



## Research Article

# Resilience Amidst Isolation and Connection: Exploring Psychological Well-Being of Covid-19 Survivors

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### ABSTRACT



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COVID-19 has had a significant impact on individuals' mental health, and understanding the psychological well-being of survivors is crucial for developing effective support and interventions. This descriptive phenomenological study aimed to explore and describe the psychological well-being of COVID-19 survivors during and after the recovery. The study was conducted in Ozamiz City, Province of Misamis Occidental and Municipality of Ramon, Province of Isabela. The participants of the study were three COVID-19 survivors who have recovered from the illness selected through purposive sampling. In-depth interviews were conducted and the seven-step method of data analysis of Colaizzi was employed to identify key themes related to psychological well-being. The findings reveal five central themes: 1) Anxiety due to Coronavirus, 2) Social Isolation, 3) Making Sense of the Experience, 4) Positive Relationships, and 5) Strong Spiritual Foundation. While these individuals faced significant anxiety and social isolation upon learning of their positive status—stemming from fears of being a carrier, concerns about imminent death, and worries for the welfare of their loved ones—they also discovered pathways to resilience and connection that enhanced their mental health. Social isolation was exacerbated by feelings of loneliness in isolation facilities and discrimination from neighbors. However, the pandemic also fostered positive effects on the survivors' psychological well-being. They navigated their experiences by adopting healthy lifestyles, recognizing their strength in the face of adversity, and cultivating hope and gratitude. Additionally, they established positive relationships with loved ones and built a strong spiritual foundation by maintaining their faith and trusting God during and after their recovery. These elements illustrate how, despite the challenges, survivors found ways to enhance their psychological well-being.

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### Introduction

The SARS-CoV-2, also known as Coronavirus, that causes COVID-19 was initially discovered in late 2019 in Wuhan, China. COVID-19 swiftly expanded across countries, with over 3.7 million cases confirmed globally and over 250, 000 deaths as of May 6, 2020 (World Health Organization [WHO], 2020). The virus infection soon spread over the world, causing a global pandemic. It sparked an unprecedented catastrophe, wreaking havoc on human health and the global economy. There have been several difficulties that have arisen throughout this time, not just in the government but also as a major threat to our healthcare system. Kaur (2021) emphasized that COVID-19 is an essential and dangerous disease in the life of a person, especially those who got infected because it can cause life-threatening stress along with physical illness. These extreme outbreaks impacted negatively more on the patients' mental health. Several studies found that the physical state of the patients is highly influenced by the circumstances in which their mental health problems occur. This

means that nursing would be limited not only to treating the patient's physical symptoms but also prioritizing their mental health.

There have been a lot of associated problems regarding COVID-19 that greatly affect the psychological being of the patient or survivor, one of these is the "Fear of transmitting the disease" (Moradi et al., 2020). According to Roberts et al. (2021), isolation has a profound impact on one's quality of life. Inside the quarantine facility, life is a never-ending cycle of confinement, deprivation of liberty, and loneliness, as visits are not permitted. Missing their families, Kaur (2021) added to the stress, and gave them cause to look forward to returning to their regular lives.

COVID-19 survivors have extensive before, during, and after experience period, which can offer the public a broader comprehension of the psychological and the disease's effects on society. According to studies, COVID-19 individuals were isolated, felt stigmatized, rejected, blamed, and anxious (Chen et al., 2020; Rahmatinejad et al., 2020). These descriptions highlight

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the more profound aspects of COVID-19 survivors' experiences, which should help community isolation institutions provide better COVID-19 psychological assistance and management. They are an invaluable resource that cannot be completely utilized as a source of knowledge. These survivors provided insights into their lived experiences that they feel will enable society to effectively deal with the reality of the persistent pandemic (Prioleau, 2021).

