Saludamay

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Saludamay

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Saludamay is a term coined from the words "salud," which means health and "damay," meaning comforting help.

FOREWORD

"The reparative process which Nature has instituted and which we call disease, has been hindered by some want of knowledge or attention, in one or in all of these things, and pain, suffering, or interruption of the whole process sets in."

Florence Nightingale in "Notes in Nursing," 1859, London

Nightingale, the founder of modern nursing, during her time had already acknowledged the need for research in patient care. She did not only rely on the present knowledge but rather took note of positive patient outcomes during illness after significant innovations were instituted. The pathophysiology of diseases may not be that clear a century and a half ago, but she did encourage nurses to query as to why the symptoms occur. She then thought of nursing interventions that are appropriate to specific illnesses. She was into prevention of illnesses, noting the influence of the environment in which people work and live in the occurrence of diseases.

She urged nurses to provide physicians with "not your opinion, however respectfully given, but your facts." Likewise, she advised that "if you cannot get the habit of observation one way or other, you had better give up the [idea of] being a nurse, for it is not your calling, however kind and anxious you may be."

Nightingale's adherence to the three pillars of nursing; 1) Patient care, 2) Resourcefulness, and 3) Research made her the founder of modern nursing.

Nursing interventions were planned from keen observations of the symptoms resulting from the disease process and utilized the resources which the home or the hospital had. Such interventions were derived from her critical analyses of the environment which contributed to the patient's condition.

Like Nightingale during her time, nurses of today must continue the Quest for new knowledge and skills on how to nurse patients to health, especially in these times when new diseases have came to life, when new strains of microorganisms have mutated that the previously effective penicillins and sulfonamides have become useless. But this knowledge can only be passed on to the next generation of nurses if we have efficient, competent, and supportive teachers.

This second issue of SALUDAMAY consists of the Research Outputs from the faculty members and students of the AQ College of Nursing and Health Sciences. The faculty contributed their researches in Transformative Education and Community Health Nursing, and the students, on their perception of the University's Disaster Preparedness.

We thank the AQ Rector and President, Fr. Ramonclaro G. Mendez, O.P. for his encouraging words to the faculty and students; the support of Prof. Rose Barquez, Vice-Rector for Academic Affairs, the efforts of Prof. Alvin Sario, the University Research Coordinator, and Simon S. Listana for going through the manuscripts. The college is fortunate for having Prof. Annie Bailon, the college research coordinator, for her strong determination to come up with this new issue of the Saludamay.

Dean Vicente B. Peralta
09-09-2009

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THE DEFECATION PRACTICES OF SELECTED COASTAL BARANGAY RESIDENTS IN LEGAZPI CITY: IMPLICATIONS TO CULTURE CARE

Lorenzita L. Tamor

This study tried to probe the sanitation situation of urban and rural coastal barangay dwellers. These people live within a social environment, hence, their health is affected by everything they interact with. In this regard, health is taken to be the complete physical, mental, and social being not merely the absence or occurrence of disease or infirmity. It reflects concern for the individual as a total person functioning physically, psychologically, and socially. It also includes his/her relationship with his/her own self and the other things and, people around him/her.

The specific health care practice which the researcher focused on was the defecation practices of individuals in selected shoreline communities. Defecation refers to fecal elimination or bowel movement. Fecal elimination is properly done in a private, secured, and confined place where the degree of contamination is completely eliminated. Such confines are called toilets, comfort rooms, or restrooms.

This study identified the defecation practices of the residents in the coastal barangays of San Roque, Baybay, and Pigcale in Legazpi City. The researcher also determined the reasons for such practices of defecation of the local dwellers and identified related health care needs and possible intervention programs that may help in the promotion of proper and sanitary defecation practices.

Specifically, the study sought to answer the following questions: 1) What are the defecation practices of the residents of the selected coastal barangays? 2) What are the contributing factors to the defecation practices? 3) What are the perceived problems relative to toilet practice? 4) What are the implications on the health of the residents of the coastal barangays? and 5) What nursing intervention strategies may be recommended to address the problems related to defecation practices?

This study was a descriptive research, the purpose of which was to describe the nature of an existing social concern. Purpose was recognized as the controlling force in decisions about design, measurement, analysis, and reporting. The design was appropriate because the main focus of the study was determine the defecation practices of the residents of selected coastal barangays and the perceived problems related to such practice.

The qualitative method was chosen to gain valuable insights into the existing behaviors and the reasons why. This method was more appropriate in producing information on culturally sensitive issues or behaviors as well as studying the determinants of those behaviors.

The primary sources of data were the key informants chosen to be members of the focus group discussion process. The data were solicited through discussions, reactions, and interactions among the members of the group. An unstructured interview with the Barangay Health Workers was used to cross check the information provided during the focus group discussions.

The key informants of the study were the members of the focus groups and the interviewees. There were three (3) focus group discussions conducted representing the three coastal barangays namely, San Roque, Baybay, and Pigcale. Each focus group was composed of at least eight (8) members. The breakdown of the composition of the key informants for each focus group is as follows: one (1) each coming from the following sectors: youth, adult

male, adult female, old residents, and three to five Barangay officials. The names of the group members were identified through the help of the head councilor of the committee on health of the Barangay council.

The instrument used in the study was an interview/discussion guide consisting of ten questions. These questions covered the issues involved in the problems of the study. Inquiries were made on 1) the status quo of sanitation practices of the residents, 2) the health care delivery system in their locality, 3) the identified unhealthy practices, 4) the infectious diseases prevalent in the community, 5) the presence of sanitation facilities, 6) the perception of the informants regarding the behavioral bases of unsanitary practices, 7) the felt needs of the informants in curtailing unsanitary defecation practices, 8) the problems related to toilet practices, 9) the implications of such practice on health of residents, and 10) remedial measures to correct unsanitary defecation practices.

