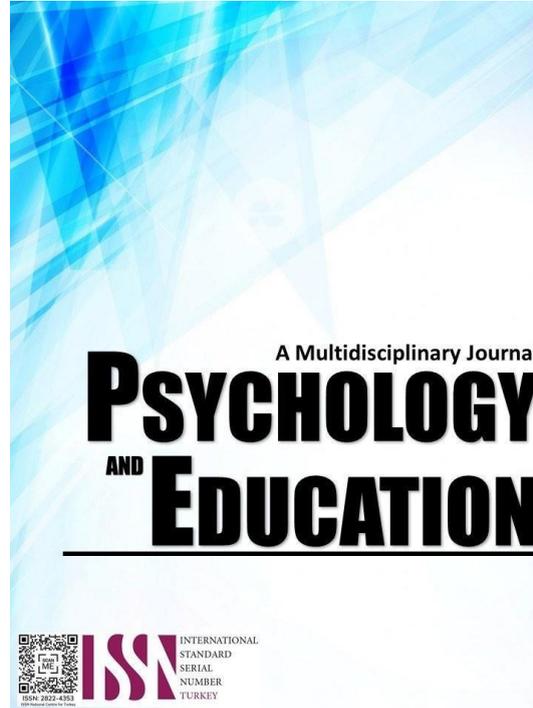


# EXPLORING MENTAL HEALTH STATUS OF COVID-19 FRONTLINERS: A PHENOMENOLOGICAL INQUIRY



**PSYCHOLOGY AND EDUCATION: A MULTIDISCIPLINARY JOURNAL**

2023

Volume: 12

Pages: 18-32

Document ID: 2023PEMJ1034

DOI: 10.5281/zenodo.8241717

Manuscript Accepted: 2023-10-8



## Exploring Mental Health Status of COVID-19 Frontliners: A Phenomenological Inquiry

Vincent Ray S. Bagaforo\*, Emma C. Ceballo

*For affiliations and correspondence, see the last page.*

### Abstract

This phenomenological study aimed to determine the challenges, coping strategies, and significant insights of COVID-19 frontliners during the pandemic. The study utilized a qualitative phenomenological approach, and using purposive sampling technique, the eight (8) participants who worked as a COVID-19 frontliner in General Santos City were identified for an in-depth interview. Thematic analysis was used as a data analysis tool to interpret the data gathered. The results found that COVID-19 frontliners experienced different challenges during the pandemic, including the fear of being infected with the disease, dealing with different patients, long and busy working hours, and mental health disturbance. As for their coping strategies in dealing with those challenges, the COVID-19 frontliners used their families' support, taking care of themselves, as well as having strong faith in God. Also, valuing public health measures, the importance of self-care, and extending patience and understanding toward the patients were the significant insights shared by the COVID-19 frontliners. Moreover, understanding the impact of COVID-19 on the frontliners' mental health can be the key to implementing plans and effective interventions to help them function more efficiently.

**Keywords:** *mental health, challenges, coping strategies, insights, phenomenology, COVID-19 frontliners, Philippines*

### Introduction

In December 2019, the coronavirus disease 2019, also known as COVID-19, started in Wuhan, China, and quickly spread to different countries worldwide, which caused severe public health concerns (Li et al., 2020). Due to its rapid spread, the World Health Organization (WHO) announced COVID-19 on the 11th day of March 2020 as a global pandemic (WHO, 2020). Data from John Hopkins University & Medicine, Coronavirus Resource Center (2023) shows that as of 10 March 2023, there were 670 million COVID-19 cases globally, and the frontliners are not exempted from that. Frontliners are not immune to infection, and their vulnerability to acquiring the disease is the same as the rest of the population (Chatterjee et al., 2021). At least WHO estimates that between 80,000 and 180,000 died from the disease from January 2020 to May 2021 (WHO, 2021).

The outcome of COVID-19 is unprecedented and rapid in that it changes the usual routine of most people, such as spending most of their time in their houses in isolation. Even though these are effective actions to contain the spread of the disease, they inevitably adversely affect a person's mental health and well-being (Galea et al., 2020). Also, the impact of Covid-19 is evident to the frontliners. The pandemic has put significant stress on the frontliners, increasing the risk of mental health problems (Hennein et al., 2021). Also, frontliners across the globe are apprehensively responding to this global concern, and

their mental health problems deserve attention (An et al., 2021).

Furthermore, frontliners were those people who worked as but not limited to healthcare professionals, security guards, cashiers in grocery and general merchandise stores, workers in production and food processing, janitors and maintenance personnel, agricultural laborers, truck drivers, and teachers were just a few examples of frontline employees (Blau et al., 2022). Also, frontliners directly attended and served the public and others, making them more exposed and vulnerable to COVID-19 (Commission on Human Rights Philippines, 2020). Working in the healthcare industry was stressful prior to the COVID-19 pandemic. Research on psychological distress in healthcare employees has previously revealed that they were more prone to experience psychiatric problems than those working in other industries (Cooch, 2020).

In the Philippines, as of 12 July 2023, an estimated 4.1 million people have been infected with COVID-19, and 66,000 have died (WHO, 2023). Also, stress and exhaustion for mental health were noted by frontliners. They also had to deal with job overload and the fear of contracting an infection while providing services. Inadequate support services have led to the emergence of mental health issues (Maravilla et al., 2022). A study conducted by Carascal et al. (2022) on 93 COVID-19 recovered frontliners from a tertiary hospital in the Philippines revealed that the frontliners experienced significant COVID-19-related distress.

Frontliners working in the public sector, notably barangay health workers, who were on the front lines of the pandemic's fight, were more susceptible to COVID-19. Barangay health workers were among the first government personnel to be summoned when the community quarantine was implemented (Villamor, 2021). The Department of Health (DOH) of the Philippines stated that barangay health workers are community volunteers who have undergone formal training to offer healthcare to all families living in their designated barangay. In different barangays in the Philippines, they were the leaders (Romante, 2020). Also, in times of outbreaks, fragile environments, and conflict, nurses and midwives perform a critical role in providing care for people everywhere. All health professionals, including nurses, midwives, and other medical personnel, have been on the front lines of the COVID-19 pandemic response (WHO, 2020).

Moreover, various factors are vital in the psychological disturbance frontliners may experience, such as high infection and mortality rates (Chen et al., 2020; O'Connor). Also, with an additional number of cases every day, extended and demanding working hours, challenges in wearing personal protective equipment (PPE), and inadequate social support can be the factors of the mental burden (Sunil et al., 2021). Isolation and quarantine also contributed to the burden of frontliners (Brooks et al., 2020).

During the pandemic, healthcare workers were much more pressured physically and psychologically while on duty, and other than being exposed to infection, they also experienced symptoms of insomnia, depression, and anxiety (Chen et al., 2020; Zhu et al., 2020). Poor mental health status among frontliners can affect the workforce's quantity and quality, leading to poor clinical outcomes for patients (Kotera et al., 2021). In this condition, it is evident that the frontliners are directed by physical and psychological battle to face significant and deadly situations, regardless of if their integrity is at stake (Santarone et al., 2020).

It was also revealed that frontliners were likely to have a range of psychological disturbances in stressful and risky epidemic environments, such as symptoms of posttraumatic stress disorder (PTSD), anxiety, and depression (Kang et al., 2015; Duan and Zhu, 2020). Anxiety is characterized by apprehension, tension, and physical changes such as increased blood pressure (APA, 2021). Chen et al. (2020) stated that anxiety is a kind of psychological stress that could cause a decrease in invulnerability, together with a sequence of physical events. Also, anxiety and depression can

occur to a person simultaneously. A person with depression may experience an absence of pleasure and interest in day-to-day life activities, significant weight loss or gain, lack of sleep or excessive sleeping, inattentiveness, feelings of worthlessness, lack of energy, and recurrent thoughts of suicide (APA, 2021; Zhong et al., 2020). PTSD is a disorder that arises when a person experiences or suffers from a disturbing or traumatic event (Khazaie et al., 2016)

Several research published about the impact of COVID-19 revealed that it is extremely affecting the mental health of frontliners. It was discovered that mental exhaustion, anxiety, and burnout among frontliners in Hong Kong (Cheung et al., 2020), as well as in Germany, doctors are at risk of having high symptoms of depression and anxiety. (Bohlken et al., 2020). Also, frontliners are challenged with psychological burden and severe anxiety, resulting in suicide. (Montemurro, 2020; Papoutsis et al., 2020). Concerns were raised about this, as front-liners, compared to the general population, were more susceptible to suicide (West et al., 2018). Also, a study about the factors connected to psychological struggles of frontliners found that the main concerns of frontliners are violence in the workplace, protective measures, infection of workmates, and infection of loved ones (Dai et al., 2020; Liu et al., 2020).

