

Psychosocial Support Experiences of Frontline Healthcare Workers as a Framework for a Community-based Mental Health Program

Reyes, Mark Vincent F¹, Sasot, Christopher², Dalangin, Kristine Joy D.³, Garcia, Chezca L.⁴ and Montaña, Jesrine Ian L.⁵

Abstract

This qualitative study examined the lived experiences of frontline healthcare workers who participated in a psychosocial support program during the COVID-19 pandemic. Data were collected through Focus Group Discussions and analyzed using Interpretative Phenomenological Analysis (IPA). The study aimed to assess the effectiveness of the psychosocial support program and to incorporate insights from participants into the development of a community-based mental health initiative. Four frontline healthcare workers consented to participate, and data analysis revealed four major themes: Psychological Construction of Mental Health, The Driving Force, Perceived Positive Experiences, and Assessment of Mental Health Service. These themes provide nuanced insights into the experiences of frontline healthcare workers and informed recommendations for future mental health interventions at the community level.

Keywords: Psychosocial Support, Frontline Healthcare Workers, Community-based Mental Health Program, Interpretative Phenomenological Analysis, COVID-19, Pandemic.

INTRODUCTION

The COVID-19 pandemic has significantly impacted healthcare systems worldwide, with frontline healthcare workers experiencing heightened psychological distress (World Health Organization [WHO], 2020a; Nicolaou, 2021; Cai et al., 2020; Lai et al., 2020). This study explores the experiences of frontline healthcare workers in the Philippines regarding psychosocial support during the pandemic. The aim is to inform the development of a community-based mental health program.

Mental health is recognized as a crucial component of overall well-being by the World Health Organization (WHO, 2020b), impacting both psychological and physical health throughout life stages. In the Philippines, the enactment of Republic Act No. 11036, or the Philippine Mental Health Law (2018), aims to ensure accessible mental health services and national promotion of mental well-being (Senate of the Philippines, 2018).

Despite legislative advancements, challenges persist, such as underinvestment and limited accessibility, particularly affecting vulnerable populations (Lally et al., 2019; Gallego, 2020; Hechanova, 2019). The COVID-19 pandemic exacerbated these issues, significantly impacting healthcare systems and frontline workers' mental health globally (Cai et al., 2020; Lai et al., 2020; Nicolaou, 2021).

This research employs Interpretative Phenomenological Analysis (IPA) to delve into frontline healthcare workers' interpretations of their experiences with psychosocial support (Smith & Eatough, 2007). This method aims to guide the development of tailored mental health interventions that address their specific needs. Furthermore, it underscores the exigency of responsive mental health programs amidst ongoing health crises like COVID-19 (Patel et al., 2020; Sprang & Silverstein, 2020).

¹ Centro Escolar University, 9 Mendiola St., San Miguel, Manila, Philippines, Email: mfreyes@ceu.edu.ph

² Polytechnic University of the Philippines, M.H. del Pilar Campus Valencia St. near R. Magsaysay Blvd., Sta. Mesa, Manila, Philippines, Email: cfsasot@pup.edu.ph

³ Polytechnic University of the Philippines, M.H. del Pilar Campus Valencia St. near R. Magsaysay Blvd., Sta. Mesa, Manila, Philippines

⁴ Polytechnic University of the Philippines, M.H. del Pilar Campus Valencia St. near R. Magsaysay Blvd., Sta. Mesa, Manila, Philippines

⁵ Polytechnic University of the Philippines, M.H. del Pilar Campus Valencia St. near R. Magsaysay Blvd., Sta. Mesa, Manila, Philippines

In conclusion, this study aligns with the goals of the Philippine Mental Health Law by proposing evidence-driven strategies to support the mental health needs of frontline healthcare workers, a population demonstrably affected by the pandemic (Senate of the Philippines, 2018). Addressing these needs is critical for fostering resilient and healthy communities (Patel et al., 2020).

Interpretative Phenomenology as a Theoretical Framework

This study employed Interpretative Phenomenological Analysis (IPA) to explore the lived experiences of frontline healthcare workers in the Philippines regarding psychosocial support during the COVID-19 pandemic (Smith & Eatough, 2007). IPA prioritizes understanding the subjective meanings participants ascribe to their experiences, making it suitable for uncovering how frontline healthcare workers perceive, interpret, and navigate the availability and effectiveness of psychosocial support (Smith & Eatough, 2007).

