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Students' Mental Health Challenges and Coping Mechanisms: Basis for A Mental Health Wellness Intervention Program

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Abstract

This study was conducted to determine the mental health challenges encountered by Junior High School Students of Saint Anthony's College of Sta, Ana, Cagayan Incorporated as well the coping mechanisms they have adopted to address their mental health problem. Results of the study revealed that in terms of the socio-economic profile of the respondents, their mean age is 14 years old, all are still single and that majority are females, first-born among siblings, reside in rural areas whose parents are mostly college graduates and are employed in service and sales and agriculture, forestry and fishery works. As to ICT gadgets available for use by the respondents, majority of them have mobile phones, computers and stable/strong internet connectivity via mobile data. Generally, the respondents seldom experienced mental health challenges. However, anxiety and trauma-related disorders were mental challenges experienced by the respondents with highest weighted means. To cope with the mental health challenges that they have encountered, taking medicines and relaxing were adopted to ease them from their anxiety and trauma-related disorders. Praying, eating well, bonding with pet, and time management were resorted to address their personality, eating, mood and school-related disorders.

Keywords: *Mental health, Coping Mechanisms, Students, Challenges, Intervention Program*

Introduction

Today, more than ever, mental health remains a medical concern of people and countries in the world. During the COVID 19-pandemic in March of 2020, mental health was a priority concern of all, most especially to young adolescents. However, even with this post-pandemic period, mental health remained not just a medical issue, but also a development issue in the education sector,

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Mental health which concerns every living individual in all segments of the society is generally related to the health and functioning of the mind. It relates to a person's condition with regard to his psychological and emotional well-being; how he adjusts to his environment and how he deals with ordinary stress of everyday life.

The World Health Organization (WHO) conceptualizes mental health as a state of well-being in which an individual realizes his or her own abilities can cope normal stresses of life, can work productively and truthfully and is able to make a contribution to his or her community. Talking about mental health helps improve our communities by making it more acceptable for those suffering mental illnesses to seek help, learn to cope and get on the road to recovery. In addition mental health is just not about mental illnesses. It's also about maintaining a positive state of well-being.

Given this, it is an undeniably fact that the most likely to encounter mental health challenges are the young minds due to inadequate capability on coping mechanisms as they transition from one stage of growing-up to another and this is attributed to different factors such as state of emotions, new environment, knowledge and awareness on handling mental health issues, including discriminations they may have encountered due to their ethnicity and unique personality.

Internationally, students' mental health is highlighted as a major public health challenge. Their life is known to be stressful that causes them to be vulnerable with mental distress which eventually reduces their quality of life, academic achievement, physical health, and satisfaction which schools must be fully aware of. (Stallmann, 2008; Storrie et al., 2010).

Mental health as defined by the World Health Organization is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Mental health is a basic human right. And it is crucial to personal, community and socio-economic development.

Mental health is more than the absence of mental disorders. It exists on a complex continuum, which is experienced differently from one person to the next, with varying degrees of difficulty and distress and potentially very different social and clinical outcomes.

Mental health conditions include mental disorders and psychosocial disabilities as well as other mental states associated with significant distress, impairment in functioning, or risk of self-harm. People with mental health conditions are more likely to experience lower levels of mental well-being, but this is not always or necessarily the case.

Furthermore, mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Mental and physical health are equally important components of overall health. For example, depression increases the risk for many types of physical health problems, particularly long-lasting conditions like diabetes, heart disease, and stroke. Similarly, the presence of chronic conditions can increase the risk for mental illness. (Center for Disease and Prevention, 2023)

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Talking about mental health helps improve communities by making it more acceptable for those suffering from mental illnesses to seek help, learn to cope, and get on the road to recovery. In addition, mental health is not just about mental illnesses.

It's also about maintaining a positive state of well-being. Good mental health means being generally able to think, feel and react, but if one goes through a period of poor mental health, one must find a way to cope with avoiding any unnecessary thing as bad as physical illness or even worse.

Considering the various definitions of 'Mental Health,' Centres of Disease Control and Prevention (CDC) attempted and arrived at a comprehensive description of 'Mental Health.' They stated, 'Mental Health' is having (1) our mental, spiritual, and social well-being; (2) an impact on how we think, feel, and deal; (3) an essential role at all stages of life; (4) thoughts and desires; (5) early hardships in life, including such trauma or a history of violence (CDC,2021). Thus, mental health must always be given attention, especially to the indigenous learners because they are not that open in the society for they fear being rejected, ignored, and thrown away.

