**Nurse educators' level of stress management vis a vis their well-being**

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<https://doi.org/10.63498/inclinphs3>**Abstract**

**Aim:** This study aimed to examine the relationship between stress management and overall well-being among nurse educators at Systems Plus College Foundation and to determine whether stress management and well-being differ according to selected demographic and professional characteristics.

**Methodology:** The study employed a descriptive–correlational quantitative research design involving a total enumeration of 35 nurse educators. Data were collected using a validated structured questionnaire measuring stress management domains—self-awareness, coping strategies, time management, help-seeking behavior, and work–life balance—and overall well-being based on Seligman's PERMA model. The instrument demonstrated high internal consistency (Cronbach's  $\alpha = 0.882$ ). Descriptive statistics and correlational analyses were utilized to analyze the data.

**Results:** Findings revealed that nurse educators experienced moderate levels of stress while demonstrating strong stress management practices across emotional, cognitive, social, and spiritual dimensions. Overall well-being was high, particularly in engagement, relationships, meaning, and accomplishment. A significant positive relationship was found between stress management and well-being. Younger and less experienced nurse educators exhibited relatively greater vulnerability to stress compared to their more experienced counterparts.

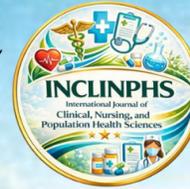
**Conclusion:** Effective stress management is significantly associated with enhanced well-being among nurse educators, contributing to resilience, professional satisfaction, and sustained engagement in academic roles. The findings highlight the importance of institutional support mechanisms, including structured wellness programs, mentoring systems, and balanced workload policies, to promote educator well-being and maintain the quality of nursing education.

**Keywords:** Nurse educators, stress management, well-being, resilience, nursing education

**INTRODUCTION**

Well-being has gained more prominence in healthcare and education settings due to its stress-reduction capabilities and positive impact on one's overall health. It focuses on maintaining a balanced mental and physical state, allowing individuals to better understand their thoughts, feelings, and physical sensations. In the case of nurse educators, who routinely balance high-stress roles within academic and clinical environments, interventions aimed at improving well-being hold promise for enhancing emotional resilience, mental acuity, and overall psychological health. These interventions can significantly reduce nursing students' negative emotions, helping them manage stress and anxiety. College nursing educators should consider adopting such interventions to promote the mental health of students (Labrague & de Los Santos, 2021).

At the global level, mental health issues have increasingly emerged as vital public health concerns. Stress—once underestimated—has become recognized as a pervasive issue across industries. It is described as the body's reaction when perceived demands surpass available resources, and it has become an integral part of modern life, contributing to a range of physical and well-being challenges. Chronic stress is linked to emotional exhaustion, compromised work performance, and diminishing mental health, significantly affecting individuals and the institutions where they work. In support of this, a recent study examined the effect of various interventions on stress and well-being across diverse groups (students, healthcare workers, corporate employees), highlighting their potential to promote well-being (Lunsky, 2022). A meta-analysis for nursing students showed that these interventions significantly lowered levels of depression (SMD =  $-0.42$ , 95% CI:  $-0.56$  to  $-0.28$ ,  $P < 0.001$ ), anxiety (SMD =  $-0.32$ , 95% CI:  $-0.47$  to  $-0.17$ ,  $P < 0.001$ ), and stress (SMD =  $-0.50$ , 95% CI:  $-0.65$  to  $-0.35$ ,  $P < 0.001$ ), while also raising levels of well-being (SMD =  $0.54$ , 95% CI:  $0.33$ – $0.75$ ,  $P < 0.001$ ).



Internationally, well-being interventions supported by increased present-moment awareness and judgment-free practices have been shown to improve emotional regulation, enhance cognitive clarity, and reduce stress (Schuman-Olivier et al., 2020; Ram et al., 2025). These programs have been implemented in workplaces globally, including hospitals, schools, and corporate offices, resulting in improvements in mental wellness and resilience (Micklitz et al., 2021).

Transitioning to the Philippine context, mental health awareness has also increased and has been strengthened through national policies and programs. The Philippine Mental Health Act (Republic Act No. 11036), signed into law in 2018, emphasizes the importance of integrating mental health services within the public health system (Republic of the Philippines, 2018). Related initiatives such as the National Mental Health Program promote early intervention to address the growing demand for mental health services (Parr et al., 2021). The DOH Memorandum 2020-0220 further provides guidelines for psychological first aid and stress debriefing during emergencies. Despite these developments, disparities remain in the accessibility and continuity of mental health services, especially for specific occupational groups (World Health Organization, 2021). At the local level, community wellness workshops and stress management seminars have gained momentum but often remain fragmented and inconsistently implemented (De Kock et al., 2021; Varshini et al., 2025).

Within this national and local landscape, nurse educators represent a distinct population at the healthcare–education interface. Unlike clinical nurses whose stressors are primarily rooted in patient-care demands, and unlike nursing students whose stressors often center on academic performance and training adjustment, nurse educators experience a dual role that combines teaching responsibilities with clinical expectations. They carry multiple academic obligations such as lesson preparation, grading, curriculum planning, student mentoring, and institutional requirements, while also maintaining clinical competence. These combined responsibilities make nurse educators especially vulnerable to occupational stress.

Despite the growing interest in well-being interventions, empirical studies focusing specifically on nurse educators—particularly in the Philippine context—remain limited. While research has explored stress among nurses, coping among nursing students, and well-being programs among teachers in general, less attention has been directed to nurse educators and how demographic factors may shape their stress management practices and well-being outcomes.

