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ASSESSING THE MENTAL HEALTH OF LGU EMPLOYEES: BASIS FOR THE DEVELOPMENT OF PROGRAM TO STRENGTHEN SUPPORT AND WELL-BEING

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ABSTRACT

This study focused on the mental health of employees in the Municipal Government of Gasan, Marinduque. Specifically, it examined the demographic profiles of employees, assessed their emotional well-being, coping strategies, and experiences of stress, identified factors influencing their mental health, and explored their perceptions of the mental health support services available to them. Data analysis was conducted using the Statistical Package for the Social Sciences (SPSS) Version 25 and Microsoft Excel 365 with the Stat Tool Package. Kendall's Tau-b correlation analysis and the Kruskal–Wallis test were employed to examine relationships and group differences. For multiple comparisons, the Bonferroni correction was applied, adjusting the significance level to a = 0.000625. The results indicated no statistically significant differences in the mental health status of local government unit (LGU) employees when analyzed by demographic variables. Similarly, perceptions of mental health services provided by the LGU did not differ significantly across demographic groups. Across mental health indicators – including stress levels, coping mechanisms, emotional well-being, and contributing factors such as workload, interpersonal relationships, job security, and job satisfaction – no significant gender differences were found. Further analysis revealed no significant variation in stress, coping, or emotional well-being based on employment appointment type. However, a significant difference in stress levels was observed when respondents were grouped by length of service. Employees with 31 to 40 years of service reported the highest stress levels. Interestingly, this group also demonstrated more effective coping strategies and higher levels of emotional well-being, suggesting the possible development of psychological resilience or adaptation over time. Additionally, the study found a significant difference in job satisfaction between employment types: temporary employees reported greater satisfaction than job order workers. This finding may suggest that temporary positions provide greater alignment with individual expectations, autonomy, or work-life balance. These findings highlight the need for LGUs to implement targeted strategies that promote job satisfaction and collegial relationships while addressing workload management and job security to support sustainable employee mental health. The study recommends replicating this research in other regions of the Philippines to assess the generalizability of these results and to explore additional variables that may influence help-seeking behaviors and mental health outcomes.

KEYWORDS: *Mental Health, LGU Employees, Well-Being, Wellness Program*

INTRODUCTION

Local Government Unit (LGU) employees play a critical role in delivering public services that uphold community welfare, particularly during times of crisis. The COVID-19 pandemic significantly intensified the demands placed upon these workers, amplifying existing stressors and revealing critical gaps in mental health support systems. As frontline responders and administrative leaders, many LGU personnel were required to operate under extreme conditions—including limited resources, extended work hours, and continuous exposure to health risks. These circumstances placed considerable strain on their emotional and psychological resilience.

In the post-pandemic period, LGU employees continue to experience elevated levels of occupational stress, often leading to burnout, emotional exhaustion, and diminished job satisfaction. These mental health challenges not only compromise individual well-being but also negatively affect productivity and the quality of public service delivery. Employees in leadership and frontline roles remain particularly vulnerable due to persistent workloads, tight deadlines, and frequent, emotionally charged interactions with the public. Leaders bear the burden of complex decision-making responsibilities and organizational accountability, while frontline personnel face the physical and emotional strain of service implementation.

The cumulative effect of these pressures substantially increases the risk of psychological distress. Recent studies have highlighted the association between high job demands in public-facing roles and increased levels of emotional exhaustion, reduced psychological well-being, and greater intentions to leave the job (Molina & Padilla, 2023; Tucker et al., 2021). Accordingly, there

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is a growing consensus regarding the urgent need to strengthen workplace mental health frameworks, particularly for employees in high-stress roles. Such initiatives are essential to fostering resilience, improving job satisfaction, and sustaining the long-term viability of public service delivery (Zacher & Rudolph, 2022).

Although previous research has examined general occupational stress within the public sector, there remains a notable gap in the literature addressing the specific mental health needs of LGU employees in the Philippine context. Current interventions often lack specificity and fail to account for the unique challenges faced by this workforce, including leadership fatigue, bureaucratic complexity, and chronic resource limitations.

This study aims to address this gap by exploring the distinct mental health challenges encountered by LGU employees, particularly in the aftermath of the pandemic. The findings are intended to inform the development of a targeted mental health program designed to enhance institutional support systems, improve employee well-being, and ensure that LGU personnel can continue delivering essential services with resilience, effectiveness, and sustained motivation.

Purpose of the Research

This research aimed to develop a mental health program for LGU employees, in collaboration with educational institutions, to provide expert guidance, training, and resources that support their well-being. This partnership ensured the program was evidence-based and sustainable, aiming to address common mental health challenges such as stress, burnout, and anxiety in public service roles.

The study examined the current mental health situation within the municipality, identified gaps in support, and assessed employees' specific needs. The goal was to create an intervention program that equipped employees with the tools, training, and resources needed to maintain their mental well-being while effectively performing their duties. The program promoted mental health awareness, improved service access, and enhanced employee satisfaction, job performance, and public service delivery. Thus, the study sought to answer the following objectives:

1. To describe the demographic characteristics of LGU employees in terms of:
    1.1 age;
    1.2 gender;
    1.3 nature of the job;
    1.4 nature of appointment; and
    1.4 years in service
2. To examine the mental health status of LGU employees, specifically in terms of:
    2.1 stress experiences;
    2.2 coping mechanisms; and
    2.3 emotional well-being
3. To determine the factors affecting the mental health of LGU employees, such as:
    3.1 workload;
    3.2 interpersonal relationships;
    3.3 job security; and
    3.4 job satisfaction
4. To investigate the perceptions of LGU employees on mental health support services, such as:
    4.1 counseling;
    4.2 stress management; and
    4.3 peer support
5. To examine the significant difference in mental health status, factors affecting mental health, and their perceptions towards mental health support when grouped across demographics

Significance of the Research

This study addressed rising mental health concerns among LGU employees by developing a tailored support program to reduce stress and enhance well-being. Findings showed high occupational stress from workloads, emotional labor, and limited mental health resources, affecting job satisfaction, organizational climate, and productivity. The proposed program combined preventive and responsive strategies—such as stress management training, counseling access, and awareness initiatives—while strengthening LGU mental health service capacity. This integrated approach aimed to build resilience, improve workplace culture, and sustain employee well-being and organizational performance.

METHODS

Research Design

This study used a **descriptive survey design** to systematically profile the demographic characteristics, mental health status, coping mechanisms, and perceptions of support among LGU employees, without establishing causality (Aggarwal & Ranganathan, 2019). Data were gathered through structured questionnaires and validated tools to assess stress, emotional well-being, job satisfaction, and perceptions of mental health services. The design enabled pattern and trend identification, subgroup comparisons by age, gender, job classification, appointment type, and length of service, and provided baseline evidence to guide targeted interventions and future research.

Research Instrument

The research instrument comprised four parts. **Part 1** gathered demographic data—age, gender, job classification, and years of service—to contextualize findings and enable subgroup comparisons. These variables, identified in prior studies as predictors of mental health outcomes (Karasek et al., 1998; Siegrist, 2012), help assess biological, sociocultural, and occupational influences on well-being. **Part 2** measured mental health, stress, coping strategies, and emotional well-being using validated psychometric tools with established reliability and cross-cultural applicability. **Part 3** examined workplace factors—workload, relationships, job security, and satisfaction—using theory-based, reliable scales to identify causes and protective factors. **Part 4** applied statistical tests (ANOVA, t-test) to

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determine significant differences in mental health status, contributing factors, and perceptions of support across demographic groups, providing evidence for targeted policy interventions.

Data Gathering Procedures

Data were collected using a validated questionnaire, pilot-tested with 20 LGU employees, and approved by the Ethics Review Committee. Purposive sampling ensured representation across departments and job categories. Informed consent and confidentiality were maintained. The self-made demographic section and validated mental health scales were administered in person, with research assistants present. Data were securely stored, analyzed using descriptive and thematic methods, and results presented in tables and graphs to guide LGU mental health interventions.

