



ASEAN SOCIAL WORK JOURNAL

Volume 13, No. 1, June, 2025

ISSN : 2089-1075

e-ISSN : 2963-2404

DOI : <https://doi.org/10.58671/aswj.v13i1.75>
www.aseansocialwork.com

Stress Management for Improved Living and Empowerment (SMILE): a Proposed Culturally Adapted Mindfulness-Based Program for Social Workers in Human Service Organizations in the Philippines

Exxon B. Susmerano*

School of Social Work, Arizona State University, Arizona, USA

Department of Social Work, University of the Philippines Diliman, Philippines

*Correspondence: esusmera@asu.edu

Received: April 26, 2024 **Accepted:** June 12, 2025 **Published:** June 30, 2025

Abstract

Social workers are essential in human service organizations as they play an important role in the implementation of programs and in addressing the needs of diverse populations. However, their well-being and performance can suffer due to the stress and challenges inherent in their work environments. This paper aims to address the urgent need to respond to social workers' self-care needs by exploring the potential of a culturally adapted mindfulness-based intervention in addressing issues such as stress and depression among social workers in the Philippines. Through a review of relevant literature, this paper examined mindfulness-based intervention as an emerging self-care practice and approach to addressing work-related health issues. The paper discussed mindfulness-based interventions' efficacy in improving social workers' well-being and performance in Ankara-Turkey) and Northern Ireland, as well as in improving stress and depression levels, and mindfulness among public school teachers in the Philippines. Given the potential benefits of mindfulness-based interventions, this paper proposed the development and assessment of the Stress Management for Improved Living and Empowerment (SMILE) program, which is a culturally tailored intervention designed to meet the unique needs of social workers. Pending successful evaluation of its feasibility, efficacy, and effectiveness, social welfare and human service organizations may implement the proposed intervention to promote self-care and empowerment among social workers.

Keywords: *Social worker, mindfulness-based intervention, cultural adaptation, stress management, intervention model*

Introduction

Effective human service organizations rely significantly on the expertise of social workers, who play a pivotal role in the implementation of programs and services. Social workers help address the diverse needs and challenges of different clientele groups. Given the demands and nature of their roles, they routinely encounter a multitude of challenges and stressors emanating from their work environment. This demanding work has resulted in various work-related issues, which include stress and depression that can affect social work practitioners' well-being and work performance (Coffey et al., 2004; Imperial et al., 2023; Quinn-Lee et al., 2014; Vleeshouwers et al., 2016). In connection with this, mental health issues, including mental illnesses, can negatively affect the workplace by increasing disability costs and absenteeism, and decreasing productivity and performance among workers (Bender & Farvolden, 2008).

Exploring these work-related issues has been an area of research interest within helping professions including social work (Beer et al., 2021; Gómez-García et al., 2020). The challenges arising from work-related issues among practitioners may affect workers themselves, their organizations, as well as the clients or service users. (Beer et al., 2021). At the individual level for instance, research revealed that 33.2% of Spanish social workers reported high levels of emotional exhaustion, 22.1%

reported high levels of depersonalization, and 54.2% experienced low levels of personal accomplishment in their work settings (Gómez-García et al., 2020). The pandemic has also exacerbated the occupational wellness concerns of social workers, as evidenced by the cases of social workers in 54 countries who experienced issues that include emotional and physical stress, moral injuries, and cases of work exhaustion (Banks et al., 2020). These issues can also be reflected at the organizational level. A significant turnover rate among child welfare workers was reported in the U.S. in 2014, ranging from 20% to 40% annually (Kim & Kao, 2014). Additionally, according to reports from the U.S. Administration for Children and Families, there were areas that faced rates of turnover among social welfare workers as high as 90% (Lawson & Das, 2020).

In the Philippines, mental health has been considered a serious concern among Filipinos. Mental illness has become the third most common type of disability, affecting six million Filipinos who experience anxiety and depression (Maravilla & Tan, 2021). With this, the country ranks third in the Western Pacific region for the prevalence of mental disorders (Martinez et al., 2020). According to the Special Initiative for Mental Health of the World Health Organization in the Philippines, 3.6 million Filipinos were affected by conditions including mental disorders in 2020 (Department of Health, 2020). While there is scant statistical data on mental health and work-related issues among social workers in the Philippines, research focusing on the experiences of social workers, particularly amid the pandemic, highlighted a range of challenges that can contribute to stress and mental health problems. These challenges include increased work assignments and responsibilities, diverse physical and psychosocial difficulties stemming from various adjustments in work practices, and the evolving demands resulting from the recent pandemic (Aperocho et al., 2022; Imperial et al., 2023; Uclaray et al., 2022).

In connection with these work-related challenges and issues, the US-based National Association of Social Work (NASW) underscores the significance of identifying suitable self-care methods to respond to the impact of work-related challenges on social workers' well-being (NASW, 2020). Furthermore, Section 9.6 of the International Federation of Social Workers (IFSW) Global Social Work Statement of Ethical Principles (2018) emphasizes that professional self-care is not simply optional but rather a responsibility integral to the profession. Public and private organizations dedicated to providing human services must recognize the necessity of understanding and preventing the various psychosocial risks encountered by social workers every day (Gómez-García et al., 2020). In the Philippines, the Philippine Association of Social Workers, Inc. (PASWI) celebrated its Platinum Jubilee National Convention in November 2023 carrying the theme "Ensuring the Mental Health and Wellness of the Social Service Workforce," which emphasized the value given to the well-being of social workers. Aligned with these priorities, there is an urgent need to develop, implement, and assess interventions to mitigate the adverse effects of mental health issues, particularly stress and depression, among social workers.