A study by Johnson et al. (2020) revealed that frontliners and public servants had tendencies to develop PTSD symptoms, with 22.5% of those exposed directly and 16.1% not directly exposed. Those with tendencies are susceptible to developing clinical PTSD due to the working conditions that will continuously give challenges and stressful events. Thus, workers working directly or indirectly with infected patients have a high risk of developing PTSD symptoms.

A study conducted by Zhang et al. (2020) revealed that the frontliners have a high risk of developing depression, insomnia, somatization, anxiety, and obsessive-compulsive symptoms. These workers might undergo allostatic overload that can lead to the development of psychopathology, such as chronic insomnia (Fava et al., 2019). Among frontliners, independent factors like living in rural areas and having natural diseases were common risk factors for developing psychopathologies. Also, frontliners assigned in rural areas might have a high level of anxiety about being infected due to various working conditions, such as medical conditions and different medical skills.

Another study by Ghaleb et al. (2021) showed 1448 frontliners from nine Eastern Mediterranean Region (EMR) nations. 57.5% of HCWs reported depression, 42.0% stress, and 59.1% anxiety. According to the severity, severe depression, stress, and anxiety were present in 19.2%, 16.1%, and 26.6% of patients, respectively. Participants' residency, having kids, having a history of mental illness, and being isolated for COVID-19 all substantially correlated with depression, stress, anxiety, and distress ratings.

The researcher sought to determine the mental health status of the frontliners since mental health is one of the hot topics in today's world as people are more open about it. Besides, the American Psychological Association (2021) stated that mental health is a state of mind characterized by having good behavioral adjustment, emotional well-being, free from anxiety and incapacitating symptoms, and a capacity to establish positive relationships and cope with stresses and day-to-day demands in life. And despite the psychological challenges experienced by the frontlines, there are different strategies they have developed to function more efficiently and to take care of their mental health.

Social support was found to positively correlate with sleep quality self-efficacy and negatively with stress and anxiety (Xiao et al., 2020). A study conducted in Wuhan, China, found that mental health support was still necessary even for mild psychological reactions in the large proportion of frontliners (Kang et al., 2020). Different services can be offered, such as remotely delivered psychological therapies and psycho-education virtual clinics, chat lines, and many more (The Lancet Psychiatry, 2020).

Social recognition and social support were relevant factors to stimulate and preserve the resilience of the frontliners to enable them to work on their full performance (Ferreira et al., 2020). Providing individualized psychological support and reducing the workload are ways to mitigate the negative impacts of Covid-19. Resilience was perceived as a person's protective device and as a moderator in the connection between social support and the mental health of the frontliners (Hou et al., 2020).

In facing the pandemic, frontliners are considered the most negatively affected in different aspects of their lives physically and psychologically, being exposed to infected patients and expanding risk responsibilities, such as providing medications and collecting sputum from the infected patients. And despite the significance of social support, the efforts of the nurses should be

given attention by supervisors, such places for a good rest, the lessening of work shifts and workloads, the assurance of protective equipment, and a good interpersonal relationship to make sure that the dialogue between its members to reinforce the resilience (Maben and Bridges, 2020).

A study by Munawar & Choudhry (2021) revealed that during the pandemic, media was cited as a major factor in raising the worry and stress levels of the general public because the veracity of the updates or news conveyed could not be verified. Additionally, their resilience and coping skills were bolstered by religious coping, a strong desire to serve their country and mankind, the idea that the epidemic was merely an emergency, and positive attitudes and perspectives on their duties during the pandemic.

In a further study, Sehularo et al. (2021) found that the COVID-19 protective measures, avoidance strategy, social support, faith-based practices, psychological support, and management support were the six themes that emerged from their research. According to these results, frontline personnel may experience less stress when dealing with the COVID-19 pandemic if they employ efficient coping mechanisms.

The COVID-19 frontliners learned various lessons during the pandemic. Coumare et al. (2021) stated that during the pandemic, it is necessary to integrate different resources and coordinate their use in order to create a cohesive workforce with an efficient healthcare team, a response team for disaster management, consistently available medications and other supplies, and transport and maintenance departments. Also, to prevent COVID-19 infection within the workforce, frontline healthcare workers and professionals need ongoing protection. Additionally, immediate assurance and guidance from a team are needed to reduce the dread, worry, and apprehension among the teachers, residents, and patients to enhance mental health and well-being. Care and concern, quarantine facilities, transportation facilities, food, and hospitality during duty hours can all contribute to a person's well-being.

Wei et al. (2021) noted nine (9) other lessons for improving hospital care and healthcare delivery. Some lessons were prepared for unforeseen increases in service demand, emotionally supporting healthcare workers, using masks, using technology to connect families nearby and far away, and lessening the burden of unnecessary documentation. Also, a study conducted by Alsaeed et al. (2023) revealed that the lessons that COVID-19 frontliners have learned during

the pandemic were enhancing self-resilience since the frontliners experienced a variety of psychological issues which include depression and anxiety, trauma, stigma at work, loneliness and exhaustion. Another lesson was to have well-equipped workforce and healthcare environment as well as public awareness so that the social stigma will be mitigated.

Also, the interrelationship of behavioral, environmental, and cognitive elements, particularly the individuals' views about their ability or inability to carry out the activity required to achieve desired outcomes in any given situation, determines how people behave in a particular setting. Such expectations are what Bandura (1997) refers to as self-efficacy. According to Bandura (1994), people's perceptions of their own effectiveness impact their actions, the amount of effort they put out, how long they persevere in the face of challenges and failures, and how resilient they are after setbacks. (Feist, Feist, & Roberts, 2018). Moreover, Albert Bandura's social cognitive theory, specifically the concept of self-efficacy, supports this study because COVID-19 frontliners experienced challenges during the pandemic, and part of the self-efficacy was the coping strategies that the frontliners used to face the challenges they experienced during the pandemic.

Frontliners were the modern heroes during the pandemic. Their efforts and sacrifices deserve attention, especially their mental health, as their job is highly risky. Exploring their mental health is beneficial for them since they are being heard, and this can lead to implementing policies that will help them live and work effectively.

Despite numerous studies about the experiences of frontliners during the COVID-19 pandemic, most of them took place in Western countries, China, and India, and most of the studies focused on nurses and doctors. Therefore, to fill this gap, since there is little literature about the experiences of the COVID-19 frontliners in General Santos City, specifically the mental health of the barangay health workers and midwives, the researcher is interested in determining what the challenges experienced by the COVID-19 frontliners during the pandemic, what are the coping strategies used to face the challenges experienced by the COVID-19 frontliners amidst pandemic, and what significant insights that the COVID-19 frontliners have learned during the pandemic.

The result of the study would significantly benefit the community since it will bring awareness and insights to them. This would also benefit various NGOs to have

a basis on the programs will be proposed to help the frontliners. The result of the study would also help mental health professionals to have a basis on what proper interventions they will give to COVID-19 frontliners and people related to their work.

Also, the result of the study would significantly contribute to the benefits of the COVID-19 frontliners to express their feelings in their daily lives, to be heard by authorities, and to receive suitable treatment, benefits, and compensation due to the seriousness of their work. Understanding the impact of COVID-19 on frontliners' mental health can be key to implementing plans and effective interventions to help them function more efficiently. This result would be beneficial since it can be a basis for future researchers if there will be a pandemic-like situation will occur on the future.