Respondents/Units of Analysis/Subjects of the Study

The study engaged 83% (99/119) of targeted respondents—municipal officials, regular employees, and job order personnel—providing a diverse, representative sample for assessing workplace mental health in the Gasan LGU. Their insights informed the development of an inclusive program aimed at promoting wellness, reducing stigma, and ensuring accessible support across all employment types.

Sampling Design and Procedures

This study utilized purposive sampling to select LGU employees with relevant experience in workplace mental health, based on criteria such as job role, tenure, and exposure to mental health issues. To enhance credibility and reduce bias, random selection was applied within the eligible pool. Participants represented diverse departments, job classifications, age groups, and employment statuses, enabling identification of patterns and challenges across contexts. This hybrid strategy ensured methodological rigor and yielded context-specific insights to inform targeted mental health interventions within LGUs.

Research Locale/Study Site

The research took place within the Municipal Government of Gasan, Marinduque. It focused on specific sites where guidance counselors operated**,** such as municipal health offices, local schools, and community centers. These locations collaborated with guidance counselors on mental health initiatives. By researching these sites, the study gained insights into the mental health services provided and explored the specific needs and challenges of the community.

Assumptions or Hypotheses

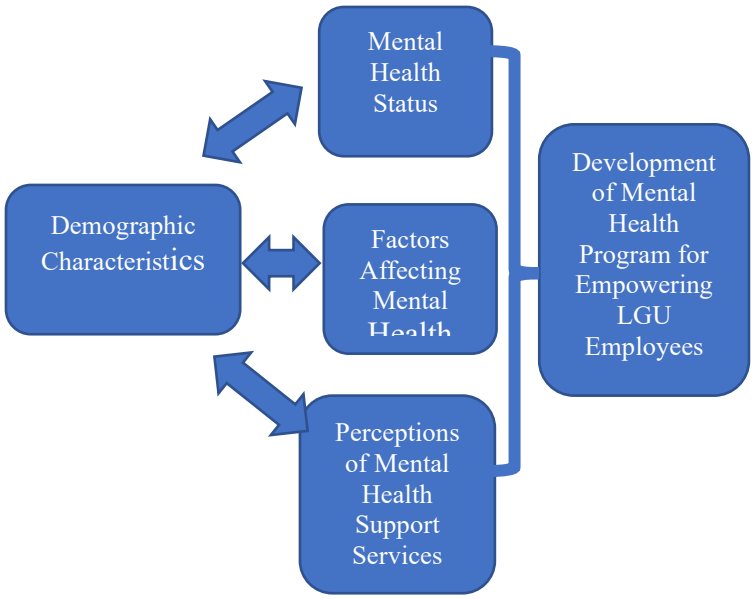
1. There is no significant difference in the Mental Health Status of the LGU employees when grouped according to their demographic profile.
2. There is a significant difference in the Mental Health drivers of the LGU Employees when grouped according to their demographic profile.
3. There is no significant difference in the Perception of the LGU Employees with the Mental Health Services offered when grouped according to their demographic profile.

Research Paradigm/Conceptual Framework of the Study

This study sought to develop an evidence-based mental health program for LGU employees by examining how personal factors (e.g., age, coping strategies) and organizational conditions (e.g., job demands, managerial support) influence well-being and help-seeking behavior. Using a needs-based approach, the intervention addressed subgroup-specific challenges, integrating preventive, early intervention, and systems-level strategies to enhance accessibility, sustainability, and organizational outcomes.

Figure 1

Conceptual Framework of the Study



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RESULTS AND DISCUSSION

Part 1. Demographic Characteristics of the Respondents.

The demographic data revealed that a significant majority (64%) of Local Government Unit (LGU) employees were between the ages of 40 and 59, with only 5% in their 30s and 30% aged 60 and above. This aging workforce trend is consistent with global patterns reported by the Organisation for Economic Co-operation and Development (OECD, 2019), which noted that many public institutions—particularly at the local level—are increasingly staffed by older employees. While this trend offers strategic advantages, such as the retention of institutional memory, mentorship capacity, and policy continuity, it also presents operational challenges. These include concerns about adaptability to innovation, particularly in embracing digital governance platforms and responding to evolving public service demands. Consequently, any mental health initiative must incorporate age-sensitive strategies, offering tailored stress management interventions for mid- to late-career employees while fostering intergenerational knowledge transfer.

The gender distribution—56% female, 37% male, and 6% identifying as transgender, with 1% preferring not to disclose—suggests a notably inclusive and diverse workforce. This inclusivity reflects alignment with gender-responsive governance principles endorsed by the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women, 2021). However, such diversity also necessitates culturally sensitive and non-discriminatory mental health policies. Programs must ensure that counseling services, wellness initiatives, and grievance mechanisms are inclusive and affirming of all gender identities, especially for individuals from marginalized communities who may experience distinct psychosocial stressors or stigma in the workplace.

Data on job functions revealed that the highest concentrations of employees were in Legislative Services (19%), Economic Services (18%), and Health Services (16%)—all of which involve high public engagement and emotional labor. These frontline and development-oriented roles are often associated with significant service pressure and emotional exhaustion. Consistent with the findings of the World Bank (2017), these data highlight the critical need for robust emotional resilience strategies, including psychological first aid, trauma-informed care, and peer support systems, to protect employee well-being in high-demand roles.

Employment type analysis showed that 75% of employees held permanent positions, reflecting a degree of institutional stability. However, this may also contribute to organizational rigidity. Previous research by the United Nations Development Programme (UNDP, 2016) and DiPrete and Buchmann (2013) suggests a dual effect: while permanent, long-tenured employees (with 38% having served 21 to 30 years) bring valuable expertise and consistency, they may also exhibit resistance to reforms, including those related to mental health and organizational change. Thus, mental health programs should incorporate change management strategies that honor institutional legacy while introducing innovations through participatory and inclusive approaches.

Moreover, the data underscore the complexity of coordination across various departments. The inherently multi-sectoral structure of LGUs requires cross-functional collaboration, which serves as both an asset and a challenge. While this structure enhances service capacity, it also complicates program alignment and internal communication. Therefore, mental health interventions must be multi-level and department-sensitive, ensuring that support mechanisms are visible, accessible, and applicable across diverse operational units.

Collectively, the demographic profile of LGU employees provides crucial guidance for the design and implementation of mental health programs that are age-appropriate, inclusive, sector-specific, and organizationally integrated. These findings indicate that program success hinges not only on the availability of services but also on cultivating an enabling organizational culture, securing leadership commitment, and enhancing adaptive capacity. Ultimately, the analysis underscores the need for a context-responsive and participatory approach to workforce mental health—one that aligns with both the lived experiences of employees and the evolving demands of local governance.

Table 1
Demographic Profile of the LGU Employee-Respondents

Profile	Group	Frequency	Percent
Age	30 – 39 years old	5	5
	40 – 49 years old	32	32
	50 – 59 years old	32	32
	60 years old and above	30	30
Gender	Male	37	37
	Female	55	56
	Transgender	6	6
	Prefer not to say	1	1

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Nature of job	Executive Services	6	6
	Legislative Services	19	19
	General Administrative Services	5	5
	Planning & Engineering Services	9	9
	Economic Services	18	18
	Medicine and Health Services	16	16
	Social and Welfare Services	10	10
	Financial Services	10	10
	Information, Arts, and Recreation Services	2	2
	Agricultural and Environmental Services	3	3
	Trade, Tourism, and Industry Services	1	1
Nature of appointment	Elective	8	8
	Coterminous	4	4
	Permanent	74	75
	Temporary	2	2
	Job Order	11	11
Years of service	Ten years and below	30	30
	11 to 20 years	29	29
	21 to 30 years	38	38
	31 to 40 years	2	2
Total		**99**	**100**

Part 2. Assessment of the Mental Health Status of Local Government Unit Employees.

