

THE COMMUNITY ENGAGEMENT ACTIVITIES OF THE SCHOOL OF HEALTH AND ALLIED SCIENCES

Jonalyn Santos
School of Health and Allied Sciences
University of Saint Louis
Tuguegarao City, Philippines

Victoria Acorda
School of Health and Allied Sciences
University of Saint Louis
Tuguegarao City, Philippines

Abstract— This study aimed to evaluate the effectiveness of health-related community engagement activities implemented by a Nursing program in a specific barangay. Both qualitative and quantitative research methods were employed to gather data. A researcher-made questionnaire was administered to 182 randomly selected residents to assess the impact of the activities on their health and well-being. Additionally, semi-structured interviews were conducted with 25 community members and health workers, and 50 students' Learning Feedback Diaries were analyzed to gather qualitative data. The findings revealed that the community engagement activities had a significant positive impact on the health of the community members, particularly in the areas of maternal and child health, nutrition, and disease prevention and control. These positive effects were achieved through health education and increased community participation. The study concludes that the community engagement activities not only benefited the community but also enhanced the knowledge, skills, and attitudes of the nursing students, preparing them for future professional practice.

Keywords— *community engagement, health program*

I. INTRODUCTION

Community extension and engagement activities are implemented as part of the trifocal function of higher education institutions in the country. These activities or programs are developed such that they will contribute to the holistic development of the community and its people (Bidad & Campiseño, 2010; Codamon-Dugyon, 2016; Llenares & Deocar, 2018). This allows universities to implement educational activities while reaching out and touching the lives of people in the community (Codamon-Dugyon, 2016). The university's mission of holistic development of individuals and communities implies that it will devote itself to the educational, spiritual, socio-cultural, economic, political, health, and environmental development needs of its partner communities and the nation as a whole.

One of the thrusts of the University of Saint Louis is assisting communities that are in need to help improve the overall quality of life of residents. USL considers community involvement to be a fundamental and ubiquitous aspect of university education. This is manifested by the university's development and conduct of extension programs at all levels, which allow students, teachers, and staff to apply new knowledge to specific social development issues. This is why USL, inspired by its missionary spirit, implements community engagement activities for chosen partner barangays. One with the university's thrust for community development, the School of Health and Allied Sciences and the Nursing program are therefore champions in ensuring the implementation of community engagement activities that are geared towards the improvement of the quality of health of partner barangays of the university. The community engagement activities of the School of Health and Allied Sciences are guided by the following goals as stipulated in the community development plan for Magalalag West, Enrile. These goals were developed as a response to the result of the needs analysis performed on the identified partner barangay, which include the following: a) improving environmental sanitation, b) decreasing disease prevalence, and c) improving quality of health. Health is seen as a very important need of the community people of Magalalag West. The aspects of life that the community people consider to be most important are their health because they believe that good health will lead to their longevity and a clean environment to prevent the occurrence of disease. The needs assessment further identified that environmental sanitation is an essential concern to be addressed in order to promote health and prevent disease prevalence in the barangay.

Magalalag West, formerly San Nicolas, is a barangay in the municipality of Enrile, in the province of Cagayan. Its population as determined by the 2015 Census was 1,233. This represented 3.44% of the total population of Enrile. According to the 2015 Census, the age group with the highest population

in Magalalag West is 20 to 24, with 145 individuals. Conversely, the age groups with the lowest population are in the ranges of under 1 and 75 to 79, with 20 individuals. The nursing program of SHAS has implemented community engagement activities and programs in Magalalag West from 2013-2020. The activities planned for the barangay were based on the previously conducted needs assessment by the Community Extension and Services Office (now CECAO). The planning and implementation of these community engagement activities were guided by the following objectives, which include: a) to improve the health of children to fight against malnutrition and poverty, b) to ensure access to various quality health programs, c) to provide and give assistance to day care pupils/children of socio-economically deprived partner communities, d) to be able to conduct different health education campaigns and disseminate the latest and current health information, and e) to be able to actively participate and partner in the health programs of the government and the institution itself.

Evaluation of community engagement activities is essential in determining their effectiveness and informing decisions about future programs for the community and other potential partner communities of the university (Padul-Dauz, 2019). In order to evaluate the effects of the health-related community engagement activities implemented by the nursing program, this research was conducted. This study therefore aims to evaluate the effectiveness of the implemented community engagement activities of the nursing program. This study will also assess the next step for the community development of the partner barangay.