The data gathered which were recorded on tapes were transcribed and guided by the written notes of the researcher while in the process of the interviewing and conducting the focus group discussion. The organization of the transcribed data was according to information that would correspond to the answers sought to the stated problems of the study. Key concepts were highlighted in the transcripts. Color coding of topics facilitated the organization. Implications of the information obtained from the responses were guided by the data obtained from the interviews and focus group discussions. Since qualitative studies do not specially demand representativeness of the research participants, no generalizations were needed.

The study revealed the following findings:

1. The most common areas (sites) to defecate were the seashore, open space, dug on ground and open pit. In removing the excreta, the most common choices are wrap and throw to the sea, chamber pots, and bury on the ground.

2. Some residents resorted to unsanitary defecation practices due to lack of toilets either in their own houses or in the community. The inability to have their own toilet or to construct public or communal toilet was due to lack of funds. Poverty situation induced the residents to resort to unhygienic practices. Cultural values and social factors were invoked in defecation practices to explain the reasons of doing socially unacceptable practices.

3. The key informants were aware that their unsanitary toilet practices contributed towards the frequent health problems of their children. The most common among the health problems were such diseases as diarrhea, LBM, and skin diseases.

   Other problems mentioned like indolence in observing personal hygiene, ignorance of consequences towards initiatives for change, and poverty were attitudinal in nature.

4. The implications of the defecation practices to health of the residents of coastal barangays are the following:

   a. Beliefs and practices relating to health are central features of cultural life. Personal, educational and socio-economic factors may influence illness and health.
   b. The unsanitary defecation practices would endanger the health of the residents of the barangays especially the children, women and those people with low immune system.
   c. The health sanitation in their areas was far from meeting the norms of healthy living and healthy lifestyle.
   d. Health problems are cultural phenomena. They are found in people's living and working conditions (socio-economic status, gender position) and lifestyles (behavior). Poverty is associated with many diseases. Women were particularly vulnerable due to both

their pregnancy and childbearing, and their position in the society.

e. This study will broaden the knowledge of those concerned about health. The ill health that was caused by unsanitary practices was viewed by coastal dwellers as illness since pains and discomforts were experienced by residents, mostly children. Whether or not these dwellers were knowledgeable about how much illness were attributable to the cause they have perceived could be questioned.

f. The realization that the origins of ill health could mainly be located within the individual, that the responsibility for the illness falls mainly on the patient, either due to incorrect behavior or lack of economic resources, or could be a result of personal vulnerability. The causes of an illness can also be attributed to the surroundings/environment or the natural world.

5. The nursing intervention strategies recommended to address the problems related to defecation practices were conducting information campaign by giving regular lectures about proper sanitation and health-related issues during barangay assemblies, helping in the conduct of a regular medical mission, conducting regular health monitoring among the residents especially children and deworming activity, helping the residents to source fund from the local government unit and non-government organizations (NGOs) to help the community construct additional public toilets or rehabilitate the existing communal toilet, organizing core group in the community that will spearhead projects that will motivate the residents to adopt sanitary defecation practices, and promoting the use of Participatory Hygiene and Sanitation Transformation (PHAST) approach by community groups to discover for themselves the fecal-oral contamination routes of diseases and plan how to block these contamination routes.

Based on the findings, the following conclusions were made:

The defecation practices of the residents in the coastal barangays were unsanitary.

1. Some residents resorted to unsanitary defecation practices because they lack sanitary alternatives due to lack of financial resources. Their unacceptable defecation practices could be due to cultural values and social factors.

2. The unsanitary toilet practices contributed to the frequent health problems of children. Attitudinal problems may also be associated with unsanitary toilet practices.

3. The findings of the study will have implications on the beliefs and practices relating to health of the residents of the coastal barangays. The health sanitation especially the defecation practices in their areas does not meet the norms of healthy living and healthy lifestyle; hence they could be vulnerable to fecal-borne diseases. Their cultural values may also prove as a hindrance to achieving healthy lifestyle. Adequate knowledge about how much illness is attributable to the cause they have perceived can help them subscribe to sanitary practices and achieve a clean environment.

4. There are nursing intervention strategies that could be recommended to address the problems related to defecation practices. Such strategies include conducting information campaign, helping in the conduct of a regular medical mission, and health monitoring and deworming activities, helping the residents to source fund for the construction of additional public toilets or rehabilitation of the existing communal toilet, organizing a core group in the community and promoting the use of Participatory Hygiene and Sanitation Transformation (PHAST) approach by community groups.

The following are the recommendations of the study:

1. The national government should ensure that hygiene promotion be founded alongside sanitation in a well-balanced program. It should support reviews of technical norms and standards, of planning regulations and of the health impacts associated with different options; fund research into appropriate technologies; and provide incentives for local governments to review their own policies and to innovate health education, especially concerning sanitation and hygiene, by incorporating it into the school curricula from elementary to tertiary level.

2. The local government should appropriate part of their Internal Revenue Allotment (IRA) to hygiene promotion and sanitation marketing; review and revise planning regulations and technical norms and promote the use of appropriate sanitation facilities.

3. The communities and civil society should develop their own local technological solutions which are flexible and can provide balance between personal needs (disposal of excreta whatever defecating is done) and community needs (protecting the communal environment; and participating in hygiene promotion and sanitation marketing campaigns).

4. The households must learn to adopt good sanitation and hygiene practices; innovate and take actions about solving local problems; and encourage local political representatives and barangay officials to look into and support locally developed solutions.

5. The entrepreneurs should invest in research and development; carry out needs assessment and marketing research; find out as to what extent people may be using crude technology and develop better version; and develop products and services that comply with national and local legislations and regulations.

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RAISING THE LEVEL OF COMPETENCIES OF THE LEVEL IV STUDENTS OF THE COLLEGE OF NURSING AND HEALTH SCIENCES OF AQUINAS UNIVERSITY OF LEGAZPI

Ma. Pamela M. Sorra-Viñas

The study determined the level of competencies of the Level IV nursing students of Aquinas University of Legazpi. Through this, programs to address the issues related to the eleven key areas of responsibility have been identified.

