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Research Article

Within the Realms of Uncertainties: Phenomenologizing the Lived Experiences of Covid-19 Survivors

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ABSTRACT

The COVID-19 pandemic has undoubtedly been triggering mental health issues. One of the worst scenarios is to become severely ill due to the COVID-19 virus, which may put someone in a life-threatening situation that may be traumatic and could affect one's psychological well-being. This study explored the lived experiences of COVID-19 survivors before, during, and after they were infected with the COVID-19 virus using a qualitative approach, particularly transcendental phenomenology. Data was collected among 10 COVID-19 survivors through face-to-face interviews and was analyzed using Moustakas' transcendental phenomenology and analysis procedures. In the exploration of the lived experiences of the COVID-19 survivors, four themes have emerged: 1) surfacing psychological distress, 2) extreme psychological distress, 3) realizing the value of life, and 4) facing the challenges of discrimination. Two overarching themes have emerged: 1) embracing optimism and 2) boosting faith and spirituality. The remarkable outcome of this study was the development of an onion model of the lived experiences of COVID-19 survivors, which presents the connection of their experiences before, during, and after they were infected with the COVID-19 virus. It describes that the COVID-19 survivors, although they experienced life-threatening situations, remain hopeful with their outlook in life, believing that the Divine will not forsake them. It is recommended that COVID-19 survivors may undergo appropriate psychological intervention that could help them get away from the possibility of having future mental health issues.

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1. INTRODUCTION

The sudden emergence of the Coronavirus Disease 2019 (COVID-19) pandemic startled all walks of life worldwide. People are unprepared for this pandemic and never imagined its impact on their lives. Many had been infected and survived, but some unfortunately lost their lives.

At the onset, people were only concerned about how they would be able to conquer the challenges of not being infected. However, this pandemic outbreak resulted in the manifestation of anxiety and induced fear-related behaviors in individuals (Serafini *et al.*, 2020). The effect of the pandemic on the lives of many people heightened their feelings of fear, stress, and anxiety. The phenomenon of social distancing brought on by the coronavirus disease (COVID-19) pandemic has caused severe disruption in the daily lives of many people around the globe (Lee, 2020; Zhang, 2020; Aqeel *et al.*, 2020). Also, lockdowns and quarantines have created stress and anxiety, along with other predicaments for the general population (Baloch *et al.*, 2021). There were even reported manifestations of distress, anxiety, depression, and insomnia in general populations (Pappa *et al.*, 2020) due to this pandemic.

Hence, the mental health issues of infected individuals started to reverberate around the globe. Aside from physical symptoms, mental health and prospective psychological distress have become a concern of individuals, especially those who have tested positive for the COVID-19 virus. Gordon *et al.* (2020) pointed out that the potential psychological and mental health impacts of the COVID-19 pandemic should be taken seriously. Increasing death and infection of a family member or friend could worsen the overall mental health and well-being of the community (Ahmed, 2020). Many studies have been conducted in line with the COVID-19 pandemic and its effect on individuals' mental health. For example, fear and isolation are experienced by those who are sick or quarantined, which leads to the breakdown of social support structures, disruption of everyday life, and mental health impacts (Usher *et al.*, 2020). Additionally, students, employees, and communities experience feelings of bereavement, hopelessness, grief, and an intense lack of life purpose brought about by the pandemic (Levin, 2019).

This pandemic seems here to stay for a long time. In the Philippines, the second wave of this pandemic occurred on the 19th day of May 2021. According to Dr. Jomar Rabajante of UP COVID-19 Pandemic Response Team, the Philippines faces a "second wave" pandemic as the coronavirus infection is rising rapidly. Based on the epidemic curve, the country tallied its highest number of active cases, 86,200. It surpassed the August 15 record of over 83,000 active infections. Thus, current infections stood at over 677,000, with more than 578,000 recoveries and nearly 13,000 fatalities (ABS-CBN, 2021). This surge has also affected the Province of Ifugao. According to PIA Ifugao (2022), the province reported 39,939 new COVID-19 possible cases on Sunday, May 8, 2022. Ifugao now has a cumulative total of 11,766 COVID-19 confirmed cases, of which 11,561 recovered and 203 COVID-19-related deaths. This prompted the Ifugao authorities to remind the community to observe proper health protocols continuously.