II. METHOD

The study used both qualitative and quantitative designs. Primary quantitative data about the effects of the health-related community engagement activities was gathered using a researcher-made questionnaire. This tool was adopted from the questionnaire developed by the University Research and Development Center, which also evaluated the effects of community engagement activities of other departments. The tool was modified to assess extension activities. The tool consists of three parts that assess the effects of the community engagement activities, the benefits of such activities, and the relevance of the activities to the needs of the community people. The tool was validated by the University Research Council and was floated to 182 randomly selected residents of the community.

Primary qualitative data was gathered using a validated interview guide. A semi-structured interview was conducted in Magalalag West among 25 residents and community leaders and health workers. Secondary qualitative data was also gathered from the Learning Feedback Diaries of 50 students, which were submitted from 2012 to 2019.

III. RESULTS AND DISCUSSION

Table 1. Effects of the Community Engagement Programs of SHAS on the Lives or General Health of the Partner Community

Activities	Mean	Qualitative Interpretation
Maternal and Child Health Services		
Importance of Prenatal Check-up (Health Education)	4.53	Contributed to a very great extent
Importance of Providing Vaccinations/Immunizations among the targeted Population	4.27	Contributed to a very great extent
First Aid Training and Demonstrations		
Basic First Aid and Common Emergencies	3.77	Contributed to a great extent
Proper Bandaging, Transport and Carries”	4.03	Contributed to a great extent
Cardio-Pulmonary Resuscitation among Lay-Rescuers	4.09	Contributed to a great extent
Wound Care Training	4.29	Contributed to a very great extent
Training of BHWs		
Workshop on the Importance of Vital Signs	3.74	Contributed to a great extent
Blood Related Health Promotion and Services		
Iron-Deficiency Anemia Campaign (Health Education)	3.84	Contributed to a great extent
Hemoglobin/Hematocrit Monitoring	3.63	Contributed to a great extent
Bloodletting Campaign	3.67	Contributed to a great extent
Blood Letting Orientation Awareness Campaign	3.52	Contributed to a great extent
Blood Typing Activity	4.53	Contributed to a very great extent
Nutrition Services		
Nutrition Awareness Campaign (Health Education)	4.48	Contributed to a very great extent
Importance of Proper Food Preparation (Health Education)	3.78	Contributed to a great extent
Body Mass Index Monitoring	4.43	Contributed to a very great extent
Weight Monitoring among Infants	4.56	Contributed to a very great extent

Feeding Programs	4.51	Contributed to a very great extent
Personal and Environmental Hygiene Services		
Importance of Proper Hygiene (Health Education)	4.27	Contributed to a very great extent
Hygienic Measures/Proper Handwashing Techniques (Health Education)	4.33	Contributed to a very great extent
Proper Waste Segregation (Health Education)	4.48	Contributed to a very great extent
Communicable Disease Prevention and Control Services		
Anti-Rabies Program (Health Education)	4.39	Contributed to a very great extent
Iwas-Dengue Campaign/Dengue Awareness Drive (Health Education)	4.15	Contributed to a great extent
Babay Bulate Information Dissemination Campaign (Health Education)	4.27	Contributed to a very great extent
Non-Communicable Disease Prevention and Control Services		
Bantay Presyon Campaign (Health Education)	4.11	Contributed to a great extent
Diabetes Mellitus Awareness (Health Education)	3.97	Contributed to a great extent
Healthy Lifestyle Campaign (Health Education)	3.88	Contributed to a great extent
BP Monitoring	4.32	Contributed to a very great extent
Blood Glucose Monitoring	3.78	Contributed to a great extent
Safety and Security Services		
Iwas-Paputok Campaign (Health Education)	3.96	Contributed to a great extent
Adolescence Drug Abuse-Awareness and Prevention (Health Education)	4.40	Contributed to a very great extent
Essential Drug Services		
Generic Medicine Awareness (Health Education)	4.60	Contributed to a very great extent
Provision of Free Multivitamins and Over the Counter Drugs	4.12	Contributed to a great extent
Herbal Garden	4.18	Contributed to a great extent

