

“Help is finally here!” – Role of Tertiary Institutes in the Promotion of Philippine Mental Health Law (RA 11036)

Jayson Amber T. Ong

Celinniel S.J. De Guzman

Jimnah Naomi T. Ciron

Jonathan P. Diokno

nindiokno@yahoo.com.ph

Marikina Polytechnic College

Abstract To correct negative stigma and support mental health well-being, the Philippines enacted RA 11036 otherwise known as the Philippine Mental Health Law. Using exploratory qualitative method of research, this study mapped the perceived (a) source of mental health concerns, (b) hindrances in the promotion of mental health well-being, and (c) activities to promote RA11036 in tertiary institutes. Participants of this study are 12 teachers and administrators which were identified using maximum variation sampling. Data were collected using one-on-one in-depth interview. Results revealed that there were six perceived sources of mental health issues in the institutes : self-acceptance, culture, financial status, technology, environment, and organizational crisis. Also, there were three hindrances in promoting the law: unawareness, anxiety and inactivity of the implementers. Moreover, there were six perceived activities and solutions to support mental health law: peer counselling, trainings, social activities, religious activities, sharing of experiences, and conduct of research.

Keywords: Mental health law, RA11036, Tertiary institutes

Introduction

The wellness of every individual comprises not only of their physical health but also social and mental health. These three aspects (physical health, social health, and mental health), are the factors that are equally important to a good well-being of an individual (Carlin et.al., 2011). As what the World Health Organization defined in 1948, *“health describes more than the mere integrity of the physical body. It depicts the wholesomeness of a human being understood as a composition of bodily, emotional, intellectual, and social as well as material parts, in which the conditionality of the individual aspects to one another is acknowledged and respected”* (Kuhn & Rieger, 2017). Physical health means being free from any kind of bacterial or viral infections. Social health, is the ability of an individual to make an interpersonal relationship to other people (Navarro, 2009) while mental health of any individual refers to its psychological, emotional and mental well-being. Mental health is one of the factors affecting how people think, feel and make decisions. It is also a factor that affects how we handle stress, empathy and make choices. Being in good mental health status is important in all stages of one’s life from childhood, adolescents and in adulthood (“What is Mental Health”, 2017). As how physical health affects both social and mental health, mental health also affects both physical and social health (“Physical Health and Mental Health”, 2018; Oberheu, 2015; “World Health Organization and Calouste, Gulbenkian Foundation”, 2014).

In the global scale, unaddressed and undiagnosed mental health problems are continuously increasing. Estimated one hundred twenty million people worldwide suffer from depression in which one million commit suicide every year with twenty million unsuccessful attempted suicides (Chelala, 2013). Many people do not seek help from professionals in terms of their mental health because of the social stigma and discrimination (Alexi, Nektarios & Moore, 2016). Depression, as an example of mental illness,

is often viewed by other people as lack of attention and simple sadness, but it is more than that on the contrary. Depression is a real mental illness that can hurt the person suffering from it, and the people who care about them (“Mental Disorders”, April 9, 2018). Moreover, depression, if not treated, may lead to victim’s suicide (“Depression”, 2018).

The population in the ASEAN region is vulnerable to mental illness. About 4%to 20% of ASEAN adult population experience diagnosable mental illness in any specific year (Yates, 2018) with nearly 10% to 20% of the adolescence (“Youth and Mental Health in Asia Pacific”, 2014). This increasing mental health problem in the ASEAN region may lead to further problematic scenarios. For instance, adolescents suffering from extreme depression may resort to the use of illegal drugs and marijuana (World Health Organization. Regional Office for South-East Asia, 2017) that may hamper their psychosocial development. This problem in the long run can be cured if there were no negative social stigma, shame, and embarrassment (Young, 2015) experienced by people with mental illness. Another factor to consider is the inadequacy of mental health workers in the region. For example, there were only .4 per 10,000 psychiatrists, .49 per 10,000 nurses, .07/100000 social worker and 0.07 social worker working in mental health sector in Philippines in 2014 (Yates, 2018), and even aggravated by problems such as available treatments, adequate monetary investments, and facilities which are critically low.

