

Research Paper

# Building Communication and Capacity Among Guidance Advocates in Advocating Students' Mental Health

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#### **Abstract**

The main thrust of this study was to explore the challenges encountered by guidance advocates in addressing students' mental health in the Division of Calamba City. Qualitative research, specifically the phenomenological approach, was utilized. The data was gathered through interviews with the eight (8) guidance advocates. Based on the guidance advocates' experiences, ten (10) themes emerged from the phenomenological study of guidance advocates. These are: Degrees of Familiarity, Developed Professional Skills, Obligation Focused, Diverse Guidance Advocates Roles, Guide, Immediate Response to Students' Needs, Visible Changes in Students' Behavior and Difficulty in Assessing, Communication and Capacity, Divine Intervention and Personal Motivation, Through Seminars and Trainings. Guidance advocates were able to describe a variety of challenges in supporting the mental health of the students, including: Reaching out, Lack of Professional Capacity, Encourage Students to Open up, Students with Separation Anxiety, Handling a Situation, and Emotional and Physical Preparedness. Rooted in the lived experiences of the guidance advocates, communication barriers and a lack of professional capacity to effectively advocate for students' mental health were the two main issues faced by the guidance advocates in the field. Each advocacy role faced unique obstacles, often compounded by a lack of training and institutional support. Despite these obstacles, self-motivation and faith-based coping mechanisms were frequently used by guidance advocates to manage their duties and carry-on providing students with effective support. Considering the results, the study suggests an improvement project called Project I.S.I.P. (Initiated Strategies Inspired by Professionals), a referral and counseling program intended to strengthen school-based mental health support networks and advocacy.

**Keywords:** Guidance Advocate, Communication, Capacity, Mental Health, Student Counseling, Guidance Advocacy, Phenomenology Study, Psychological Assistance, School-Based Mental Health, Communication Issues, Capacity-Building, Emotional Preparedness, Health Education

# INTRODUCTION

"Counseling has to do with intuition, with work on oneself, with the quietness of one's mind and the openness of one's heart." - Ram Doss

The profession of school counseling has evolved, with each period building before, to meet the changes and demands of education reform, modern society, and student and family needs (American School Counselor Association, 2020). According to Modo et al. (2018), guidance and counseling were one of the educational services that promoted the effectiveness of the educational system in achieving goals and guiding students through the learning process. Guidance and counseling services have been affected by different issues. Various issues plagued with guidance and counseling services. Some of the issues included poor perception of counsellors by school leaders and colleagues, a lack of provision in the curriculum for all levels of education and supervision at all levels, insufficient time for counsellors, non-corporative clients, insufficient

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parental support, insufficient funding, and a shortage of qualified personnel, to name a few. There was an urgent need to address the issues confronting guidance and counseling services, particularly in secondary school education (Usbaw, 2018).

Due to the highest rate of mental health in the Philippines, the government initiated the Implementing Rules and Regulations of Republic Act No. 11036, "An act establishing a national mental health policy for the purpose of enhancing the delivery of integrated mental health services, promoting and protecting the rights of persons utilizing psychiatric, neurologic and psychosocial health services, appropriating funds therefor, and for other purposes to address such issues and concerns regarding mental health."

In response to the Implementing Rules and Regulations of Republic Act No. 11036, otherwise known as the Mental Health Act, the Department of Education issued a memorandum to address the students' mental health through DM-OUCI-2021-359 enclosed the Counseling and Referral System for Learners for School dated August 25, 2022. The policy aims to provide guidelines for schools in addressing learners in need of counseling and students for referral to mental health professionals/services. It is stipulated in the DM-OUCI-2021-359 that all learners are subject to cover the said memorandum. Cited in the memorandum, a Registered Guidance Counselor, based on Republic Act 9258, in accordance with its practices, shall conduct counseling for the learners. On the other hand, Republic Act 9258, known as the Guidance and Counseling Act of 2004, a law enacted to make the practice of guidance and counseling in the Philippines more professional, it is clearly states that only a Registered Guidance Counselor shall conduct counseling services in the Philippines. Nevertheless, in the absence of a Registered Guidance Counselor, School Heads shall designate a Guidance Advocate in the school.

Based on the memorandum, Guidance Advocate functions shall: Facilitate learners' access to a division-designated Registered Guidance Counselor or other mental health practitioners for counseling and referral services. Disseminate mental health-related information, and if required, seek the advice of a mental health expert.

On a personal note, being a Guidance Advocate for six years now in Bunggo National High School, there are difficulties hindering the position since there are no clear guidelines regarding limitations that are set forth for the position. In line with this, DM-OUCI-2021-359 - Counseling and Referral System for Learners for School, stated that in case there is no available Registered Guidance Counselor in the school, the Schools Division Office shall designate a Registered Guidance Counselor for the Division. Hence, at present, there is no available Registered Guidance Counselor for the Division of Calamba City. Due to a critical shortage of Registered Guidance in the Division of Calamba City, the critical role was left in the responsibility of guidance advocates with a lack of training, resources, and institutional clarity to successfully carry out their responsibilities in advocating mental health among students.