For this paper, stress refers to the immediate physiological or emotional response to a stressor (Maslach et al., 1996; Zastrow, 1984), while a stressor is any "demand, situation or circumstance that disrupts a person's equilibrium and initiates the stress response of increased autonomic arousal" (Lloyd et al., 2002, p. 256). Another related mental health issue of interest for this paper is depression, which is also known as a mood disorder that represents a collection of signs and symptoms that deviate from typical reactions to life's challenges (Chima, 2005). This disorder may encompass cognitive, emotional, somatic regulation, and behavioral disruptions (D'Alessandro, 1994).

Considering this pressing need to identify possible interventions to respond to social workers' mental health concerns, this paper aims to explore a culturally adapted mindfulness-based program that hopes to contribute to addressing self-care needs and issues such as stress and depression among social workers in the Philippines. Specifically, the paper:

- a. Examines mindfulness-based intervention as an emerging approach to stress management among professionals such as social workers; and
- b. Recommends a culturally adapted mindfulness-based intervention for social workers in the Philippines, which can also inspire models of intervention for social workers in other countries.

Methodology

A literature review was conducted, focusing on the theoretical frameworks and prospective interventions relevant to mental health issues among social workers. This involved an examination of existing literature and studies on mindfulness-based interventions tailored for human service workers, with a particular emphasis on those designed specifically for social workers. Insights were gained through this examination, which enabled the formulation of an informed recommendation to develop a culturally adapted mindfulness-based intervention for potential implementation. This recommendation includes the conduct of a randomized controlled trial (RCT), which can serve as a useful evaluation design to assess the efficacy of the intervention before its adoption and implementation. The RCT has

been previously utilized in assessing the efficacy of mindfulness-based interventions for professionals such as social workers (Hosseinzadeh Asl, 2022; Maddock et al., 2023).

The paper and the proposed intervention are grounded in the Transactional Model of Stress and Coping (TMSC) as the theoretical basis. It is imperative to recognize that the complexity of stress within the social work profession involves a transactional relationship and interplay between the individual's stress experiences and their occupational environments (Beer et al., 2020). The TMSC explains the complex interaction between the individual's stress experience and his/her environment. It views stress as an ecological process involving an interaction between individuals, social workers, and their environments. The TMSC suggests that stress is a dynamic process characterized by connections between environmental stressors and individuals' cognitive appraisals and emotional and behavioral coping mechanisms. These coping resources can, in turn, influence various aspects of short-term and long-term health outcomes (Lazarus & Folkman, 1984). Applying the TMSC can theorize that social workers' coping strategies in response to stress or adverse events will likely be adopted or employed when they perceive their environment as threatening and/or beyond their control, as determined by their individual appraisals. These coping mechanisms, influenced by perceived and accessible resources, may ultimately affect short- and long-term health outcomes.

In support of the theoretical approach, existing mindfulness-based interventions for human service workers were examined to develop the recommended mindfulness-based intervention for Filipino social workers. This paper focused on mindfulness-based interventions, considering their potential and positive relationship with different health outcomes based on previous studies, as discussed in the succeeding portions of this paper.

Results and Discussion

Researchers are increasingly focusing on the health and wellness of social workers (Beer et al., 2020). Previous studies have examined how social workers' well-being and performance can be influenced by their working environment and job-related stress (Coffey et al., 2004; Quinn-Lee et al., 2014; Vleeshouwers et al., 2016). Social workers experience stress related to lack of resources, time, supervision, and organizational support (Dillenburg, 2004; Ingram, 2013), as well as the organizational demands and the challenge of meeting clients' needs (Lloyd et al., 2002). Furthermore, the COVID-19 pandemic resulted in an increased workload and transition to virtual work that contributed to stress and affected social workers' well-being (Ashcroft et al., 2022; Imperial et al., 2023). These complex manifestations of stressors support the theoretical perspective suggesting that there is a transactional relationship between social workers' stress experiences and their working environments. However, there remains a notable gap in the literature regarding the implementation and assessment of successful strategies to alleviate work-related stress, especially in the field of social work (Beer et al., 2020). This section discusses the mindfulness-based intervention as a recognized approach in stress management, the efficacy of existing mindfulness-based interventions designed for social workers, and lastly, the proposed intervention for Filipino social workers that can be a potential contribution to promoting self-care and addressing stress and depression among social workers.

Mindfulness-Based Intervention as an Emerging Stress Management Approach

Mindfulness has emerged as a promising approach for enhancing stress recovery, cognitive and emotional flexibility, and resilience (Craigie et al., 2016; Maddock et al., 2023). With roots in Buddhist teachings, mindfulness is described as "paying deliberate attention to the present moment without judgment" (Kabat-Zinn, 1994, p. 4). Mindfulness-based interventions (MBIs) have been designed and adapted over time and have shown positive outcomes in healthcare and social care settings (Maddock et al., 2021; Vonderlin et al., 2020). MBIs are effective both as preventive measures and as remedies for improving health in terms of physiological and psychological aspects (Sutcliffe et al., 2016). MBIs also present a promising, cost-effective option for responding to present and future public health challenges, which can be implemented across diverse populations, either in group sessions or one-on-one, and are accessible both in-person and online (Garfin et al., 2021).