The table above shows that the health-related community engagement activities of SHAS have either contributed to a very great extent or to a great extent to the lives or general health of the people of Magalalag West. Moreover, the table shows that the Maternal and Child Health services (mean = 4.40), Nutrition services (mean = 4.35), Personal and Environmental Hygiene Services (mean = 4.36), Communicable Disease Prevention and Control Services (mean = 4.27), and Essential Drug Services (mean = 4.30) have contributed to a very great extent to the general health of the people, while the First Aid training (mean = 4.05), Training of BHWs, Blood-Related Health Promotion and Services (mean = 3.84), Non-Communicable Disease Prevention and Control Services (mean = 4.01), and Safety and Security Services (mean = 4.18) have contributed to a great extent to the health of the people. This therefore means that the health-related community engagement activities implemented by SHAS have resulted in a very favorable and positive effect on the lives and general health of the community people of Magalalag West. Moreover, the data from the table implies that the health-related activities implemented by the different SHAS programs contributed to the achievement of the goals of community development for Magalalag West along health and wellness. The programs contributed to a very great extent in improving the quality of health of the people, decreasing the prevalence of both non-communicable and communicable diseases, and improving environmental sanitation in the community.

Table 2. Benefits derived from Community Engagement Activities conducted by SHAS

A. MATERNAL AND CHILD HEALTH SERVICES

	Importance of Prenatal Check-up (Health Education)	Importance of Providing Vaccinations/ Immunizations among the targeted Population
Improved the health of mothers and children	34 62.96%	29 60.42%
Helped fight against malnutrition and poverty	7 12.96%	3 6.25%
Ensured access to various quality health programs	3 5.56%	3 6.25%
Provided and gave assistance to day care pupils/children of socio-	3 5.56%	7 14.58%

economically deprived partner communities.		
Made aware or know the latest and current health information	5 9.26%	5 10.42%
Encouraged active participation in the health programs of the government and the institution itself.	2 3.70%	1 2.08%

It can be gleaned from the table above that the SHAS community engagement activities related to maternal and child health services have greatly benefited the community in terms of improving the health of mothers and children. The ultimate goal of maternal and child health services is the improvement of the health of pregnant women and mothers that will lead to improved health of children.

B. First Aid Training and Demonstrations

	Basic First Aid and Common Emergencies	Proper Bandaging, Transport and "Carries"	Cardio-Pulmonary Resuscitation among Lay-Rescuers	Wound Care Training
Improved the health of mothers and children	45 72.58%	10 43.48%	37 67.27%	15 57.69%
Helped fight against malnutrition and poverty	3 4.84%	2 8.70%	2 3.64%	1 3.85%
Ensured access to various quality health programs	2 3.23%	3 13.04%	8 14.55%	3 11.54%
Provided and gave assistance to day care pupils/children	5 8.06%	6 26.09%	5 9.09%	4 15.38%

of socio-economically deprived partner communities.				
Made aware or know the latest and current health information	4 6.45%	1 4.35%	2 3.64%	1 3.85%
Encouraged active participation in the health programs of the government and the institution itself.	3 4.84%	1 4.35%	1 1.82%	2 7.69%

It can be gleaned from the table above that the SHAS community engagement activities related to First Aid Training and Demonstrations have also greatly benefited the community in terms of improving the health of mothers and children.

C. Training of Barangay Health Workers

	Workshop on the Importance of Vital Signs
Improved the health of mothers and children	47 70.15%
Helped fight against malnutrition and poverty	4 5.97%
Ensured access to various quality health programs	4 5.97%
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	4 5.97%
Made aware or know the latest and current health information	5 7.46%
Encouraged active participation in the health programs of the government and the institution itself.	3 4.48%

It can be gleaned from the table above that the SHAS community engagement activities related to the training of BHWs have also greatly benefited the community in terms of improving the health of mothers and children.

D. Blood Related Health Promotion and Services

	Iron-Deficiency Anemia Campaign (Health Education)	Hemoglobin/Hematocrit Monitoring	Bloodletting Campaign	Blood Letting Orientation Awareness Campaign	Blood Typing Activity
Improved the health of mothers and children	33 63.46%	30 63.83%	12 52.17%	34 69.39%	28 70.00%
Helped fight against malnutrition and poverty	2 3.85%	2 4.26%	1 4.35%	1 2.09%	6 15.00%
Ensured access to various quality health programs	4 7.69%	7 14.89%	3 13.04%	7 12.49%	
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	3 5.77%	2 4.26%	2 8.70%	0 0%	1 2.50%
Made aware or know the latest and current health information	6 11.54%	4 8.51%	4 17.39%	4 8.16%	4 10.00%
Encouraged active participation in the health programs of the government and the institution itself.	4 7.69%	2 4.26%	1 4.35%	3 6.12%	1 2.50%

It can be gleaned from the table above that the SHAS community engagement activities related to Blood Related Health Promotion and Services have also greatly benefited the

community in terms of improving the health of mothers and children.

