| RESEARCH ARTICLE

Biological, Psychological, Social, and Spiritual Domains of Teachers in a Philippine University

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| ABSTRACT

Countries worldwide have experienced an unprecedented event that changed the educational systems and suddenly forced our teachers to adopt online classes. This greatly affected our teacher's mental health. This study aimed to determine the harmony of the biological, psychological, social, and spiritual domains and also looked into the challenges encountered among university teachers during the COVID-19 pandemic. The findings served as bases for the intervention plan. The data were treated using frequency, rank, simple percentage, mean, standard deviation, rank, Chi-square test of independence, and ANOVA. Results showed teachers have poor health habits in the physical domain. In the area of the psychological domain, it showed that teachers experienced severe depression. Results of the spiritual domain suggest that teachers lack spiritual enrichment. In addition, the teachers in the social domain have warm relationships. The biological domain of teachers reveals a meaningful relationship with gender. Also, teachers' civil status is related to the social domain. Results also show that teachers can cope with resourcefulness, adjusting one's mindset and patience. Results show that teachers have biological conditions, severe psychological depression, warm social relationships with people around them, and less spiritual life after the COVID-19 pandemic. Therefore, it is recommended that an intervention plan be implemented, monitored, and evaluated to improve their living conditions while doing their job as facilitators of learning.

1. Introduction

The last two years have been rough. Unprecedented events and other tumultuous circumstances have occurred, such as COVID-19, typhoons, wars, etc. COVID-19 started in Wuhan, China, and in a short time, it spread to cities and towns in other parts of the world, killing millions. Economies began to shut down. As a result, thousands lost their jobs. This calamity had not spared teachers and students alike. Face-to-face classes had been suspended to ensure safety for both students and teachers amidst the pandemic.

The government eventually decided to implement a distance learning system despite the unreadiness of most teachers and educational institutions with this new learning platform, thus forcing them into a new teaching system (Etcuban et al., 2016). Some teachers were tasked to produce learning repositories, and some needed to familiarize themselves with online teaching platforms. As a result, they had to adjust to this platform (Pagaran et al., 2022). Teachers faced many periods of crisis as these circumstances were unprecedented in their teaching careers. They were forced into a situation where they suddenly had to shift to a system within which they were neither prepared nor trained, thereby stressing them (Etcuban, 2013). The isolation and lockdowns worsened the scenario since they would find it difficult to cope as there was no more physical interaction with each other than

before the pandemic. The physical health of teachers was also affected. There were reports of teachers afflicted with diseases during the pandemic. This has caused untoward situations in the family, such as financial problems.

In the Philippines, many families only have a little to spend on medical check-ups and hospitalization. Most do not have insurance or emergency funds to fund these emergencies. Believers could not attend their usual religious activities where they could express their faith in God and get moral support from their fellow believers. The platform for these activities suddenly turned virtual. Celebrations and special occasions are done online, lacking physical attachment and intimacy. Lockdowns and protocols prevented them from doing so, thereby putting them in needed isolation.

Health is of the utmost importance for teachers, as it affects them and their students, with whom they often interact. Health is the balance of a person's biological, psychological, social, and spiritual lives. Teachers play an essential role in the academe; thus, their well-being must be considered. The updated Comprehensive Mental Health Action of WHO (2022) sets out its directions for its member states to promote mental health and well-being. This plan will prevent more problems with mental health during this pandemic. If member states of WHO, including the Philippines, implement a comprehensive mental health plan, people can somehow alleviate the mental health problems caused by the pandemic. It has affected not just specific sectors of society but all sectors, especially the teaching profession. Many schools stopped their operations, forcing teachers to use other means of livelihood. As a result, their financial and mental health were greatly affected. Some schools continued their process using new platforms of instruction and methods but still affecting our teachers' mental health.

The researchers would like to study the state of the biological, psychological, social, and spiritual life of teachers. In doing so, he will establish a relevant program to help teachers care for themselves better and have a holistic approach to health.

2. Literature Review
This study is anchored on Beck's Cognitive Theory (1983), Scott Peck's Spiritual Development Theory (1987), the Enlightened Brain Theory of Deepak Chopra and Rudolph Tanzi (2012), and Republic Act No. 11036 or the Mental Health Act.

Self-determination, which relates to people's capacity for decision-making and life management, is a critical psychological concept (Wehmeyer & Schalock, 2001). This ability is essential for psychological health and well-being (Devonish, 2016). Self-determination gives people a sense of control over their choices and lives. It also affects motivation—people are more motivated to act when they believe their actions will impact the outcome. Self-determination has been used in various contexts, including work, parenting, exercise, and health. According to research, high levels of self-determination can promote success in multiple spheres of life.

The Cognitive Theory posits that individuals process and interpret information through their thinking (Gotlib & Joormann, 2010; Landau et al., 2010). Their thoughts lead to the arousal of their emotions. Specific thoughts and beliefs lead to disturbing emotions; others lead to good ones (Capuyan et al., 2019; Szentagotai & Jones, 2010). This theory suggests that individuals' beliefs and thinking likely determine their emotions (Xu, 2012). Persons with a distorted way of thinking will likely feel unhealthy emotions despite being in normal circumstances.

On the other hand, other individuals will still feel good emotions because of their healthy thoughts and attitudes despite their untoward situations (Fredrickson & Kurtz, 2011). With that, people think differently. As a result, they handle situations differently. In addition, Beck (2020) says that dysfunctional thinking, which somehow affects the mood of the person's behavior and mood, is expected to cause all psychological disturbances. In that sense, when people start to assess their thinking more healthily and practically, they will experience a decrease in their unhealthy behavior and negative emotions. To illustrate this more, if a person does not have the money to pay his bills, he will start thinking he cannot do anything right so that he may experience depression. With cognitive behavior therapy, he may be asked to evaluate his thoughts. The person's negative view of himself may lead to negative results such as depression (Mann et al., 2004; Beck, 2002). If not appropriately intervened, people with a negative view of themselves may experience depression. For example, some people focus more on their negative beliefs and thoughts about themselves, leading to other unhealthy beliefs that may cause depression or anxiety. During untoward circumstances, people more prone to unhealthy beliefs are likely to experience depression or other mental health issues (Van Droogenbroeck & Spruyt, 2015). Beliefs may affect how information is processed. People gather information, process it according to their beliefs, and act accordingly (Flores & Day, 2006). With that, processing the information paired with functional beliefs is essential.