One of the biggest obstacles to the execution of these rules has been the lack of Registered Guidance Counselors (RGCs), who are mandated by Republic Act 9258. To handle student mental health issues in their absence, schools have appointed Guidance Advocates, who are usually staff members or teachers without official counseling training. These Guidance Advocates, who frequently lack defined roles, specific training, or systematic support, are entrusted with facilitating referrals, sharing mental health information, and assisting learners.

Moreover, Abdulraof (2025) in their own article stipulated that Guidance counselors in the Philippines struggle with excessive workloads, administrative responsibilities, stigma, and a disconnect between legislative demands (such as the Mental Health Act RA 11036) and their actual implementation in schools. Similarly, country-level studies highlight a significant discrepancy between frontline realities and policy goals, where activists lack institutional support, time, and training.

The following research questions are suggested to direct this study:

- 1. What are the challenges faced by the Guidance Advocates in advocating for students' mental health?
- 2. Are the resources and support system provided to the guidance advocates adequate in assisting students' mental health?
- 3. In the absence of Registered Guidance Counselors, how do Guidance Advocates view their roles and responsibilities?
- 4. What enhancement program could be created to help guidance advocates carry out their responsibilities more morally and successfully?

Guidance advocates during the conduct of the study speak from their hearts. As they want to provide better quality service to their clients, their functions are crucial. According to one of the guidance advocates, they only have one heart; they only have one mind and two hands, and yet their task is too big to handle.

Another statement coming from one of the guidance advocates was:

"Marami po akong challenges na na-eencounter in terms of mental health ng mga bata. Kagaya na lamang ng paghihikayat sa mag aaral na mag open. May mga mag aaral na nahihirapan or nahihiya na magsabi kung kayat kailangan ng mahabang pasensiya at malawak na pag unawa para sa kanila. Challenge din po para sa akin hingin ang support or cooperation ng magulang. Mahalaga po kasi na maging matibay ang support system ng bata."

Guidance Advocates also claimed that they are there to perform the function of assisting students in need through a referral system as stipulated in the guidelines; hence, the mere fact that they have limited knowledge on the technicalities is one of their difficulties in how to refer the students. They consider it the start of the loophole in the enactment of their functions.

Nevertheless, few empirical studies have been done on the experiences and responsibilities of guidance advocates in the Philippines. Most debates ignore the real-world struggles these people experience in favor of anecdotal evidence or policy evaluations. Furthermore, not much has been done to create organized, context-based support networks that would allow these advocates to carry out their responsibilities efficiently while adhering to professional and ethical standards.

The practical difficulties of providing school-based mental health support in the Philippines serve as the foundation for this study, but its ramifications go beyond the field of education. The experiences of Guidance Advocates, who work at the forefront of adolescent mental health, are intricately linked to public mental health, behavioral health, and psychosocial support frameworks.

The multi-tiered system of supports (MTSS) and Whole School, Whole Community, Whole Child (WSCC) models, which prioritize early identification, preventive mental health practices, and school-based intervention, are in line with the role of guidance advocates. These frameworks are upset by the absence of licensed counselors, demonstrating how local adaptations, such as the use of Guidance Advocates, act as unofficial compensatory mechanisms.

This study acknowledges schools as essential community-based venues for mental health care, in accordance with the Inter-Agency Standing Committee (IASC) framework for Mental Health and Psychosocial Support in Emergency Settings (MHPSS). Although frequently unstructured, guidance advocates' work reflects non-specialized support at the community level, which is a crucial component of MHPSS models. The function, challenges, and adaptation of these paraprofessional roles within this tier are examined in this study.

This was the motivation of the researcher to pursue the study of the challenges encountered by guidance advocates in addressing students' mental health in the Division of Calamba City, Province of Laguna, Philippines. The study aimed to develop an enhancement program for the specific duties of guidance advocates in helping students in need due to mental health concerns.

#### LITERATURE REVIEW

# Teachers' Role in Addressing Students' Mental Health

The difficulties educators encounter as a result of the fuzziness of professional boundaries are conceptualized with the aid of role theory. Teachers are increasingly required to recognize and address students' mental health issues, despite the conventional expectation that they concentrate on academic instruction (Kannan, 2020; Ekornes, 2017). Role ambiguity, role overload, and emotional weariness are frequently the outcomes of this misalignment between expected and perceived roles (Von der Embse, 2018; Djoub, 2021). This perplexity is made worse by unclear institutional policies and support systems, which result in uneven behaviors and lower teacher well-being. Designing treatments that define educators' roles and give them the necessary tools and boundaries requires an understanding of this role conflict.

According to Albert Bandura's Social Cognitive Theory, self-efficacy is crucial. Since teachers frequently serve as the first responders to kids' mental health issues, this notion is essential to comprehending the emotional and psychological strain placed on them. Lazardies and Warner (2020) point out that even in the face of systemic constraints, instructors who have a high sense of their own efficacy are more likely to take proactive measures to promote the well-being of their students. On the other hand, educators with low self-efficacy could feel overburdened, unsure, or hesitant to step in out of concern that things will get worse (Osagiede, 2018). Therefore, increasing teachers' self-efficacy through ongoing mental health education and institutional support can improve their capacity to react appropriately.