E. Nutrition Services

	Nutrition Awareness Campaign (Health Education)	Importance of Proper Food Preparation	Body Mass Index Monitoring	Weight Monitoring among Infants	Feeding Programs
Improved the health of mothers and children	73 70.87%	12 38.71%	22 56.41%	28 59.67%	69 69.70%
Helped fight against malnutrition and poverty	5 4.85%	2 6.45%	4 10.26%	5 10.64%	7 7.07%
Ensured access to various quality health programs	5 4.85%	3 9.68%	3 7.69%	3 6.38%	6 6.06%
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities	12 11.65%	8 25.81%	5 12.82%	7 14.89%	9 9.09%
Made aware or know the latest and current health information	6 5.83%	5 16.13%	4 10.26%	3 6.38%	5 5.05%
Encouraged active participation in the health programs of the government and the institution itself.	2 1.94%	1 3.23%	1 2.56%	1 2.13%	3 3.03%

It can be gleaned from the table above that the BS Nursing community engagement activities related to Nutrition Services

have also greatly benefited the community in terms of improving the health of mothers and children.

F. Personal and Environmental Hygiene Services

	Importance of Proper Hygiene (Health Education)	Hygienic Measures/Proper Handwashing Techniques (Health Education)	Proper Waste Segregation (Health Education)
Improved the health of mothers and children	29 60.42%	18 43.90%	4 23.53%
Helped fight against malnutrition and poverty	2 4.17%	5 12.20%	2 11.76%
Ensured access to various quality health programs	4 8.33%	4 9.76%	4 23.53%
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	6 12.50%	6 14.63%	3 17.65%
Made aware or know the latest and current health information	4 8.33%	4 9.76%	2 11.76%
Encouraged active participation in the health programs of the government and the institution itself.	3 6.25%	4 9.76%	2 11.76%

The table above highlights that the SHAS community engagement activities focused on Personal and Environmental Hygiene Services have significantly contributed to improving the health of mothers and children within the community.

G. Communicable Disease Prevention and Control Services

	Anti-Rabies Program (Health Education)	Iwas-Dengue Campaign/Dengue Awareness Drive (Health Education)	Babay Bulate Information Dissemination Campaign (Health Education)
Improved the health of mothers and children	48 73.85%	47 64.38%	22 53.66%

Helped fight against malnutrition and poverty	2 3.08%	2 2.74%	2 4.88%
Ensured access to various quality health programs	5 7.69%	6 8.22%	5 12.20%
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	4 6.15%	7 9.59%	4 9.76%
Made aware or know the latest and current health information	3 4.62%	8 10.96%	5 12.20%
Encouraged active participation in the health programs of the government and the institution itself.	3 4.62%	3 4.11%	3 7.32%

It can be seen from the table above that the SHAS community engagement activities related to Communicable Disease Prevention and Control Services have also greatly benefited the community in terms of improving the health of mothers and children.

H. Non-Communicable Disease Prevention and Control Services

	Bantay Presyon Campaign (Health Education)	Diabetes Mellitus Awareness (Health Education)	Healthy Lifestyle Campaign (Health Education)	BP Monitoring	Blood Glucose Monitoring
Improved the health of mothers and children	4 26.67%	34 73.91%	4 26.67%	40 76.92%	23 54.76%
Helped fight against malnutrition and poverty	1 6.67%	1 2.17%	1 6.67%	3 5.77%	4 9.52%
Ensured access to various quality health programs	3 20.00%	3 6.52%	3 20.00%	3 5.77%	5 11.90%

Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	3 20.00%	4 8.70%	3 20.00%	3 5.77%	5 11.90%
Made aware or know the latest and current health information	2 13.33%	2 4.35%	2 13.33%	0 0	1 2.38%
Encouraged active participation in the health programs of the government and the institution itself.	2 13.33%	2 4.35%	2 13.33%	3 5.77%	4 9.52%

The table above indicates that the SHAS community engagement activities focused on Non-Communicable Disease Prevention and Control Services have significantly contributed to improving the health of mothers and children within the community.

