

Chasing Breath Through The Maze Of Academia: Lived Experiences Of Health Sciences Students With Asthma

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Abstract

In the demanding world of Health Sciences education, students with asthma navigate unique challenges as they balance their academic responsibilities with the realities of a chronic respiratory condition. This study aims to describe how asthma affects the daily lives of Health Sciences students within the context of a rigorous and highly structured academic environment. The researchers employed a purposive sampling method to select twelve students with physician-diagnosed asthma from the Campus for Health Sciences at LORMA Colleges. Data were gathered through in-depth, face-to-face interviews using semi-structured interview guide questions. To thoroughly analyze the students' lived experiences, Thematic Analysis was utilized for organizing, analyzing, and interpreting the data. Findings revealed that students with asthma encounter significant physical, emotional, and academic impacts stemming from their condition. These included difficulties in managing symptoms during high-stress academic tasks, challenges in keeping up with demanding course requirements, heightened anxiety during asthma flare-ups, reliance on self-management strategies, and disruptions to their academic performance, social participation, and overall well-being. The study highlights the need for strengthened institutional support, asthma-friendly policies, and improved awareness across learning environments to better accommodate students with chronic respiratory conditions.

Keywords: *asthma, lived Experiences, health sciences students, academic challenges, respiratory health, qualitative Study*

1. Introduction

Asthma is a persistent and highly disruptive inflammatory disease of the airways that affects millions of individuals worldwide, manifesting in recurrent episodes of wheezing, breathlessness, chest tightness, and coughing, with the severity and frequency of these symptoms varying significantly among patients. These clinical features are driven by airway inflammation, bronchial hyperresponsiveness, and reversible airflow obstruction, all of which make normal respiration challenging. Although asthma can be effectively managed through medication and lifestyle modifications, it remains susceptible to acute exacerbations when individuals are exposed to environmental triggers such as allergens, air pollution, and extreme temperatures. The interaction between genetic predisposition and ecological factors further complicates asthma control, often leading to unpredictable flare-ups and reduced quality of life. Thus, comprehensive asthma management necessitates not only medical intervention but also vigilant identification and avoidance of environmental triggers to minimize morbidity and improve patient outcomes (Global Initiative for Asthma, 2023).

Academic experiences of college students are notably disrupted by chronic respiratory symptoms, particularly in terms of attendance and class participation. A study conducted among medical students at King Abdulaziz University revealed that seventeen point one percent of asthmatic students missed at least one examination, while thirty-eight point six percent reported missing at least one teaching session due to asthma symptoms. The severity of asthma attacks and exposure to environmental triggers were identified as key contributors to these disruptions, emphasizing the need for academic institutions to provide adequate support and accommodations for students with asthma to ensure their educational continuity without compromising their health. Furthermore, research has shown that poorly controlled asthma is a leading cause of absenteeism and can negatively impact standardized test performance, highlighting the importance of effective health programs and environmental management in schools to improve academic outcomes for students with asthma (Alzahrani et al., 2022).

Beyond academics, asthma can hinder social interactions and participation in physical activities at school, affecting the psychosocial quality of life for these students. Factors such as the severity of asthma, home conditions (e.g., exposure to tobacco smoke or mold), and school environments (e.g., crowded classrooms or teacher awareness of asthma) influence how the disease impacts school life. In addition, understanding the interplay between asthma control, home conditions, and school environments is crucial for developing targeted interventions to improve both academic performance and overall well-being for asthmatic students (World Health Organization, 2024).

Meanwhile, the transition to college life often poses significant challenges for students managing asthma independently for the first time. According to Velsor-Friedrich and Hogan (2021), many college students struggle with shifting from parent-supervised asthma care to self-management, leading to difficulties in addressing asthma flare-ups, particularly under the pressures of academic stress. This lack of preparedness can result in frequent class absences and negatively

impact academic performance. Furthermore, studies highlight that mental health factors, such as stress and anxiety, can further hinder effective asthma self-management, exacerbating symptoms and reducing adherence to treatment plans. These findings underscore the importance of equipping students with robust self-management education and resources before transitioning to college to mitigate these risks.

Additionally, Yang et al. (2021) conducted a longitudinal study among Chinese college students which demonstrated that elevated academic workload, separation from school, and fear of contagion during the COVID-19 pandemic significantly increased perceived stress, which in turn adversely affected both physical and psychological health outcomes. Their findings highlight how academic and environmental stressors, especially in disrupted educational settings, can penetrate beyond mental well-being to manifest as broader health burdens. This research is particularly pertinent as it underscores the layered pressures faced by students; for those managing a chronic respiratory condition such as asthma, added academic stress and health anxiety could amplify both their asthma symptomology and their academic journey.

In addition, Schneider et al. (2022) emphasized the significant influence of chronic illnesses like asthma on peer relationships. Students with asthma often miss school activities and social events due to health-related issues, leading to frequent absences. These absences are often misinterpreted by peers as a lack of interest in social interactions, complicating the formation of close relationships. Over time, this dynamic fosters feelings of isolation and exclusion, as the chronic condition subtly erodes social bonds and emotional development. Additionally, research highlights that asthma-related stigma and fear of peer rejection further exacerbate social anxiety among affected students, as they may avoid activities or medication use in public settings out of embarrassment, thereby deepening their sense of isolation.