Understanding the mental condition specifically the psychological well-being of COVID-19 patients during and after the illness crisis could be extremely useful in advancing understanding on how to effectively deal with future pandemics and avoid psychological harm (Roberts et al., 2021). Using the lived experiences of patients who have lived through, and survived COVID-19 is the most effective technique to explain psychological disturbances in COVID-19 patients (Moradi et al., 2020). In this regard, the first practical step is to gain a thorough grasp of the psychological disturbances that patients are experiencing. By understanding the psychological disturbances of COVID-19 patients during and after the disease crisis, the healthcare providers, like nurses, will have more knowledge of the psychological status of the patients.

Many research studies focus on the medical challenges that COVID-19 patients face, but few acknowledge the significant stress these patients experience throughout the disease crisis. The mental health requirements of this group are crucial to consider as well. Moradi et al. (2020) posits that the psychological health of patients has been adversely affected by increased awareness of the high death rates associated with COVID-19, particularly through social media platforms, leading to heightened fear and trauma.

In this context, Roy's Adaptation Model, which emphasizes the interplay between individuals and their environment, provides valuable insights into the psychological well-being of COVID-19 survivors by framing their experiences as adaptive responses to these significant stressors. This model suggests that individuals must continuously adjust to changes in their physiological, psychological, and social environments to achieve optimal health. For COVID-19 survivors, the model elucidates how they navigated emotional and cognitive challenges post-infection, employing coping mechanisms, social support systems, and resilience strategies. By examining these adaptations, researchers gained a better understanding of the factors contributing to psychological well-being or distress, ultimately informing targeted interventions and support for this population.

Given this background, the current study aimed to explore the psychological well-being of COVID-19 survivors during and after recovery, seeking to provide a more specialized and comprehensive approach to their short- and long-term care. The findings may bridge the gap between emergency medical responses and mental health care, enhancing knowledge on how to better address future pandemics and mitigate psychological trauma resulting from such crises.

## Materials and Methods

### Research Design

The study utilized a qualitative research approach specifically the descriptive phenomenology design using Colaizzi's (1978) method of data analysis. Descriptive phenomenology is an approach to qualitative research that focuses on the commonality of a lived experience within a particular group. The fundamental goal of the approach is to arrive at a description of the nature of the phenomenon (Padilla, 2015). Typically, interviews are conducted with a group of individuals who have first-hand knowledge of an event, situation, or experience. Colaizzi's phenomenological method of data analysis, on the other hand, is

a strong and arduous qualitative form of inquiry allowing researchers to reveal developing themes and interlinked relationships, ensuring trustworthiness and reliability of results.

### Research Setting

This study was conducted in Ozamiz City, one of the cities of Misamis Occidental with a total population of 140,334. With a total of 2,045 confirmed cases in Ozamiz City. Municipality of Ramon, one of the municipalities of Isabela Province. With a total population of 56, 523. As of June 16, 2023, there were 930 confirmed cases in the Municipality of Ramon making these locations among those in the Philippines that were affected by COVID-19 (COVID-19 Tracker Philippines).

### Participants of the Study

The participants of the study were three (3) COVID-19 survivors with which data saturation was achieved. Phenomenologists tend to rely on very small samples of participants, typically 10 or fewer. There was one guiding principle in selecting the sample for a phenomenological study – all participants must have experienced moderate to severe condition and must be able to articulate what it is like to have lived that experience (Saunders, 2017).

The participants were selected through purposive sampling. This type of sampling is sometimes referred to as subjective sampling because the researchers will base their decision about which participant to interview based on predetermined criteria. The inclusion criteria were as follows:

- 1) Has been diagnosed with COVID-19 and survived.
- 2) Moderate to severe condition.
- 3) Has been diagnosed with COVID-19 with moderate to severe condition.
- 4) Has been treated in and discharged from a quarantine facility or in the hospital.
- 5) Available for online interview.

