

Understanding Mental Health Service Access and Help-Seeking Behaviors in Higher Education Employees

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Abstract—This study employed a qualitative research methods design to examine the barriers to accessing care and how psychological help-seeking intention influences the mental health of permanent employees at ABC University. This paper presents the qualitative findings that explored the variables under study. Data were collected from 7 participants. It employed coding and thematic analysis as primary strategies for analyzing the data. Major themes emerged in each of the variables under study. Results show that self-reliance, financial limitations, stigma and discrimination, reliance on family or friends, and alternative forms of care are the barriers to accessing care. The common problems they will seek psychological help for include their inferiorities in different areas of themselves, personal and relational burdens as a source of loneliness, self-understanding, and hurdles in dealing with other people. The themes that emerged, which contribute to their mental health, include holistic growth, sense of belonging, social responsibility and sustainability, a work-in-progress safe space at home and work, and workplace dynamics. These findings provide context for the subsequent quantitative analysis and offer valuable insight for policy and program development.

Keywords— barriers to access care evaluation, intention to seek psychological help, mental health, policy, and program.

I. INTRODUCTION

Picco, Abdin, Chong, Pang, Shafie, Chua, Vaingankar, Ong, Tay, and Subramaniam (2016) discussed the different hurdles of utilizing services for mental health such as stigma, reluctant of disclosing diagnosis, expected costs, self-reliance to handle one's problem and the belief that problem will go away. In the context of the Philippine setting, in addition to self-reliance and stigma, mental health awareness is the primary barriers that prevent Filipinos from seeking help. In terms of stigma, Filipinos have a negative perception that having a mental health condition will ruin the family reputation or maybe exclude. Alternatively, self-stigma is manifested in their fear of loss of face, sense of shame, embarrassment, and disgrace of receiving negative judgment, and the idea that indicates a weakness or a failing character, having a mental health condition. The apprehension also stems from fear of becoming a burden to others.

Filipinos are challenged with the lack of mental health facilities and professionals, given the small allocation of budget for health in the government of the Philippines. Despite the implementation of the Philippine Mental Health Act of 2018 and approval of the Universal Care of 2019, the

coverage for mental health allotted by the Phil Health only amounts to US\$54 for mental diseases and hospitalization. Martinez, Co, Lau, and Brown (2020) identified financial barriers to accessing mental health services as a barrier to officially seeking treatment. Only 2.65% of the health care budget (per capita, US\$0.47) is allocated to mental health. Most investments are allocated to facilities and institutional care (WHO 2021).

Professional is only sought if the social support is not available, hence reliance on empathic, trusted, and accessible family and friends is unfavourable to formal psychological help-seeking. Similar to past studies, which revealed that severity predicts the likelihood of the intention to seek help from professionals, as Filipinos perceived those expert services as only warranted when symptoms have disabling effects (Martinez et al., 2020). Future studies may explore the barriers to receiving care evaluation that will enhance the help-seeking attitudes and behaviours (Picco et al., 2016). The present study will focus on the psychological help-seeking intention, which is the product of attitude, and having the intention will lead to help-seeking behaviour.

There was no data on how the expense and difficulty of access affected Filipinos' desire to seek mental health care. Very little empirical research has been done on how Filipinos frame mental illness and psychological disturbance, and how it influences their choice of treatment provider (Tuliao, 2014). Through this research, this will provide opportunities to reduce the adverse health, economic, and other consequences of mental health conditions through preventive and treatment interventions.

Globally, nations are now prioritizing mental health, and schools are being compelled to take initiative. The Mental Health Act (RA11036), which was passed into law in the Philippines in 2018, mandates that educational institutions develop policies and initiatives to protect the mental health (MH) of their faculty, staff, and students (Plata, 2020). As a "state of well-being in which the individual realizes her abilities, copes adequately with the normal stresses of life, displays resilience in the face of extreme life events, and works productively and fruitfully, and can make a positive contribution to the community," "The significance of good mental health in schools and the workplace was also addressed in her research (RA 11036, p.2). Due to the increasing number

of incidences of depression, addiction, and other mental illnesses, mental health and well-being are included in the UN Sustainable Development Goals (SDGs) (Vortuba, 2018).

Plata (2020) also discussed that the MH Policy is critical in every university to avoid being blamed during the incidence of self-harm and suicide, and the increasing incidence of depression and anxiety. A comprehensive and integrated approach to promote mental health, prevent problems of mental health (e.g., suicide incidence), address stigma, and provide support to those suffering already will be created. Also, MH policy will be a shared language between community members, educators, parents, staff, administrators, and students.

Through psychoeducation of mental health, stigma will be reduced, and knowledge about mental health will be improved. Through these initiatives, too, the mandates for Disabled Persons, the Mental Health Act, and the Data Privacy Act will be taken into consideration. Specifically, as stipulated in Section 24 of Ra 11036 states that “Educational institutions such as schools, colleges, universities, and technical schools, shall establish policies and initiatives for students, teachers, and other staff members that will increase awareness of mental health issues, identify and offer services and support to people who are at risk, and make it easier for people with mental health conditions to get treatment and psychological support.” ABC University has been very committed to striving to push forward programs, projects, and activities that respond to the attainment of the 17 SDGs. The University has never been excepted from the incidence of self-harm and suicide, depression, anxiety, alcoholism, substance use, grief, burnout, and stress.

