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The Stress Level and Coping Mechanism of Accredited Tour Guides in Bohol Amidst COVID-19

[1] Gerald C. Rodriguez, MPA, MBA-HTM, [2] Rommel S. Caneda, [3] Del Mark A. Cagatin, EdD, JD
[1]Dean, College of Business and Computer Studies, Tagbilaran City College, St Paul University Dumaguete
[2]Tagbilaran City College
[3]President, Tagbilaran City College.

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Email of Corresponding Author: geraldrodriguez2027@gmail.com

Abstract

This study examined the stress levels and coping mechanisms of accredited tour guides in Bohol amidst the COVID-19 pandemic. Anchored on the Transactional Theory of Stress (Lazarus & Folkman, 1984) and the Conservation of Resources Theory (Hobfoll 1989; Hobfoll et al. 1996), the research employed a descriptive correlational design to analyze relationships among demographic profile, stress dimensions, and coping strategies. The respondents were 50 accredited tour guides listed by the Department of Tourism Region 7 and 50 family members who provided observational validation. Data were gathered through modified questionnaires based on the Pandemic Stress Questionnaire by Kujawa, A (2020), the IPHCPS questionnaire by Penedo, F (2020), and the Brief COPE Inventory (Carver, S 1997), and were analyzed using percentage, weighted mean, Spearman's Rho, and Chi-square tests. Findings revealed that tour guides experienced high levels of stress across social, emotional/psychological, financial, educational/professional, and health domains, as confirmed by family members. Problem-focused and active emotional coping were frequently utilized, while avoidant/dysfunctional coping was least used. Significant relationships were identified between stress level and both problem-focused and avoidant/dysfunctional coping, but not with active emotional coping. No significant relationships were found between demographic profile and stress level, and only training showed a significant relationship with avoidant/dysfunctional coping. The study concludes that accredited tour guides faced substantial psychological and socio-economic strain, necessitating structured psychological interventions, counseling programs, resilience training, and alternative livelihood support. The study supports SDG 3 (Good Health and Well-Being), SDG 8 (Decent Work and Economic Growth), and SDG 11 (Sustainable Cities and Communities) by addressing mental health, employment disruption, and tourism resilience. Its sustainability impact lies in strengthening institutional, socio-economic, and community resilience through evidence-based psychological and policy interventions for tourism-dependent communities.

Keywords: Accredited tour guides, Bohol, Coping mechanisms, COVID-19, Descriptive correlational research, Stress level, Tourism industry, Transactional Theory of Stress

1. Introduction

The COVID-19 pandemic disrupted global systems at an unprecedented scale, affecting public health, employment, and socio-economic stability (Richter,2020). Beyond physical health risks, the pandemic intensified psychological distress, including anxiety, depression, confusion, anger, and post-traumatic stress symptoms (Lai et al., 2020; Montemurro, 2020; Usher et al., 2020). Among the most severely affected sectors was tourism, where border closures, travel restrictions, and community quarantines halted operations and displaced workers. In the Philippines, and particularly in Bohol—an eco-cultural tourism zone—tour guides experienced job loss, reduced income, and uncertainty, increasing their vulnerability to social, financial, emotional, and health-related stressors. Given the absence of similar localized studies, this research investigates the stress levels and coping mechanisms of accredited tour guides in Bohol amidst COVID-19, with the goal of informing psychological intervention planning.