Lastly, using a qualitative-phenomenological research design, the study is limited to COVID-19 frontliners' experiences, specifically, their challenges, coping strategies, and significant insights. Eight (8) female barangay health workers and midwives who worked in an isolation center for more than 6 months in a certain barangay, General Santos City, ages 18 years old and above, were the study participants. Six (6) participants were barangay health workers, and two (2) were barangay midwives. Using thematic analysis, the researcher interprets the data gathered from the participants.

## Methodology

### Study Participants

The participants of the study were eight (8) female COVID-19 frontliners, six (6) barangay health workers and two (2) barangay midwives. Morse (1994) stated that in a phenomenological study, it is necessary to have a minimum of 6 participants, and Creswell (1998) also suggested that in a phenomenological study, the participants range from 5 to 25. The study was conducted in a certain barangay in General Santos City since that certain barangay is one of the barangays with high cases of COVID-19.

For the inclusion criteria for the participants of the study, using the purposive sampling technique, the eight (8) participants were COVID-19 frontliners who worked as either barangay health workers or barangay midwives for at least 6 months from March 2020 to

December 2021 in COVID-19 Isolation Facilities in a certain barangay in General Santos City, ages 18 years old and above. For the exclusion criteria, the participants should not work as nurses, doctors, or barangay administrative staff. For the withdrawal criteria, the participants have the right to choose whether or not to participate in the research study voluntarily and ensure that they are free to withdraw without any sanctions.

### Materials and Instruments

The researcher utilized a recorded in-depth interview (IDI) in this study. The researcher used an interview guide to determine the challenges, coping strategies, and significant insights of COVID-19 frontliners. Also, the interview guide was validated by five (5) subject matter experts. After collecting the data from the participants, the researcher transcribed the data from the audio tape and analyzed it using thematic analysis.

The interview guide was validated by five (5) subject matter experts and garnered an average rating of 9.2 with a description of very good. Hence, the interview guide that was used is valid.

### Design and Procedure

As appropriate to the problem, the researcher utilized a qualitative research method in this study. Qualitative research is observation-based research summarized and interpreted in a narrative report (Gravetter & Forzano, 2018). Also, a phenomenological approach was used since the researcher sought to determine the phenomena experienced by COVID-19 frontliners. A phenomenological study examines the participants' experience in a phenomenon (Duquesne University, 2023).

Study participants were chosen based on the parameters set by the researcher. The data collection started around the second week of May 2022 and ended around the second week of June 2022. A permission letter was sent to the barangay captain to a certain barangay in General Santos City with an attached sample of the interview guide and informed consent form. After the researcher gained permission from the barangay captain to interview the participants, they were asked to sign an informed consent form before conducting the study. Once permission was received from the participants to be part of the study, a short orientation was given about the study and its purpose. Then, the research participants were interviewed about their challenges,

coping strategies, and lessons learned during the COVID-19 pandemic and were recorded. The researcher also gave the participants a token of appreciation after the interview.

After collecting the data, interviews were transcribed and analyzed using thematic analysis. The researcher partnered with a university data analyst as part of the protocol to ensure the validity of the thematic analysis. Thematic analysis is a qualitative research technique to methodically arrange and examine large, complicated data sets. It involves looking for themes that can include the narratives present in the accounts of data sets. Based on Braun and Clarke (2006), thematic analysis can be used to locate, describe, and analyze patterns in a data collection in considerable detail. The thematic analysis consists of six (6) phases: (1) familiarization with the data, (2) generating initial codes, (3) searching for themes, (4) reviewing themes, (5) defining and naming themes, (6) Writing Report (Dawadi, 2020).

Also, certain study methods researchers engage construct trustworthiness within their study interest and reports. Lincoln and Guba (1985) rely on four general criteria for the approach to trustworthiness in a qualitative study. The general criteria were credibility, dependability, confirmability, and transferability. Credibility is related to the truthfulness of the qualitative study or the data obtained being accurate or correct. Also, dependability is related to the researchers' expectation of peer review. Peer examination and peer debriefing are effective communication practices that build trust (Stahl & King, 2020). Then, when data are double- and triple-checked throughout data collection and processing, results are more likely to be repeatable by other researchers, which ensures the confirmability of qualitative data. Transferability of qualitative data ensures that the study findings are transferable to similar environments or people since generalizability is not expected in qualitative research. Clear assumptions and contextual inferences regarding the research site and participants can show transferability (Northcentral University, 2023).

Moreover, the researcher followed the research ethics the UM Ethics Review Committee applied, as research can put the participants at a greater risk. Therefore, the researcher is responsible for guaranteeing that their safety is protected throughout the research process (Polit & Beck, 2010; Munhall, 2012). Protecting participants' well-being involves following the standard ethical principles, which include respect for the autonomy of the participants, protecting



participants from harm, confidentiality, informed consent, and voluntary participation (Scott, 2013).

In this study, the researcher ensured that due respect is given to all participants and, at the same time, assured the complete disclosure of all study-related information, including potential risks and benefits. They have anonymity and the autonomous right to self-determination, the right to choose whether or not to participate in research studies voluntarily, and that declining to participate in any research will not affect their access to current or future care in any way. The researcher guaranteed that pseudonyms were used in this study to protect anonymity of the participants. The researcher also ensured that before the interview, informed consent from the participants was secured and that only barangay health workers and barangay midwives were the only participants of the study. Also, the researcher ensured that no harm, in any form, occurred to the participants during and after the conduct of the research.

Moreover, the researcher rephrased the sentences to avoid plagiarism. The researcher guaranteed that the data or results were not changed or omitted and ensured no fraud in the data gathered from the interview. At the same time, the researcher did not start the interview without permission from the barangay captain of a certain barangay in General Santos City. Lastly, the technology issues and concerns were observed, and the researcher gave proper credit to the different sources of information gathered. Lastly, all procedures in this study underwent the process as supervised by the UM Ethics Review Committee to guarantee that the researcher has followed the protocols, and it is evident in the Certificate of Approval with a UMERC Protocol No. UMERC-2022-134.

## Results

Table 1 above shows the themes and the core ideas observed from the participants' responses when asked about the challenges they encountered as frontliners during the COVID-19 pandemic. These participants were barangay health workers and midwives working in different isolation centers in General Santos City. Most participants reminisce about immense emotional and psychosocial challenges as they served as COVID-19 frontliners. Their responses drew four (4) themes: *Fear of Infection*, *Challenge in Dealing with Patients*, *Long and Busy Working Hours*, and *Mental Health Disturbances*

Table 1. *Themes on the challenges experienced by the COVID-19 frontliners during the pandemic*

| Themes                             | Core Ideas   |
|------------------------------------|--|
| Fear of Infection                  | <ul style="list-style-type: none"> <li>• Worried about the Health</li> <li>• Fear of transmitting the disease to others</li> <li>• People fear they might carry the virus</li> <li>• Fear of transmitting the disease towards family members</li> </ul>  |
| Challenge in Dealing with Patients | <ul style="list-style-type: none"> <li>• Being scolded by the patients</li> <li>• Patients being aggressive</li> <li>• Dealt with different personalities</li> <li>• Dealt with patients' verbal aggression</li> <li>• Some patients were stubborn</li> <li>• Some patients were unappreciative</li> </ul> |
| Long and Busy Working Hours        | <ul style="list-style-type: none"> <li>• Unable to eat on-time due to busy schedule</li> <li>• Less time to have fun due to busy schedule</li> <li>• Little time to spend with family</li> <li>• Delayed eating routine due to busy working hours</li> </ul>   |
| Mental Health Disturbance          | <ul style="list-style-type: none"> <li>• Deprived of sleep due to patients kept calling during midnight</li> <li>• Feelings of depression</li> <li>• Some people felt disgusted</li> <li>• Stress due to work and lack of sleep</li> </ul>   |

### Fear of Infection

As the first theme, as a frontliner during the COVID-19 pandemic, there is a higher risk of infection compared to individuals who do not have direct contact with patients. The risk of infection can vary depending on the nature of your work, the level of exposure, and the availability and use of personal protective equipment (PPE). Talking of their challenges, the risk of infection was the number one hindrance, which gave them every day fear that they may be able to carry the virus and transmit it to their family members when they get home and to other people.

Participant 1 (Marie) specifically shared that she feared for her health and the risk of being infected by COVID-19.