LGU employees reported moderate stress (M = 3.18), indicating routine but manageable pressures, with highest scores for job comfort (M = 3.64) and lower scores in financial security (M = 2.95) and sense of control (M = 2.84). These findings suggest a fragile balance between resilience and risk, shaped by both individual and structural factors. Addressing vulnerabilities requires institutional reforms alongside individual coping strategies, integrating mental health support into organizational policy to sustain well-being and public service effectiveness.

Table 2

LGU Employees' Mental Health Status in Terms of Stress Experiences

Statement	Mean	Verbal interpretation	Rank
1. I have been feeling more comfortable and at peace with my job.	3.64	Often	1
2. I feel confident and reassured about my health.	3.29	Sometimes	2
3. My mental health is strong, and I feel not much affected by stress.	3.16	Sometimes	3
4. I am not much worried about my finances.	2.95	Sometimes	4
5. I have felt more in control and at ease over the past month.	2.84	Sometimes	5
Average	**3.18**	**Sometimes**	

Legend: 4.21 – 5.00 = Always 3.41 – 4.20 = Often 2.61 – 3.40 = Sometimes
1.81 – 2.60 = Rarely 1.00 – 1.80 = Never

LGU employees demonstrated strong adaptive coping (M = 3.79), particularly through humor (M = 4.52), consistent with Martin's (2007) findings on humor as a resilience factor and its cultural role in the Philippines (Tuason et al., 2012). High use of planning and time management aligns with problem-focused coping models (Lazarus & Folkman, 1984; Carver et al., 1989), while mindfulness-based strategies reflect proactive well-being maintenance (Grossman et al., 2004; Keyes, 2002). Lower reliance on social support suggests cultural and organizational barriers (Hofstede, 2001; Maslach & Leiter, 2016), underscoring the need for LGUs to foster psychological safety and peer support (WHO, 2022).

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Table 3

LGU Employees' Mental Health Status in Terms of Coping Mechanism

Statement	Mean	Verbal interpretation	Rank
1. I use humor or laughter techniques to manage my stress.	4.52	Always	1
2. I plan and organize tasks to manage stress	4.07	Often	2
3. I practice time management to manage stress.	4.04	Often	3
4. I am satisfied with my current personal stress management strategies.	3.96	Often	4
5. I engage in activities that bring joy and fulfillment.	3.91	Often	5
6. I engage in leisure activities whenever I feel stressed.	3.81	Often	6
7. I engage in creative activities such as arts, music, and crafting to manage my stress.	3.66	Often	7
8. I typically cope with stress through meditation, exercise, or mindfulness activities.	3.65	Often	8
9. I engage in positive self-talk to manage stress.	3.53	Often	9
10. I seek help from my friends or family whenever I feel stressed.	3.40	Sometimes	10
11. I seek social support to manage my stress.	3.18	Sometimes	11
Average	**3.79**	**Often**	

Legend: 4.21 – 5.00 = Always 3.41 – 4.20 = Often 2.61 – 3.40 = Sometimes
1.81 – 2.60 = Rarely 1.00 – 1.80 = Never

LGU employees reported high emotional well-being (M = 4.15), with optimism (M = 4.27) and life satisfaction (M = 4.23) aligning with Fredrickson's (2001) broaden-and-build theory and Seligman's (2011) well-being model. High scores across most indicators support links between emotional well-being, resilience, and health (Huppert & So, 2013; Ryff & Singer, 2008), though lower self-care engagement (M = 3.92) reflects structural barriers (Smith et al., 2018). Sustaining these positive dispositions requires institutional policies that normalize wellness practices and embed emotional health in organizational culture (WHO, 2022; Krekel et al., 2019).

Table 4

LGU Employees' Mental Health Status in Terms of Emotional Well-Being

Statement	Mean	Verbal interpretation	Rank
1. I feel hopeful and optimistic about the future.	4.27	Always	1
2. I feel happy and contented with my life.	4.23	Always	2
3. I feel satisfied with my overall emotional well-being.	4.20	Often	3
4. I feel that I have a good work-life balance.	4.20	Often	3
5. I feel that my emotional well-being affects my physical health.	4.14	Often	4
6. I feel capable of managing my daily responsibilities despite the challenges.	4.05	Often	5
7. I manage to do self-care activities.	3.92	Often	6
Average	**4.15**	**Often**	

Legend: 4.21 – 5.00 = Always 3.41 – 4.20 = Often 2.61 – 3.40 = Sometimes
1.81 – 2.60 = Rarely 1.00 – 1.80 = Never

LGU employees reported generally positive mental health (M = 3.70), with highest scores in emotional well-being (M = 4.15) supporting Fredrickson's broaden-and-build theory (Fredrickson, 2001) and strong coping strategies (M = 3.79) consistent with Carver et al. (1989). However, moderate stress levels (M = 3.18) align with the Job Demands–Resources model (Bakker et al., 2023), indicating persistent organizational pressures. Sustaining well-being requires institutionalized mental health frameworks, preventive strategies, and supportive workplace cultures (WHO, 2022; OECD, 2021).

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Table 5

LGU Employees' Overall Mental Health Status

Variable	Mean	Verbal interpretation	Rank
Stress Experiences	3.18	Sometimes	3
Coping Mechanism	3.79	Often	2
Emotional Well-Being	4.15	Often	1
General Average	**3.70**	**Often**	

Legend: 4.21 – 5.00 = Always 3.41 – 4.20 = Often 2.61 – 3.40 = Sometimes
1.81 – 2.60 = Rarely 1.00 – 1.80 = Never

Part 3. Determinants of the Mental Health of Local Government Employees.

LGU employees reported generally manageable workloads (M = 3.49) and strong supervisory support (M = 4.34), consistent with the buffering role proposed in the Demand–Control–Support model (Karasek & Theorell, 1990; Schaufeli & Taris, 2014). High self-efficacy (Bandura, 1997) was reflected in stress management (M = 3.87) and work efficiency (M = 3.82), yet signs of physical and emotional strain (M = 3.08) align with findings on chronic demand-related fatigue (Ganster & Rosen, 2013; Bakker et al., 2005). This duality underscores the need for systemic workload management, recovery opportunities, and integrated psychosocial risk strategies (ILO, 2021; Edmondson, 2019).

Table 6

Factors Affecting Mental Health in Terms of Workload

Statement	Mean	Verbal interpretation	Rank
1. I am supported by my immediate supervisor in managing my workload.	4.34	Strongly Agree	1
2. I manage stress arising from my work.	3.87	Agree	2
3. I am efficient at work.	3.82	Agree	3
4. I find mental health services (e.g., counseling services and wellness programs) effective in managing my overwhelmed workload.	3.81	Agree	4
5. I can take breaks during workdays to rest and recharge.	3.63	Agree	5
6. I feel energized about work.	3.51	Agree	6
7. I do not find my workload exhaustive.	3.39	Neutral/Neither Agree or Disagree	7
8. I believe my workload meets my personal goal.	3.25	Neutral/Neither Agree or Disagree	8
9. I do not feel overwhelmed by my workload.	3.08	Neutral/Neither Agree or Disagree	9
10. I work within my regular working hours.	3.08	Neutral/Neither Agree or Disagree	9
11. I do not usually experience physical symptoms such as headaches, stomachaches, and fatigue because of my workload.	3.08	Neutral/Neither Agree or Disagree	9
12. I do not usually experience irritability because of my workload.	3.08	Neutral/Neither Agree or Disagree	9
Average	**3.49**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported strong interpersonal relations (M = 4.18), marked by camaraderie (M = 4.51), perceived support (M = 4.49), and satisfaction with workplace climate (M = 4.48), consistent with "relational energy" theory (Dutton & Heaphy, 2003) and the role of psychological safety in collaboration (Kahn, 1990; Edmondson & Lei, 2014). Low irritation in conflict (M = 2.37) suggests high emotional regulation, aligning with research on emotional intelligence as a driver of cohesion (Jehn & Mannix, 2001; Jordan & Troth, 2004). While employees valued relationships, their slightly lower recognition of their performance impact (M = 3.96) reflects the perception gap noted by Chiaburu & Harrison (2008), underscoring the need to integrate relationship-building into LGU performance strategies in line with the JD-R model (Bakker & Demerouti, 2007).

