



Assessment of Mental Well-Being and Coping Strategies Among Employees of Government-Owned and Controlled Corporations (GOCCs) in Catanduanes

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ABSTRACT

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Mental well-being has become an urgent global and national concern, particularly in public sector workplaces where employees face increasing occupational stressors. Despite the enactment of Republic Act No. 11036 and related policy mandates, implementation gaps remain evident in Government-Owned and Controlled Corporations (GOCCs), especially in geographically isolated provinces such as Catanduanes. This study aimed to assess the mental well-being of GOCC employees in Catanduanes by examining their socio-demographic profile, identifying common workplace stressors,



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evaluating coping strategies, assessing the level of implementation of workplace and mandatory programs, and developing a mental health management framework. A descriptive research design was employed, utilizing a structured survey questionnaire administered to purposively selected GOCC employees in the province. Data were analyzed using descriptive statistical techniques. Findings revealed moderate levels of workplace stress, particularly related to workload, leadership practices, job security, and work schedules. Employees reported the use of both problem-focused and emotion-focused coping strategies; however, the implementation of mandated mental health and workplace programs was found to be moderate to limited. The study concludes that a localized, structured Mental Health and Wellness Support Program is necessary to strengthen institutional support systems, enhance employee resilience, and promote a healthier and more productive government workforce.

INTRODUCTION

Mental well-being has become a major global public health and workplace concern, particularly following the COVID-19 pandemic. Over one in eight people worldwide live with a mental health disorder, and mental illness remains a leading cause of disability (World Health Organization [WHO], 2022). Mental health conditions also result in an estimated US \$1 trillion in annual productivity losses (World Health Organization & International Labor Organization, 2022). Despite this burden, most countries allocate less than 2% of their health budgets to mental health, leaving many individuals without adequate care (WHO, 2022). These trends highlight the urgent need for stronger workplace mental health systems aligned with Sustainable Development Goal 3 (United Nations, 2023).

In the Philippines, the enactment of Republic Act No. 11036 or the Mental Health Act of 2018 marked a significant policy milestone (Republic Act No. 11036, 2018). Complementary measures such as DOLE Department Order No. 208, s. 2020 and Civil Service Commission guidelines mandate mental health programs in workplaces (Department of Labor and Employment, 2020; Civil Service Commission, 2021). However, implementation remains inconsistent. National data show that 17% of working Filipinos experience moderate to severe psychological distress, yet only a small proportion seek professional help (Department of Health & Philippine Statistics Authority, 2021). Compliance reports further indicate that fewer than 30% of government agencies have fully institutionalized mental health programs (Civil Service Commission, 2022).

In Catanduanes, a geographically isolated province frequently affected by natural disasters and infrastructural limitations, GOCC employees face unique

occupational stressors, including resource constraints and limited access to mental health services. Despite national directives, many GOCCs in the province lack structured wellness programs or formal mental health policies. Reports of burnout, absenteeism, and declining morale remain largely undocumented. Although national policies mandate workplace mental health programs, their implementation in provincial GOCCs—particularly remains limited. Employees continue to manage workplace stress without institutional support, and there is no existing empirical study assessing their mental well-being and coping strategies. This gap in both policy execution and research hinders the development of responsive and localized mental health interventions.

FRAMEWORK

This study was grounded in the Integrated Resource–Fit–Caring (IRFC) Theory, which synthesized Person–Environment Fit Theory, Job Demands–Resources (JD-R) Theory, Conservation of Resources (COR) Theory, Human Caring Theory, and the Transactional Theory of Stress and Coping. Collectively, these frameworks conceptualized employee mental well-being as the product of alignment between individual characteristics and workplace conditions, the balance between job demands and available resources, the protection and preservation of valued resources, the ethical responsibility of institutions to provide supportive environments, and employees’ cognitive appraisal and coping processes. Mental well-being was therefore understood as an emergent outcome of dynamic interaction among personal attributes, organizational structures, resource systems, institutional care, and adaptive coping.

Guided by the Input–Process–Output–Outcome (IPOO) model, the study operationalized the integrated theory by structuring socio-demographic characteristics, workplace stressors, and organizational support systems as inputs; relational analysis, assessment of program implementation, and evaluation of coping strategies as processes; and measured levels of mental well-being as outputs. These components culminated in a proposed context-specific Mental Health and Wellness Support Framework for GOCCs in Catanduanes, aimed at strengthening institutional resilience, enhancing resource alignment, and promoting sustainable employee well-being.

OBJECTIVES OF THE STUDY

The primary objective of this study was to assess the mental well-being of employees in Government-Owned and Controlled Corporations (GOCCs) in

the Province of Catanduanes and to develop a context-specific Mental Health and Wellness Support Framework. Specifically, the study aimed to: (1) determine the socio-demographic profile of GOCC employees in terms of age, sex, civil status, job position, length of service, work schedule, and religion; (2) identify the common workplace stressors affecting employees, including leadership styles, workload, time management, job security, organizational support, interpersonal relationships, financial concerns, and health and safety; (3) assess the level of implementation of workplace and mandatory mental health programs; (4) evaluate the coping strategies employed by employees in managing work-related stress; and (5) propose an evidence-based framework to strengthen mental well-being and institutional support systems within GOCCs.

METHODOLOGY

Research Design

The study employed a quantitative descriptive–correlational research design to examine the level of mental well-being among GOCC employees and to determine the significant relationships between socio-demographic characteristics and workplace stressors. This design was appropriate for describing existing conditions and statistically testing associations among the identified variables within the organizational context.

Instrumentation

Data were collected using a structured, researcher-developed survey questionnaire grounded in the Integrated Resource–Fit–Caring (IRFC) framework. The instrument consisted of sections on socio-demographic profile, workplace stressors, organizational support and program implementation, coping strategies, and mental well-being. Items were measured using a Likert-scale format to ensure quantifiable and comparable responses.

Respondents

The respondents were employees of selected Government-Owned and Controlled Corporations (GOCCs) in the Province of Catanduanes. Participants included personnel occupying various job positions with at least one year of service to ensure adequate exposure to organizational conditions and workplace demands.