*I was paranoid about my health, especially that there would be a season when my family was at risk of being sick, which would be very contagious. That's why I am worried that I might infect them. There was also a time when I worked as a frontliner, but then I manifested the COVID-19 symptoms and immediately isolated myself.*

Participant 2 (Grace) also shared that the health of others is at risk due to being a frontliner.

*We are on our way to find the house of a COVID-19-*



positive patient; other people fear us. When we are about to ask them, they go away. We cannot talk to them properly as they are afraid of us.

**Challenges in Dealing with Patients**

Most of the study participants experienced challenges in dealing with different patients. Participants shared their experiences that due to patients' diverse personalities, some were approachable, but some were demanding, irritable, and unappreciative.

Participant 2 (Grace) stated that being a frontliner is not an easy job as she experienced being scolded by patients.

*That is why being a contact tracer is hard. Sometimes, patients may scold you for not answering their queries on time, so as frontliners, we explain the process to them.*

Participant 8 (Anna) also experienced being scolded and feeling unappreciated as a frontliner.

*Some patients were unappreciative; we felt they did not appreciate our job as a frontliner, as if they looked down on us. Also, they have many negative concerns.*

**Long and Busy Working Hours**

Participants experienced long and busy working hours that disrupted their usual routine in life. The routine includes limited time with the family, limited leisurely and social activities, and unable to eat on time.

Participant 3 (Angela) mentioned that she experienced as a frontliner that she could not have enough time with her family and friends.

*Before, we could eat together, but when I became a frontliner, we began to eat separately. And then, to my social connections, we could not get together since I was very busy with my work.*

Participant 5 (Aiza) also experienced that she could not eat on time as she must do her role as a frontliner.

*Sometimes, we will wait at the airport until 1:00 PM to the point that we cannot eat. We often skipped meals because of the busy work schedule and waiting time at the airport.*

**Mental Health Disturbance**

The last theme of challenges experienced by the COVID-19 frontliners is they have experienced mental health disturbances due to work. These disturbances include disrupted sleeping habits, feelings of

depression, and feelings of social stigma. Patients expressed that their work affected their mental health.

Participant 2 (Grace) shared that she experienced a disturbance in her sleep as patients can call in the middle of the night.

*We do not have enough time to sleep as some patients will call in the middle of the night. And as frontliners, we should answer the calls as they might raise their concerns to the barangay. We need to address their concerns as it is our responsibility as frontliners.*

Participant 3 (Angela) also expressed that due to the working conditions, she experienced feelings of depression as she did not have enough time to rest.

*I might have feelings of depression as I cry every day. Sometimes, I want to have a break from my work, but I cannot do that because I will still be working at home even if I have a break. I do not have enough time to rest.*

Table 2. Themes on the coping strategies used to face the challenges experienced by the COVID-19 frontliners amidst pandemic

| Themes              | Core Ideas   |
|---------------------|--|
| Family Support      | <ul style="list-style-type: none"> <li>Family as the source of daily motivaion</li> <li>Family members always encourages</li> <li>Children as a source of motivation</li> <li>Family as the main priority</li> <li>Continuous support from the family</li> </ul> |
| Self-Care           | <ul style="list-style-type: none"> <li>Daily intake of vitamins</li> <li>Beauty care and social media</li> <li>Prioritize health</li> <li>Always take care the physical health as well as spiritual health</li> </ul>  |
| Strong Faith in God | <ul style="list-style-type: none"> <li>Prioritize praying to God</li> <li>Always pray</li> <li>Pray as the source of motivation</li> <li>Prayer is a must</li> <li>Praying for a Good health</li> <li>God is the most powerful</li> </ul>                        |

Table 2 above shows the different themes and core ideas on the coping strategies used by the COVID-19 frontliners to face the challenges experienced amidst the pandemic. Frontliners during the COVID-19 pandemic have used various coping strategies to manage the stress and challenges of their work. These



strategies are important in helping the frontliners maintain their physical and mental health. Three (3) themes were drawn from their responses: *Family Support, Self-Care, and Strong Faith in God.*

**Family Support**

Family support is a frontliners coping mechanism during the COVID-19 pandemic. The pandemic has caused widespread disruption to daily life, increasing stress, anxiety, and uncertainty. Family members can provide emotional support, practical assistance, and a sense of connection and belonging, all of which can help individuals cope with the challenges of the pandemic. The participants described how grateful they are that their families understand their line of work.

Participant 1 (Marie) mentioned that her family is her source of motivation, especially when they are healthy. *My family gave me strength daily, especially if they were healthy and disease-free.*

Participant 2 (Grace) also shared that her children gave her the strength to continue working despite the challenging work as a frontliner.

*Of course, my children give me strength, nothing else. I entered this job so that I could have a source of income. You should think deeply when you are to enter a job.*

**Self-Care**

Staying healthy and taking care of oneself is one of the coping strategies that the frontliners use to face their challenges. The frontliners expressed that taking care of oneself should be a priority, such as beauty care and taking many vitamins.

Participant 2 (Grace) shared that taking many vitamins is necessary for a healthy life.

*Of course, prayer, then, in order to avoid being sick, is a must to take a lot of vitamins. Also, when I'm tired and sleepy, I drink coffee, and when I get home from work after eating, I immediately go to sleep to restore my energy.*

Participant 3 (Angela) also mentioned that taking care of oneself, such as beauty care, is a very important strategy to face the challenges during the pandemic.

*I always pray and eat a lot when I'm stressed. I pray that I do not get sick and there will be no more COVID-19 confirmed cases. Also, I do beauty care and social media to avoid stress.*

**Strong Faith in God**

Praying and having faith in God is one of the strongest coping strategies the frontliners have emphasized in facing their challenges during the pandemic. Having a strong faith in God helped the frontliners work effectively as they surrender all their challenges to the Lord.

Participant 6 (Jennifer) expressed that prayer is very important as it gives her guidance and provisions in life.

*First of all, prayer is very important to everyone. You should pray before going to bed, after waking up, and before going to work. You will also ask for guidance for whatever activities you do in the barangay and the safety travel. God is with me; he guides me, and that's why I can survive.*

Participant 8 (Anna) shared the same sentiments that she also prayed that the pandemic was over as it affected many people.

*Pray that the pandemic is over because everyone is exhausted, and there were many cases of death; that's why I am worried for my family.*

Table 3. Themes on the significant insights that the COVID-19 frontliners have learned during the pandemic.

| Themes                            | Core Ideas   |
|-----------------------------------|--|
| Value for Public Health Measures  | <ul style="list-style-type: none"> <li>Follow the minimum health protocol to lessen the COVID-19 cases</li> <li>Follow the health protocol even its hard</li> <li>Follow the health protocols to avoid the COVID-19</li> <li>People should follow the correct <u>minimum health protocol</u></li> </ul>                      |
| Importance of Self-Care           | <ul style="list-style-type: none"> <li>Protect the health always to continue help the family</li> <li>Always protect the health, health should be top priority</li> <li>Be healthy and always take vitamins</li> <li>Vitamins is a must, and always <u>take care of your health</u></li> </ul>                               |
| Extend Patience and Understanding | <ul style="list-style-type: none"> <li>Being humble and understanding since some of them patients were experienced feelings of depression</li> <li>Longer patience to different patients</li> <li>Longer patience and control the emotions towards the patients</li> <li>Longer patience and <u>understanding</u></li> </ul> |

Table 3 above shows the different themes and core ideas on the significant insights that the COVID-19 frontliners have learned during the pandemic. Frontliners during the COVID-19 pandemic have learned various life lessons that helped them function and live better. These significant insights were from their experiences during the pandemic, and they also encouraged other frontliners to learn from their experiences. Three (3) themes were drawn from their responses: *Value for Public Health Measures, Importance of Self-Care, and Extend Patience and Understanding.*

### Value for Public Health Measures

Following the minimum health protocol, such as wearing face masks, physical distancing, and proper hygiene, were some realizations the frontliners learned during the pandemic. They have emphasized that following the public health measures can help them work efficiently as the COVID-19 daily cases decrease.

Participant 1 (Marie) shared that other than being understanding, it is important to follow the minimum health protocol so that the cases will decrease.

