colleagues.	3.96	High	0.90
9. Work-related stress impacts the quality of what I do.	2.51	Low	1.04
10. My colleagues ask for my advice regularly when situations are difficult because of my self-control.	3.44	High	0.93
Weighted Mean	3.32	Moderate	0.52

Dimension 3. Solving problems creatively			
11. I do not hesitate to go against established ideas to propose an innovative solution.	3.53	High	0.90
12. I use various sources/types of information to develop an innovative solution.	3.92	High	0.84
13. Whatever the problem to be solved, I never use anything but well-known methods.	2.58	Low	0.90
14. I develop new tools and methods to resolve new problems.	3.73	High	0.85
15. Within my department, people rely on me to suggest new solutions	3.27	Moderate	0.93
Weighted Mean	3.41	High	0.49
Dimension 4. Training and Learning Efforts			
16. I am looking for the latest innovations to improve my work.	3.85	High	0.88
17. I undergo training regularly to keep my competencies up to date.	3.79	High	0.87
18. I wait for innovations in the school before I put major effort into relevant training.	2.74	Moderate	1.04
19. I prepare for change by participating in webinars, which enable me to do so.	4.06	High	0.89
20. I look for every opportunity to enable me to improve my performance (training, group projects, exchanges with colleagues, etc.	4.12	High	0.88
Weighted Mean	3.71	High	0.57
Dimension 5. Interpersonal Adaptability			
21. I adapt my work practices to the new normal requirements.	4.13	High	0.85
22. I do not consider negative comments about my work very important.	2.66	Moderate	1.08
23. I adjust my work practices if someone finds a better solution.	4.06	High	0.82
24. I develop good relationships with all my counterparts as an important factor of my effectiveness.	4.21	Very High	0.87
25. I try to understand the viewpoints of my counterparts to improve my interaction with them.	4.22	Very High	0.84
Weighted Mean	3.86	High	0.61
Overall Mean	3.60	High	0.56

The quantitative data were supplemented by the answers derived from the FGD when asked, “*What are your adaptive coping strategies at work?*” This question explored how the participants coped with their anxieties during the pandemic. Their responses were categorized and produced themes that discussed their adaptability or how they managed their anxieties related to their work performance.

Self-care

Faculty tried to manage their anxiety by taking care of themselves physically and mentally. They meditate to relax and calm themselves, which helps them get through their daily work. They strictly follow the minimum health protocol, like wearing face masks and face shields, washing hands, and physical distancing whenever they go out. A sample response is, “*I have my “me-time” when I feel anxious. I meditate to calm down.*”

Self-help

Teachers watched many tutorial videos on YouTube to learn more about ways to manage their classes. They gathered a lot of information and tips on using different digital learning and teaching applications. This has helped them cope with their anxieties brought by the challenges of the remote virtual learning mode. Teachers also shared that reading self-help books and articles is another way of dealing with their emotions, especially their fears, worries, stress, and uncertainties. One participant said:

“I spend time on Google and look for video tutorials about using Google Suite and other platforms. The webinars were not enough. I need to watch videos because it helps a lot.”

Seek Support

Teachers admitted that they could not manage their stress and anxieties without the help of others, such as family, friends, and colleagues at work. Whenever they encounter problems with using the internet, especially concerning concerns about the learning management system they are currently using, they seek help and assistance from a co-worker. The school administration has also been a source of compassion and consideration for teachers requesting a work-from-home set-up during the height of the COVID-19 cases in their areas. Teachers tried everything they could to reach out to people they knew could help them ease their worries and stress during the pandemic. A sample response is

“Being honest and transparent, I wrote a letter to the administration requesting a work-from-home set-up because of the difficulty in commuting and for my protection and my family. The administration supported me, and thank God, it lessened my anxiety.”

Acceptance

The length of time COVID-19 existed has made teachers learn to accept the new normal set-up that they were experiencing. Virtual classes, travel limitations, facemask wearing, washing and disinfecting every so often, seminars, and meetings are done online. Many changes in their everyday lives have become inevitable, and teachers have gotten used to them. They eventually embraced these changes because they believed they were beyond their control.

3.4 Level of Barriers to Help-Seeking Behavior Among SUC Faculty

Table 4 shows the barriers to help-seeking behavior among SUC faculty. The overall level of barriers to help-seeking behavior ($M=2.91$) indicated that the participants are moderately deterred from seeking professional help to resolve their mental health problems. Results showed that participants, though experiencing high anxiety, may not seek help because they perceive the situation as not that serious in the first place. This also implies that they believe they can care for themselves and that the situation is manageable.