MBIs are commonly implemented through structured programs such as Mindfulness-Based Cognitive Therapy (MBCT) and Mindfulness-Based Stress Reduction (MBSR), which typically last between eight to 10 weeks (Garfin et al., 2021). The MBCT merges mindfulness training techniques with cognitive reappraisal and therapeutic strategies to address depression and prevent relapse, while the MBSR integrates mindfulness training approaches with stress reduction methods (Garfin et al., 2021; Mesa & Lopez, 2023). Although these MBIs have demonstrated effectiveness in promoting personal well-being, further research is needed to assess how practical they are in workplace environments and how well they can be adapted to fit various cultural contexts.

Efficacy of Mindfulness-Based Interventions for Social Workers

MBIs are widely recognized as a prominent evidence-based approach for reducing stress and encouraging effective self-care among social workers (Beer et al., 2020; Hosseinzadeh Asl, 2022). A systematic review highlights the significance of mindfulness exercises in enhancing the well-being and client performance of social workers. Nevertheless, recognizing that the commonly used MBIs may not meet the specific needs of professionals in practice, such as social workers, modifications have been attempted to fulfill the needs of various professionals who need these interventions (Griffiths et al., 2019). One example is a randomized controlled trial conducted in Ankara, Turkey, which tested a shortened, four-week mindfulness program based on MBCT principles. This adapted intervention was shown to improve self-compassion and psychological flexibility while reducing depression symptoms among social workers, particularly amidst the COVID-19 pandemic (Hosseinzadeh Asl, 2022). Similarly, Maddock et al. (2023) developed a customized intervention – the Mindfulness-Based Social Work and Self-Care (MBSWSC) program that also considers shorter duration (six weeks) and the use of non-traditional approaches such as online delivery/sessions. Using a randomized trial, the MBSWSC program in Northern Ireland proved effective in addressing social work practitioners' stress, emotional exhaustion, anxiety, and depression (Maddock et al., 2023).

In the Philippines, although not specifically targeting social workers, an adapted mindfulness program has shown effectiveness in improving depression levels, perceived stress, and mindfulness among Filipino teachers in public schools following the MBCT sessions (Mesa & Lopez, 2023). They also suggest that the customized MBCT program can be a beneficial approach to preventing mental health issues and problems among Filipinos.

Evidence from the assessments of efficacy and successful adaptations of mindfulness programs for social workers and similar professions supports the feasibility and potential benefits of tailoring MBIs to meet the particular needs and circumstances of different groups. These initiatives can serve as valuable models for developing a mindfulness intervention tailored for social workers in the Philippines to address their unique challenges and promote their well-being while considering the importance of diverse professional, cultural, and Indigenous practices.

The Stress Management for Improved Living and Empowerment (SMILE) Program

Social workers themselves recognize the value of professional self-care. In the Philippines context, medical social workers have highlighted self-care as an essential strategy for maintaining occupational well-being, which in turn contributes to better job performance, more effective client interactions, stronger relationships with colleagues, and heightened cognitive functioning and self-awareness. (Imperial et al., 2023). Other related research also acknowledges the value of self-care in improving well-being and addressing work-related issues such as compassion fatigue, burnout, and stress among social workers (Downing et al., 2021; Peinado & Anderson, 2020). The absence of regular self-care practices has challenged Filipino social workers and opened up opportunities for institutions and organizations to initiate activities that will promote self-care in the workplace (Imperial et al., 2023).

Considering this need for self-care for Filipino social workers and the need to establish the efficacy of MBIs for professionals in other countries and the Philippines as well, the proposed Stress Management for Improved Living and Empowerment or SMILE program aims to assist Filipino social workers in addressing mental health challenges they encounter in the workplace.

Cultural Adaptation

While incorporating cultural elements into interventions is essential, it is equally important to ensure the efficacy of the intervention's core components during the adaptation process. (Marsiglia et al., 2019). Therefore, the SMILE program adheres to the ecological validity model (EVM) introduced by Bernal et al. (1995; 2009) that recommends potential components or elements to be adapted, such as "language, people, metaphors, goals, methods, content, concepts, and context" (Marsiglia et al., 2019, p. 1126). The SMILE program considers the cultural factors that may be adapted in the implementation of an MBI program for Filipinos (Grantoza, 2017; Mesa & Lopez, 2023): a) translation of language including words and concepts in Filipino or other local dialects; b) use of Filipino metaphors in lieu of Western symbols; c) use of methods and exercises more appropriate for Filipinos (e.g., storytelling); d) incorporation of Filipino values and practices in session contents; e) emphasis on the purpose of the program which hopes to give further motivation to social workers for them to participate in all sessions consistently; f) use of small group discussions considering that Filipinos are more comfortable in expressing their thoughts and feelings in smaller groups than in a bigger plenary; and g) shorter program (six weeks) compared to the usual eight- to 10-week session of MBIs. These factors may be considered in identifying culturally adapted components of the SMILE program.

Logic Model of the SMILE Program for Filipino Social Workers

Figure 1 illustrates the logic model of the intervention, which also reflects its theory for achieving the desired change – reduced stress and depression levels among social workers. To attain this objective, there is a need to mobilize resources (e.g., human and financial resources) to implement the program and conduct SMILE sessions. The successful conduct of these sessions and the social workers' active participation can lead to a decrease in the levels of stress and depression among social workers. These outcomes can contribute to longer-term impacts such as increased job satisfaction and decreased organizational turnover rates.