### Ethical Considerations

A letter of request was sent to the Dean of the College of Nursing, Midwifery and Radiologic Technology. Prior to the interviews, the participants were informed about the purpose and method of the study and oral and written informed consent were obtained. The participants were informed that their personal information and all data will be saved secretly and will only be used for the study. Participation in the study was voluntary and the participants could withdraw from the study at any time and had the right to ask the researchers to return the audiotapes of their interviews. The participants were also reassured of the anonymity and confidentiality of the study. The recorded and transcribed materials were stored in a password-protected folder digitally and were destroyed upon completion of the study. Moreover, if the risk or physical and emotional distress occurs, the researchers will take steps to minimize and reduce the risk or terminate the interview and make referrals for professional psychological help as needed.

### Research Instrument

The researchers prepared interview guide questions to gather salient data. Questions were directed towards gaining information regarding the participants' psychological well-being. Some of the major questions were so ambiguous that follow-up questions were added to discuss it further. The questions were open-ended so that the participants could express their thoughts and experiences.

**Data Gathering Procedure**

Prior to the commencement of the study, approval was obtained from the Dean of the College of Nursing, Midwifery and Radiologic Technology. Following approval of the request, the researchers identified participants, explained the study’s purpose and scope, and asked the participants to fill out an informed consent sent via email. After the identification of the final participants, an interview via Google Meet was scheduled using a researcher-made interview guide. The participants were encouraged to talk freely and narrate their experiences using their own words and were informed of their right to withdraw at any time and that confidentiality will be maintained. Each interview lasted for about thirty to forty-five minutes and was recorded and transcribed. The researchers noted the Participants’ non-verbal cues during the virtual interview and reflected it in the journal for review and transcription purposes. The researchers also asked for feedback from the participants at the end of each interview.

**Results and Discussions**

The purpose of this study was to explore the psychological well-being of the COVID-19 survivors during and after their recovery. There were two participants from Ozamiz City, Province of Misamis Occidental and one participant from the Municipality of Ramon, Province of Isabela. These participants were COVID-19 survivors and those who experienced moderate to severe illness. The central themes were derived from analyzing and interpreting the three (3) interview transcripts. The researchers first examined the notes from the interviews that transpired previously before transcribing them. A total of 17 significant statements (SS) evolved from the interview transcripts. There were 13 formulated meanings (FM) which were coded and categorized into five themes. To come up with the findings, the researchers followed the seven-step method of data analysis of Colaizzi (1978).

**Formulated Meanings, Sub-Themes, and Theme Clusters**

Formulated Meanings	Sub-Themes	Theme Clusters
There is a feeling of fear of acquiring the virus and spreading it to their family.	Fear of Being a Carrier	Anxiety due to Coronavirus
Acknowledged the current risk of comorbidities leading to death.	Fear of Imminent Death	
Concerned about leaving their family behind and started to have death thoughts.		
The severity of delta variant scares the participant as she started to have death thoughts.		
More anxious about their family members’ welfare.	Worry for the Welfare of Loved Ones	
Negatively viewed by others.	Experiencing Social Discrimination	Social Isolation

Recognizing the effects of pandemic in isolation setting.	Feeling Alone	Making Sense of the Experience
Adherence to preventive measures and adopting a healthy lifestyle.	Adjusting Life	
Recognizing positive outlook in life.	Perceiving Strength Despite Adversities	
Started to feel grateful after how many days battling COVID-19.	Living with Hope and Gratitude	Positive Relationships
Stressed the importance of receiving social support while experiencing an adversity.	Having Strong Social Support	
Turned to spirituality and sought help from God in times of adversity.	Keeping Ones Faith	
Spirituality strengthens and trusted God during uncertainty.	Trusting God in Hard Times	Strong Spiritual Foundation

**Theme Cluster 1: Anxiety Due to Coronavirus**

COVID-19 survivors’ narratives describe a lot of their experiences during and after being diagnosed with COVID-19. The COVID-19 survivors went through different stages of their psychological health as they started to feel symptoms and after they knew they were positive for coronavirus. According to Healthline (2022), anxiety is a sensation of dread or apprehension of what is about to happen.

