Psychological Distress, Adaptive Coping Mechanism, and Well-Being of Junior High School Students in Public Schools

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Abstract. This study investigated various aspects of psychological distress, adaptive coping mechanisms, and well-being among junior high school students in public schools within General Santos City. The researchers employed a descriptive-correlational research design, administering a researcher-developed questionnaire to students from four prominent public high schools. Statistical analyses included the use of mean, standard deviation, and Pearson's r correlation. The findings indicate that junior high school students experience high levels of psychological distress. Although the overall impact of contributing factors is low, specific factors such as excessive use of technology or social media and concerns about post-junior high school futures were notably significant. Despite experiencing high levels of psychological distress, students reported using adaptive coping mechanisms and maintaining a high level of well-being. A significant relationship was also identified between psychological distress and student well-being. Based on these findings, the researchers recommend the implementation of tailored mental health intervention programs to address the specific challenges faced by students in public high schools. Such programs could enhance student well-being, mitigate long-term issues, and provide support for school counselors, teachers, and mental health advocates. The study's results offer a foundation for developing practical interventions to improve the mental well-being of junior high school students in public schools, thereby promoting a healthier and more supportive educational environment.

Keywords: Psychological distress; Adaptive coping mechanism; Well-being; Junior high school students; Philippines.

1.0 Introduction

Serious mental health concerns have become apparent recently, particularly for adolescents, since they are undergoing significant changes in their physical, emotional, and psychological aspects. Recent research highlights significant mental health challenges among adolescents, with one in five experiencing severe disorders at some point (Farley, 2020). Depression, anxiety, sleep disturbances, and post-traumatic stress symptoms are widespread (Ma et al., 2021). Given these alarming trends, it is crucial to prioritize mental health resources and support for adolescents.

Psychological distress can arise from various sources, including life events, interpersonal conflicts, societal pressures, and internal struggles. By definition, psychological distress is a set of physically and mentally painful symptoms connected to most people's typical mood swings (American Psychological Association, n.d.). Prolonged distress has been linked to adverse outcomes such as poor academic performance and behavioral issues (Divaris et al., 2013). Many high school students experience psychological distress, yet some avoid seeking professional help due to stigma concerns (Sheppard et al., 2018). Furthermore, in a study by Pengpid and Peltzer (2020), there

is an association of psychological distress with bullying victimization, parental emotional neglect, parental disrespect of privacy, having no close friends, frequent experience of hunger, school absenteeism, sedentary behavior, and injuries. Determining the level of and factors contributing to psychological distress among junior high school students in General Santos City could aid in developing targeted interventions that address the unique challenges faced by this population. In this regard, the role of adaptive coping mechanisms in lessening the impact of psychological distress and preventing its future occurrence becomes evident.

Adaptive coping mechanisms serve as protective factors that can mitigate the negative impact of life stressors and reduce the likelihood of their occurrence in the future. Some adaptive coping mechanisms are resiliency, religious coping, problem-solving, social support, exercise, and acceptance (Coulacoglou & Saklofske, 2018; Garber, 2017; Javed & Parveen, 2021; Lee et al., 2017; Reeve et al., 2013). However, another study also discovered that distressed respondents frequently used maladaptive coping mechanisms such as self-distraction, emotionally focused venting, self-responsibility, and behavioral withdrawal (Lin & Yusoff, 2013). According to Compas et al. (2017), the utilization of adaptive coping mechanisms by individuals in their daily lives, despite complexity and stress, can lower the likelihood of psychopathological consequences, highlighting the significance of coping strategies during the ongoing pandemic. Engaging in adaptive coping mechanisms might contribute to an individual's overall well-being by promoting effective stress management and reducing the negative impact of stress on mental health.

Adolescents' character development depends significantly on their overall well-being. They engage in academic-related activities the majority of the time. As a result, according to Kern et al. (2015), schools should be held accountable for the students' welfare and for preparing them for the challenges of adulthood. Few studies suggest that toxic stressors experienced early in life may have adverse effects on development and a probability of a chain reaction of stressors that will follow and threaten mental health (Nurius et al., 2015). In other words, adolescents are developing psychologically, and certain factors could influence their mental health, such as past stressful experiences. Given the insufficient availability of mental health resources in public schools, it becomes imperative to prioritize the implementation of culturally appropriate mental health interventions in the context of the Philippines.