To support people suffering from mental health, the country supplied and crafted the national mental health policy (Administrative Order No. 8, s. 2001) signed by the then secretary of health Manuel M. Dayrit (WHO-AIMS, 2006). Due to the cases that teachers resort to suicides because of depression and stress of their workload, programs, policies and even laws to support the mental health of teachers one needed (The Philippine Star, 2018). Undersecretary Annalyn Selvilla states that “*We need professional advice and (psychological and spiritual) guidance and we will engage with external partners to provide assistance*

to our teachers like a hotline for them to call when they are depressed or have anxiety". Not only teachers had resorted to these things, even students are having suicide ideation (Sta. Maria et al, 2015). Although there were various parts in the legislation in the country which support mental health in the country such as the Penal Code, Magna Carta for Disabled Person, Family Code, and the Dangerous Drug Act, there is no rigid law that solely governs the provisions of mental health services. In 2018, the current President Rodrigo Roa Duterte signed the Philippine Mental Health Bill, and made it into a law. Senator Risa Hontiveros, author of RA 11036 otherwise known as Philippine Mental Health Law, aims to help all people suffering silently in any mental health conditions (ABS-CBN News, 2018). *"This law will secure the rights and welfare of persons with mental health needs, mental health professionals, provides mental health services down to the barangays, integrate psychiatric, psychosocial, and neurologic services in regional, provincial, and tertiary hospitals, improve our mental healthcare facilities and promote mental health education in our schools and workplaces"* – Senator Hontiveros.

Since RA 11036 otherwise known as the Philippine Mental Health Law was enacted, all organizations in the country, including tertiary institutes, must support the aforementioned law. Thus, this study focuses mainly on identifying the role of tertiary institutes in the promotion of the Philippine Mental Health Law or RA 11036. Different professionals from different departments in tertiary institutes were interviewed to determine their actions as regards the promotion of mental health law in education. They play an important role in promoting the law, they serve as implementers and disseminator of information and knowledge in the institution and the life of the students. Their answers were carefully analysed to determine how tertiary institutes contribute to the access of teachers and students of free mental health services in the education.

Purpose of the Research

The main purpose of the study is to map the role of tertiary institutes in the promotion of RA 11036 of Philippine Mental Health Law. Specifically, it sought to (1) determine the perceived source of mental health law, (2) perceived hindrances in the promotion of the law and (3) perceived activities to support the law.

Method

Research Design

The study identified the roles of tertiary institutes in the promotion of RA 11036. This study adopted the exploratory design of qualitative research (Stevens et al., 2012), which intends to reveal the role of tertiary institutes in the promotion of mental health law since the said law was just recently enacted.

The role of the researchers in this study necessitates the identification of the informants' role, personal values, assumptions and biases at the outset of the study. Three of the researchers are undergraduate students of Teacher Education while the other is a science and research faculty who is currently enrolled in a doctorate degree. The three undergraduate (who had their thesis writing) students are supervised and oriented for two meetings to discuss and orient the whole process of the research. The undergraduate students were the ones who collected the data using in-depth interviews. The initial two interviews with the selected participants were done in the presence of the faculty. Succeeding interviews were done solely by the undergraduate students, which were followed by post conference researches after each interview.

Participants and Sampling

The source of data (using maximum variation sampling) of the study included instructors, professors, nonteaching staffs and administrators, who served as implementers for promoting the RA 11036. The total number of participants in this study was not predetermined. Additional participants were recruited depending on the insights of the previous participants. Four instructors, four non-teaching staff, and two administrators and two professors with administrative function, for a total of 12 participants ,were involved in the study.

Instrument Used

The instrument used in the study was prepared by the researchers using probing open-ended questions: (1) What can you say about mental health issues? (2) Do you have personal experience relative to mental health issues? (3) What do you think is the source of such mental health issues? (4) What can you do, as instructor/non-teaching staff/administrator to help people with such issue? Revisions of questions to be asked to next participant were revised after each interviews.

Data Collection and Analysis

A letter addressed to the President of the tertiary institute, through the Director of Research and Development Office was secured prior to the conduct of the study. After approval, selection of participants were initiated. The purpose of the current study was discussed in detail to the prospective participants. People who opt not to participate were not included in the study. On the other hand, people who opt to participate were asked to sign the consent form prior to the interview phase.

