

# Impact of the Wellness Program in the University Laboratory Elementary School

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**Abstract** - A wellness program is designed to support healthy behavior in the workplace and to improve health outcomes. This study was conducted to determine the wellness program conducted at the University of Eastern Philippines. Specifically, this study aimed to know the profile of the wellness program (year started, vision, mission, goals, frequency on the conduct of the program, and participants) and the socio-demographic profile of the respondents (age, sex, civil status, highest educational attainment, length of service, and types of wellness program participated). Moreover, this study aimed at determining the impact of the wellness program on the school heads and the teachers and the problems they encountered during the conduct of the program. Furthermore, this looked into the difference of the problems encountered by the school heads and the teachers in the wellness program conducted. This study was conducted at the University of Eastern Philippines. This study employed the descriptive-correlational method of research. Complete enumeration was employed for the 14 school heads, while a random sampling technique was utilized for the 148 public school teachers. A survey questionnaire was used as the primary instrument to gather data. The study used frequency counts, percentages, ranking, and weighted mean, and t-test for independent samples as statistical tools. The findings of this study showed that the wellness program was first conducted in Catarman III in 1997. The program aims to provide effective health and nutrition services as fertile avenues for the inculcation of positive health values and behavior, pursued with the spirit of dedication, high sense of mission and excellence, towards the development of a healthier and more productive school populace in a clean, healthy, and drug-free school and community environment. The school administrator/head, the teachers, the non-teaching personnel, and the school children were the participants of the quarterly wellness program. It also showed that most of the respondents belonged to the age range 26 to 30 years old, were married, had been in the service for 6 to 10 years, and participated in the on-site fitness programs. At the same time, the majority of them were female and bachelor's degree holders. As to the impact of the wellness program conducted, the respondents assessed it as "much extensive" when it comes to the health and nutrition

education, the healthful school living, the health and nutrition services, the school-community coordination for health and nutrition, and the other related health and nutrition activities.

**Keywords** - Wellness, Problems, Impact, School

## I. INTRODUCTION

Health is a fundamental right of every individual for mental, physical, social, emotional, and spiritual development and well-being.

A research study commissioned by the American Association of Occupational Health Nurses Inc. (AAOHN) surveyed 500 workers nationwide about their perceptions of wellness programs. More than three-quarters of all participants indicated wellness programs are a good way to improve their overall health, and nearly 60% consider these offerings an incentive to remain with their current business. Worker retention and turnover impact the bottom line, so building wellness programs into the worksite culture is a valuable way to help retain talented staff members and to enhancing personal health and workplace productivity.

Employees appear to have their own agenda when it comes to their health, and they preferred topic areas for wellness programs. This includes stress management, health screening programs, exercise/physical fitness programs, health insurance education, and disease management (DM) workshops as priority topics for corporate wellness programs.

Workplace wellness programs are becoming more widespread throughout every part of the world. The bottom line of such programs is healthy employees tend to be happier and more productive employees. These programs range from simply offering information to workers to healthy subsidized lunches, fitness education, and a company gym. Employees are the most valuable assets to any company (Noelcke, 2014).

The benefits for employers are very obvious. They provide the company with strategic advantages by investing money in a program that will hopefully bring them lowered expenses in return, often in the



form of better-performing workers and lower absenteeism and health care costs. Employees are the most valuable assets to any company. By providing workers with these services, companies are improving wellbeing and job satisfaction, as well as raising retention rates. The welfare of employees has a direct impact on the success of the company.

Workplace wellness programs can help an individual get healthier, even if that simply means learning how to reduce stress and muscle strain when s/he is on the job. Depending on what his/her company offers, it might also help to lose weight, lower his/her cholesterol and blood pressure, sleep better, and save money on prescriptions. Sometimes, all they need is a little motivation to get the ball rolling, and a workplace wellness plan might be it.