Mental health problems have been found adversely affecting student's energy level, concentration, dependability, mental ability, and optimism, hindering their performance in their studies. Mental health is linked to a person's whole personality. Thus, the most essential role of school and education is to protect students' mental health. Physical fitness is not the only indicator of good health. Rather, it is a technique of improving the student's mental and moral wellness.(WHO, 2021)

Therefore, it is essential to investigate the status of the students of Saint Anthony's College of Sta. Ana, Cagayan, Incorporated at Sta. Cruz, Sta. Ana, Cagayan particularly on the mental health challenges they are experiencing. Their feeling of belongingness to the school community while enjoying their privileges are vital factors in determining their mental health stability that will eventually lead to their future success not only in their education but the quality of life they are heading to. This study will further give insights to the state on the improvement of policies and intervention programs catering the students.

Statement of the Problem

This study investigated the mental health challenges and coping mechanisms of the Junior High School students of St. Anthony's College of Sta. Ana, Inc. as basis for crafting a mental wellness intervention program in the post-pandemic period.

Specifically, it sought answers to the following:

1. To what extent have the respondents experienced mental health challenges along:

a) Mood Disorders
b) Anxiety Disorders
c) Personality Disorders
d) Eating Disorders
e) Trauma-related Disorders
f) School-related Disorders

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2. What coping mechanisms are adopted by the respondents along with their mental health challenges?
3. What proposed intervention program can be formulated from the findings of the study?
4. What is the assessment of respondents and experts on the functionality and acceptability of the intervention program?

Conceptual Framework

The theoretical orientation for this study was cognitive developmental theory by Piaget and sociocultural cognitive theory by Vygotsky. Piaget proposed that individuals actively construct their understanding of the world as they go through four stages of cognitive development and that development is a function of culture and social interaction. Vygotksy's theory emphasizes how culture and social interaction guide cognitive development. This means that knowledge is obtained collaboratively, through interaction with others and the culture in which a person lives. Considering both of these theories, an adolescent has many factors that determine what type of person he or she will be. Strong mental health support in a school setting is an additional, necessary protective factor in an adolescent's growth and cognitive development. School systems can be an extension of the family and have a strong influence on the student's success.

Research Paradigm

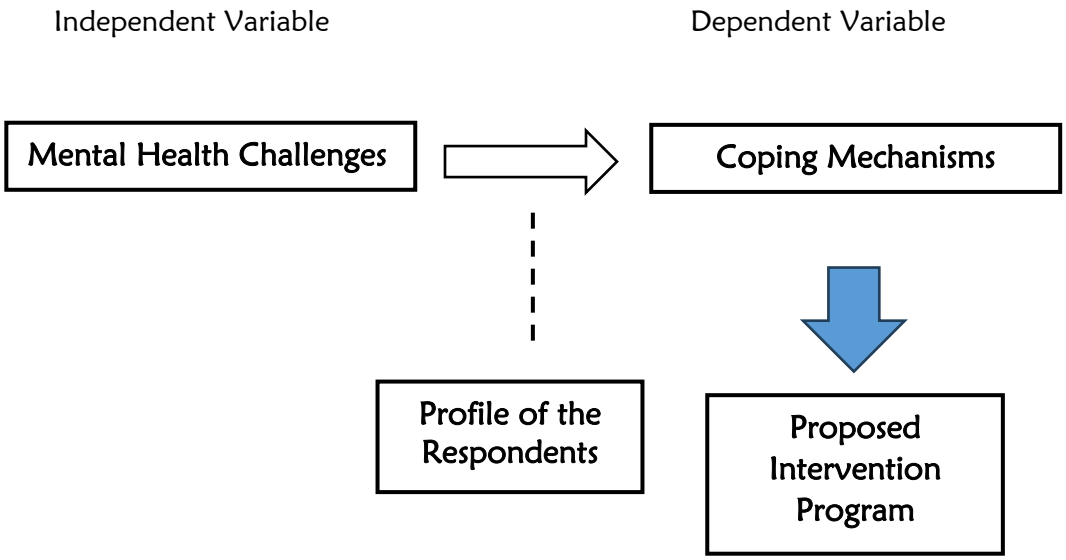

Figure 1. The Framework of the Study

The research paradigm provides a helpful way to understand the mental health challenges and coping mechanisms of the students of Saint Anthony's College of Sta. Ana, Cagayan, Incorporated at Sta. Cruz, Sta. Ana, Cagayan. The profile of the respondents may serve as moderator variable as this may influence the respondent's experiences as to the many forms of mental healh

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challenges, be it a Mood Disorder, Anxiety Disorder, Personality Disorder, Eating Disorder, Trauma-related Disorder or a School-related Disorder. In addition, the coping mechanisms that the respondents may adopt could also vary based on their profile characteristics.