The important but conflicting role that educators play in fostering students' mental health is highlighted by a substantial body of research. Many teachers often show a lack of confidence in their capacity to meet their responsibilities as first responders to students' emotional and psychological needs, even when they acknowledge this duty. According to Kannan (2020), Maclean (2022), and Ekornes (2017), teachers frequently feel compelled to address students' discomfort in the classroom. However, this responsibility often leads to uncertainty and worry, primarily due to a lack of confidence and understanding in managing mental health issues.

Teachers often serve as gatekeepers to school-based mental health interventions, according to research by Frauenholtz (2017). Lack of awareness may cause indications of discomfort to be misinterpreted or disregarded, which could result in poor care or underreferral. Beams (2020) asserts that the institutional definition of teachers' duties has a significant influence on the provision of mental health treatment in schools. The blurring of the lines between teaching and mental health responsibilities contributes to confusion and uneven support approaches.

More research supports the negative effects this position ambiguity has on educators' emotional and professional well-being. Von der Embse (2018) and Djoub (2021) have highlighted role overload, emotional exhaustion, and high expectations as contributing factors to teacher burnout. Teachers' capacity to support their pupils' mental health is directly impacted by these traits. In the meantime, Lazardies and Warner (2020) highlight the importance of teacher self-efficacy in managing these demands; teachers with greater levels of self-efficacy are more adaptable and persistent when addressing mental health concerns in the classroom.

Although they are willing to help, many teachers are still reluctant to have an open discussion about mental health with pupils because of stigma and fear of doing more harm than good (Osagiede, 2018). According Kamel et al. (2020), mental health training equips educators with the information and confidence they need to recognize warning signs and implement successful strategies, highlighting the need for strong professional development and institutional support. A more thorough and preventative approach to mental health in schools is advocated by Körne

(2017), who further support interdisciplinary collaboration between educators, psychologists, and medical specialists.

According to recent research, the pandemic has made teaching more difficult. According to a 2024 YoungMinds UK survey, 75% of teachers frequently put their mental health above their academics, primarily because of the lack of adequate outside help (The Guardian, 2024). The necessity for structural transformation is shown by the rise in teacher burnout and widespread resignations in Australia because of systemic stress and unruly student conduct.

Potential solutions include social-emotional learning frameworks and trauma-informed education. The goal of these programs is to give educators the useful skills they need to foster resilience and emotionally safe learning environments. However, results differ according to resource availability, school assistance, and training quality.

All things considered, these studies paint a consistent picture: educators want to help students with their mental health, but institutional, pedagogical, and emotional barriers limit their effectiveness. Effective mental health promotion in schools requires systemic transformation, including clearly defined roles, ongoing training, and institutional support that connect the education and healthcare sectors.

#### Students' Mental Health After COVID-19

The Ecological Systems Theory developed by Urie Bronfenbrenner offers a thorough framework for comprehending the various facets that affect a student's mental health. This theory holds that nested systems, ranging from the macrosystem (such as national policies and cultural norms) to the microsystem (such as peers, family, and school), influence an individual's behavior and development. Many of these mechanisms were upset by the COVID-19 epidemic, which increased students' exposure to stressors such as social isolation, unstable finances, and restricted access to support services. The approach emphasizes the significance of systemic solutions, such as school-based interventions, interdisciplinary collaboration, and community involvement, by placing student mental health within these overlapping systems.

In addition to inflaming pre-existing mental health disorders among students, the COVID-19 pandemic has created new pressures linked to social isolation, distance learning, and unpredictable finances. The need for improved coping mechanisms and adaptable learning environments is highlighted by the significant psychological suffering that French post-secondary students displayed during lockdowns, which revealed that isolation and online learning were important contributing factors to the high levels of anxiety and depression among college students in the Philippines.

Socioeconomic and psychological factors make students more vulnerable. Even as the possibility of illness feeds anxiety, financial difficulties, especially in low-resource settings like the Philippines, significantly endanger students' mental health. These worries are supported by worldwide research. Despite decreases in initial anxiety levels, longitudinal research conducted in China reveals a post-pandemic increase in PTSD and suicide ideation among college students. High levels of anxiety, despair, insomnia, and suicidal thoughts among college students are also connected to social separation and the strain of online learning, according to a global literature analysis that spans 32 nations.

Students in Texas continue to struggle with the psychological fallout from the pain and isolation caused by the outbreak. Despite rising demand, school mental health programs continue to get insufficient funding, according to a 2025 Houston Chronicle study. While some schools have embraced community partnerships and universal screenings, their execution varies.

Resilience and hope have been identified as important protective factors. To help students cope and regain their emotional well-being, recent research highlights the importance of social-

emotional learning (SEL) programs and focused psychosocial treatments.

The establishment of mental health offices in schools is required under the Philippine Department of Education's 2025 implementation of the Basic Education Mental Health and Well-Being Promotion Act. A significant step toward systematic support for students' well-being is represented by this policy.