In a similar study, Nagase et al. (2023) highlighted that asthma affects not only physical health but also the emotional and social well-being of adolescents. Many young individuals with asthma feel shame or embarrassment when managing symptoms in public, such as using an inhaler or struggling to breathe, which often leads to social avoidance and isolation. Over time, this withdrawal negatively impacts their relationships with peers and close connections, fostering emotional detachment and depriving them of meaningful social experiences. This aligns with findings that adolescents with asthma frequently report heightened social anxiety due to fears of peer judgment, leading to reduced participation in social or physical activities and lower self-esteem. Additionally, studies suggest that supportive family environments and interventions aimed at reducing stigma can mitigate these psychosocial challenges, emphasizing the need for holistic approaches to improve their quality of life.

Likewise, Bruzzese et al. (2020) highlighted the profound emotional impact of asthma on young adults and adolescents, extending beyond physical health. Many young individuals with asthma experience fear of public attacks and anxiety about social judgment, leading them to avoid social gatherings and reduce social interactions. This avoidance can result in feelings of isolation and being left behind by peers, exacerbating emotional distress. Consequently, asthma significantly affects interpersonal relationships, as fear and anxiety can hinder the development of

healthy social connections. Moreover, this study emphasizes the importance of emotional support alongside medical treatment in effectively managing asthma, as it plays a crucial role in mitigating the psychological effects that can complicate asthma control.

Meanwhile, managing respiratory illness also significantly impacts the academic and clinical performance of medical students, particularly during demanding internship or hospital-based training years. According to Koinis-Mitchell et al. (2020), asthmatic students often experience fatigue and shortness of breath during practical sessions and ward rounds, leading to early departures or absences from clinical duties. These interruptions disrupt their education and lower their confidence in handling real medical scenarios. The mental burden of asthma further compounds these challenges, as many students fear sudden attacks in front of peers or professors, making them more introverted and less engaged in academic discussions. This fear also leads some to avoid physically taxing assignments, creating gaps in their clinical exposure.

In their study, D'Amato et al. (2021) examine how climate change and environmental triggers heighten the burden of asthma by increasing the intensity and duration of aero-allergen exposures, modifying weather patterns, and amplifying synergistic interactions between pollutants and allergens. They find that elevated atmospheric CO₂, longer pollen seasons, extreme weather events (such as thunderstorms and floods) and enhanced air-pollution levels contribute to increased asthma incidence and exacerbations, particularly among sensitised individuals. This work underscores the complex, systemic pathways by which external environmental stressors can destabilise respiratory health and impose additional unpredictability on individuals managing asthma.

Meanwhile, McTague et al. (2022) conducted a systematic review of eighteen qualitative studies exploring how youths with asthma experience self-management education, identifying three major themes: the “theory-and-practice gap”, contemporary health-seeking preferences, and the psychosocial impacts of living with asthma. They found that many young people perceive asthma education as insufficiently tailored to their lived realities. They report difficulties in translating formal instruction into daily self-care, preferring more youth-centric and technology-enabled formats, and experiencing ongoing psychosocial burdens such as stigma or isolation tied to their condition. The authors conclude that self-management education must move beyond standard adult models to engage youths meaningfully and address their unique needs.

Roy and Milgrom (2023) present a comprehensive review of the management of acute asthma exacerbations, emphasising that prompt recognition and rapid reversal of airflow obstruction are pivotal to preventing relapses and future episodes. They identify short-acting β_2 -agonists, oxygen therapy, and systemic corticosteroids as the foundational treatments while noting the emerging roles of anticholinergics, levalbuterol and formoterol. The authors also stress the importance of initiating or intensifying long-term controller therapy, addressing comorbid conditions, avoiding triggers and ensuring structured follow-up and patient-physician collaboration via a written action plan.

Adolescents' Practical Knowledge of Asthma Self-Management and Experiences in the Context of Acute Asthma (Wallace-Farquharson et al., 2022) uses a qualitative content-analysis

of one twenty six adolescents to examine their real-world knowledge of asthma self-management across four domains: symptom prevention, monitoring, acute response, and communication with caregivers or providers. The study found that while many adolescents understood how to prevent exercise-induced bronchoconstriction, they demonstrated limited capacity to assess the severity of acute symptoms, apply bronchodilators appropriately, timely seek professional help, or communicate effectively about their condition. Notably, the research highlights disparities between minority and non-minority adolescents in monitoring strategies, use of inhalers, and provider communication. Pointing to social and contextual dimensions of self-management.

In the study by Sloand et al. (2020), “Influence of Social Support on Asthma Self-Management in Adolescents”, the authors conducted a cross-sectional secondary data analysis of urban adolescents (ages twelve to twenty) with asthma to examine how perceived family social support correlates with medication adherence, asthma control and emergency department use. They found that among the three hundred seventy one participants, only thirty seven percent of those on controller medications reported using them on at least eight out of fourteen days, and low adherence was significantly associated with lower perceived family support. The results emphasise that beyond the biomedical regimen of asthma, the quality of social and familial support networks plays a pivotal role in shaping adolescents’ self-management behaviours and outcomes.