Sampling

The study utilized purposive sampling to select respondents who met the

inclusion criteria, particularly regular employees with sufficient tenure in their respective institutions. This approach ensured that participants possessed relevant experience to provide informed responses regarding workplace stressors and organizational practices.

Data Analysis

Data were analyzed using descriptive statistical techniques. Frequency, percentage, mean, and standard deviation were used to summarize the socio-demographic profile of respondents, the levels of workplace stressors, coping strategies, and the implementation of mandated programs. These statistical measures allowed for a systematic description of existing conditions and provided the empirical basis for developing the proposed mental health management framework.

AI Policy

The authors used AI-assisted tools, including ChatGPT by OpenAI and Grammarly during the preparation of this manuscript. These tools were utilized solely for language refinement, grammar checking, paraphrasing, and improving the clarity and organization of the manuscript.

RESULTS AND DISCUSSION

Socio-Demographic Profile of GOCC Employees

The socio-demographic characteristics of GOCC employees provided the foundation for interpreting their mental well-being and workplace conditions, offering essential context for identifying patterns and differences across respondents based on their backgrounds and job-related attributes.

Age

The age distribution shows that most GOCC employees are in the mid-career stage (25–44 years old), a period associated with heightened work responsibilities, career advancement pressures, and family obligations. This suggests that stress exposure is likely influenced by workload demands and work–life balance challenges. The presence of older employees indicates accumulated occupational exposure, which may enhance coping capacity but also increase the risk of long-term fatigue.

Table 1*Age*

Age Bracket	Frequency	Percentage
Below 25 years old	8	3 %
25 – 34	78	32 %
35 – 44	78	32 %
45 – 54	39	16 %
55 years old and above	39	16 %
Total	242	100 %

Mental health interventions in GOCCs should be age-responsive, prioritizing workload management and work–life balance support for mid-career employees while providing sustained wellness and health monitoring programs for senior personnel. Empirical evidence indicates that age significantly influences workplace mental well-being. Filipino employees in early and mid-career stages report higher levels of stress and burnout due to workload pressures and career advancement demands (Serra et al., 2022), while age differences are associated with variations in occupational strain and coping capacity, with older workers generally demonstrating stronger adaptive mechanisms (Andel et al., 2021).

Sex

The sex distribution of GOCC employees was nearly balanced, with 49% female and 51% male respondents, indicating equal representation within the workforce. The balanced composition suggests that both men and women are similarly exposed to organizational stressors; however, sex-based differences in stress perception and coping patterns may influence mental well-being outcomes. Women are generally more likely to report psychological distress linked to emotional burden and dual work–family roles, whereas men may experience stress associated with performance expectations and reduced help-seeking behavior due to social norms.

Table 2

Sex

Sex	Frequency	Percentage
Female	118	49
Male	124	51
Total	242	100

Mental health programs in GOCCs must adopt gender-responsive strategies that recognize differences in coping styles and stress expression while maintaining equitable and inclusive institutional support systems. Evidence shows that sex significantly influences workplace mental health outcomes. Women consistently report higher levels of psychological distress and emotional exhaustion in response to occupational stressors, while men are more likely to adopt problem-focused or avoidance coping strategies (Xue & McMunn, 2021). Gender differences are also evident in responses to workload and long working hours, with women demonstrating greater vulnerability to work-related mental strain (Chen et al., 2025). These findings reinforce the relevance of sex as a critical variable in examining stress and coping patterns among GOCC employees.

Civil Status

The majority of respondents were married (59%), followed by single employees (34%), while widowed and separated individuals comprised a small proportion (7%) of the sample. The predominance of married employees suggests that many GOCC workers balance professional responsibilities with family obligations, which may both buffer stress through emotional support and intensify strain due to dual-role demands. Single employees may rely more on peer networks and personal resilience, while widowed or separated individuals may experience additional emotional vulnerability linked to life transitions or reduced relational support.

Table 3*Civil Status*

Civil Status	Frequency	Percentage
Single	83	34
Married	142	59
Widowed	8	3
Separated	9	4
Total	242	100

Mental health initiatives in GOCCs should incorporate family-sensitive policies such as work–life balance programs and counseling services, while also ensuring accessible psychosocial support for employees who may lack strong partner-based support systems. Recent studies affirm that civil status plays a meaningful role in shaping mental well-being and stress experiences. Married individuals generally report better psychological outcomes due to partner-based emotional support and relational stability, which buffer occupational stress (Huntington et al., 2022). In workplace contexts, marital status has also been associated with differences in perceived stress and mental workload, with unmarried employees often reporting higher strain when social support systems are limited (Sinta & Dwiyantri, 2023).

Job Position

Only 3% of respondents identified as Manager/Chief, 30% as Rank-and-File, while a substantial 67% selected “No Answer,” indicating potential role ambiguity or employment classification uncertainty within GOCCs. Managerial roles carry heightened decision-making responsibility, accountability, and administrative pressure, increasing vulnerability to emotional exhaustion. Rank-and-file employees are more exposed to operational stressors such as workload demands and procedural rigidity. The large “No Answer” group suggests possible role ambiguity or employment insecurity, both of which are established psychosocial risk factors associated with stress and reduced well-being. A notable observation in Table 4 is that 67% of respondents selected “No Answer” under job position. This substantial non-disclosure suggests a potential issue beyond simple nonresponse. It may reflect role ambiguity, unclear employment classification, or fear of identification within a relatively small organizational setting. In bureaucratic institutions where hierarchical structures are pronounced, employees may hesitate to disclose their position due to perceived risks to confidentiality or concerns about managerial scrutiny.

Table 4
Job Position

Job Position	Frequency	Percentage
Manager/Chief	7	3
Rank and File	73	30
No Answer	162	67
Total	242	100

Mental health interventions must be role-sensitive and inclusive, addressing leadership strain, operational workload stress, and organizational role clarity. Policies promoting job definition transparency and equitable access to support systems are essential to reduce uncertainty-related stress. Job position significantly influences workplace mental well-being, as managerial roles involve greater decision-making demands and accountability, increasing psychological strain (Magnavita et al., 2021). The Job Demands–Resources model explains that high job demands across occupational levels elevate burnout risk when resources are insufficient (Schaufeli, 2021), and exposure to workplace stressors varies according to role-related pressures (Xue & McMunn, 2021).