These findings collectively demonstrate that students' complex mental health problems are made worse by systemic flaws in the healthcare and educational systems. The pandemic has raised the need for cross-sector collaboration and brought attention to the vulnerability of school-based mental health services. This highlights how important it is to develop school-based programs that include teacher preparation, community involvement, and psychosocial support as part of a comprehensive strategy.

In summary, studies show that academic remediation is insufficient on its own for educational recovery efforts following a pandemic. Addressing students' mental health issues requires focused, culturally aware solutions that involve long-term partnerships between educators, counselors, families, and lawmakers.

# **RESEARCH METHOD**

To investigate the lived experiences of guidance advocates in addressing students' mental health, this study used a qualitative research methodology using a phenomenological approach. According to Creswell (2018), qualitative research gives the researcher insight into how people interpret their experiences. To be more precise, Interpretative Phenomenological Analysis (IPA) was used to learn more about how participants perceive and address kids' mental health issues. Because IPA is participant-centered, it gave participants the freedom to consider and explain their roles without prejudice or condemnation.

Eight (8) guidance advocates were chosen for the study using homogeneous purposive sampling. Participants were chosen based on their relevant activity in advocating mental health both before and during the pandemic, their formal designation as guidance advocates by the Division office of Calamba City, and their minimum three years of experience in the position. These requirements made sure that participants could offer insightful comments and had enough exposure to the issues the study addressed. The number of participants was based on the IPA methodology standards, which prioritize depth over breadth. Smith et al. (2009) state that to enable idiographic, in-depth study of every case, IPA research usually uses small, homogeneous samples, usually consisting of 4–10 people. Eight participants, therefore, were within the suggested range and allowed for both thematic comparison across cases and in-depth interaction with individual experiences.

One online focus group discussion (FGD) and two online individual interview sessions per participant were used to collect data. FGDs lasted roughly 90 minutes, whereas interviews lasted roughly 45 to 60 minutes. To guarantee accuracy and thoroughness, all sessions were audio recorded with permission and accompanied by the researcher's field notes. Because data gathering was still flexible, questions might change in reaction to new information. Semi-structured interviews were employed in this study to get detailed information from participants. To maintain uniformity across the interviews and provide flexibility to investigate new information, a prepared interview guide was utilized. Every recording was kept on a device that required a password to access. To maintain anonymity, a participant code (such as GA1, GA2) was attached to each file. The recordings were verbatim transcribed, and the accuracy of the transcriptions was verified twice. In order to verify their membership, participants also had the chance to examine their transcripts.

Participants were given an informed consent form outlining the study's goals, their rights, and data confidentiality before data collection. To guarantee confidentiality, voluntary

involvement, and safe data processing, ethical guidelines were adhered to. To comply with blind review guidelines, this submission does not contain any identifying information.

Data saturation was examined in terms of information power (Malterud et al., 2016), which holds that fewer participants are required the richer and more important the participants' experiences are in relation to the study's goal. As a result, the sample size was adequate to meet the IPA's requirements for analytical depth and guaranteed the reliability of the results.

The phenomenological approach was suitable for distilling the core of guidance advocates' experiences in promoting the mental health of students. It gave the researcher the opportunity to investigate how participants view their roles, difficulties, and coping mechanisms in the classroom.

# FINDINGS AND DISCUSSION

Similarly, the summarized findings from the interview responses were discussed in terms of real-life experiences and other research findings from the collected literature. Recognizing these findings means that the challenges encountered by guidance advocates differ depending on their needs.

**Participant Code** Gender Years of service Age range GA 1 F 31-35 GA 2 F 10 41-45 F GA3 26-30 GA 4 Μ 36-40 F GA 5 31-35 5 GA6 7 M 36-40 GA7 F 5 26-30 F GA8 41-45 12

**Table 1**. Participant Profile

Based on the guidance advocates' experiences on the challenges they encountered in assisting students' mental health. The importance of their life experiences should be recognized as having particularly different and demanding responsibilities when it comes to assisting students' mental health. Despite their worries and difficulties, they still accepted their role as designated guidance advocates wholeheartedly, and it was obvious that their passion for their vocation was seen as they cared for and protected the learners. Guidance Advocates are solely focused on the needs of the students while carrying out their tasks, taking into consideration all other factors, especially their own limitations. Even though they encountered a range of challenges, they got through these obstacles by staying optimistic about their professional self-growth and their care for the students. Along with these difficulties, they were passionate about learning more about their function and were eager to receive additional training.

Ten (10) themes emerged from the phenomenological study of guidance advocates. These are: Degrees of Familiarity, Developed Professional Skills, Obligation Focused, Diverse Guidance Advocates Roles, Guide, Immediate Response to Students' Needs, Visible Changes in Students Behavior and Difficulty in Assessing, Communication and Capacity, Divine Intervention and Personal Motivations, Through Seminars and Training.

# **Emerging themes**

#### The First theme

Degrees of Familiarity. Guidance advocates were able to have different answers as they tried to figure out their familiarity with DM-OUCI-2021-359: Counselling and Referral System for Learners for School. They mentioned that they were able to attend virtual orientation before the implementation of the memorandum. Hence, though they are familiar, familiar but confused and unfamiliar with the memorandum, there's still the fact that they cannot do counseling since they are not professionals in nature.