Research Methodology

Research Design

The descriptive research design was used in the study. The profile of the respondents, the mental health challenges and their coping mechanisms to the mental health challenges they have experienced were investigated and described.

Locale of the Study

The study was conducted at Saint Anthony's College Incorporated, located at Sta. Cruz, Sta. Ana, Cagayan. Saint Anthony's College of Sta. Ana, Cagayan, Inc., formerly St. Anthony's Academy, derives its basic reason for existence from the basic Christian Message, "LOVE GOD, LOVE YOUR NEIGHBOR." This educational institution in the farthest north of the archipelago has survived more than five decades to maintain its mission as evangelizing arm of the Church through quality education.

Respondents of the Study

The respondents of this study were two hundred fifty-six (256) junior high school students who are enrolled for the S.Y. 2023-2024. Slovin's formula was used in determining the sample size per grade level. Stratified sampling was used in selecting the respondents.

Respondents	Population Size	Sample Size
Grade 7	120	56
Grade 8	155	72
Grade 9	145	64
Grade 10	125	64

Research Instrument

A structured questionnaire was used as the primary data gathering tool . The questionnaire consisted of three parts. Part I of the research instrument elicited information about the respondents' profile such as their age, sex, place of residence, civil status, sibling order, family/household size, parents' educational attainment, parents, occupation, availability of ICT, and internet connectivity. Part II gathered data on how often the junior high school students experienced mental health challenges which may be categorized as either Mood Disorders, Anxiety Disorders, Personality Disorders, Eating Disorders, Trauma-related Disorders, School-related Problems. On the other hand, Part III of the questionnaire elicited the coping mechanisms of the respondents along the different mental health disorders that they have identified and experienced during the pandemic.

Data Gathering Procedures

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A written permission to conduct the study and to float questionnaires was sought by the researcher from the College President and to the Principal of the Basic Education Unit. Upon approval by the College President, data gathering from the respondents commenced and was was personally administered by the researcher. Informed consent from the respondents was sought. The researcher requested the respondents during their free time in order to facilitate the gathering of data, and assure the confidentially of the gathered data from the respondents. After collecting the data, the researcher with the help of statistician tabulated and tallied the survey.

Statistical Treatment of Data

Descriptive statistics such as frequency counts, percentages and weighted means were used in the analysis of data in order to answer the research questions. The quantitative data was organized, categorized, interpreted and analyzed.

A five-point Likert scale was used in the analysis of mental health challenges experienced by the respondents as well as the coping mechanisms they have adopted. The scale and descriptive interpretation were as follows:

Scale	Interval	Descriptive Interpretation
1	1.0-1.79	Never
2	1.80-2.59	Seldom
3	2.60-3.39	Sometimes
4	3.49-4.19	Often
5	4.20-5.0	Always

Results

Table 2.1. Extent of Mental Health Challenges along Mood Disorders Experienced by the JHS Students

Mental Health Challenges MOOD DISORDERS	Weighted Mean	Adjectival Value
1.Major depression	2.78	Seldom
2. Dysthymia	1.86	Seldom
3. Bipolar disorder	1.76	Never
4.Mood disorder related to another health condition	1.33	Never
5.Substance-induced mood disorder	1.09	Never
OVERALL MEAN	**1.76**	**Never**

Data on Table 2.1 reveals that the respondents were "Never" challenged by mood disorders as presented by the over-all mean of 1.76. However, among the manifestations of mood disorders, the data significantly shows that major depression was "Sometimes", and Dysthymia was

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"Seldom" encountered by the respondents as revealed by weighted means of 2.78 and 1.86, respectively.