The COVID-19 pandemic put survivors in an uncomfortable position and tormented their psychological well-being. COVID-19 disease makes you think of an uncertain future. People are concerned about both their own and their loved ones’ health (Canadian Mental Health Association [CMHA], 2021)

**Fear of Being a Carrier and Fear of Imminent Death.** The feelings of fear are the COVID-19 survivors’ experience that can be associated with anxiety. The survivors experienced symptoms that deteriorate their physical well-being, which greatly affects their psychological well-being. They acknowledged their concern about being infected with the illness and possibly spreading it to their family members. During these times, they also feared being a carrier to their loved ones. Such uncertainties started to worsen as their symptoms developed and were diagnosed for being positive with COVID-19. These reasons contributed to their fear of imminent death. The feeling of fear was stated by Participant 1:

*“I was expecting that I would be contacted the virus because I was exposed to different people during the relief operation. So that was my fear... that probably there is a high risk or possibility that I would be contacted with the disease, and I might be infecting other people.”*

Anxiety brought on by the worry of spreading the disease and COVID-19 stigma were also present, in addition to other



psychological illnesses. Participants' experiences indicate that the patient is continually under psychological stress because of harming any family members, especially children, and parents (since they are in high-risk groups), or threatening others because of fear that they may spread the illness to them (Moradi et al., 2020)

The feelings of fear were emphasized by the participants as they were exposed to different people. COVID-19 is defined as a contagious respiratory disease that is transmitted when a person coughs, sneezes, or even talks. There were a lot of uncertain situations that happened during these times. But despite the risks, the participant who was a breadwinner of the family still worked for their household. For this matter, he started to have the feeling that he would be infecting his loved ones as he was exposed to different people. Participant 1 further states:

*"I was really afraid that later we would all be infected with COVID here, so I was sent to the hospital immediately. No one in my family was infected because I was taken to the hospital immediately."*

Patients felt as though they were on the verge of passing away and were in a life-or-death situation when they were exposed to COVID-19. Fear is a necessary adaptive reaction when dealing with a possible danger. However, it may not be as effective if it is incompatible with the actual danger. Excessive fear may frighten people and society, causing them to adhere to the Norms of safety, yet strangely it can also serve to amplify unfavorable apprehension (Chalhoub, 2022). This was stressed by the following participants:

*"I expected to die because I have comorbidities and besides, I live my life to the fullest and had travelled a lot. So, I think I already contributed much to my family, to my career, and to the community." (P1)*

*"Yes, of course I was afraid that I might die later, I thought so much about my family. When I die, my poor children, my grandchildren are still small, I want them to be grown up before I die. I still wanted to see them work so I was really scared back then." (P2)*

*"Death, that is the only thing I feared because that time when I was contacted with COVID, several people died from Delta variant. I was thinking about death. That was the worst scenario, sa akong mind is death." (P3)*

**Worry for the Welfare of Loved Ones.** During the time of adversity, aside from sustaining the basic needs of their family, the participants also considered the importance of their security needs. But since the participants were isolated, providing the family's basic needs was not possible. This is where the worry for the welfare of love occurs. This was mentioned by the following participants:

*"So, when I was transferred to Tuguegarao Valley Medical Center, I left my daughter at home, and she was only 14 during that time so it was a problem for my part because I would be leaving someone who was too young knowing that we both had contacted the virus." (P1)*

*"I was worried about my family not just for myself. My husband and children are all asthmatic. If I contacted my husband, he might die...that was my worry. And of course, my family, who were being quarantined, had no food. The LGU did not provide them with food, so I was worried. I got two worries at that time, for myself and for my family." (P3)*