1.1 Background of the Study: Stress and Coping Mechanisms among Accredited Tour Guides in Bohol amidst COVID-19

COVID-19 emerged in late 2019 and was declared a global public health emergency in January 2020 (AL Ateeq et al., 2020; World Health Organization, 2020). The outbreak rapidly evolved into a pandemic (Limcaoco et al., 2020), with 28,239,790 confirmed cases worldwide as of September 12, 2020 (World Health Organization, 2020), including 257,863 cases in the Philippines (Philippine Department of Health, 2020). Psychological distress during the pandemic included moderate to severe levels of anxiety, stress, and depression (Wang et al., 2020). Quarantine measures, employment disruptions, and social isolation intensified these effects (American Psychology Association, 2020). Financial hardship, job instability, and "employment shock" contributed to emotional distress and declining well-being (Mimoun, E., Ben Ari,

A., & Margalit, D. 2020; Borland, 2020b & Gittens, 2020; Collie, 2020). The tourism sector was particularly affected. Lockdowns, border closures, and travel bans resulted in widespread unemployment among tourism workers (Rokou, 2020). In the Philippines, at least 4.8 million tourism workers were affected (Inquirer.net, 2020). In Bohol, economic losses reached approximately P10 billion, affecting over 200,000 individuals (Manila Bulletin, 2020). Tour guides, licensed and accredited under R.A. 9593 or the Tourism Act of 2009, play a central role in destination image and tourism service delivery (Huang, 2010; Department of Tourism, 2013). As frontline tourism personnel, they experienced significant employment and income disruption during the pandemic. Given the established link between unemployment and adverse psychological outcomes (American Psychological Association, 2020), examining their stress levels and coping mechanisms is necessary to inform intervention efforts.

1.2 Themes and Insights from Related Literature on Stress, Social Stress, and Coping

Research consistently reports increased psychological distress during the pandemic (Association of Professionals in Infection Control and Epidemiology, 2020; Wang et al., 2020). Social stress theory explains stress as arising from limited access to social and economic resources (Dohrenwend and Dohrenwend, 1969; Avison and Turner, 1988; Pearlin, 1989; Wheaton, 1983; Ilfeld, 1976; Aneshensel, Rutter, and Lachenbruch, 1991). Pandemic-related stressors include reduced social interaction, financial strain, and limited coping outlets (American Psychology Association, 2020; Vinkers et al., 2020). Coping is a multifactorial psychological process involving resilience and adaptive strategies (Middle East Journal of Cancer, 2020). The effectiveness of coping depends on flexibility and contextual adaptation. Problem-focused coping involves active engagement and planning to address stressors (Loren, 1991; Carver and Weintraub, 1989). Emotion-focused coping includes reinterpretation, religion, humor, acceptance, and seeking emotional support (Carver and Weintraub, 1989). Avoidant or dysfunctional coping involves denial, disengagement, and substance use (Carver and Weintraub, 1989; Bauman, 2005). Successful coping varies by individual and context, and interventions such as counseling and stress-reduction programs can guide individuals toward adaptive strategies (Baqutayan, 2015). Filipino responses during quarantine included adherence to health protocols and engagement in physical and emotional self-care (Bawigan et al., 2020; Philippine e-Journal for Applied Research and Development, 2020).

1.3 Local, National, and Global Context: COVID-19 Policies and Tourism Impact in Bohol

The Philippine Constitution of 1987, Article II, Section 15 mandates the protection and promotion of public health. Executive Order No. 168 (2014) created the Inter-Agency Task Force for the Management of Emerging Infectious Diseases. Proclamation No. 226 (March 09, 2020) declared a national public health emergency. Community quarantine measures and travel restrictions were implemented nationwide. In Bohol, Executive Order No. 8 imposed a community quarantine, Executive Order No. 9 suspended classes, and Executive Order No. 10 mandated a 14-day self-quarantine (Philippine Information Agency, 2020). These measures, while necessary for public health protection, halted tourism operations. Bohol, declared an eco-cultural tourism zone under Republic Act No. 9446, relies heavily on ecotourism activities led by local communities (Bohol Tourism, 2019). With tourism inactivity extending for months, tour guides experienced income loss and professional uncertainty (Rokou, 2020; Brito, 2021).