Unstructured one-on-one in-depth interview (Boyce & Naele, 2006) was utilized for data collection. With the approved letter to conduct the study, prospected participants were asked if they may be interviewed for the purpose of this study while the

interview will be audio tape recorded. Upon their approval, the researchers proceeded with the in-depth interview process. The interview process for each participant lasted for an hour or two depending on how they answer the research questions. In-depth interview used to extract the detailed information of the selected participants as to how they create a suitable environment for both students and teachers in support to RA 11036. After each interview, the researchers conducted post conference to discuss what was transpired in the interview process, their observations and the transcriptions of interviews. It was also discussed if there is a necessity to include additional participants. Selection of additional participants and data-gathering continued until saturation of data is achieved (Guest, Greg, Bunce, & Johnson, 2006). Saturation of data was achieved only until all the data relative to the current study from the last three participants already existed.

Data analysis with member checking was done after each interview to determine whether it necessitates recruiting additional participant. Prior to the selection and interview with additional participants, open codes from the raw transcripts were determined during the initial phase of analysis to check the saturation of data. After determining the total number of participants due to the saturation of data, second level of analysis was done with the presence of all members to determine the axial codes then finally the emerging domains and themes as to how tertiary institutes help in the promotion of mental health law (Alhojailan, 2012).

Triangulation of data was used to establish the validity and reliability of the data (Carter et al., 2014). It was done in the collection of data wherein the professors and administrators are used to triangulate the data. However, personal bias of the researchers may shape the way they view and understand the collected data. The researchers are open to different thoughts and opinions of participants in relation to the objective of the current study.

Ethical Consideration

In this study, consent prior to the interview with the selected participants was secured. Upon their confirmation of participation in the study, interview was conducted in a location they are most convenient at, for instance, their own offices or respective faculty rooms. These venues selected by the participants made them comfortable to share the needed data about the intention and nature of the study. Introductory questions are included in the interview prior to data collection to establish rapport with the participants. They were reminded that they have the full discretion as whether to answer or not the questions also given to them. Participants were informed if the audio and/or video recording was turned on or off. These protocol were followed throughout the duration of the data collection. To maintain confidentiality, real names of the participants were not revealed in the study. Only the researchers have the access to the data provided by the participants in which no names of participants appeared in all electronic and printed data. All data pertaining to this study was deleted upon the completion of the study.

Findings and Discussions

Along with the Department of Education (DepEd), Technical Education and Skill Development Authority (TESDA), the Commission on Higher Education (CHED) was also mandated by RA 11036 to integrate, develop guidelines and standards, pursue strategies, and ensure mental health promotions in public and private educational institutions (Sec. 34, RA 11036). The following domains and themes were generated based on the transcriptions of the data collected in the study.

Domain	Themes	Description	Sample Verbatim Response
<p>Domain1: Perceived source of mental health concerns</p> <p>This domain refers to the problems faced in the tertiary institutes on how mental health law will be supported. The following are the factors that must be considered in the activities as regards to the promotion of mental health law.</p>	Self acceptance	People who wanted to extend help to students and employees at risk may only help if the person at risk accepts that he/she is vulnerable to mental health issues.	<i>Wala kasi hindi sya tumatanggap ng ano, ng assistance. Personally hindi niya tinatanggap na may issue sya na gamun [He/she do not accept assistance. Personally he/she do not accept that he/she has an issue.]</i>
	Culture	Students and employees of tertiary institutes came from different cultures. Other may have background that is more vulnerable and others may not.	<i>The case of a nation in asia na ang kanilang tradition ay isa sa napili. And that is the way of life and that should be done [The case of a nation in Asia was in the tradition that they are the one who chose. And that us the way of life and that should be done]</i>
	Financial Status	Vast majority of students enrolled in State College and Universities (SUC) do not have enough budget to support their education. Most of them were enrolled and are working at the same time. On the other hand, employees, especially those who have their families to support, are vulnerable to mental health issues rooted from financial problems.	<i>Swerte sya kaya lang na compare ko dun sa may mga ganung case nya na dahil sa kakulangan ng financial ano. Mas lalong lumalalala yung conditions nya. Nalulungkot din kasi ang puno't dulo pa rin financial capabilities. [He/she is lucky, but the others compared his/her case because of financial concern, that is the reason why his/her condition became much worse]</i>
	Technology	Primarily, students, even employees, are prone to computer addiction due to ease of access to modernity of technology which gives them full access to different platforms. Source of addiction when it comes to modernization of technology may be linked to online or offline games, dating websites, social media and pornography.	<i>I think I see the connection. And hindi lang yun. The other reason kung bakit nagmumultiply agad HIV sa buong mundo is because of the computer internet. Because the internet with the computer, we have access to 24/7 red light business [I think I see the connection. And even the other reason why the HIV cases multiplies in the whole world because of the computer internet. Because of the internet, we have access to 24/7 red light business]</i>
	Environment –	Mental health concerns may also root from the immediate environment of the students and employees. Environment is not only linked to tertiary institutes where they belong, but also to their immediate family. There is difficulty in helping people at risk who have trust issues to its environment.	<i>Ito rin ay dahilan sa ahh somebody is push[ed] on the wall. Kapag ikaw ay napush on the wall okay? Makikita mo naming yung ano.yung kanyang huling sulat tapos ano ung dinaanan nya ayon [This is also the reason to somebody push[ed] on the wall. If you are already pushed on the wall, you will see that there are last words that he/she struggling.</i>