If the thought of being infected by the virus has distressed

individuals, how much more if they have already tested positive for it? Studies revealed that patients who tested positive for COVID-19 may encounter fear, resulting in psychological distress (MHEM *et al.*, 2021). For example, in the study conducted by Quian (2020), patients reported negative feelings, including helplessness, guilt, and fear. Similarly, patients experienced frequent time awakenings and sweating, which were associated with palpitations and restlessness. This triggers negative thoughts about the patient's well-being, resulting in self-blaming (D'Urso *et al.*, 2020).

On the other hand, COVID-19 patients experience being too irritable and distressed, and some are diagnosed with Acute Stress Reactions (Sahoo *et al.*, 2020). Additionally, patients felt unlikely to recover from a COVID-19 infection, resulting in anger and relationship issues between the treating team and patients (Abad, 2021). One of the scenarios that could also affect the mental health of individuals is the aftermath of having successfully conquered the virus. People may have different regard for them, as prejudice and discrimination against them may occur. As such, recovered patients experienced verbal abuse or physical abuse and were denied housing, education, and employment. During gatherings, they also experience avoidance; even their friends and family jump backward when introduced as COVID-19 survivors (Gary, 2020). Exploring the lived experiences of individuals before, during, and after they test positive for the coronavirus is essential because it may hurt them, affecting their everyday lives. This traumatic event in their lives may also have an effect that may manifest in the future. Ifugao, although they are known to be resilient people, may also have been affected by this phenomenon because mental health and psychological distress know no location, gender, age, or culture.

Also, the province of Ifugao has only one hospital accommodating patients infected with the COVID-19 virus. Some patients even go to nearby provinces with more advanced medical facilities, especially those with severe cases. This situation could also add more stress, fear, and anxiety among Ifugao people, considering that when they get infected and become severely ill, they might not be accommodated nor attended well in the said hospital, thus the need to travel.

With this scenario, this study aimed to explore the lived experiences of COVID-19 survivors before, during, and after they were infected with the COVID-19 virus. The study's findings are expected to provide a great deal of information that could aid in understanding their psychological well-being and mental health status, which may be used for possible intervention programs for those whom the COVID-19 virus has infected. This study used the following central research question to substantiate the development of this paper: What are the lived experiences of COVID-19 survivors before, during, and after they were infected with the COVID-19 virus?

2. LITERATURE REVIEW

The COVID-19 pandemic has profoundly altered the lived experiences of individuals worldwide, leading to a multitude of psychological, social, and economic repercussions. This literature review aims to synthesize various research findings that explore the phenomenology of COVID-19 survivors,



focusing on the emotional and psychological implications of their experiences. Examining the lived realities of different demographics, including adolescents, small-medium enterprise (SME) owners, cancer survivors, and intimate partner violence (IPV) survivors, this review highlights the complexities of navigating life during and after the pandemic. Additionally, it identifies knowledge gaps and suggests potential avenues for future research.

2.1. Psychological implications of COVID-19

Research has highlighted that the pandemic has significantly impacted the mental health of various populations. A study focusing on adolescents revealed that older individuals in this demographic faced unexpected anxiety linked to the uncertainties posed by the pandemic (Smirni *et al.*, 2020). This anxiety not only affected their emotional well-being but also shaped their identities, emphasizing the necessity of effective communication and psychological support tailored to their unique experiences as COVID-19 survivors.

Similarly, the lived experiences of cancer survivors during the pandemic underscore the psychological toll of COVID-19. Participants reported heightened worries about treatment delays and the risk of infection, illuminating the emotional distress associated with their pre-existing health vulnerabilities (Lee *et al.*, 2021). Such findings reinforce the importance of recognizing the mental health challenges faced by individuals with chronic conditions during crises, contributing to a deeper understanding of their lived experiences.

2.2. Economic and emotional survival

The phenomenology of SME owners during the pandemic provides a critical lens through which to understand the intersection of economic and emotional survival. Qualitative interviews have revealed the profound psychological burdens that business owners faced, including financial instability and existential threats to their livelihoods (Al-Fadly, 2020). This aligns with the broader theme of phenomenologizing experiences, highlighting the urgent need for targeted support and understanding of the challenges faced by entrepreneurs during such uncertain times.

