

Community Health Needs Assessment of Barangay Lourdes, Buhi, Camarines Sur: A Basis For A Community Extension Program

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ABSTRACT:

The study assessed the community health needs of barangay Lourdes, Buhi, Camarines Sur as a basis for a community extension program. A community health assessment gives organizations comprehensive information about the community's current health status, needs, and issues. This descriptive research utilized 277 residents of barangay Lourdes, Buhi as the key informants of the study. The data were gathered through the modified questionnaire for Community Profiling and assessment and the Household Profiling form provided by the Department of Health. Percentage technique and weighted mean were used in analyzing the data gathered. Results revealed that mostly of the respondents are 41-50 years old, elementary graduate, skilled worker, lived in a semi-concrete type of dwelling, and deep well as the source of drinking water. Majority are female, with family monthly income of Php 5000- 15,000, and encountered cough and cold as their common health problems. Basic Life Support and First Aid training is the highly needed advocacy program and training needs of the respondents. Moreover, most of the respondents' environmental needs are protection from industrial hazards, pesticide, dust and herbal plants utilization. Along physical needs, regular medical check-up and dental care are highly needed; for psychological needs, enough rest and sleep and stress management are moderately needed; for social needs, economic stability is highly needed and for spiritual needs, strong faith in God to heal illness is highly needed. Training on basic educational skills and health literacy to enhance the understanding and contribute in having a more productive and decent work, and an income generating livelihood training may be conducted to augment their income to sustain their basic food and non-food needs are some of the recommendations of the study.

Keywords: Needs Assessment, Extension Program, Health Needs

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Introduction

A community health needs assessment refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data

collection and analysis. Community health assessments use such principles as multi-sector collaborations that support shared ownership of all phases of community health improvement, including assessment, planning, investment,

implementation, and evaluation, proactive, broad, and diverse community engagement to improve results. A definition of community that encompasses both a significant enough area to allow for population-wide interventions and measurable results, and includes a targeted focus to address disparities among subpopulations; maximum transparency to improve community engagement and accountability; use of evidence-based interventions and encouragement of innovative practices with thorough evaluation; evaluation to inform a continuous improvement process; and use of the highest quality data pooled from, and shared among, diverse public and private sources.

Needs assessment is a process of looking at many kinds of information about a target group or community. The needs assessment will include a review of demographics or census data, surveys an interview of the population. Further, a health needs assessment is the process of systemically collecting information to enable the practitioner, team, and policy-makers to identify, analyze, prioritize and meet the health needs of an individual, family or population. The design and implementation of health care programs and services are based on the information that as gathered in the process of health needs assessment which should be acceptable to the community, affordable, accessible to all the members and sustainable. The health needs assessment can be done with the individual and family when planning care and with the community or district when planning health services and public health programs to improve the health of the population.

A community health needs assessment is a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize these needs, and to plan and act upon significant unmet community health needs. The community health needs assessment examines health issues for the geographic areas and priority populations covered by the assessment, as well as the social and economic issues that influence health. The scope of the assessment is affected by the range of issues included in the assessment.

Health needs assessments traditionally study data on mortality, morbidity and health risk factors. Because health is influenced by a variety of social and economic factors, public health experts recommend that the scope of health needs assessments should extend beyond traditional health information and include information on socioeconomic, cultural and environmental factors (such as education, housing, natural environment and the presence of persistent and/or toxic materials).

Extension service is one of the four-fold functions of a higher education institution as mandated by the Commission on Higher Education. The CSPC Extension Services provides to let the community feel the presence of CSPC through the conduct of relevant and responsive extension and community outreach programs and activities. With its vision to assist in the sustainable development of the community particularly its target clientele thus empowers them to improve their quality of life, the Camarines Sur Polytechnic Colleges as one of the performing members of the higher education institutions is one in implementing this fourfold function specifically extension service. Accordingly, the extension projects and activities of the college shall be in line with its program thrust and must be a research-based extension program. Some of the extension thrust and priorities of the college are technology transfer/technology promotion cum Skills training Program, health and Nutrition Program, and Poverty Alleviation Program (www.cspc.edu.ph, 2019).