Another great benefit of wellness programs is a built sense of camaraderie with co-workers. An individual has a chance to experience activities with them that are not related to work, whether in a walking club or sports team, by having lunch together, or by going to the gym. Social support is a very important part of weight loss and getting fit. By interacting with co-workers, s/he has others to give him/her encouragement when needed, as well as to hold accountable to one's goals. Plus, s/he is motivated by seeing other's positive results. By using a wellness program, s/he will be an important part of the team.

The school has a big role in the healthy development of its workforce and students. In support of this contention, the Department of Education (DepEd) has a health and nutrition program to help maintain good nutrition and the well-being of every individual in the educational environment.

School heads and teachers spend a considerable part of their life in school exposed to a variety of environmental, physical, emotional, and social influences. Therefore, to benefit maximally from the educational system, they need to be physically, mentally, and emotionally healthy, while exposure during school hours to various hazards such as physical injury, infections, and emotional problems should be minimal if not totally prevented. It is for this reason that the school health program (SHP) was established, which include the following eight components: (1) parent/community involvement; (2) healthful school environment; (3) health services; (4) health education; (5) physical education; (6) nutrition services; (7) counseling, psychological, and social services; and (8) health promotion for school staff (Ofovwe and Ofili, 2015).

Despite the presence of the School Health and Nutrition Program of the DepEd, it is undeniable that there is still an existence of severely shattered population in different school districts in the province

of Northern Samar, as reported in the baseline and end-line lists of Top Ten with Severely Wasted School Population report for the year 2010 as follows: Silvino Lobos, Mapanas, Lapinig, Catarman III, Lavezares II, Gamay II, Catarman II, Victoria, Catarman IV, San Antonio, Pambujan II, Las Navas I, and Mondragon II. A baseline report is the summary of the nutritional status of the school population in the various school districts of the province for the first quarter of the school year. Endline report showed the summary of reports on the nutritional status of the school population for the last quarter of the school year.

It is for this main reason that the researcher was interested in finding out the wellness program conducted in the public school in Catarman III District to come up eventually with suggestions, solutions, and recommendations to reduce the problems encountered with regard to wellness program conducted in the District. Thus, this study was deemed necessary.

## II. OBJECTIVES OF THE STUDY

This study was conducted to determine the wellness program conducted in the public schools in Catarman III District.

Specifically, this study sought to answer the following inquiries:

1. What is the impact of the wellness program conducted in University Laboratory Elementary School on the well-being of the school heads and the teachers?
2. What are the problems encountered by the respondents with regard to the wellness program conducted in University Laboratory Elementary School?
3. Is there a significant difference in the problems encountered by the school heads and the teachers in the wellness program conducted in University Laboratory Elementary School?

## III. METHODOLOGY

This study was conducted in the municipality of Catarman, Northern Samar. Catarman, the capital and largest town of Northern Samar by virtue of R. A. No. 4221 is a first-class Municipality in the Philippines with a total population of 92,000, according to the 2010 Census. It lies on the northern part of Samar Island and southeast of the Philippine capital, Manila. It is bounded to the east by Mondragon, to the west by Bobon, to the south by Lope de Vega, and to the north by the San Bernardino Strait.

The municipality is skirt-shaped. On the Pacific coast are flat lowlands with the interior characterized by outlying low hills. Mt. Puyao in Barangay Liberty is the highest peak in the area. The Catarman River, a major provincial river, divides the eastern and the western parts of the town. It is fed by the Patigua, Hibulwangan, Mahangna, Tura, and Danao creeks together with lesser prominent estuaries.

The DepEd Division Office is situated in Catarman, the capital town, which is under the Department of Education (KagawaranggEdukasyon). DepEd Northern Samar, with its five hundred twenty-eight (528) elementary schools, eighty-two (82) general high schools, three (3) regular preschool and one hundred thirty-seven (137) PTA organized classes offering quality basic education, eighteen (18) technical and vocational schools offering TVET curriculum, five (5) schools offering Alternative Delivery Mode Classes and forty-three (43) alternative education classes, is guided by its vision "A division with a culture of character and academic excellence by 2015" (Northern Samar Provincial Profile 2009).