Research on adolescents' mental health in the Philippines is limited, particularly those focusing on high school students in General Santos City. A survey by Kwangu et al. (2017) found a high prevalence of suicidal thoughts among Filipino teens, along with various risk factors like food insecurity, anxiety, loneliness, limited social connections, school absenteeism, bullying, physical violence, conflict, smoking, and alcohol consumption. Similarly, Malolos et al. (2021) highlighted how the COVID-19 pandemic worsened mental health challenges for Filipino children or adolescents aged 5-17 due to inadequate government policies. The study also gathered that despite the growing recognition of the importance of mental health, there is still a lack of sufficient interventions specifically tailored to address the mental health needs of children and adolescents. These findings provide further evidence of the importance and purpose of creating a program for students around the age group cited earlier, as junior high school students in public schools are mainly affected by lacking accessible mental health services.

Providing mental health intervention programs is crucial for promoting the well-being of public high school students by addressing their unique challenges and stressors, improving their academic performance and quality of life, and preventing long-term mental health issues. School interventions can positively change adolescents' perceptions of mental illness (Sakellari et al., 2014). Moreover, addressing mental health issues early on can prevent long-term problems, such as depression and anxiety disorders, and help students lead happier, healthier lives. A study by Robertson et al. (2017) concluded that the period of adolescence holds significant potential for implementing mental health interventions that can mitigate immediate and lasting consequences. With this in mind, the researchers chose a potential solution suited to junior high school students' specific mental health needs in public schools. Creating targeted mental health intervention programs in public high schools based on the insights gained from this research can have a transformative impact. It has the potential for practical application by guidance practitioners, academic professionals, and mental health advocates. This study's findings may fill gaps of understanding on the implications of mental health concerns of junior high school students in public schools.

2.0 Methodology

2.1 Research Design

The researchers used a descriptive-correlational research design to collect, measure, and analyze numerical data. According to Lau (2017), correlational studies seek to determine whether the characteristics of a population vary based on whether or not the individuals have encountered an event of interest in a natural setting. Using this approach helped determine if a significant relationship exists between psychological distress and well-being. This design was also ideal for generalizing the findings on psychological distress, adaptive coping mechanisms, and well-being to real-life situations in an externally valid way. A descriptive-correlational research design is appropriate for this study as it aims to identify characteristics, frequencies, and trends in the chosen topic (McCombes, 2022). In this case, this study aims to investigate various aspects of psychological distress, adaptive coping mechanisms, and well-being of junior high school students and inculcate the findings into developing an effective intervention program.

2.2 Research Participants

Junior High School students from seventh to tenth grade in four public schools in General Santos City were the respondents of this study. The researchers used the simple random sampling method to determine the participants chosen for this study. Simple random sampling is one of the methods of selecting individuals from a population where everyone has an equal opportunity to participate using a fair and unbiased process. The technique involves assigning a number to each person in the population and then randomly selecting participants for the sample (Simkus, 2023). The researchers also utilized quota sampling to identify the number of respondents and the random survey distribution. Quota sampling guarantees that a specific trait of a population sample will be presented in the precise manner desired by the researcher (Acharya et al., 2013). Therefore, a total of 379 respondents participated in the survey. The students were 12-16 years old and currently enrolled in a public high school, as this is the general age range of junior high school students in the Philippines. The present study excluded schools with no record of confirmed cases of psychological distress and focused on schools where such cases received reports. This criterion allowed the researchers to investigate psychological distress's prevalence and underlying causes in educational institutions. Moreover, the unique experiences and obstacles students in special education programs encounter are distinct from those their peers face. Consequently, they have been excluded from the study to uphold the precision and applicability of the findings.