The following sub-problems were given solutions: (1) What are the levels of competencies of Level IV students, as assessed by them and the clinical instructors in each of the following areas: a) Safe and quality nursing care, b) Communication, c) Collaboration and teamwork, d) Health education, e) Legal responsibility, f) Ethico-moral responsibility, g) Personal and professional development, h) Records management, i) Management of resources and environment, j) Quality improvement, and k) Research? (2)What are the identified issues along the eleven key areas of responsibility? (3) What specific programs may be recommended to raise the competencies of the Level IV?

Several individuals and organizations were identified to benefit from this study. The study used descriptive method of research. It made use of three theories, namely, the Theory of Hierarchical Relationships, which presents that the foundations of the individual are based on traits and characteristics; Benner's Stages of Clinical Competence, which posits that in the acquisition and development of skills, a student passes through five levels of proficiency:

novice, advanced beginner, competent, proficient, and expert; and the Theory of Learning which explains that in order for a person to achieve full learning, he must understand the essential elements of learning.

A quantitative approach was used to employ the survey method of gathering primary data through questionnaire-checklist.

Secondary data were gathered from various documents such as publications, manuals, magazines, unpublished theses and dissertations. The Internet Websites were also tapped specially for the foreign-related literature. Frequency count and weighted mean were used in the computation of data. The following range was recommended by the researcher's statistician: 1.00-1.79, not competent; 1.80-2.59, less competent; 2.60-3.39, competent; 3.40-4.19, very competent; 4.20-5.00, highly competent.

The findings of the study were as follows:

1. The level of competencies of the Level IV students, as assessed by the students are as follows: Safe and quality nursing care, 3.73 or very competent; Communication, 3.83 or very competent; Collaboration and team work, 3.99 or very competent; Health education, 3.73 or very competent; Legal responsibility, 3.98 or very competent; Ethico-moral responsibility, 3.94 or very competent; Personal and professional development, 3.93 or very competent; Records management, 3.97 or very competent; Management of resources and environment, 3.92 or very competent; Quality improvement, 3.79 or very competent; and Research, 3.76 or very competent.

   The level of competencies as assessed by the clinical instructors are as follows: Safe and quality nursing care, 3.31 or competent; Communication, 3.58 or very competent; Collaboration and team work, 3.62 or very competent; Health education, 3.44 or very competent;

legal responsibility, 3.54 or very competent; Ethico-moral responsibility, 3.58 or very competent; Personal and professional development, 3.54 or very competent; Records management, 3.37 or competent; Management of resources and environment, 3.53 or very competent and Research, 3.28 or competent.

2. A range of issues related to the eleven key areas of responsibility have been identified. These issues concern the students, the clinical instructors, the subject content and many others that may positively or adversely affect the competencies of the students.

3. Taking into consideration the findings on the level of competencies of the Level IV students by the students and the clinical instructors, this study recommends the PAM Nurse (Proficient, Affirmative and Munificent Nurse) program, a competency-based instructional program that would develop balanced competencies among students as they prepare for nursing practice. The College of Nursing and Health Sciences should gear toward raising the competencies of the students. Knowledge, skills and attitude should be balanced to raise a proficient, affirmative, and munificent nurse.

The following are the conclusions of the study:

1. The levels of competencies of the Level IV students as assessed by them, along the 11 competencies identified by the CHED are VERY COMPETENT. For the clinical instructors, the Level IV students are VERY COMPETENT except in Safe and quality nursing care, records management, and research, which were rated competent.

2. There are a range of issues in each key area of responsibility.

3. An action plan is recommended to become the tool of the College of

Nursing and Health Sciences towards implementing nursing education programs.

Finally the study forwarded the following recommendations:

1. There should be a balance of emphasis among the 11 competencies of the students.

2. The College of Nursing and Health Sciences should raise the level of competencies of the students by addressing the different issues determined by this study.

3. The program proposed in this study should be adopted by the college with the goal of raising the level of competencies of the Level IV students.

Areas for Further Studies

The following areas are recommended for further study:

1. Replication of the same study in the other schools of nursing.

2. Significance of general education subjects to the Level IV nursing students

3. Competencies of Aquinian nurses as assessed by their employers.

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SELF-PERCEPTION ON AGING AND THE PSYCHOSOCIAL STATUS OF RETIRABLE TEACHERS IN THE TERTIARY PRIVATE SCHOOLS OF METRO LEGAZPI

Ma. Teresa S. Nicomedes

Human aging is the sum total of all experiences and adaptations that a person undergoes from conception to death. Along with these changes is the complex process of development, maturation, and attainment of wisdom. Different people view aging in different ways. The youth may regard it as a distant phenomenon, but for the elderly it is a reality.

This study aimed to determine the relationship between the self-perception on aging and the current psychological status of the retirable teachers in tertiary private schools in Metro Legazpi. Specifically, it sought answers to the following questions: 1) What is the demographic profile of the respondents in terms of age, sex, marital status, number of children, number of years in the teaching profession, health condition, and religious practices? 2) What is the self-perception of aging of the respondents along a) psychological aspects; and b) social aspects? 3) What is the psychological status of the respondents? 4) Is there a significant relationship between the self-perception of aging and the psychological status of the respondents? 5) What measures may be proposed to enhance a) positive self-perception on aging, and b) psychological status?

The study was anchored on the psychosocial theory of personality development of Erickson, the attribution theory, and the self-perception theory, and

made use of questionnaire-checklist as its main data gathering instrument. Forty-eight (48) retirable teachers from tertiary private schools of Metro Legazpi were the respondents of the study.

Analysis of the gathered data revealed the following information.