Length of Service

The largest group of respondents (29%) had more than 10 years of service, followed by employees with 7–10 years (20%), while 35% had three years or less, indicating a workforce composed of both long-tenured and relatively new employees. Long-tenured employees may develop stronger role proficiency and coping mechanisms but are also vulnerable to cumulative stress and burnout due to prolonged exposure to organizational demands. Conversely, short-tenured employees may experience heightened stress related to role ambiguity, adjustment challenges, and limited familiarity with institutional systems.

Table 5
Length of Service

Length of Service	Frequency	Percentage
Less 1 year	40	16
1 – 3 years	46	19
4 – 6 years	38	16
7 – 10 years	48	20
More than 10 years	70	29
Total	242	100

Mental health programs should adopt tenure-sensitive strategies, including mentoring and onboarding support for new employees, and workload management and sustained psychosocial support for long-serving personnel. Length of service significantly influences workplace mental well-being. Longer-tenured employees often develop stronger coping mechanisms and engagement, though prolonged exposure to job demands may increase burnout risk (Harju et al., 2024). Conversely, shorter-tenured employees are more vulnerable to stress due to adjustment challenges and limited organizational familiarity (Magnavita et al., 2021).

Work Schedule

Most respondents (61%) worked regular day shifts, while smaller groups were assigned to night shifts (10%), rotating shifts (12%), compressed workweeks (11%), and flexible schedules (6%). Day-shift employees generally benefit from stable routines and better alignment with natural circadian rhythms, which support healthier sleep and social functioning. In contrast, night and rotating shift workers face disrupted sleep cycles, reduced recovery time, and greater psychological strain, increasing vulnerability to anxiety, depression, and burnout. Extended or irregular schedules may compound stress exposure over time.

Table 6
Work Schedule

Work Schedule	Frequency	Percentage
Day shift (8 – 5)	148	61
Night Shift	25	10
Rotating shift	28	12
Compressed workweek	27	11
Flexible Hours	14	6
Total	242	100

Mental health interventions should be schedule-sensitive, incorporating sleep hygiene programs, fatigue management strategies, and targeted psychosocial support for employees working night, rotating, or compressed shifts. Nonstandard work schedules have been consistently linked to increased stress and poorer mental health outcomes. Night shift work has been associated with reduced psychological well-being and greater emotional strain due to disrupted circadian rhythms and sleep disturbances (Li et al., 2024). Similarly, nonstandard schedules have been shown to elevate perceived work stress and negatively affect overall mental health (Wang et al., 2025), underscoring the role of work schedule as a significant determinant of employee stress and well-being.

Religion

The overwhelming majority of respondents (98.76%) identified as Roman Catholic, with minimal representation from other Christian denominations. The religious homogeneity suggests that many employees may draw on shared faith-based practices—such as prayer, spiritual reflection, and community belonging—as coping mechanisms during workplace stress. Spiritual beliefs may enhance meaning-making, emotional regulation, and resilience, although the impact of religious coping depends on whether it is adaptive or maladaptive.

Table 7
Religion

Religion	Frequency	Percentage
Roman Catholic	239	98.76
Protestant	1	0.41
Born Again	2	0.83
Total	242	100

Mental health initiatives in GOCCs may benefit from culturally and spiritually sensitive approaches that recognize faith as a coping resource, while ensuring support systems address both positive and negative forms of religious coping. Religious and spiritual coping has been linked to better stress regulation and psychological well-being. Positive religious coping is associated with improved emotional adjustment and reduced distress (Graça & Brandão, 2024), while spiritual practices have been shown to buffer work-related stress and enhance resilience (Wnuk, 2024). Additionally, evidence indicates that religiosity is generally related to better mental health outcomes and lower psychological strain (Skalski-Bednarz et al., 2022).

Common Experienced Stressors Affecting GOCC Employees in the Workplace Leadership and Management Styles as Stressor

Leadership and management style emerged as a key workplace stressor among GOCC employees, as supervisors significantly influence communication, decision-making, recognition, and the overall psychosocial climate. Since leadership behaviors directly affect mental well-being, this dimension provides insight into how managerial practices contributed to employees’ stress levels and coping responses.

Table 8
Leadership and Management Styles

Indicators	TWM	AI
1. Supervisory practices involve micromanagement.	2.40	S
2. tykes	2.24	S
3. Decision-making processes lack transparency.	2.25	S
4. Employee participation in organizational decisions is limited.	2.36	S
5. Feedback from supervisors is rarely constructive or supportive	2.33	S
6. Leadership practices show evidence of favoritism.	2.14	S
7. Employee contributions are frequently overlooked by management.	2.28	S
8. Supervisory communication lacks clarity and effectiveness	2.26	S
9. Respectful treatment from supervisors is not consistently observed.	2.17	S
10. Conflict resolution approaches are inadequate.	2.33	S
AWM	2.28	S
Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S)		
2.51 – 3.25 – Often (O) 1.00 – 1.75 – Never (N)		

The results showed that leadership-related stressors were sometimes experienced by GOCC employees (AWM = 2.28), indicating recurring but not constant concerns in managerial practices. Indicators such as micromanagement, unrealistic expectations, limited participation in decision-making, unclear communication, inadequate conflict resolution, and inconsistent recognition all fell within the “Sometimes” range, suggesting intermittent leadership gaps. Although not pervasive, these recurring issues may gradually erode trust, reduce morale, and increase psychological strain in bureaucratic environments where supervisory influence is strong. The findings imply that strengthening leadership competencies—particularly in transparent decision-making, inclusive governance, constructive feedback, and equitable treatment—is essential to reducing workplace stress and enhancing employee coping capacity and organizational resilience.

Research consistently shows that leadership style significantly influences employee stress and psychological well-being. Transformational leadership has been found to reduce burnout and emotional exhaustion, demonstrating its buffering effect against workplace stressors (Yuan et al., 2025). Similarly, positive leadership approaches are associated with greater psychological resilience and lower burnout levels among employees (Onan et al., 2025), while meta-analytic

evidence confirms that transformational leadership enhances overall psychological well-being across work settings (Kim & Cruz, 2022).