I. Safety and Security Services

	Iwas-Paputok Campaign (Health Education)	Adolescence Drug Abuse-Awareness and Prevention (Health Education)
Improved the health of mothers and children	37 74.00%	9 39.13%
Helped fight against malnutrition and poverty	2 4.00%	3 13.04%
Ensured access to various quality health programs	4 8.00%	4 17.39%
Provided and gave assistance to day care pupils/children of socio-economically	3 6.00%	3 13.04%

deprived partner communities.		
Made aware or know the latest and current health information	1 2.00%	0 0
Encouraged active participation in the health programs of the government and the institution itself.	3 6.00%	4 17.39%

The table above reveals that the SHAS community engagement activities focused on Safety and Security Services have also played a vital role in enhancing the health of mothers and children within the community. can be gleaned from the table above that the SHAS community engagement activities related to Safety and Security Services have also greatly benefited the community in terms of improving the health of mothers and children.

J. Essential Drug Services

	Generic Medicine Awareness (Health Education)	Provision of Free Multivitamins and Over the Counter Drugs	Herbal Garden
Improved the health of mothers and children	15 40.54%	72 75.79%	30 57.69%
Helped fight against malnutrition and poverty	4 10.81%	2 2.11%	3 5.77%
Ensured access to various quality health programs	3 8.11%	2 2.11%	6 11.54%
Provided and gave assistance to day care pupils/children of socio-economically deprived partner communities.	5 13.51%	5 5.26%	4 7.69%
Made aware or know the latest and current health information	6 16.22%	8 8.42%	6 11.54%

Encouraged active participation in the health programs of the government and the institution itself.	4 10.81%	6 6.32%	3 5.77%
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The table above shows that the SHAS community engagement activities related to Essential Drug Services have significantly enhanced the health of mothers and children. Additionally, the tables indicate that the primary benefit derived from SHAS's community engagement activities is the overall improvement in the community's health, with a particular focus on mothers and children.

Table 3. Most Relevant Community Engagement Activities of SHAS

Community Engagement Activities	N	%	Rank
Importance of Prenatal Check-up (Health Education)	92	68.1	1
Importance of Providing Vaccinations/Immunizations among the targeted Population	89	65.9	2
Basic First Aid and Common Emergencies	45	33.3	6
Proper Bandaging, Transport and Carries”	12	8.9	14
Cardio-Pulmonary Resuscitation among Lay-Rescuers	5	33.7	4
Wound Care Training	20	14.88	12
Workshop on the Importance of Vital Signs	13	9.6	13
Iron-Deficiency Anemia Campaign (Health Education)	7	5.2	19
Hemoglobin/Hematocrit Monitoring	5	3.7	21
Bloodletting Campaign	4	3	22
Blood Letting Orientation Awareness Campaign	8	5.9	18
Blood Typing Activity	5	3.7	21
Nutrition Awareness Campaign (Health Education)	51	37.8	3
Importance of Proper Food Preparation (Health Education)	45	33.4	5
Body Mass Index Monitoring	0	0	25
Weight Monitoring among Infants	42	31.1	7
Feeding Programs	45	33.3	6
Importance of Proper Hygiene (Health Education)	23	17	10

Hygienic Measures/Proper Handwashing Techniques (Health Education)	20	14.8	12
Proper Waste Segregation (Health Education)	10	7.4	16
Anti-Rabies Program (Health Education)	36	26.7	8
Iwas-Dengue Campaign/Dengue Awareness Drive (Health Education)	11	8.1	15
Babay Bulate Information Dissemination Campaign (Health Education)	30	22.2	9
Bantay Presyon Campaign (Health Education)	3	2.2	23
Diabetes Mellitus Awareness (Health Education)	6	4.4	20
Healthy Lifestyle Campaign (Health Education)	9	6.7	17
BP Monitoring	3	2.2	23
Blood Glucose Monitoring	1	0.7	24
Iwas-Paputok Campaign (Health Education)	0	0	25
Adolescence Drug Abuse-Awareness and Prevention (Health Education)	12	8.9	14
Generic Medicine Awareness (Health Education)	6	4.4	20
Provision of Free Multivitamins and Over the Counter Drugs	6	4.4	20
Herbal Garden	9	6.7	17

The table above highlights the most relevant community engagement programs of SHAS as ranked by community members. These programs include the Importance of Prenatal Check-ups (Health Education), the Importance of Providing Vaccinations/Immunizations among the Targeted Population, Nutrition Awareness Campaigns (Health Education), Cardio-Pulmonary Resuscitation Training for Lay-Rescuers, and the Importance of Proper Food Preparation (Health Education). This data suggests that these activities effectively addressed the community's needs, either directly or indirectly, by improving the health of mothers and children and aiding in the prevention of communicable diseases.