Focus on Lived Experiences

IPA emphasizes understanding the world from the participants' perspective. By exploring their lived experiences, we aimed to gain insights into:

Meanings of Psychosocial Support: How do frontline healthcare workers define and understand "psychosocial support" within the context of the pandemic, considering the pre-existing mental health landscape in the Philippines (Lally et al., 2019)?

Perceptions of Support Adequacy: Do they feel adequately supported by existing structures and resources?

Experiences with Support Effectiveness: How do they perceive the usefulness and impact of the provided support on their well-being during this challenging time?

Unveiling the "How" and "Why"

IPA goes beyond simply identifying themes; it delves into the "how" and "why" behind participants' experiences (Smith & Eatough, 2007). This deeper understanding can inform the development of tailored interventions that address the specific needs and preferences of frontline healthcare workers, aligning with the Philippine Mental Health Law's goal of enhancing mental health service accessibility (Senate of the Philippines, 2018).

METHODS

This research utilized a qualitative design, with the focus group discussion (FGD) as the strategy of data collection and Interpretative Phenomenological Analysis (IPA) as the framework for data analysis. The researchers used an FGD to explore the experiences of the healthcare workers who have experienced psychosocial support and used the IPA as a framework to analyze the data that will be shared by the participants.

Description of the Participants and Researchers

Purposive Sampling was utilized in the study. The researchers conducted an interview using Focus Group Discussion to those frontline healthcare workers in Navotas City who have undergone the psychosocial support program during the COVID-19 pandemic. A total of four participants gave their consent to participate in the focus group discussion.

The researchers in this study are currently taking up a Master's degree in Psychology with specialization in Clinical Psychology at Polytechnic University of the Philippines and are currently enrolled in the Research 1 subject. The researchers have enough background to conduct qualitative research including the use of IPA as a framework and methodology.

Procedure

The study involved frontline healthcare workers from Navotas City. Participants were provided with informed consent in a language they understood to ensure they were aware of the study's goals and procedures. This allowed them to make an informed decision about participation. They were comfortable discussing their

psychosocial support experiences using a focus group discussion (FGD) and agreed to this method for data gathering.

The researchers ensured minimal risk or discomfort for the participants, maintaining strict confidentiality of all information collected. Participants were anonymized using codes, and all data files were encrypted, accessible only to the researchers and the research adviser. After completing the study, participants were debriefed and given the opportunity to ask questions.

The research instrument was formulated based on the study's goals. A sample open-ended question used was: "Can you describe your overall experience during the psychosocial support activity?"

Upon consenting, participants were scheduled for interviews at their convenience. During the FGD, the researchers verbally reiterated the informed consent and answered any questions. Permission to record the session was obtained, and participants were assigned code names. The session began with an introduction to the study and rapport-building questions before delving into their experiences with the psychosocial support program. The discussion concluded with participants expressing gratitude and well wishes to the researchers.

Data Analysis and Validity Checks

After conducting interviews, the researchers transcribed and clarified the responses with participants, incorporating their comments for validation. The transcripts were read multiple times to identify key topics, ideas, feelings, and themes. Similar themes were grouped together to create cohesive, saturated themes. Emerging general themes were reviewed and cross-checked with the participants' narratives to ensure accurate representation. Participants also reviewed and validated the themes. The final step involved writing detailed accounts of the themes, supported by participants' narratives. The analysis process included continuous review of transcripts to ensure validity.

RESULTS

To answer the research question: "What are the lived experiences of Frontline healthcare workers who have undergone psychosocial support during the COVID-19 pandemic?", Interpretative Phenomenological Analysis was employed. The four participants were asked to discuss their experiences during the psychosocial support program. To visually present the lived experiences of the frontline healthcare workers, a table of the master themes, subthemes, and examples of illustrative text was formed. Data analysis established four higher-order themes that captured the lived experiences of the frontline healthcare workers who have experienced the psychosocial support program.

Psychological Construction of Mental Health

The focus group discussion started when the researchers asked about their prior knowledge about the Philippine Mental Health Law. The participants were asked about their idea about the said law.

Lacking idea about the Philippine Mental Health Law

HCW1 explicitly stated having no knowledge of the Philippine Mental Health Law and confirmed it was her first time hearing about it.

HCW2 mentioned having a limited understanding of the law:

"...yes, I've heard about it but discussing it thoroughly, I don't have that, but I heard it."

HCW2 also indicated that her understanding of the law was limited to its aim of improving mental health services, which were previously underaddressed in the Philippines:

"It's about enhancing the delivery of integrated mental health services because before, it wasn't adequately addressed in the Philippines, so this law addresses that."