Workload as a Stressor

Workload emerged as a significant and recurring source of stress among GOCC employees (AWM = 2.47, Sometimes), with several indicators falling within the “Often” range. Employees frequently reported feeling overwhelmed (TWM = 2.86), engaging in constant multitasking (2.79), handling tasks beyond office hours (2.55), and managing responsibilities that exceeded manageable limits (2.54). Although some indicators such as tight deadlines and missed breaks were rated “Sometimes,” the overall pattern reflects sustained workload pressure, staffing constraints, and blurred work–life boundaries. These conditions may gradually contribute to emotional exhaustion, reduced coping capacity, and diminished morale.

Table 9
Workload

Indicators	TWM	AI
1. Assigned tasks exceed manageable limits.	2.54	O
2. Work responsibilities are frequently overwhelming.	2.86	O
3. Job demands require constant multitasking.	2.79	O
4. Overtime work is regularly required to complete tasks.	2.44	S
5. Work deadlines are consistently tight or unrealistic.	2.23	S
6. Insufficient time is allocated to complete assigned tasks.	2.34	S
7. Work responsibilities extend beyond office hours.	2.55	O
8. Staff shortages lead to uneven task distribution.	2.50	S
9. Tasks are not equitably distributed among team members.	2.29	S
10. Meal and rest breaks are frequently missed due to workload.	2.16	S
AWM	2.47	S
Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S)		
2.51 – 3.25 – Often (O) 1.00 – 1.75 – Never (N)		

The findings show the need for workload redistribution, realistic deadline setting, staffing reinforcement, and structured recovery time to protect employees’ mental well-being and organizational sustainability. Research shows that excessive workload is a major contributor to occupational stress. Higher workload increases work–life conflict and psychological strain (McNeill et al., 2025), while elevated

job demands, including workload intensity, are linked to increased job stress and reduced well-being (Karasek et al., 2023).

Time Management as Stressor

Time management challenges were sometimes experienced by GOCC employees (AWM = 2.20), indicating recurring but moderate pressures related to scheduling, interruptions, and prioritization. Employees reported difficulties such as disrupted schedules, task overload leading to delays, conflicting deadlines, and insufficient structured support. Although none of the indicators reached the “Often” range, the consistent “Sometimes” ratings suggest ongoing inefficiencies that may fragment attention, increase time pressure, and contribute to cumulative stress. These findings highlight the need for clearer task prioritization systems, structured planning support, and improved delegation practices to strengthen coping capacity and reduce time-related strain in GOCC workplaces.

Table 10
Time Management

Indicators		
1. Time constraints hinder efficient task completion.	2.27	S
2. Frequent interruptions interfere with time allocation.	1.96	S
3. Schedules are frequently disrupted by unplanned tasks or meetings.	2.28	S
4. Prioritization of duties is inconsistently practiced.	2.23	S
5. Structured time management support is lacking.	2.16	S
6. Long tasks and short deadlines conflict frequently.	2.19	S
7. Task overload leads to delayed outputs.	2.39	S
8. Extended working hours result from time mismanagement	2.16	S
9. Work tasks are not clearly scheduled or prioritized	2.14	S
10. Time-related stress is a recurring concern.	2.18	S
AWM	2.20	S
Legend: 3.26 – 4.00 – Always (A)	1.76 – 2.50 – Sometimes (S)	
2.51 – 3.25 – Often (O)	1.00 – 1.75 – Never (N)	

Research indicates that effective time management is closely linked to reduced stress and improved psychological well-being, whereas poor time management tends to exacerbate occupational strain. Adams and Blair (2019) found that individuals with stronger time management behaviors reported lower

levels of stress and emotional exhaustion, highlighting the role of organized planning in mitigating psychological strain. Similarly, Patzak and Gábor (2025) demonstrated that enhanced time management practices are associated with improved well-being and reduced stress outcomes across work and academic contexts, suggesting that skills such as prioritization and structured scheduling can serve as protective factors against time-related pressure.

Job Security as Stressor

Job security concerns were sometimes experienced by GOCC employees (AWM = 2.20), indicating intermittent but meaningful uncertainty regarding employment stability, promotion opportunities, and benefit disparities. Employees reported occasional apprehension about contract arrangements, restructuring, unclear career progression, and performance evaluations affecting retention. Although not frequent, these recurring concerns may gradually erode organizational trust, increase anxiety, and reduce long-term commitment.

Table 11
Job Security

Indicators	TWM	AI
1. Employment status creates uncertainty about job retention.	2.07	S
2. Job stability is negatively affected by contractual /arrangements.	1.99	S
3. Retrenchment or termination is perceived as a realistic threat.	2.14	S
4. Organizational restructuring contributes to feelings of insecurity.	2.21	S
5. Clarity regarding career progression and retention is lacking.	2.22	S
6. Tenure-based discrimination is evident in workplace policies.	2.22	S
7. Opportunities for promotion are uncertain or unclear.	2.28	S
8. Employment benefits vary based on employment classification.	2.34	S
9. Management does not address employee concerns regarding job permanence.	2.26	S
10. Performance evaluation outcomes impact job stability perceptions.	2.22	S
AWM	2.20	S

Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S) 2.51 – 3.25 – Often (O)

The findings highlight the need for transparent promotion systems, equitable benefits across employment classifications, and clearer communication regarding retention policies to strengthen employees' sense of stability and psychological safety. Research consistently identifies job insecurity as a significant workplace

stressor linked to adverse psychological outcomes. Employees who perceive threats to their job continuity report higher levels of anxiety, emotional strain, and reduced well-being (Abdul Jalil et al., 2023). Similarly, job insecurity has been associated with increased depressive symptoms and mental health risks, particularly among workers in unstable or precarious employment arrangements (Sultana et al., 2022). Evidence further shows that both perceived job loss and uncertainty about employment conditions negatively affect psychological well-being and work engagement (Pires, 2025).