Depressive disorder , also known as depression, is a common mental disorder. It involves a depressed mood or loss of pleasure or interest in activities for long periods of time. Depression is different from regular mood changes and feelings about everyday life. It can affect all aspects of life, including relationships with family, friends and community. It can result from or lead to problems at school and at work. People who have lived through abuse, severe losses or other stressful events are more likely to develop depression. Women are more likely to have depression than men. (http:myclevelandclinic.org)

Table 2.2. Extent of Mental Health Challenges along Anxiety Disorders Experienced by the JHS Students

Mental Health Challenges ANXIETY DISORDERS	Weighted Mean	Adjectival Value
1.Generalized Anxiety	2.67	Sometimes
2. Panic Disorder	2.37	Seldom
3. Agoraphobia	2.21	Seldom
4. Specific Phobias	2.53	Seldom
5. Obsessive-Compulsive Disorder	2.13	Seldom
6. Post-traumatic stress Disorder	2.51	Seldom
7. Social Phobia	2.70	Sometimes
OVERALL MEAN	**2.44**	**Seldom**

Data on Table 2.2 shows that generally, the respondents were "Seldom" challenged by anxiety disorders as presented by the over-all mean of 2.44. However, among the manifestations of anxiety disorders, the data significantly shows that general anxiety and social phobia were "Sometimes" encountered by the respondents as revealed by weighted means of 2.67 and 2.70, respectively.

Generalized anxiety disorder is characterized by persistent, excessive, and unrealistic worry about everyday things. This worry could be multifocal such as finance, family, health, and the future. It is excessive, difficult to control, and is often accompanied by many non-specific psychological and physical symptoms (https://www.ncbi.nlm.nih.gov). Among teachers, this mental health challenge on general anxiety has been observed and that manifestations came in the form of restlessness, a sense of fear and difficulty concentrating on their lessons.

On the other hand, social phobia was also sometimes experienced by them. Social phobia is a type of anxiety disorder where people who have social phobia experience extreme and persistent anxiety associated with social or performance situations. A person with social phobia experiences anxiety in situations where they are likely to be scrutinized. To the students, some negative experiences in their lives such as teasing, bullying, rejection, ridicule or humiliation as well as events

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in their life like family conflict, trauma or abuse may have caused them to have experienced this social phobia disorder.

Table 2.3. Extent of Mental Health Challenges along Personality Disorder Experienced by the JHS Students

Mental Health Challenges PERSONALITY DISORDER	Weighted Mean	Adjectival Value
1. Paranoid	2.23	Seldom
2. Schizoid	2.03	Seldom
3. Schizotypal	2.09	Seldom
4. Antisocial	1.43	Never
5. Histrionic	1.95	Seldom
6. Borderline	2.17	Seldom
7. Narcissistic	1.91	Seldom
8. Avoidant	2.29	Seldom
9. Obsessive-compulsive	2.02	Seldom
10. Dependent	2.32	Seldom
OVERALL MEAN	**2.04**	**Seldom**

Data on Table 2.3 presents that the respondents were "Seldom" challenged by personality disorders as presented by the over-all mean of 2.04. However, among the manifestations of personality disorders, the data significantly shows that antisocial was "Never" encountered by the respondents as revealed by weighted means of 1.43.

Personality is vital to defining who we are as individuals. It involves a unique blend of traits including attitudes, thoughts and behaviors as well as how we express these traits in our interactions with others and with the world around us. Literature points out that personality disorders may cause distorted perceptions of reality, abnormal behaviors and distress across various aspects of life, including work, relationships and social functioning. Additionally, people with a personality disorder may not recognize their troubling behaviors or the negative effect they have on others.

The findings imply that the students were never anti-social in behavior. This finding is consistent with Filipino values, that is, Filipinos have been known to be sociable people. They respect the rights and feelings of others and they empathized.

The findings that the respondents seldom experienced personality disorders is a revelation that thinking, behavior, mood and relating to others was regarded as an insignificant mental health concern to the JHS. The religious activities of the school, the SAC values and also their possession and use of ICT gadgets may have contributed to their challenges to experience personality disorders during the pandemic and even in the post-pandemic periods. In addition, SAC administration

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through the Guidance Office and the faculty has been strictly monitoring behavior of their students particularly on students with strange, suspicious or unpredictable behaviors so that necessary guidance and counselling sessions be given to such students.

Table 2.4. Extent of Mental Health Challenges along Eating Disorders Experienced by the JHS Students

Mental Health Challenges EATING DISORDER	Weighted Mean	Adjectival Value
1. Dieting	2.32	Seldom
2. Binge eating	1.89	Seldom
3. Purging	1.23	Never
4. Excessive exercise	1.79	Never
5. Body image	2.33	Seldom
6.Change in clothing style	2.60	Seldom
7. Social withdrawal	2.13	Seldom
OVERALL MEAN	**2.04**	**Seldom**

Data on Table 2.4 reveals that the respondents were "Seldom" challenged by eating disorders as presented by the over-all mean of 2.04. Dieting, binge eating, body image, change in clothing style and social withdrawal were seldom experienced by the respondents. However, among the manifestations of eating disorders, the data significantly shows that purging and excessive exercise were "Never" encountered by the respondents as revealed by weighted means of 1.23 and 1.79, respectively.