These insights reveal that awareness of the Philippine Mental Health Law and mental health, in general, remains limited among healthcare workers.

Stigma about Mental Health

HCW1 had no knowledge of the Philippine Mental Health Law and confirmed it was her first time hearing about it.

HCW2 had a limited understanding, stating:

"...yes, I've heard about it but discussing it thoroughly, I don't have that."

HCW2 understood the law as aimed at enhancing mental health services, which were previously underaddressed in the Philippines:

"It's about enhancing the delivery of integrated mental health services because before, it wasn't adequately addressed in the Philippines, so this law addresses that."

HCW3 thought the law might address mental health stigma:

"...I think it's about fighting the stigma against mental health issues because, for Filipinos, when someone has a mental problem, they think that person is crazy or something."

HCW4 mentioned he had heard of the law but it wasn't discussed openly due to stigma:

"Honestly, like everyone else here, I don't know much about the Philippine Mental Health Law. I've come across it, but it's not discussed openly because of the stigma around mental health in the Philippines."

Participants highlighted the stigma preventing people from seeking help, with HCW1 noting that individuals fear being labeled as having a mental disorder:

"People think that if you see a psychologist or psychiatrist, you must be crazy."

HCW1 also mentioned that people refuse mental health support because they don't believe they have a mental problem:

"When I invite others, they refuse because they don't think they have a mental issue."

HCW2 noted that mental health is not recognized as important, and those requesting leave for stress or depression are seen as overreacting:

"You can say you need leave because you're stressed or depressed, but people in the Philippines think you're just being dramatic."

HCW3 added that people often dismiss mental health issues, suggesting prayer as a solution:

"If you say you have a problem, they'll say you're just acting out or imagining things. They tell you to just pray."

HCW4 and HCW1 discussed the fear of being judged and labeled as having a mental disorder:

"There's fear of being judged for what you share." –HCW4

"People immediately think you have a mental problem." –HCW1

HCW1 explained that when inviting colleagues to psychosocial support, she clarifies that joining doesn't mean they have a mental disorder:

"I explain that joining doesn't mean you're sick or have a mental disorder."

A study by Martinez et al. (2020) identified stigma, including fear of judgment and shame, as a barrier to accessing mental health services. The stigma associated with mental health prevents individuals from seeking help, fearing they'll be labeled as having a mental disorder. There's a misconception that only people with mental disorders can seek help from mental health professionals.

Limited Idea about Psychosocial Support

When asked about their understanding of psychosocial support, participants revealed it was their first time hearing about it when introduced by a colleague. They were curious and wanted to experience it.

HCW1 shared:

"...I was curious about it because I haven't experienced it yet, and I really wanted to, so I accepted the offer."

HCW2 mentioned:

"When it was first introduced, I volunteered to join because our colleague was coordinating it and asked for help."

HCW4 added:

"...I was curious and excited at the same time."

These accounts indicate that participants were eager to join the program out of curiosity and the desire for a new experience.

The Driving Force

As the focus group discussion continued, the frontline healthcare workers shared their interest to join another session of psychosocial support.

Referral To Join the Psychosocial Support Program

The participants shared their feelings and thoughts after undergoing the program.

HCW2 mentioned:

"...it became part of city health, and it was linked to the Philippine Mental Health program, then (Name) introduced it to us."

HCW2 expressed her insights about the psychosocial support program, noting that a group member referred her to participate.

Negative Experiences of Healthcare Workers During the Pandemic

As COVID-19 cases continued to rise in the Philippines, HCW3 shared her negative experiences as a healthcare worker during the pandemic. She stated:

"You feel pressured at work because when you get home, you think your work is done, but it's not. You still have to work, leaving no time for yourself and your family. The burden of COVID and personal problems is heavy."

HCW3, a frontline healthcare worker, struggles with her own personal issues while helping COVID-19 patients. Similarly, HCW2 described her challenges working under pressure during the pandemic:

"I felt the pressure and stress, especially during the pandemic surge. There was stress at work—rushing, lack of sleep, and going home unsure if you've brought the virus with you. Then, there's the pressure of your job."

These negative experiences during the pandemic motivated the participants to join the psychosocial support program to help them cope with these challenges.

Acknowledgement That They Need Help

Healthcare workers recognize the need for support to manage stress during work. Given the highly contagious nature of COVID-19, HCW2 expressed her fear of bringing the virus home to her family. This apprehension led her to realize she needed help from others. She stated:

"I felt the pressure and stress, especially during the pandemic surge. There was stress at work—rushing, lack of sleep, and going home unsure if you've brought the virus with you. Then, there's the pressure of your job. So I told her I probably needed someone to talk to—how to divert it? So she scheduled me for the program."