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Table 7

Factors Affecting Mental Health in Terms of Interpersonal Relationship

Statement	Mean	Verbal interpretation	Rank
1. I enjoyed socialization and getting together with co-workers.	4.51	Strongly Agree	1
2. I am supported by my co-workers.	4.49	Strongly Agree	2
3. I am satisfied with my overall atmosphere in the workplace.	4.48	Strongly Agree	3
4. Coworkers are friendly and responsive.	4.46	Strongly Agree	4
5. The work environment is inclusive and respectful.	4.42	Strongly Agree	5
6. I can rely on my colleagues for help and support when needed.	4.37	Strongly Agree	6
7. I maintain cordial relationships with co-workers.	4.33	Strongly Agree	7
8. I have an open communication with my co-workers.	4.28	Strongly Agree	8
9. I like receiving work-related feedback from co-workers.	4.25	Strongly Agree	9
10.I feel that workplace relationships impact work performance.	3.96	Agree	10
11.I easily get irritated when work-related conflicts arise.	2.37	Disagree	11
Interpersonal Relationship	**4.18**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported a neutral perception of job security (M = 3.27), reflecting ambivalence toward employment stability despite traditionally higher expectations in the public sector (Peters, 2021). The highest-rated indicator, foresight of continued employment (M = 3.43), suggests modest organizational commitment potentially rooted in limited alternatives rather than strong loyalty. Lower scores in compensation satisfaction (M = 3.40) and mental health resilience to insecurity (M = 3.03) indicate that job insecurity exerts a psychological toll. These findings align with evidence linking perceived job insecurity to anxiety, depression, and disengagement (Cheng et al., 2021; Menéndez-Espina et al., 2022) and highlight structural vulnerabilities in LGUs—such as political turnover and contractualization—that institutionalize uncertainty (Lo Presti & Nonnis, 2023). Addressing these issues requires transparent pay systems, career development, and supportive organizational climates to strengthen both well-being and retention (Colquitt et al., 2013; Berntson & Marklund, 2007; Probst, 2003).

Table 8

Factors Affecting Mental Health in Terms of Job Security

Statement	Mean	Verbal interpretation	Rank
1. I foresee myself working in this institution.	3.43	Agree	1
2. I am satisfied with the compensation benefits.	3.40	Neutral/Neither Agree or Disagree	2
3. I am secured that my job is stable.	3.27	Neutral/Neither Agree or Disagree	3
4. I feel secure in my current position.	3.19	Neutral/Neither Agree or Disagree	4
5. I do not feel that job insecurity affects my mental health.	3.03	Neutral/Neither Agree or Disagree	5
Average	**3.27**	**Neutral/Neither Agree or Disagree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported high job satisfaction (M = 4.20, "Agree"), particularly with workplace environment (M = 4.41), comfort (M = 4.32), and motivation (M = 4.30), consistent with Warr's (2002) environmental model and Hackman & Oldham's (1976) Job Characteristics Model linking supportive environments to well-being. However, the lower rating for mental health impact (M = 3.90) suggests satisfaction does not preclude psychological strain (Judge et al., 2001; Faragher et al., 2005). Sustaining recognition, appreciation, and work–life balance (Allen et al., 2000; Spector, 1997) remains essential for maintaining resilience and long-term engagement

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Table 9
Factors Affecting Mental Health in Terms of Job Satisfaction

Statement	Mean	Verbal interpretation	Rank
1. I am content with the overall working environment.	4.41	Strongly Agree	1
2. I feel comfortable at work.	4.32	Strongly Agree	2
3. I feel motivated to perform my job.	4.30	Strongly Agree	3
4. I feel a sense of belongingness.	4.22	Strongly Agree	4
5. I am satisfied with my current job.	4.20	Agree	5
6. I feel my work is appreciated.	4.16	Agree	6
7. I am satisfied with the level of recognition and appreciation for my work.	4.14	Agree	7
8. I feel that I have a good work-life balance.	4.12	Agree	8
9. I feel that my job impacts my mental health positively.	3.90	Agree	9
Average	**4.20**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported generally supportive mental health conditions (M = 3.78, "Agree"), with job satisfaction and interpersonal relationships as the strongest contributors, consistent with research linking these factors to resilience and well-being (Rothmann & Cooper, 2015; Dutton & Heaphy, 2003). Workload strain and job insecurity, however, emerged as notable risks, echoing evidence that chronic demands and employment uncertainty can erode psychological health (Maslach & Leiter, 2023; De Witte, 2024).

Table 10
Overall Factors Affecting Mental Health Status

Variable	Mean	Verbal interpretation	Rank
Workload	3.49	Agree	3
Interpersonal Relationship	4.18	Agree	2
Job Security	3.27	Neutral/Neither Agree or Disagree	4
Job Satisfaction	4.20	Agree	1
General Average	**3.78**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

Part 4. Perceptions of Local Government Unit (LGU) Employees on Mental Health Support Services.

LGU employees showed a favorable perception of counseling services (M = 3.95, "Strongly Agree"), particularly recognizing their relevance for mental health (M = 4.59) and importance in the workplace (M = 4.47), consistent with findings that organizational endorsement fosters positive attitudes (Moll et al., 2018; Kirkpatrick et al., 2019). However, openness to seeking help (M = 3.26) and prior use (M = 2.79) were lower, reflecting the persistence of stigma and cultural barriers (Corrigan, 2004; Clement et al., 2015). Bridging this attitude–behavior gap requires strategies that enhance accessibility, normalize help-seeking, and address stigma (Rickwood et al., 2007; Pescosolido et al., 2010).

Table 11
LGU Employees' Perception of Mental Health Support Services in Terms of Counseling

Statement	Mean	Verbal interpretation	Rank
1. I believe counseling services are for mental health.	4.59	Strongly Agree	1
2. It is essential to have counseling services in the workplace.	4.47	Strongly Agree	2
3. I am sure my immediate supervisor will support counseling services in the workplace.	4.31	Strongly Agree	3
4. I know the importance of counseling services at work.	4.24	Strongly Agree	4
5. I will highly recommend counseling services to my coworkers.	4.23	Strongly Agree	5

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Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

6. I think counseling services will positively impact my overall well-being.	3.96	Agree	6
7. I feel like talking to someone who can understand me.	3.73	Agree	7
8. I feel confident and open to seeking professional help through therapy or counseling sessions when I feel stressed.	3.26	Neutral/Neither Agree or Disagree	8
9. I have sought counseling services outside the workplace.	2.79	Neutral/Neither Agree or Disagree	9
Average	**3.95**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported a highly favorable perception of stress management programs (M = 4.31, "Strongly Agree"), particularly their necessity (M = 4.47) and positive impact on mental health (M = 4.43). These findings support evidence that preventive stress management programs enhance workforce well-being (Trost et al., 2023) but also reveal an intention–behavior gap, as actual practice scored lower (M = 3.96), consistent with the Theory of Planned Behavior (Ajzen, 1991) and Giga et al. (2003). Sustained, multi-level interventions combining individual coping strategies with organizational support (LaMontagne et al., 2007; Richardson & Rothstein, 2008) are recommended to bridge this gap.

Table 12
LGU Employees' Perception of Mental Health Support Services in Terms of Stress Management

Statement	Mean	Verbal interpretation	Rank
1. It is essential to have a stress management program in the workplace.	4.47	Strongly Agree	1
2. I find stress management programs will help manage stress.	4.45	Strongly Agree	2
3. I think stress management initiatives will positively impact my mental health.	4.43	Strongly Agree	3
4. I am interested in stress management programs in the workplace.	4.28	Strongly Agree	4
5. I am aware of stress management techniques.	4.24	Strongly Agree	5
6. I practice stress management techniques.	3.96	Agree	6
Average	**4.31**	**Strongly Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees reported a highly positive perception of peer support (M = 4.26, "Strongly Agree"), with the highest rating given to its importance for well-being (M = 4.34). This reflects a workplace climate conducive to psychological safety (Edmondson, 1999) and aligns with evidence that peer support enhances resilience and emotional well-being in high-stress settings (Shapiro & Galowitz, 2016; Solomon, 2004). However, participation scores (M = 4.11) were slightly lower, echoing findings that structural barriers limit engagement despite strong attitudinal support (Fox et al., 2020). Consistent with Bandura's (1986) social cognitive theory, modeling peer support behaviors can help institutionalize these practices, ensuring visibility, accessibility, and integration into LGU mental health programs.