1.4 Theoretical and Conceptual Basis: Transactional Theory of Stress and Conservation of Resources Theory

The Transactional Theory of Stress (Lazarus & Folkman, 1984) conceptualizes stress as arising when environmental demands exceed individual coping resources. It distinguishes between problem-focused and emotion-focused coping strategies (Herman et al. 2020). The Conservation of Resources (COR) Theory (Hobfoll 1989; Hobfoll et al. 1996) posits that stress occurs when individuals experience resource loss, resource threat, or insufficient return on invested resources. Resources include object, condition, personal, and energy resources. Pandemic-induced unemployment and reduced income represent losses of condition and energy resources, potentially compromising mental health and well-being (Hobfoll et al. 1996). These frameworks guide the present study in examining stress dimensions (social, emotional/psychological, financial, educational/professional goals, and health) and coping strategies (problem-focused, active emotional-focused, avoidant/dysfunctional).

1.5 Research Gaps and Rationale

While numerous studies have examined psychological impacts of COVID-19 among the general population and healthcare providers (Barzilay et al., 2020; Wang et al., 2020), limited research has focused specifically on accredited tour guides in local Philippine destinations such as Bohol. Given Bohol's heavy dependence on tourism (Manila Bulletin, 2020; Bohol Tourism, 2019) and the scale of employment disruption (Inquirer.net, 2020), understanding stress levels and coping mechanisms among this workforce is essential. No similar localized study was identified. This study addresses that gap by examining demographic characteristics, stress levels across multiple domains, coping strategies, and their interrelationships, ultimately informing a proposed action plan for psychological intervention.

1.6 Alignment with Relevant Sustainable Development Goals (SDGs)

This study aligns with: SDG 3 – Good Health and Well-Being, as it investigates psychological stress and coping mechanisms among tourism workers and informs mental health interventions. SDG 8 – Decent Work and Economic

Growth, as it examines employment disruption, job instability, and economic stress affecting tour guides. SDG 11 – Sustainable Cities and Communities, particularly in sustaining Bohol's eco-cultural tourism community during crisis. By addressing mental health, employment stability, and tourism resilience, the study supports holistic recovery in the tourism sector.

1.7 Importance of the Study to Multidisciplinary Sustainability

The study contributes to socio-economic sustainability by informing policies that support tourism workers' resilience and livelihood recovery. It advances public health sustainability through evidence-based recommendations for psychological intervention consistent with national health mandates. It supports community sustainability, particularly in eco-tourism-dependent communities in Bohol, by strengthening workforce resilience. Finally, it contributes to institutional and policy sustainability by providing empirical data useful to government agencies, tourism administrators, mental health professionals, and lawmakers in designing responsive programs during and beyond public health crises.

2. Materials and methods

2.1 Research Design

The study employed a descriptive correlational research design to determine the demographic profile, level of stress, and coping mechanisms of accredited tour guides in Bohol during the COVID-19 pandemic. This design enabled the examination of relationships between stress levels, coping mechanisms, and demographic variables. Data were gathered using modified questionnaires distributed online through Google Forms to ensure compliance with health protocols. The collected data were treated statistically to address the research objectives.

2.2 Locale of the Study

The research was conducted in the Province of Bohol, the tenth largest island in the Philippines, located in Central Visayas. The province is known for its ecological, historical, cultural, and natural heritage sites, making tourism a major economic driver. However, the pandemic caused a sharp downturn in the tourism industry, significantly affecting tour guides in the area.

2.3 Respondents of the Study

The respondents were accredited tour guides in Bohol listed by the Department of Tourism Region 7 as of August 2021, totaling 53 members across the province. These guides were affiliated with two organizations: Bohol Island Tour Guides Association of the Philippines (BITGAP), Inc., headed by Mr. Gerardo Cuadrasal Jr., and KaBoG (Kahugpungan sa mga Bol'anong Guides), headed by Ms. Doris D. Obena. Although all members were invited to participate, 50 guides completed the survey. To ensure a check-and-balance mechanism, one family member of each tour guide, aged 18 years or above, also answered a questionnaire assessing the stress level of the tour guide based on observation.