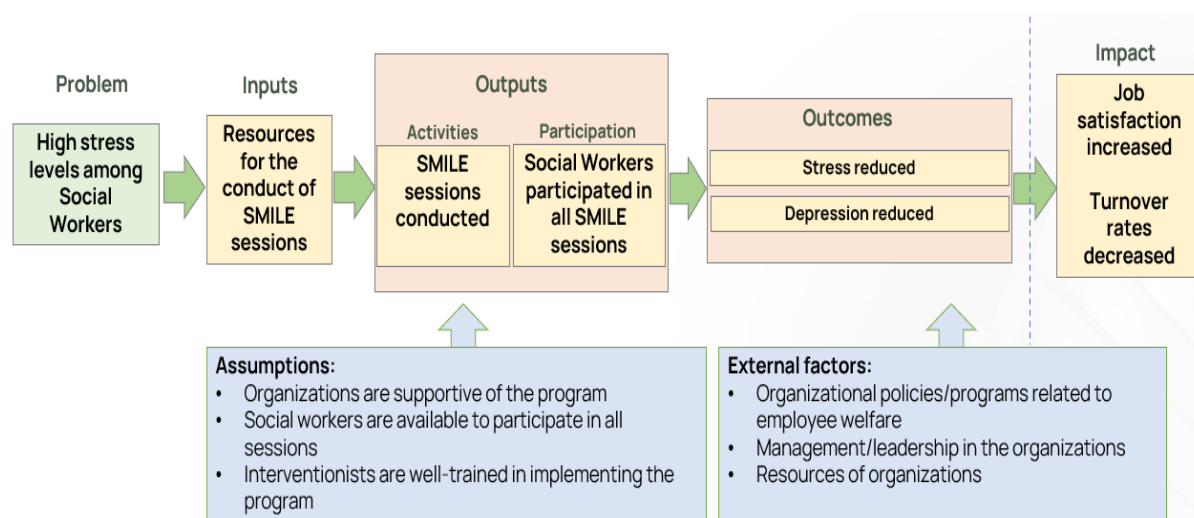


Figure 1. Logic Model of the SMILE Program

SMILE Program Contents

The six-week SMILE sessions consist of the topics shown in Table 1, which consider the content used by Maddock et al. (2023) and Mesa and Lopez (2023) in the MBIs they have implemented.

Table 1. Proposed SMILE Program Sessions

Session	Topic
Session 1	Mindfulness orientation
Session 2	Awareness and automatic pilot; and Living in our head
Session 3	Gathering attention and recognizing aversion
Session 4	Allowing and letting be; Thoughts are not facts
Session 5	Mindfulness to support anti-oppressive social work practice
Session 6	How can I best take care of myself?

Note. These session topics are based on the MBIs developed by Mesa and Lopez (2023) and Maddock et al. (2023).

Each session can be done in person and run for about one and a half hours each. The sessions will be led by Filipino facilitators formally trained in mindfulness-based interventions. Organizers may opt to provide participants with participation incentives, transportation allowances, and snacks after each session. Certificates of participation can also be given to participants at the end of the program.

Possible Evaluation Design

A randomized controlled trial (RCT) is strongly recommended to be conducted through intervention research to evaluate the efficacy of the SMILE program with social workers. This design intends to compare and assess the pre- and post-intervention measures and outcomes of the SMILE program among the participants randomly assigned to treatment and comparison groups. RCT has been previously utilized in determining the efficacy of MBIs among social workers (Hosseinizadeh Asl, 2022; Maddock et al., 2023). This RCT will likewise explore the intervention's feasibility, acceptability, and utility. Figure 2 below illustrates a sample RCT flow.