HCW2 acknowledged that she needed help to cope with her struggles and believed that psychosocial support could help her. HCW3 also recognized the need for professional mental health support, sharing:

"Okay... I told ma'am (name) that I really need to seek some professional help."

Curiosity about the program also motivated HCW1, HCW2, and HCW4 to join the psychosocial support program after it was introduced to them:

"I was curious about it because I hadn't experienced it yet and really wanted to. That's why I accepted (name)'s offer." - HCW1

"I volunteered to join the psychosocial support program." - HCW2

"Like HCW1 and HCW2, I was curious and excited at the same time. As healthcare workers, we provide services, so when I heard about it from (name), I wanted to experience it too." - HCW4

Participants expressed excitement about the program. HCW4 noted the benefits of the psychosocial support program, emphasizing the importance of maintaining their own mental health to be effective in their jobs:

"We realized we needed it to take care of ourselves because we were completely drained. It's a way to recharge ourselves. The main motivation is that you cannot give what you don't have."

Transfer of Learning from the Psychosocial Support Experience

HCW4 believed the psychosocial support program would benefit their patients. He added:

"Maybe the motivation is that we will definitely learn something from here. And we can use what we learn to help others as well. The things we learn from the sessions, we can share with those close to us and with the people we interact with while doing our job."

By participating in the program, HCW4 emphasized that the knowledge gained would be passed on to both their immediate circles and the broader community they serve through their work.

Perceived Positive Experience

During the interview, the healthcare workers discussed their positive experiences with the psychosocial support program.

Competency of the Mental Health Professional

Healthcare workers cited their comfort and happiness with psychosocial support. According to HCW1,

"I felt okay with it... I felt comfortable talking to them. There wasn't... there wasn't any... how should I put it... I just felt comfortable."

HCW1 likened their interactions to casual conversations, where they felt comfortable sharing, "It's like chatting, we're comfortable and we talk like that."

HCW3 expressed feeling viewed more as a friend or sibling rather than someone with mental health issues, stating,

"It's okay with me. It's like he sees me not as someone with a mental health problem but as a friend, like a little sister."

HCW3 also reflected on learning stress management techniques through the program, saying,

"...I was taught by (NGO) how to handle stress, similar to HCW2. Like breathing exercises and if you feel like crying, just cry. That was okay. If that's how you relieve your stress. Overall, I'm happy with the program's results. Thank you."

HCW4 emphasized the significance of personal one-on-one sessions, noting,

"Especially the one-on-one session because it's personal, you really feel the sincerity... of the person who interviewed you or provided psychosocial support, and at the same time, their willingness to listen rather than speak, because being listened to is better."

These accounts illustrate how healthcare workers value a supportive and non-judgmental approach in psychosocial support, emphasizing personal connection and effective coping strategies.

Confidentiality of information shared to the Mental Health Professional

In discussing personal information, it's crucial to assure clients of confidentiality, especially when they choose to confide in professionals rather than family or close friends, as highlighted by HCW1:

"Not everything can be shared with our families or close friends, there are things we prefer to tell strangers because we can't express them otherwise. This could be the moment when it might help."

"When it comes to discussing matters, it will be confidential. I explain to them that there's no need to be afraid or worry because everything you discuss is safe, as the people we talk to are professionals."

This emphasizes the importance of confidentiality in creating a safe environment for clients to share their personal experiences and feelings without fear of judgment or breach of privacy.

Satisfactory Experiences During and After the Session

HCW 4 expressed satisfaction with both group and one-on-one sessions, particularly favoring the latter for its personal nature and the sincerity of the support provided:

"I mean, I'm satisfied... Especially with the one-on-one session because it's personal. You really feel the sincerity of the person who interviewed you or provided psychosocial support."

Both HCW1 and HCW3 shared their satisfaction and happiness with the psychosocial support activities, which helped them acknowledge and manage their emotions during the pandemic:

"Overall, I'm okay. I'm satisfied even with just one program. It's okay."

"I'm happy with the results of the program."

HCW2 found the program highly beneficial, learning basic stress management techniques and experiencing profound satisfaction after unburdening herself:

"It's simple and yet you think, 'Oh, right, that's it, I can do that.' For me, it really helped, especially when I'm stressed out. I'll just go back to that and then, yeah, do that first. After a while, I'm okay. You know, I released some of my stress, not completely but the overflowing stress was reduced. So for me, that's better. I'm okay with the fruitfulness of our conversation, yes, the outcome was good for me."

