
Analysis of Barangay Health Workers' Implementation of Health and Nutrition Program: Basis for Program Intervention

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ABSTRACT

This study was designed to analyze barangay health workers' implementation of the health and nutrition program. Specifically, this study aimed to: document the socio-demographic profile, determine the health and nutrition programs implemented in the selected barangays, explore how the health and nutrition programs are implemented, examine how barangay workers describe their experiences in implementing health and nutrition programs in the community, and draw out recommendations from the respondents for effective implementation of health and nutrition programs.

As to the socio-demographic profile of the respondents, the majority are more than thirty years old, female, married, college-level, in service for more than ten years, composed of five or more members, and earn ten thousand pesos per month. The top health and nutrition program implemented in the selected barangays is the infant and young child feeding program. There are six themes from coded statements that surfaced regarding the implementation of the health and nutrition program, namely: Community Assessment, Planning and Coordination, Information Dissemination and Community Mobilization, Program Implementation, Monitoring and Follow-up, and Recording and Reporting. There are four experiences of the BHWs in implementing health and nutrition programs in the community, namely: difficulty reaching residents, limited resources and supplies, communication and coordination challenges, and insufficient feedback collection. There are six identified recommendations for effective implementation of health and nutrition, which include the topmost recommendation, additional budget.

Keywords: *Barangay Health Workers (BHWs), Health and Nutrition Programs, Implementation*

INTRODUCTION

Barangay Health Workers (BHWs) in the Philippines are pivotal in implementing health and nutrition programs at the community level. However, they encountered several challenges that impede their effectiveness. Recent trends indicate a growing recognition of the need to strengthen the support system of BHWs' initiatives, such as the Philippine Multisectoral Nutrition Project, which aims to enhance the delivery of nutrition and primary health services by providing medical equipment, health supplies, and cadre-based training (DSWD, 2022). Moreover, there is an emphasis on community-based approaches that leverage platforms such as Mother Support Groups to expand essential nutrition services (UNICEF, 2023).

The contribution of this study is that it may encourage the BLGUs and other stakeholders to be involved in the formulation, implementation, and sustainability of the health and nutrition programs inside their barangays, as they can affect or be affected by the barangay

organization's actions, objectives, and policies. And as to the body of knowledge in research this will serve as future references for further studies.

Statement of the Problem

This study explored how BHWs describe their experiences in implementing health and nutrition programs in the community.

Specifically, this study answered the following questions:

1. What is the socio-demographic profile of the respondents in terms of: 1.1 age, 1.2 sex? 1.3 civil status, 1.4 educational attainment. 1.5 length of service, 1.6 number of family members, and 1.7 gross family income
2. What are the health and nutrition programs implemented in the selected barangays?
3. How are the health and nutrition programs implemented?
4. How do barangay workers describe their experiences in implementing health and nutrition programs in the community?
5. What recommendations can be drawn from the respondents for the effective implementation of health and nutrition programs?

Scope and Delimitations

One of the limitations of the study is the active participation of the participants/key informants during the study. Furthermore, the cooperation of the participants/key-informants, some unexpected circumstances, and financial and time constraints in gathering and retrieving data from respondents to meet the study's deadline are also considered limitations of this study. Also, the generalizability of findings refers to how widely they can be applied to a broader population or setting beyond the specific study sample. The conclusions of the findings are also considered as limitations, where findings of one informant are run through other informants, which can result in data saturation.

Review of Related Literature

Go, K.H., Valenzuela, S., and Prieto, M.L.'s study examined the complex roles BHWs play, noting that these roles often extend beyond health-related tasks. They highlight that vague guidelines can lead to inconsistent appointment processes, sometimes favoring personal connections over qualifications, affecting service quality (Go, K.H., Valenzuela, S., and Prieto, M.L., 2023).

Theoretical Framework

This study was supported by **Nola Pender's Health Promotion Model (HPM)**. The HPM focuses on empowering individuals to improve their well-being through voluntary lifestyle and behavioral changes. It is not focused solely on preventing illness but on achieving a higher level of health and wellness. (Santos, M., et.al., 2025)

This study is also connected to **Virginia Henderson's 14 Basic Needs. Theory** argues that the unique function of a nurse is to assist individuals, whether they are sick or well, in performing the 14 fundamental activities of daily living. The theory states that the nurse's role is to assist individuals in performing 14 essential daily activities necessary for health and independence. (Vera, M.2024).

The study is also pinned to the **Nutritional Theory** by Tim H. Tanaka. Since the inception of life, nutrition has dictated the growth and survival of our species. In other words, nutrition,

both in terms of amount and kind, serves to act as the cornerstone of optimum health and the cutting edge for disease prevention (Tanaka, H.T. 2017)

Conceptual Framework

The study's input included the health and nutrition programs implemented in the selected barangays, experiences in implementing these programs in the community, and recommendations from respondents for effective implementation. The process includes the data gathering through an interview guide using a qualitative research design, specifically descriptive-qualitative. The data will be extracted through key informants' interviews and observation guides. The study's output was a program intervention based on its results. Hence, the researcher used the IPO Model in achieving the objectives of the study.

METHODOLOGY

This study used a descriptive research method. There are seven (7) key informants included in the study. The data were analyzed through coding and thematic analysis.