People cope differently with different situations (Lindqvist et al., 2017). Each person has his way of dealing with stressful situations, so using cognitive theory and therapy can significantly help. According to Otis (2007), cognitive therapy helps one recognize negative thoughts and, in the process, develop new coping strategies. In addition, one study says that Cognitive Behavior Theory effectively improves self-esteem, can be used as psychological treatment, and is recommended for eating disorders (Jong et al.,

2020). Cognitive Behavior Theory can also address eating problems. This theory does not only focus on one area alone. It can also be used for other mental health concerns.

Moreover, another study says that Cognitive Behavior Therapy can also be used for anxiety disorders, and it says that it is a well-established treatment not just for anxiety disorders but also for panic disorder and post-traumatic stress disorder etc. (Stewart & Chambless, 2009). With all those studies supporting its efficacy and effectiveness, cognitive behavior theory/therapy may be an excellent model for mental health issues, especially in this pandemic, where psychological, biological, and social problems are rising.Interestingly, Scott Peck's theory on the stages of spiritual development offers a perspective on the issues teachers encounter in their spiritual journey. They can identify which stages are Chaos, Religion, Agnosticism, or Mysticism. Only by reaching the Mysticism stage can an individual fully understand the Enlightened brain. Chopra (2014) introduced the Enlightened Brain Theory in their book Super Brain. It transcends the Standard Model of Counseling into a holistic way of healing—harmony of humans' biological, psychological, social, and spiritual domains. They scientifically assert that through the interplay of the instinctive, emotional, intellectual, and intuitive phases, the brain reaches its final phase, called enlightenment, which will result in the individual's holistic healing (Mukherjee, 2022).

With all these mental health issues affecting our teachers, there is a great need to find a holistic approach to solving the issues. The development of an intervention program can be anchored on the Mental Health Act, known as Republic Act 11036. This law highlights the need to promote and conduct mental health programs for our students and teachers alike. WHO (2022) says that Mental Health is the foundation for individuals' well-being and effective functioning. It is more than the absence of a mental disorder. It is the capacity to think, learn, and comprehend one's own emotions as well as the reactions of others. It is a state of equilibrium, both internally and concerning the environment. This balance is produced by physical, psychological, social, cultural, and other interrelated factors.

In the Philippines, it was reported that about 4.5 million Filipinos had lost their jobs this year (Bonghanoy et al., 2019; Martin et al., 2004), with the unemployment rate at 10.4 percent - the highest in 15 years, the government reported, due to the COVID-19 pandemic and the lockdown shuttering thousands of businesses (De Guzman et al., 2022). Thus, Mental Health encompasses a variety of factors. It does not simply include purely mental health issues but also factors such as social, psychological, physical, and spiritual (Suldo & Shaffer, 2008; WHO, 2001). All these essential factors help contribute to mental health (Kruisselbrink Flatt, 2013). Even one factor, if not taken care of or given significance, may cause a struggle in the individual's mental health. For example, if one person suffers from a physical injury or health issue, despite being psychologically sound, he may still experience mental health issues resulting from his physical or health concerns. With that, each factor mentioned is to be taken care of. A holistic approach can be employed to address these factors that are vital to mental health.

Mental health is a state of mental well-being that facilitates individuals' dealing with struggles and problems in life, being mindful of their potential, and being productive in the community (Bucci et al., 2019). It is a vital part of overall health, which can help establish relationships, make healthy and well-informed choices, and live in harmony with people (Josep et al., 2020; Murthy, 2016). Mental Health well-being helps people to experience happiness and satisfaction with life. It also guides people to have a purpose, hone their potential, and create harmonious relationships with others. In addition, it also gives them a sense of control (Guo et al., 2020). Thus, looking into the mental health of individuals is of utmost importance. In addition, according to Mental Health (2022), the vital role of mental health is acknowledged increasingly because it is already included in the Sustainable Development Goals (Kanie & Biermann, 2017; WHO, 2016). It is also said that depression is one of the leading causes of disability.

Despite the advances in some countries regarding mental health, individuals with mental health conditions experience discrimination and human rights violations (Burns, 2011). These situations further exacerbate their mental conditions, causing more damage. Thus, more investments are needed in terms of quality mental health care, such as professional and quality assistance for individuals with mental health issues.Effective treatment should always be utilized to make the assistance outcome productive (Tanielian et al., 2008). Promotion of mental health awareness can be employed extensively to reach more individuals whose knowledge or idea of mental health concerns is minimal (Slade, 2009). Research in mental health should focus on enhancing the present treatments or establishing new ones. Developments have been established considerably in the Philippines regarding mental health concerns and issues. The National Mental Health Strategic Plan was redeveloped to align the indicators and activities, including the Special Initiative for Mental Health (WHO, 2022).

In connection with that, the Philippine Department of Health (DOH) has mental health programs consisting of holistic activities and services that cater to all Filipinos. DOH hopes to achieve the highest level of health for the country as one of its mantras is ''No Universal Health without mental health.'' Mental Health is one of the casualties of the ongoing pandemic (Deguma et al., 2021). Mental Health was already a problem before the pandemic. The situation was exacerbated during the COVID-19 pandemic (Penner et al., 2021; Adegboye et al., 2021). There were already serious social problems that the world was facing, such as poverty,

war, and more, when COVID-19 happened (Buheji et al., 2020; Benach, 2021). It had worsened the situation. Education was not spared. Schools were shut down, affecting teachers and students alike (Ceesay, 2021; Owusu-Fordjour et al., 2020). To add up, this is an unprecedented event on a global scale. Almost all schools worldwide were shut down, forcing everyone to go inside their homes for a long time.