These statements highlight the positive impact of psychosocial support in helping healthcare workers cope with their emotional challenges during stressful times.

Psychosocial Support Is Highly Recommended

The COVID-19 pandemic has significantly impacted the mental health of frontline healthcare workers, who provide crucial care and support to patients. Based on their experiences, participants recommend trying psychosocial support programs to manage stress and improve mood:

HCW4 emphasized the importance of such programs for individuals with mental health challenges who may be in denial, stating,

"It helps people open up about their thoughts regarding everything about this."

HCW3 shared from personal experience, highlighting how these programs can be beneficial when family members don't fully understand, saying,

"It really helps because sometimes your own family doesn't get it."

HCW2 suggested that even simple coping techniques, often overlooked, can make a big difference:

"Finding simple ways to cope is sometimes what you need. It's very helpful. I would definitely recommend it."

These insights underscore the value of psychosocial support programs in assisting healthcare workers and others in managing stress and maintaining mental well-being during challenging times.

Assessment on Mental Health Services

At the latter part of the focus group discussion, the participants shared their suggestions and insights on how to improve the psychosocial support program based on their experience. They gave some points to develop for future implementation of the activity.

Reiteration of the Scope of the Session

A participant expressed feeling unresolved after a session, expecting to receive an assessment but not receiving one:

"I felt a bit unfinished with our conversation, like I couldn't anticipate the ending because it suddenly cut off. I also expected to be given an assessment about our discussion, but it didn't happen. There was none of that."

HCW1 elaborated on her confusion and expectations for mental health services, including an assessment and possibly medication advice:

"I was expecting an assessment, like what I've seen where they say, 'Here's my assessment of you,' and maybe suggesting medication or something like that."

These statements highlight the participant's confusion about the session's process and expectations regarding psychosocial support. Clear communication about the program's procedures and the scope of mental health services could have mitigated these misunderstandings.

Improve Mental Health Literacy and Awareness

Participants highlighted the need for better awareness and dissemination of mental health services. Many individuals in the Philippines are unaware of available support programs:

"I also want to emphasize what HCW2 mentioned about making mental health programs known. Here in the Philippines, many people likely need such support, but because these programs aren't widely known, they have little idea."

Participants emphasized that mental health services should be accessible to everyone, not just those with diagnosed disorders. They stressed the importance of increasing awareness about existing programs to better meet mental health needs:

"It's important to inform everyone that mental health services are available to all, not just those with diagnosed disorders. Many people are unaware of these programs that could help them. Therefore, improving the dissemination of mental health information is crucial to enhance public mental health literacy."

These suggestions underscore the importance of expanding awareness and accessibility of mental health services to support individuals in addressing their mental health challenges.

Accessibility of Mental Health Services

Participants emphasized the need for continuous promotion of mental health programs throughout the year, rather than just during Mental Health Awareness Month:

"It should always be up and about. Mental health services are usually promoted during the awareness month, so they're highlighted more. But it should be emphasized that these services are accessible at all times, not just during specific occasions."

Additionally, participants suggested establishing an accessible helpline for mental health emergencies and developing comprehensive programs that cater to various mental health needs:

"I don't think there's a concrete program yet for mental health. We have an MHPSS program under the HEMS, but it's mainly directive for patients who have undergone traumatic experiences. Like HW2 said, it shouldn't just be highlighted during Mental Health Month, but should be available year-round, 24/7, for patients in need. There should be an establishment or creation of a program focused not only on trauma patients needing MHPSS, but also for anyone wanting to assess their mental health."

Furthermore, HCW4 noted the limited discussion and training on mental health in their institution:

"There aren't many trainings or seminars on mental health. Since 2013, we've only conducted about 3 to 4 seminars."

Participants expressed limited awareness about mental health resources and the Philippine Mental Health Law. Due to these limitations, many people are unaware of available mental health services, contributing to misconceptions and stigma that need addressing.

Hire Manpower to Implement Mental Health Programs. Participants Suggested the Recruitment of Mental Health Professionals, Such As Psychologists, to Lead and Manage Mental Health Programs Within Their City

"I haven't seen any implemented mental health programs in our city. It's my opinion that we should hire psychologists to handle patients as well as frontline workers."

Participants emphasized the importance of manpower in implementing effective mental health initiatives at the community level. They expressed the need for dedicated professionals who can oversee and ensure the successful implementation of these programs.