Majority of the respondents belong to age range 55-60 years old; seven (7) belong to 60-65 and five (5) were from 66-70 years of age. Thirty (30) of the respondents were female and eighteen (18) were male. Majority of the respondents were married: seven (7) were single, five (5) were separated and six (6) of them were widow. Thirty-five (35) of the respondents have one to three (1-3) children, nine (9) do not have children, while four (4) have four to six (4-6) children. Twenty (20) of the respondents have been teaching for more than 21 years; eleven (11) have been in the teaching profession for 11-15 years; nine (9) have been teaching for 16-20 years while eight (8) have been teaching for five to ten (5-10) years. As to their health status, thirty-three (33) of them seldom got sick, ten (10) suffered one (1) or more age related illnesses, while five (5) experienced life threatening illness. Majority or thirty-two (32) of the respondents go to church every Sunday, thirteen (13) or go to church three (3) or more times per week, while three (3) revealed that they seldom or never go to church.

Forty-five (45) or majority of the respondents have a positive self-perception on aging along psychological aspect, while only three (3) of the respondents show a negative self-perception of aging on psychological aspect. Forty (40) of the respondents have positive self-perception on aging along social aspect while only eight (8) have negative self-perception on aging along the social aspect.

Along generativity, the respondents have "fully achieved" the psychosocial status in finding pleasure in generativity and recognition in work; acceptance and adjustment to changes of middle-age; taking pride in the accomplish-

ments of self and/or spouse; balancing work with other roles; and helping growing and grown up children become happy and responsible adults. "Moderately achieved" were the psychosocial status on developing a sense of intimacy and abide intimacy with mate; socialization with old and new friends; use of leisure time; achieving social and civic organization membership; role reversal with parents' loss; developing or maintaining active organization membership and the least was preparing for retirement.

On ego integrity, the respondents have "fully achieved" the psychosocial status on continuing support, close and warm relationship with significant others, including a satisfying sexual relationship; satisfactory living arrangements - safe, comfortable household routine; maintaining maximum level of self-health care and pursuing old and new interests. They "moderately achieved" psychosocial status in deciding how and where to live for their remaining days; maintaining interests in people outside the family; maintaining social, civic and political responsibilities; finding meaning in life after retirement; facing inevitable illness and decline of the usual strength; formulating a philosophy of life; confronting inevitable death of self and significant others and the least is adjusting to death of spouse and loved ones.

There is a positive moderate correlation (r = 0.320731) and significant relationship ($t_{computed}$ = 2.299 > $t_{critical}$ = 2.021) between self perception of aging and the psychological status of the respondents at 5% level of significance with 46 degrees of freedom.

The respondents revealed three (3) measures to be the most important in enhancing positive self-perception on aging and psychosocial status: the most preferred were to gain respect and recognition from younger generation; spending more time with family; and, to get active support from the family, community and government. The least considered measure was to entertain positive stereotype of aging.

Conclusions

In the light of the foregoing findings, the following conclusions were drawn:

1. The respondents have varied demographic profile. However, majority of the respondents are female, married, and have one to three children; seldom get sick; go to church every Sunday, and had more than twenty years of teaching.

2. The respondents have either a positive or negative self-perception on aging along psychological and social aspects, but majority have positive self-perception.

3. The respondents have varied psychosocial status of aging, but majority have "moderately achieved" psychosocial status.

4. The self-perception on aging of the respondents has a significant relationship with their psychosocial status.

5. There are measures to enhance positive self-perceptions on aging.

Recommendations

Based on the findings and conclusions of the study the following recommendations were made:

1. Retirables should maintain their positive outlook in life despite declining physical health. Dedication to work is good, but they should observe moderation in everything they do to balance work, family, leisure and socialization time.

2. Family members should be sensitive to the needs and understand

the changes that the retirables are going through. Physical, mental, and emotional deterioration may be evident to certain degrees but the need for family love, care, and attention is still immense.

3. Recognition of and respect for elders as values should be reinforced in the minds of the younger generation in their homes, classrooms, as well as in the workplace.

4. Policy makers should improve existing programs and policies for the elderly especially on health and social benefits. They can devise strategies to meet the needs of retirees but at the same time without neglecting the needs of elderly who are not working at all. Educational planners should incorporate in values education positive image of aging, gratitude, respect, and honor for the elderly. Health planners should make it mandatory that hospitals should have special units for the elderly.

5. Human resource officers should design a program for the retirables to help make this major transition less stressful.

6. Administrators of Colleges of Nursing should recognize that retired hospital/community nurses are still valuable source of manpower in nursing education. Enhancement of knowledge, attitude, and skills in caring for older people can be included in the educational program.

7. Recommendation for further studies:

   a. A follow-up study on the retirables after they formally stop working.
   b. In depth study of factors that may have contributed to positive or negative self-perception on aging.
   c. Similar study on non-working/non-professional elderly.

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PERFORMANCE OF HIRED CLINICAL INSTRUCTORS IN FOUR GOVERNMENT AFFILIATE HOSPITALS

Yolanda M. Peña

This study was conceptualized to analyze the level of performance of hired Clinical Instructors in four government affiliate hospitals where Aquinas University College of Nursing Health and Sciences is exposing the nursing students for their Related Learning Experience (RLE). These hospitals are: Bicol Regional Training and Teaching Hospital (BRTTH), Dr. Fernando Duran Sr. Memorial Hospital (DFDSMH), Ziga Memorial District Hospital (ZMDH), and Josefina Belmonte Duran Memorial Hospital (JBDMH). Specifically, this study sought to know: 1) the level of performance of hired Clinical Instructors along a) imparting knowledge, b) developing skills, and c) instilling attitude; 2) the factors affecting the performance of hired Clinical Instructors as perceived by the respondents in terms of a) personal, b) educational preparation, c) work experience, and d) environmental factor; 3) the problems experienced by. the respondents in relation to their Clinical Instructor's performance of a) instructional role, and b) faculty role and individual roles; and 4) the measures to improve the performance of the hired Clinical Instructors.

The descriptive survey method utilizing questionnaire-checklist was its main data gathering instrument. There were 180 respondents of this study, 54 Level III and 126 Level IV nursing students who have been supervised by hired Clinical Instructors for at least three times in any of the four government affiliate hospitals.