In the Philippine context, the National Nutrition and Health Survey (NNHeS), as analyzed by Ibarra et al. (2023), revealed that asthma affects eight point seven percent of Filipino adults, underscoring its significant prevalence across the country. This survey utilized a multi-staged cluster sampling methodology to evaluate over seven thousand two hundred adults from diverse regions, providing robust data on asthma trends. It highlighted disparities in access to consistent medical care, which contribute to poor asthma control among affected individuals. Notably, college-age adults, particularly those pursuing health sciences, may experience heightened challenges in managing asthma alongside rigorous academic demands.

Furthermore, Salazar (2020) examined the broader challenges of healthcare delivery in the Philippines, emphasizing the need for more responsive and adaptive health systems, particularly for patients with chronic respiratory conditions such as asthma. Although his study focused on systemic preparedness for environmental health threats, its findings underscore a key concern relevant to asthmatic students which is the need for accessible, student-centered healthcare services that can support timely management of exacerbations. This reinforces the importance of understanding how individuals, especially college students, personally experience and navigate chronic illness within academic settings.

Furthermore, adolescents with asthma often face academic challenges due to frequent absences caused by asthma attacks or medical appointments, which disrupt their learning continuity and lead to lower grades. Additionally, symptoms such as fatigue and difficulty breathing hinder concentration during lessons and exams, further diminishing their academic performance. These obstacles impact not only daily school participation but also overall educational attainment. The study by Schneider et al. (2022) emphasizes the importance of schools providing tailored support to help these students succeed academically. Furthermore, research

indicates that urban minority children with asthma experience compounded difficulties due to environmental triggers and poor adherence to asthma management, which exacerbate symptoms and negatively affect their academic outcomes.

Qualitative studies on Healthcare Access have also explored the challenges faced by individuals with chronic illnesses. For instance, Tanay et al. (2023) reported that systemic issues such as healthcare delays and limited resources can hinder timely treatment for patients with chronic conditions like asthma. These challenges are particularly concerning for college students, who may be navigating healthcare independently for the first time. The need for prompt and accessible asthma management becomes crucial in preventing severe exacerbations, especially in academic settings where students balance clinical duties, coursework, and personal health responsibilities.

In 2022, researchers at LORMA College of Physical and Respiratory Therapy conducted a qualitative study titled, “A Breathtaking Dive into the Lived Experiences of Asthmatic Students in the College of Physical and Respiratory Therapy.” This study aimed to explore the experiences of asthmatic students across different year levels within the college. The researchers were motivated by the increasing global prevalence of asthma and the unique challenges faced by students with this condition. Additionally, the study sought to illuminate the lived experiences of these students and increase public awareness of their struggles (Castro et al., 2022).

Castro et al.’s study offers valuable qualitative insights into the lived experiences and coping strategies of asthmatic students in two departments within the College of Physical and Respiratory Therapy at LORMA Colleges. However, a knowledge gap remains as the study’s findings are limited in scope, focusing on a specific subset of students and not addressing the broader spectrum of health sciences students, which may limit generalizability. Methodologically, the study is conducted through semi-structured interviews via Zoom, which, while effective for capturing personal narratives, may differ in depth and rapport compared to face-to-face interviews planned by the researchers. Additionally, the small sample size and reliance on self-reported data without triangulation restrict the representativeness and validity of the findings (Collins, 2019). Addressing these gaps by including a wider range of health sciences departments and employing more robust or mixed-methods approaches provides a more comprehensive understanding of the academic and personal challenges faced by asthmatic students.

2. Objectives

This study aimed to describe the lived experiences of health sciences students with asthma at LORMA colleges.

3. Materials and Methods

This study employed a descriptive qualitative phenomenological research design to describe the lived experiences of students with asthma at LORMA Colleges Campus for Health

Sciences. Qualitative research focuses on understanding human experiences through rich, contextual narratives rather than numerical data. This design provides a deeper understanding of how asthma affects students' academic performance, daily routines, and personal lives. Data are collected through in-depth narratives to gain authentic insights into their lived realities (Patton, 2020).

The locale of this study was LORMA Colleges Campus for Health Sciences, located in Carlatan, City of San Fernando, La Union. This specific campus houses the College of Nursing, College of Medical Laboratory Science, College of Physical Therapy, College of Pharmacy, College of Radiologic Technology, College of Respiratory Therapy, and College of Psychology, making it the central hub for health sciences education within LORMA Colleges. The choice of this locale is justified by its diverse population of health sciences students who are exposed to similar academic and environmental conditions, providing a consistent context for describing the lived experiences of asthmatic students.

The research process began with securing approval from the Campus for Health Sciences Research and Innovation (CHS-RI), the LORMA Colleges Research Ethics Committee (REC), the Dean of the College of Respiratory Therapy, the Research Adviser, and the Director of the Campus for Health Sciences. Letters of approval were submitted and granted, ensuring compliance with institutional policies and ethical standards. Before data collection, all potential participants were fully informed about the study's purpose, objectives, and procedures.

Participants in this study were twelve Health Sciences students from LORMA Colleges Campus for Health Sciences who were officially enrolled for the academic year 2025–2026. The method for sampling is through purposive sampling, specifically targeting twelve participants who meet the inclusion criteria. Inclusion criteria required that (1) participants had a medically diagnosed case of asthma, (2) were of legal age (eighteen years or older), and (3) were willing and able to participate in in-depth, face-to-face interviews. Recruitment continued until data saturation was achieved, which occurred when no new themes or insights emerged from the participants' narratives during the data analysis.