Moradi et al. (2020) stressed that amid the COVID-19 disease crisis, patients were really concerned and worried about the potential for disease transmission to the members of the family and others, to the extent that this anxiety completely disturbed their thoughts. For COVID-19 survivors, the illness is less of a medical worry. They assert that they weren't very concerned about their physical state. However, being separated from those they held dear and whom they felt a big obligation to create their ongoing anxiety and fear (Romulo & Urbano, 2022)

### Theme Cluster 2: Social Isolation

Social isolation was experienced by COVID-19 patients because they were constrained to remain in isolation facilities and were not aware when the crisis would end. According to Banerjee and Rai (2020), loneliness and boredom are the results of social isolation, and if it lasts long enough, it can have a negative impact on one's physical and mental health. The isolation is exacerbated by widespread fear and worry. It frequently has significant psychological effects on people, heightening danger alerts, and exacerbating anxiety.

**Feeling Alone.** The coronavirus disease pandemic forced people to deal with an upsetting and unexpected circumstance. People's actions were altered by uncertainty and social distance, which influenced their emotions, routines, and social connections all essential components of human well-being. Restrictions brought on by the quarantine in particular heightened anxiety and feeling of loneliness (Boursier, 2020). This feeling was described by Participants 1 and 3:

*"The only problem I encountered was that I was all alone in the hospital, and nobody would assist me with my personal necessities." (P1)*

*"I was completely isolated from my loved ones.... I was alone... that was the worst thing of having COVID-19, you will get anxious because nobody is with you. I got depressed and anxious about death." (P3)*

Being confined reduces face-to-face engagement and social interaction and makes COVID-19 patients feel more stressed (Zhang et al., 2020).

**Experiencing Social Discrimination.** For participants who were diagnosed with COVID-19, being discriminated socially resulted in feeling isolated.

Since the pandemic starts, there has been a negative perception toward individuals who have the condition. The patients with COVID-19 are accused of being uninformed and careless. Consequently, they are blamed for catching the infection. Patients with COVID-19 were regarded as being active spreaders of the virus. Due to this stereotype, the society deploys various unfavorable tactics including those found in social media posts preventing them from entering the residential area, and propagating stories about them in their local communities (Bhanot, 2020) This was described by Participant 3:

*"People would not get near you even my family was deprived of help, deprived of support because they thought that my whole family was infected with COVID-19."*

COVID-19 survivors experienced different types of discrimination. For the participants, discrimination, even in subtle ways like looking away or just saying "do not go near them," is extremely upsetting. If family members are involved, the anguish is worse (Romulo & Urbano, 2022)

### Theme Cluster 3: Making Sense of the Experience

The COVID-19 pandemic did turn the world upside down. Every individual, even the local and national governments, learned a lot from the situation. The survivors have positive realizations after being infected with COVID-19. Sun et al. (2020) states that during difficult moments, individuals who were able to focus on their own values and morality discovered good influences that helped them psychologically grow.

Patients with COVID-19 reported feeling resilient in the face of adversity and adjusting to life, which gave context to their extraordinary experience. Even though the COVID-19 pandemic posed risks to the patients' mental health, they also experienced "stress-related growth". Strong social ties and a solid spiritual base are the two key protective elements for mental health during the process of psychological adaptation. Social support is a specific external factor. Receiving support has an influence on improving patients' ability to unwind and recover. (Tiantian et al., 2021)

**Adjusting to Life.** One of the participants realized the importance of having a healthy lifestyle after surviving COVID-19. Given this ongoing threat, a number of variables, including the uneven distribution of COVID-19 vaccines, their inconsistent efficacy, and the occurrence of persistent symptoms. As a result, persistent use of preventative measures is essential to maintaining public health initiatives, exercise and other healthy habits should be widely practiced treating conditions that call for physical activity. It has been demonstrated that a balanced diet, regular exercise, and enough sleep all contribute to the prevention and treatment of COVID-19 and the reduction of fatal occurrences of the disease (Palone, 2022) This was mentioned by Participant 1:

*"I must maintain a healthy status to protect myself from the virus because I have many friends who have got infected again even if they were vaccinated and received boosters. So, I must maintain a healthy lifestyle for me not to have the virus again."*

**Perceiving Strength Despite Adversities.** Adversities in life, like COVID-19 pandemic, tested the COVID-19 survivors' ability to view life from different perspectives despite the difficulties they faced.