2.4 Sample and Sampling Procedure

The study targeted all 53 accredited tour guides in Bohol as of August 2021. The researcher coordinated with the Department of Tourism Region 7 to obtain the official list and sought permission from the two tour guide associations to distribute the survey. All members of the associations were invited to participate, resulting in 50 completed responses. The inclusion of family members as observers further supported the validation of stress-level assessments.

2.5 Research Instrument

Three sets of questionnaires were used: one to measure the tour guides' stress level, another to assess their coping mechanisms, and a third for family members' observations regarding stress levels. The instruments collected information on demographic profile, stress dimensions, and coping strategies through Google Forms. To ensure validity, pilot testing was conducted with 30 hospitality workers who had similar work responsibilities to tour guides. The modified questionnaires were reviewed by the research adviser and critic for corrections and revisions. The stress-level questionnaire was based on modified items from the Pandemic Stress Questionnaire by Kujawa, A (2020) and the Impact of the Pandemic and HRQoL in Cancer Patients and Survivors (IPHCPS) questionnaire by Penedo, F (2020). The coping mechanisms instrument was based on the standardized Brief Coping Inventory (Carver, S 1997). The Brief COPE Inventory consists of 28 items using a four-point scale to measure the extent to which respondents utilized coping strategies. For stress measurement, a four-point scale was used ranging from very low to very high. For coping mechanisms, the scale ranged from never to always. These responses served as the basis for statistical analysis.

2.6 Data Gathering Procedure

Permission to conduct the study was obtained from the Bohol Island State University-Main Campus administration. Coordination was made with the Department of Tourism Region 7 to secure the official list of accredited tour guides. Letters of permission were sent to KaBoG and BITGAP to facilitate distribution of the questionnaires. Upon approval, questionnaires were distributed online via email, messenger, and text messages. Respondents were informed of the purpose

of the study prior to answering the survey. They were given sufficient time to complete the forms. After collection, the data were tabulated, analyzed, and interpreted.

2.7 Data Analysis Techniques

The gathered data were collated, computed, tabulated, and interpreted using appropriate statistical tools. Percentages were used to present the demographic profile of respondents. Weighted mean was applied to determine the level of stress and coping mechanisms. Spearman's Rho was used to determine the significant relationship between stress levels and coping mechanisms because the data were not normally distributed at the 0.05 level of significance. The Chi-square test and Spearman's Rho were also used to examine relationships between demographic profile and stress level, and between demographic profile and coping mechanisms. Statistical significance was interpreted at the 0.05 level, where results with p-values greater than 0.05 were considered insignificant and those less than 0.05 were considered significant.

3. Results and Discussion

3.1 Stress Levels of Accredited Tour Guides amidst COVID-19

3.1.1 Demographic Profile of Accredited Tour Guides

The findings show that most respondents were between 42–48 years old, followed by those aged 36–41, with very few aged 56–62. The majority were female. Most respondents held a Bachelor's degree in tourism-related courses, while some were college graduates in non-tourism fields. Only one had a doctorate degree. Most had attended Department of Tourism seminars and related trainings. A large proportion had more than five years of experience, and most were married. These results indicate that accredited tour guides in Bohol are predominantly middle-aged, experienced, tourism-educated, and female. The dominance of female tour guides aligns with Mahdi (2016), who emphasized that tour guiding reflects traits commonly associated with the feminine personality. The age distribution also supports Ng & Feldman (2010), who noted that age is positively related to job satisfaction, suggesting that middle adulthood may be associated with stronger work commitment and stability.

3.1.2 Social Stress

The findings reveal that social stress among tour guides was high, with both tour guides and their family members reporting similar high levels. The highest stressor involved the cancellation or rescheduling of important events, tours, and travel-related activities due to COVID-19 restrictions. This finding supports Social Stress Theory, which explains that social circumstances can induce stress among members of a social group (Aneshensel, Rutter, and Lachenbruch, 1991). Border closures and social distancing measures limited tour guides' work and social engagement, contributing to elevated social stress during the pandemic.