Organizational Support as Stressor

Organizational support was sometimes experienced by GOCC employees (AWM = 2.26), indicating inconsistent access to mental health services, HR assistance, recognition systems, and work–life balance programs. Limited access to mental health services emerged as the most notable concern (Often), while other indicators such as unclear communication, insufficient resources, and weak supervisory support were reported intermittently. These recurring gaps suggest that although support structures exist, they are not consistently implemented or effectively communicated. Inadequate organizational backing may increase stress, reduce morale, and weaken employees’ coping capacity.

Table 12
Organizational Support

Indicators	TWM	AI
1. Access to mental health services is limited.	2.57	O
2. Assistance from Human Resources is difficult to obtain.	2.27	S
3. Support systems during personal or family crises are not available.	2.18	S
4. Opportunities for training and development are not consistently provided.	2.29	S
5. Employee achievements are not formally recognized.	2.08	S
6. Support programs for work-life balance are lacking.	2.33	S
7. Supervisors are perceived as unsupportive.	2.18	S
8. Organizational policies do not promote staff well-being.	2.18	S
9. Communication of support programs is unclear or inconsistent	2.24	S
10. Resources needed to perform job responsibilities are insufficient.	2.27	S
AWM	2.26	S

Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S)
2.51 – 3.25 – Often (O) 1.00 – 1.75 – Never (N)

The findings underscore the need for stronger institutionalized wellness policies, clearer communication systems, responsive HR services, and improved resource allocation to enhance psychological safety and employee resilience within GOCCs. This implication is supported by evidence showing that low perceived organizational support is associated with higher stress and burnout, whereas strong institutional backing reduces psychological strain and promotes well-being (Canboy et al., 2023; Zhang et al., 2024). Employees in high-stress profiles consistently report lower levels of organizational support (Fan & Fang, 2025), and insufficient institutional support has been linked to increased work–family conflict and emotional exhaustion (Andrade & Neves, 2022). These studies reinforce that strengthening organizational support mechanisms is essential to mitigating stress and improving employee resilience.

Interpersonal Relationships as Stressor

Interpersonal relationship challenges were sometimes experienced by GOCC employees ($AWM = 2.18$), indicating intermittent but meaningful relational stressors in the workplace. Conflicts, gossip, favoritism, limited peer support, and inconsistent communication were reported at moderate levels, suggesting that while not constant, these issues affected teamwork, trust, and psychological safety. Occasional experiences of workplace cliques, exclusion, and limited cross-department collaboration further indicate relational fragmentation that may contribute to stress accumulation.

Table 13
Interpersonal Relationships in the Workplace

Indicators	TWM	AI
1. Conflicts among co-workers occur frequently.	2.33	S
2. Gossip and unprofessional behavior are commonly observed.	2.27	S
3. Peer support is lacking during work challenges.	2.18	S
4. Favoritism or exclusion is present in team dynamics.	2.27	S
5. Cooperation within teams is inconsistent.	2.13	S
6. Open and respectful communication among staff is limited.	2.24	S
7. Workplace cliques contribute to a negative atmosphere.	2.13	S
8. Harassment or bullying behaviors are occasionally observed.	2.03	S
9. Collaboration between departments is difficult to establish.	2.05	S
10. Emotional support among employees is generally lacking.	2.17	S
AWM	2.18	S

Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S) 2.51 – 3.25 – Often (O)

These findings highlight the need for structured conflict-resolution mechanisms, clearer communication protocols, and team-building initiatives to strengthen collegial support, fairness, and organizational cohesion, thereby enhancing employee well-being and resilience. Workplace interpersonal stressors have been strongly linked to employee psychological strain. Incivility and disrespectful interactions among coworkers significantly increase stress and emotional exhaustion (Cortina et al., 2021). Similarly, poor workplace relationships and limited collegial support have been shown to predict higher levels of burnout over time (Hammer et al., 2021).

Financial Aspects

Financial aspects were sometimes experienced as stressors among GOCC employees (AWM = 2.30), with salary insufficiency emerging as the most notable concern (Often), alongside intermittent issues in compensation consistency, reimbursements, and benefit clarity. These findings indicate that perceived income inadequacy and unstable financial processes may contribute to ongoing financial strain, potentially lowering morale, increasing anxiety, and weakening organizational commitment. When compensation is viewed as misaligned with responsibilities or delayed, employees may experience reduced motivation and heightened stress. This underscores the need for transparent compensation systems, timely financial processes, and accessible financial assistance mechanisms

to enhance psychological stability and fairness perceptions.

Table 14
Financial Aspects

Indicators	TWM	AI
1. Salary is perceived as insufficient for basic living needs.	2.55	O
2. Delays in receiving compensation or allowances are experienced.	2.29	S
3. Additional compensation for extra work is not provided.	2.26	S
4. Financial assistance or emergency loans are not easily accessible.	2.32	S
5. Annual salary adjustments or promotions are inconsistently implemented.	2.34	S
6. Work-related expenses are not reimbursed in a timely manner.	2.34	S
7. Fringe benefits and incentives are limited or unavailable.	2.19	S
8. Retirement and insurance benefits are not clearly communicated.	2.13	S
9. Financial stress is influenced by inconsistent compensation.	2.22	S
10. Compensation is not aligned with job responsibilities.	2.32	S
AWM	2.30	S

Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S)
2.51 – 3.25 – Often (O) 1.00 – 1.75 – Never (N)

Financial strain has been consistently linked to higher psychological distress and reduced work engagement among employees (Rosso et al., 2024). Longitudinal evidence further shows that financial pressure predicts sustained emotional stress, partly through increased work–family conflict (Chai et al., 2021). These findings support the present results that salary insufficiency and inconsistent compensation contribute to stress and highlight the need for transparent and reliable financial support systems within GOCCs.

Health and Safety

Health and safety concerns were sometimes experienced by GOCC employees (AWM = 2.27), indicating intermittent but meaningful gaps in safety communication, emergency preparedness, access to protective equipment, medical services, and mental health support. Although not constant, the consistent “Sometimes” ratings suggest structural inconsistencies that may undermine employees’ sense of security and preparedness. When safety protocols are unclear, protective resources are limited, or health services are inaccessible, employees may experience heightened anxiety, reduced morale, and diminished trust in organizational safeguards.