Table 4. Level of barriers to help-seeking behavior

Indicators	Mean	SD	Interpretation
1. I feel that the problem would not seem worth getting help for.	2.83	1.00	Moderate
2. I think people typically expect something in return when they provide help.	2.79	1.05	Moderate
3. I would think less of myself for needing help.	3.02	1.10	Moderate
4. I do not want other people to know about my problems because privacy is important.	3.20	1.12	Moderate
5. I do not like to get emotional about things.	3.37	1.07	Moderate
6. I do not like other people telling me what to do.	2.95	1.04	Moderate
7. I do not like to talk about feelings.	2.76	1.01	Moderate
8. I think my problem is embarrassing.	2.44	1.13	Low
9. I would not want to overreact to a problem that was not serious.	3.50	1.14	High
10. I am not aware of what sort of help is available.	2.70	1.05	Moderate
11. I feel better about myself knowing I did not ask for help from others. I cannot afford to pay professional fees.	2.91	1.09	Moderate
12. I would not want to look stupid for not knowing how to figure this problem out.	2.97	1.14	Moderate
13. I do not like feeling controlled by other people.	3.29	1.18	Moderate
14. I do not trust counselors and other mental health professionals.	2.06	1.05	Low
15. I would prefer to wait until I am sure the problem is serious.	2.82	1.16	Moderate
Weighted Mean	2.91	0.72	Moderate

The same “barriers to help-seeking behaviors” were probed during the FGD via a question: “What could be keeping you or another person from seeking help from someone to manage stress and anxiety?” This question explored the different reasons why an individual would opt to seek or not seek help and support from other people, especially from mental health professionals. The following themes were gathered.

Self-reliance

Most of the informants said that they were not open to seeking mental support and services. They felt it was their responsibility or obligation to resolve their problem. They prefer not to seek help because they do not want to bother and burden others with their predicament or let other people get affected by their situation. They felt that they were responsible for solving their problems. Sample responses include:

“I can manage; I will not ask for help. I feel that I will bother them.”

“I did not consult because I do not want to burden others.”

Resilience

The informants believe that people have a way of coping with their stress and anxiety. They spend time on self-care and self-love and become more conscious of what makes them happy, like shopping, spending time with friends and family, and enjoying their “me time.” They also build resilience by being grateful for their lives and what they have. Sample response in

“I have my ways of coping. I am thankful because I have my friends and family. When I get overwhelmed while working, I unwind for a while...visit my mom...a little breather. It is nice to have self-love and self-care.” Social stigma on mental health services.”

Filipinos were not open to seeking mental health services because of the social stigma attached to it. Some would rather seek support from family and friends than go to a mental health professional. Others would not seek help from anyone and just be silent about what they are going through or figure out how they will get through their situation. The informants mentioned that they do not seek help because they do not want to be judged as one with a mental disorder or being dramatic.

Faith

Some teachers reported not seeking professional help because they entrust their problems with God. They feel that it is Him who can provide them with inner peace. They managed to work on their spiritual growth and made God the center of their health. Sample response is

"I chose to entrust myself to God. I seek help by praying to God. With all my anxieties, I feel God will bring me the inner peace I need."

3.5 Relationship Between Anxiety and Adaptability to Barriers to Help-Seeking Behavior Among SUC Faculty Participants

Table 5 shows the relationship between anxiety and adaptability to barriers to help-seeking behavior among SUC faculty participants. The Pearson correlation analysis results showed many significant relationships between the variables investigated in the current study. The level of anxiety during the pandemic emerged to be significantly related to adaptability to work directly. This indicates that SUC faculty, though experiencing high levels of anxiety due to the pandemic, are also manifesting high levels of adaptability to their work performance (0.21). In addition, the level of anxiety is not just a significant direct correlate of adaptability to work in general but also to its various dimensions, such as Solving Problems creatively, Training and Learning Efforts, and Interpersonal adaptability. This indicates that faculty who experienced anxiety during a pandemic are also observed to manifest creativity in solving work problems, make an effort to grow professionally, and are capable of interpersonal adaptation.