2.3. The experiences of vulnerable populations

The pandemic has disproportionately affected vulnerable populations, including survivors of IPV. Research indicates that the challenges faced by these individuals have been exacerbated during COVID-19, with increased risks of violence and limited access to resources (Ravi *et al.*, 2021). The qualitative insights gathered from IPV survivors illustrate the dual nature of isolation, where some experienced both negative and positive outcomes, reflecting the complex realities of their lived experiences (Olufadewa *et al.*, 2020). Such studies emphasize the necessity of tailored support services that address the specific needs of IPV survivors during crises.

Furthermore, a study investigating the experiences of caregivers for stroke patients during the pandemic revealed the additional strains placed on these individuals (Sutter-Leve *et al.*, 2020). The findings highlight the emotional toll of caregiving in a COVID-19 environment, thus contributing to the discourse

on the lived experiences of those supporting vulnerable populations during the pandemic.

2.4. The complexity of recovery

The recovery journey for COVID-19 survivors, particularly those with post-acute sequelae of SARS-CoV-2 (PASC), has been another focal point in the literature. Participants in qualitative studies have described the profound impact of cognitive complaints and fatigue on their daily lives, further complicating their recovery (Chasco *et al.*, 2022). This aligns with the need to adopt a holistic approach in supporting survivors, addressing both physical and mental health needs to facilitate a more comprehensive recovery process.

Despite the growing body of literature surrounding the lived experiences of COVID-19 survivors, several knowledge gaps remain. Future research should aim to explore the long-term psychological effects of the pandemic on various demographics, particularly among marginalized groups. Additionally, there is a need for studies that examine the efficacy of targeted support interventions designed to address the unique challenges faced by different survivor populations.

Moreover, further investigation is warranted into the intersectionality of experiences among COVID-19 survivors, particularly how factors such as socioeconomic status, race, and gender influence their lived realities. Understanding these complexities will be crucial in developing effective policies and programs that support the diverse needs of survivors in the aftermath of the pandemic.

The COVID-19 pandemic has reshaped the lived experiences of individuals across various demographics, highlighting the psychological, social, and economic challenges they face. Exploring these experiences, researchers can gain a deeper understanding of the complexities of survival during such unprecedented times. This literature review underscores the importance of addressing mental health needs and providing tailored support for diverse populations, ultimately contributing to a more nuanced understanding of the impact of COVID-19 on survivors.

3. METHODOLOGY

3.1. Research design

This study utilized a qualitative approach, particularly a transcendental phenomenology design, to explore the lived experiences of COVID-19 survivors in Ifugao Province before, during, and after they were infected with the COVID-19 virus. This design, which was first proposed by Husserl (1970), allows researchers to focus on the individual experience while also identifying the larger context similar among participants (Hays & Singh, 2012). Additionally, the transcendental phenomenology of Moustakas (1994) focused less on the researcher's interpretations and more on a description of the participants' experiences (Creswell, 2013).

3.2. Context and participants

The participants in this study were selected using purposeful sampling to allow for the collection of information that could provide about the phenomenon (Hays & Singh, 2012). The criteria set were: 1) the participants must be COVID-19



survivors from Ifugao Province; 2) the participants must have experienced symptoms of COVID-19 infection from mild to severe; and 3) the participants must have been hospitalized or placed under isolation facilities. A total of ten (10) COVID-19 survivors participated in the study. The number of participants is within the recommendation of Polkinghorne (1989) that 5 to 25 individuals who have all experienced the phenomenon could be interviewed (Creswell, 2013). There are two (2) male participants and eight (8) female participants aged from 20 to 58 years old.

3.3. Instrumentation

To address the research's central question: "What are the lived experiences of COVID-19 survivors before, during, and after they were infected with the COVID-19 virus?" an interview protocol that consisted of three major questions with sub-questions was validated by three research experts. Moustakas' (1994) transcendental phenomenology suggestions and current research were used to design interview questions (Howard, 2008; Howard & Whitaker, 2011). The participants were encouraged to respond to the questions using English, Filipino, or vernacular language in order for them to feel comfortable and better express themselves.