## For the second theme

Developed Professional Skills, guidance advocates had a meaningful look when providing answers on how the memorandum influenced them as guidance advocates. According to them, memorandums were able to impart on their personal well-being as they tend to develop their professional skills. As mentioned, they were able to develop critical thinking because they were able to form new ideas, information, and techniques. It also developed their communication and interpersonal skills, which were considered in guidance and counseling as vital because it play an important role in assisting students.

#### Another, the third theme

Obligation-focused, the participants gave importance to their accountability. Based on their statements, they are convinced that there is a need to focus on students, specifically their mental well-being, for it manifests in their behavior. They also mentioned how eager and passionate they are when it comes to the representation of their job, noted with the trust given by their schools to them as guidance advocates. Lastly, it was noticeably remarkable that they sought help from the concerned agencies or professionals through referrals on a case-by-case basis.

# While for the fourth theme

Diverse Guidance Advocates Roles. Guidance advocates considered their role challenging, as the role entails a big responsibility. It depends on them on how they can communicate with the students concerned and their parents. They even considered the pandemic as a cause of the challenges that they have for the changes it created, not only for the students but also for the guidance advocates themselves. They perform their task with empathy, as shown by their smiles, as they explain how they become a parent, a mother, and a friend to the students. They also assess the emotional well-being of the students so that they can know where the students are.

#### The fifth theme

The guide explains how the memorandum serves as a guide to the guidance advocates as if they considered it as their hand-on-hand consultant in case there are cases that result from students' mental health. The memorandum reminds them of their limitations in regards with handling different situations as part of their guidance facets. Generally, the memorandum guides them, but guidance advocates are looking forward to additional improvement in the memorandum, specifically handling students' mental health concerns about identifying mental health statuses of students with the proof of their well-being, so that they can address the issue properly to the students and to their parents/guardians.

### For the sixth theme

Immediate Response to Students' Needs, the proactiveness of guidance advocates depends on the needs of the students in reference to their strategies/activities. Building rapport and trust is important to them as they show excitement and eagerness as they share their different strategies and/or activities. Communication is also important to them as they try to communicate with the parents and consult with the school heads, co-guidance advocates, and agencies connected to them. But most importantly, the least that they can do after the usual mitigation process is the referral system.

# Under the seventh theme

Visible Changes in Students' Behavior and Difficulty in Assessing, participants responded with disturbance and confusion. According to their responses, students' manifestation of changes towards their behavior is noticeable but to the fact that they have limited knowledge regarding guidance and counseling and behavioral management, there's still a fact that they are not convinced on their observations especially that they were able to handle students which are not open, does not speak up or responding okay but in real sense is not. They supposed that those experts in the field are the ones capable of doing the assessment/evaluation of their strategies, especially when it comes to the results of referral.

# For the eighth theme

Communication and Capacity, guidance advocates that challenges in handling students' mental health concerns vary depending on how they encountered such difficulties. Upon observation, they were distressed when the question was given. The challenges they encountered were focused on the students' course because they were the main subject here. Their behavior, their acceptance of their current situation, and their interaction with conferences are the main causes of their challenges. Also, guidance advocates were inclined about how they would communicate with the parents regarding the students' situation, especially since they don't have any proof to communicate as they lack professional capacity to do so. Aside from the guidance-related matters, that considers to be challenges among the challenges is the emotional and physical well-being of the guidance advocates, as to how they were able to handle the situation if they have their own baggage.

#### Under the ninth theme

Divine Intervention and Personal Motivations, participants were able to respond positively as they were able to identify different coping strategies that they have when handling difficulties. According to the guidance advocate, they were able to regain their well-being after a series of challenges through empowering their spirituality. After their spiritual aspect is their physical aspect on how they were able to have a healthy body by taking rest and self-preparation on handling difficult students. Another is personal motivation on how to do things as expected of them, and finally, the way they seek assistance from their school heads.

# And lastly, the tenth theme

Through Seminars and Training, participants stated that it is through a series of trainings, seminars, school learning action cells, and other methodologies that lead to the improvement of their skills as guidance advocates the things which equipped them to be better in their given designation. Advocates are open, very eager, and looking forward to more training that will mold them in providing a friendly and healthy school environment for the learners.

Within the context of DM-OUCI-2021-359: Counseling and Referral System, this phenomenological study investigated the lived experiences of guidance advocates in addressing

mental health issues among students. Their experiences were encapsulated in ten emergent themes that brought to light the emotional and structural obstacles they encountered, the intricacies of their work, and their developing competencies. One important conclusion shows that guidance advocates take on crucial tasks usually performed by mental health professionals, even if they do not hold professional counseling credentials. This contrasts with earlier research that rarely examined the stress experienced by non-specialists in school settings and mostly focused on licensed practitioners.