Additionally, ABC University has made significant progress in its competitiveness both locally and internationally. The institution’s reputation has improved as a result of this new certification, creating more chances for research, teamwork, and international recognition. But although this accomplishment can increase self-esteem and drive, it could also put pressure on students, teachers, and staff members and raise expectations. For those who find it difficult to live up to these new expectations, the heightened emphasis on performance and excellence may cause stress, burnout, and mental health issues. As the university’s reputation grows, it is crucial to strike a balance between the benefits and the possibility of mental health stress. Through this initiative, existing guidelines for mental health. Can be enhanced into more comprehensive and empirically based mental health policies and programs within the university, focusing on the barriers to access care, the employees’ intention to seek psychological help, and their present mental health condition will all be the baseline.

II. METHODS

Research Design

Using a qualitative research methods approach, this research looked at the obstacles to treatment access and how psychological help-seeking intention affects the mental health of ABC University's permanent staff. Of the 12 who agreed to participate, only 7 were available during the data-gathering

procedure. The data were primarily analyzed using thematic analysis and coding.

Informants

The participants of the study are the teaching and the non-teaching permanent in ABC University. The list of permanent employees was invited to participate through their email addresses. Each of the permanent employees was reached individually. Also, the Human Resource Department of each of the campuses endorsed the research study to their permanent employees.

The researcher used purposive and convenience sampling. As a kind of non-probability sampling, purposive sampling involves the researcher choosing participants based on predetermined criteria for a study-related goal. Specifically, the researcher identified the top scorer in terms of the assessment of the barriers to access care evaluation, common problems experienced by the participants, and participants with lower mental health. Hence, the researcher uses their judgment in determining who will participate in the interview process. It also used convenience sampling as the interview process was conducted based on the convenience of the participants (e.g., time availability) (Andrade, 2021). It is important to note that the result of the study using convenience sampling would not generalize to all the government employees in the country or province at large. It can only be generalized to the employees of the university under study. Of 12 employees who agreed to participate in the interview, only 7 teaching and non-teaching employees were available during the time of data gathering. It involves 5 faculty members and one Legal Assistant, and 1 Administrative Officer.

Instrument

To obtain the objectives of the study on a deeper level, an interview guide was made. It was organized with the following components: barriers to access care evaluation, intention to seek counselling, and mental health continuum of the participants. It also included debriefing questions that asked how they felt and what they thought after the interview.

The interview guide was validated by the adviser and external validators, who are all mental health practitioners and registered psychologists. To get a more specific and detailed response, the interview guide was checked for double-barrelled questions, rephrasing, and appropriateness of terminology. Tagalog translations were not conducted as the recruited 12 participants were assessed to be capable of English language medium for the interviews.

Data Gathering Procedure

Being a practitioner, most of the clients of the researcher are employees who avail themselves of the mental health programs of their companies. They seek psychological help due to some personal, relational, and occupational issues and concerns. This is where she got the idea of focusing her study to formulate recommendations for evidence-based mental health policy and programs.

To obtain the objectives of the study on a deeper level, an interview guide was made. After thorough validation

of her research interview guide, data gathering was conducted after seeking the permission of the university president and the chancellors of each of the campuses of the university. For a good quality interview, first, the participants were asked about their full willingness to contribute information on the variables under study. Secondly, the interview's start included establishing rapport and assuring confidentiality. Also, permission to record the interview was asked of all the participants. Third, the results of the survey were not discussed with participants to avoid bias in the answers and opinions with regard to the variables of interest. Individual interviews were conducted in August 2024 using a Google Meet link and cell phone calls. The mean duration of the interview was 1.5 hours, ranging from 1-3 hours.

Data Analysis

The researcher made transcriptions of the audio-recorded interview. As shown in Fig. 1, the study used coding and thematic analysis as the primary strategies in analyzing the data. Through thematic analysis, findings relevant to the inequities are considered upon evaluation of repeated responses from participants. The significant themes were located through coding processes.

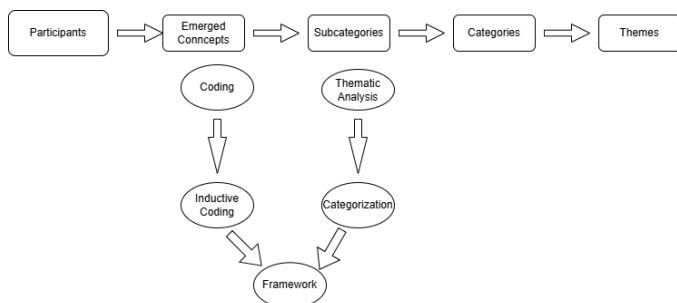


Figure 1. Qualitative Data Analysis Procedure

In each quotation, categories are formed through arranged data and assigned codes. The study used inductive coding, in which the researcher began the analysis with no codes at all, followed by the examination of the data set and formulation of codes. Through coding, the data set underwent deconstruction, comparison, and categorization. The description of the gathered data is then used to create ideas or themes (Toyon, 2021). Finally, a framework was developed reflecting the themes that emerged from each of the variables under study.