Table 13
LGU Employees' Perception of Mental Health Support Services in Terms of Peer Support

Statement	Mean	Verbal interpretation	Rank
1. I believe peer support is important in the overall well-being of an employee.	4.34	Strongly Agree	1
2. I and my coworkers have a good relationship with our boss.	4.31	Strongly Agree	2
3. I am interested in peer support programs and initiatives.	4.31	Strongly Agree	2
4. I am satisfied with the peer support initiatives provided in the workplace.	4.26	Strongly Agree	3
5. I am comfortable in seeking peer support at work.	4.23	Strongly Agree	4
6. I participate in peer support initiatives.	4.11	Agree	5
Average	**4.26**	**Strongly Agree**	

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Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

LGU employees expressed a positive perception of mental health support services (M = 4.17, "Agree"), with stress management programs rated highest (M = 4.31) due to their accessibility and alignment with the demand-control model's emphasis on coping resources (Karasek & Theorell, 1990) and evidence of cognitive-behavioral effectiveness (Richardson & Rothstein, 2008). Peer support (M = 4.26) reflected strong collegial ties and psychological safety, consistent with social cognitive theory (Bandura, 1986) and findings on empathy and stigma reduction (Solomon, 2004; Shapiro & Galowitz, 2016). Counseling (M = 3.95) was valued but underutilized, reflecting help-seeking barriers identified by Corrigan (2004), Gulliver et al. (2010), and Vogel et al. (2007). These results support LaMontagne et al.'s (2014) integrated workplace mental health framework, underscoring the need to sustain informal supports while reducing stigma and improving access to formal services.

Table 14
LGU Employees' Overall Perception of Mental Health Support Services

Variable	Mean	Verbal interpretation	Rank
Counseling	3.95	Agree	3
Stress Management	4.31	Strongly Agree	1
Peer Support	4.26	Agree	2
General Average	**4.17**	**Agree**	

Legend: 4.21 – 5.00 = Strongly Agree 3.41 – 4.20 = Agree 2.61 – 3.40 = Neutral
1.81 – 2.60 = Disagree 1.00 – 1.80 = Strongly Disagree

The study found significant age-group differences in stress (p = .016) and coping (p = .029) among LGU employees, with those aged 60+ reporting both higher stress (M = 3.38) and stronger coping (M = 3.92). This aligns with Charles & Piazza's (2009) and Carstensen's (1999) findings that older adults regulate emotions more effectively, and with Aldwin et al. (2011) and Lazarus & Folkman's (1984) view that coping evolves through experience. Younger employees, particularly those aged 30–39, showed lower coping scores, consistent with Blanchard-Fields (2007) on less adaptive strategies in early adulthood. No significant age differences were observed in emotional well-being (p = .867), suggesting organizational support buffers age-related disparities (LaMontagne et al., 2014; Bakker & Demerouti, 2007; Ryff & Keyes, 1995).

Table 15
Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Age

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Stress Level	30 – 39 years old	3.20	10.37	0.016	Reject Ho	Significant Difference Exists
	40 – 49 years old	3.08				
	50 – 59 years old	3.08				
	60 years old and above	3.38				
Coping Mechanism	30 – 39 years old	3.65	9.00	0.029	Reject Ho	Significant Difference Exists
	40 – 49 years old	3.83				
	50 – 59 years old	3.66				
	60 years old and above	3.92				
Emotional Well-Being	30 – 39 years old	4.09	0.73	0.867	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	4.14				
	50 – 59 years old	4.12				
	60 years old and above	4.19				

**Significant at $\alpha = 0.05$*

Among mental health-related variables, only job satisfaction differed significantly across age groups (p = .016), with employees aged 60+ reporting the highest satisfaction (M = 4.44) and those aged 30–39 the lowest (M = 3.84). This upward trend with age aligns with findings by Clark et al. (1996) and Ng & Feldman (2010) that older workers report greater satisfaction due to career stability, seniority, and value alignment, as explained by Super's Life-Span Life-Space Theory (1990) and intrinsic

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motivation factors (Kanfer & Ackerman, 2004). Younger employees' lower satisfaction may reflect unmet career expectations (Twenge et al., 2010) and perceived breaches in the psychological contract (Rousseau, 1995). No significant age differences were found in workload (p = .404), relationships (p = .444), or job security (p = .325), consistent with Kooij et al. (2013) that structured HR policies reduce age-related disparities.

Table 16

Significant Difference on LGU Employees' Mental Health Status When Grouped According to their Age

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Workload	30 – 39 years old	3.53	2.92	0.404	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	3.50				
	50 – 59 years old	3.42				
	60 years old and above	3.56				
Interpersonal Relationship	30 – 39 years old	4.04	2.68	0.444	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	4.13				
	50 – 59 years old	4.18				
	60 years old and above	4.25				
Job Security	30 – 39 years old	3.00	3.46	0.325	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	3.26				
	50 – 59 years old	3.23				
	60 years old and above	3.35				
Job Satisfaction	30 – 39 years old	3.84	10.27	0.016	Reject Ho	Significant Difference Exists
	40 – 49 years old	4.10				
	50 – 59 years old	4.13				
	60 years old and above	4.44				

**Significant at $\alpha = 0.05$*

Kruskal–Wallis H tests revealed no significant age-based differences in perceptions of counseling (p = .675), stress management (p = .146), and peer support (p = .107) among LGU employees, indicating broadly uniform appreciation of services across age groups. This aligns with evidence that integrated, universally accessible workplace mental health programs foster equitable engagement (LaMontagne et al., 2014; Siegrist & Li, 2016; Keyes, 2002). Slightly higher ratings from employees aged 60+ may reflect age-related prioritization of emotional well-being (Rowe & Kahn, 1997; Carstensen, 1999), while younger employees may underutilize services due to stigma (Gulliver et al., 2010). Such findings support uniform policy approaches while encouraging nuanced program evaluation to address subtle generational needs (Sparks et al., 2001; Kelloway & Day, 2005).

Table 17

Significant Difference in LGU Employees' Perception of Mental Health Support Services When Grouped According to their Age

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Counseling	30 – 39 years old	3.93	1.53	0.675	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	3.98				
	50 – 59 years old	3.90				
	60 years old and above	3.99				
Stress Management	30 – 39 years old	4.27	5.37	0.146	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	4.23				
	50 – 59 years old	4.23				
	60 years old and above	4.47				
Peer Support	30 – 39 years old	3.86	6.10	0.107	Fail to Reject Ho	No Significant Difference Exists
	40 – 49 years old	3.94				
	50 – 59 years old	3.88				
	60 years old and above	4.13				

**Significant at $\alpha = 0.05$*

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The Kruskal–Wallis H test found no significant gender-based differences in stress (p = .530), coping mechanisms (p = .608), or emotional well-being (p = .429) among LGU employees, supporting the null hypothesis. Mean scores were closely aligned across male, female, and transgender groups, suggesting that organizational culture may buffer gender disparities in mental health (Roe & Zijlstra, 2000; Grzywacz & Dooley, 2003). Slightly higher scores among transgender respondents may reflect resilience fostered by supportive environments (Matsuno & Budge, 2017). These findings align with evidence that workplace culture, job quality, and inclusive policies exert greater influence on mental health than gender alone (Goh et al., 2016; Powell et al., 2009).