In the actual conduct of the study, the researchers coordinated with the Campus Health Office and the Campus for Health Sciences departments to identify students who met the inclusion criteria. Interested students were screened for eligibility, oriented about the purpose and process of the study, and provided with detailed study information. Those who voluntarily agreed to participate signed informed consent forms prior to the interviews, ensuring adherence to ethical standards and respect for participant autonomy.

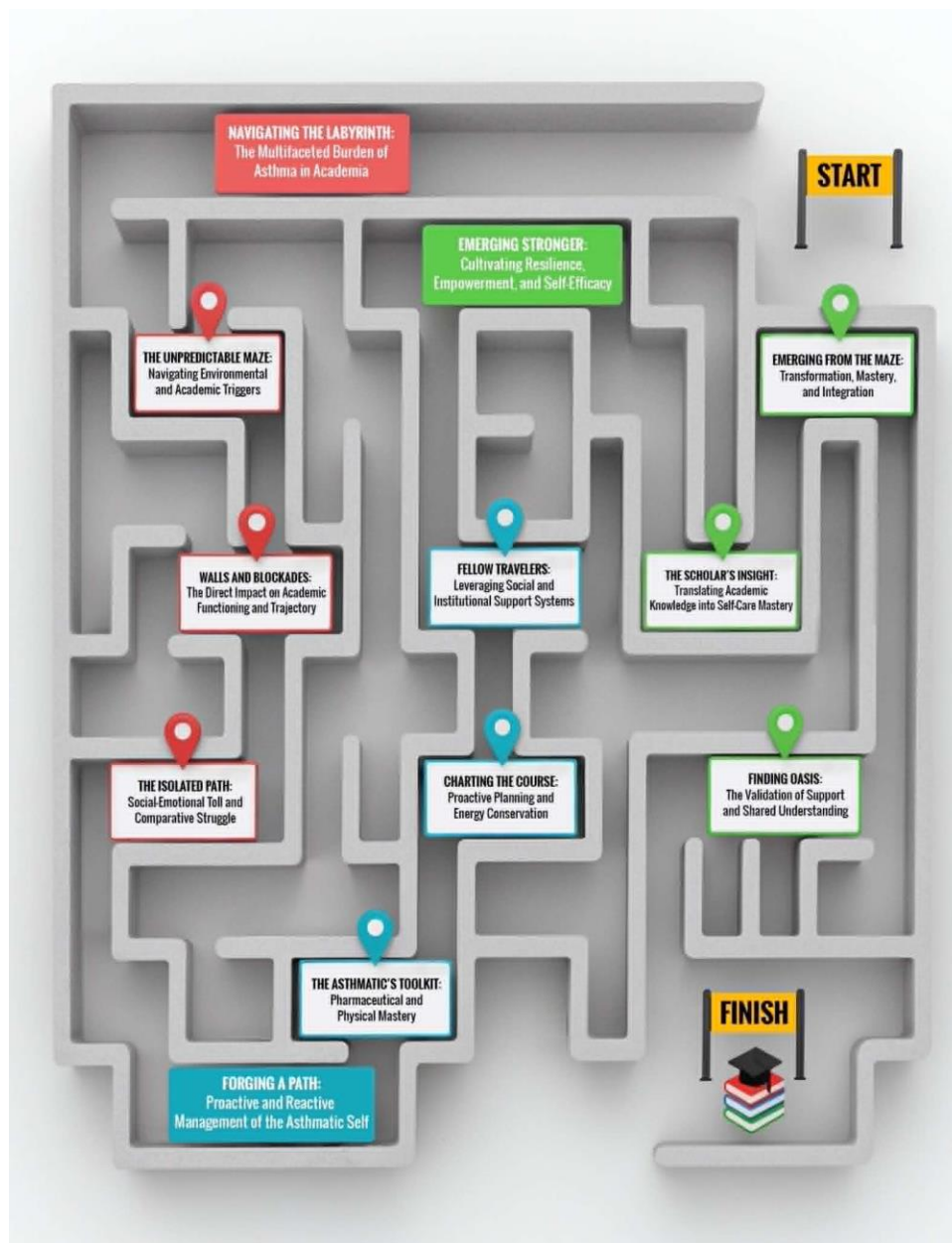
Each participant underwent one in-depth interview lasting approximately forty-five to sixty minutes. In a few instances, short follow-up conversations were conducted to clarify certain responses and ensure the completeness of the data. The use of verbatim transcripts allowed the researchers to capture participants' exact words, tone, and expressions, ensuring that the meanings and nuances of their lived experiences were accurately represented (Volpato et al., 2023). All interviews were audio-recorded with the participants' consent and transcribed verbatim to ensure accuracy in capturing their lived experiences. To safeguard anonymity and confidentiality, all

transcripts were anonymized by removing identifying information and using pseudonyms for each participant. The audio files and transcripts were stored in a password-protected Google Drive folder accessible only to the research team, ensuring data security and privacy.

The researchers employed the Thematic Analysis approach developed by Braun and Clarke (2006), which served as the guiding framework for systematically identifying, analyzing, and interpreting patterns of meaning within the participants' narratives. Once the thematic structure was finalized, the researchers integrated the findings into a coherent narrative. The final write-up wove together direct participant quotations and analytical interpretation, ensuring that the participants' voices remained central while connecting the findings to existing literature and theories. The researchers demonstrated trustworthiness through the four key criteria proposed by Lincoln and Guba of which credibility, transferability, dependability, and confirmability was carefully addressed throughout the conduct of the study (Naeem et al., 2023).