Despite their initial lack of knowledge, several participants said that the memoranda helped them improve their interpersonal, communication, and critical thinking abilities. This development is consistent with Bandura's (1997) theory of self-efficacy, which postulates that even in the absence of official instruction, confidence can be developed through mastery experiences like handling real-life student cases. However, the extent to which this expansion translates into safe and effective practice is limited by the lack of systematic monitoring (Reback et al., 2021).

The results highlight the dedication of guidance advocates to their work, which is evidenced by their flexibility, drive, and use of self-created tactics. This study demonstrates that informal social support, spirituality, and personal passion are frequently more effective coping methods than institutional assistance, which was the main emphasis of earlier research (Mendoza et al., 2019). Notably, issues including inadequate training, a lack of power to diagnose or offer advice, and the emotional toll of student disclosures were frequent, highlighting how inadequate the current procedures are at preparing these advocates. Notwithstanding this, participants expressed a strong desire for additional training, resilience, and a notable increase in professional skills, findings that point to a critical need as well as a chance to support and professionalize their function within mental health frameworks.

#### **Conflicts Regarding the Roles of Guidance Advocates**

The study's key finding is that, even in the absence of official license or extensive training, guidance advocates frequently take on duties like those of professional mental health practitioners. Although the participants acknowledged their limits in counseling and assessment, several of them nevertheless demonstrated an extraordinary willingness to accept and embrace their assigned job. This demonstrates a significant commitment to the welfare of students, which is in line with a previous study that focused on individual commitment in the absence of systemic assistance (Mendoza et al., 2019).

Only a small percentage of guidance advocates reported feeling more assured and equipped for the position; they frequently attributed this to informal preparation from prior teaching experience, exposure to psychology-related courses, or substantial personal reading. In contrast to the more prevalent theme of self-doubt and perceived inadequacy, these people did not view the absence of official credentials as a significant hindrance. The subject of how personal traits and past experiences influence the perceived legitimacy and trustworthiness of advice advocates is brought up by these anomalous situations.

Several participants voiced sincere concerns about following the restrictions set by DM-OUCI-2021-359. The memorandum offers a broad framework, but it doesn't offer specific, doable advice on how to handle difficult or dangerous student circumstances, such as suicidal thoughts or trauma disclosures. Because of this disparity, activists were frequently compelled to make morally and emotionally difficult decisions.

When policy obligations clashed with personal convictions, tensions were especially noticeable. For instance, several guidance advocates stated that they were reluctant to send students to outside mental health specialists because they were afraid of social disapproval, had encountered opposition from parents, or believed that spiritual counseling was a better course of

action. These stories demonstrate how religious and cultural beliefs can influence and occasionally contradict the policy assumptions of proponents of guidance. Although their spirituality served as a potent personal coping strategy (Theme 9), it also occasionally made it difficult to distinguish between their personal beliefs and their professional obligations, exposing a preference for spiritual explanations or therapies over clinical ones.

According to the study, guidance advocates frequently work in settings with little or irregular institutional support. There have been several reports of the emotional toll that student disclosures take, particularly when there are no formal debriefing procedures or psychological monitoring in place. However, only a small percentage of individuals mentioned official institutional processes as sources of help or support, such as peer support groups or psychological first aid training. Rather, the most popular methods for self-care and emotional control were informal collegial discussions, self-motivation, and personal spirituality.

It's interesting to note that one participant completely rejected this narrative, claiming that they felt no emotional strain and that they thought students should mostly turn to their families and religion for emotional support. This viewpoint differed greatly from the popular story of sympathetic and passionate supporters for direction. Although this participant's opinions might be a coping strategy for setting boundaries, they also point to a possible lack of professional alignment or student-centered empathy, which raises questions regarding consistency and quality variations among various institutions or people.

According to the research, there is a community of driven and strong people juggling a crucial yet vulnerable position. Although most guidance advocates enthusiastically embraced their role and showed a high degree of initiative, empathy, and flexibility, significant inconsistencies surfaced. These consist of disparities in readiness, divergent personal convictions, and irregularities in role performance and behavioral evaluation. This is in line with more general discussions of value conflicts in mental health work.

# **Challenges Encountered by Guidance Advocates**

Based on the guidance advocates' experiences on the challenges they encountered in assisting students' mental health. The importance of their life experiences shall be recognized as having particularly different and demanding responsibilities when it comes to assisting students' mental health. Despite their worries and difficulties, they still accept their role as designated guidance advocates wholeheartedly, and it is obvious that their passion for their vocation is seen as they care and protect the learners. Guidance Advocates solely focus on the needs of the students while carrying out their tasks, taking into consideration all other factors, especially their own limitations. Even though they encounter a range of challenges, they get through these obstacles by staying optimistic about their professional self-growth and their care for the students. Along with these difficulties, they are passionate about learning more about their function and are eager to receive additional training.