	<p><i>Organizational Dilemma</i></p>	<p>Organization also affects the mental health condition of an individual based on how it was designed. Numerous workloads of student and employees are identified as one factor which adds up to stress. Moreover, miscommunications and having no clear protocol and channelling as regards to requisitions of documents as well as power tripping were also identified as key factors.</p>	<p><i>Maging matino yung admin ilagay yung tama yung marunong at nakakaintindi para umusad at maging mas maganda yung takbong institusyon [The admin should be lucid in order to run the institution better.]</i></p> <p><i>Wala pa rin dahil dun sa ano.. wala pa ring budget. Ngayon tengga na naman yan. Yan yung mga nakakastress. Yan ang problema. Anong mangyayari sa administrasyon natin? Mga namununong di magagaling. Dapat ayun nga. Ang the best nyan palitan lahat ng mga nakaupo ilagay yung mga marurunong. [No budget, now the projects are on hold and result to stress. This is the problem, what will happen to our administration? all are not good leader, they are dumb. The best solution for that is to change so that all positioned personnel are not dumb.</i></p>
<p>Domain 2: Perceived hindrances in the promotion of mental health law</p> <p>Educational institutes were mandated to create and develop programs and policies designed to raise awareness on mental health issues, identify and provide support and services for individuals at risk (Sec. 24, RA 11036). Students, teaching and non-teaching staffs, and administrators are all considered as individuals at risk. However, the following were identified as hindrances in supporting RA11036:</p>	<p><i>Unawareness</i></p>	<p>Data shows that only one department has the awareness of RA 11036. Aside from their department, teachers and administrators were surprised that such law is existing. Moreover, they were not aware that mental health concerns are part of a person's well-being. It also revealed that people who are not aware of the latter shows lack of empathy to people who suffers mental health condition.</p>	<p><i>Nako, very minimal lang, siguro nasa mga 10 percent lang, I don't know if there is a law, pero hindi ko pa na eexplore yung laman niya, [Actually, it's very minimal. I think about 10 percent only. I don't know if there's a law, since I wasn't able to explore the content yet.]</i></p> <p><i>I do not know the Philippine mental health law</i></p>
	<p><i>Anxiety</i></p>	<p>Majority of the participants of the study are anxious as to how to help persons at risk. This is deeply rooted on the connotation that they don't have proper training to handle such cases. They believe that they may only make the situation more severe.</p>	<p><i>Mahirap mag bigay ng advice kasi kaylangan yung lalapit sa yo alam mo kung paano mo iaaddress yung issue niya, kung sakali man makapagbigay kasi ng malinav na advice ang isang tao, maaaring, mali ang gawin ng kanyang inaadvicean [It's too hard to give advice to the persons who approach you if you really don't know how to address his/her issue, if there is a case that you give a wrong advice to a person, there is a tendency that he/she will do wrong things.]</i></p>