Table 5. Relationship between anxiety, adaptability, and barriers to help-seeking behavior among SUC faculty

		1	2	3	4	5	6	7	8
COVID-Anxiety (1)	Pearson Correlation	1							
	Sig. (1-tailed)								
Handling Emergencies and Crises (2)	Pearson Correlation	0.052	1						
	Sig. (1-tailed)	0.131							
Managing Work Stress (3)	Pearson Correlation	0.044	0.561**	1					
	Sig. (1-tailed)	0.171	0.000						
Solving Problems Creatively (4)	Pearson Correlation	0.216**	0.390**	1					
	Sig. (1-tailed)	0.000	0.000	0.000					
Training and Learning Efforts (5)	Pearson Correlation	0.209**	0.493**	0.484**	0.556**	1			
	Sig. (1-tailed)	0.000	0.000	0.000	0.000				
Interpersonal Adaptability (6)	Pearson Correlation	0.219**	0.508**	0.437**	0.539**	0.720**	1		
	Sig. (1-tailed)	0.000	0.000	0.000	0.000	0.000			
Adaptability to Work (7)	Pearson Correlation	0.189**	0.747**	0.752**	0.723**	0.840**	0.830**	1	
	Sig. (1-tailed)	0.000	0.000	0.000	0.000	0.000	0.000		
Barriers to help-seeking Behavior (8)	Pearson Correlation	0.22**	-0.16**	-0.17**	-0.04**	-0.21**	-0.21**	-0.21**	1
	Sig. (1-tailed)	0.000	0.000	0.000	0.203	0.000	0.000	0.000	

** . Correlation is significant at the 0.01 level (1-tailed).

Barriers to help-seeking behavior, on the other hand, are found to be directly related to a significant extent to the level of anxiety. This indicates that as the SUC faculty were getting anxious about the COVID-19 pandemic, there is a moderate chance of seeking help in terms of the resolution of their mental health issues. Furthermore, barriers to help-seeking behavior are significantly and inversely related to adaptability. This indicates that those people who are having difficulty seeking professional help for their mental health issues are also the ones who are less likely to manifest adaptive tendencies towards their work. When correlated to various dimensions of Adaptability

towards work, help-seeking behavior ended up being significantly correlated inversely to 4 out of 5 items, namely: Handling emergencies and crises (-0.17), Managing work stress (-0.17), Training and learning effort (-0.40) and Interpersonal adaptability (-0.21). This further strengthens the relationship between help-seeking behavior and adaptability to work and implies that those who have problems in seeking professional and competent help in resolving mental health issues are also the ones who are less competent in handling emergencies and crises, poor managers of work stress, less likely to seek training and learning opportunities and having a hard time adapting oneself to the workplace social environment.

3.6 Implication for a Self-care Plan

Considering this study's last research problem, which is to devise a self-care plan based on the study results, the question *"What help may be extended to teachers who are going through mental and emotional difficulties during the pandemic?"* was asked during the FGD. This question tried to generate recommendations from the participants on how they could be helped to mitigate their anxieties during the pandemic, especially so that their overall perceived barriers to help-seeking behaviors are "moderate." The following were the themes that emerged from the responses.

Promotion of Mental Health

SUC faculty would love to know more about mental health to reduce misconceptions, understand the importance of maintaining positive mental well-being, and clearly understand professional help. This may be achieved by facilitating seminars or webinars about the topic. Sample response include

"It is very important for us to have a clearer understanding of available professional help of the university."

Establishing Support Groups

Teachers would love to join community sessions with fellow teachers to create an avenue for them to voice out how they are feeling and what they are thinking about the impact of the pandemic and the changes brought by the pandemic in their lives. This will also allow them to listen to their colleagues' stories or testimonies on how they managed and overcame stress and anxieties. A bible study group was also created during the discussion. Some teachers say that this would be beneficial on their spiritual journey. These support groups would give them opportunities to gain inspiration from others, enabling them to go on with their lives feeling relieved, happier, and more secure. They also suggested that the sessions be held regularly. Sample response is

"May there be community or group sessions for us to share our anxieties and stories."

3.7 Insights

This exploratory research is important to enhance understanding of teachers' mental health: their fears associated with the pandemic, their sense of safety related to their work performance, and their receptivity to help-seeking, given the mental and physical health risks. Participants have shown a generally high level of anxiety due to the pandemic. The survey results show that teachers worry about contracting COVID-19, making them anxious about religiously following basic health protocols. Furthermore, determinants of high levels of anxiety among teachers have been found during the focus group discussion to include health concerns, technology issues, and transport limitations. These results are consistent with results reported in the separate studies of Guillasper (2020) and Moralista and Oducado (2020) that a high level of anxiety among teachers was rooted in stress brought by the threats and risks of COVID-19 to themselves and their families and the fact that they are forced to transition into online learning. Moreover, Dziuban (2018) and Rada (2021) report that the sudden shift to online learning is causing distress, confusion, and frustration across the academic community.