In England, the Green Paper on mental health in schools said that out of 10 young children and young people, 1 has mental health issues and employs an ambitious strategy to help and assist the affected individuals (Tricco et al., 2017). However, it does not give adequate attention to teachers' mental health. With that, the mental health of teachers was not taken care of. The teachers' vital role in schools is undoubtedly of utmost importance (Rajappan et al., 2017; Grayson & Alvarez, 2008). Our teachers are the ones who are responsible for giving our students essential lessons that can be used for years to come (Freese, 2006). These students will, one day, become doctors, engineers, teachers, nurses, police officers, guidance counselors, etc., shaping our future and the world. If inadequate mental health services continue, we may experience more problems than ever.

Furthermore, mental health programs and activities are scarce for our teachers. According to Glazzard and Rose (2019), the stress on teachers is pervasive. It is prevalent across all sectors of education and the countries and, unfortunately, results in burnout and lower job satisfaction. Teachers are also reported to have an increased risk of developing mental health issues (Dwyer et al., 2006; Kovess-Masféty et al., 2006). Thus, we see the severity of the situation and the mental health status of teachers here. This may be true in many schools where teachers may already suffer from mental health problems.

Some factors, such as life satisfaction, personal happiness, and positive psychological functioning, influence teachers' well-being. Teachers may experience positive psychological functioning once they make healthy relationships (Etcuban, 2018). Given the nurturing environment, teachers can also have sound mental health. Research also says that teachers who have poor mental health may not believe themselves whether or not they can also support the mental health of his/her students, especially if they also have mental health issues. In other words, the teacher's mental health affects students' mental health. To learn, students rely heavily on their teachers in many aspects, like their lessons and activities (Kennedy, 2016). If the teachers are not well-trained in mental health or psychological well-being, they may not be able to handle their students' mental health (Weare, 2015). Thus, it may be a cycle. When they grow up and have their own families, these students become individuals who are already contributing to society or even become teachers on their own. They may also lack the capacity to handle mental health. Thus, the problem may be repeated. It can be a severe problem for the next generations if no comprehensive and efficient programs are implemented. Mental health programs have to be thoroughly discussed and implemented. Compared to the general population, teaching professionals experience greater levels of work-related stress and signs of psychological health issues. The study examined Australian teachers' psychological distress, coping styles, and well-being. The study reported that work, workload, and finances are being identified as leading sources of stress for these teachers.

Furthermore, the study reports that these teachers also reported clinical symptoms of despair, anxiety, and health concerns. Results also say that teachers use maladaptive coping strategies that somehow contribute to their increased risk of psychological distress. The findings indicate the need for comprehensive programs to enhance the teachers' coping strategies to help them with their psychological distress and improve their well-being (Stapleton et al., 2020).

According to Özü et al. (2017), teachers in many countries experienced high levels of work-related stress. That suggests that the problem is not just located in selected areas. This problem is ubiquitous, meaning it exists in all places with teachers. Knowingly, the teachers' role is vital to our students. Our teachers' psychological well-being impact on our students is crucial. Thirty percent of teachers leave the profession due to stress. With that, the teachers may stay in the profession and help our students become fully functioning individuals.

According to Smith and Applegate (2018), mental health stigma is a profoundly negative stereotype about people with mental health disorders. People with no proper training or scientific information about mental health tend to view people with mental health issues negatively. These people may view these individuals with mental health issues as weak and dangerous to others and themselves. It can also be highly possible that because of a lack of education about mental health, they will not come out and ask for assistance because they are afraid to be judged by society, and worse, they may be ridiculed. Mainly, these people do not inform their significant others about their dire situation. Therefore, mental health policies and legislation may be established to address the stigma. The mental health workforce may be required to engage in capacity-building mechanisms to improve their skills to handle the teachers with mental health concerns better and give them better access to mental health services. With these mechanisms in place, our teachers may have a healthy and positive outlook on life and, as a result, may create a welcoming environment for our students. They may also be able to deal with students with mental health problems (Javed et al., 2021).

According to Javed et al. (2021), mental health issues are a growing worldwide public health concern that primarily impacts those with low incomes. Additionally, the stigma surrounding mental health contributes to people delaying seeking emergency care. The people with financial challenges, like our teachers, already have problems with basic needs such as providing daily meals, water, and shelter. The scarcity or absence of these needs can only exacerbate mental health problems. Indeed, the prevalence of mental health problems in marginalized sectors is in a worse situation. Basic needs and mental health are interconnected. Therefore, both are inseparable. As mentioned in the previous discussion, a holistic approach can be employed when dealing with mental health. Psychological, social, spiritual, and physical health must be balanced to achieve well-being.

Teaching has always been demanding, challenging, and stressful. There is a substantial correlation between teachers' psychological symptoms such as stress, anxiety, depression, and emotional exhaustion—and work satisfaction, teacher-child relationships, the quality of child care, behavioral issues in kids, and increased turnover. Teachers have to face this reality every day in their work. They have to deal with the stress and emotions at their work. They may be resilient but must manage their mental health (Cheng et al., 2020).

The occupational stress of our teachers has dramatically multiplied over the years, and burnout is presumed to be the highest among teachers compared to other fields. In addition, burnout is likely the cause of teachers' early dropout of their profession. Higher stress levels in the university environment can create more mental health problems, adjustment problems, and lower academic achievement (Abid et al., 2022). Stress cannot be eliminated since it invariably contributes to mental health. As mentioned, burnout is the highest among teachers (Akdemir, 2019). Teachers do not stop working after their shifts. They continue working after their duty hours, checking the papers and assignments of their students. Teachers have their own lives, too (Uitto, 2012). They have families and friends. They, too, need a break like everyone else.

According to Green et al. (2020), WHO recognized burnout as an occupational phenomenon. Physical and emotional exhaustion occurs when a teacher at a job experiences long-term stress or works in an emotionally draining role. Thus, it should be considered an essential factor in a teacher's well-being (Josep et al., 2020). The experience of mental well-being at work is significant as it has many positive consequences. With that, the emphasis on mental well-being for teachers is explicitly emphasized (Capone & Petrillo, 2018). For teachers to perform their duties well and deliver their outputs effectively and efficiently, their mental well-being must be noted so that comprehensive programs can guide teachers in the mental wellness journey (Li, 2018). Human resource management should always prioritize well-being when crafting programs for our teachers. Human resource management can tap experts on mental health to provide our teachers with better mental health programs and services. Experts on mental health should be the ones to handle safety and effectiveness.