Table 18

Significant Difference on LGU Employees' Mental Health Status When Grouped According to their Gender

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Stress Level	Male	3.18	1.27	0.530	Fail to Reject Ho	No Significant Difference Exists
	Female	3.15				
	Transgender	3.40				
Coping Mechanism	Male	3.78	1.00	0.608	Fail to Reject Ho	No Significant Difference Exists
	Female	3.80				
	Transgender	3.91				
Emotional Well-Being	Male	4.12	1.69	0.429	Fail to Reject Ho	No Significant Difference Exists
	Female	4.18				
	Transgender	4.05				

**Significant at $\alpha = 0.05$*

Kruskal–Wallis H tests showed no significant gender-based differences in workload (p = .684), interpersonal relationships (p = .590), job security (p = .951), and job satisfaction (p = .243) among LGU employees, with mean scores showing high consistency across male, female, and transgender groups. This supports prior findings that organizational practices, rather than gender, shape perceptions of workload and satisfaction (Kossek & Ozeki, 1998; Ragins & Cornwell, 2001; Blau & Kahn, 2013). While minor score differences for transgender respondents were statistically insignificant, literature cautions that subtle inequities may persist (James et al., 2016; Acker, 2006), underscoring the value of sustained diversity and inclusion efforts (Meyer, 2003).

Table 19

Significant Difference on LGU Employees' Mental Health Status When Grouped According to their Gender

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Workload	Male	3.49	0.76	0.684	Fail to Reject Ho	No Significant Difference Exists
	Female	3.51				
	Transgender	3.39				
Interpersonal Relationship	Male	4.18	1.05	0.590	Fail to Reject Ho	No Significant Difference Exists
	Female	4.20				
	Transgender	4.06				
Job Security	Male	3.35	0.10	0.951	Fail to Reject Ho	No Significant Difference Exists
	Female	3.24				
	Transgender	3.17				
Job Satisfaction	Male	4.30	2.83	0.243	Fail to Reject Ho	No Significant Difference Exists
	Female	4.15				
	Transgender	4.22				

**Significant at $\alpha = 0.05$*

The Kruskal–Wallis H test revealed no significant gender-based differences (p > .05) in LGU employees' perceptions of counseling, stress management, and peer support services, with near-identical mean ratings across male, female, and transgender groups (M = 3.95, 3.96, 3.89). This supports findings by Meyers et al. (2021) and Lewis (2009) that program quality, inclusivity, and accessibility outweigh demographic factors in shaping service evaluations. Consistent with Krieger (2014) and WHO (2020), the results suggest equitable workplace mental health

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Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

provision, though Budge et al. (2013) caution that subtle barriers for marginalized genders may persist.

Table 20

Significant Difference in LGU Employees' Perception of Mental Health Support Services When Grouped According to their Gender

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Counseling	Male	3.95	0.61	0.736	Fail to Reject Ho	No Significant Difference Exists
	Female	3.96				
	Transgender	3.89				
Stress Management	Male	4.34	0.24	0.885	Fail to Reject Ho	No Significant Difference Exists
	Female	4.29				
	Transgender	4.28				
Peer Support	Male	3.99	2.00	0.868	Fail to Reject Ho	No Significant Difference Exists
	Female	3.96				
	Transgender	3.95				

**Significant at $\alpha = 0.05$*

Stress levels differed significantly across LGU job categories (p = .049), with Executive Services reporting the lowest (M = 2.87) and Planning, Engineering, Legislative, and Administrative Services reporting higher levels, consistent with Karasek's (1979) Job Demand–Control Model and evidence linking high demands with low autonomy to increased strain (Ganster & Rosen, 2013; Maslach & Leiter, 2016). No significant differences were found in coping (p = .179) or emotional well-being (p = .972), suggesting that organizational support, consistent resources, and a positive psychosocial climate (Dewe & Cooper, 2012; Siegrist, 2012; WHO, 2020) may buffer role-specific stressors.

Table 21

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Nature of Job

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Stress Level	Executive Services	2.87	14.11	0.049	Reject Ho	Significant Difference Exists
	Legislative Services	3.22				
	General Administrative Services	3.44				
	Planning & Engineering Services	3.47				
	Economic Services	3.27				
	Medicine and Health Services	3.20				
	Social and Welfare Services	3.12				
	Financial Services	3.02				
	Information, Arts and Recreation Services	3.00				
	Agricultural and Environmental Services	2.73				
	Trade, Tourism, and Industry Services	2.00				
Coping Mechanism	Executive Services	3.56	10.16	0.179	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	3.84				
	General Administrative Services	4.15				
	Planning & Engineering Services	3.96				
	Economic Services	3.73				
	Medicine and Health Services	3.72				
	Social and Welfare Services	3.85				
	Financial Services	3.70				
	Information, Arts and Recreation Services	3.68				

ISSN (Online): 2455-3662
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Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

	Agricultural and Environmental Services	4.03				
	Trade, Tourism, and Industry Services	3.18				
Emotional Well-Being	Executive Services	4.12	1.75	0.972	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	4.20				
	General Administrative Services	4.11				
	Planning & Engineering Services	4.21				
	Economic Services	4.11				
	Medicine and Health Services	4.21				
	Social and Welfare Services	4.13				
	Financial Services	4.17				
	Information, Arts and Recreation Services	4.00				
	Agricultural and Environmental Services	4.05				
	Trade, Tourism, and Industry Services	3.14				

*$Significant\ at\ \alpha = 0.05$

The Kruskal–Wallis H test found no significant differences in workload (p = .625), interpersonal relationships (p = .806), job security (p = .783), and job satisfaction (p = .308) across LGU job functions, indicating generally uniform workplace perceptions. This supports Boyne's (2002) and Wright and Davis's (2003) findings that centralized structures and standardized practices in public institutions foster consistent job conditions. The results also align with Organizational Justice Theory (Greenberg, 1987) and the Competing Values Framework (Cameron & Quinn, 2011), suggesting that fairness, cultural cohesion, and statutory protections (Houston, 2000) contribute to equitable employee experiences and stable job satisfaction across roles.

Table 22

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Nature of Job

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Workoad	Executive Services	3.25	5.28	0.625	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	3.50				
	General Administrative Services	3.60				
	Planning & Engineering Services	3.56				
	Economic Services	3.52				
	Medicine and Health Services	3.41				
	Social and Welfare Services	3.66				
	Financial Services	3.51				
	Info, Arts and Recreation Services	3.63				
	Agri. and Environmental Services	3.36				
	Trade, Tourism, and Industry Services	3.00				
Interpersonal Relationship	Executive Services	4.36	3.77	0.806	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	4.25				
	General Administrative Services	4.20				
	Planning & Engineering Services	4.25				
	Economic Services	4.19				
	Medicine and Health Services	4.17				
	Social and Welfare Services	4.11				
	Financial Services	4.14				
	Info, Arts and Recreation Services	3.86				
	Agri. and Environmental Services	3.94				
	Trade, Tourism, and Industry Services	3.18				

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Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

Job Security	Executive Services	3.13	3.97	0.783	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	3.28				
	General Administrative Services	3.40				
	Planning & Engineering Services	3.09				
	Economic Services	3.32				
	Medicine and Health Services	3.24				
	Social and Welfare Services	3.40				
	Financial Services	3.28				
	Info, Arts and Recreation Services	3.30				
	Agri. and Environmental Services	3.13				
	Trade, Tourism, and Industry Services	3.00				
Job Satisfaction	Executive Services	4.22	8.29	0.308	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	4.30				
	General Administrative Services	4.18				
	Planning & Engineering Services	4.44				
	Economic Services	4.33				
	Medicine and Health Services	4.25				
	Social and Welfare Services	3.93				
	Financial Services	4.10				
	Info, Arts and Recreation Services	3.50				
	Agri. and Environmental Services	3.78				
	Trade, Tourism, and Industry Services	3.11				

**Significant at $\alpha = 0.05$*

The Kruskal–Wallis H test found no significant differences in workload, interpersonal relationships, job security, and job satisfaction across LGU job categories (all p > .05), suggesting that organizational-level factors outweigh job content in shaping mental health perceptions. This aligns with the Job Demands–Resources model (Schaufeli & Bakker, 2004), the Demand–Control–Support model (Karasek & Theorell, 1990), and findings by Brough et al. (2014) and Cropanzano et al. (2017), which emphasize that equitable resources, supportive leadership, and procedural fairness mitigate variations in well-being across roles.