2.3 Research Instrument

The researchers used a researcher-made survey that they created in May 2023 to obtain reliable and actionable results. The survey comprises four parts- level of well-being, psychological distress level, factors contributing to psychological distress, and adaptive coping mechanisms. The questionnaire utilized a 4-point Likert Type Scale, as with frequency-type choices: always, sometimes, seldom, and never. There are 60 items, with 15 questions for each part. To determine content validity, the researchers developed the questionnaire items based on the constructs and variables identified through the study. They refined the questions through expert review and feedback from the research adviser. Involving experts in the field helps ensure that the questionnaire items are relevant, comprehensive, and aligned with the study's objectives. The researchers also conducted a pre-survey to develop the items, which helped them assess the face validity of the questions and refine them accordingly. Since the questionnaire comprises 15 questions for each of the four parts, the researchers assessed the internal consistency reliability with the help of a statistician. The study utilized Cronbach's alpha to evaluate the questionnaire's internal consistency, which measured the interrelatedness or homogeneity of items within each part. A research director, a psychologist, and an established college administrator conducted the validation process. Before conducting the study, the researchers employed pilot testing to test the feasibility and accessibility of an approach for a larger population. Junior high school students from around the researchers' barangays participated in the pilot testing. The reliability test results showed that three of the parts were highly reliable, with part one garnering a reliability coefficient of 0.84, part three obtaining 0.80, and part four achieving 0.84. Although part four only garnered a reliability coefficient of 0.78, it is still considered reliable and acceptable for data gathering.

2.4 Data Gathering Procedure

A systematic research method was employed to ensure the study's successful execution, encompassing the following essential steps: The researchers made a request letter that was noted by the research adviser and college

dean, allowing them to conduct an inquiry to obtain the population of junior high school students at the selected locale and ask the guidance practitioners if there have been cases of students going through psychological distress reported to them. Inclusion and exclusion criteria were then established based on the information gathered from the inquiry. Then, subject matter experts evaluated the researcher-formulated questionnaire and underwent pilot and reliability testing to identify and correct problems before implementing the survey. Before conducting the study, the researchers employed pilot testing to test the feasibility and accessibility of an approach for a larger population. Random junior high school students participated in the pilot testing. The test required 30 respondents from junior high school students to present its population. During the pilot testing, the researchers protected the rights of the respondents by following a particular code of conduct, which is anonymity to keep the respondent's identity unknown during and after the study, confidentiality to make sure that the respondents' information and responses will remain private, and the data will be safely secured before and after the study, as well as informed consent to ensure that the respondents are aware of what the study is about and what risks they might encounter. The researchers also applied these ethical considerations during the actual study. Informed consent was collected beforehand. Since the reliability testing results showed that most parts of the questionnaire were highly reliable, the researchers were confident in following and utilizing the validated tools to ensure the data's consistency during the actual gathering. The researchers then gathered the students' responses and transferred the data to Google Sheets for easier access and organization for data analysis. The data was stored and presented per the ethical obligations for quantitative research.

2.5 Ethical Considerations
The researchers followed standard protocols as suggested by Ignacio (2023) to ensure ethical considerations during the study. The researchers ensured that the respondents' identities remained unknown during and after the study for security reasons, meaning the respondents' names or any identifying information were undisclosed from their survey responses. The respondents' information remained confidential, and students' data were safely secured before and after the study. The researchers ensured that only authorized personnel had access to the data and took measures to prevent information from being disclosed. The researchers built a sense of trust with their respondents, having clear communication, clarity with the objectives and procedures, and maintaining the integrity of the research. The students verbally assented to the researchers to prove they freely participated in the study and were not coerced. They were then issued an informed consent document to participate in a research study and parents' consent since the respondents were minors. In addition, they understood the purpose of the study, any risks involved, and their rights to withdraw at any time. The researchers ensured that the participants were treated fairly and with respect.

3.0 Results and Discussion
3.1 Level of Psychological Distress

Table 1. Descriptive statistics of the level of psychological distress

Indicator	Mean	Interpretation	SD
1. I feel socially isolated from my friends and classmates.	2.554	High	0.848
2. I feel restless because things don't go the way I want them to.	2.794	High	0.816
3. I have trouble sleeping or experience sleep disturbances due to anxiety.	2.354	Low	1.067
4. I feel a lack of motivation to participate in academic activities.	2.702	High	0.860
5. I experience increased irritability or mood swings.	2.860	High	0.917
6. I feel a loss of interest or enjoyment in activities.	2.422	Low	0.952
7. I find it difficult to concentrate on doing schoolwork.	2.723	High	0.813
8. I experience physical symptoms such as headaches or stomach aches due to stress.	2.499	Low	1.001
9. I feel stressed due to financial problems	2.435	Low	1.078
10. I feel stressed due to family problems.	2.507	Low	1.092
11. I feel worried about the state of the world and current events.	2.691	High	0.821
12. I feel a lack of control or power over my own life.	2.496	Low	0.935
13. I have thoughts of self-harm or suicide.	2.029	Low	1.111
14. I feel anxious about my performance in tests or exams.	3.114	High	0.940
15. I feel that I am tired for no reason.	3.050	High	1.047
Grand Mean	**2.615**	**High**	**0.995**

