AN ASSESSMENT OF TEACHERS’ COPING MANAGEMENT OF PERCEIVED STRESS AND FEAR OF THE UNKNOWN

Dr. Merissa Braza Ocampo
Fukushima Gakuin College Fukushima City
E-mail: merissao@yahoo.com

ABSTRACT

Amidst the burgeoning research currently conducted on the effects of COVID-19, this study looks particularly at teachers’ stress and anxiety during a time of heightened global uncertainty, which also strongly affects educational processes. The paper draws on data provided through online questionnaires, and follow-up interviews with teachers at a variety of educational institutions in Japan, the Philippines, and eight other countries. Findings from 100 respondents include details regarding the extent and distribution of various behaviors and emotional tendencies gained from quantitative analysis, and additional follow up questions, all conducted online. Numerous strategies for combatting the negative impact of COVID-19 are presented, and a variety of individual responses to this predicament is stressed. The study confirms that COVID-19 is having an unprecedented impact on education, affecting not only students but teachers as well. Thus, the study aims to both assist in alleviating the negative impacts on teachers’ wellbeing and to provide helpful insights that contribute to the body of knowledge on teachers’ coping management of perceived stress and anxiety.

Keywords: COVID-19, education, teachers’ stress management, mindfulness and self-compassion

Introduction

The outbreak of coronavirus (COVID-19) caused immense concern around the globe and on March 11, 2020, the World Health Organization (WHO) declared it a pandemic, pointing to the over 118,000 cases in over 110 countries and territories around the world, and the sustained risk of further global spread (WHO, 2020). WHO director-general Adhanom, T. 2020 emphasized, “This is not just a public health crisis, it is a crisis that will touch every sector,” which means that “every sector and every individual must be involved in the fight.” At the same time, he cautioned that “pandemic is not a word to use lightly or carelessly. It is a word that, if misused, can cause unreasonable fear leading to unnecessary suffering and death,” (Ducharme, 2020). Indeed, the fear and anxiety that such a highly charged term evokes can result in physical, emotional, and psychological distress in both children and adults.
Amidst this climate of concern, countries around the world considered this new disease as a serious risk to their citizens. Consequently, the Philippine government implemented the Enhanced Community Quarantine (ECQ) to contain the spread of COVID-19 on March 16, 2020, which was extended until April 30, 2020 (UNICEF, 2020). In Japan, the government confirmed the first outbreak of the disease on January 25, 2020, followed by a second outbreak on March 11-23, 2020. The Japanese government established a national anti-coronavirus task force on January 30, 2020, soon after confirmation of the first case in Japan (Ducharme, J. 2020). In February 2020, Shinzo Abe, then Prime Minister of Japan, requested the temporary closure of all Japanese elementary, junior high, and high schools until early April. Concern about the pandemic also affected the upcoming 2020 Summer Olympics until both the Japanese government and the International Olympic Committee negotiated its postponement until 2021 (Sekizuka, 2020). Following an outbreak of COVID-19 on the cruise ship Diamond Princess, the Japanese government shifted its focus from a containment policy to one of prevention and treatment because they anticipated increasing community spread within Japan (Prime Minister of Japan and His Cabinet, 2020). The disease’s spread has impacted not only tourism and the economy, but the society as a whole (Kyodo News, 2020; Japan Times, 2020).

Responses to COVID-19 have also worsened education inequality between rich and poor around the world (Kodachi, 2020). At the time of writing, schools in more than 100 countries and regions remain completely closed, widening the education gap between advanced economies and middle- and low-income nations unable to provide online learning. According to UNESCO, as of June 2020, most of the schools in Uruguay reopened, as they did in Japan, with children in Australia and Vietnam also returning to the use of physical classrooms. However, these countries represent the minority. Information from UNESCO shows that only 49 out of 210 countries or regions were able to completely reopen pre-elementary to high school education as of July 18, 2020. Fifty-four countries and regions, including the U.S., U.K., Germany and China, have partially reopened schools. But in 51% of countries and regions, schools are still completely closed. Roughly 1.07 billion children live in these areas, accounting for more than 60% of the children in the world. When the countries and regions are categorized by income levels, about 90% of low- and lower-middle income locations are still not able to reopen schools nationwide, due to COVID-19.