3.4. Data collection and analysis

Despite the limitations in physical and social interactions brought about by the COVID-19 pandemic, data was collected through face-to-face interviews. All the interviews were conducted one-on-one and audio recorded, which lasted approximately 30-45 minutes. The participants' voluntary participation was sought before the interview, and they were informed of their right to withdraw from the study at any moment if they so desired via informed consent. The informed consent provided enough information and reassurance about their participation in the study, the advantages and risks, and

confidentiality. In compliance with the 2012 Data Privacy Act of the Philippines (Republic Act 10173), their privacy and anonymity were also respected.

The collected data were analyzed using the approach of Moustakas (1994) as stated in the book of Creswell (2013), which includes 1) making a list of important statements from the interview, 2) taking the important assertions and organizing them into themes, which are more significant pieces of information; 3) writing a description of what and how the study participants went through with the phenomena (textual and structural descriptions), and 4) creating a composite description of the phenomena using both the textual and structural descriptions. This approach was chosen because of its appropriateness in exploring the lived experiences of COVID-19 survivors before, during, and after they were infected with the COVID-19 virus.

4. RESULTS AND DISCUSSION

This study aimed to explore the lived experiences of COVID-19 survivors before, during, and after they were infected with the virus to understand better how these experiences affected their mental health and psychological well-being. Data were analyzed using Moustakas's approach (1994), as stated in Creswell's book (2013), to develop themes that explain the participants' lived experiences.

Remarkably, as a result of face-to-face interviews with the COVID-19 survivors, this study developed the onion model of the lived experiences of COVID-19 survivors. The model represented four themes, which could be located in the inner layer: 1) surfacing psychological distress, 2) experiencing extreme psychological distress, 3) realizing the value of life, and facing the challenges of discrimination. These themes have two overarching themes found in the model's outer layer: 1) embracing optimism and 2) boosting faith and spirituality.

Table 1. The theme on Lived Experiences of COVID-19 Survivors Before Infection

Theme	Sample Quotations
Surfacing Psychological Distress	<p><i>"We were stressed, and we felt that we might be infected already because it is already near. It is already in our neighborhood, in our community."</i> (P5)</p> <p><i>"I was afraid that I might be infected, but I just put myself through prayer. I asked God to cover and protect us from this COVID-19 virus."</i> (P8)</p> <p><i>"Sometimes I am afraid because we do not know where is the COVID-19? So, there is a fear."</i> (P7)</p> <p><i>"I have fear and worry as I go to my workplace because we have work onsite aside from work from home."</i> (P4)</p> <p><i>"The COVID-19 pandemic has brought numerous changes to my life, including uncertainty, changing daily routines, school-related pressure, and social isolation. I am really concerned about becoming sick, how long the pandemic will endure, my parent's jobs will be affected, and what the future holds."</i> (P1)</p> <p><i>"I was really worried and scared because the cause of my cousin's death was COVID-19 virus, so I was nervous and still praying that my family will not be infected."</i> (P8)</p>

The first theme is surfacing psychological distress. This theme emerged due to the participants' overall experiences of the pandemic before getting infected. Commonly, the participants had experienced stress, fear, and anxiety, which collectively are associated with psychological distress. However, it may be less

intense since they have not yet been infected with the virus. Hence, the psychological distress is just surfacing.

The thought that the COVID-19 virus might be everywhere and knowing that some of their relatives, friends, or neighbors were becoming ill elicited stress among the participants.



Likewise, the participants were starting to experience fear because they were concerned about the possibility of being infected by the virus.

Similarly, anxiety was developing among participants since they had apprehension about what was happening around them and the thought that they, too, might be infected.

The first theme that emerged before the participants were infected with the COVID-19 virus was surfacing psychological distress. This represents the evolving stress, fear, and anxiety of the participants as they knew that COVID-19 was everywhere and some of their relatives, friends, and neighbors had already been infected. Additionally, the uncertainty of when the pandemic and forced isolation would end gives them some distress. This observation was confirmed by Song (2021) when he mentioned that this pandemic not only brought crises to the daily lives of people but also psychological distress to the population, which demands concern for a solution. This

experience seems normal in this situation, considering that the world is in an odd circumstance due to the pandemic. However, when not dealt with properly, this may lead to a more serious psychological or mental health problem. Many research on disease and risk perception have shown that the greater the health hazards, the more concerned people are. These people worry more and suffer from increased psychological distress, anxiety, and depression because of the significant health risks and lack of means to prevent or cure it (Vos, 2016). Likewise, the findings of Coelho *et al.* (2020) confirmed that the COVID-19 pandemic induced a mysterious threat that aroused feelings of fear in people. This suggests that proper dissemination of the COVID-19 status is relevant to inform the public whether transmissions among the community are going high or low. Hence, it can help remind people to stay vigilant and observe minimum health and safety protocols. In this way, fear and anxiety may somehow be reduced.