Ethical Considerations

Several factors were considered to guarantee that the study would be carried out appropriately. To adhere to ethical standards when performing research: (1) all participants were provided with informed consent, which explained the purpose and process of the study; (2) they were reminded of their right to withdraw from participation in the study whenever they felt uncomfortable answering some questions; (3) ensuring confidentiality about the personal information that they would share; (4) permission to record the interview was obtained from the participants; and (5) reminding about protection from privacy, as this study will ask about their experiences in the different areas of their lives. Also, in the manuscript, the researcher ensured that there is no identifiable information that

would lead to revealing the university name under study. Finally and most importantly, the clearance to proceed with the study was certified by the Research Ethics Committee of the Lyceum of the Philippines-Batangas.

III. RESULTS AND DISCUSSION

A. Barriers to Access Care Evaluation

The first theme found in the qualitative analysis is the financial constraints as a barrier to seeking psychological care. Research participant 1 stated that “*Sa situation ng finances ko ngayon, it will also affect kasi po halos saktuhan din po ang aking salary.*” (My present financial situation will also affect me, as my salary is almost enough.) Interview results show that participants do not prioritize seeking professional help. Participants 1 and 5 reported having a lot of bills and financial obligations to settle, and prioritizing medical needs over professional help, respectively.

The American Psychiatric Association reports that members of minority groups are less likely to get mental health treatment. In 2015, Asians (22%) were the least likely to receive the mental health treatment they needed, followed by Hispanics (31%) and Whites (48%), respectively. While there are several factors, such as stigma and the lack of diversity among mental health providers, financial constraints continue to be a major barrier for diverse populations as well. The APA states that “lack of insurance, or underinsurance, and inadequate support for mental health services in safety net settings, were all reasons cited for not seeking treatment” (Zapata, 2025).

Except for acute psychosis, inpatient care, and substance dependence, the majority of mental health services are paid for out of pocket by service users. For mental health treatment, many Filipinos use private practitioners or traditional resources (WHO, 2020). Zapata (2025) talked about ways that families can reduce costs, such as applying for financial grants, group therapy and workshops, using the counseling program for minors, and finding a sliding scale provider that offers services based on an individual's income and creates rates based on the person's capacity to pay, especially for those who are uninsured or underinsured.

Furthermore, research participant 4 stated, “*Common prejudice, siguro po ay yung sasabihin nila. Kasi ang normal perception po kasi sa mga tao dito sa atin kapag sinabi nila na nagpapaconsult ay, well, nagiging discriminatory ang term natin. Yung parang, ay sintu-sinto naman iyan.*” (Maybe they will say the common prejudice. Because the normal perception of people here when they say someone is consulting is, well, our term becomes discriminatory. It's like, oh, that person must be crazy.)

The statements show the second barrier, which is due to cultural stigma and discrimination. These negative reactions are perceived by society as they experience judgment and prejudices when acquiring professional help. It can be deduced from the interview results that stigma is prevalent even among family members and relatives. The result of the study is aligned with the meta-synthesis conducted by Gallimore et al. (2023) discussed the influence of sociocultural factors and

negative labeling as barriers to help-seeking among Caribbeans.

The societal norms, religious, and supernatural beliefs may lead individuals to supernatural interventions due to these beliefs and the stigma associated with mental health services. Fear of being labelled as “crazy” and negative connotations that mental health conditions will be permanently part of their identities, which then leads to denial or non-recognition of the mental health needs, and creates reluctance to seek help. As they view mental illness as shameful and sinful, they fear judgment, condemnation, discrimination, and rejection. These prevent them from disclosing difficulties even to families and seeking support. Lack of understanding of the mental illnesses, health care providers, and individual characteristics also adds to the barriers to seeking psychological help. Hence, psychoeducation is crucial in dismantling stigma and promoting the utilization of mental health services available.

Loved ones can offer immediate emotional and practical support, which lowers barriers to treating mental health difficulties, in contrast to the study. Research indicates that the belief that help is available when required, or perceived support, frequently has a stronger impact on reducing stress, anxiety, and depression than actual support. Social support has indirectly decreased stigma by promoting individuals to seek psychological help, regardless of whether it is for social or occupational reasons (Acoba, 2024; Minot, 2023).

It was found in the study that the third barrier to accessing care evaluation is relying on their friends and family for social support and assurance. These include informational support, which gives individuals advice and practical help, especially when it comes to making decisions. In terms of emotional support, they feel comfortable and understood when they open up to family and friends since they know that their feelings are acknowledged. In addition to their presence and the support they receive, it also involves nonverbal support, where physical touch is quite beneficial. The last type of support is instrumental, wherein their friends and family offer them practical assistance in the form of monetary, moral, protective, and caregiving support.

Open naman po sa family ko kapag may problem, pati po sa mga friends ko sa work. Nabibigyan naman po nila ako ng advice, natutulungan naman po nila ako. Ang sarap po sa feeling na meron ako nakakausap. Usually, po by my myself tapos kapag hindi ko na kaya saka ako nagconsult sa friends.” (I am always open with my family when there is a problem, as well as with my friends at work. They give me advice, they help me. It feels so good to have someone to talk to. Usually, I am by myself, and when I can't take it anymore, that's when I consult my friends.) According to the results of the interviews, friends and family can help with decision-making, emotional sharing, and getting the material, practical support that one needs while dealing with difficulties. Strong social links create a safe space where you can talk about mental health issues without worrying about being judged, according to Radez et al. (2020). It may also help folks feel more at ease and supported. Additionally, family members can offer immediate practical and emotional assistance, which lowers barriers to mental health management.