Table 23

Significant Difference in LGU Employees' Perception of Mental Health Support Services When Grouped According to their Nature of Job

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Counseling	Executive Services	4.04	2.06	0.957	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	3.98				
	General Administrative Services	3.96				
	Planning & Engineering Services	4.10				
	Economic Services	3.87				
	Medicine and Health Services	4.00				
	Social and Welfare Services	3.93				
	Financial Services	3.91				
	Information, Arts and Recreation Services	3.67				
	Agricultural and Environmental Services	3.81				
	Trade, Tourism, and Industry Services	4.00				
Stress Management	Executive Services	4.25	3.01	0.884	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	4.40				
	General Administrative Services	4.37				
	Planning & Engineering Services	4.54				

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

	Economic Services	4.32				
	Medicine and Health Services	4.30				
	Social and Welfare Services	4.22				
	Financial Services	4.25				
	Information, Arts and Recreation Services	3.42				
	Agricultural and Environmental Services	4.17				
	Trade, Tourism, and Industry Services	4.00				
Peer Support	Executive Services	3.60	5.57	0.591	Fail to Reject Ho	No Significant Difference Exists
	Legislative Services	4.00				
	General Administrative Services	4.06				
	Planning & Engineering Services	4.11				
	Economic Services	4.02				
	Medicine and Health Services	4.00				
	Social and Welfare Services	4.00				
	Financial Services	3.91				
	Information, Arts and Recreation Services	3.71				
	Agricultural and Environmental Services	4.05				
	Trade, Tourism, and Industry Services	3.71				

**Significant at $\alpha = 0.05$*

The Kruskal–Wallis H test found no significant differences in stress (p = .090), coping (p = .592), or emotional well-being (p = .080) across appointment types, indicating that employment classification alone does not strongly determine mental health outcomes in the LGU context. This supports findings by Virtanen et al. (2005), De Cuyper et al. (2008), and Sverke et al. (2002) that organizational conditions—such as equitable support, fairness, and inclusion—are stronger predictors of well-being than contract type. Slightly higher stress among temporary employees, consistent with Ferrie et al. (2002), suggests potential vulnerabilities that may be mitigated through inclusive, organization-wide mental health resources, in line with Hobfoll's (1989) Conservation of Resources Theory.

Table 24

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Nature of Appointment

Variable	Group	Mean	Kruskal- Wallis H	p-value	Decision	Conclusion
Stress Level	Elective	3.08	8.05	0.090	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	2.85				
	Permanent	3.22				
	Temporary	3.30				
	Job Order	3.02				
Coping Mechanism	Elective	3.92	2.80	0.592	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	3.52				
	Permanent	3.79				
	Temporary	4.00				
	Job Order	3.76				
Emotional Well-Being	Elective	4.36	8.32	0.080	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	4.11				
	Permanent	4.15				
	Temporary	4.50				
	Job Order	3.94				

**Significant at $\alpha = 0.05$*

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No significant differences were found in workload, interpersonal relationships, and job security across appointment types ($p > .05$), suggesting that centralized HR practices and a cohesive LGU culture promote uniform work experiences (Cheng & Chan, 2008; Hackman & Oldham, 1976; Morgeson & Humphrey, 2006). However, job satisfaction differed significantly ($p = .013$), with temporary staff reporting the highest and job order employees the lowest, consistent with Psychological Contract Theory (Guest, 2004) and evidence linking precarious employment to lower satisfaction (Allan et al., 2016; Davy et al., 1997; De Witte, 1999).

Table 25

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Nature of Appointment

Variable	Group	Mean	Kruskal- Wallis H	p-value	Decision	Conclusion
Workload	Elective	3.50	5.07	0.280	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	3.23				
	Permanent	3.48				
	Temporary	3.71				
	Job Order	3.65				
Interpersonal Relationship	Elective	4.39	5.42	0.247	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	4.36				
	Permanent	4.15				
	Temporary	4.41				
	Job Order	4.10				
Job Security	Elective	3.35	6.68	0.154	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	3.15				
	Permanent	3.22				
	Temporary	4.20				
	Job Order	3.36				
Job Satisfaction	Elective	4.39	12.64	0.013	Reject Ho	Significant Difference Exists
	Coterminous	4.36				
	Permanent	4.20				
	Temporary	5.00				
	Job Order	3.83				

**Significant at $\alpha = 0.05$*

No significant differences were found in LGU employees' perceptions of counseling ($p = .728$), stress management ($p = .269$), or peer support ($p = .133$) across appointment types, suggesting equitable access to mental health services. This aligns with Organizational Justice Theory (Colquitt, 2001) and the Job Demands–Resources Model (Bakker & Demerouti, 2007), which posit that fair and uniformly implemented resources enhance well-being regardless of employment status, and supports prior findings that inclusively designed wellness programs foster organizational cohesion (Grawitch et al., 2006; LaMontagne et al., 2014).

Table 26

Significant Difference in LGU Employees' Perception of Mental Health Support Services When Grouped According to their Nature of Appointment

Variabe	Group	Mean	Kruskal- Wallis H	p-value	Decision	Conclusion
Counseling	Elective	3.97	2.04	0.728	Fail to Reject Ho	No Significant Difference Exists
	Coterminous	4.19				
	Permanent	3.94				
	Temporary	4.06				
	Job Order	3.94				
Stress Management	Elective	4.44	5.18	0.269	Fail to Reject Ho	No Significant
	Coterminous	4.38				
	Permanent	4.31				

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	Temporary	4.75				Difference
	Job Order	4.12				Exists
Peer Support	Elective	4.07	7.06	0.133	Fail to	No
	Coterminous	3.54			Reject Ho	Significant
	Permanent	3.97				Difference
	Temporary	4.50				Exists
	Job Order	3.97				

**Significant at $\alpha = 0.05$*

Stress levels differed significantly by tenure, with employees serving 31–40 years reporting the highest stress (M = 3.50, p = .001), despite also showing the strongest coping (M = 4.18) and emotional well-being (M = 4.36) scores. This paradox reflects Maslach and Leiter's (2016) burnout theory and Lazarus and Folkman's (1984) transactional model, suggesting that prolonged service in LGUs fosters adaptive coping yet accumulates occupational stress through role monotony, bureaucratic rigidity, and career plateauing (Schaufeli & Buunk, 2003; Beehr & Newman, 1998).

Table 27

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Length of Service

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Stress Level	Ten years and below	3.03	15.76	0.001	Reject Ho	Significant Difference Exists
	11 to 20 years	3.08				
	21 to 30 years	3.35				
	31 to 40 years	3.50				
Coping Mechanism	Ten years and below	3.77	3.00	0.391	Fail to Reject Ho	No Significant Difference Exists
	11 to 20 years	3.74				
	21 to 30 years	3.83				
	31 to 40 years	4.18				
Emotional Well-Being	Ten years and below	4.16	3.26	0.354	Fail to Reject Ho	No Significant Difference Exists
	11 to 20 years	4.06				
	21 to 30 years	4.19				
	31 to 40 years	4.36				

**Significant at $\alpha = 0.05$*

No significant differences were found in perceived workload (p = .541), interpersonal relationships (p = .068), or job security (p = .446) across LGU tenure groups, reflecting the standardized structures of bureaucratic institutions (Boyd et al., 2011). However, job satisfaction differed significantly (p = .008), with employees serving 21–40 years reporting higher satisfaction, consistent with Herzberg's Two-Factor Theory (1959) and the tenure–satisfaction link noted by Ng & Feldman (2010). This pattern suggests that long service fosters greater mastery, recognition, and organizational commitment (Wright & Cropanzano, 2000), while lower satisfaction among early- and mid-career employees underscores the need for targeted interventions aligned with Self-Determination Theory (Deci & Ryan, 1985).