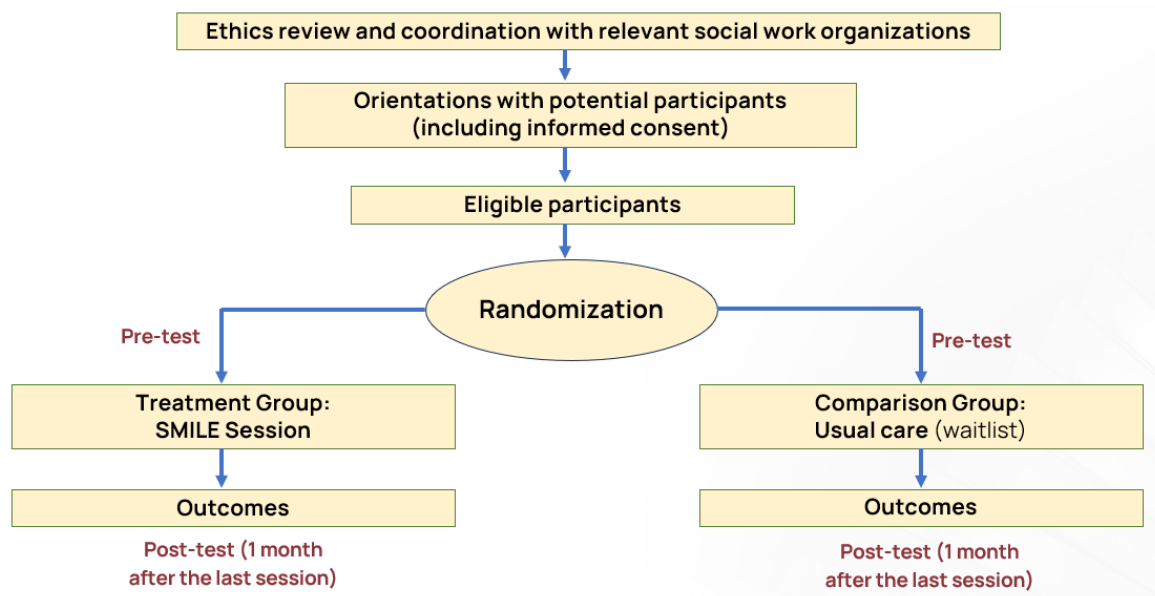


Figure 2. Sample Randomized Controlled Trial (RCT) Flow to Assess the SMILE Program
Note. The post-test questionnaire for the treatment group will also contain closed- and open-ended questions to evaluate the program's feasibility, acceptability, and utility.

After obtaining approval from the concerned ethics review boards, all eligible prospective participants, based on the inclusion and exclusion criteria set, will be oriented about the proposed program. Those who choose to participate will be provided with written informed consent before randomization. Once selected, the participants will be randomized into treatment and comparison groups. After randomization, participants in the treatment group will engage in the six-week SMILE program, while those in the comparison group will be placed on a waitlist (treatment as usual). Participants on the waitlist will undergo the same program one month after completing the post-test questionnaire. This waiting list has been utilized in previous RCTs to measure the efficacy of MBIs for working adults (Josefsson et al., 2012; Manotas, 2012; Virgili, 2015).

A pre-test questionnaire will be completed by the participants before the start of the SMILE program, and then a post-test questionnaire shall be administered one month after the last SMILE session. Both the pre-and post-test questionnaires will contain the measures set by the study, except that the post-test questionnaire for the treatment group will also include closed- and open-ended questions to evaluate the feasibility, acceptability, and utility (Kulis et al., 2023) of the SMILE program. Additionally, SMILE facilitators will answer questions in relation to the program's feasibility, acceptability, and utility through individual interviews.

The proposed evaluation design intends to determine the effect of the SMILE program on the mental health outcomes of Filipino social workers, specifically the levels of stress and depression. Self-report measures on stress and depression levels will be part of the pre-and post-test questionnaires to examine the efficacy of the program by comparing the changes between and within the treatment and comparison groups (Maddock et al., 2023). For instance, the stress level can be measured using the Perceived Stress Scale (PSS: Cohen et al., 1983), while the Depression subscale of the Depression Anxiety Stress Scales Short Form (Lovibond & Lovibond, 1995) may be used to measure the depression level.

With the data gathered from pre-and post-tests, quantitative and qualitative analyses can be done at post-intervention. For example, analyses of differences within groups can be conducted using paired samples t-tests, while variations between groups can be measured through appropriate statistical approaches such as the analysis of covariance (ANCOVA) (Maddock et al., 2023). It is essential to acknowledge, however, that other related outcomes like burnout, self-compassion, acceptance, and attention regulation, which were also examined in existing studies (Maddock et al., 2023; Mesa & Lopez, 2023), may also be considered depending on the need, technical capacity, and available resources.

Limitations

While the SMILE program has remarkable potential benefits, it is important to acknowledge some limitations of adapted mindfulness-based interventions. First, the reliance on self-reported

questionnaires and measures poses a significant limitation due to the susceptibility to common methods and response bias (Hosseinzadeh Asl, 2022; Maddock et al., 2023). To address this, it is recommended to include other measures, such as physiological measurements, to obtain more objective data. Second, the intervention primarily targets the individual's capacity to manage stress, which can potentially overlook other critical stressors within an organization, such as structural and economic factors that also impact workers' well-being and performance. Therefore, it is imperative to complement mindfulness-based programs with other organizational strategies and mechanisms that address organizational stressors. Lastly, there is a crucial need to carefully consider the unique cultural and contextual factors specific to social workers in the Philippines. Balancing these considerations with fidelity to the core principles of a mindfulness-based program may require substantial time, effort, and resources for effective cultural adaptation (Mesa & Lopez, 2023).

Conclusion and Suggestions

Conclusion

It is imperative to acknowledge and confront the work-related challenges encountered by social workers, including those pertaining to mental health, such as stress and depression. Recent statements and initiatives of social work associations and organizations underscore the importance of prioritizing social workers' self-care, wellness, and well-being. This stresses the need for interventions to mitigate and prevent health issues among social workers in their professional environments while fostering their overall well-being. Given the potential of mindfulness-based interventions in addressing and responding to the mental health needs of human services workers such as social workers, it is high time to prioritize and explore evidence-based interventions like the SMILE program, which can potentially enhance social workers' mental health and resilience. This intervention hopes to benefit the social workers, the organizations, client groups, and communities they serve and work with.

The proven efficacy of the SMILE program is envisioned to bridge the existing gap and meet the pressing need for an evidence-based intervention to alleviate the detrimental impact of stress and depression among Filipino social workers. As one of the pioneering mindfulness-based interventions tailored for this demographic, the program incorporates essential cultural elements into its implementation strategy while adhering to a rigorous intervention research methodology, such as the RCT. This initiative addresses social workers' well-being needs and sets a precedent for similar interventions across various sectors.