Research participant 1 revealed, “*Kung kaya ko solve on my own without telling my friends, mas okay. Hindi ko na ibibigay burden kung kaya ko naman on my own. Very few times na nagsi-seek ako. Sa family ako ang nagso-solve problema nila. To open up pero hindi ask ang help nila to solve problem. Naniniwala ako na walang makakatulong sa atin kundi ang sarili din natin.*” (If I can solve it on my own without telling my friends, that's better. I won't burden others if I can handle it on my own. Very few times do I seek help. In the family, I am the one who solves their problems. To open but not ask for their help to solve the problem. I believe that no one can help us but ourselves.)

The statements show the fourth barrier to access care evaluation, which is self-reliance in solving problems. Many people are reluctant to seek professional help because they prefer to manage their mental health issues on their own or think they will go away on their own, according to research by Conroy et al. (2020). Meadley et al. (2024) also discussed how self-reliance can promote resilience and independence when it is balanced, but overconfidence in one's ability to handle difficulties on one's own or worries about being a burden might prevent people from seeking help when they need it. Van den Broek et al. (2023) stressed that while self-reliance fosters resilience, it should be balanced with help-seeking behavior when necessary. The significance of mindset for mental health was emphasized in the Krause et al. (2021) study. Better mental health results are associated with a growth-oriented mindset. It is typified by the conviction that difficulties can be overcome with work and education.

Research participant 8 stated that “*We can have familial, financial, sometimes emotional, conflict with family members. But first, I pray. Even if I don't go to church, it eases my mind. I go to church every Sunday because I feel very light when praying. I also analyze the situation, have clear thoughts, and learn to control myself. Communication is also one of the most important things when facing problems, and expressing yourself. We just must be critical when telling our opinions.*” The results show that open communication in the family lessens stigma and improves trust with each other. Through shared emotions and prayer, relief and support are obtained. These are the alternative forms of care, which are considered to be the fifth barrier to accessing care evaluation found in the study.

Chatlani (2023) highlighted that addressing the obstacles in terms of financial restrictions could help improve help-seeking behaviors. Strategies like offering sliding scale rates, expanding insurance coverage, or launching community-based mental health programs are suggested to mitigate the challenges brought on by financial limitations. According to Gallimore et al. (2023), in order to reduce the likelihood that stigmatization would act as a deterrent to getting help, self-coping techniques and instruction on how to deal with perceived and/or actual stigma are necessary. Although self-reliance, alternative care, and support from friends and family can promote coping and resilience, it's crucial to remember that professional assistance may only offer short-term respite and support.

Overall, the study's findings are in line with those of Bollentino et al. (2023), who found that the primary obstacle was the high expense of mental health care. The stigmatization of feeling ashamed, fear of being viewed as "weak" or "crazy," and anxiety about family and other people's reactions come next. The biggest obstacle in the Philippines, a collectivistic nation, is the desire to handle problems on one's own because one may not want to burden others with their problems, even though the country's mental health system appears to be effective in its efforts to reduce stigma and raise awareness (Martinez et al., 2020). It is accompanied by the wish to seek help from friends and relatives, the challenge of taking leave from work, and the assumption that issues will sort themselves out. The fact that the individuals surveyed are permanent university staff makes it more probable that they will struggle to cover the related costs. They also resort to alternative care solutions through prayers, self-reliance, and requesting support from friends and family.

B. Psychological Help-Seeking Intention

The first theme about the problem the participants might seek psychological help for, found in the study, is the combination of personal, social, physical, and economic inferiorities. Personal inferiorities include inability to prioritize oneself; intellectual inferiority due to the social pressure of being non-tech savvy; professional or career inferiority involves societal pressure too in terms of doing research and instructional materials; physical insecurity due to his physical attribute and unmet cultural expectations; and economical and social inferiority due to societal pressure having a low salary and ability to speak in public.

Research participant 1 stated, *"Maybe my concern of giving myself time, especially when I see others able to handle and have time for themselves. Also, I put the burden on myself. I also would like to separate my personal and home life. I want to give time to enjoy life by taking one step at a time."* The statement shows the participant's inferiority due to the inability to prioritize oneself. Consistent with other participants, results show the need for work-life balance and time management.

Young et al. (2024) outline a protocol for a systematic review that aims to explore the impact of time management interventions in professional settings. The study highlights that, in light of the increasing mental health and well-being challenges observed in the workplace and the reported sense of time scarcity, as well as the widespread use of time management tools, there is a lack of understanding regarding the effectiveness of these interventions and which aspects of time management are most beneficial. The review intends to offer evidence-based time management strategies from the standpoint of health and well-being to HR professionals, leaders, and health experts. Shaikh et al. (2023) noted that establishing clear objectives, adopting a structured approach, and having a preference for organization are positively linked with maintaining a work-life balance.