Table 28

Significant Difference in LGU Employees' Mental Health Status When Grouped According to their Length of Service

Variable	Group	Mean	Kruskal-Wallis H	p-value	Decision	Conclusion
Workload	Ten years and below	3.51	2.15	0.541	Fail to Reject Ho	No Significant Difference Exists
	11 to 20 years	3.43				
	21 to 30 years	3.52				
	31 to 40 years	3.71				
	Ten years and below	4.24	7.11	0.068		

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Interpersonal Relationship	11 to 20 years	4.04			Fail to Reject Ho	No Significant Difference Exists
	21 to 30 years	4.22				
	31 to 40 years	4.41				
Job Security	Ten years and below	3.30	2.67	0.446	Fail to Reject Ho	No Significant Difference Exists
	11 to 20 years	3.19				
	21 to 30 years	3.30				
	31 to 40 years	3.20				
Job Satisfaction	Ten years and below	4.16	11.89	0.008	Reject Ho	Significant Difference Exists
	11 to 20 years	3.93				
	21 to 30 years	4.42				
	31 to 40 years	4.33				

**Significant at* $\alpha = 0.05$

LGU employees showed a neutral perception of job security (M = 3.27), with modest organizational commitment and signs of psychological strain linked to employment instability. This aligns with studies showing that perceived job insecurity undermines mental health and engagement (Cheng et al., 2021; Menéndez-Espina et al., 2022) and reflects structural vulnerabilities in LGUs that require transparent pay systems, career development, and supportive work environments (Lo Presti & Nonnis, 2023; Probst, 2003).

CONCLUSIONS

Based on the results of the study, the following conclusions are drawn:

The LGU workforce demographic is mostly middle-aged, experienced, and permanently employed, reflecting a stable and mature institutional structure. This suggests strong loyalty and expertise but may limit adaptability to reforms like digital governance. A notable female presence and inclusion of marginalized groups point to gender-responsive hiring. Most employees are concentrated in legislative, economic, and health services—emphasizing the LGUs' critical role in frontline service delivery.

The findings revealed that, employees moderate stress, mainly linked to financial concerns and a lack of control, but overall psychological well-being remained positive. Strong coping strategies—like planning and humor—were observed, though reliance on social support was low, indicating gaps in organizational support. High emotional well-being was noted, but limited self-care pointed to the need for promoting a culture of wellness, flexible schedules, and accessible mental health resources.

The study indicated that a generally supportive work environment was reported, with job satisfaction and good relationships as key mental health drivers. The workload was manageable but occasionally stressful, and job security concerns persisted. Stress management and peer support programs were well-regarded, while slightly lower ratings for counseling suggested stigma or access issues. Strengthening mental health services can further enhance employee resilience and engagement.

The results revealed that older employees (60+) reported the highest job satisfaction, likely due to stability and seniority. Perceptions of mental health support were consistent across age, gender, and employment type, showing equitable service delivery. Longer-serving staff viewed stress management services more favorably, possibly due to familiarity. Executive Services reported lower stress levels, suggesting that organizational culture may matter more than the job category. These findings highlight the need for inclusive, well-communicated mental health initiatives for all employee groups.

The study found that job satisfaction increased with age, especially among employees aged 60 and above, likely due to greater career stability. No significant differences in mental health status or support service perceptions were found across gender or age groups, highlighting the need for inclusive programs. Stress levels varied by job category, with Executive Services reporting the lowest, suggesting the influence of organizational culture over job roles. Temporary employees reported higher job satisfaction than job order staff, possibly due to better role fit. Employees with 31–40 years of service reported the highest stress but also stronger coping and emotional well-being, indicating long-term adaptation. They also viewed stress management services more favorably. Overall, perceptions of mental health support services were consistent across demographics, supporting the need for equitable and accessible initiatives.

RECOMMENDATIONS

Develop and institutionalize a Comprehensive Mental Health Program. It is encouraged to formalize a Mental Health Program for LGU employees that integrates gender sensitivity, career development, workload regulation, and wellness initiatives. This program should be institutionalized through a clear policy framework and included in the municipality's annual budget to ensure funding sustainability. It should be responsive to evolving employee needs, with regular monitoring and evaluation. Services may be delivered in partnership with accredited mental health professionals, NGOs, and subject matter experts. Employee participation in seminars, forums, and training—

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particularly those that address stigma, help-seeking behaviors, and mental health literacy—should be actively promoted.

Hire or partner with guidance counselors. The hiring of a licensed guidance counselor is recommended to support employees' emotional well-being and address personal or professional concerns. If direct hiring is not feasible, entering into a Memorandum of Agreement (MOA) with partner institutions (e.g., university's mental health centers) can provide access to counseling services. These counselors can also assist in designing tailored interventions, conducting needs assessments, and facilitating referral mechanisms.

Strengthen peer support and social connection programs. Given the observed low reliance on social support, LGUs should establish structured peer support systems. Initiatives such as peer mentoring, wellness circles, or mental health champions can foster a more connected and empathetic work culture. These informal supports ca. n complement professional services and encourage early intervention.

Promote a culture of self-care and work-life balance. Encourage self-care practices through flexible work policies, wellness breaks, and access to recreational or mindfulness activities. Incorporate mental health days or scheduled debriefing sessions during peak workloads to prevent burnout and support emotional recovery.

Implement mental health risk assessments and regular surveys. To guide evidence-based policymaking, conduct periodic mental health assessments using validated tools to monitor stress levels, job satisfaction, and service utilization. Results should inform targeted interventions and allow tracking of progress over time.

Develop a mental health information and referral system. Create a centralized system where employees can confidentially access information on mental health resources, seek help, and receive referrals. Ensure data privacy and promote trust in the system through clear communication and ethical safeguards.

Integrate mental health into performance management and HR practices. Mental health considerations should be embedded into HR strategies, including onboarding, performance evaluations, and grievance mechanisms. Supervisors should be trained to recognize signs of distress and to refer employees appropriately without bias or stigma.

Future researchers and other stakeholders were encouraged to continue exploring the complexity of factors that might have influenced mental health care. Future studies could have incorporated more comprehensive demographic variables, considering their depth of influence on various mental health services, and explored the interdependencies of these variables in shaping mental health outcomes.

REFERENCES

1. *Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2015). The job demands-resources model of burnout. Journal of Applied Psychology, 86(3), 499-512. https://doi.org/10.1037/0021-9010.86.3.499*
2. *Feldman, D. C., Leana, C. R., & Labianca, G. (2017). Job insecurity and employee well-being: A review and meta-analysis. Journal of Applied Psychology, 102(7), 1011-1025. https://doi.org/10.1037/apl0000210*
3. *Henderson, S., Peterson, R., & Clark, J. (2021). Employee perceptions of mental health counseling in the local government sector. Journal of Public Administration and Mental Health, 33(3), 211-226.*
4. *Johnson, R. L., White, D. K., & Smith, M. A. (2020). Job insecurity and mental health: Evidence from public sector employees in the United Kingdom. Journal of Occupational Health Psychology, 25(3), 206-218. https://doi.org/10.1037/ocp0000165*
5. *Johnson, S. H., Heller, D., & Brown, J. P. (2019). Employee perceptions of mental health counseling in local government settings. Journal of Public Administration Research and Theory, 29(1), 82-95.*
6. *Lee, S. W., Park, H. J., & Kim, J. K. (2021). The role of workplace interventions in managing stress: A study of public sector employees. Journal of Public Health Management, 47(2), 112-121.*
7. *Liu, H., Zhang, H., & Xu, Z. (2017). Job satisfaction and mental health in Chinese public sector employees. Journal of Occupational Health Psychology, 22(4), 506-515. https://doi.org/10.1037/ocp0000072*
8. *Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: Recent research and its implications for psychiatry. World Psychiatry, 15(2), 103-111. https://doi.org/10.1002/wps.20311*
9. *Smith, R. (2021). Policy development and mental health promotion: Lessons from multisectoral approaches. Health Policy Perspectives, 14(2), 320–335.*
10. *World Health Organization. (2021). Guidelines on mental health promotion through multisectoral collaboration. WHO Press.*