3. Methodology
This section presents the research design, the research flow, the research environment, the study's respondents, the instruments used, the procedures of the data gathering, and the statistical treatment.

3.1 Design
This study employed the descriptive-correlational method research design. It gathered quantitative data on their perceptions regarding the teachers' domains, which were biological, psychological, social, and spiritual. The study used a survey tool, Dr. Robert D. Willix's "20 Questions that Could Save Your Life" questionnaire, to gather data on depression, a researcher-made questionnaire for the social domain, and Scott Peck's questionnaire for the spiritual domain.

3.2 Environment
The University is situated in the bustling city of Cebu in the Philippines and is a premier educational institution celebrated for its diverse academic programs and dedication to quality education. Founded in 1964, it has grown to offer a wide range of engineering, business, healthcare, law, and maritime studies courses. The university prides itself on fostering a dynamic, inclusive learning environment that encourages innovation, critical thinking, and community engagement. With state-of-the-art facilities, experienced faculty, and a strong emphasis on holistic development, the university trains its students to become skilled and ethically conscious professionals who will benefit society.

3.3 Respondents
This study's respondents were 111 university teachers, who were chosen using non-probability convenience sampling to answer the survey questionnaires relating to their domain.

Table 1
Distribution of Respondents

Department/Colleges	Frequency	Percentage
Basic Education	19	17.12
Senior High School	23	20.72
College of Business Administration	9	8.11
College of Computer Science	4	3.60
College of Criminology	1	0.90
College of Nursing	6	5.41
College of Teacher Education	11	9.91
College of Customs Administration	6	5.41
College of Engineering	4	3.60
College of Marine Engineering	9	8.11
College of Marine Transportation	19	17.12
Total	**111**	**100.00**

In non-probability convenience sampling, the respondents are chosen according to their accessibility and availability. This strategy is popular in exploratory research since it is easy to apply and reasonably priced. Due to its ability to collect data quickly, this strategy is frequently used by researchers with limited time and resources. Convenience sampling can yield insightful preliminary data and aid in generating research hypotheses. It is beneficial for researching populations that are challenging to reach or in the early stages of research.

3.4 Instrument

The researchers utilized an adapted survey questionnaire that contains three parts. Part 1 gathers the respondents' demographic profile, including age, gender, highest educational attainment, civil status, number of children, years of teaching experience, combined monthly family income, and religion. Part 2 gathers the level of teachers' biological, psychological, social, and spiritual domains. This section is adapted from the work of Dr. Robert Willix's "20 Questions That Could Save Your Life", the Beck Depression Inventory that measures characteristic attitudes and symptoms of depression (Bathina et al., 2021). It is a 21 multiple choice item wherein each expression measures a symptom, the Researcher-made Questionnaire for the level of intimacy, and Scott Peck's questionnaire on the stages of spiritual development.

Dr. Willixin has used the 20 Questions That Could Save Your Life in his medical practice since 1994. It has proven very effective in his long years of medical practice. Beck's Depression Inventory (BDI) is a 21-item, self-report rating inventory that measures characteristic attitudes and symptoms of depression ("Beck Depression Inventory (BDI)," 2022, also cited by Beck et al., 1961). It has been proven that it is accurate and reliable. The researcher-made questionnaire for the intimacy level has been proven effective and dependable for years of use in the classroom. Lastly, the questionnaire by Scott Peck's stages of spiritual development has been used for many years in his practice as a psychiatrist and is proven accurate and effective.

3.5 Data Analysis

After receiving the returned data, each researcher reviews the completed questionnaires to ensure that all data entries are accurate. Their statistician gave them a Data Matrix file, which they used to encode the data. Data hygiene then comes into play, ensuring that every entry is accurate and comprehensive. After that, statistical software was employed for tabulation and analysis. Frequency, rank, simple percentage, mean, standard deviation, weighted mean, Chi-square test of independence, and one-way ANOVA were used to analyze the gathered data.

3.6 Credibility and Reliability

The researchers wrote a transmittal letter to the University administration asking for approval to conduct the study on the identified respondents. Once approved, the researchers administered the survey questionnaires. Formal consent was obtained from the University administrator to ensure the confidentiality of data collected from the faculty members. These respondents are guaranteed the confidentiality of the information gathered regarding their well-being. Also, the researchers assure the respondents that the data collected will be used only for research purposes. This study strictly adheres to the mandate of the National Privacy Commission in administering and implementing the Data Privacy Act of 2012. To ensure compliance with the data protection law and adopt international principles and standards for personal data protection. It safeguards every individual's right to privacy and ensures the free flow of information to innovation, growth, and national development. It also provides security of all personal information and communications in the government and the private sectors involved in the study.

3.7 Ethical Considerations

All data gathered were treated with the utmost confidentiality. The respondents have given assurance that neither they nor their university was identified in any report once the results were available. Participation in this study was voluntary, and each participant could withdraw. The issue of validity and reliability was necessary for researchers to collect the accurate data presented and interpretations derived from it. To ensure the validity and reliability of the question, a wide range of literature research has been conducted.

4. Results and Discussion

4.1 Profile of the Respondents

Table 2 presents the profile of the respondents.