The study identified practical applications that include developing training programs focused on enhancing employees' time management skills, offering adaptable work

arrangements, and leveraging technology through organized schedules to effectively prioritize tasks, thus boosting organizational productivity and fostering a healthier work-life balance. Research by Zhang et al. (2024) emphasized the indirect relationship between work-life balance and employees' mental health, particularly among nurses, by nurturing psychological capital and increasing job satisfaction. The practical recommendations mentioned advocate for the establishment of flexible work schedule policies, maintaining adequate staffing, and providing training that improves resilience, stress management skills, and self-efficacy. Enhancements to psychological capital and job satisfaction can be achieved through recognition initiatives, career advancement opportunities, and the promotion of a positive workplace atmosphere.

Research participant 3 discussed *"Siguro po ay issues ko with my parents. Kasi many times na alam ko mali ang decision nila pero hindi ko sila masabihan kasi magulang ko sila and they have their own way of life. Pero yun nga sinabihan ako ng iba ko tiyuhin na mangialam ka dahil panganay ako. Siguro po ay darating din yung time na makapagvocal na ang maisettle at least bago man sila mawala. I need more people to motivate me and yung magbibigay ng encouragement"* (Maybe it's my issues with my parents. There are times when I know their decision is wrong, but I can't tell them because they are my parents, and they have their way of life. But then my other uncle told me to interfere because I'm the eldest. The time will come when I can be vocal and settle things, at least before they pass away. I need more people to motivate me and encourage me. The statements show relational inferiority due to cultural pressure or societal norms, which hinders individuals from asserting themselves, and the need for support outside of the family.

Rothenberg et al. (2021) pointed out that maladaptive parenting, especially the neglect of a child's emotional needs, can have lasting impacts on mental health that affect multiple generations. This underscores the significance of interventions that aim to rectify maladaptive parenting habits across different generations and cultures. One method involves changing cultural standards related to parenting, particularly in cultures with high levels of rejection, such as the Philippines, where there is a strong focus on honoring parents, which often hinders the child's ability to communicate their thoughts, feelings, and needs. The research mentioned legislative reforms and public health initiatives as examples of community-level interventions.

Additionally, participant 6 mentioned, *"I feel less competent in terms of involvement in research and the quality of teaching materials when compared to my colleagues."* These remarks indicate a sense of professional or career inferiority stemming from societal pressures related to research and the comparison of his instructional materials with those of his peers. Other participants expressed feelings of inadequacy due to their lack of technological proficiency, which increases their reliance on colleagues for tech-related support. Hennekam (2020), in a study examining the link between self-perceived job performance and mental health, discovered that overall performance factors, such as the

quality of work and the speed of service, significantly impacted employees' varying mental health symptoms. Furthermore, Nanyaro (2024) noted that by creating supportive and appreciative environments for employees, organizations can improve well-being and foster higher levels of creativity, productivity, and loyalty.

Furthermore, research participant 7 mentioned, "When I was younger, I was quite tall, standing at 6'2". However, in the Philippines, being tall usually means you excel at basketball, which I don't enjoy. My interests lie in other sports, specifically athletics." These comments highlight the participant's feelings of physical inadequacy stemming from societal expectations related to appearance. Additionally, research participant 8 noted, "What makes me feel inferior to others is my lower salary. Also, public speaking is another area where I feel lacking." In the context of this study, the body image concerns raised by participant 7 could lead to a negative self-perception, which may subsequently correlate with diminished mental health and psychosocial functioning. Research in this domain suggests that interventions remain largely underexplored (Milton et al., 2021). They highlighted evidence-based strategies including self-monitoring, cognitive restructuring, exposure exercises, fitness training, media literacy, boosting self-esteem, and psychoeducation. Other effective approaches, such as stress management and self-compassion training, were also mentioned. These treatments might help with body image, food choices, nutrition, and weight control. By fostering self-worth, such training may enhance health outcomes related to body image concerns. Furthermore, regarding the fear of public speaking, Ebrahimi et al. (2019) demonstrated through their research that psychological interventions or psychotherapy are beneficial treatments for this fear, alleviating its adverse effects on an individual's educational, social, and professional functioning.

The second theme identified in the research, where participants sought psychological assistance, is the personal and social pressures that contribute to feelings of loneliness. Research participant 1 expressed, "Often, I feel lonely because of my financial worries, and I am the only one responsible for making decisions and solving issues. However, I do not wish to burden others. I want to spare them from feeling sad." This statement illustrates that the participant feels lonely due to financial instability and the heavy reliance of her family on her for decision-making and problem-solving. Also, research participant 8 mentioned, "Perhaps it's during family conflicts. My mood shifts, and I become anxious when I have conflicts with my family members. I don't want to remain lonely for an extended period." This indicates that family disputes lead to loneliness, emotional instability, and anxiety for the participant.