Table 15
Health and Safety

Indicators	TOTAL	
	TWM	AI
1.Safety protocols are not clearly communicated to employees	2.20	S
2.Emergency response measures are lacking or unclear.	1.98	S
3.Protective equipment or tools are not readily available	2.40	S
4.Regular health checks or medical consultations are not provided.	2.41	S
5.First aid kits and basic medical supplies are not accessible.	2.37	S
6.Sanitation and cleanliness of the work environment are poorly maintained	2.25	S
7.Lighting, ventilation, or workspace ergonomics are inadequate.	2.23	S
8.Psychological or mental health support is not available.	2.29	S
9.Occupational hazards are present but not addressed.	2.26	S
10.Employees are exposed to health risks during work operations.	2.29	S
AWM	2.27	S
Legend: 3.26 – 4.00 – Always (A) 1.76 – 2.50 – Sometimes (S) 2.51 – 3.25 – Often (O) 1.00 – 1.75 – Never (N)		

These findings underscore the need for clearer safety communication, strengthened emergency systems, reliable access to medical and protective resources, and integrated mental health support to enhance psychological safety and workplace stability. Inadequate health and safety systems are consistently identified as workplace stressors. Poor safety communication, limited protective resources, and weak management commitment to employee well-being are associated with higher psychological distress and emotional exhaustion. Longitudinal evidence further shows that weak psychosocial safety climate predicts increased burnout and reduced engagement over time (Inoue et al., 2025). These findings support the present results that inconsistent safety protocols and limited health support contribute to stress and highlight the need for stronger institutionalized health and safety systems within GOCCs.

Significant Relationship Between the Socio-Demographic Profile of GOCC Employees and the Common Workplace Stressors They Experience.

The inferential analysis examining the relationship between socio-demographic characteristics and workplace stressors revealed that several stress domains were not significantly associated with employees’ demographic

profiles. Leadership and management style, workload, and job security showed no statistically significant relationships across age, sex, civil status, job position, length of service, work schedule, and religion (all $p > .05$). For example, leadership stressors were not significantly related to age ($p = .26$), sex ($p = .57$), or job position ($p = .41$), while workload similarly showed non-significant associations across all demographic variables (all $p > .05$). Job security perceptions also did not vary significantly by age ($p = .16$), sex ($p = .35$), or tenure ($p = .07$). These findings suggest that these stressors are uniformly experienced across employee groups and are likely rooted in organizational systems rather than demographic differences.

In contrast, time management demonstrated significant associations with several work-related characteristics. Age bracket ($p = .04$), job position ($p = .02$), length of service ($p = .01$), and work schedule ($p = .03$) were significantly related to time-management stress, indicating that younger employees, rank-and-file staff, employees with shorter tenure, and those assigned to rotating or night shifts experienced greater difficulty managing time. Similarly, organizational support was significantly associated with job position ($p = .02$) and length of service ($p = .01$), while interpersonal relationships also showed significant relationships with job position ($p = .02$) and tenure ($p = .01$). These results highlight that hierarchical role and organizational experience play a meaningful role in shaping employees' workplace experiences.

Financial aspects and health and safety concerns likewise exhibited selective significant relationships. Financial stress was significantly associated with civil status ($p = .04$) and job position ($p = .02$), indicating higher financial strain among married employees and rank-and-file personnel. Health and safety perceptions were significantly related to job position ($p = .01$), length of service ($p = .02$), and work schedule ($p = .03$), suggesting greater safety concerns among frontline, long-tenured, and shift-based employees. Overall, while personal demographic variables such as sex and religion showed minimal influence, work-related factors—particularly job position, length of service, and work schedule—demonstrated consistent associations across multiple stress domains, supporting the correlational dimension of the study.

The findings suggest that workplace stress interventions in GOCCs should focus primarily on organizational and structural improvements rather than demographic-specific strategies. Strengthening leadership practices, clarifying role expectations, improving workload distribution, and enhancing communication systems are likely to benefit employees across all groups. Additionally, attention should be given to role-based differences linked to job position, tenure, and work

schedule. Providing structured support for rank-and-file employees, newer staff, and shift-based workers—through mentorship, equitable resource access, and improved safety and scheduling policies—can help address work-related stress disparities. Overall, sustainable stress management requires systemic reforms that promote fairness, support, and organizational consistency, ensuring a healthier and more resilient work environment for all employees.

The findings suggest that workplace stress in GOCCs is largely structural rather than demographic in origin. Since leadership, workload, and job security did not significantly differ across groups, interventions should prioritize organization-wide reforms. This supports the Job Demands–Resources (JD-R) Theory (Bakker & Demerouti, 2017), which explains that stress arises when job demands exceed available resources, regardless of personal characteristics. Significant differences in time management, organizational support, financial stress, and health and safety indicate that occupational role and tenure shape stress experiences. This aligns with Person–Environment Fit Theory (Edwards, 2008) and Social Exchange Theory (Cropanzano & Mitchell, 2005), which emphasize that mismatches in role expectations and perceived fairness influence well-being.

Level of implementation of the various key aspects of Government-Owned and Controlled Corporations (GOCCs).

GOCC effectiveness depends on how well key operational aspects are implemented, reflecting service delivery, standards, and governance. This study assessed employees' perceptions of these implementations, with results shown in the table 16.

The findings show that workplace standards in GOCCs are moderately implemented (AWM = 2.81). Basic systems such as safety measures, sanitation, and policies exist, but implementation is inconsistent, particularly in emergency preparedness, resource provision, and feedback mechanisms.

Workplace

Evaluating the implementation of workplace standards is essential for determining how effectively GOCCs support employee productivity, safety, and well-being. The quality of the physical environment, safety protocols, resources, and organizational systems directly influences employee performance and morale. By assessing employees' perceptions of workplace practices, the study identifies strengths and gaps that must be addressed to ensure a conducive and efficient work environment across GOCCs in the Province of Catanduanes.