This study contributes to the existing body of knowledge in several significant ways. Theoretically, it advances understanding by integrating Lazarus and Folkman's Transactional Model of Stress and Coping (1984), Seligman's PERMA (Positive Emotion, Engagement, Relationships, Meaning, Accomplishment) Well-Being Theory (2018), and Neuman's Systems Model into a unified explanatory framework (1972). By conceptualizing stress management and well-being as interconnected processes involving appraisal, adaptive coping behaviors, systemic protection, and multidimensional flourishing, the study offers a more comprehensive explanation of stress among nurse educators.

Methodologically, the study operationalizes stress management into measurable components—self-awareness, coping strategies, help-seeking behavior, time management, and work-life balance—and examines their relationship with multidimensional well-being outcomes. By incorporating demographic variables as antecedent factors, the research applies a structured, variable-driven approach that enables empirical testing of theoretical relationships within a clearly defined professional group.

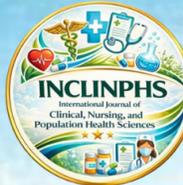
At the institutional and policy level, the findings aim to provide evidence-based guidance for faculty wellness programs, workload policies, mentoring systems, and mental health initiatives in nursing education settings. The study's technical novelty lies in the integrated application of the Transactional Model of Stress and Coping, PERMA Well-Being Theory, and Neuman's Systems Model within a Philippine nursing education context. Few local studies have combined these theoretical perspectives while simultaneously linking demographic characteristics, stress management behaviors, and multidimensional well-being in a single empirical model.

By focusing on this under-researched yet critical population, the study seeks to inform targeted institutional wellness strategies that promote resilience, faculty retention, and workforce sustainability. Improved well-being among nurse educators benefits not only individuals but also strengthens the quality of nursing education and contributes to better healthcare outcomes nationwide.

### Review of Related Literature and Studies

Research on stress in nursing education consistently emphasizes the role of academic demands, role expectations, and support systems. Among nursing students, stress has been associated with academic concerns and interpersonal or "interface" issues, while adaptive coping strategies appear protective. However, these findings also support the need for structured stress management programs to build sustainable coping capacity in nursing populations (Nebhinani et al., 2020). Although student-focused studies provide important evidence of intervention effectiveness, nurse educators face a different stress ecology due to their combined academic and clinical responsibilities.

In the Philippine setting, growing awareness of stress and mental health has emphasized the need for effective interventions (Yasin et al., 2020). Policy developments, including the Philippine Mental Health Act and related national programs, underscore the importance of integrating mental health services into public systems to improve access to



psychological support and stress management strategies (Maceda et al., 2022; Parr et al., 2021). Nonetheless, service availability remains uneven across regions and sectors, highlighting continuing gaps in occupationally targeted support (WHO, 2021; Lunsy, 2022).

Occupational stress among nurses has been closely linked to workload burden and organizational expectations (Woo et al., 2020). In academic settings, this dynamic extends to nurse educators, whose occupational stress is shaped by intensified workload and institutional performance demands. Nurse educators are expected to prepare students for increasingly complex healthcare environments while simultaneously meeting institutional requirements. Major stressors include accreditation processes, administrative workload, demanding student mentoring responsibilities, and the need for continuous professional adaptability (Brown et al., 2020). These pressures are further amplified by expanding research and publication expectations within academic institutions, which reduce time and resources available for self-care and professional development (Chegini et al., 2020; Yasin et al., 2020).

These combined pressures are associated with burnout, anxiety, and depression, particularly through emotional exhaustion and sustained emotional labor (Chen et al., 2020). Emotional exhaustion, a central component of burnout, has been associated with reduced professional engagement and diminished work performance, potentially compromising organizational effectiveness (Woo et al., 2020; Dall'Ora et al., 2020). Moreover, prolonged stress may contribute to physical health problems and reduced overall well-being (Crowe et al., 2021). Technological shifts also introduce additional cognitive and performance demands. The expansion of virtual and blended learning has required educators to adapt rapidly, and limited training or support may heighten stress and anxiety related to performance expectations (Watermeyer et al., 2021; Domingo et al., 2021).

Institutional support is repeatedly identified as a critical moderator of stress outcomes. Limited access to wellness initiatives, insufficient professional development support, and restricted organizational responsiveness may contribute to isolation and frustration (De Kock et al., 2021). In addition, mentoring students through academic and personal challenges requires sustained professional engagement, which may intensify emotional burden in high-stakes training contexts (Maben & Bridges, 2020; Woo et al., 2020). When unmanaged, these conditions may contribute to lower job satisfaction, absenteeism, and turnover, which disrupt program continuity and indirectly affect student learning (Marufu et al., 2021).

Broader structural factors also shape nurse educators' well-being, including role ambiguity, role conflict, competitive academic environments, and employment insecurity for contractual faculty members (Lee & Kim, 2020; Micklitz et al., 2021; Yasin et al., 2020). Gender-related pressures may further influence stress experiences, particularly among women who may face compounded work and family role demands (Natarajan et al., 2025; Natarajan et al., 2025). At the same time, evidence suggests that supportive workplace relationships and structured interventions can strengthen coping and resilience, reinforcing the value of institutional strategies that normalize help-seeking and provide targeted stress management skills (Zheng et al., 2024; Unjai et al., 2024).