Table 2. The theme on Lived Experiences of COVID-19 Survivors During the Infection

Theme	Sample Quotations
Experiencing Extreme Psychological Distress	<p><i>"I was very shocked when I received the call from the doctor confirming that my RTPCR test was positive. My entire body felt chilled; it was cold, and I immediately felt cold because of that news; I was so exhausted and depressed after receiving the call. After that I sobbed, I really cried; I was so afraid, I didn't know what to do, what to do next. I was terrified."</i> (P1)</p> <p><i>"I lost my sense of smell and taste, so I knew even before the result came out that I was positive for the COVID-19 virus. I was scared because I had a weak lung ever since I was a kid. I was concerned for my family because I also don't want them to get infected."</i> (P6)</p> <p><i>"I'm not happy when the doctor told me that I am positive for COVID-19 virus. I was afraid about it."</i> (P8)</p> <p><i>"The first time I felt something different with my body, especially when I lost my sense of taste and smell, that was when I became certain that I had caught the virus. I was anxious and concerned, so I told the people in my household and isolated myself right away."</i> (P9)</p> <p><i>"It was not easy for me to experience such virus because my life was in 50-50 situation, that I might die that time."</i></p> <p>In addition, their experiences while on isolation gave them extreme fear and anxiety, which further heightened their psychological distress.</p> <p><i>"I had felt fear because the place is very eerie. I realized that many people have died here and as time passed by, we were having more companions in the room and that also gave me fear."</i> (P4)</p> <p><i>"It was really challenging especially that you don't have your support system with you. You are confined in a room alone and there's no one to talk to."</i> (P6)</p>

During the time that the participants had already been infected with the COVID-19 virus, their feelings of stress, fear, and anxiety then became more intense - knowing that their condition would lead them to a life-threatening situation. Thus, extreme psychological distress emerged as the central theme during COVID-19 virus infection. In fact, from the moment that the participants had experienced symptoms of the COVID-19 virus and confirmed that they were positive, they already felt intense distress.

The participant's distress got even more extreme as they experienced the penetrating effects of the COVID-19 virus.

The second theme - experiencing extreme psychological distress emerged during the time that the COVID-19 virus had already infected the participants. It is in this situation that they experience extreme psychological distress due to fear of dying. Anyone who is in a life-threatening condition would feel intense anxiety, especially in this situation where there is no

cure yet for this disease—the thought of whether they would be healed or not puts them in profound psychological distress. In the studies of Banzett *et al.* (2020) and Whitehead (2005), patients have a fear of dying because of their deteriorating conditions. This is similar to the findings of Son *et al.* (2020), wherein the patients felt anxiety and fear of death. Jesmi *et al.* (2020) also reported in their study that the fear of death among COVID-19 patients gives them psychological distress. This is understandable, considering there is no specific cure for the virus. However, since the participants were exposed to a traumatic experience, this may lead to a possible psychological strain like post-traumatic stress. As such, it was suggested in the study of Sahoo *et al.* (2020) that a mental health professional should screen patients infected with COVID-19 for any underlying mental health issues to prevent the apparent exacerbation of the circumstances.

Additionally, it is evident that the participants, particularly



those aged ranges from 40 and above in the isolation ward, are scared and further aggravated feelings of intense fear and anxiety because they witness the death of infected patients inside their isolation ward and, at the same time, it was their first time to be admitted in such setting. Research findings by Vrach and Tomar, 2020 in the US, Europe, and China showed that social isolation of older adult individuals causes mood swings and threats to emotional, behavioral, and physical that result in higher cortisol levels attributed to extreme stress. Ellepola *et al.* (2020) also found similar findings that show the psychological impact of isolation on patients infected with the COVID-19 virus. Indeed, it was petrifying to stay alone in an isolated place, knowing the fact that many individuals died there.