3.1.3 Emotional/Psychological Stress

The results indicate that emotional or psychological stress was high among accredited tour guides, as reported by both the respondents and their family members. This confirms findings that psychological and social consequences during the pandemic were influenced by fears of illness and uncertainty (American Psychology Association, 2020). It also affirms that the initial stage of COVID-19 generated moderate to severe psychological impacts and feelings of stress, anxiety, and depression (Association of Professionals in Infection Control and Epidemiology, 2020).

3.1.4 Financial Stress

Financial stress was high among tour guides, with family members rating certain items as very high, particularly job loss, worry about financial support for the family, and concern over savings. This supports the Conservation of Resources (COR) Theory (Hobfoll et al. 1996), which states that stress occurs when individuals experience loss of resources such as employment and income. The pandemic disrupted tourism activities, resulting in resource loss and heightened financial strain, especially among married respondents with family responsibilities.

3.1.5 Educational or Professional Goals Stress

The findings show that stress related to educational or professional goals was high, with very high stress reported regarding difficulty or inability to perform work as a tour guide. Although tour guides typically strive to enhance service quality and professionalism (Ap & Wong, 2001; Heung, 2008; Mak, Wong, & Chang, 2010), pandemic restrictions limited opportunities for professional growth. Workforce stress increased during COVID-19, as employment instability and uncertainty intensified anxieties.

3.1.6 Health-Related Stress

Health-related stress was also high among tour guides, with consistent assessments from family members. These findings align with research showing that Filipinos feared for their health and safety during the pandemic and complied with health protocols (Bawigan et al., 2020). The heightened concern for health reflects broader public health anxieties during COVID-19. Overall, the composite stress level among accredited tour guides was high. The tourism industry experienced

unprecedented disruption due to lockdowns, travel bans, and closures, significantly affecting tour guides' income and employment (Rokou, 2020).

3.2 Coping Mechanisms of Accredited Tour Guides

3.2.1 Problem-Focused Coping

The results show that tour guides often used problem-focused coping strategies, with taking action to improve the situation rated highest. The composite mean indicated frequent use of this coping style. Problem-focused coping involves actively addressing the source of stress (Tomprou et al., 2015; Hershcovis et al., 2017). The findings suggest that tour guides attempted to manage stress by planning, seeking solutions, and taking constructive steps to mitigate challenges.

3.2.2 Active Emotional-Focused Coping

Active emotional-focused coping was also frequently used. Respondents often tried to view situations positively, accept reality, look for positive aspects, and adapt. This aligns with Bauman (2005), who explained that emotional engagement and cognitive reframing help reduce tension by allowing individuals to reinterpret stressors. Tour guides relied on adaptive emotional strategies to cope with pandemic-related stress.

3.2.3 Avoidant/Dysfunctional Coping

Avoidant or dysfunctional coping strategies were the least used, with substance use and disengagement rated very low. Dysfunctional coping often involves denial or escape, which may provide temporary relief but can harm well-being. The low usage suggests that tour guides maintained a generally positive and proactive outlook. As noted, stress and coping are interrelated, and appropriate coping depends on context (Baqutayan, 2015). Overall, tour guides often utilized coping mechanisms during the pandemic, indicating that while stress levels were high, adaptive coping strategies were frequently employed.

3.3 Relationship Between Stress Level and Coping Mechanisms

The results show a significant relationship between stress level and problem-focused coping, and between stress level and avoidant/dysfunctional coping. However, there was no significant relationship between stress level and active emotional-focused coping. Problem-focused coping aims to eliminate or reduce stressors (Tomprou et al., 2015; Hershcovis et al., 2017), explaining its significant association with stress levels. Avoidant coping, although sometimes unconscious, may temporarily relieve distress but can negatively affect well-being. Stress and coping strategies vary depending on individual needs, and counseling interventions may guide individuals toward appropriate coping methods (Baqutayan, 2015).