### Synthesis of Reviewed Literature and Studies

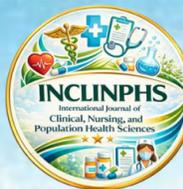
The reviewed literature establishes that stress in nursing education is multidimensional and shaped by workload intensification, emotional labor, institutional expectations, technological transitions, and the availability of organizational support. While student-focused research demonstrates that structured interventions improve mental health outcomes and well-being, nurse educators experience distinct stressors because they simultaneously carry academic responsibilities and clinical expectations. Philippine policy developments highlight the growing priority of mental health; however, gaps remain in consistent, occupation-specific implementation of wellness support, particularly within academic institutions.

Although existing studies describe stress and burnout among nursing professionals, the literature remains limited in examining nurse educators in the Philippine context using an integrated, variable-driven approach that links demographic characteristics to stress management dimensions and multidimensional well-being. This gap supports the need for a focused investigation of nurse educators' stress management practices and well-being outcomes to inform tailored institutional wellness strategies.

### Theoretical Framework

This study is anchored on three complementary theoretical perspectives: Lazarus and Folkman's Transactional Model of Stress and Coping (1984), Seligman's PERMA Well-Being Theory (2018), and Betty Neuman's Systems Model (1972). Together, these frameworks provide an integrated explanation of how nurse educators experience stress, implement coping strategies, and sustain multidimensional well-being within demanding academic and clinical environments.

The primary theoretical foundation is the Transactional Model of Stress and Coping, which conceptualizes stress as a dynamic interaction between the individual and the environment. Stress arises when individuals appraise occupational demands as exceeding their available coping resources. The model identifies two stages of cognitive appraisal: primary



appraisal (evaluation of threat, harm, or challenge) and secondary appraisal (assessment of coping capacity). It further distinguishes between problem-focused coping, which addresses the source of stress, and emotion-focused coping, which regulates emotional responses.

In this study, these processes directly correspond to the stress management variables measured—self-awareness, coping strategies, help-seeking behavior, time management, and work-life balance. These components reflect how nurse educators appraise occupational stressors and implement adaptive behavioral and cognitive responses to maintain professional functioning.

Seligman’s PERMA Well-Being Theory expands the framework by conceptualizing well-being as a multidimensional construct consisting of Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment. This perspective reinforces the premise that well-being is not merely the absence of stress but the presence of positive psychological resources. In nursing education, PERMA aligns with the study’s well-being indicators by linking effective stress management to emotional stability, professional engagement, collegial relationships, sense of purpose, and sustained achievement.

Betty Neuman’s Systems Model further strengthens the framework by viewing nurse educators as open systems exposed to internal and external stressors. The model emphasizes lines of defense and resistance that preserve system stability and introduces primary, secondary, and tertiary prevention strategies. Within this study, adaptive behaviors such as self-regulation, support-seeking, and balanced role management represent protective mechanisms that prevent stress-related dysfunction and preserve overall well-being.

Collectively, the Transactional Model explains stress appraisal and coping processes, PERMA explains multidimensional flourishing, and Neuman’s Systems Model explains systemic protection and prevention. The integration of these theories provides a comprehensive foundation for examining how nurse educators manage stress while sustaining resilience and professional quality of life.

### Conceptual Framework

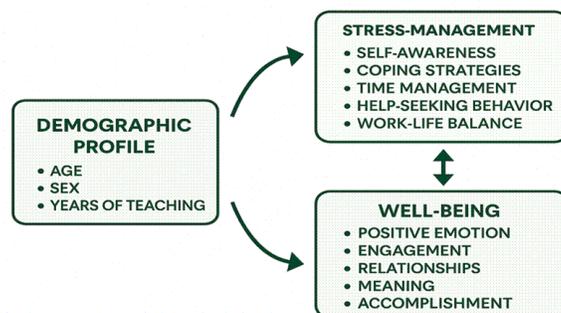
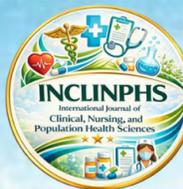


Figure 1. Conceptual Framework

The conceptual framework of this study illustrates the interconnected relationships among demographic profile, stress management, and overall well-being of nurse educators. Grounded in the Transactional Model of Stress and Coping (Lazarus & Folkman, 1984) and enriched by principles of positive psychology emphasizing resilience and flourishing (Seligman, 2018), the framework explains how personal and professional characteristics influence educators’ capacity to manage stress and maintain psychological health.

In this model, demographic variables—age, sex, years of teaching experience, and highest educational attainment—serve as antecedent factors. These characteristics shape stress perception, coping preferences, and resilience capacity. Greater teaching experience and higher educational attainment are associated with refined coping skills, enhanced professional identity, and stronger self-efficacy, which function as buffers against occupational stress (Chen et al., 2020; Chegini et al., 2020). Differences in age and sex may also influence stress appraisal patterns and coping styles (Lee & Lee, 2020).

Stress management functions as a mediating variable and is operationalized through self-awareness, coping strategies, help-seeking behavior, time management, and work-life balance. These components represent adaptive responses to occupational stressors and directly influence overall well-being.



Well-being is conceptualized using Seligman's PERMA model and encompasses emotional, cognitive, relational, and professional dimensions (Maceda et al., 2022; Seligman, 2018). Effective stress management enhances positive emotion, engagement, meaningful relationships, purpose, and accomplishment.