Table 16
Workplace

Indicators	TOTAL	
	WX	INT
1. Employee workspaces are organized, accessible, and ergonomically designed	2.89	MI
2. Cleanliness and sanitation are regularly maintained in all office areas.	2.84	MI
3. Physical facilities are safe, hazard-free, and regularly inspected.	2.75	MI
4. Lighting, ventilation, and noise control are adequate in the workplace.	2.82	MI
5. Common areas (e.g., lounges, toilets) are properly maintained.	2.99	MI
6. Employees are provided with tools and equipment necessary to perform their duties	2.59	MI
7. Safety and emergency measures (e.g., fire exits, drills) are in place.	2.90	MI
8. Clear policies on workplace behavior and decorum are implemented.	2.84	MI
9. Feedback mechanisms (e.g., suggestion box, grievance systems) are functional.	2.73	MI
10. Workload distribution and scheduling are fairly managed across staff.	2.73	MI
AWM	2.81	MI
Legend: 3.26 – 4.00 – Always Practice (AP) 2.51 – 3.25 – Sometimes Practice (SP)		
1.76 – 2.50 – Often Practice (OP)) 1.00 – 1.75 – Never Practice (NP)		

This suggests that although foundational workplace structures exist, enforcement and monitoring remain uneven across offices. Inconsistent safety drills, limited ergonomic upgrades, and gaps in communication systems may affect employee well-being and operational efficiency. The results imply the need for more systematic implementation of workplace standards, including regular safety audits, improved resource allocation, clearer feedback systems, and stronger compliance monitoring. National policies mandate the implementation of workplace mental health and wellness programs in government institutions, including GOCCs. The Civil Service Commission requires agencies to institutionalize mental health initiatives such as stress management, counseling access, and employee support systems (Civil Service Commission [CSC], 2020). Similarly, the Department of Labor and Employment mandates organizations to adopt structured workplace mental health policies and programs (Department of Labor and Employment [DOLE], 2020). However, monitoring reports indicate that implementation across institutions remains inconsistent due to resource limitations, leadership gaps, and weak enforcement mechanisms (DOLE, 2024).

These findings support the study’s result that workplace systems in GOCCs are only moderately implemented, with policies present but not yet fully institutionalized across all operational areas.

Mandatory Programs

Mandatory workplace programs safeguard employee welfare, safety, and mental health while ensuring compliance with CSC and DOLE standards. Assessing their implementation reveals the extent of organizational compliance and highlights gaps in service delivery.

Table 17
Mandatory Programs

Indicators	TOTAL	
	WX	INT
1. Orientation and onboarding programs for new employees are regularly conducted.	2.83	MI
2. Mental health and wellness programs are included in employee development.	2.58	MI
3. Stress management seminars or sessions are organized for staff.	2.55	MI
4. Work-life balance initiatives (e.g., flextime, leave benefits) are implemented.	2.70	MI
5. Regular health screenings or checkups are facilitated for employees.	2.42	PI
6. Leadership and professional development training is made available.	2.58	MI
7. Access to counseling or psychological services is provided	2.38	PI
8. Employee assistance programs for personal or financial concerns are offered.	2.46	PI
9. Mandatory policies on anti-sexual harassment and gender equality is enforced.	2.73	MI
10. Monitoring and evaluation of program effectiveness is regularly conducted.	2.60	MI
AWM	2.58	MI

Legend: 3.26 – 4.00 – Always Practice (AP) 2.51 – 3.25 – Sometimes Practice (SP)
1.76 – 2.50 – Often Practice (OP)) 1.00 – 1.75 – Never Practice (NP)

The findings show that mandatory programs in GOCCs are Minimally Implemented (AWM = 2.58), indicating partial and inconsistent compliance

with CSC and DOLE requirements. While orientation and anti-harassment policies are moderately practiced, key initiatives such as mental health services, counseling, stress management, and health screenings remain limited. This suggests that although required programs exist, they are not fully institutionalized or consistently monitored. Weak implementation may leave employees vulnerable to unmanaged stress and reduced well-being. Strengthening compliance requires better resource allocation, leadership commitment, and structured monitoring systems.

Coping Strategies Employed by GOCC Employees in Managing Work-Related Common Stressors.

This study examined how employees in Government-Owned and Controlled Corporations (GOCCs) manage common workplace stressors. Findings indicate that employees predominantly rely on problem-focused and relational coping strategies, while formal organizational mechanisms are less frequently utilized.

Leadership and Management Style

Leadership-related pressures, including unclear instructions and challenging supervisory behaviors, were managed primarily through clarification-seeking, professionalism, and task focus. However, formal mediation or HR engagement was less common. Strengthening psychologically safe communication systems and normalizing structured mediation processes may reduce overreliance on individual coping. The findings suggest that while employees demonstrate resilience, limited use of formal conflict-resolution channels may reflect insufficient psychological safety or institutional normalization of mediation. Research shows that supportive and transformational leadership significantly reduces employee stress and enhances psychological well-being (Milojević et al., 2024). Similarly, adaptive leadership communication mitigates stress escalation within teams (Rott et al., 2025).

Workload and Time Demands

Workload pressures were addressed through prioritization, delegation, when possible, peer support, and short-term scheduling. However, consistent long-term planning and boundary-setting (e.g., declining excessive tasks) were less evident. Institutional workload audits, supervisor-guided prioritization, and stigma-free help-seeking systems may prevent burnout and strengthen collective

coping capacity. The predominance of individual strategies suggests that employees adapt within existing structural constraints. Problem-focused coping strategies such as prioritization and planning are strongly associated with reduced work stress (Wamea & Nompo, 2024). Yet, coping effectiveness improves when organizations structurally support workload management and help-seeking (Chandrasekaran, 2025).