Legend for mean score interpretation: 1.00-1.75 = very low, 1.76-2.50= low, 2.51-3.25=high, 3.26-4.00=very high

Table 1 presents indicators of the level of psychological distress exhibited by public junior high school students within General Santos City. The respondents obtained a high grand mean score (M=2.615, SD=0.995), suggesting

a high level of psychological distress. The statement "I feel anxious about my performance in tests or exams" has the highest mean score of 3.114 (SD=0.940). A study by Lin and Yusoff (2013) stated that students experience high levels of psychological distress mainly on their performances on their tests. Most students who are anxious make it difficult for them to perform well on their tests or exams effectively, and flooding thoughts of worry could affect their overall health and their daily lives. On the other hand, the statement "I have thoughts of self-harm or suicide" has the lowest mean score of 2.029 (SD=1.111). This finding is contrary to the study of Zanus et al. (2021), which stated that the prevalence of students having thoughts of self-harm or suicide ideations is high. Although this difference requires further investigation, it suggests that, within the context of public high schools in General Santos City, academic pressures may outweigh suicidal ideations among students.

These results carry significant implications for various stakeholders in the mental health and education sectors. Teachers must recognize that test anxiety negatively impacts students' performance and well-being, necessitating the introduction of supportive strategies in the classroom. To proactively address these pressing issues, policymakers should consider integrating mental health education and support services into the academic curriculum. Furthermore, mental health professionals must promote junior high school students' coping mechanisms and address academic stressors through tailored interventions.

3.2 Factors Contributing to Psychological Distress

Table 2. Descriptive statistics of the factors contributing to psychological distress

Indicator	Mean	Interpretation	SD
1. Interacting with my peers is challenging for me.	2.507	Low	0.886
2. Family conflicts stress me out.	2.567	High	1.040
3. I am a target of bullying when I am at school.	1.757	Very Low	0.940
4. Academic demands and performance expectations overwhelm me.	2.847	High	0.942
5. My self-esteem issues bother me.	2.625	High	1.030
6. My family does not give me emotional support.	1.968	Low	1.036
7. I use technology or social media excessively.	3.084	High	0.878
8. There is a lack of support from my teachers or school counselors.	2.140	Low	0.951
9. The pressure to conform to cultural expectations affects me.	2.296	Low	0.927
10. My current financial situation causes difficulties for me	2.438	Low	1.007
11. Falling asleep quickly is challenging for me.	2.710	High	1.011
12. Coping with my physical health condition/s is difficult for me.	2.380	Low	0.933
13. A traumatic event I've experienced makes me anxious.	2.625	High	1.100
14. Alcohol or drug use is something I struggle with.	1.251	Very Low	0.673
15. The uncertainty about my future after junior high school worries me.	2.945	High	0.962
Grand Mean	**2.409**	**Low**	**1.064**

Legend for mean score interpretation: 1.00-1.75 = very low, 1.76-2.50= low, 2.51-3.25=high, 3.26-4.00=very high

Table 2 provides a comprehensive evaluation of the factors influencing psychological distress. The results revealed that these factors collectively make a low contribution to the respondents' psychological distress, with a grand mean score of 2.409 (SD=1.064). Notably, it is essential to highlight that the factor "I use technology or social media excessively" stood out, boasting the highest mean score (M=3.084, SD= 0.878). It is worth noting that excessive use of social media and technology emerged as the most prominent factor contributing to the respondents' psychological distress, in line with Keles et al.'s (2019) systematic review, which categorized social media exposure into time spent, activity, investment, and addiction, all correlating with depression, anxiety, and psychological distress.