The framework further recognizes a reciprocal relationship between stress management and well-being. While adaptive coping strengthens well-being, a high level of well-being reinforces resilience and improves coping capacity (Cabrera-Aguilar et al., 2023; Lunsky, 2022). This bidirectional interaction supports sustained professional performance and institutional stability.

## Statement of the Problem

Nurse educators play a critical role in shaping future healthcare professionals while simultaneously managing the demands of academic instruction, clinical competence, research productivity, and institutional responsibilities. These multifaceted roles expose nurse educators to sustained occupational stress, which may adversely affect their well-being, job satisfaction, and professional sustainability. While international and local studies have extensively examined stress, burnout, and well-being among nurses and nursing students, empirical evidence focusing specifically on nurse educators—particularly within the Philippine higher education context—remains limited. Moreover, there is insufficient understanding of how stress management practices influence overall well-being when demographic and professional characteristics are taken into account. The lack of institution-specific and population-focused evidence constrains the development of targeted wellness interventions and support mechanisms for nurse educators. Addressing this gap is essential to promote educator resilience, enhance teaching effectiveness, and sustain the quality of nursing education. Thus, this study sought to examine the relationship between stress management and overall well-being among nurse educators in a college foundation, with particular attention to demographic and professional factors.

## Research Objectives

### General Objective

To examine the relationship between stress management and the overall well-being of nurse educators in a college foundation.

### Specific Objectives

Specifically, the study aimed to:

1. To describe the demographic and professional profile of nurse educators in terms of age, sex, years of teaching experience, and highest educational attainment.
2. To determine the level of stress management among nurse educators in terms of stressors, lines of defense, and prevention strategies as viewed through Betty Neuman's Systems Model.
3. To describe the overall level of well-being of nurse educators based on Seligman's PERMA model.
4. To determine the significant relationship between stress management and overall well-being of nurse educators.
5. To examine the relationship between stress management and the demographic profile of nurse educators.
6. To determine the relationship between overall well-being and the demographic profile of nurse educators.

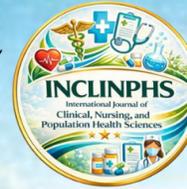
## Research Questions

The study sought to answer the following questions:

1. What is the demographic and professional profile of nurse educators in terms of age, sex, years of teaching experience, and highest educational attainment?
2. What is the level of stress management among nurse educators as viewed through Betty Neuman's Systems Model in terms of stressors, lines of defense, and prevention strategies?
3. What is the overall level of well-being of nurse educators in terms of positive emotion, engagement, relationships, meaning, and accomplishment?
4. Is there a significant relationship between the level of stress management and overall well-being of nurse educators?
5. Is there a significant relationship between stress management and the demographic profile of nurse educators?
6. Is there a significant relationship between overall well-being and the demographic profile of nurse educators?

## Research Hypotheses

To complement the quantitative correlational design, the following null hypotheses are proposed:



*H<sub>01</sub>*: There is no significant relationship between stress management and the overall well-being of nurse educators.

*H<sub>02</sub>*: There is no significant relationship between stress management and the demographic profile of nurse educators.

*H<sub>03</sub>*: There is no significant relationship between overall well-being and the demographic profile of nurse educators.

## METHODS

### Research Design

This study utilized a descriptive–correlational quantitative research design to examine the levels and relationships between stress management and well-being among nurse educators at Systems Plus College Foundation. The design allowed for the systematic collection and statistical analysis of numerical data without manipulation of variables.

The descriptive component assessed baseline levels of stress management in terms of self-awareness, coping strategies, time management, help-seeking behavior, and work-life balance, as well as overall well-being across physical, emotional, mental, psychological, social, spiritual, and occupational domains. The correlational component examined the relationships between stress management and well-being and determined differences when respondents were grouped according to demographic variables, including age, gender, years of teaching experience, and highest educational attainment.

Data were collected using structured Likert-scale questionnaires, enabling quantitative analysis of patterns, trends, and associations among variables. As supported by Creswell and Creswell (2022), a descriptive–correlational design is appropriate for identifying relationships among variables and generating evidence-based findings. This design was therefore suitable for informing institutional wellness interventions for nurse educators.

### Population and Sampling

The study was conducted at Systems Plus College Foundation (SPCF), a private, non-sectarian institution in Angeles City, Pampanga, recognized for its academic excellence and strong College of Nursing program dedicated to preparing future healthcare professionals. The target population consisted of all 35 nurse educators and clinical instructors employed at SPCF at the time of the study.

Given the small and clearly defined population, the study employed total enumeration (census sampling), a non-probability sampling technique in which all eligible members of the population were included. This approach ensured comprehensive representation of nurse educators within the institution and minimized sampling bias. By including the entire population, the study strengthened internal validity and captured the full range of experiences related to stress management and well-being among SPCF nurse educators.

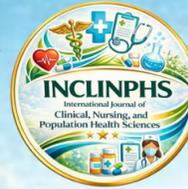
### Instruments

The study employed a researcher-developed, self-structured survey questionnaire designed in alignment with the study's research objectives and integrated theoretical framework (Transactional Model of Stress and Coping, PERMA Well-Being Theory, and Neuman's Systems Model). The instrument was constructed by the researcher based on relevant literature and established theoretical constructs rather than directly adopted from a single existing standardized tool. It was structured to measure two primary variables: stress management (self-awareness, coping strategies, time management, help-seeking behavior, and work-life balance) and overall well-being (physical, emotional, mental, psychological, social, spiritual, and occupational domains).