DISCUSSION

The frontline healthcare workers shared their experiences in the psychosocial support program that they have joined. They mentioned how they lack information about mental health and the idea about the mental health services here in the Philippines. They also shared their motivation for joining the psychosocial support program. Their psychosocial support experiences were positive as they feel the genuinity of the mental health professional and the confidentiality of sharing their stories to the mental health professionals who have served them during the psychosocial support activity. The participants have shared some suggestions to improve the psychosocial support program which focused more on mental health literacy, information dissemination, human resource, and proper program implementation.

The immense stress brought about by the pandemic may lead to mental health problems, especially if not treated early. However, there have been misconceptions about mental health and mental illnesses (Reavley & Jorm, 2011). In the Philippines, there is a perceived stigma and collective beliefs on mental health that hamper the treatment needed by the individual. For instance, a study conducted by Kobe University of the Philippines (2018) found out that people with mental health problems experience substantial discrimination and treatment from the community. The findings of the research emphasized that people with mental health problems face stigma because of culture-bound beliefs and social structure wherein it perceives that mental health problems

as a disease of the family and discouraged people from accepting problems on mental health (Tanaka et al., 2018). We can observe from the accounts of our respondents the stigma they see in terms of seeking psychosocial support. The fear of being labeled as someone with mental disorder prevents other people from seeking professional help.

Consistent to the findings of this research, according to a literature review performed by Dr. Andtover P. Tuliao (2018), there is a generally low output on psychological research within the Philippines. Very little research exists on Filipinos' conceptualization and study on mental health, which caused the addition of stigma and poor information regarding mental illness. Therefore, perceived stigma and limited study on mental health in the Philippines play a part to the overall lack of understanding of mental health as congruent to the limited ideas shared by the participants regarding mental health.

On the 20th of June 2018, a passage of the Republic Act No. 11036, also known as the Mental Health Act, was established to deliver mental health services. There are continuous advocacy activities such as the 2nd Public Health Convention on Mental Health by the Department of Health. In addition, activities such as webinars from different organizations and World Mental Health Day celebrations. However, it was notable that there is still a lack of understanding regarding mental health as congruent to the results of this study.

The findings of the study would shed light to the status of mental health in the Philippines. It shows that the stigma about mental health is still evident nowadays which prevents people from seeking professional help. Factors may include the lack of information about mental health. Thus, mental health literacy must be reinforced. The findings are important in providing insights to the needs analysis when developing a program about mental health. This study suggests that proper mental health information dissemination should be one of the target programs in crafting a community-based mental health program.

In terms of the participants' satisfaction for the psychosocial support program, based on the results, the participants were satisfied with the services they have had because of the competency of the mental health professionals who served them. They felt the sincerity and genuinity of these mental health professionals.

Based on the Professional Regulatory Board of Psychology Resolution No. 11 Series 2017 Adoption and Promulgation of the Code of Ethics and Professional Standards for Psychology Practitioners in the Philippines (Psychological Association of the Philippines, Code of Ethics and Professional Standards for Psychology Practitioners 2017 Section 2.a), mental health professionals are expected to provide services within the boundaries of their competencies. It also stated in the resolution that psychological services delivered to or through organizations, mental health practitioners shall provide information beforehand to clients, the nature and objectives of the services, the relationship they have to the client and the organization, the potential uses of services provided and information gathered during the session. In the circumstances that the organization's rules preclude the details of results from providing such information to a particular participant, the former shall inform the participant of such fact at the outset of the service.

Furthermore, in the code of ethics general ethical standards and procedures for psychology practitioners, there is a provision in maintaining confidentiality as the mental health professional's primary obligation and utmost priority duty to safeguard any information divulged by the client regardless of the medium used or stored.

The findings in the study have shown how the competency of the mental health professionals affect the delivery of their services. Competent mental health professionals strengthen the therapeutic relationship which is critical in the successful implementation of the program. This suggests that training and capacity-building of mental health professionals must be incorporated into the proposed community-based mental health program because we must invest in skilled and competent mental health professionals in the delivery of quality mental health services.

In the current situation of the Philippines, the World Health Organization presents situational analysis on the prevalence of mental health conditions in the country (WHO, The Philippines Prevention and management of mental health conditions in The case for investment, 2021). Based on the data gathered, there is an increased demand for mental health care as a report on the increased burden of mental health conditions. Depression is the most known mental health condition in the country. In 2017, there were about 3.3 million cases of

depressive disorders (3.3% of the population) and 3 million cases of anxiety disorders (3.1% of the population). The study's findings show enormous demand for mental health services that the government needs to attend (WHO, The Philippines Prevention and management of mental health conditions in The case for investment, 2021).