*I have learned that you should be very careful and frontliners should not judge patients easily and understand their situations. Also, you should follow the minimum health protocol to decrease the number of daily cases.*

Participant 3 (Angela) also shared the same sentiments that other than being patient and responsible towards the patients, following the health protocol is a must.

*You should have more patience and be responsible because anytime and anywhere, the virus is there, and the virus might infect patients if you are not careful. That is why you should follow the health protocols even though it is hard.*

### Importance of Self-Care

Other than being a coping strategy for the pandemic's challenges, the frontliners learned the importance of self-care. Frontliners expressed that health should be the top priority, such as taking many vitamins. The frontliners have learned that they can provide for their family by caring for their health.

Participant 4 (Jessa) shared that the frontliner should always protect their health as it must be their top priority.

*You should always take care, protect yourself, and*

*prioritize your health. Take vitamins, always wear a facemask, and follow the health protocols. We should also be patient as we sometimes need to be soft to the patients.*

Participant 8 (Anna) also shared the same sentiments on taking care of oneself, such as taking many vitamins.

*Always fight, as there are financial obligations that need to be settled. Be strong always. Also, you should take a lot of vitamins and take care of yourself. As you are the one who can help yourself.*

### Extend Patience and Understanding

Frontliners dealt with the different personalities and beliefs of the patients. This makes them realize that extending their patience and understanding towards the patients helped them become a bigger person. Frontliners expressed that they need to address the needs of the patients with patience and understanding, as some of them can be hostile and aggressive towards them. Frontliners mentioned that helping the patients understand the procedures and protocols is the best way as some patients also have a personal battle in life.

Participant 5 (Aiza) mentioned that it is important to understand the patients' feelings..

*You served the people and always be humble. You should understand their feelings, especially their feelings of depression; if they will scold you, you need to understand where they are coming from.*

Participant 2 (Grace) also shared the same realization that a frontliner should extend their patience toward the patients.

*My advice is that frontliners should extend their patience. If the patients scold you, you should remain calm, avoid an argument, and always fight in life*

## Discussion

### Challenges Experienced by the COVID-19 Frontliners during the Pandemic

Based on the study results, COVID-19 frontliners experienced various challenges during the COVID-19 pandemic. This includes the fear of being infected by COVID-19, the challenge of dealing with different patients, extended and demanding working hours, and mental health disturbances. On the challenges

experienced by the COVID-19 frontliners during the pandemic, four (4) themes emerged.

COVID-19 frontliners experienced various challenges during the pandemic, including the Fear of Infection. Frontliners expressed their experiences during the pandemic, such as fear of acquiring or getting infected by COVID-19. They've also expressed that they have a fear that they might transmit the disease to their family members. Also, some expressed that they were paranoid about their health, and some were taking a bath outside their homes before entering.

Being a health care worker is a challenging job as they were the frontliner in treating patients infected with COVID-19 who were at risk of acquiring the disease (Ran et al., 2020). Also, as frontliners work nonstop worldwide, they pose the biggest risk of contracting the disease and spreading it to others, such as in the hospital or their home (Dy & Rabajante, 2020).

The study results also show that frontliners experienced Challenges in Dealing with Patients. Frontliners shared that they were patients who were respectable to them. However, they were also unappreciative and aggressive patients. They've experienced being scolded by different patients as they've become verbally aggressive towards them. They've also experienced handling stubborn patients who insist on following their beliefs and ways instead of following the health protocols.

Furthermore, the pandemic puts frontliners at risk. Globally, there has been increased aggression and violence towards frontliners, which adds to the previous burnout (Elsaid et al., 2022). Also, the frontliners are more likely to experience verbal and physical aggression against them due to the increase in cases and fatalities and the tight isolation measures for treating the cases and dealing with deaths (Bhatti, 2020; Dawn News, 2020).

Based on the results of this study, Long and Busy Working Hours were also one of the challenges experienced by the COVID-19 frontliners during the pandemic. Due to the extensive work and busy schedule, the frontliners experienced a shift to their usual lifestyle, such as having limited time for leisurely activities and being unable to spend time with family members. Also, frontliners shared that they could not eat on time due to busy working routines and schedules.

Mass meetings were temporarily prohibited owing to the pandemic, and public facilities were shut down. This restricted people's ability to engage in leisure

activities (Morse et al., 2021). Also, the COVID-19 pandemic has required more overtime from healthcare professionals (Llop-Gironés, 2021). The health and safety of healthcare professionals may be negatively affected by these extended or irregular work hours (Hoedl, 2021). Frontliners have had many demanding days and a lot of overtime, which has left them with no time for their families, kids, or partners.

Lastly, the results revealed that COVID-19 frontliners experienced Mental Health Disturbance. Besides being physically exhausted during the pandemic, the frontliners also experienced disturbances in their mental health. They've experienced disturbances in their sleeping routines, and some experienced feelings of depression. More than that, the frontliners experienced being discriminated against or feelings of social stigma during the pandemic. The numerous night shifts, on-call commitments, and stress encountered by frontliners resulted in sleep deprivation and the development of insomnia-related conditions (Abbas et al., 2021). Also, frontliners feared several things during the pandemic, including getting sick, being unable to care for patients adequately, bringing the virus home and infecting loved ones, stigmatization, and many other things (Cawcutt et al., 2020).

### **Coping Strategies used to face the Challenges Experienced by the COVID-19 Frontliners amidst Pandemic**

Based on the study results, COVID-19 frontliners used various coping strategies to face their challenges amidst the COVID-19 pandemic. This includes having support from their family members, taking a lot of vitamins and prioritizing health, and having a strong faith in God. On the coping strategies used by the COVID-19 frontliners amidst the pandemic, three (3) themes emerged. Based on the results, Family Support was one of the coping strategies used by the frontliners during the pandemic. The frontliners shared that their family members encourage them to give their best. The support of their family members gave them strength to continue working despite the challenging work as frontliners. They were very devoted to work as their family members were their source of motivation.

Most frontliners used active coping strategies to lessen stress, such as adhering to safety procedures, taking precautions against social interaction, and asking for help from family and friends (Vagni et al., 2020). The support family was crucial for the frontlines. Additionally, frontliners valued communicating with friends and family, typically over the phone. This was

said to calm them and ease the concerns of their loved ones (Billings et al., 2021). The results also revealed that Self-Care was one of the coping strategies used by frontliners to face their challenges during the pandemic. Frontliners prioritize their health by taking care of it, especially by taking many vitamins. One's body must be nourished to stay active, keep routine, and strengthen the immune system. Healthy food, antioxidants, vitamins, nutritional supplements, essential oils, and staying hydrated were suggested as coping tactics (Finlay et al., 2021).

Lewis et al. (2022) stated that frontliners should use various personal coping strategies, such as getting enough sleep, exercising frequently, eating healthily, and limiting alcohol, as well as breathing and breathing exercises to avoid burnout and reduce anxiety and emotional distress. These strategies also include monitoring their workload and maintaining a healthy work-life balance (Heath et al., 2020; Hossain & Clatty, 2021; Mollica et al., 2021).

Moreover, based on the results, Strong Faith in God was also used by the frontliners to face the challenges during the pandemic. Frontliners asked for provisions and guidance from the heavens above. They've emphasized that praying is very important as it helps them to function effectively. Some of their prayers were asking for protection, guidance, and healthy living. Using prayer or other forms of communication with God through times of difficulty is a part of positive religious coping. Also, positive religious coping significantly decreased anxiety and depression among frontliner facing the COVID-19 pandemic (Chow et al., 2021). At the same time, religious coping increased during the pandemic as people were more motivated to pray (Bentzen, 2021).

### **Significant Insights that the COVID-19 Frontliners have learned during the Pandemic**

Based on the study results, COVID-19 frontliners have learned significant insights during the COVID-19 pandemic. This includes valuing the public health measures by following the minimum health protocols, the importance of having self-care, and extended patience and understanding for the COVID-19 patients. On the significant insights that the COVID-19 frontliners have learned during the pandemic, three (3) themes emerged. Based on the study's results, the Value for Public Health Measures was one of the significant insights that the COVID-19 frontliners learned during the pandemic. They've learned that following the minimum health protocol is important as it can decrease the number of positive cases each day.