Table 2
Profile of the Respondents

Profiles	Frequency	Percentage
A. Age [in years]		
51 and above	26	23.42
46 - 50	11	9.91
41 - 45	10	9.01
36 - 40	7	6.31
31 - 35	16	14.41
26 - 30	23	20.72
21 - 25	18	16.22
Mean : 39.32		
StDev : 13.88		
B. Gender		
Female	48	43.24
Male	63	56.76
C. Civil Status		
Married	57	51.35
Single	52	46.85
Widow	2	1.80
D. Number of Children		
4 and above	13	11.71
1 - 3	46	41.44
None	52	46.85
Mean : 1.441		
StDev : 1.813		
E. Combined Monthly Family Income (in PHP)		
Less than 9,520 [Poor]	0	0.00
9520 - 19,040 [Low Income]	1	0.90
19,040 - 38,08 [Lower Middle Income]	47	42.34
38,040 - 66,640 [Middle Income]	56	50.45
No Data	7	6.31
F. Religion		
Roman Catholic	95	85.59
Evangelical Christian	7	6.31
7th-Day Adventist	3	2.70
Born Again Christian	2	1.80
Others	4	3.60

Age and Gender. The table shows that most respondents [26, 23.42%] are over 50. Further, the age brackets of 26 to 30 have 23 respondents [20.72%], followed by ages 21 to 25 with 18 respondents [16.22%]. Also, it shows that the respondents' mean age is 39.32 years old, with a standard deviation of 13.88. Also, it shows that 63 respondents [56.76%] were males, and 48 [43.24%] were females. The data imply that about one-fourth of the respondents are seasoned teachers and about to retire in their teaching career in the next few years, wherein males comprise more than 50%. The fact that males make up the majority of teachers over 50 has significant ramifications for the academic environment. This pattern suggests obstacles to female teachers' career progression and highlights a possible gender imbalance in senior faculty positions. The need for more diverse role models for

younger faculty members in higher education may result from this demographic imbalance. The university may also experience a significant loss of seasoned professionals as these senior male teachers get closer to retirement. Strategic planning for recruiting and retaining diverse, qualified faculty will be necessary to preserve academic standards and promote an inclusive campus community.

Civil Status. The table shows that there were 57 respondents [51.35%] who were married, 52 respondents who were single [46.85%], and two respondents [1.80%] who were widowed. The statistics indicating a high proportion of married teachers raise significant concerns about the nature of education. The stability and well-rounded viewpoint that married teachers frequently bring to their positions can favor classroom dynamics and student-teacher interactions. However, balancing obligations to their families and careers may prevent them from participating in after-school programs or professional development opportunities. To help married teachers efficiently manage their duties, schools should consider adding supporting measures like flexible scheduling and family leave policies. This would eventually benefit the educational system.

Number of Children. Table 2 also shows that about 52 respondents [46.85%] do not have children, 46 respondents [41.44%] have children between 1 and 3, and 13 respondents [11.71%] have children more than 3. There are several ramifications to the statistics indicating that many teachers are childless. These teachers can devote more time and energy to their student's education and professional growth, which results in improved learning outcomes. Nevertheless, they need to gain personal parenting experience, which might affect how well they comprehend family dynamics and student conduct. To ensure that all teachers, regardless of parental status, are prepared to serve and learn the different needs of their students, schools should benefit from offering training on these topics.

Combined Monthly Family Income. It shows that 56 respondents [50.45%] have a combined monthly family income of P 38,040 to P 66,640 under the classification of Middle Income. Also, the study shows that 47 respondents [42.34%] have a combined monthly family income of P 19,040 to P 38,080 [Lower Middle Income]. The data imply that teacher respondents are classified as middle-income earners. Information showing that many teachers originate from middle-class families significantly impacts the academe. Financial strain is common for middle-class teachers and can affect their performance and work satisfaction. These demands might make them take second jobs, limiting their availability and concentration on teaching responsibilities. Policy decisions on wage changes and benefits might be made to improve teacher retention and well-being with this income category in mind. Furthermore, by identifying middle-class teachers' financial limitations, specific financial planning courses and tools may be provided, enabling them to efficiently manage their funds and, eventually, improve their overall job satisfaction and performance.

Religion. The table shows that about 95 respondents [85.59%] are Roman Catholics, followed by Evangelical Christians with seven respondents [6.31%], 7th-day Adventists with three respondents [2.70%], and Born-Again Christians with two respondents [1.80%]. The data imply that most teachers are Roman Catholics. The data suggest that a sizable proportion of Roman Catholic teachers has a variety of ramifications for the educational system. This group may impact the attitudes and values shared in the classroom, encouraging a strong sense of community and ethical thinking. It is imperative to strike a balance to promote a varied and inclusive environment that respects different religious views and backgrounds. Training in cultural competency and encouraging interfaith discussion might be beneficial for schools. Comprehending the religious makeup of teachers can facilitate the development of rules that uphold religious customs while preserving a secular and welcoming learning environment for all staff members and students.

4.2 Level of Teachers' Domains
This study categorizes the biological domains into family history, lifestyle, and general cardiovascular health. The results are presented in Table 3.

Family History. The study shows that respondents have Fair Health conditions regarding the number of the immediate family having cancer. Further, it shows that respondents have Poor Health conditions regarding the number of close family having heart attacks and diabetes. Overall, the table indicates that teacher respondents have Poor health conditions. The data imply that these teachers must undergo annual medical checkups to work healthily at the University. Teaching is the most rewarding profession in the four corners of the globe. The reward for hours of preparation, marking, and meetings is seeing the students grow and blossom. This lifeblood nourishes our hearts and makes us want to wake up every morning and do it again.

Lifestyle. The table shows that teachers generally have poor health conditions regarding the respondents' lifestyles. It shows that Smoking and Drinking rank first while Eating fruits ranks last. The data imply that teachers are the first responders. If they are not "fit" to deal with the daily, ever-changing series of demands and pressures, they will not be able to provide the quality teaching

and learning experience expected of them. They hope to be a better teacher than when they began their careers if they are physically fit to perform their teacher duties.