Contrarily, the statements "I am a target of bullying when I am at school" and "Alcohol or drug use is something I struggle with" accumulated the lowest mean scores as well as Very Low interpretations, with mean scores of 1.757 (SD=0.940) and 1.251 (SD=0.673) respectively. This signifies that school bullying does not significantly contribute to the psychological distress experienced by junior high school students in public schools. Conversely, Pengpid and Peltzer (2020) argued that psychological distress is not only related to the COVID-19 pandemic but sometimes due to bullying as well. It is essential to acknowledge that despite the results of the current study proving otherwise, psychological distress in adolescent students could stem from various factors, including bullying.

3.3 Adaptive Coping Mechanisms

Table 3 presents indicators of different adaptive coping mechanisms. These adaptive coping mechanisms are employed at a high grand mean score (M= 2.888, SD= 0.953), emphasizing the potential of these high-scoring strategies as valuable tools in bolstering resilience and promoting mental health among individuals facing challenges. The results show that the statement "I practice setting my future goals" garnered the highest mean score of 3.282 (SD=0.846), indicative of very high utilization. This finding contrasts with Einav and Margalit's (2023) study, wherein it was discovered that several adolescents struggle with contemplating and preparing for their future. The high utilization of practicing future goal-setting contrasts with Einav and Margalit's study, underscoring adolescents' diverse approaches to navigating their future aspirations. This contrast underscores adolescents' diverse approaches to contemplating and preparing for their future aspirations, suggesting the need for tailored support and guidance in this aspect of adolescent development. Educators, policymakers, and mental health practitioners can utilize these findings to emphasize the importance of fostering goal-setting skills among junior high school students, thereby equipping them with vital tools for resilience and long-term success.

Table 3. Descriptive statistics of the adaptive coping mechanisms

Indicator	Mean	Interpretation	SD
1. I seek support from friends or classmates when facing difficulties.	2.788	High	0.896
2. I seek social support from family members when facing difficulties.	2.599	High	1.009
3. I engage in physical activities/exercise to manage stress.	2.662	High	0.944
4. I use relaxation techniques (e.g., deep breathing and meditation) to calm myself during stressful situations.	3.005	High	0.979
5. I express my thoughts and feelings through creative outlets such as art, writing, or music.	3.150	High	0.926
6. I break tasks into smaller, manageable steps when facing challenges.	2.836	High	0.835
7. I seek guidance or advice from teachers, school counselors, or other trusted adults when facing difficulties.	2.253	Low	1.015
8. I practice positive self-talk and remind myself of my strengths and abilities.	2.087	High	0.923
9. I prioritize self-care activities, such as getting enough sleep, eating nutritious meals, and practicing good hygiene.	2.960	High	0.900
10. I use problem-solving strategies to solve challenges or conflicts.	2.734	High	0.917
11. I practice adapting to changes and view them as opportunities for individual growth.	3.018	High	0.831
12. I practice time management techniques to organize and prioritize my tasks and responsibilities.	3.053	High	0.840
13. I rely on humor to manage stress.	3.026	High	0.925
14. I find comfort in spiritual or religious practices during difficult times.	2.868	High	0.994
15. I practice setting my future goals.	3.282	Very High	0.846
Grand Mean	**2.888**	**High**	**0.953**

Legend for mean score interpretation: 1.00-1.75 = very low, 1.76-2.50= low, 2.51-3.25 =high, 3.26-4.00=very high

On the other hand, the statement "I seek guidance or advice from teachers, school counselors, or other trusted adults when facing difficulties" garnered a low mean score of 2.253 (SD=1.015). Stapley et al. (2022) concluded that adolescents who indicated facing elevated and continual life challenges hesitated or could not seek assistance from their parents. It is noteworthy to observe the lower mean score for seeking guidance from teachers or trusted adults, underscoring the limited use of this coping strategy among the surveyed individuals. Furthermore, the current study reveals that students' resilience is strengthened through creative self-expression, future planning, and physical activity, highlighting the multifaceted nature of effective coping with challenges among young individuals. By integrating these findings into interventions, educators, policymakers, and mental health practitioners can better support junior high school students in navigating challenges and promoting their overall well-being.