The study shows that SUC faculty have a high level of adaptability towards their work despite the pandemic. Survey results showed that faculty tend to highly analyze possible solutions and consequences and decide on actions to resolve the problem immediately. Furthermore, faculty look at the innovations as an opportunity to enable them to improve their performance. They prepare themselves for change by joining faculty development programs. Regarding interpersonal adaptability, faculty try to be more compassionate with their colleagues. During the focus group discussion, participants shared their coping strategies and adaptability that worked in managing their anxieties. The generated themes include self-care, self-help, seeking support, and acceptance.

These have contributed to sustaining their resilience in coping with their anxieties. This result agrees with what Delgado, Padilla, and Zuniga (2021) reported in their study that the high level of resilience teachers developed throughout the quarantine is the greatest predictor of adaptability in coping with stress.

While teachers acknowledge their fear of COVID-19, they are moderately deterred from seeking professional help for the resolution of their mental health problems. They do not consider their problem embarrassing and tend not to overreact to a problem they think is not serious. In the discussion, participants shared different reasons for not seeking help and support from mental health professionals. People are not open to seeking mental support and services because they are self-reliant. They feel that it is their responsibility to resolve their problem, and they do not want to bother and burden others with their problem. People have their way of coping, which has developed their resilience, thus making them shun seeking professional help. Another reason is the social stigma that comes with seeking mental health services. People would rather keep their issues to themselves to avoid being judged inappropriately, or they would rather seek help from friends and family than go to a mental health professional. Moreover, some people do not seek help because of their faith in God; they entrust their problems to Him for the belief that He provides solutions and inner peace.

Many studies have been done into the key barriers to help-seeking. A detailed literature review was published in 2010 by Guillver, et al. The most frequently reported of all the barriers are public-perceived and self-stigmatizing attitudes to mental illness, creating an embarrassment and fear of identifying with a mental illness or seeking help about it. Some teachers prefer to rely on themselves rather than seek outside help for their problems. Although seeking help from someone else is not seen as an indicator of weakness, they think they can deal with normal life problems.

The COVID-19 pandemic continues to present challenges to the quality of education at many different levels. The following discussion by the authors suggests possible interventions or guidelines to maintain and promote teachers' well-being during a difficult time. According to Waters (2021), actions to promote school well-being should be systematized and based on scientific data to gather empirical evidence that will eventually be reported in academic or professional environments. The authors promote goals to empower teachers through teaching practices that integrate wellness practices into their curricula—creating interventions with a context-based approach that will foster skills to increase well-being in the classroom (e.g., Waters, 2021). Social relationships and connections are the building blocks of multidimensional well-being models. Relationships between teachers and students are paramount in developing well-being and are especially important during the COVID-19 pandemic. Studies have revealed the relevance of the interaction between teachers and students in an online teaching environment (Alqurshi, 2020; Bao, 2020; Chanchí-Golondrino et al., 2021; Hamdan et al., 2021; Jelińska & Paradowski, 2021). Perhaps the most important implication for practice is that even moderate levels of distress may warrant intervention due to its pervasive impact. The severity of distress must also be a consideration for intervention.

4.0 Conclusion

The COVID-19 pandemic has brought significant changes to the field of education, leading to heightened anxiety among state university and college faculty. Key sources of anxiety include fears of contracting the virus, challenges in adopting online remote learning, and transportation limitations during quarantine. Despite these difficulties, teachers demonstrated remarkable adaptability to their work, innovations, and interpersonal relationships. This adaptability was supported by self-care practices, resilience, seeking social support, and accepting the “new normal.” However, teachers’ resilience, combined with factors such as social stigma, self-reliance, and strong faith, contributed to their reluctance to seek help from mental health professionals. The study highlights the importance of promoting mental health awareness and creating support groups to address teachers' anxiety and stress. Focus group participants recommended implementing more seminars, webinars, and programs within institutions to dispel misconceptions about mental health and emphasize its importance. Teachers also suggested establishing psychosocial and psychospiritual support groups to provide spaces for interaction, encouragement, and shared inspiration.

5.0 Contributions of Authors

The authors confirm the equal contribution in each part of this work. All authors reviewed and approved the final version of this work.

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7.0 Conflict of Interests

The author declares that they have no conflicts of interest.

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