Table 3
Respondent's Response to Biological Domains

#	Indicators	Total	Rank	Interpretation
A.	**Family History**			
1	The number of immediate families who had cancer	49	1	Fair
2	Some immediate families have had a heart attack	78	2	Poor
3	The number of immediate families had diabetes	95	3	Poor
	Sub-Average :	**74**		**Poor**
B.	**Lifestyle**			
1	Smoking	82	1	Poor
2	Drinking water	82	1	Poor
3	Percentage of body fat	84	2	Poor
4	Overweight	98	3	Poor
5	Serving rice, potatoes, or pasta a day	114	4	Poor
6	Enjoying hobbies	157	5	Poor
7	Stress level	184	6	Poor
8	Use antioxidants	188	7	Poor
9	Activeness	195	8	Poor
10	Use of meditation or some mind relaxation	231	9	Poor
11	Number of slices of whole-grain bread	266	10	Poor
12	Cooked vegetables	287	11	Poor
13	Eating fruits	293	12	Poor
	Sub-Average :	**174**		**Poor**
C.	**General Cardiovascular Health**			
1	Heart disease	32	1	Fair
2	Systolic pressure	36	2	Fair
3	Normal EKG	36	2	Fair
4	Normal stress test results	60	3	Poor
5	Cholesterol level	62	4	Poor
6	Level of triglycerides	63	5	Poor
7	Diastolic pressure	86	6	Poor
8	HDL cholesterol level	192	7	Poor
	Sub-Average :	**71**		**Poor**
	Grand Average :	**106**		**Poor**

Range: Less than 20 [Good]; 20 – 59 [Fair]; 60 and above [Poor]

General Cardiovascular Health. Regarding the general cardiovascular health of teachers, the study shows that teachers have poor health conditions in average stress test results, cholesterol level, triglycerides, diastolic pressure, and HDL cholesterol level. These imply that stressed and depressed teachers will have more adrenalin pumping through them.Their heart rate will be faster than usual, resulting in elevated blood pressure as a measurable symptom. Teachers are likelier to be easily agitated, less tolerant, quick to judge, and tired. They will frequently be rushing or feel rushed on the inside. Their bodies will not be the only ones to alert them to highstress levels. Their thoughts will be racing and possibly turbulent. Negative reviews will likely be prevalent, with the inner critic at the helm. Self-esteem can plummet, and low morale is common when teachers are out of balance.Workload and attitude toward change both directly impact physical symptoms. De Simone et al. (2016) suggest important implications for stress prevention in teachers. By accurately identifying its sources, stress and its consequences can be reduced and avoided, benefiting individual and organizational health.

Table 4 shows that teachers' usual disposition toward *Suicidal thoughts or wishes* ranks first. Further, the table shows mild mood depression has *Difficulty concentrating* ranks second. The indicators of loss of pleasure and c*rying* rank third. Also, the table indicates that teachers have extreme depression due to *Past failure, Loss of energy, Agitation, Loss of interest, Changes in sleeping*

patterns, punishment, Self-criticalness, Tiredness or fatigue, Irritability, and Sadness. The data imply that teachers experience frequent job-related stress and nearly experience symptoms of depression more than the general adult population.

Table 4
Respondent's Response to Psychological Domains

#	Indicators	Total	Rank	Interpretation
1	Suicidal thoughts or wishes	6	1	Normal
2	Concentration difficulty	15	2	Mild mood depression
3	Loss of pleasure	29	3	Moderate depression
4	Crying	29	3	Moderate depression
5	Pessimism	31	4	Severe depression
6	Changes in appetite	31	4	Severe depression
7	Self-dislike	33	5	Severe depression
8	Indecisiveness	33	5	Severe depression
9	Guilty feelings	35	6	Severe depression
10	Loss of interest in sex	35	6	Severe depression
11	Worthlessness	38	7	Severe depression
12	Past failure	42	8	Extreme depression
13	Loss of energy	45	9	Extreme depression
14	Agitation	46	10	Extreme depression
15	Loss of interest	46	10	Extreme depression
16	Changes in sleeping pattern	49	11	Extreme depression
17	Punishment feelings	51	12	Extreme depression
18	Self-criticalness	51	12	Extreme depression
19	Tiredness or fatigue	54	13	Extreme depression
20	Irritability	68	14	Extreme depression
21	Sadness	69	15	Extreme depression
	Grand Total :	**40**		**Severe Depression**

Range: 0-10 Normal; 11-16 Mild Mood; 17-20 Borderline; 21-30 Moderate;
31-40 Severe; More than 40 Extreme

Several studies have been conducted under the assumption that teachers' psychological processes are related to teaching effectiveness. However, the evidence for this assumption is constrained: most research has focused on examining the relationships between teachers' self-reported characteristics and other within-teacher self-reported results. Analysis reveals a significant but small effect between overall psychological aspects and teaching effectiveness (Klassen & Tze, 2014). The most variance was at the individual level, supporting the view that stress and burnout were overwhelmingly psychological phenomena. According to McCormick and Barnett (2011), stress attributed to student misbehavior is essential in predicting burnout, emotional exhaustion, and career satisfaction. Occupational stress attributed to personal failings also negatively predicted personal accomplishment.

Table 5
Respondent's Response to Social Domains

#	Indicators	Mean	Rank	Interpretation
1	Spouse	4.48	1	Intimate
2	Daughter/s	4.38	2	Intimate
3	Son/s	4.35	3	Intimate
4	Father-in-Law	4.33	4	Intimate
5	Sister/s	4.09	5	Warmth
6	Sister-in-Law	4.09	5	Warmth
7	Brother/s	4.07	6	Warmth
8	Mother	3.98	7	Warmth
9	Father	3.91	8	Warmth
10	Co-teachers	3.56	9	Warmth
11	Neighbor/s	3.40	10	Warmth
	Aggregate Mean :	**4.06**		**Warmth**

Range: 1.00-1.79 Out of Reach; 1.80-2.59 Lukewarm; 2.60-3.39 Ordinary
3.40-4.19 Warmth; 4.20-5.00 Intimate

Understanding teachers' stress is critical to addressing today's educational climate challenges. Growing numbers of teachers report high levels of occupational stress, and teacher turnover hurts education quality. According to Jennings et al. (2017), teachers had statistically significant positive effects on adaptive emotion regulation, mindfulness, psychological distress, and time urgency. The findings suggest that teachers are an effective professional development tool for promoting social and emotional competence and improving classroom interactions.

According to Wentzel et al. (2010), students' perceptions of teachers differed depending on the teacher and the classroom. In general, the findings support the utility of a multidimensional approach to social support that recognizes teachers' and peers' independent and interactive contributions to student motivation.

Teachers are the driving force behind social and emotional training programs and practices in schools and classrooms, and their students are heavily influenced by their social-emotional competence and well-being. According to research, teaching is one of the most stressful occupations; furthermore, the stress in the classroom is contagious—stressed-out teachers tend to have stressed-out students (Schonert-Reichl, 2017).