Although some participants had companions inside the room, they were all infected patients. Thus, the isolation limits the participants' communication with their loved ones. From that situation, participants might lose psychological

support from their families, leading to the progress of severe anxiety. It was revealed in the study of Moradi (2020) that the combination of fear, anxiety, and distress in such situations can lead to depression, which is a prevalent concern since the person lacks social contact. Isolation deprives sufferers of obtaining psychological support from family and friends, which exacerbates stress and psychological trauma. Infected individuals suffered from psychological distress and emotional numbness while they waited for the crisis to resolve.

In this regard, the health professionals assigned in isolation or the quarantine area should think of a realistic program that can help the isolated individuals at least feel the moral support of their loved ones through platforms that include video calls or sending of letters so that it will help in alleviating the psychological distressed felt by the patients. Isolation wards help stop the virus transfer, where infected people get cured of their physical symptoms. However, it should also be a place that offers psychological support for the patients.

Table 3. The theme on lived experiences of COVID-19 survivors after infection

Themes	Sample Quotations
Realizing the Value of Life	<p><i>"My thought after I recovered the virus was that life is so precious. We should not waste it because the chance that God gave me after being discharged in the hospital was really the biggest chance that gave me renewed life. So, life is so precious, the material things in life did not even matter, instead health matters."</i> (P4)</p> <p><i>"When I recovered from the virus, I realize the importance of having a healthy life. I felt more focus on good things and to always observe proper health protocols."</i> (P1)</p> <p><i>"I realized the importance of having a good physical and mental health, it must be the priority, instead of arguing with people whom do not really give value to you."</i> (P2)</p> <p><i>"I was more grateful with my life. There were some things that I took for granted and my experience with Covid made me more appreciative of the things that I have. I feel blessed to have this life and will continue to treasure it."</i> (P6)</p> <p><i>"I viewed life in different perspective and I decided to move forward with no fear because we only live once."</i> (P6)</p> <p><i>"I treat it as my second life because I thought that when we were on the way my life is 50 50."</i> (P5)</p> <p><i>"It is my second life, in my first life I was never admitted in the hospital so considered it as my second life because some of my co-teachers were now dead but as for me, I survived."</i> (P3)</p> <p><i>"My experience taught me to value the more essential things in persons that I have in my life."</i> (P4)</p>
Facing the Challenges of Discrimination	<p><i>"Some people still think that you have Covid-19 virus even if you are already cured so they distance themselves from you."</i> (P6)</p> <p><i>"The challenges were, If I can go back to work, what will be the reactions of my co-workers, the discrimination and judgement of other people."</i> (P2)</p> <p><i>"After the illness there are people who ignore you."</i> (P1)</p> <p><i>"People usually critique me and they would advise me not to mingle or engage with other people."</i> (P10)</p>

When the participants were released from the hospital and their quarantine had been completed, which indicates that they were already COVID-19 virus-free, many realizations emerged. However, the emerging theme was the value of life. Indeed, the participants changed their perspective on life. They realized how important physical and mental health is.

Moreover, the participants became more appreciative and grateful for the second life they have had. This made them think differently in a positive manner, and such actions reflect how they value their life.

This theme is rooted in the behaviors of the people around them due to the belief that the participants might infect them. This belief triggers a feeling of discrimination and rejection of the participants. Some people think they could still be infected even if they had recovered.

The third theme evoked participants' realization that they should value their lives after being healed from the COVID-19 virus infection. In doing so, the participants saw physical and mental health as equally valuable. Thus, they learned to become more cautious about themselves, others, and their environment



so they would not be infected again. They believed that having recovered from the disease was a second chance to live their lives.

Participants viewed their illness as a significant crisis in their lives. The experience slowed down their hasty lives to pause and to reflect on the intense situation they had undergone. On top of everything that happened to them, participants said they would value everything they have, big or small because life is precious.

The participants learned that they should take care of their bodies because it is the only place they have, and no one will replace it. They also said they will not cling to material things but focus on the good things, spend more time with their families, and exercise more to achieve good physical and mental health. Shaban *et al.* (2020) mentioned in their study that patients who recovered from the virus changed their behavior and diverted their attention to all the good things happening to them. Patients who engage in pessimism become optimistic. Maintaining physical and mental health is their priority. Notably, the participants mentioned that after they recovered, they realized that doing good things was the most significant lesson they acquired from the experiences. Furthermore, the participants expressed a sense of gratitude for the second life they had and swore to treasure it all the more.