The findings generally imply that the respondents were not significantly challenged with eating disorders. It further implies that they are healthy or body/personality conscious as young adolescents. Those significant few who may have experienced this eating disorders may have had food obsession or limited food intake as an unhealthy way of coping with painful emotions and feelings.

Clare Knight (2023) emphasized that eating disorders are a type of serious mental health condition characterized by severe disturbances in eating behaviors and related thoughts and emotions. Typically, people with ED develop an unhealthy preoccupation with food and body size, weight or shape. Moreover, eating disorders are caused by several complex factors including genetics, brain biology, personality, cultural and social ideals and mental health issues.

Table 2.5. Extent of Mental Health Challenges along Trauma-Related Disorder Experienced by the JHS Students

Mental Health Challenges TRAUMA-RELATED DISORDER	Weighted Mean	Adjectival Value

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1. Re- experiencing the trauma	2.30	Seldom
2. Repetitive memories	2.48	Seldom
3. Nightmares	2.41	Seldom
4. D isturbing thoughts	2.57	Seldom
5. Extreme distress	2.42	Seldom
OVERALL MEAN	**2.44**	**Seldom**

Data on Table 2.5 presents that the respondents were "Seldom" challenged by trauma-related disorders as presented by the over-all mean of 2.44. It further shows that among the manifestations of trauma-related disorders, the data significantly shows that disturbing thoughts has the highest weighted means of 2.57. However, generally, the data implies that this problem is not very significant to the respondents. It is suspected that the post-pandenic period feelings bring few respondents to some disturbing thoughts most especially that effects of climate change such as extreme heat usually made them adjust to the teaching and learning processes of blended and/or high breed learning systems of the school, aside from the influence brought about by this digital age.

Trauma and stressor-related disorders are a group of emotional and behavioral problems that may result from childhood traumatic and stressful experiences. According to John W. Barnhill (2023), trauma- and stressor-related disorders are unusual because they are grouped by apparent etiology: all of these disorders develop after exposure to a traumatic or stressful event. They are often discussed in the context of anxiety disorders, but the trauma- and stressor-related disorders may present with dysphoria, irritability, dissociation, substance use, or insomnia in addition to (or instead of) anxiety.

Table 2.6. Extent of Mental Health Challenges along School-Related Disorders Experienced by the JHS Students

Mental Health Challenges SCHOOL -RELATED DISORDERS	Weighted Mean	Adjectival Value
1. Lack of knowledge and skills	2.48	Seldom
2. Inadequate learning materials	2.41	Seldom
3. Lack of or no internet	2.16	Seldom
4. Inability to learn from modules	2.21	Seldom
5. Poor quality of learning materials	1.78	Never
6. Difficulty to learn using online platforms	2.33	Seldom
7. Financial problem	2.23	Seldom
8. Difficulty to communicate	2.12	Seldom

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9. Difficulty to balance school activities with household activities	2.90	Sometimes
OVERALL MEAN	**2.29**	**Seldom**

Data on Table 2.6 shows that the respondents were "Seldom" challenged by school-related disorders as presented by the over-all mean of 2.29. This finding implies that the respondents can easily cope with the demands of teaching and learning processes and requirements of the school. It is assumed that those few respondents who have experienced some problems on school-related activities are those who come from poor families, from remote or far-flung barangays and those with no or poor/very unstable internet connectivity. Because of these reasons, they find difficulty to cope with academic activities of the school.

However, among the items on school-related disorders, the data significantly shows that difficulty to balance school activities with household activities was "Sometimes" encountered by the respondents as revealed by weighted means of 2.90. It can be deduced from this findings that students who come from poorer families are still demanded by their parents to perform household chores like cleaning, washing of dishes and clothes, taking care of younger siblings and even helping in the farm compared to the non-poor children. Hence, the difficulty to manage their time for school- related activities is bringing them to stressful conditons.