Table 6
Respondent's Response to Spiritual Domains

#	Indicators	Mean	StDev	Interpretation
1	I see the beauty in all creation – trees, mountains, flowers, seas, and human beings.	3.25	0.97	Highly spiritual
2	I see God's creation, especially my kapwa-tao, as part of me. We are one in God.	2.96	1.03	Moderately spiritual
3	I care for the welfare of others as I care for myself.	2.89	0.97	Moderately spiritual
4	I can easily forgive those who hurt or did me wrong.	2.76	0.97	Moderately spiritual
5	I feel safe and secure in my religion, and I am contented that by doing the activities of my religion, I am following the will of God.	2.64	1.05	Moderately spiritual
6	I faithfully follow my religion's teachings and feel a sense of stability and strong faith in God.	2.44	0.98	Less spiritual
7	I only believe and follow what is written in the Holy Bible, especially the Ten Commandments.	2.39	1.02	Less spiritual
8	I am very willing to serve the people in the church, especially during Holy Week and days of obligation.	2.33	0.97	Less spiritual
9	I feel the suffering of people around the world. I cannot close my eyes and ears to their suffering.	2.32	0.92	Less spiritual
10	I am sure I am doing right because of my faith in God, and those who do not believe in God are already living in hell.	2.25	1.03	Less spiritual
11	I am not affected by adverse events, negative thoughts, and negative comments.	2.23	0.99	Less spiritual
12	I do not want to be absent during Sunday mass or service in the church because it is the commandment of God to keep a day to worship Him.	2.08	0.96	Less spiritual
13	I believe that empirical evidence and logic are necessary to support my belief in God.	1.95	0.91	Less spiritual
14	I only follow what our pastor/priest told us to do to avoid committing sins against God.	1.85	0.89	Less spiritual
15	I feel the importance of facts and science is to support if there is a God.	1.84	0.93	Less spiritual
16	I do not care about other people's suffering as long as they do not trample on my human rights.	1.73	0.89	Never spiritual
17	I am not sure whether what I believe is correct.	1.70	0.93	Never spiritual
18	I feel angry when people from other religious beliefs criticize my religion.	1.69	0.87	Never spiritual
19	I cannot feel how others are feeling because, in the first place, they do not also feel my feelings.	1.65	0.78	Never spiritual
20	I see myself as suffering, while others do not consider my problems.	1.64	0.76	Never spiritual
21	I am now questioning if religion can save.	1.56	0.84	Never spiritual
22	I am confused about what true religion is, and I began to question my religion.	1.55	0.81	Never spiritual
23	I feel curious and doubtful if my religion is the true one.	1.54	0.86	Never spiritual

24	I have no idea what other people are going through. I was only concerned with myself and not with others.	1.52	0.65	Never spiritual
25	I am not concerned with what happens to the world or the people around me. It is none of my business.	1.47	0.71	Never spiritual
26	There are times that I doubt if there is a God. I feel that I am changing a lot about my beliefs in religion.	1.45	0.73	Never spiritual
27	I am not interested in the suffering of other people. They have committed many sins against God.	1.43	0.64	Never spiritual
28	I cannot forgive those who hurt me because they deserve not to be forgiven.	1.42	0.67	Never spiritual
	Aggregate Mean :	**2.02**	**0.88**	**Less spiritual**

Range: 1.00-1.74 Never spiritual; 1.75-2.49 Less spiritual; 2.50-3.24 Moderately spiritual; 3.25-4.00 Highly Spiritual

The table reveals that "I see the beauty in all creation – trees, mountains, flowers, seas, and human beings" got the highest mean of 3.25 [Highly spiritual] with a standard deviation of 0.97. Also, the tables reveal that the indicator "I cannot forgive those who hurt me because they deserved not to be forgiven" got the lowest mean of 1.42 [Never spiritual] with a standard deviation of 0.67. Furthermore, the respondents' responses on the spiritual domain have an aggregate mean of 2.02 [Less spiritual] with a standard deviation of 0.88.

The data imply that teachers lack spiritual enrichment. As a result, schools have gradually shifted away from the concept of proper holistic education, which sought to educate students' minds, bodies, and spirits, and toward a reluctance even to bring up the subject of spirituality. Teachers can play an important role in spiritual development because they set the tone for the classroom and provide an efficient and effective learning environment.

The study of Fisher et al. (2000) argues for assessing spiritual health in terms of four domains of well-being concerned with self, community, environment, and God.Fisher et al. (2002) discovered that older teachers with low psychoticism scores and who practice religious faith through church attendance and personal prayer have higher levels of spiritual health.Fisher (2007) explored what factors can be related to teachers' views on spiritual well-being (SWB) and students' perceived help from the school in this area. Spiritual well-being is reflected in people's relationships with themselves, others, the environment, and God. The differences in these four domains of spiritual well-being among teachers and the assistance they provide students in this area are most influenced by school type and year level. Teachers found very few differences between gender, age, or subject specialty.

Table 7 presents the summary table of the respondents' responses to the teachers' domain.

Table 7
Summary Table on the Respondents' Response to Teachers' Domain

	Domains	Interpretation
A	Biological	Poor
B	Psychological	Severe depression
C	Social	Warmth
D	Spiritual	Less spiritual

The table shows that teachers have poor biological domains and have depression based on Beck's Psychological Test. Also, it reveals that teachers have warm social domains despite being less spiritual. The data imply that teachers who suffer from severe depression and poor biological health can have a significant impact on the educational system. Mentally and biologically sick teachers may experience absenteeism, decreased productivity, and poor classroom performance, which can harm students' learning. Although their warmth in social situations could help pupils emotionally, their difficulties may limit the impact of this admirable quality. These teachers may need to gain the coping skills that spirituality frequently offers because of their less spiritual perspective. To assist teachers in overcoming these obstacles and preserving a positive, productive learning environment, schools must provide all-encompassing assistance, such as mental health services, wellness initiatives, and professional development.