Moreover, the COVID-19 pandemic has had a significant impact on people's mental well-being and put people in a state of psychological distress. Concurrently, the pandemic has severely disrupted the country's mental health services. As a result, there are disruptions to the mental health care service delivery for people with mental illness and significantly delayed treatment of the new cases.

On top of that, the Philippine health care system has very few mental health professionals. For more than 100 million people, there are an estimated 548 psychiatrists and 133 psychologists practicing in the country (WHO, The Philippines Prevention and management of mental health conditions in The case for investment, 2021). With these constraints, the Department of Health has trained primary health care physicians in assessing and managing mental, neurological, and substance use through the use of Mental Health Gap Action Program treatment protocols. The DOH created the Mental Health Strategic Plan (2019-2020). This plan includes mental health literacy and appointing mental health coordinators in each region to coordinate and promote the agency's mental health program to ensure that mental health and well-being are valued, promoted, and protected. Also, it was designed to improve the population's mental health. The participants shared their views about the country's lack of mental health services providers and staffing based on the study's findings.

Implication to Theory, Practice, and Research

One of the implications of this study is the need for the enhancement of mental health promotion by engaging in informative programs that would increase mental health literacy in the community. The lack of information about mental health justifies the need for robust mental health information dissemination. Moreover, it was evident in the study how the stigma prevents individuals from seeking professional help. It is a call for the profession to continuously fight for misinformation, misconception, and stigma. Addressing this concern through proper mental health discussions and forums that are accessible to the public can be advised. Additionally, the study further implicates the need for manpower that responds to the needs of individuals seeking for help. This calls for more competent mental health professionals to take oath in giving quality mental health service for the general population.

The study implicates the importance of establishing rapport in counseling. Enhancing the counseling skills through training and direct supervision with feedback would substantially help in the development of the skills of the mental health professionals. This would help in delivering quality mental health services. Moreover, standardized operation procedures in conducting psychosocial support must be emphasized and must be incorporated in the training program for mental health professionals.

Findings from this review also indicate implications for service delivery and the integration of mental health into the general health care system. It was evident that the mental health of the medical frontliners was directly hit by the uncertainties brought about by COVID-19. As the surge cases increase, the frontline healthcare workers experience psychological distress and physical fatigue in response to the disease.

Mental health issues have been widely undervalued, and migration has resulted in the loss of investments in human capital (Palaganas et al., 2017). It is suggested to adopt the mental health strategy of Europe as nine of the 10 happiest countries in the world are in Northwestern Europe (World Happiness Report, 2021). Mental health advocacy in these countries has been proven effective because it was highlighted as a fundamental component of public health and had a remarkable impact on individual countries and their people, social and economic capital (Wahlbeck, 2015). The study results implicate the need for the Department of Health to use this approach, recognizing that this would provide a new aspect in managing the economy and develop mental health programs that are immediately accessible to frontline healthcare workers throughout the year. In addition, there is a need to develop preventive strategies to mitigate the surge of mental health concerns. Other approaches that could be undertaken as preventive and treatment strategies include psychoeducation that promotes mental health literacy and diminishes stigma and could positively influence help-seeking.

The results revealed a significant lack of implementation of the Mental Health Act by local government units. There are inadequate resources and gaps in the formulation and implementation of mental health initiatives, primarily community-based mental health services. Due to insufficient budget allocation for the mental health program, there is a low turnout of research and plantilla positions for mental health professionals. According to the Department of Health, the budget appropriated for mental health for the year 2021 was only Php 615 million. It is essential to provide funds for mental health and research in successfully actualizing the community-based mental health program.

The findings of this study would aid in the crafting of a community-based mental health program in addressing the concerns raised by the frontline healthcare workers. The following are hereby suggested:

Here in the Philippines, to achieve proper mental health wellness for every individual, We need to empower the training of large scale youth leaders, whole organization leaders, community leaders, and community health workers. We also need a large scale for those groups of people so they can provide support when the professional health care experts are still swamped in other cases. We could only accomplish these solutions if there is enough financial support from our government. Cc Dr. Maria Cariasaleja.

Implications to Government

Funding of Mental Health Programs and Research

Mental illness profoundly impacts individuals across various aspects of life, influencing behaviors and productivity. Abraham Maslow's Hierarchy of Needs underscores the critical role of belongingness, especially during crises like the COVID-19 pandemic, when individuals seek understanding and support. Recent statistics reveal that 3.6 million Filipinos suffer from mental and neurological disorders, highlighting widespread challenges in mental health disclosure and societal stigma (WHO, GMA News and Public Affairs Digital, 2021; Octol Research, 2021).