Suggestions

Given that existing research has primarily focused on social workers in other countries, as well as public school teachers and other working groups in the Philippines, there is a compelling need to implement and assess the efficacy and effectiveness of the intervention with social workers as participants. It is also imperative to emphasize the importance of engaging social work organizations and the crucial role of social workers in the development, evaluation, and continuous enhancement of the design and content of this intervention. By serving as a model for mindfulness-based programs tailored to Filipino social workers, this proposed intervention holds the potential to be piloted and eventually adopted in different social work fields, pending evaluation of its efficacy and effectiveness.

The intervention design can be shared with key stakeholders, for instance, the Philippines' Department of Social Welfare and Development - Social Technology Bureau, tasked with developing interventions for various vulnerable and marginalized populations. This proposed intervention may also find relevance with other organizations engaged in developing and providing mindfulness-based interventions or programs to diverse groups. Once the efficacy and effectiveness of the intervention are rigorously evaluated, pertinent organizations may explore the potential implementation and adaptation of this intervention not only within the Philippines but also in other interested countries.

Nevertheless, acknowledging the challenges and financial demands associated with these comprehensive and rigorous scientific methodologies and evaluations for these interventions, it is imperative to establish collaborations among academic, research, and governmental entities possessing the required knowledge, skills, and resources for intervention development and assessment. In line with program implementation, it is also crucial to consider the necessary cultural adaptation components of such interventions in order to address the diverse and unique situations and needs of participants, ensuring their efficacy and effectiveness before implementation. Furthermore, it is helpful to determine the feasibility, acceptability, and utility of the intervention with social workers in different fields and varying geographical locations to continuously refine the program design.

Lastly, future studies can explore the effects of MBIs beyond stress and depression, examining other related outcomes like burnout, self-compassion, acceptance, and attention regulation, all of which pose significant challenges for social workers in their workplace. Through collaborative efforts among

key stakeholders and the dissemination of successful outcomes, this initiative has the potential to make substantial contributions to the well-being of the human service workforce, including social workers.

Acknowledgement

I am extending my heartfelt gratitude to Dr. Flavio F. Marsiglia and Chao-Kai Huang for their invaluable advice and support throughout the development of this paper. I would also like to express my gratitude to the members of the Intervention Research class for their insightful suggestions to improve this work. Additionally, I thank the Methodology and Statistics Clinic (MASC) members for their feedback, which greatly enhanced the quality of this paper. Special thanks also to Dr. Gilda D. Lopez for generously sharing their work on mindfulness-based programs, which has been one of the primary references for this paper.

Author's Brief Biography

Exxon B. Susmerano, Assistant Professor at the Department of Social Work of the College of Social Work and Community Development (CSWCD), University of the Philippines Diliman. He is a doctoral student at the School of Social Work, Arizona State University (ASU), Arizona, USA. Prior to working at CSWCD and joining the Ph.D. in Social Work program at ASU, he worked in Philippine government agencies such as the Department of Social Welfare and Development and the Department of Labor and Employment. The author obtained his Bachelor of Science in Social Work degree from the University of the Philippines Diliman and his Master of Arts in Public Management degree from the International University of Japan through the support of the Asian Development Bank – Japan Scholarship Program.

References

- Aperoch, M. D. B., Diansay, I. Z. Z., Naijal, D. L. M. E., & Drajido, K. A. (2022). Medical social workers' social wellbeing: Tales from the frontliners. *Philippine Journal of Social Development*, 15(1), 113-127. <https://cswcd.upd.edu.ph/knowledge-hub/philippine-journal-of-social-development/pjsd-15-2022/>
- Ashcroft, R., Sur, D., Greenblatt, A., & Donahue, P. (2022). The impact of the COVID-19 pandemic on social workers at the frontline: A survey of Canadian social workers. *The British Journal of Social Work*, 52(3), 1724-1746. <https://doi.org/10.1093/bjsw/bcab158>
- Banks, S., Cai, T., de Jonge, E., Shears, J., Shum, M., Sobočan, A., Strom, K., Truell, R., Úriz, M., and Weinberg, M. (2020, June 29). *Ethical challenges for social workers during COVID-19: A global perspective*. International Federation of Social Workers. <https://www.ifsw.org/wp-content/uploads/2020/07/2020-06-30-Ethical-Challenges-Covid19-FINAL.pdf>
- Beer, O. W., Phillips, R., Stepney, L., & Quinn, C. R. (2020). The feasibility of mindfulness training to reduce stress among social workers: A conceptual paper. *The British Journal of Social Work*, 50(1), 243-263. <https://doi.org/10.1093/bjsw/bcz104>
- Beer, O. W., Phillips, R., & Quinn, C. R. (2021). Exploring stress, coping, and health outcomes among social workers. *European Journal of Social Work*, 24(2), 317-330. <https://doi.org/10.1080/13691457.2020.1751591>
- Bender, A., & Farvolden, P. (2008). Depression and the workplace: a progress report. *Current psychiatry reports*, 10(1), 73-79. <https://doi.org/10.1007/s11920-008-0013-6>
- Bernal, G., Bonilla, J., & Bellido, C. (1995). Ecological validity and cultural sensitivity for outcome research: Issues for cultural adaptation and development of psychosocial treatments with Hispanics. *Journal of Abnormal Child Psychology*, 23, 67-82. <https://doi.org/10.1007/BF01447045>
- Bernal, G., Jiménez-Chafey, M. I., & Rodríguez, M. M. D. (2009). Cultural adaptation of treatments: A resource for considering culture in evidence-based practice. *Professional Psychology: Research and Practice*, 40, 361-368. <https://doi.org/10.1037/a0016401>
- Chima, F. O. (2005). Depression and the Workplace: Occupational Social Work Development and Intervention. *Employee Assistance Quarterly*, 19(4), 1-20. https://doi.org/10.1300/J022v19n04_01
- Coffey, M., Dugdill, L., & Tattersall, A. (2004). Stress in social services: Mental wellbeing, constraints and job satisfaction. *British Journal of Social Work*, 34(5), 735-746. <https://doi.org/10.1093/bjsw/bch088>
- Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 385-396. <https://doi.org/10.2307/2136404>