Along with the realization that participants value their lives, a challenge against discrimination emerged as the fourth theme after being infected with the COVID-19 virus. Knowing that the virus is unseen and could be everywhere, people are

becoming cautious to the extent that if one has been previously infected, they tend to avoid him or her. Indeed, it is challenging for the participants to confront how people might think of them. Other individuals may believe that the recovered patients who experienced severe and mild COVID-19 infection are still infectious and that they avoid exposure to them (Wu *et al.*, 2022). Similarly, it is painful for the patients to know that the people around them, especially their neighbors, friends, colleagues, and relatives, think they are still virus carriers, making them feel like outcasts (Norouzadeh *et al.*, 2021).

It was transparent that the participants were considered as sufferers of the illness and that no one should be blamed. The community people should exercise a sense of discernment, knowing that the COVID-19 survivors experienced serious life events that might take their lives.

In Bhattacharya *et al.*'s study (2020), COVID-19 survivors wish to be heard and ultimately protected from society's discrimination; however, they could not express their sentiments.

Furthermore, the participants finally recovered physically from the disease, but the discrimination left enduring wounds that made it difficult for them to engage with the community. COVID-19 survivors agonized about the discrimination in society (Son *et al.*, 2021). These experiences psychologically frighten the survivors, which provokes them to isolate themselves. Thus, there is a need for mental health advocates to look into this kind of situation to at least help ease the negative thoughts and feelings of COVID-19 survivors against discrimination or social stigma.

Table 4. Overarching themes on lived experiences of COVID-19 survivors before, during and after infection

Theme	Sample Quotations
Embracing Optimism	<p>"Even before getting infected, I always think positive that Covid- 19 will be treated." (P2)</p> <p>"My mind was still very strong; I don't care if I am positive as long as I am not alone. I have nothing to do but to strengthen my mind." (P3)</p> <p>"I felt concerned about my family and academic responsibilities, but I still looked on the brighter side as I always should, hoping to recover faster." (P9)</p> <p>"I was worried for the future. What if I get the disease again? What if next time, I'll have more serious symptoms? These are some of the questions that were bothering me, but I always try to shake them off. I think positive thoughts instead." (P6)</p>
Boosting Faith and Spirituality	<p>"I am hoping that they would recover. What I did is to pray for them." (P1)</p> <p>"I think because of my faith, I knew my family in Baguio would be healed, so they were healed actually." (P4)</p> <p>"I was scared because my cousin died due to COVID-19 virus, so I was nervous and still praying that my family would not be infected." (P8)</p> <p>"My experience in the hospital was life changing. Life changing because as I wake up every day it was indeed a miracle. But as I can see the cadavers being transported from one room to the morgue, and there were lots of people who are not successful to go out of the hospital, and I can hear the cries of the family members being left, I said: 'Lord I am not for this, I will get out of here alive and I will not be like that.' I witnessed several cadavers being transported in a day, but my faith was very, very strong, my presence of mind and my faith, my spirituality was really strong. So, it was the one who helped me to hold tight and to know that I have my reality and that will not happen if I held tightly [with my faith]."</p> <p>"I felt relief when I was informed that my second swab turned out to be negative. I prayed and thanked God for helping me get through this."</p>

With the aforementioned themes, two overarching themes surfaced since they were present before, during, and after the participants were infected with the COVID-19 virus. These are:

1) embracing optimism and 2) boosting faith and spirituality. Results revealed that the participants had a positive mindset, as manifested in their interview transcripts. Despite experiencing



psychological distress before and after being infected with the COVID-19 virus, they were able to manifest positive thoughts. Similarly, after they were healed, their optimism heightened. Thus, the emerging theme is termed as embracing optimism.

Aside from being optimistic, the participants carry their faith and spiritual beliefs. When they learned that people surrounding them were already being infected with the COVID-19 virus, participants were holding on to their faith. During the time they were infected, their faith and spirituality were even more strengthened. After recovering from the COVID-19 virus, participants likewise manifested a boosted faith and spirituality, mainly so that they considered their lives their second life.