4. Findings

The findings of the study, organized into major themes and subthemes that encapsulate the lived experiences of health sciences students with asthma. The conceptual model developed in this study illustrates the lived experiences of health sciences students with asthma, framing their academic journey as a maze that encapsulates their struggles, adaptations, and triumphs. This model is structured around three core themes: 1. Navigating the Labyrinth: The Multifaceted Burden of Asthma in Academia, which details the environmental, logistical, and emotional constraints they faced; 2. Forging a Path: Proactive and Reactive Management of the Asthmatic Self, which maps the proactive and reactive pathways they forged to navigate academic demands; and the 3. Emerging from the Maze: Transformation, Mastery, and Integration, which represents the positive outcomes and victories gained through their perseverance. Each theme and sub-theme reflects how participants confronted this complex maze, balancing their health needs with their academic ambitions. These findings are substantiated by the participants' own narratives and are supported by theoretical perspectives that provide depth and context to their experiences.



“Navigating the Labyrinth of Breath”
Figure 1. Conceptual Model of the Study

5. Discussion

The conceptual model “Navigating the Labyrinth of Breath” represents the journey of health sciences students at LORMA Colleges with asthma as they begin their academic pursuit, symbolized by the Start point of the maze where their educational path and health condition converge. As they move through the maze, the twisting paths illustrate the challenges and negative experiences encountered in balancing academic demands with the physical and emotional burden

of asthma. Along the journey, they develop strategies for control and adaptation through medication use, energy management, and the support of peers and institutions, reflecting proactive and reactive coping mechanisms. The stack of books and graduation cap positioned at the maze's exit symbolize the participant's transformation into a resilient and empowered individual, one who has successfully integrated academic achievement with personal well-being and self-mastery.

The colors in the conceptual model further illustrate the emotional and developmental progression of the participants' lived experiences. The deep, muted red represents the constricting challenges and emotional strain of living with asthma while pursuing academic goals, symbolizing danger, exhaustion, and the constant state of alert that accompanies both physical and academic pressures. The steady blue signifies the phase of control and adjustment, capturing the participants' efforts to create stability through medication, planning, and support that reflects calmness, clarity, and the professional discipline of healthcare practice. Finally, the renewing green embodies transformation and growth, representing moments of empowerment, mastery, and integration where participants emerge resilient and self-assured. Collectively, this color palette traces a visual and emotional narrative that moves from struggle through adaptation to eventual triumph. This progression effectively illustrates how each distinct phase contributes to the participants' holistic experience of managing their asthma while simultaneously navigating academic life.

The first major theme, *Navigating the Labyrinth: The Multifaceted Burden of Asthma in Academia*, encapsulates the pervasive and cumulative challenges that defined the participants' academic existence. This theme conceptualizes the students' journey as a continuous navigation through a complex system of interlocking pressures, where their chronic health condition fundamentally shaped their engagement with higher education. It illustrates how asthma was not a peripheral concern, but a central determinant that mediated their academic performance, social integration, and psychological well-being. Ultimately, this theme establishes the foundational context of constraint and negotiation within which all subsequent adaptation and resilience occurred.

The sub-theme, *The Unpredictable Maze: Navigating Environmental and Academic Triggers*, delineates the precarious reality wherein the academic environment itself constituted a labyrinth of potential hazards. The data indicate that participants operated under a state of persistent vigilance. They perceived their essential academic environments, such as lecture halls and clinical rotations, alongside major pressures like examinations, as spaces that could shift without warning from a context for learning to a source of physiological distress. This sub-theme captures how both external elements, including weather changes, dust, and poor ventilation, and internal pressures, such as academic stress and fatigue, functioned as invisible yet potent triggers. Consequently, students were perpetually engaged in a complex risk assessment, forced to navigate an educational landscape where the "walls of the maze" were in constant, unpredictable flux.

The sub-theme, *Walls and Blockades: The Direct Impact on Academic Functioning and Trajectory*, moves beyond the triggers to detail their immediate and concrete consequences on the students' primary role as scholars. It examines how asthma attacks and the persistent management of symptoms erect significant barriers to learning, directly undermining cognitive functions such

as concentration and information retention. These are not peripheral concerns but central impediments that manifest as missed examinations, delayed assignment submissions, and an inability to actively participate in scholarly discourse. Consequently, this sub-theme conceptualizes these academic disruptions as the literal "walls and blockades" within the maze, representing the tangible detours, delays, and sometimes complete halts imposed upon their educational journey.

The sub-theme, *The Isolated Path: Social-Emotional Toll and Comparative Struggle*, delves into the profound internal and social ramifications of navigating academia with asthma. It moves beyond physical and academic barriers to illuminate the psychological burden and emotional drain that accompany the condition. This dimension captures the pervasive sense of isolation students experience, as they often feel compelled to walk a separate, more arduous path than their peers, missing out on social and collaborative aspects of college life. Ultimately, this sub-theme reveals how the maze is not only a physical and academic construct but also a deeply personal one, defined by the loneliness of being fundamentally set apart by the relentless demands of their health.