Content validation was conducted by three experts in nursing education and research methodology, all holding graduate degrees and with experience in academic instruction and research evaluation. They reviewed the instrument for clarity, relevance, construct alignment, and appropriateness of items relative to the study variables. Necessary revisions were made based on their recommendations to strengthen content validity.

Pilot testing was conducted among ten (10) nurse educators who were not included in the main study to assess clarity, comprehensibility, and internal consistency of the instrument. Reliability testing was performed using Cronbach's Alpha to determine internal consistency (Middleton, 2022). An alpha coefficient of 0.70 or higher was considered acceptable for research purposes (Kappen et al., 2019).

The final 55-item instrument obtained an overall Cronbach's Alpha of 0.882, with subscale coefficients ranging from 0.821 to 0.875, indicating good to high internal consistency (Chegini et al., 2020; George & Mallery, 2019). These results support the reliability of the instrument and its appropriateness for measuring the constructs of stress management and well-being among nurse educators (Crowe et al., 2021).



### Data Collection

Data were collected at Systems Plus College Foundation (SPCF) following administrative approval to conduct the study among nurse educators and clinical instructors. The researcher coordinated with the College of Nursing to schedule questionnaire distribution at a convenient time to avoid disruption of academic responsibilities.

The structured survey questionnaires were administered in a pen-and-paper format. Each respondent was given a copy of the questionnaire and allotted approximately 5–10 minutes to complete it. The researcher remained available during distribution to provide clarification regarding instructions, if necessary, while ensuring that responses were completed independently.

After completion, the questionnaires were immediately retrieved to ensure full response collection. The accomplished forms were then organized and coded for encoding in Microsoft Excel to facilitate accurate tabulation and preparation for statistical analysis.

### Treatment of Data

After data collection, the accomplished questionnaires were coded and encoded in Microsoft Excel for statistical processing. The encoded dataset was reviewed for completeness and accuracy prior to analysis.

To address the research questions, appropriate descriptive statistical techniques were applied. Frequency and percentage distribution were used to summarize and describe the demographic profile of the respondents in terms of age, gender, years of teaching experience, and highest educational attainment.

The weighted mean was computed to determine the overall levels of stress management and well-being among nurse educators based on their responses to the Likert-scale items. Stress management dimensions included self-awareness, coping strategies, time management, help-seeking behavior, and work-life balance, while well-being dimensions covered physical, emotional, mental, psychological, social, spiritual, and occupational domains.

A four-point Likert scale was used to measure respondents' level of agreement:

4 – Strongly Agree

3 – Agree

2 – Disagree

1 – Strongly Disagree

Mean scores were interpreted according to predetermined scale ranges to describe the level of stress management and well-being. These statistical procedures are consistent with descriptive–correlational quantitative research methods, which allow the identification of patterns and relationships among variables without manipulation (Creswell & Creswell, 2022).

### Ethical Considerations

The researcher ensured that all ethical standards were strictly observed throughout the study. Prior to data collection, informed consent was obtained from all participants, confirming their voluntary participation and permission to provide relevant data. The objectives, potential risks, and anticipated benefits of the study were clearly explained before consent was secured. Participants were informed of their right to decline participation, withhold information, or withdraw from the study at any time without penalty. Contact details were provided for any concerns or clarifications.

The ethical principles of beneficence and nonmaleficence were upheld by ensuring that the study posed no physical, psychological, or social harm to participants while contributing meaningful insights to nursing education. Respect for autonomy and justice was maintained through voluntary participation, fair selection based on inclusion criteria, and equal treatment of all respondents regardless of demographic background.

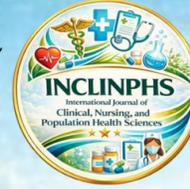
Confidentiality and anonymity were strictly maintained in compliance with the Data Privacy Act of 2012. Only relevant data were collected, responses were kept anonymous, and all information was securely stored with access limited solely to the researcher. All collected data will be permanently destroyed three (3) years after the final study defense in accordance with institutional ethical guidelines.

Minimal incentives (ballpens) were provided as tokens of appreciation and did not influence participation.

## RESULTS and DISCUSSION

### Demographic Profile of Respondents

The demographic profile of the respondents provides a foundational understanding of nurse educators' backgrounds and their potential influence on stress management and well-being. The majority belonged to the 31–40 age



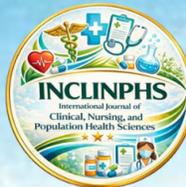
group, reflecting a young to mid-career workforce navigating the formative stages of academic practice. During this phase, educators develop pedagogical competencies while managing increasing professional demands, which may both strengthen and challenge coping capacities (Metersky et al., 2025; Yasin et al., 2020). Gender distribution was relatively balanced but slightly female-dominated, consistent with trends in the nursing profession (Lee & Lee, 2020; WHO, 2020). Gender dynamics may shape stress responses and coping strategies, as women often perform greater emotional labor while drawing resilience from relational support systems (Kerr et al., 2020; Lunsy, 2022). Most respondents had five or fewer years of teaching experience, indicating an early adjustment period to academic and administrative roles and a higher susceptibility to role strain (Barken & Robstad, 2024; Parr et al., 2021). Many were pursuing or had completed master's degrees, demonstrating professional commitment. Although graduate studies add pressure, higher education enhances self-efficacy, job satisfaction, and resilience (Marufu et al., 2021; Maceda et al., 2022; Chegini et al., 2020).