As to the first overarching theme found in the study, which is embracing optimism, the participants manifested a positive outlook in life. This means that despite the psychological distress that they were experiencing before and during they were infected with the COVID-19 virus, they held a positive mindset to conquer the challenges that this pandemic has been facing. As Zhang *et al.* (2022) mentioned, patients tend to redirect their mindset to face recovery in an optimistic setup. Similarly, Ornell *et al.* (2020) revealed that infected people improved their self-esteem and overcame the disease through continuous self-encouragement, enhancing their resilience.

Even after their recovery, the participants were optimistic, indicating that their undesirable experiences were not shaking them. They could see a blast of hope and light during their darkest hours. In the participant's culture, resilience in every challenge is indeed helpful in their recovery. Resiliency is attributed to the participant's optimistic behavior. A similar study proves that positive thinking is evident in the culture of the people and is preserved from generation to generation (Dermawan *et al.*, 2021)

The second overarching theme, boosting faith and spirituality, implies that the participants strongly believe in God, regardless of their religion. Reflecting on the word of God was familiar to the participants. Kowalczyk *et al.* (2020) revealed that when experiencing illness and suffering, it is faith that is significant in surpassing the challenges of mental crisis, especially in this pandemic. People are more prayerful and open to faith.

The participants did not lose hope, and they strengthened their faith even more despite being put into a life-and-death situation. Some participants, especially the women, reported that what was happening was just a test of faith and that the Almighty God would not forsake them. It was proven in the study of Forlenza *et al.* (2018) that women are more often inclined to strengthen their faith and spirituality during the pandemic.

The participants also offered to God the psychological distress they were experiencing before and during their disease and attributed to God their recovery from the disease. After they were infected with the virus, this spiritual cleansing and feelings of rejuvenation boosted their faith and spirituality. It was discussed in the study of Molteni *et al.* (2021) that overall, individuals who experienced the most intense effects of the COVID-19 pandemic manifested a higher religious behavior. Furthermore, the participants are thankful for the second life given by the Almighty. In particular, some thanked the virus

for giving them the courage to face life; others described the experience as a reminder to strengthen their faith and belief even more. In general, the participants stated that through God, they are not afraid to face the challenges of the future because the extreme psychological distress taught them several lessons that made them recover from the disease.



Figure 1. Abaya, bubod, calatan, lunag, and nacod-am's onion model of lived experiences of COVID-19 survivors

With the lived experiences of the participants who were infected with the COVID-19 virus, an onion model was conceptualized. This model, as reflected in Figure 1, reveals the themes from one layer to another as participants progress from their experiences with the COVID-19 virus. The innermost layer represented the participants' experiences before being infected with the COVID-19 virus, in which psychological distress surfaced less intensely. However, when they got infected, hospitalized, and isolated, their psychological distress became extreme and more intense, which could be seen on the second innermost layer. The third layer denoted the experiences of the participants after having been infected with the COVID-19 virus, to which they realized the value of life and, at the same time, faced the challenges of discrimination. The outermost layer of the model overarched the three inner layers as these themes – embracing optimism and boosting faith and spirituality- are all present in the participants' lived experiences.

5. CONCLUSION

This study enabled the development of an onion model of the lived experiences of COVID-19 survivors. These identified experiences emerged from one experience to another, making them interrelated. This onion model describes that the psychological distress and challenges of the COVID-19 survivors are overarched by their optimism, faith, and spirituality. Hence, the COVID-19 survivors, although they experienced life-threatening situations, remain hopeful in their outlook on life, believing that the Divine will not forsake them. However, since the COVID-19 survivors had experienced a traumatic event in their lives, it is possible that they could develop any of the stress-traumatic related disorders; thus, it is recommended that they undergo psychological debriefing or any appropriate psychological intervention that could help them get away from the possibility of having future mental health issues.



LIMITATION OF THE STUDY

While this study's findings paint a realistic picture of the lived experiences of the COVID-19 survivors, caution should be exercised in using them for generalization. Remember that this study was conducted exclusively in a rural area with only one hospital and is bound by a particular cultural heritage. Thus, a counterpart of this study may also be delved into, considering the urban context with many healthcare facilities, including how the Local Government Unit responds to and manages COVID-19 patients and ensures their survival.

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