Table 2.7. Summary Table of Mental Health Challenges Experienced by Junior High School Students of SAC

Mental Health Challenges	Weighted Mean	Adjectival Value
Mood Disorders	1.76	Never
Anxiety Disorders	2.44	Seldom
Personality Disorders	2.04	Seldom
Eating Disorders	2.04	Seldom
Trauma-Related Disorders	2.44	Seldom
School-Related Disorders	2.29	Seldom
OVER ALL MEAN	**2.17**	**SELDOM**

Table 2.7 displays the summary table of mental health challenges experienced by the Junior High School Students with a 2.17 over-all mean. Anxiety disorders and Trauma-related disorders, however, displayed the highest weighted means, of 2. 44 and 2.44, respectively. As mentioned in earlier findings, some negative expeiences in their lives such as teasing, bullying, rejection, ridicule or humiliation as well as events in their life like family conflict, trauma or abuse may have caused them to experienced anxiety disorders. Moreover, their COVID-19 pandemic experiences may also explain traumatic- related disorders most especially if they have encountered loss of family members, relatives and friends and even experienced being positive of the COVID 19 virus in the past three years.

Table 3. Coping Mechanisms Adopted by the Junior High School Students along the different Mental Health Challenges

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MENTAL HEALTH CHALLENGES	COPING MECHANISMS	RANK
1. Mood Disorder	Bond with Pet	1
	Travel to Unwind	2
	Relaxing	3
2. Anxiety Disorder	Take Medicine	1
	Deep Breathing	2
	Seek Medical or Professional Advice	3
3. Personality Disorder	Pray	1
	Connerct with Supportive People	2
	Regular Exercise	3
4. Eating Disorder	Eat Well	1
	Seek Medical or Professional Advice	2
	Aroma Therapy	3
5. Trauma-Related Disorders	Relaxing	1
	Engage in Hobbies	2
	Pray	3
6. School-Related Problems	Time management	1
	Engage in Problem Solving	2
	Pray	3.5
	Socialize	3.5

Table 3 shows the coping mechanisms adopted by the respondents along the different mental health challenges. Under the mood disorder, bond with pet ranked first as their coping mechanism followed by travel to unwind and relaxing respectively. On anxiety disorders, taking medicines as directed by medical doctors ranked first as their coping mechanisms while deep breathing and seek medical or professional advice place second and third respectively. Pray, Connect with Supportive People, and Regular Exercise were the top 3 coping mechanisms applied by the respondents in experiencing personality disorder. The data further shows that respondents chose to eat well, seek medical advice, and aroma therapy to cope with mental challenges along eating disorder. Moreover, in Trauma Related Disorders, most of the respondents just do relaxing followed by engaging hobbies and praying to cope with it. Finally, in order to cope with School Related Problems, the respondents adopted to manage their time.

A Proposed Wellness Intervention Program

From the findings of the study on mental health challenges experienced by the Junior High School students of SAC, a proposed intervention program is forewarded in order to address

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mental health concerns to all students of SAC in the near future and most especially to institutionalized a Mental Wellness Program for the College.

ACTIVITY	OBJECTIVES	STRATEGIES	TIME FRAME	RESOURCES NEEDED	EXPECTED OUTPUT
Profiling of Students	To have organized documentation of junior high school students enrolled in the current school year To monitor students To gather pertinent and personal information among junior high school students necessary for future references	Data Collection through Student Individual Inventory Record Form Profiling Summarize, analyse and interpret the data collected	July 2024	Guidance Counselor, Teachers, and Students Inventory Form	Organized data on the profiling of students
Information Services	To provide the students with personal-social information that will help them have sound adjustment to the new phase of their life	Conduct orientation program for freshmen and transferees about the school rules and regulations and provide them tips to adjust well to the new social environment they are in	July 2024	Administrators, Guidance Counselor, Teachers, Staff, and Students Venue for the Orientation Program, Sound System, Laptop, LCD Projector	Familiarity of students about the school, school policies and regulations. Students' belongingness
Conduct Orientation on Mental Health Awareness: Mood Disorders Anxiety Disorders Personality Disorders Eating Disorders Trauma-Related Disorders	To increase the level of awareness among the students regarding the promotion of Mental Health	Lecture/Seminar/ Fora	Year Round	Guidance Counselor, Students	All students will participate

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School-Related Disorders					
Intensify activities that promote mental health/well-being: Stress Assessment Stress Management Seminars Team Building World Mental Health Day Mental Health Awareness Day Children's Mental Health Week Mental Health Awareness Week	To create a school environment that is aware of the importance of mental health through organizing activities that promote mental well-being among students.	Lecture/Seminar/ Fora	Year Round October 10 February 2 February 6-12 May 15-21	Guidance Counselor, Students	All students should learn basic techniques in managing stress All students must participate in strengthening their mental health