This study was anchored on the theories of Benner and Dreyfus supported by the theory of Klaussmeir. The theory of Benner from Novice to Expert; by Dreyfus Skill Acquisition and Skill Development; and by Klaussmeir, the Theory of Transfer and Relention.

Analysis and interpretation of data gathered were presented to further understand this study. Analysis of the gathered data revealed the following informations:

The level of performance of hired Clinical Instructor as perceived by the respondents along imparting knowledge was rated satisfactory with a weighted mean of 3.44. Ranked first was in utilizing effective communication skills in dealing with students. The second rank was assisting students in establishing nursing diagnosis. The third in rank was explaining scientific rationale for different procedures/interventions. Among these skills was in reviewing students on the theoretical foundation of nursing practice that got a weighted mean of 3.27, interpreted as satisfactory.

On the level of performance of hired Clinical Instructor along developing skills, the overall mean got was 3.62, interpreted as very satisfactory rating. Ranked first was on promoting safe and pleasant environment to prevent injury and accident to self, client and significant others with a weighted mean of 3.72, rated as very satisfactory. The second in rank was utilizing varied available resources in rendering care with a weighted mean of 3.69, interpreted as very satisfactory. And the third was in guiding the students in implementing interventions and new procedures with a weighted mean of 3.66 interpreted as very satisfactory.

On the level of performance of hired Clinical Instructor along instilling attitude had an overall mean of 3.65, rated as very satisfactory. Ranked first was in conducting self on a professional manner with a weighted mean of 3.73 interpreted as very satisfactory. Second was in receiving and dismiss-

ing students on time with a weighted mean of 3.68, with a very satisfactory rating. And third was in demonstrating responsibility and professional decorum with patients colleagues and students in all clinical undertakings. It was in respecting student's rights and considering individual differences that got a weighted mean of 3.31, interpreted as unsatisfactory rating.

The personal factors of the Clinical Instructor were the age, sex, civil status, number of children, monthly income, status of employment, health status and residence from the hospital, believed to affect the performance of hired Clinical Instructors. The educational attainment, work experience and environmental factors likewise affect the performance.

There were problems experienced by the respondents in relation to the performance of hired Clinical Instructors. These were on the instructional roles, faculty roles and individual roles. Measures were identified to improve the performance of hired Clinical Instructors.

The foregoing findings lead to the following conclusions:

1. Hired Clinical Instructors performed very satisfactorily in delivering their functions.

2. There were factors that affect the performance of hired Clinical Instructors; these are mostly personal in nature.

3. There were problems experienced by the respondents with their Clinical Instructors in the performance of instructional roles, faculty roles and individual roles.

4. Measures to improve the performance of hired Clinical Instructors were cited.

The deans of the colleges of nursing, school administrators, hospital administrators and the chief nurses of the nursing service department, and the Department of Health officials should consider the following recommendations to help improve the performance of hired Clinical Instructors:

1. The chief nurses of the nursing service department must encourage the hired Clinical Instructors to attend preceptorship trainings with the permission of the hospital administrators. Likewise, commitment to service should be inculcated to these hired Clinical Instructors.

2. The deans of the colleges of nursing should require the hired Clinical Instructors to submit certifications of seminars attended related to nursing education, and the certificate of the preceptorship training. The hired Clinical Instructors must also, attend regular meetings and conferences called upon by the deans for feedbacking. The deans should instruct the clinical coordinators of the college to coordinate with the classroom teachers and hired Clinical Instructors with what has been discussed in the classroom for proper assigning of patients to students.

3. The Department of Health officials should look into the welfare of the staff nurse before they are given the permit to follow-up students as hired Clinical Instructors.

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COMMUNITY PROFILES OF ADOPTED BARANGAYS OF A COLLEGE OF NURSING: BASIS FOR ACTION PLAN

Elvisa B. Espares

Statement of the Problem

1. What is the vital statistics of the adopted barangays of the College of Nursing and Health Sciences of Aquinas University of Legazpi in terms of:
   a. crude birth rate,
   b. crude death rate, and
   c. marital status?

2. What is the health statistics of the adopted barangays of the College of Nursing and Health Sciences of Aquinas University of Legazpi in terms of:
   a. common diseases suffered,
   b. mortality,
   c. incidence rate, and
   d. prevalence rate?

3. What is the demographics of the adopted community of the College of Nursing and Health Sciences of Aquinas University of Legazpi in terms of:
   a. family size,
   b. family structure,
   c. employment,
   d. housing,

　　　e. education attainment, and

　　　f. income?

　　4. What action plan may be developed to have an effective community health nursing program?

Scope and Delimitation

This study is centered on the three adopted barangays of the College of Nursing and Health Sciences of Aquinas University of Legazpi. These barangays are the following: Barangay Uno (1), Barangay Katorse (14), and Barangay Hindi all located in Bacacay, Albay. The latest recorded populations of these three barangays are 1,001, 1,158 and 3,103, respectively.

Only the community profile of the three adopted barangays in terms of vital statistics, health statistics, and demographics of the population served as bases of the action plan developed for the Community Health Nursing Program of the College.

Significance of the Study

Future nurses as part of their training are obliged to apply all aspects of care to their patients, not only to a hospital field, but as well as to a community setting. This research work is deemed to provide benefits to the following:

Nursing Students. Since flexibility is one of the traits that nursing students must possess, this study will help neophyte nurses adjust to community service as one of the core jobs of nurses.

Clinical Instructors. This study will also guide the clinical instructors on the proper management and supervision of nursing students in community health services.

College of Nursing Administrators. The findings of this study will serve as a baseline data in making strategic plans or action plans concerning the health problems of the community.

Academic Community. The results of the study will provide the members of the academic community with comprehensive and unbiased information about the health needs of rural communities.

Department of Health. The findings of the study may help the concerned personnel of the department to identify community health priorities.