- Craigie, M., Slatyer, S., Hegney, D., Osseiran-Moisson, R., Gentry, E., Davis, S., Dolan, T., & Rees, C. (2016). A pilot evaluation of a mindful self-care and resiliency (MSCR) intervention for nurses. *Mindfulness*, 7(3), 764–774. <https://doi.org/10.1007/s12671-016-0516-x>
- Department of Health. (2020). *Your mind matters: DOH calls for unified response to mental health*. Retrieved 07 February 2024 from <https://businessmirror.com.ph/2020/10/14/doh-calls-for-unified-response-to-improve-mental-health-care/>
- Dillenburg, K. (2004). Causes and alleviation of occupational stress in child care work. *Child Care in Practice*, 10(3), 213-224. <https://doi.org/10.1080/1357527042000244356>
- Downing, K., Brackett, M., & Riddick, D. (2021). Self-care management 101: Strategies for social workers and other frontline responders during the COVID-19 pandemic in rural communities. *Journal of Human Behavior in the Social Environment*, 31(1-4), 353-361. <https://www.tandfonline.com/doi/full/10.1080/10911359.2020.1825265>
- D'Alessandro, A. (1995). *Managed Behavioral Health Care: Provide Training and Development Manual*, Vol. II, Clearwater, FL.
- Garfin, D. R., Cipres, A. L., & Reyes, R. M. (2021). Mindfulness-based interventions to address psychological distress during COVID-19: applications and opportunities. *Int J Complement Altern Med*, 14, 64-67. <https://doi.org/10.15406/ijcam.2021.14.00534>
- Gómez-García, R., Alonso-Sangregorio, M., & Llamazares-Sánchez, M. L. (2020). Burnout in social workers and socio-demographic factors. *Journal of Social Work*, 20(4), 463-482. <https://doi.org/10.1177/1468017319837886>
- Grantoza C. J. (2017). In search of culturally sensitive factors in the translation of a western based approach to a Filipino intervention. [Unpublished Masteral Thesis]. Ateneo de Manila University.
- Griffiths, A., Royse, D., Murphy, A., & Starks, S. (2019). Self-care practice in social work education: A systematic review of interventions. *Journal of Social Work Education*, 55(1), 102–114. <https://doi.org/10.1080/10437797.2018.1491358>
- Hosseinzadeh Asl, N. R. (2022). A randomized controlled trial of a mindfulness-based intervention in social workers working during the COVID-19 crisis. *Current Psychology*, 41(11), 8192-8199. <https://doi.org/10.1007/s12144-021-02150-3>
- IFSW. (2018, July 2). *Global social work statement of ethical principles*. Retrieved 07 February 2024 from <https://www.ifsw.org/global-social-work-statement-of-ethical-principles/>
- Imperial, P. M., Abes, V. A. C., Ronquillo, M. J., & Vilegas, M. A. C. (2023). The Occupational Wellness Concerns and Self-Care Strategies of Filipino Medical Social Workers During The COVID-19 Pandemic. *ASEAN Social Work Journal*. <https://doi.org/10.58671/aswj.v11i2.44>
- Ingram, R. (2013). Emotions, social work practice and supervision: An uneasy alliance? *Journal of social work practice*, 27(1), 5-19. <https://doi.org/10.1080/02650533.2012.745842>
- Josefsson, T., Lindwall, M., & Broberg, A. G. (2012). The effects of a short-term mindfulness based intervention on self-reported mindfulness, decentering, executive attention, psychological health, and coping style: Examining unique mindfulness effects and mediators. *Mindfulness*, 5, 18-35. <https://doi.org/10.1007/s12671-012-0142-1>
- Kabat-Zinn, J. (1994). *Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life*. New York, Hyperion.
- Kim, H., & Kao, D. (2014). A meta-analysis of turnover intention predictors among US child welfare workers. *Children and Youth Services Review*, 47, 214-223. <https://doi.org/10.1016/j.childyouth.2014.09.015>
- Kulis, S. S., Marsiglia, F. F., Cutrin, O., Munyuwiny, S., Huang, C. K., Gresenz, K., & Campos, A. P. (2023). Feasibility, acceptability and utility of the evidence-based “keepin’it REAL” Substance Use Prevention Program for Early Adolescents in Kenyan Schools. *African Journal of Alcohol and Drug Abuse*, 9(1), 41-59. <https://www.ajol.info/index.php/ajada/article/view/259640>
- Lawson, E., & Das, D. (2020). To leave or to stay? The differential factors that determine turnover and retention of Massachusetts social workers. *International Journal of Public Sector Performance Management*, 6(4), 566-586. <https://doi.org/10.1186/s12913-021-07435-8>
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer.
- Lloyd, C., King, R., & Chenoweth, L. (2002). Social work, stress and burnout: A review. *Journal of mental health*, 11(3), 255-265. <https://doi.org/10.1080/09638230020023642>
- Lovibond, P. F., & Lovibond, S. H. (1995). The structure of negative emotional states: Comparison of the depression anxiety stress scales (DASS) with the beck depression and anxiety Inventories. *Behavior Research and Therapy*, 33, 335–343.
- Maddock, A., McCusker, P., Blair, C., & Roulston, A. (2021). The Mindfulness-Based Social Work and Self-Care Programme: A mixed methods evaluation study. *The British Journal of Social Work*, bcab203. <https://doi.org/10.1093/bjsw/bcab203>