Table 4. Least Relevant Community Engagement Activities of SHAS

Community Engagement Activities	N	%	Rank
Importance of Prenatal Check-up (Health Education)	0	0	7
Importance of Providing Vaccinations/Immunizations among the targeted Population	0	0	7
Basic First Aid and Common Emergencies	2	11.8	5

Proper Bandaging, Transport and Carries”	3	17.6	4
Cardio-Pulmonary Resuscitation among Lay-Rescuers	3	17.6	4
Wound Care Training	5	29.4	2
Workshop on the Importance of Vital Signs	2	11.8	5
Iron-Deficiency Anemia Campaign (Health Education)	2	11.8	5
Hemoglobin/Hematocrit Monitoring	2	11.8	5
Bloodletting Campaign	4	23.5	3
Blood Letting Orientation Awareness Campaign	2	11.8	5
Blood Typing Activity	5	29.4	2
Nutrition Awareness Campaign (Health Education)	4	23.5	3
Importance of Proper Food Preparation (Health Education)	1	5.9	6
Body Mass Index Monitoring	3	17.6	4
Weight Monitoring among Infants	6	35.3	1
Feeding Programs	3	17.6	4
Importance of Proper Hygiene (Health Education)	0	0	7
Hygienic Measures/Proper Handwashing Techniques (Health Education)	0	0	7
Proper Waste Segregation (Health Education)	1	5.9	6
Anti-Rabies Program (Health Education)	1	5.9	6
Iwas-Dengue Campaign/ Dengue Awareness Drive (Health Education)	1	5.9	6
Babay Bulate Information Dissemination Campaign (Health Education)	5	29.4	2
Bantay Presyon Campaign (Health Education)	1	5.9	6
Diabetes Mellitus Awareness (Health Education)	2	11.8	5
Healthy Lifestyle Campaign (Health Education)	1	5.9	6
BP Monitoring	0	0	7
Blood Glucose Monitoring	1	5.9	6
Iwas-Paputok Campaign (Health Education)	2	11.8	5
Adolescence Drug Abuse-Awareness and Prevention (Health Education)	1	5.9	6
Generic Medicine Awareness (Health Education)	3	17.6	4

Provision of Free Multivitamins and Over the Counter Drugs	2	11.8	5
Herbal Garden	4	23.5	3

The table above presents the community engagement activities of SHAS that are least relevant to the needs of the community people. It must be noted that fewer responses are presented in this table compared to the previous table about the most relevant community engagement activities. This may imply that many of the community people did not see the activities implemented as not relevant to their needs. Among those activities that were identified as least relevant are Healthy Lifestyle Campaign (Health Education) and Hygienic Measures/Proper Handwashing Techniques (Health Education). However, the data from this table may indicate that the community people who found these activities least relevant have a well-established lifestyle and hygiene patterns.

Theme 1: Effects of community engagement activities programs to community people

All the respondents have verbalized that the community engagement activities conducted by SHAS in Magalalag West have caused significant positive effects in their lives and in their health. Three sub-themes were identified under this major theme, which further explain the positive effects that the SHAS community engagement programs have contributed to the community. The community people verbalized that community engagement activities of SHAS have the following effects: a) improved people’s knowledge related to health, b) addressed relevant health needs of the community, and c) provided socio-economic support to the people.

Improved people’s knowledge related to health

The community people verbalized that the community engagement activities implemented by SHAS students and faculty helped improve their knowledge and awareness of many health-related matters. Health education is one of the most basic and important interventions that nurses in the community setting can perform. Health education can lead to changes in health behaviors, which can then lead to improvement in health quality in the long term. Health education is a key measure that led to the improvement in the awareness and knowledge of the community people about health.

CP3: “*Very good explanations (by the nurses), malaking tulong sa amin ang mga tinuturo nila*”
[The explanations of the nurses helped us a lot because we learned from them]

CP4: “*Malaking tulong sa amin, natuto kaming mahalagahan ang aming kalusugan*”
[They are a big help to us, we learned to value or health (through them)]

CP 10: *“Nadagdagan ang kaalaman naming sa kalusugan”*
[They added to our knowledge about health]

Addressed relevant health needs of the community

The community people verbalized that the community engagement activities helped improve their health by addressing their health needs. The activities implemented by SHAS have helped them prevent and control malnutrition especially among children belonging to families under the low socio-economic levels. The community people also verbalized that the students and faculty provided basic health services to the people, which helped them be more aware of their overall level of health. This awareness contributed to adopting practices and measures that led to a better level of health.