	<p><i>Inactivity participants</i></p>	<p>Majority of the participants perceived that activities designed solely to support the law are missing. Although, one department iterated that there were programs to support students, they believe that support to employees when it comes support such law does not exist.</p>	<p><i>Health education lang, Talagang kailangan mong kausapin. Ayun lang naman talaga ang best way eh. Talk. Talk to him. Yun lang, Yun lang ang best way talaga kapag may mental ano [issue].. tapos kung malala naman sya edi hahanap na lang kami ng referral. Kesa ayun. Wala pang program na ganyan {Only health education. You really need to talk to him. That's the best and only way. Talk. Talk to him. That's it. That's the best thing you can do when some has a mental [issue], but if it's really worse, you really need to look for a referral instead of that. Since there's no program yet for it.}</i></p>
<p>Domain 3: Perceived activities to support RA11036</p> <p>If not prevented, as perceived by participants, people vulnerable to mental health conditions may lead to inability to think and decide rationally, depression, addiction and death due to suicide. A retrospect of activities done were made by the participants however most were not designed in support to the said law. The following were the suggested activities of the participants:</p>	<p><i>Peer counselling</i></p>	<p>Students and employees of the same age bracket as the people at risk may serve as their counsellors. Student leaders, officemates and faculty members of the same department may act as the counsellors of their peers. The bond of friendship among their peers are pillars that can support each other in times of emotional imbalance of the person at risk.</p>	<p><i>Ang instinct diyan ay is mag council, counseling mag council {The instinct here is to conduct council, council and council}</i></p> <p><i>Pinaplano naming yung magkaroon ng peer counselors training na kung saan yung mga- kasi diba ang tendency ang mga estudyante nahihiyang lumapit sa authority halimbawa sa mga guidance counselors ayaw nilang pupunta pa doon, hindi sila makapagconfide {We are planning to have a peer counselors training because these are tendencies that the students are approaches to the authority such as guidance counselors, they don't want go there even to confide.</i></p>
	<p><i>Trainings</i></p>	<p>Attendance to conferences, seminars, and other student and employees development program play great roles in the promotion of mental health law. This may increase the awareness of vast majority on the said law and correct the stigma on mental health issues. Moreover, this may also give positive support to people who wanted to extend their help but are anxious due to their belief that they are not capable of helping since they don't have the proper training in handling such</p>	<p><i>Attend kang seminar about health about mental health law o kaya you invite some speakers. {you should attend on the seminar about mental health law or invite some speakers</i></p>

<i>Social Activities</i>	Gatherings such as sports festival, foundation day and year end celebrations are helping people with mental health concerns to feel that they are more accepted by the institutes. Moreover, organizations which support common interest also play a great role in the promotion of positive mental health.	<i>Yung trainings, yung attendance to research presentation, yun yung ating nasa program pero yung sa mental health, hindi ba yung mga activities natin katulad sa Christmas party, that promotes mental health din!{Trainings, attendance to research presentation, these things are in our program but mental health, our activities such as Christmas party, promote mental health also}</i>
<i>Religious Activities</i>	Regardless of religion, it is perceived that religious activities may also lift one's mental health condition. Praying, conducting masses, worshiping and having religious cell lift the morale of persons at risk.	<i>More of a religious person, so yung kanyang personal issues dinadaan nya sa dasal, sa ganun, religious nature ng coping nya. {more of a religious person, so to overcome his/her personal issue he/she actually pray, coping with religious nature.}</i> <i>Kailangan magbasa ka ng Bible ahm talk it out {You need to read bible, talk it out}</i>
<i>Sharing of experiences</i>	Persons with mental concerns often seek advice from people whom they believe can help them to surpass whatever scenario they are going through. By sharing experiences on how they were able to cope up with mental concerns give positive emotional support and strength to face their challenges head on.	<i>"they just need someone to listen to them. Kailangan lang na mailabas nila yan mapakingan sila at magandang therapy yon"</i> <i>They just need someone to listen them, they need to speak it out, listen to them and that is a good therapy}</i>
<i>Conduct of research</i>	It is also suggested to conduct research activities to further support people at risk and the said law. Mechanisms on how to overcome and negate the identified sources of mental health concerns in tertiary institutes may be addressed. For instance, research-based protocols in handling different scenario such as clarity of protocol, prompt actions, and equal distribution of work load may be sought.	<i>"kailangan meron kayong ano yung basis para ano [to help] tsaka importante talaga yon katulad ng ginagawa nyo. Tanong tanong, research, magulang, case study whatever there's a need." {You should have a basis[to help] and also it is important like what you are doing [research]. Conduct research to the parents, case study or whatever there's a need}</i>