When faced with difficulty and uncertainty, such as people have a sensation of helplessness and loss of sense due to a pandemic, as well as they started to lose their faith and way of life. If they comprehend that everything they depend on and have could be taken away. It gets difficult to take everything for granted. Once someone becomes being conscious of their mortal limitations, it will improve their attitude of gratitude for life. People stand to benefit most from a crisis-induced gratefulness for life (Emmons, 2013; Frias et al., 2011) This was stressed by Participant 1:

*"I am just a human being; I have been experiencing many trials. I was hospitalized a few times. So all these trials would probably a test to make me stronger."*

**Living with Hope and Gratitude.** During the peak of pandemic, COVID-19 patients feared for an inevitable death after being infected with the virus. As survivors, it gives them so much hope and gratitude for how precious life is.

During this pandemic we have encountered unusual difficulties associated not only with the coronavirus but also significantly global landscapes of social, economic, and political change. The impact of this climate over time on individuals and overall psychosocial health is enormous. Gratitude and hope are inextricably linked, gratitude

fosters hope and hope helps us navigate through adversity (Susarla et al., 2021) This was verbalized by Participant 3:

*"I am m happy that I am home, I am happy that I am alive, I am happy that I could still see my family, my home, I could still see my pets which I have missed so much... I am thankful and grateful to God that I am still able to see my family, I am just grateful...live each day, be happy each day, be thankful each day."*

### Theme Cluster 4: Positive Relationships

COVID-19 survivors have a strong support system which helped them to recover from the disease. The two key protective factors for psychological health and well-being during the process of psychological adaptation are social support and social responsibility. According to Li et al. (2021), better psychological health is said to increase patients' treatment compliance and immunity, which is very advantageous for COVID-19 survivors.

**Having Strong Social Support.** Having a good support system was mentioned by Participant 3:

*"My family was always supporting me... We were using FB Messenger; it was a big thing that you get to talk to your family daily even during bedtime and when you are grasping your breath. I can feel their presence and they were concern about me."*

Long et al. (2021) explained that despite the pandemic, there are new opportunities to social support and the ability to interact have emerged. Online social platforms allow for social support and interactions to be obtained from a larger group of people. Communication technologies offer a useful replacement for physical contact at times of social withdrawal.

### Theme Cluster 5: Strong Spiritual Foundation

COVID-19 survivors have also strong spiritual foundation. Keeping their faith and trusting God during their hard times were factors that made them strong and kept from feeling lost.

A solid spiritual foundation is seen as a life-enriching element and a coping mechanism that enables patients to handle adversity better. Their aspirations for the future which dramatically improved immune functioning in response to spiritual care activities may rise as a result (Roman et al., 2020)

Spirituality, as a source of comfort, support, and meaning, fosters the idea of a sense of belonging and existential interconnection, which enhances mental health. In fact, the research has focused on the link between spirituality and a higher perception of wellness, physical health, and mental health. Coping, or the part that spiritual health plays in handling stressful situations, is an essential element. Spiritual coping can be characterized as cognitive and behavioral efforts to maintain meaning, purpose, and connection in the face of trying situations (Coppola et al., 2021)