CP2: *“yung mga nurses tumulong samen pag bini-bp kami o binibigyan kami ng gamot, nagiging mas health-conscious ka at titignan mo yung mga pagkain mo babawasan mo mga makakasama sa health mo”*
[The nurses help us. Whenever they take our blood pressure or give us medicines we become more health conscious. You begin to watch what you eat and avoid activities that are bad for your health]

CP5: *“tumulong sila na mawala ang mga malnourished na bata dito”*
[They helped decrease the number of malnourished children (in the barangay)]

Provided socio-economic support to the people.

Aside from the positive effects of the community engagement activities on the health of the community people, the activities also resulted in positive effects in terms of the socio-economic aspects of some of the members of the community. The activities of SHAS particularly assisted the families of children aged 3-7 years belonging to the low socioeconomic levels who also needed health interventions. By implementing activities like “Feeding Programs,” monitoring nutritional status, and providing supplements for these children, the students and faculty were indirectly assisting the families in terms of alleviating the families of the costs of keeping these children healthy.

CP12: *“They also assist day-care children/ pupils of socio-economically deprived families”*

CP15: *“Maganda yung mga pa-feeding kasi nakakalibre kami sa pagkain ng bata tapos sigurado pa kaming masustansiya yung mga kinakain nila”.*
[The feeding (programs) are helpful because we don't spend for the food of the children and we are sure that they are eating healthy]

Theme 2: Effects of community engagement activities to barangay leaders and health workers

All community leaders and health workers also verbalized that the community engagement activities of SHAS have positive effects on the community. Two sub-themes were identified that explain the positive effects of the community engagement activities in which the activities a) enhanced community participation in health-related activities and b) improved knowledge of the people related to health.

Enhanced community participation to health related activities

The barangay leaders and health workers all agreed that the community engagement activities of SHAS have helped improve the participation of the community people about matters relating to health. The leaders verbalized that the activities resulted in active participation of the community people in health activities and programs of Barangay Health Stations (BHS) and the Rural Health Unit (RHU). The health workers also verbalized better compliance with the services like health promotion and disease prevention activities.

CP22: *“They helped the constituents to be more active in health related issues”*

CP23: *“Malaking tulong sila kasi pag may nararamdaman kami eh madali lang lumapit sa kanila so naeenganyo kaming sumali sa mga health education ganun”*
[They (nursing students and faculty) are very helpful. Whenever we feel some illness, we can easily approach them and seek help. We are also interested in joining their health education programs.]

Improved knowledge of the people related to health

The community leaders and health workers are in agreement with the rest of the community people that the community engagement activities of SHAS contributed to the improvement of health-related knowledge of the people. They particularly emphasized that the community people have become more aware of the health services of the BHS and RHU. The activities have therefore indirectly contributed to the improvement of access to the services of the BHS and RHU.

CP25: *“Dahil sa mga nurses, alam ng mga tao kung anong pwede nilang i-avail sa BHS at RHU kaya pag may concerns sila pumupunta sila talaga dito”.*
[Because of the nurses, the people know about the services in the BHS and RHU. So when they have concerns they come to here (BHS) for consultation.]

Theme 3: Positive effects of community engagement activities to SHAS students

All students stated that the conduct of community engagement activities in the partner barangay has caused good effects in at least one aspect of their student life. The students verbalized that these positive effects can be summarized as follows: a) the activities developed their attitudes and values, b) developed their technical and interpersonal skills, and c) improved their knowledge about health-related concepts.

Developed attitudes and values of student nurses

The conduct of community engagement activities has allowed the students to observe the lives and living conditions of the community people. This also allowed the students to help the community people meet their needs. Through this, the students were able to appreciate the importance of kindness and compassion, which is at the core of the health profession. Compassion and empathy are among the most important values that health workers must develop. These values are essential for the care of patients not only in the hospital but also in the community setting.

The students also realized through their dealings with the community people the importance of being physically healthy. For most of the students, the conduct of community health care activities has allowed them to meet and interact with different people who are experiencing different health problems. This experience has made them realize the value of following a healthy lifestyle in order to prevent the development of these diseases or health problems like non-communicable diseases. The students also mentioned that adopting a healthy lifestyle will help them to become role models to the community people and to those in their immediate environment. Lastly, the students consider the conduct of community health care activities an “eye-opener” such that they were able to see firsthand the health needs of the disadvantaged members of society.