Research Design

This study used a descriptive research design, particularly a phenomenological approach, in which the researcher explored the lived experiences of BHWs to understand the unique, subjective meanings individuals attribute to their experiences and perceptions.

Research Steps

Data collection began by securing ethical clearance from the institution for the actual data collection. The primary data for this study were the key informants' responses during the interviews. Primary and secondary data will also be used to interpret interview results. To ensure that all key informants' responses were captured in detail, an electronic recorder was used. Transcripts ultimately serve as the basis for the data analysis.

Data Collection and Sample Selection

The data was categorized through the "coding" and "reducing process". Coding is developing concepts from the raw data, which is done through reading and re-reading all of the data and sorting them by looking for units of meaning, words, phrases, sentences, ways of thinking, and patterns of behavior. The code was either named after the respondents' actual words or created by the researcher.

Data Analysis Methods

The data was categorized through the "coding" and "reducing process". Coding is developing concepts from the raw data, which is done through reading and re-reading all of the data and sorting them by looking for units of meaning, words, phrases, sentences, ways of thinking, and patterns of behavior. The code was either named after the respondents' actual words or created by the researcher.

Research Hypotheses and Validation

The researchers' instrument for this study was submitted to the research professor and adviser for corrections and pretested with three (3) experts in this field. Their corrections were considered sufficient to improve the questionnaire. Then it was pretested on one (1) BHW in Mondragon, Northern Samar, a nearby municipality of Catarman.

Study Limitations and ethical considerations

The researcher adhered to the highest ethical standards in conducting this study. Primary, the researcher observed autonomy/respect for the respondents, giving the BHWs freedom as

independent decision-makers with the right to make their own choices, which is especially important in ensuring informed consent from research participants. The researcher applied the principles of beneficence/non-maleficence, honesty for truthfulness and accuracy in communications and actions, and fairness by treating the respondents equitably and impartially.

RESULTS AND DISCUSSION

SOP 1. What is the socio-demographic profile of the respondents in terms of: age, sex, civil status, educational attainment. Length of service, number of family members, and gross family income?

As to the socio-demographic profile of the informants, the majority are 38-47 years old, female, married, high school graduates, with 11-15 years of service, have 6-10 family members, and have a family income of 15,001-20,000 per month.

SOP 2. What health and nutrition programs are implemented in the selected barangays?

There are six (6) identified health and nutrition programs implemented which include: infant and young child feeding program, deworming, operation timbang, vaccination, family planning program, and early childhood case development program.

SOP 3. How the health and nutrition programs are implemented?

From the coded answers, six (6) major themes emerged, replicating the systematic and community-oriented approach employed by the BHWs. These include: (1) Community Assessment; (2) Planning and Coordination; (3) Information Dissemination and Community Mobilization; (4) Program Implementation; (5) Monitoring and Follow-up; and (6) Recording and Reporting.

SOP 4. How do barangay workers describe their experiences in implementing health and nutrition programs in the community?

There are four (4) identified experiences that emerged from the BHWs based on the coded statements of the interview guide. This includes the following: (1) difficulty in reaching residents, (2) limited resources and supplies, (3) communication and coordination challenges, and (4) insufficient feedback collection.

SOP 5. What recommendations can be drawn from the respondents for the effective implementation of health and nutrition programs?

There are six (6) identified recommendations, which include the following: additional budget, regular health and nutrition activities, improvement of health care facilities, tight establishment of stakeholders' relationships, which will help implementation, avoiding local partisan political intervention, and hiring effective and efficient BHWs.

SUMMARY

The study found that most respondents were women over thirty, married, college-educated, and had served for more than ten years, typically from households with five or more members earning about ten thousand pesos monthly. Barangays implemented programs such as child feeding, deworming, vaccination, family planning, and early childhood care. From interviews with seven informants, six implementation themes emerged: assessment, planning, information dissemination, program execution, monitoring, and reporting. Barangay Health Workers (BHWs) faced challenges including difficulty reaching residents, limited resources, poor communication, and lack of feedback. To improve effectiveness, recommendations

included increasing budgets, conducting regular activities, enhancing facilities, strengthening stakeholder ties, minimizing political interference, and hiring competent BHWs.

CONCLUSIONS

The study concludes that Barangay Health Workers (BHWs) are vital to implementing health and nutrition programs in the community, despite the socio-economic and operational challenges they face. Most BHWs are middle-aged women with long years of service, showing that program success relies heavily on their dedication and commitment, despite modest educational backgrounds and relatively low incomes. To strengthen program implementation and improve health outcomes at the barangay level, the study highlights the need for strategic measures, including increased budget allocation, regular health and nutrition activities, improved healthcare facilities, stronger collaboration among stakeholders, reduced political interference, and the recruitment of competent and committed BHWs.

RECOMMENDATIONS

Based on the findings and conclusions of the study, the following recommendations are suggested: (1) It is recommended that the Barangay Local Government Units (BLGUs) allocate additional budget specifically for health and nutrition programs to ensure their full and effective implementation. (2) The BLGU may coordinate with other agencies such as LGU, DOH, and RHU for regular implementation of health and nutrition activities to strengthen and institutionalize the implementation. (3) There is also a need to improve and establish dedicated healthcare facilities in the barangays.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data.

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