Job Security and Organizational Support

Employees managed job insecurity through compliance, performance optimization, and relationship-building, while proactive feedback-seeking and career contingency planning were less practiced. Structured feedback systems, transparent promotion pathways, accessible HR consultation, and visible support services can enhance institutional trust and reduce uncertainty-driven stress. Employees sometimes utilized seminars, team-building activities, HR guidance, and leave benefits. Participation in employee councils and counseling services was comparatively less frequent. Trust in organizational processes was moderate but not absolute. Moderate utilization of counseling and formal support services may indicate limited awareness or concerns about accessibility and confidentiality. Enhancing visibility, accessibility, and confidentiality of support services, alongside responsive grievance mechanisms, can increase employee engagement in institutional support systems. Job insecurity remains a significant post-2020 workplace stressor (Priyana, 2025). Transparent feedback and career development systems have been shown to reduce insecurity-related stress (van Heerden, 2025). Similarly, perceived organizational support is linked to lower occupational stress and greater engagement (Gao et al., 2024; Yang et al., 2024).

Interpersonal, Financial, and Health-Related Stressors

Interpersonal stress was managed primarily through peer interaction, team engagement, and informal support. Regarding health and safety, employees complied with protocols but were less engaged in proactive stress-reduction and preventive wellness behaviors. Institutionalizing team development programs, financial wellness initiatives, and preventive mental health practices may enhance both psychological and organizational resilience. Social support is consistently identified as a protective buffer against workplace stress (Wamea & Nompo, 2024; Chandrasekaran, 2025). Financial stress was addressed through budgeting and debt avoidance, yet participation in financial literacy programs was limited. Financial education and structured support improve employee resilience and reduce financial anxiety (Chandrasekaran, 2025).

Developed Framework in Managing Mental Well-Being Among Government-Owned and Controlled Corporations (GOCC) Employees in the Province of Catanduanes

The proposed Management Framework for Mental Well-Being among Government-Owned and Controlled Corporation (GOCC) employees is a multi-level system developed from the study's findings on workplace stressors, implementation gaps, and existing coping strategies. The framework integrates three interconnected levels—policy, organizational, and individual—to collectively enhance mental well-being outcomes. At the policy level, formal mandates, regulatory standards, and accountability mechanisms institutionalize mental health, occupational safety, and employee welfare as organizational responsibilities. The organizational level translates these mandates into operational systems, including leadership practices, workload management structures, communication protocols, and wellness programs that shape employees' daily work experiences. The individual level focuses on employees' coping capacities, resilience, self-regulation, and help-seeking behaviors. While personal coping plays a vital role, sustainable mental well-being is reinforced by supportive organizational systems and enabling policy structures. The interaction of these levels promotes improved psychological safety, reduced stress and burnout, strengthened resilience, and enhanced job satisfaction and productivity. By embedding a corresponding Plan of Action within each level, the framework ensures practical implementation and provides GOCCs with a systems-based and sustainable approach to managing mental well-being.

The Plan of Action operationalizes the framework by outlining concrete, measurable interventions at the policy, organizational, and individual levels. At the policy level, it includes strengthening compliance monitoring, formalizing mental health policies, and establishing accountability mechanisms. At the organizational level, it prioritizes leadership training, workload management systems, structured communication protocols, and accessible wellness and counseling services. At the individual level, it promotes resilience-building programs, financial and mental health literacy sessions, and proactive help-seeking practices. Collectively, the Plan of Action ensures that mental well-being initiatives are structured, implementable, and responsive to the identified workplace stressors, enabling sustainable improvements in employee psychological health.

MAJOR OUTPUT GOCC EMPLOYEES MENTAL WELL-BEING MANAGAMENT FRAMEWORK



Plan of Action per Level: Management Framework for Mental Well-being Among GOCC Employees

LEVEL	AREA OF ACTION	PLAN OF ACTION
POLICY LEVEL	Policy Alignment, Institutional Structures, and Accountability	Review, harmonize, and institutionalize GOCC policies on mental health, occupational safety, and human resource management in alignment with national mandates and regulatory standards (CSC, DOLE, GCG, DBM, DOH, ISO 45003).
		Establish or strengthen formal institutional structures (e.g., Mental Health Committees and Occupational Safety and Health Committees) to oversee mental well-being initiatives.
		Institutionalize standardized procedures for compliance monitoring, reporting, documentation, and evaluation to ensure accountability and uniform implementation across GOCCs.
ORGANIZATIONAL LEVEL	Organizational Systems, Work Processes, and Support Mechanisms	Strengthen leadership and management practices through clear communication protocols, feedback mechanisms, and participatory approaches that promote psychological safety.
		Review and improve work systems and organizational processes, including workload distribution, task design, and scheduling practices, to reduce system-generated stressors.
		Develop and sustain organizational support mechanisms such as wellness programs, Employee Assistance Programs (EAPs), and occupational health and safety initiatives to support employee well-being.
INDIVIDUAL LEVEL	Individual Coping Capacity and Adaptive Behaviors	Implement structured capability-building activities to enhance employees' coping skills, resilience, stress management, and self-regulation.
		Encourage adaptive behaviors through help-seeking, peer support, and appropriate utilization of available organizational resources such as counseling and wellness services.
		Reinforce individual-level health and safety practices through continuous awareness activities and integration of well-being practices into daily work routines.

EXPECTED OUTCOME	Enhanced Mental Well-Being	Improved psychological safety and overall mental well-being.
		Reduced stress and burnout.
		Increased resilience, job satisfaction, and productivity.
		Sustainable employee well-being supported by aligned policy, organizational systems, and individual capacities.

CONCLUSION

The findings indicate that GOCC employees in the Province of Catanduanes comprise a mature, experienced, and relatively stable workforce operating within environments characterized by recurring but generally moderate work-related stress. These stressors—arising from management practices, operational demands, interpersonal dynamics, financial concerns, and safety conditions—are experienced consistently across socio-demographic groups, suggesting that stress is rooted primarily in organizational systems rather than personal characteristics. While mandated workplace standards and programs are present, their implementation remains moderate to minimal, revealing gaps in resources, workload management, and institutional enforcement. Employees demonstrate various coping strategies; however, these are applied inconsistently and remain influenced by limitations in organizational support and supervisory systems. In response, the developed multi-level framework—integrating policy, organizational, and individual components—provides a structured, evidence-based approach to strengthening institutional systems, enhancing coping capacities, and promoting sustainable mental well-being, thereby fostering a healthier and more resilient work environment for GOCC employees in Catanduanes.

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