Moreover, research participant 6 noted, "I feel lonely when my thoughts consume me, particularly when I indulge in overthinking." This statement highlights issues related to thought patterns that result in excessive rumination. Other participants also shared concerns about the future of their families, particularly their children. They showed feelings of financial and social inadequacy driven by societal pressures related to insufficient salaries and a lack of self-assurance in

public speaking. Brandts et al. (2016) noted in their research that an individual's socioeconomic status, especially in financial terms among adults, is independently linked to experiences of internalized inferiority that manifest as social inadequacy and shame. The study by Sezer et al. (2024) explicitly identified that as one moves down the socioeconomic ladder, the prevalence of internalized inferiority rises. This can be attributed to stigmatization, social isolation, and downward comparisons. Feelings of internalized inferiority adversely affect health by fostering unhealthy behaviors and triggering direct psycho-physiological responses. Thus, recognizing inferiority is crucial in understanding mental, physical, and socioeconomic health factors.

The third theme discovered is self-understanding. Research participant 6 expressed, "I wonder if I have other purposes and untapped potential. I'm also interested in starting a business for passive income." These observations indicate that participants are seeking avenues for personal development, potential, and a sense of purpose. Additionally, research participant 8 remarked, "What more can I do? I've tried playing instruments, doing crafts, cooking, and participating in sports. Perhaps, I consider baking as it brings me peace, productivity, and appreciation for myself more by doing things I enjoy." The interview findings reveal that the participant wishes to try various hobbies with numerous advantages.

Boreham and Schutte (2023) noted that individuals with a stronger sense of purpose may be less susceptible to mental health issues. A foundation for positive mental health is illustrated through a person's ability to engage with life and act by their sense of purpose, which supports mental well-being. This aligns with the perspective that overall well-being encompasses proactive elements beyond merely the absence of illness, incorporating interactions with one's surroundings that resonate with personal interests, values, strengths, and feelings of significance. However, they also stressed that having a purpose does not automatically ensure good health, as some individuals may struggle with depression or anxiety even while trying to pursue a purpose or engage in personal development through meaning and purpose. The study concluded that the most effective way to perceive purpose is through its ability to facilitate behavior orientation, adaptability in facing challenges, and enabling individuals to view their lives as meaningful.

The fourth theme found as a problem that the participants will seek psychological help for is the hurdles in dealing with other people. Research participant 8 stated, "Communication, it's hard for me to communicate with them. It depends on the type of person. Sometimes, I am more expressive to the people I am close to. I find it hard to express myself to people I am not close to. I feel shy. Maybe what I am learning is to estimate the person you're talking to. Maybe, the difficulty is the communication". The statements show the reluctance to communicate with people she is not close to. Other participants also discussed their tendency to filter information discussed with people and a tendency to please other people. It was also evident that participants tend to isolate themselves due to pressure and toxic interactions. A collaborative work

environment keeps employees in a confident and relaxed state from which they can achieve their maximum output; a toxic work environment creates depression, anxiety, and workplace stress for employees. It shows that the increase in the toxicity in the workplace will increase stress.

The study indicates that the participants experience personal and social forms of inferiority, such as relational, intellectual, physical, economic, and professional or occupational factors. According to Livingston et al. (2022), well-being is influenced by a person's income, education, relationships, and employment. These components affect mental and physical health, social connections, and self-image, with disparities worsening personal and social difficulties. An intervention is necessary to mitigate the relationship between TWE and WS to cultivate more motivated and productive employees (Wang et al., 2020).

Additionally, regarding the origins of loneliness, findings indicate that it arises from personal and relational challenges such as financial worries, inadequate family time, conflicts within the family, and excessive rumination. According to Bruss et al. (2024), loneliness linked to these personal and relational challenges often prevents individuals from seeking psychological assistance. It is closely associated with mental health problems such as depression and stress, particularly among at-risk populations. The research conducted by Refaeli and Achdut (2021) emphasizes how financial difficulties contribute to loneliness, especially during crises like the COVID-19 pandemic, when economic struggles heightened feelings of isolation. Factors such as financial pressure, insufficient family interactions, family disputes, and overthinking largely exacerbate loneliness, intensifying emotional distress and isolation.

Ultimately, the social challenges of the participants are the gaps in communication, interactions with individuals who possess negative mindsets, behaviors, and attitudes, discomfort with acquaintances, and a personal preference for solitude. Novotney's (2019) research suggests that communication barriers, contending with negativity in social interactions, and a desire for solitude can contribute to increased social isolation and mental health concerns. These challenges are associated with feelings of loneliness, heightened anxiety, and diminished well-being. Bennett (2024) noted that difficulties in articulating thoughts may lead to misunderstandings and emotional detachment. Mismatched communication styles exacerbate the situation. Regarding individual challenges, some participants prefer solitude due to the pressures or demands associated with their tasks. Psychology Today (2019) highlights that opting for solitude for negative reasons, such as avoiding social pressures, is linked to experiences of loneliness or anxiety.

C. Mental Health of ABC University

The first theme identified that contributes to mental health is the holistic growth experienced by the employees. Research participant 7 expressed, "My happiness comes from my family, building relationships, learning, and contributing to the community. I find interest in singing at church and taking on roles, traveling, achieving peace of mind, and

valuing relationships and knowledge over material possessions." The findings indicate that the participants derive happiness from strong family connections and/or achieving a balanced life between work and personal time. They associate happiness with opportunities for individual growth and the ability to assist others. Some highlighted the joy found in family ties, work-related fulfillment, and engagement with their communities. Meanwhile, others shared complex emotional experiences due to illness or unemployment, but noted the support received from family and colleagues. The study by Gragnano et al. (2020) supports the notion that happiness frequently arises from strong familial relationships and a healthy work-life balance. Connections with family offer emotional backing and boost overall well-being, while maintaining a balanced work and personal life diminishes stress and enhances satisfaction.