School closures have also highlighted the issue of inequality, especially in emerging economies. Developing countries are also striving to find new ways to deal with the crisis. In Bangladesh, teachers are producing education programs that are broadcast on state television.
Mozambique, meanwhile, is making use of the radio to reach children. However, these methods are not interactive; students cannot raise their hands to ask questions. To address this particular issue, India is trying to prevent students from falling behind by using education apps via smartphones. In Japan, schools have reopened, but according to the Ministry of Education, Culture, Sports, Science and Technology, interactive online courses were only conducted in 8% of elementary schools and about 10% of middle schools. Inequality in education can influence the competitiveness of a country decades later. While countries are striving to strike a balance between preventing new infections and reopening their economies, education for the future must also be considered. In the Philippines, President Rodrigo Duterte in May laid out his priorities in keeping the country safe. "For me, vaccine first. If the vaccine is already there, then it's OK," he said, insisting that until there is a vaccine available, schools cannot be reopened (Japan Times, 2020).

The COVID-19 pandemic’s impact on learners became a global concern, especially in mid-March 2020. Efforts to slow the spread of the disease through non-pharmaceutical intervention, and preventive measures such as social distancing and self-isolation prompted the widespread closure of primary and secondary, tertiary schooling in over 100 countries (UNESCO, 2020). As of March 19, 2020, nearly 91% of the world’s learners were impacted by closures. School performance hinges critically on maintaining close relationships with teachers. Although such relationships can be maintained through online classes via video telephony software such as Zoom, Google meet, etc., unequal access to these educational resources is a problem. Millions of students are expected to defer the start of their studies to a later year due to the pandemic.

It is clear that the conditions described above are having an unprecedented impact on education, affecting not only students emotionally but teachers as well. While teachers struggle to continue their work under unfamiliar constraints, many do not have the luxury of self-reflection at such a critical time. As part of ongoing research on teacher’s stress and anxiety management, and coping strategies, it is hoped that the current study might help to alleviate the negative impacts on wellbeing of the current situation (UNICEF, 2020), and provide helpful insights on teachers’ stress in a time of heightened uncertainty, and fear of the unknown, which is affecting educational processes on a global scale.

**Literature Review**

As mentioned earlier, this work built on previous research by the Author (Author), in which relevant literature was surveyed in more detail. In the current study, work by Da Costa
et al. (2020) help to inform the researcher in aspects of contemporary questionnaire delivery, specifically the use of Google Forms. This timely work has also been considered in the contemporary Indonesian context in a study by Lailaturrahmi et al. (2020). In terms of theoretical framework, this study drew on recent examinations of quantitative and qualitative research methodologies by Mason (2002), and more recent work by Kowald and Axhausen (2016). Research directly relevant and which contributed to the current study include an examination of teachers’ wellbeing during COVID-19 by Morris (2020). Work by Ryan (1996; 2017) looks carefully at psychological aspects of language learning, which helped to inform the thinking that guided the current study. Other work consulted in developing the current research include a study of how human brains are socially wired by Lieberman (2013) and a study on the interpersonal processes underlying intimacy by Duck et al. (1988).

**Methods**

Building on previous studies, including work by the author (Author 2016, 2017), which makes explicit the rationale behind research into teacher’s stress, this examination of teachers’ coping management of perceived stress and fear of the unknown was carried out in the context of the heightened conditions of a global pandemic. It sought to gain a wide range of insights from instructors in different parts of the world and, while the main focus was regional, with much information provided by teachers in Japan and the Philippines, respondents from an additional eight countries worldwide contribute to the study.

In order to reach a wide range of respondents, questions were designed and delivered in an online survey using Google Forms, which is a helpful online tool increasingly utilized by researchers worldwide (Lailaturrahmi et al. 2020; Da Costa et al. 2020). Beginning with pre-established contacts, such as current and former colleagues and members of academic associations, by asking participants to share the link to the questionnaire with their own networks, the study was expanded using the snowball effect (Naderifar et al. 2017; Valerio et al. 2016).

The online survey was opened to the public from March 2020 to September 2020. This Assessment on Teacher’s COVID-19 Perceived Stress Scale Questionnaire has two parts: respondents’ information, and an assessment of self-perception, overcoming fear, social distancing, stress and anxiety management, and COVID-19 management during the outbreak. The initial part of the questionnaire sought information on respondents’ individual backgrounds such as age, gender, academic affiliation, and current teaching location. The
questionnaire included an examination of perceived stress, ways of overcoming fear of the ‘unseen virus,’ coping with anxiety, preventive measures, attitudes, stress and anxiety management, and a self-care assessment.