Future Researchers. The results of the study may provide literature to future researchers on similar studies that may be conducted.

Research Design

This study employed the descriptive methods of research to problems advanced in the study. The descriptive type of research was utilized to assess the health needs of the adopted barangays of the College of Nursing and Health Sciences of Aquinas University of Legazpi to provide basis for developing an action plan for the community health program of the College. The study presented the data in graphical, tabular, and textual forms.

Locale and Population

The population of the study consisted of the 5,262 residents of the three adopted barangays in Bacaycay, Albay namely: Barangay Uno (1), Barangay Katorse (14) and Barangay Hindi. There were 110 households in Barangay Uno, 95 in Barangay Katorse and 88 in Barangay Hindi. All the 293 heads of families or hoseholds were used as respondents of the study.

The study had two sources of data: primary and secondary. The primary

sources of data were the responses of the heads of families as respondents which provided information on the demographics and the documents furnished by the Rural Health Workers which provided information on the vital and health statistics of the barangays. The secondary sources of data were the theses, dissertations, books, and articles in the internet used as related literature and studies.

Research Instrument

The instrument that was used in this study was an interview guide for the respondents. It consisted of a checklist intended to obtain information about the demographics which consists of family size per household, structure and dynamics of human populations, including socio-economic factors such as employment, housing, education and income. The documents requested from the Rural Health Workers contained the vital statistics which consists of births, deaths, and marital status, and the health statistics which consists of health conditions, data on morbidity, mortality, incidence (number of new cases for a specified population at a given point in time) and prevalence (total number of cases in a specified population at a given point in time).

Validation of the Instrument

The reliability of the questionnaire was ascertained by conducting a dry run. The questionnaire was pilot tested to ten residents from other barangays which were not involved in the study but reside in the communities where the students of the College of Nursing and Health Sciences of Aquinas University of Legazpi also conduct their community health care nursing. The suggestions and recommendations forwarded regarding some changes in the format of the questionnaire were considered. Also, three experts in the field of nursing who had finished their doctorate degrees were requested to test the content validity of the questionnaire to eliminate ambiguities and correct any hidden defect.

Data Gathering Procedure

The data gathering process started after the finalization of the instrument. Consents from the barangay chairmen and rural health unit were secured to get the needed data. The researcher personally requested the documents containing the needed data from the Rural Health Workers and interviewed the respondents. The data were then tabulated, interpreted, and analyzed.

Statistical Treatment of the Data

In the analysis and interpretation of the data, the frequency and percentage were used.

1. A frequency distribution is a tabular summary of a set of data showing the frequency (or number) of items in each of several non-overlapping classes. Frequency was used in order to determine the number of respondents who rated the items provided by the questionnaire according to their frequencies, which is done by one-on-one counting.

2. Percentage distribution was used to describe the ratios between the frequency (f) of the respondents to the total number of respondents (N) multiplied by 100 expressed in percent (%).

Findings

Based from the data gathered the following conclusions were derived:

1. There is a decrease in birth rate from year 2005 to 2007 by about 0.55 percent but an increase in the death rate from 2005 to 2007 by about 0.86 percent. As to marital status the respondents preferred to be married rather being separated or single parent.

2. The health statistics of the adopted communities of College of Nursing and Health Sciences of Aquinas University of Legazpi in terms of diseases or health conditions shows that the leading common diseases suffered by different groups in the barangays are as follows: for adult, tuberculosis; and infant, toddler and children in general, diarrhea.

3. In adults the leading cause of death is tuberculosis and hypertension while in the infant, toddler and children groups the leading causes of death are pneumonia and diarrhea incidence (number of new cases for a specified population at a given point in time) and there is a greater incidence and prevalence of heart attack in the adult group, wound infection in both infant and toddler groups and dengue in the children group.

   The family size (average number of children) is on the average of seven (7), houses are made of light housing materials and with family structure that is extended. The heads of the family are usually self employed and mostly high school graduates. The monthly income that they derived from fishing and farming is about Php 3,000.00.

4. An action plan was evolved with the following goals: to promote health and efficiency in the adopted communities through organized efforts that will help maximize their potential for high level wellness as well promote supportive relationship between the people and their physical and social environment, to provide a program of experience for nursing students in the delivery of community health care services and to provide a data base of the adopted communities for future in-depth studies and program development.

Conclusions

Based on the summary of findings, the conclusions drawn are the following:

1. There is a decrease in birth rate and an increase in the death rate from 2005 to 2007. As to marital status the respondents preferred to be married rather being separated or single parent.

2. The leading common diseases suffered by different groups in the barangays are as follows: for adult, tuberculosis; and infant, toddler and children in general, diarrhea.

3. The leading causes of death in adults is tuberculosis and hypertension while in the infant, toddler and children groups the leading causes of death are pneumonia and diarrhea. There is a greater incidence and prevalence of heart attack in the adult group, wound infection in both infant and toddler groups and dengue in the children group.

   The family size is big. They live in houses of light materials and with family structure that is extended. The heads of the family are usually self employed and mostly high school graduates. Their monthly income derived from fishing and farming is about Php 3,000.00.

4. The action plan was prepared based from the data on vital statistics, health statistics and demographics as an output of this research.

Recommendations

Guided by the findings and conclusions of the study, the following recommendations are offered:

1. The action plan designed for the Community Health Nursing of the

College of Nursing and Health Sciences of Aquinas University should be fully implemented.

2. An orientation program for nursing students and clinical instructors on the goals activities of the Community Health Nursing Programs of the College of Nursing and Health Sciences should be conducted.

3. An orientation program for the residents and officials of the adopted barangays on the goals activities of the Community Health Nursing Programs of the College of Nursing and Health Sciences should be conducted.

4. Linkages with government and non-government agencies should be established to secure manpower and financial support to designed programs.