- Maddock, A., McGuigan, K., & McCusker, P. (2023). A randomised trial of Mindfulness-based Social Work and Self-Care with social workers. *Current Psychology*, 1-14. <https://doi.org/10.1007/s12144-023-04410-w>
- Manotas, M. A. (2012). *Brief mindfulness training to improve mental health with Colombian healthcare professionals* (Order No. 3545006). Available from ProQuest Dissertations & Theses Global; Publicly Available Content Database. (1238203994). <http://login.ezproxy1.lib.asu.edu/login?url=https://www.proquest.com/dissertations-theses/brief-mindfulness-training-improve-mental-health/docview/1238203994/se-2>
- Maravilla, N., & Tan, M. (2021). Philippine mental health act: Just an act? A call to look into the bi-directionality of mental health and economy. *Frontiers in Psychology*, 12, 706483. <https://doi.org/10.3389/fpsyg.2021.706483>
- Marsiglia, F. F., Medina-Mora, M. E., Gonzalvez, A., Alderson, G., Harthun, M., Ayers, S., ... & Kulis, S. (2019). Binational cultural adaptation of the keepin'it REAL substance use prevention program for adolescents in Mexico. *Prevention Science*, 20, 1125-1135. <https://doi.org/10.1007/s11121-019-01034-0>
- Martinez, A. B., Co, M., Lau, J., & Brown, J. (2020). Filipino helpseeking for mental health problems and associated barriers and facilitators: A systematic review. *Social Psychiatry and Psychiatric Epidemiology*, 55(11), 1397–1413. <https://doi.org/10.1007/s00127-020-01937-2>
- Maslach, C., Jackson, S. & Leiter, M. (1996). *Maslach Burnout Inventory Manual*. Palo Alto: Consulting Psychologists Press.
- Mesa, M. L. R. A., & Lopez, G. D. (2023). The effect of an adapted mindfulness program on depression, stress, and self-compassion: A pilot study among Filipino public school teachers. *Psychological Studies*, 68(4), 521-533. <https://doi.org/10.1007/s12646-023-00744-4>
- NASW. (2020). *Self-care for social workers*. National Association of Social Workers. Retrieved 13 February 2024 from <https://www.socialworkers.org/Practice/Infectious-Diseases/Coronavirus/Self-Care-During-the-Coronavirus-Pandemic>
- Peinado, M. and Anderson, K. (2020). Reducing social worker burn-out during COVID-19. *International Social Work*, 63(6), 757–760. <https://doi.org/10.1177/0020872820962196>
- Quinn-Lee, L., Olson-McBride, L., & Unterberger, A. (2014). Burnout and death anxiety in hospice social workers. *Journal of social work in end-of-life & palliative care*, 10(3), 219-239. <https://doi.org/10.1080/15524256.2014.938891>
- Sutcliffe, K. M., Vogus, T. J., & Dane, E. (2016). Mindfulness in organizations: A cross-level review. *Annual review of organizational psychology and organizational behavior*, 3, 55-81. <https://doi.org/10.1146/annurev-orgpsych-041015-062531>
- Uclaray, A. C., Benitez, J. B., Llantino, C. A., & Nayra, E. M. (2022). Social workers' roles, challenges, and lessons learned during the COVID-19 pandemic in Albay, Bicol. *Philippine Journal of Social Development*, 15(1), 128-146. <https://cswcd.upd.edu.ph/knowledge-hub/philippine-journal-of-social-development/pjsd-15-2022/>
- Virgili, M. (2015). Mindfulness-based interventions reduce psychological distress in working adults: a meta-analysis of intervention studies. *Mindfulness*, 6(2), 326-337. <https://doi.org/10.1007/s12671-013-0264-0>
- Vleeshouwers, J., Knardahl, S., & Christensen, J. O. (2016). Effects of psychological and social work factors on self-reported sleep disturbance and difficulties initiating sleep. *Sleep*, 39(4), 833-846. <https://doi.org/10.5665/sleep.5638>
- Vonderlin, R., Biermann, M., Bohus, M., & Lyssenko, L. (2020). Mindfulness-based programs in the workplace: A meta-analysis of randomized controlled trials. *Mindfulness*, 11(7), 1579–1598. <https://doi.org/10.1007/s12671-020-01328-3>
- Zastrow, C. (1984). Understanding and preventing burn-out. *British Journal of Social Work*, 14, 141–155.