3.4 Level of Well-being

Table 4 shows the indicators of the level of well-being, the mean, and its interpretation. The grand mean for the level of well-being is 2.924, and the standard deviation is 0.874, with a High verbal interpretation, indicating that respondents have a high level of well-being. The results signify that the statement "I can easily balance my academic responsibilities and personal life" got the highest mean score of 3.082 (SD=0.833). This finding is supported by Koshkin et al. (2014), wherein the unique aspects of how students establish a sense of balance in their lives while engaging in demanding academic pursuits, juggling work responsibilities, and managing day-to-day activities were explored. However, the statements "I have access to resources for my mental health needs"

and "I feel emotionally stable despite the challenges I face" received high mean scores and interpretations but were lowest overall, with mean scores of 2.631 (SD=0.943) and 2.813 (SD= 0.923) respectively. This finding signifies that students feel that they do not have enough access to mental health services, and they struggle with emotional stability in facing difficulties.

Table 4. Descriptive statistics of the level of well-being

Indicator	Mean	Interpretation	SD
1. I feel physically healthy and energized.	2.873	High	0.793
2. I feel emotionally stable despite the challenges I face.	2.813	High	0.923
3. I feel supported by my friends and classmates.	3.050	High	0.867
4. I feel a sense of purpose and motivation in my daily activities.	2.937	High	0.840
5. I feel a sense of gratitude in my life despite the challenges I face.	3.034	High	0.843
6. I can stay calm despite having challenges and problems.	2.939	High	0.857
7. I feel a sense of belonging and acceptance in my school community.	2.945	High	0.766
8. I feel delighted when sharing and expressing my ideas with my classmates.	2.913	High	0.900
9. I feel optimistic and hopeful about the future despite the uncertainties.	2.858	High	0.823
10. I feel a sense of accomplishment and satisfaction with my academic progress.	3.063	High	0.849
11. I have access to resources for my mental health needs.	2.631	High	0.943
12. I feel confident in my ability to adapt and navigate changes.	2.894	High	0.899
13. I feel valued when communicating with my family.	2.939	High	0.986
14. I can still manage to relieve my stress despite having challenges.	2.889	High	0.872
15. I can easily balance my academic responsibilities and personal life.	3.082	High	0.833
Grand Mean	**2.924**	**High**	**0.874**

Legend for mean score interpretation: 1.00-1.75 = very low, 1.76-2.50= low, 2.51-3.25=high, 3.26-4.00=very high

For educators, these results emphasize the importance of advocating for increased access to mental health resources within public school settings, ensuring that students have the support they need to address their mental health concerns effectively. Policymakers should prioritize allocating resources toward mental health initiatives within schools and implementing policies that enhance access to mental health services and support networks. Mental health practitioners can utilize these findings to develop targeted interventions aimed at promoting emotional resilience and coping skills among junior high school students, equipping them with the tools they need to navigate challenges and thrive emotionally. By addressing these concerns collaboratively, educators, policymakers, and mental health practitioners can foster a supportive environment that promotes holistic well-being among junior high school students.

3.5 Relationship between Psychological Distress and Well-Being of Public Junior High School Students

Table 5. Correlation analysis between psychological distress and well-being of public junior high school students

Variables	N	r-value	df	p-value
Psychological Distress Well-Being	379	-0.013	378	<.001

Legend for p-value score interpretation: p < .05= moderate evidence against null hypothesis,
p < .01= strong evidence against the null hypothesis,
p < .001= very strong evidence against the null hypothesis

The study intended to determine the relationship between psychological distress and the well-being of junior high school students in public schools within General Santos City. Using Pearson correlation, the computed p-value is <.001, which indicates that 14there is a significant relationship between the psychological distress and well-being of the students. Furthermore, the magnitude of the relationship is -0.313, which is interpreted as a moderate negative relationship. This implies that higher levels of psychological distress are correlated to lower levels of well-being.

These findings have critical implications for educators, policymakers, and mental health practitioners working with this demographic. Educators can use this information to identify students who may be at risk of experiencing low well-being due to psychological distress and implement targeted interventions to support their mental health. Policymakers may consider allocating resources toward mental health initiatives within schools to address this correlation. Mental health practitioners can utilize these findings to tailor interventions aimed at promoting well-being and mitigating psychological distress among junior high school students more effectively.