With the end in view of formulating an extension/advocacy program, the faculty extensionist conducted this study on the Community Health Needs Assessment of Barangay Lourdes, Buhi, Camarines Sur: A Basis for A Community Extension Program to sustain the college's vision to assist in the sustainable development of the community particularly its target clientele thus empowers them to improve their quality of life and to respond to its program thrust that a community extension activity must be a research-based extension program. The objectives were 1. to determine the characteristics

of the residents of barangay Lourdes, Buhi in terms of age, sex, educational attainment, family monthly income, occupation, type of dwelling, and source of drinking water; 2. to assess the common health problems encountered by the residents of barangay Lourdes, Buhi, Camarines Sur; 3. to determine the advocacy program and training needs of the residents of barangay Lourdes, Buhi, Camarines Sur; 4. To identify the health needs of the residents of barangay Lourdes, Buhi, Camarines Sur, along environmental, physical, psychological, social, and spiritual needs;

This study focused on the assessment of the community health needs of barangay Lourdes, Buhi, Camarines Sur as a basis for a community extension program. The respondents of the study were the head of the family which was determined through the use of Slovin's technique composed of 277. The data was gathered through the modified questionnaire for Community Profiling and assessment Form (Form 02-LHSC) and the Household Profiling form provided by the Department of Health which is being used by the health care providers assigned in the community. The researchers found out the characteristics of the respondents, the common health problems encountered, and the advocacy programs, training and health needs of the residents of barangay Lourdes, Buhi, Camarines Sur.

Community health needs assessment is a process that describes the health of the population; permits the identification of the major risk factors and causes of ill health, and local resources and for health, and permits the identification of the actions needed to address these. A community health needs assessment is not a one-off activity but a developmental process that is added to and amended over time. It is not an end in itself but a way of using information to plan health care and public health programmes in the future.

The steps of community health needs assessment are as follows: Profiling which include collection of relevant information that will inform the nurse about the state of health and health needs of the population and analysis of this information to

identify the major health issues; Deciding on priorities for action; Planning public health and health care programmes to address the priority issues; Implementing the planned activities; and Evaluation of health outcomes. This supports the study of Malabanan and Dacara which explores the demographic profile of respondents from Barangay Sta. Justina focuses on educational attainment, civil status, family size, sources of income, monthly income, housing, types of dwellings, and sources of water supply. Further, the findings provide a comprehensive overview of the socio-economic conditions in Barangay Sta. Justina highlights the intersection of various social determinants that influence the well-being of the community.

The Profile Information is composed of the Characteristics of the population such as Geography, Numbers, Age distribution, Gender distribution, Ethnicity and religion, Population trends and Language and literacy; the Health status of the population include Measures of health, for example mortality, morbidity, communicable diseases, low birth weights, breast feeding rates, uptake of preventive services, immunization rates, health behaviours, e.g. smoking, and health service use; the local factors affecting health (strengths and weaknesses) such as Work and employment, Poverty and income, Environment, Social cohesion/social support, Destabilising factors, Resources, formal and informal, and Current nursing work; the health concerns and priorities of the local community; and the Local and national priorities.

Study of Monge and Nuyda aimed to assess the impact of the community extension services of the College of Health Sciences at the residents of San Jose Salay, Buhi, Camarines Sur. Their profiles considered are highest educational attainment, civil status, number of family members, occupation, monthly income, types of dwelling, house ownership, and source of water supply.

Moreover, impact to the individual of the extension services implemented by the College of Health Sciences, along knowledge, skills; values and attitude; and impact to the community of the

extension services implemented by the College of Health Sciences, along economic, social, and environment were evaluated.

Needs assessment is a process of looking at many kinds of information about a target group or community. The needs assessment will include a review of demographics or census data, surveys an interview of the population. Further, a health needs assessment is the process of systemically collecting information to enable the practitioner, team, and policy-makers to identify, analyze, prioritize and meet the health needs of an individual, family or population.

The design and implementation of health care programs and services are based on the information that are gathered in the process of health needs assessment which should be acceptable to the community, affordable, accessible to all the members and sustainable. The health needs assessment can be done with the individual and family when planning care and with the community or district when planning health services and public health programs to improve the health of the population.