The state of well-being of every person is composed of physical, social and mental health. These three are intertwined with one another. However, the most difficult thing to handle among three is the mental health in which manifestation is not that visible

unless made visible by the person currently in the state of any mental health problem. Moreover, stigma towards people with such issues hinders the promotion of the mental health well-being of people at risk. This stigma is present even among the world of professionals (Zartaloudi & Madianos, 2010). To support the mental health well-being of every Filipino, the RA 11036, otherwise known as the Philippine Mental Health Law, was mandated.

It is included in the Philippine Mental Health Law (RA 11036) that all educational institutes in the Philippines, such as Department of Education (DepEd), Technical Education and Skill Development Authority (TESDA) and Commission on Higher Education (CHED), must incorporate the promotion of positive mental health well-being in their curriculum.

This study focused on mapping the issues arising in tertiary institutes as regards to mental health well-being of the students and employees. It was found out that there were six perceived sources of mental health issues in the institutes and these are self-acceptance, culture, financial status, technology, environment and organizational dilemma. It was also found out that there are three hindrances in promoting the law –unawareness, anxiety and inactivity. However, there were six perceived activities and solutions to support mental health law: peer counselling, trainings, social activities, religious activities, sharing of experiences and research.

There is no definite boundary to which we can tell right away people who suffering from mental health problem (Mental Illness Knows No Boundaries, 2015). This is common that if not addressed right away may lead to a bigger problem. Upon identifying members of the community suffering from mental health condition, we should also learn the source of such. This study identified the possible source of mental health problem and ways how to address it. We can create suitable environment to help them overcome what they are going through. As members

of the academic community, we should also bear in our shoulders how we can help each other to uplift one another if there are parts of the community suffering from mental health problem.

The findings of the research have important implications. Given that the RA 11036 was a recently enacted law, all units of HEI's, with the intervention of the respective administrators, should come up with definite plans on how to implement the said law from initial steps like awareness campaigns, identifying of vulnerable members of the institutes, pre and post-psychological interventions and budget allotment is necessary, because of the law, the administrators, students and etc. are being protected therefore the help was finally here for the administrators and students. Also, adjustment to some institutional policies such as class schedules and deadlines, and deloading of workloads can be helpful in the promotion of the said law.

It is imperative that teachers, in all level of education, are the front lines of honing their students to be well rounded. This nurturing not only focuses on academics, physical aspects but more importantly on the mental health of their students. It is ironic that teachers gave light to students but there are times that teachers are the ones who need such light. Light is even dimmer, closer to nothingness, when mental health of teachers became a concern. Thru this study, educational institutions are called upon to watch out the mental health status of their educators. A loss of an educator's life is tantamount to a brick lost in building our future. Administrators may work on to remove the negative stigma in mental health for the educators express their mental health concerns to proper authorities without any hesitation.

...

References

- Alexi, N., & Moore, K. (2016). Seeking help for mental illness: A qualitative study among greek australians and Anglo-Australians. 13, 1-12.
- Alhojailan, M.. (2012). Thematic analysis: A critical review of its process and evaluation. *West East Journal of Social Sciences*. 1(1), 39-47.
- Boyce, C. & Palena, N.. (2006). *Conducting in-depth interviews: A guide for designing and conducting in-depth interviews for evaluation input*. Retrieved from http://www2.pathfinder.org/site/DocServer/m_e_tool_series_indepth_interviews.pdf
- Carlin, H., Jarman, I., Chambers, S., Lisboa, P., Knuckey, S., Perkins, C. & Bellis, M. (2011). *Northwest mental wellbeing survey: What influences wellbeing?* Northwest Public Health Observatory. Retrieved from <http://www.champs-publichealth.com/writedir/9fb5What%20influences%20wellbeing.pdf>
- Carter N, Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A.J. (2014). The use of triangulation in qualitative research. *Oncology Nursing Forum*. 41(5).
- Chelala, C. (2013). Untreated mental health issues: A global reality. *The Epoch Times*. Retrieved from https://www.theepochtimes.com/untreated-mental-health-health-issues-a-global-reality_108595.html.
- Depression. (2018). *World health organization*. Retrieved from <http://www.who.int/news-room/fact-sheets/detail/depression>.
- Guest, G., Arwe, B., & Johnson, L. (2006). How many interviews are enough?: An experiment with data saturation and variability. *Field Methods*. 18(1), 59–82. Retrieve from <https://doi.org/10.1177/1525822X05279903>.