The frontliners emphasized that physical distancing, wearing face masks, and avoiding crowded places can lessen their challenges and overwork.

WHO (2023) urges everyone to follow the health protocols so that COVID-19 cases will decrease and eventually be mitigated. Wearing masks properly, avoiding closed, crowded places as well as people with close contact with a COVID-19 positive, having a good hygiene such as cleaning your hands regularly using soaps and alcohol-based rubs, covering your mouth and nose when sneezing and telling the truth when you are not feeling well were some of the health protocols that the WHO urges people to follow.

The Importance of Self-Care was one of the significant insights that the COVID-19 frontliners have learned during the pandemic, based on the results of this study. Frontliners expressed that they have learned the importance of taking care of self. Prioritizing health by eating on time, drinking a lot of water, and taking a lot of vitamins during the pandemic helped them have a stronger immunity. Nutrition has long been understood to be closely related to immunity and the likelihood and severity of illnesses. Individuals who are malnourished are more susceptible to bacterial, viral, and other diseases. That is why it is usually preferable to consume high-quality foods, and it is essential to do so during the COVID-19 pandemic. A nutritious diet rich in the necessary minerals and vitamins produces enough immune cells and antibodies, which are crucial when the body mounts an attack against illnesses (Harvard T.H. Chan School of Public Health, 2020).

Furthermore, based on the results of this study, Extend Patience and Understanding was one of the significant insights that the frontliners have learned during the pandemic. Frontliners dealt with the different personalities and behaviors of the patients. They expressed being scolded by the patients, and some were verbally aggressive. With these, the frontliners suggest that other frontliners extend their patience and understanding towards COVID-19 patients.

Understanding patients as unique individuals in need of treatment, care, understanding, and compassion rather than as biological puzzles that need to be solved is made possible by humility (Wadell, 2017). How healthcare professionals view themselves and others is formed and calibrated by their humility, which benefits how they practice their clinical work. This can be evident in the way they give clinical care, how they learn and are curious, how they are driven to take care of others, and how they interact with patients and other team members (Wadhwa & Mahant, 2022)

In addition, this study supports Albert Bandura's social cognitive theory, specifically the concept of self-efficacy, which is how an individual perceives himself/herself and affects the ability to face challenges they have experienced, especially their cognitive abilities. In this case, the frontliners used various coping strategies that they believed were effective to face their challenges during the pandemic. Their motivation – support from family members, their beliefs, their religious way of coping, and their behaviors – taking care of one's self were their coping strategies. It supports Bandura's concept because their beliefs, motivations, and behaviors, especially their cognitive abilities, helped them to conquer their challenges during the pandemic.

## Conclusion

Based on the results and findings of this study, the COVID-19 frontliners experienced various challenges during the pandemic. The frontliners fear being infected since they are highly at risk due to exposure to the disease. They also fear that they might transmit the disease to other people, especially their family members. Another challenge during the pandemic was dealing with different patients. Frontliners expressed that the patients can be verbally aggressive towards them, and sometimes patients are unappreciative. Another challenge that the frontliners experienced during the pandemic was they had to work beyond their working hours since they needed to accommodate the inquiries and needs of the patients. They also expressed that due to the busy and long working hours, they've experienced various disturbances in their daily routine, especially their eating and sleeping patterns and social interactions. Also, frontliners have experienced mental health disturbances during the pandemic. Frontliners experienced having a feeling of depression as well as social stigma due to stressful working conditions.

However, despite the challenges the frontliners experienced during the pandemic, they've developed various coping strategies that helped them function efficiently. During the pandemic, the sources of their strength were having a strong faith in God by continuously praying and asking for guidance and strength, as well as their family members since they always encouraged and supported the frontlines. Also, frontliners shared that they always prioritized their health by maintaining a healthy way of living, such as taking a lot of vitamins.

Lastly, the frontliners realized various insights during

the pandemic, such as the importance of following the minimum health protocol and taking care of oneself. In this way, the number of COVID-19 cases will decrease, easing their work burden. Another insight was to extend patience and understanding towards the patients since they have different backgrounds, and it needs to be considered. Frontliners emphasized that patients deal with their battles as well, and being understanding towards the patients helped them address their inquiries and concerns.

## References

- Abbas, A., Al-Otaibi, T., Gheith, O. A., Nagib, A. M., Farid, M. M., & Walaa, M. (2021). Sleep Quality Among Healthcare Workers During the COVID-19 Pandemic and Its Impact on Medical Errors: Kuwait Experience. *Turkish thoracic journal*, 22(2), 142–148. <https://doi.org/10.5152/TurkThoracJ.2021.20245>
- Alsaeed, D., Al-Ozairi, A., Alsarraf, H., Albarrak, F., & Al-Ozairi, E. (2023). Are we ready for the next pandemic? Lessons learned from healthcare professionals' perspectives during the COVID-19 pandemic. *Frontiers in Public Health*, 11, 1047.
- American Psychological Association (2021). Anxiety. *APA Dictionary of Psychology*. Retrieved from <https://www.apa.org/topics/anxiety>
- American Psychological Association (2021). Depression. *APA Dictionary of Psychology*. Retrieved from <https://www.apa.org/topics/depression>
- American Psychological Association (2021). Mental Health. *APA Dictionary of Psychology*. Retrieved from <https://dictionary.apa.org/mental-health>
- An, Y., Sun, Y., Liu, Z., & Chen, Y. (2021). Investigation of the mental health status of frontier-line and non-frontier-line medical staff during a stress period. *Journal of Affective Disorders*, 282, 836-839.
- Bentzen, J. S. (2021). In crisis, we pray: Religiosity and the COVID-19 pandemic. *Journal of economic behavior & organization*, 192, 541-583.
- Bhatti, M. W. (2020, April 15). Why are Karachi's hospitals getting more DOAS, near-death patients? *thenews.com.pk*. <https://www.thenews.com.pk/print/644430-why-are-karachi-s-hospit-als-getting-more-doa-s-near-death-patients>
- Billings, J., Ching, B. C. F., Gkofa, V., Greene, T., & Bloomfield, M. (2021). Experiences of frontline healthcare workers and their views about support during COVID-19 and previous pandemics: a systematic review and qualitative meta-synthesis. *BMC health services research*, 21, 1-17.
- Blau, F. D., Meyerhofer, P. A., & Koebe, J. (2022, March 22). Essential and frontline workers in the COVID-19 crisis. *Econofact*. <https://econofact.org/essential-and-frontline-workers-in-the-covid-19-crisis>
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The lancet*, 395(10227), 912-920.