**Keeping Ones Faith and Trusting God in Hard Times.** Since the beginning of recorded history, spirituality has been a cornerstone of every population group. The relationship with the transcendent or sacred has a significant impact on a people's beliefs, attitudes, emotions, and behavior. It plays a vital role in quality of life, health, and well-being for both the general population and for individuals suffering from illnesses. According to research, families rely on their spirituality to maintain their emotional, mental, and physical health. Spirituality practices are recognized as an effective coping strategy for handling catastrophic and life-altering situations According to Leonhardt et al. (2023), religion can provide a crucial source of solace amid big

life challenges. After significant life challenges, religious commitment frequently increases. Spirituality and religion in general have been linked to increased happiness and decreased hopelessness. This was described by Participant 3:

“All I did was pray, I sang praise and worship songs, and it kept me stronger each day... it kept me fighting each day and so with my family, we prayed together during video calls, we did praise and worship together during video calls. We prayed together and we survived the situation that was it.”

Coppola et al. (2021) stipulated that people depended on important religious and spiritual activities throughout COVID-19, enabling them to achieve positive mental well-being. Despite the radical change in how people lived, they were able to make sense of the situation and keep from feeling lost. When people are suffering as a result of the pandemic, religion or spirituality is shown to be a reliable and helpful coping mechanism. In fact, a lot of people who are going through bad times show resilience on both a psychological and spiritual level (Bonanno et al., 2010). According to research by Molteni et al. (2021) that those who experienced the COVID-19 crisis's most devastating effects have reported during the pandemic, there may be a rise in religious belief that could protect people from greater psychological distress that typically comes along with such difficulty.

The COVID-19 pandemic has elicited profound fears and anxieties among survivors, particularly regarding the potential to become carriers of the virus and the associated risk of spreading it to their families. This fear is compounded by concerns about imminent death, especially in the face of severe variants like Delta, leading to a heightened sense of mortality and anxiety about the welfare of loved ones. Social discrimination further exacerbates feelings of isolation, as individuals experience negative perceptions from others, intensifying their sense of loneliness. In this context, the challenges of social isolation prompt survivors to confront their fears and acknowledge the impact of the pandemic on their lives, ultimately leading to a deeper understanding of their circumstances.

Despite these adversities, many survivors demonstrate remarkable resilience by adopting healthier lifestyles and adhering to preventive measures, which reflect their ability to adjust and find meaning in their experiences. Through cultivating a positive outlook and practicing gratitude, they develop a sense of strength amidst adversity. The reliance on social support and the use of technology to maintain connections with loved ones underscore the importance of relationships in navigating these challenges. Additionally, turning to spirituality provides a crucial source of comfort and strength, as individuals seek solace and guidance from their faith during uncertain times. Overall, the result highlights the complex interplay between fear and resilience, illustrating how individuals can forge connections and find hope even amidst profound isolation.

## Conclusion

In conclusion, the experiences of COVID-19 survivors illuminate the intricate relationship among anxiety, social isolation, and resilience. By applying Roy's Adaptation Model, we gain a deeper understanding of how these individuals navigated their challenges and adapted to their circumstances. The anxiety that arose from fears of contagion and concerns for the well-being of loved ones underscores the complex physiological and emotional responses to stress. Social isolation further intensified these feelings; however, survivors exhibited notable adaptive behaviors. They reframed their experiences by embracing healthier lifestyles, cultivating gratitude, and nurturing hope, which reflect the self-concept and interdependence modes of

adaptation. Additionally, the innovative use of social media to maintain connections illustrates how survivors creatively adjusted their social roles in the face of physical distancing. The strengthening of their spiritual foundation serves as a crucial element of their coping strategies, highlighting the role of faith and resilience in overcoming adversity. Ultimately, Roy's Adaptation Model offers a robust framework for comprehensively understanding the multifaceted responses of COVID-19 survivors, thereby informing future interventions aimed at supporting adaptive processes and enhancing overall well-being in similar contexts.

## Declaration of No Conflict of Interest

We hereby declare that there are no financial interests or conflicts of interest associated with this work. All information presented is free from external influences or affiliations that could compromise its integrity or objectivity. This declaration ensures transparency and maintains the focus on the integrity of the research and its findings.

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