**Table 2**. Emerging Themes on Guidance Advocates' Personal Experiences Assisting Students with Their Mental Health

Theme	Key Insights	Challenges Encountered	Coping Strategies
Familiarity with the policy or memorandum	Varying levels of awareness		Based on the
		Limitations on	DepEd
		counseling roles	Memorandum on

Theme	Key Insights	Challenges Encountered	Coping Strategies
			Counseling and
			Referral System
Development of needed Skill	Communication and		DepEd initiated
	empathy skills		training and
	development	Limited Training	seminars
Role perception	Sense of responsibility	Limited role in	Referrals and
		addressing mental	collaboration with
		health support	Professionals

Source: Department of Education (2021)

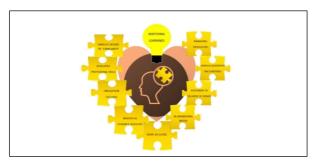


Figure 1. Emerging Themes

One important finding of this study is that improving communication and ability among guidance advocates is a fundamental necessity for supporting students' mental health, not an elective or supplemental activity. Lack of professional training, authority, and confidence in handling delicate psychological revelations led to communication issues becoming a major problem. Many interviewees said they were hesitant to approach parents and students, particularly when talking about behavioral or emotional issues without official diagnostic assistance.

This supports Bandura's (1997) Self-Efficacy Theory, which contends that a lack of confidence in one's communication skills can impede action, particularly in novel or high-stakes circumstances. Furthermore, according to Role Theory (Biddle, 1986), this difficulty is a type of role ambiguity, in which reluctance or emotional strain results from unclear expectations and training regarding when and how to have conversations about mental health. Their advocacy function is hampered by the discrepancy between their felt obligations and communication skills.

A breakdown in implementation trustworthiness is indicated by inadequate training and a lack of established communication protocols, according to Implementation Science (Fixsen et al., 2005). While DM-OUCI-2021-359 offers general policy guidance, it does not give guidance advocates the interpersonal, practical communication skills they need to have ethical, meaningful interactions with students, families, and professional stakeholders.

## **CONCLUSIONS**

Exploring the lived experiences of Guidance Advocates in the Division of Calamba City as they implemented DM-OUCI-2021-359: Counseling and Referral System for Learners was the goal of this phenomenological study. Three main research questions were addressed:

- 1. What obstacles must guidance advocates overcome to support students' mental health?
- 2. How do they handle these difficulties?
- 3. What effects does the DM-OUCI-2021-359 policy have on their practices and roles?

As for the Conclusion, below are the Challenges encountered by Guidance Advocates:

# **Degrees of Familiarity**

Divergent interpretations of DM-OUCI-2021-359 resulted in uneven implementation, exposing unclear training and distribution. It was interpreted differently by individuals and schools, which led to significant discrepancies in the administration and comprehension of the policy. While some Guidance Advocates were familiar with its terms, others were just dimly aware of their anticipated responsibilities. This disparity suggests a lack of uniform onboarding, restricted access to formal training, and imprecise policy distribution. Uneven implementation practices were encouraged by the lack of centralized guidance, jeopardizing the integrity of the referral system and underserving certain pupils.

#### **Roles of Diverse Guidance Advocates**

Participants were given duties that overlapped and went beyond their official purview, which led to role ambiguity (Biddle, 1986). Guidance Advocates were frequently given a variety of overlapping responsibilities that went much beyond their official title, such as crisis management and administrative work. Role ambiguity, emotional stress, and a blurring of professional boundaries resulted from this. According to role theory (Biddle, 1986), people may become confused, stressed, and fulfill their roles less well when expectations are unclear or contradict one another. In this situation, the lack of clear role expectations that were appropriate for their non-specialist status often left guidance advocates uncertain about whether and how to respond, especially in mental health instances.

## Visible Changes in Students' Behavior and Difficulty in Assessing

Advocates who lacked clinical expertise found it difficult to decipher behavioral signs and choose the best interventions, exposing knowledge gaps in behavioral health. Despite frequently being the first to observe behavioral changes in pupils, advocates found it difficult to correctly interpret these indicators or choose the best course of action. Many were unsure if a student's behavior called for referral, intervention, or additional observation since they lacked clinical expertise in mental health assessment. This showed that there was a substantial lack of behavioral health literacy, which not only made it more difficult to recognize problems early but also put advocates' confidence and student results at risk of handling delicate matters inappropriately.

#### **Communication and Capacity**

Sensitive discussions with students and families were hampered by a lack of interpersonal training and confidence (Self-Efficacy Theory, Bandura, 1997). Starting delicate talks, particularly with children displaying emotional distress or with parents regarding troubling behaviors, was one of the most often mentioned challenges. During these high-stakes encounters, several guidance advocates expressed feeling nervous, hesitant, and unprepared. According to Bandura's (1997) Self-Efficacy Theory, this insecurity made it more difficult for them to act. Many people felt they were navigating difficult emotional revelations without the means to handle them morally and successfully in the absence of formal training in trauma-informed communication.

## **Immediate Response to Students' Needs**

Due to the high emotional demands and pressing need to handle emergencies, students frequently felt overburdened and lacked adequate institutional support (Fixsen et al., 2005). Often, guidance advocates had to help students in dire circumstances without enough time, money, or institutional support. Rapid judgment choices were necessary in these highly charged and

impromptu settings, yet most advocates said they felt unprepared and unsupported. Their emotional capacity was frequently exceeded by the demands, especially when there was abuse, suicidal thoughts, or extreme worry. According to Implementation Science (Fixsen et al., 2005), when people lack clear protocols and ongoing training, implementation suffers, and so does the credibility of the support system. This shows that systemic support and preparedness have failed.