The second major theme, *Forging a Path: Proactive and Reactive Management of the Asthmatic Self*, captures the dynamic and agentic processes through which students actively navigate the constraints of their condition. This theme reframes the experience from one of passive endurance to strategic engagement, where students become architects of their own academic journey. It conceptualizes their efforts as a dual-layered approach, involving both immediate, reactive measures to alleviate symptoms and forward-looking, proactive strategies to prevent academic disruption. Ultimately, this theme posits that successful navigation involves a continuous process of mastering the "asthmatic self," a process which requires integrating health management into their core identity as students and future healthcare professionals.

The sub-theme, *The Asthmatic's Toolkit: Pharmaceutical and Physical Mastery*, delineates the foundational layer of self-management, comprising the essential resources students must constantly have at their immediate disposal. This toolkit represents the first line of defense within the academic maze, containing both pharmacological agents like inhalers and nebulizers, and non-pharmacological techniques such as breathing exercises and postural control. These tools are not merely possessions but are integral to their daily readiness, enabling reactive interventions to halt an ongoing attack or mitigate its severity. Consequently, mastery of this toolkit is a non-negotiable prerequisite for participation in academic life, providing the fundamental security needed to venture into the unpredictable terrain of the university environment.

The sub-theme, *Charting the Course: Proactive Planning and Energy Conservation*, explores the sophisticated, forward-thinking strategies students employ to preemptively manage their condition within the academic landscape. This represents a shift from reactive crisis management to a deliberate orchestration of daily life, aimed at minimizing exposure to known triggers and preserving finite physical resources. It involves the strategic allocation of energy through pacing, the creation of structured schedules with integrated rest periods, and the conscious avoidance of high-risk environments. Ultimately, this sub-theme reveals how students transition

from being passive inhabitants of the maze to becoming its active cartographers, meticulously mapping their path to ensure they can navigate its demands without depleting their health.

The sub-theme, *Fellow Travelers: Leveraging Social and Institutional Support Systems*, illuminates the critical relational networks that students cultivate to navigate the academic maze with asthma. It acknowledges that the journey is not a solitary trial but a shared endeavor, sustained by the guidance, practical assistance, and emotional camaraderie of others. These "fellow travelers" encompass a diverse ecosystem of support, including understanding peers who offer accommodation, empathetic instructors who grant flexibility, and specialized healthcare professionals who provide expert management strategies. Ultimately, this sub-theme posits that the ability to identify, access, and leverage these interconnected support systems is a vital survival skill, transforming an isolating path into a traversable route through collective effort.

The third and culminating major theme, *Emerging from the Maze: Transformation, Mastery, and Integration*, represents the profound positive outcomes and personal victories forged through the students' arduous journey. This theme signifies a pivotal shift from being constrained by the maze to ultimately transcending its confines through a process of profound personal growth. It conceptualizes this emergence not as a mere exit, but as an active and hard-won transformation where struggle is alchemized into strength. Through the framework of Transformation, Mastery, and Integration, the students' experience is conceptualized as a narrative that extends beyond survival. It is more accurately characterized as a process of post-traumatic growth and a fundamental reconstruction of identity.

The sub-theme, *The Scholar's Insight: Translating Academic Knowledge into Self-Care Mastery*, illuminates a unique and powerful form of empowerment where the academic curriculum itself becomes a primary therapeutic tool. This represents a profound victory, as the students' rigorous training in health sciences provides them with the expert knowledge to deconstruct and strategically manage their own condition. They are no longer passive recipients of medical advice but active interpreters of pathophysiology and pharmacology, applying clinical principles to their personal health narratives. Consequently, the very maze of academia that poses significant health challenges simultaneously provides the essential map and tools for its own navigation, transforming a personal vulnerability into a source of profound expertise and self-efficacy.

The sub-theme, *Emerging Stronger: Cultivating Resilience, Empowerment, and Self-Efficacy*, captures the profound internal transformation that occurs as students repeatedly navigate and overcome the challenges posed by their condition. It moves beyond the mere management of symptoms to illuminate the psychological fortitude and unwavering self-belief forged in the crucible of chronic illness. This process involves a fundamental shift from feeling victimized by their asthma to recognizing their own capacity to persevere, adapt, and exert control over their academic and personal lives. Ultimately, this sub-theme reveals that the maze, while arduous, does not break the student but instead tempers them, cultivating a resilient and empowered individual equipped to face future adversities with hard-won confidence.

The sub-theme, *Finding Oasis: The Validation of Support and Shared Understanding*, illuminates the critical role of the social environment in transforming an isolating journey into a

shared and sustainable endeavor. The analysis centers on the significant relief students report upon finding institutional "oases." These are defined as specific instances or relationships characterized by empathy, accommodation, and deep understanding from individuals within the academic community. These moments of connection serve as crucial psychological reprieves, validating their struggles and reinforcing that they do not navigate the maze alone. Ultimately, this sub-theme posits that these oases are not merely pleasant encounters but essential resources that replenish resilience, mitigate the toll of constant self-advocacy, and make the academic path not just passable, but meaningful.