SN2: *“Bath people with kindness and love, and never expect much in return ‘cause God will bless you merrier”*

SN4: *“They (community people) appreciated the home visit so much because it’s like we care about them and we are concern with their health, which is our real intentions and focus to improve health.*

SN5: *“we were able to help people, promote a good quality care, which is at the heart of our soon to be profession.”*

SN10: *“When you see a patient with severe disease, it will make you think that you need to have a healthy living in order to prevent that kind of disease and become a role model in the community people”*

SN26: *“I’ve handled patient with Hypertension stage 2, these became a wake-up call for me to live a*

healthier life and to become a model for people around as a health care provider.”

SN32: *“have again taught me a lot for my nursing career, experiences that will inspire me to strive harder for the greater good of the community”*

SN46: *“Community service has trained us really to become aware of the needs of others.”*

Developed technical and interpersonal skills of nurses

All of the students have verbalized that the conduct of community engagement activities is a way for them to practice or apply the technical skills that they have learned during lectures. The students were also able to enhance their communication skills through their interaction with community people. The students also verbalized the importance of being able to communicate and relate with the community people. Effective communication and interpersonal skills are important in providing the care and assistance needed by the community people and are therefore essential skills for all healthcare workers. The interaction of the students during the implementation of community engagement activities resulted in the application of skills learned in the classroom, which are essential in all healthcare professions.

SN6: *“we, as students came to know and learn how to reach out to people who are in need of medical attention, know the different medical needs in their community.”*

Improved nursing students’ knowledge about nursing and health related concepts

The students also verbalized that the implementation of community engagement activities also helped improve their knowledge about health-related concepts, especially those involving community health and the prevention and control of communicable and non-communicable diseases. This is in line with the conduct of health education sessions, which is one of the activities that the students are routinely implementing. When the students prepare for these sessions, they need to study the concepts in order for them to be able to educate the community people properly, which then results in improved knowledge of these concepts.

SN17: *“We get to study concepts for health education because we need to be well versed with the concepts that we will teach the community people.”*

SN 29: *“We are challenged when we do health educations because we are like the experts that will impart knowledge to the people. So it is important for us to know everything about the topics. It is a way of improving also our knowledge about these concepts”.*

SN31: "It (health education) is like a review of the topics because we become more knowledgeable about the concepts that we teach the community people."

Theme 4: Issues and recommendations for community engagement activities

The majority of the community people, leaders, and health workers verbalized that the activities implemented by SHAS students and faculty were done well. However, there are some recommendations and points for improvement that were also verbalized. These include the limitation in the time for the implementation of activities by the students and faculty. Some of the community people feel that the frequency by which the students and faculty visit and implement activities is limited and that increasing the frequency of visits may lead to optimum effects and benefits. BS Nursing students and instructors visit the community for Related Learning Experience at least once a week as part of community/clinical placement. This is part of the BS Nursing curriculum along the course Community Health Nursing. Aside from the RLE visits, BS Nursing students and faculty members also visit the barangay to conduct community extension and service learning programs. BS Pharmacy and BS Medical Technology program students and faculty also visit the barangay to implement service learning programs and do not have a regular RLE schedule for visiting the barangay. Moreover, due to the quarantine restrictions during the COVID-19 pandemic, the community visits abruptly stopped. These may be the underlying reasons for the verbalizations of the community people related to the limited time for community visits and implementation of activities.

CP 9: "Kung pwede sana na mas madalas sila bumisita samen para mas makatulong"

[If it is possible that their visits be more frequent so that they can help us more]

CP14: "Limited lang kasi yung oras na nasa barangay sila"

[The time they spend in the barangay is limited]

IV. CONCLUSION AND RECOMMENDATIONS

The study concludes that the community engagement activities of the different SHAS programs have contributed significant positive effects to the life and overall health of the community people of Magalalag West, Enrile, Cagayan. These effects can be specifically observed in maternal and child health, nutrition status of children 3-6 years of age, and in the prevention and control of diseases. These positive effects were achieved through improving the knowledge and awareness of the community people about health and improving participation of community people in health activities and services. Health education is the primary means of students and faculty in effecting changes in the community's health practices and behaviors. Moreover, the researchers conclude that the activities of the different SHAS programs have significantly contributed to the achievement of the community development goals for the barangay along with health and wellness. The conduct of community engagement activities is also beneficial to the students in terms of improving their knowledge, skills, and attitudes, which will be helpful in their practice as professional nurses.

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