3.6 Recommended Intervention Activities

The intervention activities presented were based on the study's results, which found that students struggle with high levels of psychological distress while also using adaptive coping mechanisms that contribute to their high levels of well-being. In light of the compelling insights from this study on junior high school students in public schools, the researchers aspire to fortify these students with effective coping strategies and support mechanisms, ultimately fostering an environment conducive to enhanced well-being and psychological resilience.

Mindfulness Activities

The first activity promotes the students having control of themselves, enables them to respond to situations with composure, and improves their quality of life. A study by Canby et al. (2015) states that adopting Mindfulness-Based Stress Reduction (MBSR) provides a good outcome in reducing psychological distress and allows us to become aware of our motions of self-control. Furthermore, an article by Sapthiang et al. (2018) discussed how incorporating mindfulness-based interventions into schools could be a cost-effective strategy for enhancing the mental well-being of adolescents, and such interventions may contribute to better student learning performance and classroom behavior. This linking of evidence emphasizes the potential for transformative effects when integrating mindfulness practices into educational environments.

Resilience-based activities

The second activity aims to help individuals foster their awareness of emotions, both their own and those of others, and assist them in making informed decisions while setting clear and achievable goals. An article from GoodTherapy (2018) states that meditation, progressive muscle relaxation, calming techniques, spending time in nature, or listening to music can help manage stress. Also, a trial conducted by Henje et al. (2017) achieved results proving that Training for Awareness, Resilience, and Action (TARA) shows promise as a practical and effective way to help adolescents deal with feelings of sadness and anxiety as it not only brings about improvements in mood but also helps enhance psychological flexibility, sleep quality, and mindfulness skills. The essence of the second activity is profound, focusing on holistic improvements to guide individuals toward a deeper understanding of emotions, sound decision-making, and the pursuit of achievable goals.

Recreation-based activities

The third activity allows students to spend more time away from stressors and engage in activities that help reduce stress. According to Lubans et al. (2016), engaging in physical activity can improve physical self-perception and boost self-esteem among young individuals. Moreover, the study revealed that involvement in extracurricular activities was linked to elevated life satisfaction and optimism, along with reduced anxiety and depressive symptoms (Oberle et al., 2020). Focusing on recreation-based activities shows that the intention to provide students with a reprieve from stressors is a thoughtful initiative that promotes a more balanced and healthier lifestyle.

Self-Care Activities

The fourth activity aims to promote self-kindness, reduce self-criticism, and enhance overall well-being. A study by Bluth and Eisenlohr-Moul (2017) states that the intervention of self-compassion and mindfulness lessens the burden of distress and helps increase resilience. Furthermore, a study by Albertson et al. (2014) revealed that self-care is not just a concept but something an individual can do, which means that studying self-compassion involves learning about it from an outside perspective and experiencing it firsthand. By practicing self-compassion, individuals can experience and create a happier and more compassionate world for everyone. Moreover, intervention for self-compassion resulted in noteworthy improvements in self-compassion, mindfulness, optimism, and self-efficacy. It also led to significant reductions in rumination compared to the active control intervention (Smeets et al., 2014). The focus on promoting self-kindness holds transformative potential, as supported by studies highlighting the reduction of distress, the cultivation of resilience, and the creation of a happier and more compassionate world for individuals engaged in such practices.

4.0 Conclusion

The research provides a different view on mental health, revealing crucial insights into the psychological landscape of junior high school students in public schools within General Santos City. It emphasizes the importance of developing effective coping strategies to manage psychological distress while nurturing well-being.

The research has significant practical implications, urging stakeholders, including students, guidance practitioners, public school administrators, and parents, to prioritize mental health support and school awareness. Essentially, the study underscores the significance of addressing psychological distress, cultivating adaptive coping mechanisms, and nurturing well-being among junior high school students in public schools. By recognizing the importance of these factors and implementing the practical recommendations outlined in this research, society can collectively contribute to a more emotionally resilient and well-balanced future generation. It is a call to action, a reminder that the psychological well-being of the youth is a vital investment in the well-being of society as a whole.

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7.0 Conflict of Interests
All authors declare that they have no conflicts of interest

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