Guidance Advocates continuously demonstrated incredible personal drive and perseverance in the face of adversity, allowing them to stay in their positions and keep fighting for the mental health of students. Self-Determination Theory (Deci & Ryan, 2000), which highlights the psychological demands of autonomy, relatedness, and purpose as crucial motivators for sustained, self-driven activity, can be used to understand their coping mechanisms and commitment.

Moral obligation and faith as sources of emotional fortitude Many individuals cited their moral values and personal faith as essential sources of inspiration and strength. They saw their jobs as a calling, a greater duty to look out for and protect children who were at risk, rather than just a set of prescribed tasks. They had the emotional fortitude to handle challenging and emotionally taxing circumstances because of their strong sense of purpose and relatedness, which are fundamental components of Self-Determination Theory. This mental compass anchored their work in compassion, dignity, and hope, even in the face of inadequate institutional support.

Accepting Accountability in the Face of Limitations, although they freely admitted that they lacked formal authority and clinical expertise, guidance advocates embraced all the duties associated with their position. Instead of retreating or becoming inactive, they decided to put students' welfare first, frequently going above and beyond the call of duty. This acceptance shows a strong feeling of autonomy, behaving with free choice and internal drive, as well as a readiness to learn from mistakes. Even in the face of uncertainty and institutional shortcomings, their dedication to student care demonstrates how thoroughly their sense of professional identity and social responsibility had been absorbed.

Generous Guidance Without Official Power, Guidance Advocates frequently assumed the role of unofficial mentors and emotional support providers out of necessity. They supported kids by using empathy, presence, and relational trust in the absence of formal counseling credentials or access to therapeutic resources. Their capacity to relate to pupils, give advice, and create a secure environment demonstrates the potent influence of relational support, even when it is provided outside of conventional therapeutic frameworks. Even though it was informal, this mentoring position enabled them to build deep relationships that satisfied the emotional needs of the children and strengthened the advocate's own sense of personal effectiveness and relatedness.

The study also looked at how DM-OUCI-2021-359 influenced their experiences through seminars and training. While some guidance was provided through workshops, these were sporadic, too general, and lacked depth in skills specific to mental health. Developed Professional Skills: Through informal experience and little formal training, participants demonstrated growth in empathy, communication, and basic counseling. But rather than being aided by the system, this progress was mostly self-driven.

#### LIMITATION & FURTHER RESEARCH

Although this study provides insightful information about the real-life experiences of guidance advocates in promoting the mental health of students, it must be noted that it has several limitations.

First, the findings may not be as broadly applicable as they may be due to the study's small and restricted sample, which consisted only of a few chosen Guidance Advocates from the Calamba City Division. Although rich individual experiences were recorded, the phenomenological

investigation's emphasis was on depth rather than breadth, and the results might not accurately represent the realities of guidance advocates in other school divisions, private organizations, or cultural contexts.

Second, rather than clinical instruction, experiential or informal learning had a major role in shaping participants' knowledge and practice of counseling and referral. As a result, their viewpoints might not be as thorough theoretically or as precise as those of qualified mental health specialists. This has the advantage of reflecting facts at the grassroots level, but it also has the drawback of being less clinically generalizable.

Third, self-reported data, which is subjective by nature, was used in the study. Despite their candor, participants' answers might have been swayed by social desirability bias or emotional distress when recalling delicate or challenging situations. This might have impacted some comments' candor or thoroughness.

Fourth, the study was anchored in the context of a specific national policy (DM-OUCI-2021-359). While this provides a focused analysis, it also narrows the scope of policy critique and implementation dynamics, limiting broader applicability to other national frameworks or global models of school-based mental health.

#### **Recommendations for Future Research**

Future research should consider the following avenues to build on these findings and broaden the body of evidence:

- 1. To improve comparative understanding and generalizability, broaden the participant base to include a greater range of roles (such as teachers, principals, and certified guidance counselors), institutional kinds (such as public and private schools), and geographic locations.
- 2. Use a mixed-methods strategy that incorporates quantitative data to support qualitative narratives and increase the evidentiary robustness of conclusions. Examples of such data include student mental health outcomes, training completion metrics, and referral success rates
- 3. Investigate how the roles, self-efficacy, and skill development of guidance advocates change over time through longitudinal studies, particularly in response to ongoing mentoring, training, or policy changes.
- 4. Examine how well guidance advocates' readiness, communication, and competence to handle moral quandaries are improved by capacity-building programs such seminars, school-based action cells, and in-service trainings.
- 5. To inspire evidence-based adjustments that bring policy expectations into line with actual conditions on the ground, evaluate the implementation fidelity of policies such as DM-OUCI-2021-359 by identifying systemic impediments and enablers.
- 6. Finally, to ensure that support systems are not only reactive but also preventive, equitable, and professionally scaffolded, future research should help build school mental health models that are inclusive, sustainable, and context-sensitive.

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