4.3 Test of Significance of the Relationship
The study hypothesized that the respondents' profiles do not correlate with the level of teachers' domain.

Table 8
Relationship Between the Profile of the Respondents and the
Perceived Level of Teachers' Domains

Domains	Chi-Square	df	Critical Value	Significance	Result
A. Biological					
Age	6.582	6	12.592	Not significant	Ho accepted
Gender	7.260	1	3.841	Significant	Ho rejected
Civil Status	0.666	2	5.991	Not significant	Ho accepted
Number of Children	0.765	2	5.991	Not significant	Ho accepted
Combined Monthly Family Income	2.744	3	7.815	Not significant	Ho accepted
Religion	6.817	7	14.067	Not significant	Ho accepted
B. Psychological					
Age	28.056	18	28.869	Not significant	Ho accepted
Gender	8.932	3	7.815	Significant	Ho rejected
Civil Status	14.830	6	12.592	Significant	Ho rejected
Number of Children	13.278	6	12.592	Significant	Ho rejected
Combined Monthly Family Income	14.383	9	16.919	Not significant	Ho accepted
Religion	20.355	21	32.671	Not significant	Ho accepted
C. Social					
Age	21.923	18	28.869	Not significant	Ho accepted
Gender	1.010	3	7.815	Not significant	Ho accepted
Civil Status	15.680	6	12.592	Significant	Ho rejected
Number of Children	8.754	6	12.592	Not significant	Ho accepted
Combined Monthly Family Income	3.756	9	16.919	Not significant	Ho accepted
Religion	14.330	21	32.671	Not significant	Ho accepted
D. Spiritual					
Age	11.066	12	21.026	Not significant	Ho accepted
Gender	0.168	2	5.991	Not significant	Ho accepted
Civil Status	2.365	4	9.488	Not significant	Ho accepted
Number of Children	2.562	4	9.488	Not significant	Ho accepted
Combined Monthly Family Income	8.740	6	12.592	Not significant	Ho accepted
Religion	14.359	14	23.685	Not significant	Ho accepted

Furthermore, the table reveals that the civil status of teachers has a relationship with the social domain. The computed Chi-square value of 15.680 is significantly higher at 12.592 at a df of 6. The data imply that teachers' civil statuses are correlated with their responses in the social domain. Also, the table shows that the teachers' profiles do not have significant relationships with the spiritual domain. This means that the profiles of the teachers are different in their spiritual domain. The data imply a substantial difference in the mean self-esteem scores of male and female teachers. These differences are due to male teachers' levels of self-esteem being higher than female teachers. Employee satisfaction among employees is an essential variable for the operation of any organization. The terms job satisfaction, attitude, and ethical morals are frequently used as reflected by an individual's affective orientation toward his job.

Teachers with more significant workload stress had greater classroom management self-efficacy, whereas teachers with tremendous stress had lower self-efficacy and job satisfaction. The study of Klassen and Chiu (2010) reveals that teachers with greater classroom management self-efficacy or more excellent instructional strategies self-efficacy had greater job satisfaction. Teachers have worse health than the general population. Female teachers have a lower quality of life than male teachers, which worsens with age. According to Yang et al. (2009), occupational stress and strain worsen teachers' physical and mental health, whereas coping resources may improve their health. Having adequate coping resources, particularly social support, in the workplace may be critical in improving teachers' quality of life. Moreover, teachers should set up psychological interventions, and psychological counseling should be provided to relieve stress and enhance the quality of life.

The table reveals that the biological domain of teachers has a significant relationship with their genders. The computed Chi-square value of 7.260 is significantly higher than 3.841 at a df of 1. The data imply that teachers' genders are correlated with their responses in the biological domain. Also, the study shows that gender, civil status, and the number of children of teachers have significant

relationships with teachers' responses in the psychological domain. The computed Chi-square values are significantly higher than their respective critical values. This means that the teachers' gender, civil status, and the number of children are correlated with their responses in the psychological domains.

4.4 Test of Significance of the Difference
The study hypothesized that there is no significant difference in the perceived level of teachers' domains. Table 9 presents the results.

Table 9
Significant Differences in the Four Aspects of Teachers' Domain

Source	df	SS	MS	F-value	P-value	Significance	Result
Factor	3	45643.8	15214.6	345.43	0.00	Significant	Ho rejected
Error	439	19336.2	44.0				
Total	442	64980.0					

The table reveals that four aspects of teachers' domains are significantly different. The computed p-value of 0.05 is substantially less than 0.05, meaning that the teachers' domains differ. Individualized assistance is necessary, as data demonstrates notable variations in teachers' biological, psychological, social, and spiritual domains. Teaching effectiveness may be impacted by differences in a student's physical and mental health, social skills, and spiritual views. To address students ' requirements, the university must implement specialized wellness programs, mental health services, and professional development opportunities. This will guarantee that teachers have the necessary support to deliver outstanding instruction.

Zhong et al. (2009) investigated the relationships between depression and health among university teachers in China. Path analysis showed that burnout was a mediator of job stress, the occurrence and exacerbation of depressive symptoms, and poor physical health. Bardach et al.'s (2021) research focuses on teacher collection and the configuration of future professional development programs as areas that would benefit the most from a thorough understanding of the relative importance of various psychological teacher characteristics in facilitating adaptive outcomes.

5. Conclusion
The study concluded that teachers have poor biological conditions, severe psychological depression, have warm social interactions with people around them, and have less spiritual life after the COVID-19 pandemic. These teachers often endure prolonged stress, significantly affecting their physical health. This factor, when combined with heavy workloads and lack of support, contributes to severe psychological depression. Teachers frequently experience burnout, anxiety, and a sense of helplessness, exacerbated by societal undervaluation and insufficient mental health resources. The continuous strain not only affects their well-being but also impacts their professional effectiveness, ultimately hindering the educational environment. Addressing these issues requires systemic changes, prioritizing teachers' health, and providing comprehensive support to ensure their mental and physical well-being. The researchers recommend that the intervention plan for teachers be implemented, monitored, and evaluated to improve their living conditions while doing their job as facilitators of learning.

Conflicts of Interest: The authors declare no conflict of interest.
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