- Carascal, M. B., Capistrano, P. E., Figueras, M. D., Cataylo, O. L. A. C., Zuñiga, S. M. S., Reyes, M. E. S., ... & Macalipay, S. L. B. (2022). Experiences of COVID-19-recovered healthcare workers in a tertiary hospital in the Philippines: a mixed-method inquiry. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 59, 00469580221107051.
- Cawcutt, K. A., Starlin, R., & Rupp, M. E. (2020). Fighting fear in healthcare workers during the COVID-19 pandemic. *Infection Control & Hospital Epidemiology*, 41(10), 1192-1193.
- Chatterjee, S. S., Chakrabarty, M., Banerjee, D., Grover, S., Chatterjee, S. S., & Dan, U. (2021). Stress, sleep and psychological impact in healthcare workers during the early phase of COVID-19 in India: A factor analysis. *Frontiers in Psychology*, 473.
- Chen, Q., Liang, M., Li, Y., Guo, J., Fei, D., Wang, L., ... & Zhang, Z. (2020). Mental health care for medical staff in China during the COVID-19 outbreak. *The Lancet Psychiatry*, 7(4), e15-e16.
- Cheung, T., Fong, T. K., & Bressington, D. (2021). COVID-19 under the SARS cloud: Mental health nursing during the pandemic in Hong Kong. *Journal of psychiatric and mental health nursing*, 28(2), 115.
- Chow, S. K., Francis, B., Ng, Y. H., Naim, N., Beh, H. C., Ariffin, M. A. A., Yusuf, M. H. M., Lee, J. W., & Sulaiman, A. H. (2021). Religious Coping, Depression and Anxiety among Healthcare Workers during the COVID-19 Pandemic: A Malaysian Perspective. *Healthcare (Basel, Switzerland)*, 9(1), 79. <https://doi.org/10.3390/healthcare9010079>
- Commission on Human Rights Philippines. (2020, March 27). Advisory Series on Human Rights in time of COVID-19 in the Philippines. <https://chr.gov.ph/wp-content/uploads/2020/04/Advisory-on-the-Human-Rights-of-Older-Filipinos-amid-the-Coronavirus-Disease-2019-Pandemic-CHR-V-A2020-07.pdf>
- Cooch, N. (2020, May 7). Covid-19: Impact on frontline workers' mental health. *Practice Update*. <https://www.practiceupdate.com/content/covid-19-impact-on-frontline-workers-mental-health/100259>
- Coumare, V. N., Pawar, S. J., Manoharan, P. S., Pajanivel, R., Shanmugam, L., Kumar, H., ... & Rao, S. R. (2021). COVID-19 Pandemic—Frontline Experiences and Lessons Learned From a Tertiary Care Teaching Hospital at a Suburban Location of Southeastern India. *Frontiers in Public Health*, 9, 673536.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.
- Dai, Y., Hu, G., Xiong, H., Qiu, H., & Yuan, X. (2020). Psychological impact of the coronavirus disease 2019 (COVID-19) outbreak on healthcare workers in China. *medrxiv*, 2020-03.
- Dawadi, S. (2020). Thematic analysis approach: A step by step guide for ELT research practitioners. *Journal of NELTA*, 25(1-2), 62-71.
- Dawn News. (2020, May 15). Mob vandalises JPMC Ward after hospital's refusal to hand over covid-19 patient's body. *D A W N . C O M*. <https://www.dawn.com/news/1557115/mob-vandalises-jpmc-ward-after-hospitals-refusal-to-hand-over-covid-19-patients-body>
- Duan, L., & Zhu, G. (2020). Psychological interventions for people affected by the COVID-19 epidemic. *The Lancet Psychiatry*, 7(4), 300-302.
- Duquesne University. (2023, June 9). Libguides: Qualitative Research Methods: Gumberg Library and CIQR. Gumberg Library and CIQR - Qualitative Research Methods - LibGuides at Duquesne University. <https://guides.library.duq.edu/c.php?g=836228>
- Dy, L. F., & Rabajante, J. F. (2020). A COVID-19 infection risk model for frontline health care workers. *Network modeling and analysis in health informatics and bioinformatics*, 9(1), 57. <https://doi.org/10.1007/s13721-020-00258-3>
- Elsaid, N. M. A. B., Ibrahim, O., Abdel-Fatah, Z. F., Hassan, H. A., Hegazy, M. H., Anwar, M. M., & Soliman, H. H. (2022). Violence against healthcare workers during coronavirus (COVID-19) pandemic in Egypt: a cross-sectional study. *Egyptian journal of forensic sciences*, 12(1), 45.
- Fava, G. A., McEwen, B. S., Guidi, J., Gostoli, S., Offidani, E., & Sonino, N. (2019). Clinical characterization of allostatic overload. *Psychoneuroendocrinology*, 108, 94-101.
- Feist, J., Feist, G. J., & Roberts, T.-A. (2018). *Theories of personality*. McGraw-Hill.
- Ferreira, M. A., Carvalho Filho, M. A., Franco, G. S., & Franco, R. S. (2020). Profissionalismo Médico e o Contrato Social: Reflexões acerca da Pandemia de COVID-19. *Acta Med Port*, 362-364.
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health*, 9, 643807.
- Galea, S., R. M. Merchant, and N. Lurie. 2020. The mental health consequences of COVID-19 and physical distancing: The need for prevention and early intervention. *JAMA Internal Medicine* 180:817–818.
- Ghaleb, Y., Lami, F., Al Nsour, M., Rashak, H. A., Samy, S., Khader, Y. S., ... & Ramzi, S. R. (2021). Mental health impacts of COVID-19 on healthcare workers in the Eastern Mediterranean Region: a multi-country study. *Journal of Public Health*, 43(Supplement\_3), iii34-iii42.
- Gravetter, F. J., & Forzano, L.-A. B. (2018). *Research methods for the behavioral sciences*. Cengage.
- Harvard T.H. Chan School of Public Health. (2020, May 1). Ask the expert: The role of diet and nutritional supplements during COVID-19. *The Nutrition Source*. <https://www.hsph.harvard.edu/nutritionsource/2020/04/01/ask-the-expert-the-role-of-diet-and-nutritional-supplements-during-covid-19/>
- Heath, C., Sommerfield, A., & von Ungern Sternberg, B. S. (2020). Resilience strategies to manage psychological distress among healthcare workers during the COVID-19 pandemic: a narrative review. *Anaesthesia*, 75(10), 1364-1371.
- Hennein, R., Mew, E. J., & Lowe, S. R. (2021). Socio-ecological predictors of mental health outcomes among healthcare workers during the COVID-19 pandemic in the United States. *PloS one*, 16(2), e0246602.
- Hoedl, M., Bauer, S., & Eglseer, D. (2021). Influence of nursing staff working hours on stress levels during the COVID-19 pandemic: A cross-sectional online survey. *HeilberufeSCIENCE*, 12(3-4), 92–98. <https://doi.org/10.1007/s16024-021-00354-y>
- Hossain, F., & Clatty, A. (2021). Self-care strategies in response to nurses' moral injury during COVID-19 pandemic. *Nursing*

ethics, 28(1), 23-32.

Hou, T., Zhang, T., Cai, W., Song, X., Chen, A., Deng, G., & Ni, C. (2020). Social support and mental health among health care workers during Coronavirus Disease 2019 outbreak: A moderated mediation model. *Plos one*, 15(5), e0233831.

John Hopkins University and Medicine (2023) COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) Retrieved from <https://coronavirus.jhu.edu/map.html>

Johnson, S. U., Ebrahimi, O. V., & Hoffart, A. (2020). PTSD symptoms among health workers and public service providers during the COVID-19 outbreak. *PloS one*, 15(10), e0241032.

Kang, L., Ma, S., Chen, M., Yang, J., Wang, Y., Li, R., ... & Liu, Z. (2020). Impact on mental health and perceptions of psychological care among medical and nursing staff in Wuhan during the 2019 novel coronavirus disease outbreak: A cross-sectional study. *Brain, behavior, and immunity*, 87, 11-17.

Kang, P., Lv, Y., Hao, L., Tang, B., Liu, Z., Liu, X., ... & Zhang, L. (2015). Psychological consequences and quality of life among medical rescuers who responded to the 2010 Yushu earthquake: a neglected problem. *Psychiatry research*, 230(2), 517-523.

Khazaie, H., Ghadami, M. R., & Masoudi, M. (2016). Sleep disturbances in veterans with chronic war-induced PTSD. *Journal of Injury and Violence Research*, 8(2), 99.

Kotera, Y., Ozaki, A., Miyatake, H., Tsunetoshi, C., Nishikawa, Y., & Tanimoto, T. (2021). Mental health of medical workers in Japan during COVID-19: Relationships with loneliness, hope and self-compassion. *Current Psychology*, 1-4.

Lewis, S., Willis, K., Bismark, M., & Smallwood, N. (2022). A time for self-care? Frontline health workers' strategies for managing mental health during the COVID-19 pandemic. *SSM-Mental Health*, 2, 100053.

Li Q, Guan X, Wu P, et al. (2020) Early transmission dynamics in Wuhan, China, of novel coronavirus-infected pneumonia. *The New England Journal of Medicine* 382: 1199–1207.

Liu, C. Y., Yang, Y. Z., Zhang, X. M., Xu, X., Dou, Q. L., Zhang, W. W., & Cheng, A. S. (2020). The prevalence and influencing factors in anxiety in medical workers fighting COVID-19 in China: a cross-sectional survey. *Epidemiology & Infection*, 148.

Llop-Gironés, A., Vračar, A., Llop-Gironés, G., Benach, J., Angeli-Silva, L., Jaimez, L., ... & Julià, M. (2021). Employment and working conditions of nurses: where and how health inequalities have increased during the COVID-19 pandemic?. *Human Resources for Health*, 19(1), 1-11.