The second theme found in the study that contributes to their mental health is a sense of belonging. Research participant 7 remarked, "The challenge arises when we have differing priorities, beliefs, and values." This participant highlights various viewpoints as obstacles, illustrating the dual nature of belongingness, both positive and negative. Thissen et al. (2023) indicate that a sense of belonging in the workplace affects performance and retention. Neutral belongingness often represents a combination of positive and negative experiences at work and home, influenced by conflicts, diverse viewpoints, and roles within the organization. Moreover, efforts by Fanton (2021) to enhance belongingness focus on inclusive strategies and the proactive management of conflicts.

Research indicates that promoting a sense of belonging can decrease turnover by 50% and significantly enhance job performance. The findings reveal that participants are making contributions to social responsibilities and sustainability. Regarding organizational contributions, they go beyond their expected duties, advocating for students as a source of pride and promoting equity and unity within the institution. On a social level, they participate in religious and community service activities and volunteer efforts. Finally, in environmental matters, they are active in promoting sustainability both at school and within their homes and communities. The study by Coelho & Menezes (2021) underscores the increasing focus on social responsibility and sustainability in various sectors. For example, universities have launched initiatives that motivate students and staff to engage in environmental sustainability, community service, and equity projects, thereby strengthening their ties to social and ecological well-being. These initiatives are also evident at ABC University.

Research participant 1 mentioned, "I constantly think about the support I can give the university's objectives since I was recognized for my potential; therefore, I must take initiative and contribute. When given tasks, I strive to perform to the best of my abilities and exceed expectations." These statements illustrate the participant's commitment to organizational contributions beyond what is anticipated. Additionally, research participant 7 remarked, "Essentially, in alignment with my advocacy for this particular.

Organizational Culture, a culture that embodies strong brand equity and unity within our university. An open committee with the field of experts formed by the President's office or HR should propose and develop an organizational culture and unity that can be explored through roundtable discussions or focus group sessions."

This participant contributes to the organization by advocating for equity and unity. The analysis reveals the third contributing factor to the mental health of the participants, which is social responsibility and sustainability contributions to society across organizational, social, and environmental realms. It emphasizes advocacy, volunteerism, equity, and commitment in their eagerness to fulfill their societal responsibilities. The research by Ioannou & Serafeim (2019) highlights how organizations contribute to sustainability through advocacy, equity, and volunteerism. Such initiatives advance social well-being and minimize environmental impacts, thereby enhancing both individual purpose and collective advantages.

The fourth theme found contributing to their mental health is a work-in-progress safe space at work and home. It can be reflected in the remarks of research participant 6: "Yes, I am in a good place. I have no complaints about my campus. Yes, it can be improved. There are plenty of opportunities available. Perhaps openness and communication are important, especially when conflicts arise. The openness and sense of bonding among us are wonderful. In the workplace, it seems we only need cooperation and teamwork; that might be sufficient because transparency is unlikely to happen anymore. It might be beneficial to conduct sessions like these, training focused on psychological aspects for capacity building. People don't know everything about all aspects."

The leadership at ABC University plays a crucial part in promoting avenues for transparent communication. They should be accessible and hold regular check-ins to boost teamwork and collaboration, as well as establish anonymous feedback channels. They also have vital responsibilities in advancing mental health initiatives by increasing awareness through the development of programs that provide psychoeducation, workshops, and training sessions. Furthermore, the availability of counseling services and collaborations with mental health experts demonstrate an organization's dedication to the welfare of its employees (Elufioye et al., 2024).

Additionally, the participant expresses future hopes for safety by wanting to live independently, as articulated: "Yes ma'am, I think it can be improved because we are living with my relatives. It is better if you are on your own. It is different when you are in a separate place. In terms of the workplace, my skills will be enhanced because in admin, there's a lot to do, as there are times, I do not know I am knowledgeable and am not sure if I do it right. More training, maybe. More support from the admin. More support so that we can learn more. We cannot do everything, but if we are skilled enough, we can do the work (e.g., impact assessment). We need support from the university in terms of health services, including mental health, to ease pressure, to ease the inside of the people who are overwhelmed."

The statements reflect the participant's desire for safety through independent living with relatives and increased support from the administration to enhance skills and health program assistance. The analysis indicates that participants are still in the process of being in a haven at home, work, or within the community. They experience emotional and psychological safety when they can prioritize family and have a supportive work environment. By fostering cooperation, teamwork, responsive community leaders, open communication, living independently, and providing administrative support, training in competencies, and activities focused on psychological well-being, they can feel secure at home, in their jobs, and within their communities. According to findings by Farooq et al. (2019) and Gilbert (2019), creating environments where individuals feel supported personally and professionally can enhance overall mental health, productivity, and satisfaction.

Housing factors have been recognized as a social determinant affecting mental health. The challenge of independent living has arisen due to the ongoing increase in housing costs. This situation causes delays in homeownership and leads to more families sharing homes, which has been linked to negative mental health outcomes (Seo & Park, 2021). Therefore, housing could be a program that ABC offers to its employees.