3.4 Relationship Between Demographic Profile and Stress Level

The findings reveal no significant relationship between demographic variables and stress level. Age, gender, educational attainment, training, years of experience, and marital status were not significantly associated with stress. This suggests that high stress was experienced regardless of demographic characteristics. While Rodriguez, S. et al, 2020 reported that stress levels varied according to demographic profile during confinement, the present findings indicate that pandemic stress was widespread across groups.

3.5 Relationship Between Demographic Profile and Coping Mechanisms

3.5.1 Demographic Profile and Problem-Focused Coping

There was no significant relationship between demographic variables and problem-focused coping. This suggests that demographic factors did not influence the use of active coping strategies, as stress experiences varied individually during the pandemic.

3.5.2 Demographic Profile and Active Emotional-Focused Coping

No significant relationship was found between demographic profile and active emotional-focused coping. Although some studies found gender differences in coping strategies (Allen & Holder, 2013; Chen, Wong, Ran, & Gilson, 2009; Persaud & Persaud,2015), this study did not identify significant differences across demographic variables.

3.5.3 Demographic Profile and Avoidant/Dysfunctional Coping

Most demographic variables were not significantly related to avoidant/dysfunctional coping, except training, which showed a significant relationship. Training may influence coping preferences by building confidence and shaping stress responses. However, Lazarus (1984) emphasized that coping effectiveness depends on the appropriateness of strategies to situational demands rather than demographic characteristics. Additionally, focusing on and venting emotions without adaptive behavior may prolong stress, and behavioral disengagement may halt effort while leaving pressure unresolved (Carver et al., 1989).

4. Conclusion & Recommendations

The study concluded that accredited tour guides in Bohol experienced a high level of stress during the COVID-19 pandemic across social, emotional/psychological, financial, educational/professional, and health dimensions, as validated by their family members. The majority of respondents were middle-aged, predominantly female, tourism graduates, tenured in service, and married. Despite variations in demographic profile, stress levels remained consistently high. Accredited tour guides frequently utilized coping mechanisms, particularly problem-focused and active emotional coping, while avoidant/dysfunctional coping was least used. Significant relationships were found between stress level and both problem-focused and avoidant/dysfunctional coping, whereas active emotional coping showed no significant relationship with stress. Demographic variables showed no significant relationship with stress levels and most coping strategies, except for training in relation to avoidant/dysfunctional coping.

It is recommended that the Department of Tourism and the Local Government Unit conduct thorough psychological assessments with the assistance of professional psychologists and counseling centers to manage the stress experienced by accredited tour guides. The establishment of structured counseling programs and a dedicated guidance or counseling center is encouraged to provide continuous psychological support. Family orientation or webinars on mental health awareness should be implemented to strengthen support systems. Considering the high financial stress, coordination between the Department of Tourism and the Local Government Unit to create alternative employment or livelihood opportunities is advised. Additional professional training and resilience-building programs should be conducted to enhance coping capacity. Future researchers are encouraged to undertake follow-up studies to validate and expand the findings using appropriate statistical methods.

The study was limited to accredited tour guides in Bohol during the COVID-19 pandemic, with only 50 tour guides and 50 family members participating due to pandemic-related constraints. Data collection was conducted through online questionnaires, which may have limited participation and depth of responses. Consequently, the findings are confined to the specific population, setting, and time frame of the study and may not be generalized beyond these conditions.

Compliance with ethical standards

This study was conducted in accordance with institutional requirements and applicable research guidelines. Permission to conduct the research was obtained from the appropriate university administration, and coordination was undertaken with relevant government agencies and professional associations prior to data collection. Participants were informed of the purpose of the study before completing the online questionnaires, and participation was voluntary. The author declares that there is no conflict of interest.

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