5. A monitoring and evaluation schemes should be established to ensure proper implementation of the programs.

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DISASTER PREPAREDNESS OF EMPLOYEES OF AQUINAS UNIVERSITY OF LEGAZPI

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This study determined the different measures that the employees of Aquinas University of Legazpi utilize or make use of during disaster preparation. Specifically, it sought answers to the following questions: 1) What are the preparations made by the employees of Aquinas University of Legazpi in an upcoming disaster in terms of: a) Preservation of life, b) Preservation of properties? 2) What are the common problems encountered during conduct of preparation? 3) What measures may be proposed to enhance employees' knowledge and preparedness?

The study's research design or method is descriptive-evaluative. The questionnaire was the research instrument for gathering the necessary data. Its population was the teaching and non-teaching employees of Aquinas University of Legazpi, with 76 of them as the study's respondents. The data gathered were organized using frequency distribution and percentage.

Based on the data gathered, the findings showed the following:

1. In the disaster preparation done on the preservation of life, 68 or 89.47 percent of the respondents answered that students are informed and warned about upcoming disasters by employees; 55 or 72.37 percent of the total frequency answered that all employees

are informed and instructed about preparation conduct; 37 or 48.68 percent evacuate employees right on time; 60 or 78.94 percent send employees home safely; 52 or 68.42 percent answered that employees are updated about present situation; and 10 or 13.16 percent answered that all employees are provided with insurances for major losses. In the disaster preparation done on the preservation of properties; 67 or 88.16 percent of the respondents securely lock windows and doors; 64 or 84.21 percent keep pertinent records and file in lockers; 63 or 82.89 percent cover amenities and fixtures with plastic; 54 or 71.05 percent transfer office appliances to a more secure place; 43 or 56.50 percent reinforce windows and doors in the inside of the office; 25 or 32.89 percent take important files and keys home; 65 or 85.53 percent shut the power supply system in the office temporarily down; 31 or 40.79 percent repair or reinforce weak structures; 59 or 77.63 percent elevate lockers and compartments; 58 or 76.32 percent elevate office appliances on desks and tables; and 50 or 65.79 percent transfer important papers and paraphernalia on higher floors.

2. In the common problems encountered during disaster preparation; 39 or 51.32 percent of the respondents answered that there is not enough space in lockers and file holders for keeping files and records; 46 or 60.53 percent answered not all employees partake in the disaster preparation; 31 or 40.79 percent answered there are not enough resources to use in covering and shielding appliances, amenities, fixtures and other paraphernalia; 25 or 32.89 percent answered there is not enough room or space in higher floors for transferring office appliances and paraphernalia; 19 or 25 percent answered there is insufficient supply of materials for repairing or reinforcing weak structures; 24 or 31.58 percent answered procedures are not done very orderly; 25 or 32.89 percent answered not all students and employees are informed; 39 or 57.32 percent answered not all employees

are well-capacitated; 37 or 48.68 percent answered there are communication problems that interfere with information dissemination; and 26 or 34.21 percent answered evacuation of students and employees is not properly managed and done on time.

3. In the measures that may be proposed to enhance employees' knowledge and preparedness; 59 or 77.63 percent of the total frequency proposed ensuring sufficient supply of materials and resources useful in disaster preparation; 55 or 72.37 percent proposed development of programs for better or improved disaster preparation system; 58 or 76.32 percent answered create organizational disaster management systems in every department; 63 or 82.89 percent answered encourage involvement of students and staff employees in conducting disaster preparations and evacuation prompting; and 64 or 84.21 percent proposed setting up of programs and exercises that aim to improve or enhance disaster awareness and preparedness among employees and students.

Based on the preceding findings of the study, the following conclusions were drawn:

1. In terms of preservation of life, majority of employees inform and warn students about upcoming disasters, and in terms of preservation of properties, majority securely lock windows and doors.

2. The most common or frequent problem that the employees encounter during conduct of disaster preparation is the lack of or minimal manpower.

3. The involvement of both students and staff employees in disaster preparation and evacuation prompting is the frequently proposed measure in the disaster management of the University, while the de-

velopment of programs for better or improved disaster preparation system is the least frequently proposed measure.

Based on the conclusions, the following recommendations were derived:

1. The colleges and departments of Aquinas University of Legazpi should follow an implemented general rule in disaster preparation suitable to their type of environment (dimensions and physical structure of building, surrounding structures, and presence of accident hazards) in addressing the need for disaster mitigation for the preservation of life and properties.

2. Every department or college should train their staff employees or personnel in the conduct of disaster preparation in order to lessen or prevent delays and disorders in the process. It may be necessary that the administration assign tasks to the employees in every department.

3. The university administration, particularly the Disaster Management Team [*renamed Aquinas University of Legazpi Emergency Response Team or ALERT*], should organize and conduct activities that will encourage the involvement of students and staff employees in conducting disaster preparations and evacuation prompting. The need for disaster drills in every department and college is also indicated.

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THE DISASTER INFORMATION SYSTEM OF AQUINAS UNIVERSITY OF LEGAZPI

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This study determined the information dissemination system of Aquinas University of Legazpi City. Specifically, it sought answers to the following: 1) What is the Disaster Information System utilized by Aquinas University of Legazpi in terms of: Preparedness, Mitigation, Response and Recovery? 2) What is the degree of effectiveness of the Disaster Information System as perceived by the nursing students? 3) What are the problems encountered by the respondents in the operation of the Disaster Information System? 4) What possible solutions may be proposed to improve the Disaster information System of Aquinas University of Legazpi?

This study was anchored on the Laswell Model of one way communication process. The researchers used a descriptive-evaluative research design with the use of questionnaires. Respondents of the study consisted of the 94 students of the Aquinas University of Legazpi. There was a retrieval rate of 100 percent. Data gathered were subjected to analysis. Frequency count, percentage and ranking were the statistical tools used.

The findings of the study are presented on the basis of the data gathered from the respondents.