Maben, J. and Bridges, J. (2020), Covid 19: Supporting nurses' psychological and mental health. *J Clin Nurs*, 29: 2742-2750. <https://doi.org/10.1111/jocn.15307>

Maravilla, J., Catiwa, J., Guariño, R., Yap, J. F., Pagatpatan, C., Orolfo, D. D., ... & Lopez, V. (2023). Exploring indirect impacts of COVID-19 on local health systems from the perspectives of health workers and higher education stakeholders in the Philippines using a phenomenological approach. *The Lancet Regional Health–Western Pacific*, 30.

Mollica, R. F., Fernando, D. B., & Augusterfer, E. F. (2021). Beyond burnout: responding to the COVID-19 pandemic challenges to self-care. *Current psychiatry reports*, 23, 1-4.

Montemurro N. (2020). The emotional impact of COVID-19: From

medical staff to common people. *Brain, behavior, and immunity*, 87, 23–24. <https://doi.org/10.1016/j.bbi.2020.03.032>

Morse, J. M. (1994). Designing funded qualitative research. In Denzin, N. K. & Lincoln, Y. S., *Handbook of qualitative research* (2nd Ed). Thousand Oaks, CA: Sage.

Morse, K. F., Fine, P. A., & Friedlander, K. J. (2021). Creativity and leisure during COVID-19: Examining the relationship between leisure activities, motivations, and psychological well-being. *Frontiers in psychology*, 12, 609967.

Munawar, K., & Choudhry, F. R. (2021). Exploring stress coping strategies of frontline emergency health workers dealing Covid-19 in Pakistan: A qualitative inquiry. *American journal of infection control*, 49(3), 286-292.

Munhall, P. L. (2012). *A Phenomenological Method in Munhall, P. L. (Ed.), Nursing Research: A qualitative perspective* (5th Ed., pp. 113-175). Ontario: Jones and Bartlett Publications.

Northcentral University. (2023). Trustworthiness of Qualitative Data. Home - Chapter 4 - LibGuides at Northcentral University. Retrieved April 22, 2023, from <https://resources.nu.edu/c.php?g=1007180>

O'Connor, A. M., & Evans, A. D. (2020). Dishonesty during a pandemic: The concealment of COVID-19 information. *Journal of Health Psychology*, 1359105320951603.

Papoutsis, E., Giannakoulis, V. G., Ntella, V., Pappa, S., & Katsaounou, P. (2020). Global burden of COVID-19 pandemic on healthcare workers. *ERJ open research*, 6(2), 00195-2020. <https://doi.org/10.1183/23120541.00195-2020>

Polit, D. F., & Beck, C. T. (2010). *Essentials of Nursing Research: Appraising Evidence for Nursing Practice* (7th ed.). Philadelphia: Lippincott Williams and Wilkins Company.

Ran, L., Chen, X., Wang, Y., Wu, W., Zhang, L., & Tan, X. (2020). Risk factors of healthcare workers with corona virus disease 2019: a retrospective cohort study in a designated hospital of Wuhan in China. *Clinical Infectious Diseases*.

Romanò, M. (2020). Fra cure intensive e cure palliative ai tempi di CoViD-19. *Recenti Progressi in Medicina*, 111(4), 223-230.

Santarone, K., McKenney, M., & Elkbuli, A. (2020). Preserving mental health and resilience in frontline healthcare workers during COVID-19. *The American journal of emergency medicine*, 38(7), 1530-1531.

Scott, P. A. (2013). Ethical Principles in Health Care Research. In Curtis E. A. & Drennan J. (Eds.), *Quantitative Health Research: Issues and Methods* (1st ed.). (p.77-90). Berkshire, England: Open University Press, McGraw- Hill Education.

Shularo, L. A., Molato, B. J., Mokgaola, I. O., & Gause, G. (2021). Coping strategies used by nurses during the COVID-19 pandemic: A narrative literature review. *Health SA Gesondheid (Online)*, 26, 1-8.

Stahl, N. A., & King, J. R. (2020). Expanding approaches for research: Understanding and using trustworthiness in qualitative research. *Journal of Developmental Education*, 44(1), 26-28.

Sunil, R., Bhatt, M. T., Bhumika, T. V., Thomas, N., Puranik, A., Chaudhuri, S., & Shwethapriya, R. (2021). Weathering the Storm: Psychological Impact of COVID-19 Pandemic on Clinical and Nonclinical Healthcare Workers in India. *Indian journal of critical care medicine : peer-reviewed, official publication of Indian Society of Critical Care Medicine*, 25(1), 16–20.



<https://doi.org/10.5005/jp-journals-10071-23702>

The Lancet Psychiatry (2020). Isolation and inclusion, The Lancet Psychiatry 7, 5, [https://doi.org/10.1016/S2215-0366\(20\)30156-5](https://doi.org/10.1016/S2215-0366(20)30156-5).

Vagni, M., Maiorano, T., Giostra, V., & Pajardi, D. (2020). Coping with COVID-19: emergency stress, secondary trauma and self-efficacy in healthcare and emergency workers in Italy. *Frontiers in psychology*, 11, 566912.

Villamor, C. (2021, January 31). BHWs share stories as Covid-19 Frontliners. BHWs share stories as COVID-19 frontliners | University of the Philippines Manila. <https://www.upm.edu.ph/node/3467>

Wadell, P. (2017). Humility: An Indispensable Virtue to Learn for Practicing with Excellence. <https://www.chausa.org/publications/health-progress/article/september-october-2017/humility-an-indispensable-virtue-to-learn-for-practicing-with-excellence>

Wadhwa, A., & Mahant, S. (2022). Humility in medical practice: a qualitative study of peer-nominated excellent clinicians. *BMC medical education*, 22(1), 88.

Wei, E. K., Long, T., & Katz, M. H. (2021). Nine lessons learned from the COVID-19 pandemic for improving hospital care and health care delivery. *JAMA internal medicine*, 181(9), 1161-1163.

West, C. P., Dyrbye, L. N., & Shanafelt, T. D. (2018). Physician burnout: contributors, consequences and solutions. *Journal of internal medicine*, 283(6), 516-529.

WHO (2020) Coronavirus disease (COVID-19) pandemic. Retrieved from <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

WHO (2023) Coronavirus Dashboard. Retrieved from <https://covid19.who.int/>

World Health Organization. (2020, April 7). Voices of nurses and midwives in the Philippines. World Health Organization. <https://www.who.int/philippines/news/feature-stories/detail/voices-o>

f-nurses-and-midwives-in-the-philippines

World Health Organization. (2021). The impact of COVID-19 on health and care workers: a closer look at deaths (No. WHO/HWF/WorkingPaper/2021.1). World Health Organization.

World Health Organization. (2023). Advice for the public: Coronavirus disease (COVID-19). Corona Virus Disease.

Xiao, H., Zhang, Y., Kong, D., Li, S., & Yang, N. (2020). The effects of social support on sleep quality of medical staff treating patients with coronavirus disease 2019 (COVID-19) in January and February 2020 in China. *Medical science monitor: international medical journal of experimental and clinical research*, 26, e9235491.

Zhang, W. R., Wang, K., Yin, L., Zhao, W. F., Xue, Q., Peng, M., ... & Wang, H. X. (2020). Mental health and psychosocial problems of medical health workers during the COVID-19 epidemic in China. *Psychotherapy and psychosomatics*, 89(4), 242-250.

Zhong, B. L., Ruan, Y. F., Xu, Y. M., Chen, W. C., & Liu, L. F. (2020). Prevalence and recognition of depressive disorders among Chinese older adults receiving primary care: a multi-center cross-sectional study. *Journal of affective disorders*, 260, 26-31.

Zhu, Z., Xu, S., Wang, H., Liu, Z., Wu, J., Li, G., ... & Wang, W. (2020). COVID-19 in Wuhan: immediate psychological impact on 5062 health workers. *MedRxiv*.

## Affiliations and Corresponding Information

**Vincent Ray S. Bagaforo**

Professional Schools University of Mindanao – Philippines

**Emma C. Ceballo**

University of Mindanao - Philippines