- Kuhn, S., & Rieger, U. (2017). Health is a state of complete physical, mental and social well-being and not merely absence of disease or infirmity. DOI: <https://doi.org/10.1016/j.soard.2017.01.046>.
- Mental Health Disorders. (April 9, 2018). *World Health Organization*. Retrieved July 17, 2018 from <http://www.who.int/news-room/fact-sheets/detail/mental-disorders>.
- Mental Health Commission of NSW (2016). *Physical health and mental wellbeing: evidence guide*, Sydney, Mental Health Commission of NSW© 2016 State of New South Wales. ISBN: 978-0-9923065-8-8.
- Mental health. Geneva, World Health Organization, 2014.
- Mental Illness Knows No Boundaries* (2015). News Leader. Retrieved from www.newsleader.com/story/opinion/columnists/2015/04/30/mental-illness-knows-boundaries/26654923/.
- Navarro, V. (2009), What we mean by social determinants of health. *International Journal of Health Services*, 39(3), 423–441, (doi: 10.2190/HS.39.3.a)
- Oberheu, A.M. (2015). *How your mental health affects your physical health*. Retrieved from <http://blog.bcbsnc.com/2017/03/mental-health-affects-physical-health/>.
- Physical Health and Mental Health. (2018). Retrieved from <https://www.mentalhealth.org.uk/a-to-z/p/physical-health-and-mental-health>.
- Sampling. (n.d.). Laerd: Dissertation. Retrieved from <http://dissertation.laerd.com/purposive-sampling.php>.
- Sta. Maria, L., Estanislao, R.W., & Liu, Y. (2015). A multivariate analysis on suicide ideation among university students in the Philippines". *Asia-Pacific Social Science Review*, 15(1), 46-52.

- Stevens, R., Loudon D., Cole, H., & Wrenn, B. (2012). Concise Encyclopedia of Church and Religious Organization <https://books.google.com.ph/books>
- The Philippine star (2018). *Deped probes teacher suicides*. Retrieved from <https://www.philstar.com/other-sections/education-and-home/2018/08/30/1846977/de-ped-probes-teacher-suicides>.
- What is Mental Health?. August 29, 2017. Retrieved from <http://www.apastyle.org/learn/faqs/web-page-no-author.aspx>.
- WHO-AIMS Report on Mental Health System in The Philippines, WHO and Department of Health, Manila, The Philippines, 2006.
- World Health Organization & CalousteGulbenkian Foundation. Social determinants of Mental health. Geneva, World Health Organization, 2014.
- World Health Organization. Regional Office for South-East Asia. (2017). Mental health status of adolescents in South-East Asia: evidence for action. World Health Organization. Regional Office for South-East Asia. <http://www.who.int/iris/handle/10665/254982>.
- Yates, M. (2018). Out of the shadows: Mental health in asia pacific. *Eye for Pharma*. Retrieved from <https://social.eyeforpharma.com/column/out-shadows-mental-health-asia-pacific>.
- Young, J. (2015). Untreated mental illness: understanding the effects. *Psychology Today*. Retrieved from <https://www.psychologytoday.com/us/blog/when-your-adult-child-breaks-your-heart/201512/untreated-mental-illness>.
- Youth and Mental Health in Asia Pacific (2014). United Nations. Retrieved from <https://www.unescap.org/announcement/youth-and-mental-health-asia-pacific>.

Zartaloudi, A., & Madianos, M. (2011). Stigma related to help seeking from a mental health professional. *Health Science Journal*. 4(2) (Retrieved from <http://www.hsj.gr/medicine/stigma-related-to-helpseeking-from-a-mental-health-professional.pdf>)