Furthermore, previous studies indicate that providing autonomy through flexible work arrangements is a key aspect of comprehensive employee well-being initiatives. These arrangements may include remote work, flexible hours, and compressed workweeks. Flexible scheduling allows employees to adjust their work hours to suit personal needs, family responsibilities, or individual preferences. This strategy empowers employees to utilize their time wisely, alleviating stress and promoting a healthier integration of work and life, ultimately enhancing job satisfaction and overall well-being (Elufioye et al., 2024). Organizations should incorporate advanced training methods using digital tools, address both technical and interpersonal skill gaps, cultivate a supportive organizational culture backed by leadership commitment, leverage incentives, and implement thorough evaluation processes to achieve sustainable competency development and maintain competitiveness. The findings offer practical recommendations for closing the competency gap and promoting employee growth in the digital era.

The fifth theme that contributes to mental health among employees is the workplace dynamics. Research participant 8 mentioned that inefficiencies arise in the workplace due to sluggish processes, stating, "Since we are part of the government, the processes take time. At times, I just come to terms with it. Transparency is essential, even when the pace is slow. Due to our auditing responsibilities, we adhere to many ISOs and lengthy procedures. Therefore, I accept this reality, as there are justification letters that validate my actions. We must clarify the processes to enhance service quality. This will foster tranquility and unity among us. Our organization is not yet perfect. We still have room for improvement, and we are in the process of benchmarking. We need to support our university by fulfilling our respective roles, whether that be

through cooperation or solidarity/unity.” These remarks illustrate that every organization has its shortcomings. Being a government entity inherently slows down processes because of the pressing need for transparency dictated by regulatory requirements. Nonetheless, the participant emphasizes the importance of effective communication, collaboration, unity, and learning from other institutions to maintain high-quality services for the employees at ABC University.

The qualitative analysis reveals that, like other organizations, ABC University exhibits positive and negative practices and cultural dynamics. Mental Health Issues and Practices Issues in the Workplace (2024) indicate that experiencing both types of environments can affect employees' overall well-being, possibly leading to conditions such as burnout, anxiety, and depression. The relationship between positive and negative experiences in the workplace, particularly when faced with stressors like workload or interpersonal conflicts, highlights the intricate nature of mental health in the workplace. The research of Glass (2023) discussed that workplace dynamics involve positive and negative practices. Cultures with a positive environment, supported by strong leadership, clear communication, and acknowledgment of employee contributions, can boost satisfaction, productivity, and retention. On the other hand, challenges like conflicts, ambiguous objectives, or a lack of inclusivity can diminish morale and elevate turnover, which may ultimately affect the organization in general when not addressed.

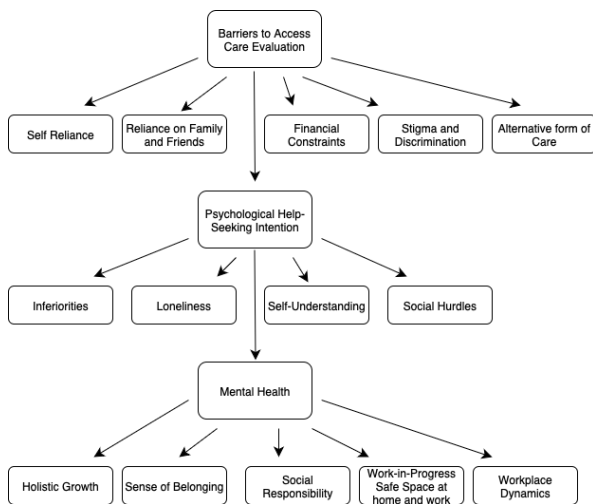


Figure 2. Framework for the Barriers to Access Care Evaluation, Psychological Help-Seeking, and Mental Health among ABC University Personnel (Santiago, 2024).

As shown in Figure 2, the themes corresponding to each of the three variables are presented. The themes identified regarding barriers to accessing care include financial constraints, stigma and discrimination, self-reliance, reliance on family and friends, and alternative forms of care. Regarding the intention to pursue counseling, the identified themes encompass personal and social inferiorities, loneliness, self-understanding, and relationship challenges. Finally, concerning employees' mental health, the themes found include holistic growth, sense of belonging, social

responsibility, and work-in-progress safe space at home and work, and workplace dynamics.

IV. RECOMMENDATIONS

1. The results of the study can be utilized as a reference in the development of the mental health policy and program of the university based on the three variables of interest: barriers to access care evaluation, psychological help-seeking, and mental health.
2. Since family is the most contributing factor to the emotional well-being of university personnel, it is highly recommended to craft workplace policies that promote flexibility, family support, and other programs and activities that will foster balance both in their personal and professional life.
3. In terms of psychological aspects, counseling and seminar programs may be beneficial to deal with their personal and social hurdles and self-growth. The university may facilitate collaborative research to strengthen the organizational culture of oneness despite having different campuses.
4. In addition to oneness, social belonging, social responsibility, and workplace dynamics can be included in the variables of interest. These variables can also be the focus of mental health policies and programs customized for their social well-being.
5. Lastly, to conduct a study of the same variables for the Guest Lecturers and Job Order employees of the university as input for the final Mental Health Policy and Program of the university.

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