In Filipino culture, stigma surrounding mental health issues often prevents individuals from seeking necessary care, fearing negative judgments such as being labeled as "mentally ill" or "crazy." This cultural perspective, rooted in concepts like "Hiya" (shame), complicates efforts to address mental health needs effectively (GMA News and Public Affairs Digital, 2021).

Republic Act 11036, signed by President Duterte, marks a significant step toward integrating mental health care into the public health system. However, challenges persist, as evidenced by alarming statistics and limited resources in mental health facilities nationwide. For instance, during the initial COVID-19 lockdown in March 2020, the National Center for Mental Health reported high call volumes to crisis hotlines and a significant occupancy rate in mental hospitals (NCMH, Stand for Truth, 2020).

The Philippines currently faces a shortage of mental health professionals and facilities, with only three main government mental health hospitals serving the entire country. Despite patient satisfaction with services, these facilities struggle with understaffing, impacting care quality and accessibility (GMA News and Public Affairs Digital, 2020).

Moving forward, addressing mental health challenges requires robust government support and funding. The proposed increase in the Universal Health Care program's budget underscores a commitment to enhancing medical and mental health services nationwide, vital for improving overall well-being and resilience post-pandemic (Phil Star, 2021).

In conclusion, prioritizing mental health alongside physical health is essential for a comprehensive health care approach in the Philippines. Adequate funding, expanded facilities, and increased mental health literacy are crucial steps toward achieving this goal, ensuring that all Filipinos have access to necessary mental health care and support.

Robust Mental Health Literacy and Information Dissemination

It is essential to establish a strong and continuous program in promoting mental health including the services that the government and the non-government organizations offer to facilitate the delivery of mental health information to the general public. It was observed among the participants based on their accounts that they lack the necessary information about mental health. Through proper information dissemination, the general public becomes well-informed about what mental health is and what are the services that they can access with regards to their mental health needs. According to Al-Yateem et al (2018), the ability to recognize a disorder and the belief of the individuals about the helpfulness of treatments are central to mental health literacy. Conducting programs, such as seminars, that provide evidence-based information about the effectiveness of treatments on mental health disorders can be suggested. Studies have shown that the improvement of mental health literacy among the community increases the potential of individuals to engage in early interventions which is beneficial in promoting well-being (Al-Yateem, et al, 2018).

Mental Health Human Resource

Due to the scarcity of mental health professionals (Lally, et al, 2019), investing in human resources is essential. This is to confirm the observations of our participants in the study that they lack mental health professionals in their city. Manpower planning is suggested to organize a community-based mental health committee who will oversee and take charge in the implementation of the mental health programs in the community. It is important to hire competent mental health professionals who can aid in the delivery of mental health services. As mentioned by the participants, they become satisfied with the psychosocial support program because of the competency of the mental health professionals who served them.

Capacity Building for Mental Health Professionals and Mental Health Advocates in delivering Mental Health Services

Because of the scarcity of mental health professionals at the community level, it is suggested to continuously provide capacity-building and training for mental health professionals and mental health advocates in delivering satisfactory mental health services in the community. Through capacity-building, our mental health professionals may continue to provide quality service for our people. To increase the ability of local responders and mental health professionals, training must be provided. The delivery of psychosocial support appears to be largely in the hands of community volunteers such as teachers, health professionals, and emergency workers, given the nation's scarcity of mental health professionals (Hechanova & Waelde, 2017).

Accessibility of Mental Health Services at the Community Level

In addressing community-based mental health interventions, Hechanova (2019) outlines three key strategies: integrating cultural considerations into program design, employing participatory action research, and providing field supervision and coaching. Emphasizing culturally relevant approaches is crucial, particularly in the Philippines where protective factors like spirituality and family play significant roles. Community-based participatory action research enhances intervention relevance and promotes community involvement in policy and program development (Hechanova, 2019).

This study examined frontline healthcare workers' experiences with psychosocial support, highlighting positive feedback and recommendations for program enhancement. Future community-based mental health programs should prioritize increasing mental health literacy through targeted initiatives. Additionally, enhancing the capacity of mental health professionals and advocates is essential for effective program implementation and oversight. Finally, ensuring equitable access to community-level mental health services remains a critical goal.

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APPENDIX

If any, the appendix should appear directly after the references without numbering, and not on a new page.