## Demographic and Professional Profile of Nurse Educators

**Table 1. Demographic and Professional Profile of Nurse Educators**

	Category	Frequency (f)	Percentage (%)
Age Group	20–30 years	3	8.751%
	31–40 years	20	57.142%
	41–50 years	2	5.714%
	51–60 years	7	20%
	61–70 years	2	5.714%
	Not Indicated	1	2.857%
Gender	Male	17	48.571%
	Female	18	51.428%
Years of Teaching Experience	1–5 years	30	85.714%
	6–10 years	2	5.714%
	More than 10 years	1	2.857%
	Not Indicated	2	5.714%
Highest Educational Attainment	Bachelor's Degree	5	14.285%
	Masteral Degree	11	31.428%
	Currently on Master's	10	28.571%
	Currently on Doctorate	2	5.714%
	Doctorate Degree	5	14.285%
	Not Indicated	2	5.714%

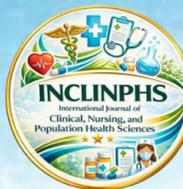
The stress experienced by nurse educators reflects a combination of emotional, physical, institutional, and personal factors affecting both well-being and professional performance. Heavy teaching loads and clinical duties contributed to emotional exhaustion and physical fatigue, increasing burnout risk and highlighting the need for balanced workload and recovery support. Institutional stressors—such as administrative demands, shifting expectations, limited resources, and policy changes—also reduced job satisfaction, emphasizing the value of organizational flexibility. Despite these challenges, educators demonstrated resilience through proactive coping strategies like planning, goal setting, and stress awareness, which institutions can strengthen through structured interventions (Labrague & de Los Santos, 2022). Peer and supervisory support fostered morale and retention (Maceda et al., 2022; Lee & Lee, 2020), while personal practices such as work-life balance, leisure, and spirituality promoted recovery (Unjai et al., 2024; Lunsy, 2022). Combined institutional and individual strategies remain essential (De Kock et al., 2021; Unjai et al., 2024).



**Stressors Encountered by Nurse Educators**

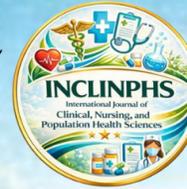
**Table 2. Stressors Encountered by Nurse Educators**

No.	Stressors/Items	Weighted Mean
1	Emotional exhaustion from teaching	3
2	Psychological stress affecting work	2.63
3	Physical fatigue limits effectiveness.	3.15
4	Workload is overwhelming.	2.76
5	Institutional demands add stress.	2.8
6	Environmental conditions affect stress.	2.83
7	Adjusting to changes at work	3.43
8	Anticipating stressors proactively	3.2
9	Using adaptive behaviors	3.4
10	Maintaining stability at work	3.56
11	Routines help manage stress.	3.52
12	Consistency in stability methods	3.46
13	Recognizing stress triggers	3.34
14	Planning ahead to reduce stress	3.4
15	Setting realistic goals	3.43
16	Practicing positive coping strategies	3.35
17	Seeking colleague/supervisor support	3.1
18	Discussing stress with peers	3.32
19	Separating work from personal life	3.45
20	Time for rest and relaxation	3.49
21	Recovery after stress	3.4
22	Stress management improves physical health.	3.52
23	Stress management improves mental health.	3.52
24	Stress resilience	3.52
25	Balance improves social relationships.	3.31
26	Spiritual practices help stress.	3.28
27	Stress management boosts satisfaction.	3.39

**Stress Management Approaches of Nurse Educators****Table 3. Stress Management Approaches of Nurse Educators**

Item No.	Statement	Weighted Mean
1	I often feel positive emotions such as joy and contentment in my teaching role.	3.54
2	I am able to maintain emotional stability during stressful work situations.	3.38
3	I regularly feel satisfied with how I handle emotional challenges at work.	3.48
4	I remain optimistic even when faced with difficult academic responsibilities.	3.33
5	I experience more emotional fulfillment than frustration in my profession.	3.46
6	I feel mentally absorbed and focused during lectures and academic tasks.	3.53
7	I use my full cognitive abilities in planning and delivering lessons.	3.64
8	I lose track of time when I am engaged in teaching activities.	2.90
9	I feel physically energized when I am fully engaged in my role.	3.62
10	I perform better when I am deeply involved in meaningful tasks at work.	3.60
11	I maintain warm and supportive relationships with my colleagues.	3.46
12	I feel socially connected and valued by my academic community.	3.48
13	I have dependable professional relationships that help me cope with stress.	3.43
14	I am satisfied with the social environment in my workplace.	3.48
15	I believe my relationships contribute positively to my overall well-being.	3.60
16	I find deep meaning and purpose in my work as a nurse educator.	3.63
17	My profession allows me to live in alignment with my core values.	3.65
18	I believe that my role positively impacts others' lives and futures.	3.61
19	I feel spiritually fulfilled by the service I provide through teaching.	3.48
20	I view my career as a calling that contributes to my personal growth.	3.59
21	I regularly meet or exceed the goals I set for myself at work.	3.48
22	I feel proud of my achievements as a nurse educator.	3.54
23	I believe that my efforts lead to meaningful outcomes in my workplace.	3.48
24	I am confident in my ability to grow professionally.	3.60
25	I feel accomplished and recognized in my current role.	3.47