Furthermore, a community health needs assessment is a process that describes the state of health of local people, enables the identification of the major risk factors and cases of ill health and identification of the actions or interventions that are needed. A community health needs assessment is a way of using information to plan healthcare and public health programs in the future.

It will enable the health practitioners, NGOs, civic oriented societies, and policy makers to identify the members of the population who need the health care services and resources the most and to ensure that these resources are used following the rule of equity. It thus, becomes very important process in health care planning to identify priority health needs, utilize the internal and external resources of the community and develop community participation and involvement (Castro, 2012).

The goal of the CHNA is to improve community health and wellness by connecting research, resources, and people, while complying with

Internal Revenue Service guidelines. Ideally, a CHNA allows hospitals and other health care organizations to identify community health needs and existing gaps in services, strengthen relationships with community partners to improve local health care delivery, and share this information with the public. According to the regulation, CHNAs must be publicly available and the hospital must adopt an "implementation strategy" to meet the community health needs identified.

CHNA reports can be used to effectively identify community needs on both a regional and state level. The CHNA analyses in this study demonstrated that access to health care and nutrition/exercise/obesity are universally recognized by all Florida hospitals as key priorities for hospitals providing pediatric care in the 4 major metropolitan regions.

However, the current methods, processes, and accessibility of these documents made them difficult to use as an informative pediatric research tool. Until more structure and standardization are implemented, it will be extremely difficult to use CHNA reports to generate goals for future research and intervention (Gruber, Wang, Quittner, Salyakina, McCafferty-Fernandez, 2019).

Despite over 10 years of support from government health programs and health organizations, children in migrant villages in Kyrgyzstan remain a public concern owing to high incidence rates of preventable diseases such as anemia.

An effective community health promotion program is needed but there is a lack of knowledge of community barriers and health factors affecting children's health in these migrant villages. The purpose of the study conducted by Shin, Lee, Lee, Shon, (2019) was a community health needs assessment to develop strategies for a child health promotion program in these migrant villages.

According to Rabarison, Timsina, Mays, (2015), the US public health services delivery system faces many challenges, such as limited funds and complex population health needs. Chronic

diseases are the leading cause of death and disability in the United States, and they impose a heavy economic burden on the health system. Chronic disease prevention activities are sparsely delivered despite the fact that 7 of 10 deaths are caused by chronic disease every year and 75% of US health care costs are attributable to preventable diseases, a situation that emphasizes the need for improved public health decision-making and actions.

A community health assessment provides a framework for public health agencies to identify and describe population health needs, factors contributing to health outcomes, and resource availability or disparity in their community. A community health assessment also informs the development of a community health improvement plan, which is “a long-term, systematic effort to address health problems on the basis of the results of assessment activities.”

The National Association of County and City Health Officials (NACCHO) has defined a local health agency (LHA) as “an administrative or service unit of local or state government, concerned with health, and carrying some responsibility for the health of a jurisdiction smaller than a state.”

LHAs can serve as effective vehicles for delivering community-based chronic disease prevention activities because of their wide geographic distribution across the United States, their statutory authority to implement public health laws and programs, and their relationships with diverse community stakeholders. Using chronic disease prevention activities delivery as a proxy measure of public decision-making and actions, LHA implementation of a community health assessment and improvement plan does lead to improved public health decision-making and actions.

Evidence has shown that low capacity and constrained resources are implementation barriers to community health assessment and improvement plans, which suggests that better

resourced LHAs tend to implement these mechanisms more than those with fewer resources. Better resourced agencies might also be more likely to provide a broader scope of services, independent of whether they implemented a community health assessment and improvement plan. A community health assessment and improvement plan would have helped LHAs identify gaps in their services and activities delivery, thus improving decisions and actions to better meet the health needs of their communities and maintain adequate service provision.

Methodology

The study employed the descriptive survey design. This method involves collecting numerical data to test hypotheses or answer questions concerning current status which is then conducted through self-reports collected through questionnaires. Salaria (2012) stated that descriptive survey does not only concern the characteristics of the individual respondents but also the characteristics of the whole sample. In this study, the survey includes the participants' characteristics such as age, sex, educational attainment, family monthly income, occupation, type of dwelling, and source of drinking water; the common health problems encountered, and the advocacy programs, training and the health needs of the residents of barangay Lourdes, Buhi, Camarines Sur which include environmental, physical, psychological, social, and spiritual needs.