In conclusion, this research journey, framed by the potent metaphor of the maze, ultimately reveals a story not of confinement, but of profound metamorphosis. The labyrinth of academia, with its relentless environmental triggers, academic dead-ends, and isolating emotional corridors, initially appeared as a structure designed to constrain the asthmatic student. Yet, the participants' narratives have compellingly demonstrated that these very constraints became the instruments of their transformation. They were not passive victims lost in the twists and turns; they became cartographers of their own well-being, alchemists turning the lead of vulnerability into the gold of expertise. Through a process of relentless negotiation with their own bodies and environment, they achieved more than mere navigation: they learned its secret passages, dismantled its walls for their own use, and in doing so, fundamentally altered its nature from a site of struggle to a proving ground of resilience.

6. Conclusion

This study concludes that for health sciences students, asthma transforms the academic environment into a complex labyrinth of physical, academic, and emotional challenges. The condition acts not merely as a physical barrier but as a source of significant psychological strain, where the fear of symptoms constrains academic engagement and personal confidence.

In response, students demonstrate profound resilience by actively forging a path through this labyrinth. They evolve from being passive patients into strategic managers of their health, employing a dual approach of proactive planning and reactive crisis management. This journey culminates in a powerful transformation, where their personal health struggles are integrated with their burgeoning professional identities.

Ultimately, the students' journey through the "maze" of academia with a chronic condition leads to an emergence defined by mastery and self-advocacy. Their acquired health sciences knowledge becomes a practical toolkit for self-care, empowering them to navigate their world with greater authority. This process forges a unique "clinician-self" identity, turning a personal challenge into a source of profound professional and personal empowerment.

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8. References

Alzahrani, M., & Alghamdi, M. A. (2022). Prevalence and Impact of Bronchial Asthma on the Academic Performance of Medical Students at King Abdulaziz University. *The Egyptian Journal of Hospital Medicine*, 89(2), 1066–1072. https://www.ejhm.journals.ekb.eg/article_262202.html

- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Bruzzese, J., Fisher, P. H., Lemp, N., & Warner, C. M. (2020). Asthma and social anxiety in adolescents. *The Journal of Pediatrics*, 155(3), 398–403. <https://doi.org/10.1016/j.jpeds.2009.04.004>
- Castro, D. et al. (2022). A breathtaking dive into the lived experiences of asthmatic students in the College of Physical and Respiratory Therapy. LORMA Colleges.
- D’Amato, G., Chong-Neto, H. J., Ortega, O. P. M., Vitale, C., Ansotegui, I., Rosario, N., Haahtela, T., Galan, C., Pawankar, R., Murrieta-Aguttes, M., Cecchi, L., Bergmann, C., Ridolo, E., Ramon, G., Diaz, S. G., D’Amato, M., & Annesi-Maesano, I. (2021). The effects of climate change on respiratory allergy and asthma induced by pollen and mold allergens. *Allergy*, 75(9), 2219–2228. <https://doi.org/10.1111/all.14476>
- Global Initiative for Asthma. (2023). GINA 2023 pocket guide for asthma management and prevention. <https://ginasthma.org/gina-reports/>
- Ibarra, G. Z., Mellado, B. N., Molina, P. T., Bravo, C. C., & Pérez-Esquerria, P. R. (2023). DRESS syndrome due to iodinated contrast media. A case report. *Allergy Asthma and Clinical Immunology*, 19(1), 16. <https://doi.org/10.1186/s13223-023-00774-7>
- Koinis-Mitchell, D., Everhart, R. S., Huh, J., Zebracki, K., & (2023). Longitudinal pathways between asthma-related stress, coping, and adolescent adjustment. *Journal of Adolescent Research*, 39(2), 119–149. <https://doi.org/10.1177/07435584221110632>
- McTague, K., Prizeman, G., Shelly, S., Eustace-Cook, J., & McCann, E. (2022). Youths with asthma and their experiences of self-management education: A systematic review of qualitative evidence. *Journal of Advanced Nursing*, 78(12), 3987–4002. <https://doi.org/10.1111/jan.15459>
- Naeem, M., Ozuem, W., Howell, K., & Ranfagni, S. (2023). A Step-by-Step process of thematic analysis to develop a conceptual model in qualitative research. *International Journal of Qualitative Methods*, 22. <https://doi.org/10.1177/16094069231205789>
- Nagase, H., Ito, R., Ishii, M., Shibata, H., Suo, S., Mukai, I., Zhang, S., Rothnie, K. J., Trennery, C., Yuanita, L., & Ishii, T. (2023). Relationship between Asthma Control Status and Health-Related Quality of Life in Japan: a Cross-Sectional Mixed-Methods Study. *Advances in Therapy*, 40(11), 4857–4876. <https://doi.org/10.1007/s12325-023-02660-5>
- Patton, C. (2020). Understanding the qualitative research method of descriptive and interpretive phenomenology. <https://www.growkudos.com/publications/10.1177%252f0898010119882155/reader>