In this study, the quantitative analysis of results using measures including frequency, mean and standard deviation, provides a platform from which to interpret participants’ responses, and helps to reveal areas of concern that were able to be followed up further or confirmed in semi-structured interviews. While not carried out extensively in the current study, the careful integration of quantitative and qualitative research methods can prove very helpful in conducting similar work, which deals with data from a wide range of sources, and concerns with intimate aspects of the human condition (Kowald & Axhausen, 2016; Mason 2002).

**Result and Discussion**

Participants in this study included a total of 60.5% female, 36.8% male teachers, and 2.6% gender-unrevealed from 10 different countries; Philippines (53.9%), Japan (32.9%), Canada (3.9), Cambodia (1.3%), China (1.3%), Iceland (1.3%), Malaysia (1.3%), Singapore (1.3%), United Kingdom (1.3%), and United States of America (1.3%). In terms of age, results indicated that 18.4% of them were between 31-35 years old, 13.2% were from 41-45 and 26-30 years old, 11.8% were 25 years old and below and 46-50 years old, 9.2% were ages 36–40 and 51-55 years old and 13.2% belong to 56 -61 years and above. Information provided about respondents’ affiliated institutions showed that 65% were teaching at tertiary and graduate level, 17.1% at secondary level, 11.8% in elementary level, and 5.3% were working in early education level.

**Figure 1. List of respondents’ affiliation location during COVID-19**

![List of respondents' affiliation location during COVID-19](image-url)
The following sections will present findings and ideas on perceived stress during the early outbreak of COVID-19, management of fear and anxiety related to COVID-19, self-preventive measures, COVID-19 stress and anxiety, and the management of related emotions. Responses to the outbreak are influenced by one’s background, gender, job, and the community in which one lives. This ‘unseen virus’ provoked a huge fear in people, especially in the older generation, those with chronic diseases, and health care education providers. Workers in health and education don’t only worry about their own health, but also about how their response to COVID-19 will affect others. They have to monitor their own well-being carefully in order to be in a position to extend their care to their family, friends, students, and community. In this respect, management strategies for coping with stress and anxiety are fundamental. There are many activities that lessen the stress. These include: walking, reading, listening to music, joining social media, updating oneself minimally about the pandemic situation, engaging in regular breathing exercises, stretching, eating a balanced diet, sufficient sleep, avoiding excess alcohol intake, avoiding drug use, making time to ‘be with yourself,’ enjoying activities that one personally likes, and most importantly, connecting with other people. It is important to communicate with people you trust about your feelings, since the disclosure of one’s fears and worries to a trusted individual helps one to deal with stress and anxiety. The numerous strategies just listed can no doubt alleviate people’s negative emotions. At the same time, it is important to bear in mind that stress affects individuals in a variety of different ways.

Perceived Stress during early COVID-19 outbreak

The spread of COVID-19 and resultant closure of many restaurants, schools, universities, and business related-establishments worldwide deeply affected people’s emotions, thoughts, and behaviour. As pointed out, people respond based on their reaction and emotions differently and even people who are generally physically and mentally strong under normal conditions can find the stability of their mind and body partially shattered by a sudden global threat. During the early pandemic outbreak, respondents’ perceived stress was probed. Questions asked included how often they were unable to control important things in their life, felt nervous and stressed, and felt confident handling problems. They were also asked how often they were unable to cope with the things they had to do, control their irritation, felt anger, felt that difficulties and worries were piling up, had worries they were unable to overcome, and felt confident to handle the pandemic. Responses to these questions were given as a 5-point scale of 0 =never, 1=almost never, 2=sometimes, 3=fairly often, and
very often. The results of this study, as shown in Table 1, indicated a mean average of 2.27 and Standard Deviation (SD) of 0.08. This showed that these respondents sometimes felt upset because of the unexpected global outbreak. Forty percent of the respondents revealed that they were confident about their ability to handle the health problem. Their confidence was significantly related to the level of the institution at which they were teaching.

Table 1. Assessment of Teachers’ Coping Management of Perceived Stress and coping strategies

<table>
<thead>
<tr>
<th>Scale: 0 = Never, 1 = Almost never, 2 = Sometimes, 3= Fairly often, 4 = Very often</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived stress during early COVID-19 outbreak</td>
<td>100</td>
<td>2.27</td>
<td>0.08</td>
</tr>
<tr>
<td>Fear and anxiety self- management and coping with COVID-19</td>
<td>100</td>
<td>2.09</td>
<td>0.16</td>
</tr>
<tr>
<td>Self-assessment about social distancing</td>
<td>100</td>
<td>2.54</td>
<td>0.31</td>
</tr>
<tr>
<td>COVID-19 stress and anxiety and related emotions management</td>
<td>100</td>
<td>3.51</td>
<td>0.16</td>
</tr>
<tr>
<td>Preventive measures and self-care during COVID-19 outbreak</td>
<td>100</td>
<td>4.01</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Fear and anxiety self- management and coping with COVID-19