Evidence indicates that nurse educators employ multidimensional stress-management strategies encompassing emotional, cognitive, social, physical, and spiritual domains, reflecting a balanced approach to well-being. Many maintained a positive emotional outlook despite heavy academic and clinical demands, demonstrating resilience essential for effective teaching. Strong cognitive engagement and professional alignment were also evident, although periods of cognitive fatigue during peak academic demands highlighted the need for workload flexibility. Educators reported increased energy and motivation when work aligned with personal values, reinforcing the link between meaning and reduced burnout risk (Seligman, 2018; Zhao et al., 2024). Supportive peer and institutional relationships further buffered stress and enhanced morale and retention (Lee & Lee, 2020; Lunskey, 2022). Spiritual perspectives—viewing teaching as a calling—strengthened psychological resilience (Schnell & Krampe, 2020). Professional growth and goal attainment also promoted self-efficacy and well-being (Maceda et al., 2022). Overall, findings underscore the need for comprehensive institutional support addressing emotional, cognitive, social, and spiritual dimensions (Lee & Kim, 2020; Zheng et al., 2024; Marufu et al., 2021; Parr et al., 2021).

**Overall Well-Being of Nurse Educators****Table 4. Overall Well-Being of Nurse Educators**

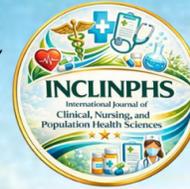
Aspect	Number of Items	Weighted Mean	Interpretation
Stressors Encountered	27	3.26	Moderately Low Stress
Stress Management Approaches	25	3.50	High Positive Well-Being
Overall Well-Being Score (Management – Stress)		+0.24	Positive Well-Being Balance

Based on Table 4, the overall well-being of nurse educators appeared positive despite existing professional stressors. Respondents reported low to moderate stress levels, suggesting that teaching, administrative duties, and student mentoring were manageable rather than overwhelming. This reflects the effectiveness of their coping strategies and adaptive responses to workplace pressures. Findings highlighted the use of emotional, social, cognitive, and spiritual coping mechanisms, including emotional regulation, collegial support, professional development, and finding meaning in work. These factors contributed to both personal satisfaction and professional resilience. The balance between stress demands and coping efficacy indicates that educators maintain stable psychological well-being while functioning in high-responsibility roles. The results underscore the importance of institutional support systems—such as mentoring, wellness programs, and workload management—in sustaining resilience and engagement. These findings align with literature emphasizing emotional regulation, meaningful work, collegial support, and organizational backing as protective factors in educator well-being (Lee & Lee, 2020; Parr et al., 2021; Zheng et al., 2024; Lunsky, 2022; Seligman, 2018; Maceda et al., 2022).

**Relationship Between Stress Management and Well-Being of Nurse Educators****Table 5. Relationship Between Stress Management and Well-Being of Nurse Educators**

Category	Indicator	Weighted Mean	Standard Deviation	Interpretation
Emotional Regulation	Positive emotions, optimism, stability	3.44	0.52	High emotional control
Cognitive Engagement	Focus, absorption, effective teaching	3.46	0.48	Strong mental involvement
Physical Vitality	Energy and physical engagement	3.62	0.5	High physical engagement
Social Connectedness	Workplace relationships, peer support	3.49	0.46	Supportive social environment
Spiritual & Professional Fulfillment	Purpose, calling, contribution	3.6	0.45	Deep sense of meaning and purpose
Achievement & Growth	Goals, recognition, professional growth	3.53	0.49	High achievement and self-efficacy
<b>Overall Stress Management Mean</b>	Across all 25 indicators	3.5	0.47	Strong stress management practices
<b>Overall Stressors Encountered</b>	From work-related stress factors	3.26	0.55	Moderately low level of stress
<b>Well-Being Score</b>	(Management Mean – Stressor Mean)	0.24	N/A	Positive Well-Being Balance

The data illustrate multiple dimensions of stress management and well-being among nurse educators, with findings indicating strong overall coping practices. High emotional control suggests that educators can regulate feelings and remain



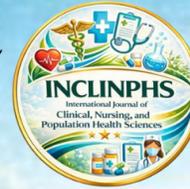
stable under pressure—an essential competency in emotionally demanding teaching and clinical roles. Cognitive engagement was likewise high, reflecting sustained focus and professional commitment despite stress (Cabrera-Aguilar et al., 2023). Respondents also reported good physical well-being, implying adequate energy and health to meet academic and clinical demands (Labrague & de Los Santos, 2022). Supportive social relationships emerged as another strength, fostering collaboration, reduced burnout, and higher job satisfaction (Lee & Kim, 2020). Strong spiritual meaning and professional fulfillment further enhanced resilience (Maceda et al., 2022; Domingo et al., 2021). Feelings of accomplishment and professional growth boosted self-efficacy and mental health (De Kock et al., 2021; Santabárbara et al., 2021). Overall, moderate stressor levels alongside low variability indicate consistent, healthy coping supported by institutional wellness initiatives (Lee & Lee, 2020).