- Roy, S. R., & Milgrom, H. (2003). Management of the acute exacerbation of asthma. *Journal of Asthma*, 40(6), 593–604. <https://doi.org/10.1081/jas-120018776>
- Salazar, M. A. (2020). Syndromic surveillance for governance in health emergencies and disaster risk management in the Philippines. [Doctoral dissertation, Ruprecht-Karls-Universität Heidelberg]
- Schneider, T., Wolgemuth, J. R., Bradley-Klug, K. L., Bryant, C. A., & Ferron, J. M. (2022). Perceptions of school life and academic success of adolescents with asthma. *Journal of Adolescent Research*, 39(5), 1358–1383. <https://doi.org/10.1177/07435584221110632>
- Sloand, E., Butz, A., Rhee, H., Walters, L., Breuninger, K., Pozzo, R. A., Barnes, C. M., Wicks, M. N., & Tumiel-Berhalter, L. (2020). Influence of social support on asthma self-management in adolescents. *Journal of Asthma*, 58(3), 386–394. <https://doi.org/10.1080/02770903.2019.1698601>
- Tanay, M. A., Quiambao-Udan, J., Soriano, O., Aquino, G., & Valera, P. M. (2023). Filipino nurses' experiences and perceptions of the impact of climate change on healthcare delivery and cancer care in the Philippines: a qualitative exploratory survey. *Ecancermedicalscience*, 17. <https://doi.org/10.3332/ecancer.2023.1622>
- Velsor-Friedrich, B., & Hogan, N. S. (2021). Being Unprepared: A Grounded Theory of the Transition of Asthma Self-Care in College students. *Journal of Pediatric Nursing*, 61, 305–311. <https://doi.org/10.1016/j.pedn.2021.08.019>
- Volpato, E., Banfi, P., & Pagnini, F. (2023). The interaction between asthma, emotions, and expectations in the time of COVID-19. *Journal of Asthma and Allergy*, Volume 16, 1157–1175. <https://doi.org/10.2147/jaa.s418840>
- Wallace-Farquharson, T., Rhee, H., Oguntoye, A. O., Elder, J. H., Ezenwa, M. O., Fedele, D., Duckworth, L., & Wilkie, D. J. (2022). Adolescents' practical knowledge of asthma self-management and experiences in the context of acute asthma: a qualitative content analysis. *Journal of Asthma*, 60(2), 277–287. <https://doi.org/10.1080/02770903.2022.2045309>
- World Health Organization. (2024). Asthma. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/asthma>
- Yang, C., Chen, A., & Chen, Y. (2021). College students' stress and health in the COVID-19 pandemic: The role of academic workload, separation from school, and fears of contagion. *PLoS ONE*, 16(2), e0246676. <https://doi.org/10.1371/journal.pone.0246676>

9. Appendices



LC-REC Form #024
APPROVAL LETTER

REC Reference #: 2025-146

June 18, 2025

To: **Jeztine Nourrine Bil-Agon, Davy Klariss Dango, Kristine Elizabeth Fuerte, Johari Gonting, Rhoanne Kyle Jimenez, Raven Jay Lozano and Erica Picana**
LORMA Colleges, College of Respiratory Therapy

Subject: Approval of the Research Study "CHASING BREATH THROUGH THE MAZE OF ACADEMIA: LIVED EXPERIENCES OF HEALTH SCIENCES STUDENTS WITH ASTHMA" by the Research Ethics Committee (REC).

Dear Researchers,

The Research Ethics Committee (REC) has reviewed your application to conduct the above-mentioned research study in the LOCALE OF STUDY with you as the Principal Investigators within the duration of June 18, 2025 to June 18, 2026.

The Following documents have been reviewed and approved:

1. Letter of Intent to Conduct the Study
2. Endorsement of the Research Technical Panel
3. Title and Statement of the Problem/ Objective
4. Literature Review
5. Methods and Procedures
6. Population and Locale
7. Exclusion/Inclusion Criteria
8. Data Analysis
9. Ethical Considerations

We approved the study to be conducted in the presented form provided that *"in the Informed Consent Form, the end date should be included and state the ICF as if the researcher directly communicated with the participants"* will be integrated into the final research protocol.

None of the Investigators participating in this study took part in the decision making and voting procedure for this study.

The Institutional REC expects to be informed about the progress of the study, any revision in the protocol before implementation and participants'/respondents' information/informed consent. Likewise, you are required to provide the Board a copy of the final report.

Yours Sincerely,


RYAN JAY S. MORALES MASE, RMT
Interim Chairman, Lorma Colleges-Research Ethics Committee

10. Author(s) Biodata

Mr. Raven Jay A. Lozano, a graduating student under the Bachelor of Science in Respiratory Therapy from LORMA Colleges, leads a team of passionate peers alongside their research adviser, Mr. Maverick Kaypee A. Colet, EdD, MASE, PTRP., in describing the lived experiences of health sciences students with asthma. Together, they bring a rigorous, qualitative lens to a condition often underrepresented in academic discourse—exploring not merely the clinical manifestations of asthma, but its psychosocial, academic, and daily environmental impacts within the demanding context of health sciences education. Through purposive sampling and in-depth, semi-structured interviews, the research endeavors to capture the participants' subjective realities, focusing on how asthma shapes their classroom engagement, laboratory performance, clinical duty readiness, and social interactions. Thematic analysis is employed to identify recurring patterns of coping, support system utilization, self-advocacy, and institutional barriers. By centering the voices of nursing, medical technology, physical therapy, pharmacy, psychology, radiologic technology, and respiratory therapy students with asthma, the study aspires to contribute meaningful insights for inclusive policy formulation, reasonable academic accommodations, and heightened empathy among faculty and clinical instructors. Ultimately, the researcher's scholarly output seeks to bridge a gap between chronic illness management and health professions training, fostering an educational environment where respiratory well-being is recognized as integral to future clinical competence and compassionate care.