At the time of writing, more than seven months have passed since the COVID-19 pandemic outbreak. Fears, worries, and numerous precautions against the spread of virus continue to be a global concern. During such a period of adjustment and change, it can be helpful for people to be more aware of their own feelings and notice how their feelings and experiences differ (Psychological Society of Ireland, 2011). According to Spilt, (2011), the differences in feeling and thinking that someone would notice include: inability to stop thinking about what is happening; how you feel physically, including physical tiredness, gastrointestinal problems, different kinds of pain, loss of appetite and sleep difficulties; feeling worried, anxious, irritable, sometimes numb; experiencing a sense of withdrawal from contacting ones’ loved ones and friends, having less physical exercise, being less concerned about one’s food intake and alcohol consumption. With regard to the physical and mental changes just listed, respondents were asked to answer questions about how often they felt overcome by their COVID-19-related fears, using a 5-point scale, the same as that given for the questions during early COVID outbreak in the section above.

Responses revealed that 51% of the participants often and fairly often felt scared that they would be infected by the virus. At the same time, 53% did not worry much about
suspension of classes and school closure. However, the remaining 47% said that since they are working in dispatch companies, their salary might be lowered due to a reduced number of students and less school classes. 41% were worried that if they were infected with the virus no one will take care of them. In contrast, 59% of respondents believed that their family, friends and health insurance would take care of them. While 58% revealed that their working company would not take care of it, 42% still believed that their company would assist them in some ways. The researcher was also able to follow up by asking some of the respondents online about how they personally cope with this pandemic and how they were able to think positively. Respondents from the Philippines, Cambodia, Canada, Malaysia, and 31.9% of respondents from Japan presented a religious explanation for their ability to maintain a positive outlook, with 52% of them expressing the belief that God will protect them from COVID-19. Further, 9% sometimes believed that they might be protected through miracles. At the same time, 39% did not believe that God will protect them. Thus 41% of the respondents were of the opinion that they alone could protect themselves against the virus. In Table 1, the resulting measurement of the Fear Assessment and Cope with the Unknown had a mean average of 2.09 and a SD of 0.16. This can be interpreted to mean that respondents were almost unaffected with stress and fear about the virus.

**Self-assessment about social distancing**

In terms of preventive measures to prevent and contain the virus: 90% of respondents strongly agreed that they will not go to the movie theatre, 52% believed that God will protect them, 79% strongly revealed that they definitely would not attend church gatherings, 84% would not go to restaurants, and 78% would not go to a hot spring or spa. Activities such as taking part in online meetings, working from home, travel postponement, stocking up on food stuffs, online shopping and delivery, gathered more than a 70% response from participants. Here are the following preventive measures respondents shared with 2.54 mean average and 0.31 standard deviation a shown in Table 1: accept the situation positively like working at home, carry out one’s usual lifestyle but with extra precautions, diligently follow the government’s COVID-related rules and regulations, stop joining outdoor activities such as hanami (cherry blossom viewing), drinking at beer gardens, and hanabi (fireworks displays), doing ‘quick shopping’ to avoid crowds, strictly avoiding closed spaces with poor ventilation and crowded and close-contact settings, start gardening and small business at home, and washing hands. In Japan, during the state of emergency these ten tips for reducing contact by 80% were highly recommended; family reunions via video chat and not visiting one’s
hometown, going to supermarkets alone or in small groups at less crowded times, enjoying jogging in small group in less crowded parks and less crowded times, doing non-urgent shopping online, enjoying drinking with friends online, using remote medical services, using videos at home for workouts, yoga, etc., using takeout or delivery for food, working from home with the exception of medical infrastructure and distribution sectors, and wearing a mask when talking (Prime Minister’s Office of Japan, 2020).

**COVID-19 Stress And Anxiety And Related Emotions Management**

Stress affects health when it exceeds someone’s ability to cope. The sudden wake of the pandemic gave teachers an uncontrollable exposure to stressors in aspects of everyday life. These included increased workload due to sudden online class preparations, commitment to unstable work schedule and learning environment these chronic stresses lead to negative behavioural, cognitive, physiological and neurological changes over time that increase vulnerability to poor health (Egerter et al., 2011). Some of the signs that teachers should be aware of include: a feeling of numbness, changes in appetite, difficulty concentration, having nightmares and upsetting thoughts, physical signs such as headaches, body aches and skin rashes, uncontrollable anger, and increased alcohol intake.