The sample population was composed of 277 constituents/residents of barangay Lourdes, Buhi, Camarines Sur which were identified utilizing the Slovin's technique. The researcher decided to choose this particular barangay for the main reason of formulating an extension program based on the assessed needs. After thorough assessment, the expected output was consolidated, analyzed and interpreted using the percentage technique and weighted mean.

Results and Discussions

Profile of the Residents

Table 1. Distribution of Respondents by Age

Age	Frequency	Percentage	Rank
21-30 years old	51	18.41	3
31-40 years old	68	24.55	2
41-50 years old	80	28.88	1
51-60 years old	45	16.25	4
61-70 years old	25	9.03	5
71-80 years old	8	2.88	6
Total	277	100	

Table 2. Distribution of Respondents by Sex

Sex	Frequency	Percentage	Rank
Male	79	28.52	2
Female	198	71.48	1
Total	277	100	

Table 3. Distribution of Respondents by Educational Attainment

Educational Attainment	Frequency	Percentage	Rank
College Graduate	20	7.22	5
College Undergraduate	30	10.83	4
High School Graduate	75	27.08	2
High School undergraduate	40	14.44	3
Elementary Graduate	104	37.54	1
Elementary Undergraduate	8	2.89	6
Total	277	100	

Table 4. Distribution of Respondents by Family Monthly Income

Family Monthly Income	Frequency	Percentage	Rank
Php 5000 – 15,000	200	72.20	1
Php 16,000 – 25,000	60	21.66	2
Php 26,000 – 35,000	10	3.61	3
Php 36,000 and above	7	2.53	4
Total	277	100	

Table 5. Distribution of Respondents by Occupation

Occupation	Frequency	Percentage	Rank
Vendor	49	17.69	2
Farmer	48	17.33	3
Driver	15	5.42	6
Employee	22	7.94	5
Skilled Worker (Laborer)	108	38.99	1
Weaver	30	10.83	4
OFW	5	1.80	7
Total	277	100	

Table 6. Distribution of Respondents by Type of Dwelling

Type of Dwelling	Frequency	Percentage	Rank
Bamboo and Nipa Hut	68	24.55	3
Wood and Nipa Hut	37	13.36	4
Semi-concrete	102	36.82	1
Concrete	70	25.27	2
Total	277	100	

Table 7. Distribution of Respondents by Source of Drinking Water

Source of Drinking Water	Frequency	Percentage	Rank
Burabod	30	10.83	3
Deep well	118	42.60	1
Water pump	21	7.58	4
BRAWASA	98	35.38	2
Water supply/buying	10	3.61	5
Total	277	100	

2. Common Health Problems Encountered by the Residents

Table 8. Common Health Problems

Indicators	Frequency	Percentage	Rank
Cough or cold	183	66.06	1
Elevation of blood pressure	56	20.22	2
Fever	39	14.08	3

Elevation of blood glucose	26	9.39	4
Joint pain	23	8.30	5
Diarrhea	15	5.42	6
Weight loss/muscle wasting	12	4.33	7
Skin rashes/itchiness	10	3.61	8
Body weakness	7	2.53	9

3. Advocacy and training needs of the residents of barangay Lourdes, Buhi, Camarines Sur

Table 9. Advocacy and Training Needs

INDICATORS	WM	VI	RANK
Basic life support /first aid training	3.33	Highly Needed	1
Disaster Risk and Reduction management	3.23	Moderately Needed	2
Health Education about different communicable diseases, its causes and treatments.	3.04	Moderately Needed	3
Child injury prevention program	2.98	Moderately Needed	4
Massage therapy	2.88	Moderately Needed	5
Family Planning awareness	2.86	Moderately Needed	6
Care giving training	2.50	Moderately Needed	7
Average Weighted Mean	2.97	Moderately Needed	

4. Health Needs of the Residents of Barangay Lourdes, Buhi, Camarines Sur

Table 10. Environmental Needs

INDICATORS	WM	VI	RANK
Protection from industrial hazards, pesticide, and dust	3.32	Highly Needed	1.5
Herbal plants utilization	3.32	Highly Needed	1.5
Implementation of proper waste management	3.25	Highly Needed	3.5
Safe water for daily consumption	3.25	Highly Needed	3.5
Planting of fruit bearing tress	3.24	Moderately Needed	5