    1. The Aquinians had varied perceptions on the information dissemi-

nation system of the University. In terms of preparation, majority concurred that posting information in the bulletin boards and text messaging brigade were a much effective means of communicating a warning or a notice about the current and imminent event. On mitigation, the establishment of a Community system in different communities and partner communities was more helpful and had bigger advantages in mitigating lives of disaster struck individuals yet the result of evaluation revealed that each indicator was essential because of the close percentages of each initiators. In response and recovery, decision making for future events was essentially vital in every step in information dissemination and in disaster management.

2. Majority concluded that the main problem of the school was that students do not really listen to radio programs. They listened radio news programs and watched televised news programs. Along with this was the defective public address of the school which contributed to the lack of awareness of the current and imminent events.

3. In resolving such factors, majority concurred to the installation of an effective public address system that would be used for important announcements and would catch the students' attention and would relay the information more effectively and quickly.

4. Moreover, the information system being developed presently in the campus has to have a strong influence on the students that it could persuade them in participating and cooperating with the school's decision on any disaster or event. The development might take quite sometime to be fully functional. Student organizations have substituted the basis of information dissemination and most possess an effective means of information system.

Conclusions of the study based on the findings were the following:

1. The respondents have varied perspectives on the information dissemination process of the school. Nonetheless, in terms of preparedness, mitigation, response and recovery they shared and acknowledged different experiences that helped them in realizing the strengths and weaknesses of the information dissemination system of Aquinas University of Legazpi.

2. The respondents were also bothered by the problem in school in relation to information dissemination which was essential to each students, personnel, and employees in the school.

3. On the part of the students, the study shows that there was not enough time and importance given to news and current affairs.

4. The students were aware about the nonfunctional public address system in each classroom which did not communicate the information on the students. Thus, the premature organization built by the student organization was also a factor in information dissemination.

Recommendation based on the conclusions drawn, the following recommendations are hereby offered:

1. The result of the study could serve as a baseline information for the school's information dissemination system. The Nursing Student Council and the office of the Secretary General should provide a more systematic and more up to date information dissemination system. In terms of preparedness, mitigation, response and recovery, bulletin boards and media-related paraphernalia should be updated and enhanced. Collaborative efforts of the Nursing Student Council, its sub-organizations and the faculty and administration play a cru-

cial role in information dissemination; therefore, they should provide more emphasis on the imminent and current events in school, especially the weather conditions and disaster updates.

2. Directives from the administration for the students must be updated and improved internally and externally, so that confusion may be avoided. Billboards and slogans and other posters related to disaster awareness may be posted along the school premises.

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THE DISASTER PREPAREDNESS
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This study, "Disaster Preparedness of Aquinas University of Legazpi," is a descriptive research. Questionnaire is the primary instrument used in the research. From a total population of 363 personnel of Aquinas University of Legazpi, 78 samples were extracted using Slovin's formula and proportionate random sampling, of which 55 and 23 are holding Academics and Non-Academics respectively, with a retrieval rate of 100 percent. Frequency and weighted mean were the statistical treatment used in the analysis of data.

Specifically, it sought answers to the following questions: (1) What is the Aquinas University of Legazpi employees' level of awareness on disaster preparedness for a) earthquake, b) typhoon, c) fire? (2) What is the extent of availability of the support facilities to the basic services in terms of a) communication system, b) warning system, c) medical service, (d) firefighting service, and (e) transportation services? and (3) What nursing implications can be drawn from the findings of the study?

Based on the data analyzed, the following were the findings: (1) Aquinas University of Legazpi has a total population of 363 personnel, mostly comprised of teaching personnel or those belonging to academics. (2) The following are the degree of awareness undertaken by the personnel of Aquinas University of Legazpi during the following hazard: Earthquake - considered

moderately aware having a weighted mean of 2.69; Typhoon - considered much aware having a weighted mean of 3.03; and Fire - considered moderately aware having a weighted mean of 2.59. (3)The availability of the basic services as provided by Aquinas University to its personnel are as follows: For Communication system is considered much available with a weighted mean of 3.0, Warning system is considered less; available with a weighted mean of 2.11, Medical services is considered much available with a weighted mean of 3.23, Fire-fighting services is considered less available with a weighted mean of 2.20, and Transportation services is considered much available with a weighted mean of 2.81.

In the light of the findings of the study, the researchers were able to come up with the following conclusions: (1) Since most of the personnel of Aquinas University are from the Academics department and mostly well-educated, they are aware of the different hazards present in the environment both natural and man-made; (2) Typhoon is the most frequent natural hazard the personnel of Aquinas University of Legazpi are exposed too. They are much aware of it and of course, because of the most, recent devastation caused by typhoon Reming, personnel of Aquinas University have become very aware of this type of hazard. Earthquake and Fire, though are both present in the environment, are not frequently experienced by the personnel are moderately aware. Personnel awareness of such hazard is considered moderate.(3) Aquinas University of Legazpi aims to ensure the safety of its employees by making basic services available whenever the need arises in terms of communication system, medical services and transportation system. However, the school might have overlooked the warning system and fire-fighting services as these two services are less available.

Based on the findings and conclusions, the following recommendations are presented: (1) Technology and innovation may be the means to be more progressive but retention of traditional ways and means may also be equally important. Warning system should be enhanced; siren must be installed

because people are more familiar with such instrument to indicate hazard; (2) A water house should t also be available, although Aquinas University of Legazpi has employed professionals and skilled individuals, to shield the institution from fire and ensure safety of the buildings. This will also ensure safety of hundreds or even thousands of academic records; (3) The school should also provide earthquake and fire drill for its personnel; (4) Enhance emergency signals and signages within the school surroundings. (5) Conduct seminars and trainings sponsored by concerned agencies such as NDCC. (6) Further enhance disaster consciousness of its personnel by joining the Disaster Month Activities of the NDCC. It is worth reiterating this disaster consciousness month's theme, "Pag Alerto, Malayo sa Peligro." And as the highway billboard says,"The life you save may be yours."

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