The table shows the proposed intervention program that can help students in their mental health well-being. It also shows the different activities such as profiling of the students in order to have records about them.Information services were also proposed so that upon entering the school, the students will be familiarized about the rules and regulations and also to provide them tips to adjust well in their new environment. Conduct orientation on mental health awareness and intensify those activities must also be considered to increase the level of awareness among the students regarding the promotion of mental health and at the same time, to create a school environment that is aware of the importance of mental health

Table 4. Level of Acceptability of the Proposed Mental Health Welness Interevention Program

Indicators	Description	Level of Acceptability				Weighted Mean	Interpretation
		4	3	2	1		
Comprehensiveness	All relevant concepts on mental health are covered.	7	3			3.7	Highly Acceptable
Suitability	The program is suited to the Junior High School Students.	8	2			3.8	Highly Acceptable
Time Frame	The duration of the program is reasonable.	8	2			3.8	Highly Acceptable

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Budget Requirement	The program can be implemented with minimal cost to the institution or the students	7	3			3.7	Highly Acceptable
Ease of Implementation	The program can be easily implemented.	7	3			3.7	Highly Acceptable
Comprehensiveness	All relevant concepts on mental health are covered.	7	3			3.7	Highly Acceptable
					OVER-ALL MEAN	**3.74**	**Highly Acceptable**

Table 4 shows the level of acceptability of the proposed intervention program. There are 10 respondents composed of teachers, administrators, and guidance counselor who evaluated the program in terms of comprehensiveness, suitability, time frame, budget requirement, and ease of implementation. It reveals that all the indicators and the intervention program is highly accepted.

Discussions

This study investigated the mental health challenges and coping mechanisms of the Junior High School students of St. Anthony's Collefe of Sta. Ana, Inc. as basis for crafting a mental wellness intervention program in the post-pandemic period. The study described the socio-economic profile of the respondents in terms of their age, sex, grade level, civil status, place of residence, distance of residence to school, sibling order, family household size, parent's highest education, parent's occupation, availability of ICT gadgets at home, internet connectivity, It also determined the extent the respondents experienced mental health challenges as regards to Mood Disorders, Anxiety Disorders, Personality Disorders, Eating Disorders, Trauma-related Disorders and School-related Disorders and how the respondents coped with mental health challenges they have experienced. From the results of the study, a mental health Wellness intervention was proposed.

The descriptive research design was used in the study. It was conducted at Saint Anthony's College Incorporated, located at Sta. Cruz, Sta. Ana, Cagayan where two hundred fifty-six (256) junior high school students were enrolled for the S.Y. 2023-2024 served as respondents and were chosen using stratified sampling as method. Moreover, a structured questionnaire was the primary data gathering tool and descriptive statistics such as frequency counts, percentages, ranks and weighted means were used in the analysis of data in order to answer the research problems.

Profile of the Respondents

Results of the study revealed that in terms of the socio- economic profile of the respondents, their mean age is 14 years old, all are still single and that majority are females, first-born among siblings, reside in rural areas whose parents are mostly college graduates and are employed in service, sales and agriculture, forestry and fishery works. As to ICT gadgets available for use by the respondents, majority of them have mobile phones, computers and stable/strong internet connectivity via mobile data.

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As to Mood Disorders, the results showed that major depression was the most experienced mood disorder with a weighted mean of 2.78 followed by dysthymia or the what they call irritable mood with a weighted mean of 1.86, and substance-induced mood disorder was never experienced among the junior high school students.

In terms of Anxiety Disorders, the most common experienced was social phobia with a weighted mean of 2.70, followed by generalized anxiety disorder, and the least experienced was obsessive-compulsive disorder with 2.13 weighted mean.

As to Personality Disorders, the findings implied that the students were never anti-social in behavior.

As to Eating Disorders, the results showed significant findings in change in clothing style of the students with a weighted mean of 2.60. Also, students do dieting or skipping meals when their mental health is not good. It also revealed that students never do purging or vomiting or using laxatives to rid the body of food since the weighted mean is 1.23.

On the extent of Trauma-Related Disorders, disturbing thoughts placed the most experienced disorder due to past traumas encountered by the students with a weighted mean mean of 2.57, followed by repetitive memories or flashbacks that makes it hard for the students to forget with a weighted mean of 2.48 and students also experience nightmares with 2.41 weighted mean.

On School-Related Disorders, the study revealed that students have difficulty to balance school activities with household activities with a weighted mean of 2.90. study also shows that lack of knowledge and skills was seldom experience by the students with a mean of 2.48. Lastly, students never experience poor quality of learning materials.