Potable source of water	3.21	Moderately Needed	6.5
Safe and comfortable housing	3.21	Moderately Needed	6.5
Flood Control Program	3.20	Moderately Needed	8
Provision of Botika sa barangay	3.15	Moderately Needed	9
Average Weighted Mean	3.24	Moderately Needed	

Table 11. Physical Needs

INDICATORS	WM	VI	RANK
Regular medical check up	3.28	Highly Needed	1
Regular dental care	3.26	Highly Needed	2
Eye Care	3.10	Moderately Needed	3
Nutrition	3.07	Moderately Needed	4
Relaxation and exercise	3.06	Moderately Needed	5
Newborn, Infant and Child Care	3.02	Moderately Needed	6
Urinary System Care	3.01	Moderately Needed	7
Maintenance of IBW	2.95	Moderately Needed	8
Reproductive Care	2.90	Moderately Needed	9
Average Weighted Mean	3.07	Moderately Needed	

Table 12. Psychological Needs

INDICATORS	WM	VI	RANK
Enough rest and sleep	3.04	Moderately Needed	1
Stress management	3.02	Moderately Needed	2
Relaxation and exercise	3.01	Moderately Needed	3
Support system (family and friends)	3.00	Moderately Needed	4
Love and acceptance	2.97	Moderately Needed	5
Work satisfaction (happy at workplace)	2.88	Moderately Needed	6
Recreation (swimming)	2.71	Moderately Needed	7
Associate with friends	2.09	Partially Needed	8
Share problems to express oneself	2.03	Partially Needed	9
Average Weighted Mean	2.75	Moderately Needed	

Table 13. Social Needs

INDICATORS	WM	VI	RANK
Economic stability	3.26	Highly Needed	1
Good relationship within the family	3.22	Moderately Needed	2
Access to education	3.21	Moderately Needed	3
Good relationship with Neighbourhood	3.14	Moderately Needed	4
Livelihood project	3.10	Moderately Needed	5
Income generating projects	3.09	Moderately Needed	6
Accessible transportation	3.08	Moderately Needed	7
Engagement in any organization	3.04	Moderately Needed	8
Average Weighted Mean	3.14	Moderately Needed	

Table 14. Spiritual Needs

INDICATORS	WM	VI	RANK
Strong faith in God to heal illness	3.60	Highly Needed	1
Time for Sunday obligation	3.53	Highly Needed	2
Inner peace and harmony	3.38	Highly Needed	3
Strong relationship with self and others	3.33	Highly Needed	4
Rely on God's assistance	3.31	Highly Needed	5
Belief in quack doctors/albularyo	3.26	Highly Needed	6
Selfless care for others	3.10	Moderately Needed	7
Average Weighted Mean	3.36	Highly Needed	

Conclusions

1. Mostly of the respondents are 41-50 years old, elementary graduate, skilled worker, live in a semi-concrete type of dwelling, and deep well as the source of drinking water. Majority are female, and with family monthly income of Php 5000-15,000.

2. Majority of the respondents encountered cough and cold as their common health problems.

3. Basic Life Support and First Aid training is the highly needed advocacy program and training needs of the respondents.

4. Most of the respondents' environmental needs are protection from industrial hazards, pesticide, dust and herbal plants utilization. Along physical needs, regular medical check-up and dental care are highly needed; for psychological needs, enough rest and sleep and stress management are moderately needed; for social needs, economic stability is highly needed and for spiritual needs, strong faith in God to heal illness is highly needed.

5. An advocacy program and training design is proposed as an extension program of the college to address the needs of the residents of barangay Lourdes, Buhi, Camarines Sur.

Recommendations

1. May conduct a thorough needs assessment of the target partner barangay/beneficiaries to determine more appropriate trainings and livelihood programs needed by the community.

2. Training on basic educational skills and health literacy may be conducted to enhance their understanding and contribute in having a more productive and decent work.

3. An income generating livelihood training may be conducted to augment their income to sustain their basic food and non-food needs.

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