**Relationship of Stress Management and Well-Being with Demographic Profile**

**Table 6. Relationship of Stress Management and Well-Being with Demographic Profile**

Demographic Variable	Category	% Distribution	Standard Deviation	Likely Relationship to Stress Management & Well-Being
Age Group	31–40 years	55.56%	0.46	Prime working years; likely to show balanced stress coping and well-being
	20–30 / 41–50 / 51–60	~11–15% each	0.52	Early/late career stages; potential variation in coping skills and stress levels
	61–70	4.44%	0.38	Likely high resilience, possibly reduced workload or nearing retirement
Gender	Female	55.56%	0.45	Greater emotional expressiveness; possibly higher relational and coping skills
	Male	44.44%	0.5	May cope differently with stress; potentially more task-focused strategies
Years of Teaching Experience	1–5 years	82.22%	0.53	Novice educators; may face more stress, learning curve affects well-being
	6–10 / >10 years	~11% combined	0.41	Experienced educators; likely better stress management and stability
Educational Attainment	Currently on Master’s	42.22%	0.5	Mid-career; possibly juggling academics and work, moderate stress and coping
	Masteral / Doctorate Degree	~38% combined	0.44	Higher education level often correlates with stronger coping and job fulfillment
	Bachelor’s / In Progress (Dr.)	~16% combined	0.52	May experience higher stress due to role pressure or academic progression

The table illustrates how demographic factors influence nurse educators’ stress management and well-being, offering trends useful for institutional support planning. Most respondents were in their peak working years, a stage associated with stable well-being and effective coping due to professional maturity and physical vitality. In contrast, early-career and pre-retirement educators may experience stress differently, highlighting the need for age-sensitive interventions (Lee & Lee, 2020). Gender differences were also evident. Female educators often demonstrated relational and emotionally expressive coping linked to stronger social support, while males tended toward task-oriented strategies (Yoon et al., 2023; Labrague & de Los Santos, 2022). Many respondents had less than five years of teaching experience, indicating adjustment challenges and role strain, whereas more experienced educators showed stronger resilience (Labrague & de Los Santos,



2021; Lunsky, 2022). Educational attainment further influenced outcomes. Graduate-qualified educators reported greater stability and job satisfaction, while those pursuing degrees faced added pressures (Maceda et al., 2022; Zhao et al., 2024). Overall, findings stress the need for demographic-responsive wellness programs (Labrague & de Los Santos, 2022).

### Conclusions

The findings indicate that the majority of nurse educators at Systems Plus College Foundation are young to mid-career professionals aged 31–40, with fewer than five years of teaching experience and predominantly female representation. Many are concurrently pursuing graduate studies, reflecting strong professional commitment but also increased exposure to role strain. In the Philippine nursing education context, this profile suggests a workforce navigating early-career transition while balancing academic advancement and institutional demands.

Anchored in Betty Neuman's Systems Model, the results reveal that nurse educators are exposed to both internal stressors (e.g., emotional exhaustion, mental fatigue) and external stressors (e.g., administrative workload, institutional expectations). However, the presence of adaptive behaviors—such as emotional regulation, structured time management, and help-seeking practices—indicates strengthened lines of defense that support system stability. These coping mechanisms reflect effective secondary and tertiary prevention strategies within Neuman's framework.

Furthermore, consistent with Seligman's PERMA model, respondents demonstrated positive levels of well-being across emotional, cognitive, social, and occupational domains. This suggests that despite occupational stressors, nurse educators maintain positive emotion, professional engagement, meaningful relationships, and a sense of accomplishment. The bidirectional relationship between stress management and well-being reinforces the importance of sustaining adaptive coping behaviors to preserve resilience and institutional stability.

Overall, the findings imply that while nurse educators exhibit functional resilience, sustained exposure to stressors—particularly among early-career faculty and those balancing graduate studies—may gradually compromise well-being if institutional supports are not continuously strengthened. These results underscore the importance of structured, theory-informed wellness initiatives within Philippine nursing education institutions.

### Recommendations

Based on the findings, several institutional strategies are recommended to support the sustained well-being of nurse educators.

Given that many respondents are early-career faculty with concurrent graduate studies, institutions may consider implementing structured mentorship programs that pair junior educators with experienced faculty members. This may strengthen adaptive coping behaviors and reinforce professional identity development.

In response to identified administrative and workload-related stressors, schools could review workload distribution policies to ensure equity, particularly for educators managing graduate studies or multiple academic roles. Flexible scheduling arrangements and balanced teaching loads may help preserve work-life integration.

To reinforce the adaptive behaviors observed in the study, nursing institutions may integrate structured stress management programs within faculty development initiatives. Programs focusing on emotional regulation, time management, and proactive help-seeking behaviors align with Neuman's preventive framework and may strengthen educators' lines of defense.

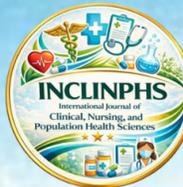
Accessible mental health services—including confidential counseling, wellness debriefings, and peer support systems—are recommended to support psychological well-being. Creating psychologically safe communication channels may also enhance social well-being, consistent with PERMA's relational dimension.

Finally, institutions may consider establishing a faculty wellness committee to oversee the development, monitoring, and evaluation of wellness-centered policies. Aligning human resource practices with well-being principles—such as recognition initiatives and professional growth support—may further sustain resilience, retention, and workforce stability.

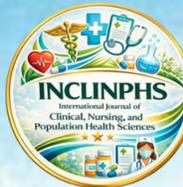
Collectively, these recommendations support the cultivation of a resilient, engaged, and psychologically supported nursing education workforce. Strengthening faculty well-being not only benefits individual educators but also enhances the overall quality and sustainability of nursing education in the Philippine context.

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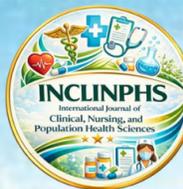


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