In Table 1, respondents’ mean average of 3.51 and standard deviation of 0.16 revealed that they often did the following COVID-19-related stress and anxiety measures to avoid the above mentioned signs: keeping their usual schedules like doing household chores, staying informed about the pandemic updates, staying physically active by doing gardening, disposing documents and things accumulated over decades, doing something meaningful such as home projects like baking and cooking, connecting with others online, watching movies and dramas on Netflix and YouTube, practicing self-compassion, meditation, and prayer. In terms of social distancing, global citizens observe social distancing as one of the preventive measures to combat the spread of COVID-19. This deprivation of human contact underscores the idea that there is no healthy psychological development without relatedness (Spitz, 1965). More recently, according to Ryan & Deci (2017), social psychologists have argued that there is a basic need for belongingness. That is, a need to maintain a psychological sense of being connected to and accepted by others. This idea also fits with the vast literature on social support that has similarly suggested that people’s experience of others as providing supportive relationships, directly contributes to wellness (Lieberman, 2013; Reis & Shaver, 1988; Ryan & Solky, 1996). In Table 1, the respondents in this study with a mean average of 4.01 and standard deviation of 0.50, strongly followed the following
self-care practices: having adequate sleep, vitamin supplement intake, wearing a mask, washing hands, exercise, meditation and prayer. These respondents appreciated the positive side of the lockdown and state of emergency. This gave them an opportunity to be physically and emotionally connected with the families and friends with whom they were living. According to Ryan (2017), despite the importance of relationship to people, not all social contacts yields a sense of relatedness or satisfies people’s basic psychological needs. However, among some of the respondents temporarily less social interaction became acceptable.

As teachers, respondents revealed that they panicked and worried a lot but felt that they had to be strong, not only for their families but also for their students. This is supported by Morris (2020), who suggests that teachers should accept their COVID-19 related emotions because denying their true feeling may cause more damage to themselves. Morris also suggested the following strategies to help improve teachers’ wellbeing during the pandemic outbreak and beyond: laugh, find ways to laugh every day, watch a funny video on the internet, call a friend online, deliberately laugh for your wellbeing and limit the COVID-19 related news. Morris points out that continuous depressing news triggers negativity and might cause mental harm and exhorts that one be active physically, take a walk and do exercise. It is the researcher’s opinion that practicing mindfulness can improve mental wellbeing. This means paying attention to the present moment can help one enjoy and focus on the positive sides of the here and now. Sharing kindness and the creation of positive feelings provides a feeling of purpose and self-worth. In addition to the Morris’ suggestions, a significant thread in the respondents’ data was the notion of religiosity. Namely, they strongly agreed that their faith to the Almighty provided them enough strength to face any problems.

Conclusion

The pandemic outbreak obviously impacted and changed the lives of people around the world, and created negative feelings and emotions such as fear, stress and anxiety. Severe COVID-19-related experiences such as the inability to respond to emergency, losing their loved one due to the virus and being unable attend memorial services of departed loved ones resulted in depression and trauma. There was also dissatisfaction on the part of those teachers who were unable to fulfil their objective to attend national and international academic conferences due to flight restrictions. It may be some time before the present conditions return to normal, if they ever do. Despite this unfortunate reality, it is important that teachers
do not to put their lives on hold, fall into negativity, or allow their wellbeing to be deprived. The teachers from eight countries in this study have shown a positive outlook on life and sufficient knowledge on how to cope with their fear, stress and anxiety. It was revealed that these teachers practice measures to contain the virus in their respective working places with the proper and detailed support from the government of each respective country. In addition, the practice of mindful self-compassion, which was included in the research questionnaire, gave respondents an idea of how such practices can help them control their emotions. Respondents in Japan who practiced mindful self-compassion confirmed its effectiveness in helping them be real ‘super teachers’ as described by Author (2017). At the present time, studies related to COVID-19 are sprouting worldwide due to the timely concern of and for citizens everywhere. However, despite this immediateness and level of concern, very few studies have been conducted about the positive effect of mindful self-compassion to promote teachers’ emotional and mental wellbeing. In the face of fears of an unknown future, forewarned is forearmed, and to the extent that such work can promote teachers’ wellbeing, further ongoing and related research is highly recommended.

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