Session: Focusing Your Student's Development

Serve the People Model of Community Health Development Work: Towards a Caring Framework

Erlinda Castro-Palaganas, PhD, RN
Professor, University of the Philippines Baguio
President, Philippine Nursing Research Society Inc.
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Declaration of Conflict of Interest:

I declare that I do not have any conflict of interest in this undertaking.

My STTI Chapter, Iota Sigma, partly sponsored my participation in this conference while my organization supported my travel on official time.

Objective:
... describe a model of caring grounded from extensive health work with health professionals
Why am I here?

• ... describe a model of caring grounded from extensive health work with health professionals

• ... describe how the CHDWs have come face to face with the effects of the continuing struggle of the people for social justice, democracy, national independence, material and cultural progress and peace
Methodology:

Stages of Field work

[Adopted from Shaffir and Stebbin (1991) four stages of field experiences]

Early Stages of Field Work (1 and 2)
(1) Entering the Field Setting
- Gatekeepers
- Establishing Identity and Role
(2) Learning the Ropes
- Integration
- Trust
- Relationships
- Friendships

Later Stages of Field Work (3 and 4)
(4) Leaving the Setting
- Maintaining Relations
- Keeping in Touch

Writing Up and Dissemination of Research Data
- Research Report

Coding and Analysis of Data
- Themes / Patterns
- Categories
- Domains / Taxonomies
- Theory

Fieldwork Methods
- Observation
- Interview
- Focus Group Discussion
- Secondary Sources
Results

This model was developed from the themes and subthemes that emerged namely:

• Context Setting and Approach to Health Work;
• Community Development Framework;
• Implementation and Evaluation;
• Method of Work: Action-Reflection Cycle and Empowerment;
• Roles of Development Health Workers; and
• Challenges to the Health Care Practice in the Community.
A

SOCIETY IN GENERAL

Economic System  Political System  Cultural System

HEALTH SYSTEM

Economic  Political  Cultural

Context of Health Work: Socio Economic, Cultural and Political Dynamics of Health Station (Community Analysis)

Rapid Rural Assessment
Participatory Action Research
Participant Observation
Mapping/Walk Through
Focus Group Discussion
Interviews
Case/Even Analysis
COMMMUNITY DEVELOPMENT FRAMEWORK

PROGRAMS
- CBHP Development
  - Health Organization Building
  - Provisions of Health Services
  - Development of Appropriate Technology
  - Health Resource Development
  - Education and Training
  - Advocacy, Public Information Research

STRATEGIES
- Main Strategies
  - Organizing and Networking
  - Education and Training
  - Health Care Services
  - Advocacy and Public Information
- Supportive Strategies
  - Resource Development
  - Research and Documentation

GOALS
- Long term and Short-term toward people managed health care system

MISSION
- Lay the Foundation of Alternative Health Care Delivery System through Community Based Health Program

VISION
- Independent Democratic Just Progressive Peaceful Society
Results

• The *Serve the People (STP)* Model of Community Health Development (CHD) reflects personal stories and concrete experiences of the participants of the study.

• The model implies a commitment which CHDWs must possess and serves as a guideline for CHDWs in caring and working with the people.
Results

• The *Serve the People (STP)* Model of Community Health Development (CHD) promotes and upholds the following caring principles:

1) views health holistically or as a social phenomenon;

2) diagnoses community problems and needs collectively;
Results

• The *Serve the People (STP)* Model of Community Health Development (CHD) ....

3) focus of interventions are those that are identified by the people and not those felt and perceived by the CHD;

4) advocates methods of health work that are comprehensive, relevant, participatory, democratic, liberating, promotive of critical thinking, and empowering; and
Results

• The *Serve the People (STP)* Model of Community Health Development (CHD) ....

5) identifies outcomes that are clear and shared among the nurses and the people.

The model's name was based on the firm belief of the CHDWs that the health profession exists for the people.
Conclusion

• This caring model is derived from personal and concrete experiences of the participants of the study.
• It was developed as a contribution to the community practice-based knowledge of CHD work.
• It poses challenges to nurse educators, practitioners and researchers.
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Thank you.