Generally, the respondents seldom experienced mental health challenges. However, anxiety and trauma-related disorders were mental challenges experienced by the respondents with highest weighted means. To cope with the mental health challenges that they have encountered, taking medicines and relaxing were adopted to ease them from their anxiety and trauma-related disorders. Praying, eating well, bonding with pet, and time management were resorted to address their personality, eating, mood and school-related disorders.

Conclusions

From the above findings, the study concluded the following:

In terms of the socio-demographic profile of the respondents, there are more female students than male and majority are from a far flung Barangays within the Municipality. As to sibling order, 43.4% of the respondents are the eldest that make them hard to balance school works from the household chores since they have so many responsibilities at home. On parents' educational attainment, majority of the respondents' parents, both mothers and fathers were College graduates. As to the availability of gadgets they have, almost all of the respondents have mobile phones unfortunately majority have an unstable or intermittent internet connectivity.

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In general, the Junior High School students of St. Anthony's College of Sta. Ana, Inc. at Sta. Ana, Cagayan are experiencing low levels of mental health challenges, however, anxiety and trauma-related disorders are seemingly significant experiences.Specifically, in terms of mood disorders, the respondents seldom experience major depression. On anxiety disorders, the study concluded that students experienced social phobia sometimes because of negative experiences in their lives such as teasing, bullying, rejection, ridicule or humiliation as well as events in their life like family conflict, trauma or abuse may have caused. As to personality disorders, the respondents were "Seldom" challenged by personality disorders and anti social was "Never" encountered by the respondents. In terms of eating disorders, the respondents were "Seldom" challenged by eating disorders. Dieting, binge eating, body image, change in clothing style and social withdrawal were seldom experienced by the respondents. However, among the manifestations of eating disorders, the data significantly shows that purging and excessive exercise were "Never" encountered by the respondents. As to trauma-related disorders, the respondents were "Seldom" challenged by trauma-related disorders and among the manifestations of trauma-related disorders, the most common encountered were disturbing thoughts. However, generally, the data implies that this problem is not very significant to the respondents. It is suspected that the post-pandenic period feelings bring few respondents to some disturbing thoughts. In terms of school-related disorders, the respondents were "Seldom" challenged by school-related disorders. This finding implies that the respondents can easily cope with the demands of teaching and learning processes and requirements of the school. It is assumed that those few respondents who have experienced some problems on school-related activities are those who come from poor families, from remote or far-flung barangays and those with no or poor/very unstable internet connectivity. Because of these reasons, they find difficulty to cope with academic activities of the school.

In terms of coping mechanisms adopted, taking medicines, relaxing, praying, eating well, bonding with pet, and time management were top coping mechanisms that they have adopted in order to address the different forms of mental challenges that they have experienced.

RECOMMENDATIONS

Based on the preceding findings and conclusions, the following recommendations were made:

The STUDENTS, It is important to acknowledge that learners are under a great deal of stress. Students frequently feel worried and tense, as a result, learners must have access to excellent care for their mental health. Counseling, therapy, and peer support groups are examples of such services. Access to these programs can help students cope with the stress of their high school years, as well as provide an enabling environment in which they can communicate their concerns and receive assistance and counsel.

The PARENTS, They must talk to their children at all times, and sufficient monitoring and direction must be provided. If their children are suffering any of these mental health difficulties, they should monitor these changes and seek expert care and support.

The SCHOOL, Should sustain to foster a positive campus atmosphere. This can be accomplished by encouraging students to participate in extracurricular activities and ensuring that students are acknowledged and encouraged by teachers. Students who feel a sense of belongingness to a group are more likely to feel included and supported, which can help lessen feelings of isolation or

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rejection. The institutionalization of a functional College-Wide Mental Health Wellness Intervention Program is much wanting.

The LOCAL GOVERNMENT UNITS, Ensure that health workers and services are available in every community, as well as to strengthen programs that assist young people, adults, and children who have experienced mental health challenges in overcoming stress, anxiety, depression, and other mental health conditions. By educating students about their psychological well-being, including the signs and symptoms of different mental health illnesses, they may raise awareness about the necessity of seeking treatment when necessary by conducting symposiums, seminars, and or fora. Furthermore, they can help lessen the stigma related to mental health illnesses, encouraging more learners to seek therapy when necessary.

As a general recommendation, this study must be replicated to all levels in the College- basic and higher education department and even other schools and to include also other variables like family characteristics, community characteristics, social media exposure and others in order to validate the findings of this study and to make the findings generalizable.

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