This study was conducted in the public elementary and secondary schools in Catarman III District.

To assess and evaluate the wellness program conducted in the public schools in Catarman III District, the descriptive-correlational method of research was utilized in this study.

This study employed the descriptive method because it specifically aims to know the profile of the wellness program as to its year started, its vision,

The first part focused on the socio-demographic profile of the school heads and the teachers as to their age, sex, civil status, highest educational attainment, length of service, and types of wellness program participated.

The second part dealt with the impact of the wellness programs conducted in Catarman III District on the well-being of the school heads and the teachers.

And the third part identified the problems encountered by the respondents with regard to the wellness program implemented in Catarman III District.

For the instrument to be valid and effective, a pre-test was conducted to validate the content of the instrument whether the questions jibed with the statement of the problem.

The instrument underwent validity testing by conducting a pre-test at the elementary and secondary schools in Catarman I District, Catarman, Northern Samar, with the same type and kind of respondents and sampling technique that were used.

mission, and goals, frequency of the conduct of the program, and its participants, and the socio-demographic profile of the respondents, in terms of age, sex, civil status, highest educational attainment, length of service, and types of wellness program participated. Moreover, this study aimed at determining the impact of the wellness program conducted in Catarman District III on the well-being of the school heads and the teachers and the problems they encountered during the conduct of the program.

Descriptive designs provide comprehensive information about a problem or situation, its variables, and its features. They are more precise in their focus and scope than exploratory designs. According to David (2005), a descriptive study uses more specific data gathering techniques, may involve various comparison groups in its attempt to produce a representative sample, and provides specific and clear information regarding the problem. Descriptive research designs cannot control conditions nor test hypotheses. It also employed the correlational design because it will try to test the hypothesis on the difference.

Using such a design, this study tried to ascertain if there is a significant difference in the problems encountered by the school heads and the teachers in the wellness program conducted in Catarman III District.

A survey questionnaire was used as the primary instrument to gather data. The survey questionnaire was patterned from the master's study of Chua (2012) and was composed of three (3) parts.

The researcher administered the instrument twice to the same respondents with an interval of one week.

Questions and comments regarding the test question were entertained and helped the researcher to make the instrument more specific and measurable.

After the pre-testing, validation, and approval, the researcher consulted an English Critic to edit the questionnaire which revisions stemming from the trial were done to make the instruments final for fielding.

This study involved the school heads and the teachers of public elementary and secondary schools in Catarman III District, Catarman, Northern Samar.

Fourteen (14) school heads and 148 teachers were chosen as respondents coming from the following schools under the jurisdiction of Catarman III District: Balud ES, Binog ES, Cag-abaca ES, Cal-Igang ES, Celarima ES, Daganas ES, Gen. Malvar ES, Generoso R. Frigillana Memorial School (Catarman III Central School), Gibulwangan ES,

Guba PS, Macagtas ES, New Rizal ES, Old Rizal ES, and Catarman Comprehensive National High School.

The respondents of this study were the school heads and the teachers in public elementary and secondary schools in Catarman III District.

Complete enumeration for school head-respondents was employed. Thus, 14 school heads participated in this study.

While random sampling technique was used for the teachers, a total of 148 teachers were determined by the researcher using Slovin's formula employing the fishbowl technique to get the total sample size.

#### IV. FINDINGS

##### A. Profile of the Wellness Program Conducted in Catarman III District

The wellness program was first started in 1997 by the Department of Education National Office, and the Division of Northern Samar adopted the program for healthy and productive school children, teachers, non-teaching personnel, and administrators/heads enjoying their rights and actualizes their fullest potential in a healthful, stimulating and nurturing environment.

The wellness program conducted in Catarman III District is part of the school health and nutrition program of the department, which is committed to providing effective health and nutrition services as fertile avenues for the inculcation of positive health values and behavior, pursued with the spirit of dedication, high sense of mission and excellence, towards the development of healthier and more productive school populace in a clean, healthy, and drug-free school and community environment.

Moreover, the program aims to provide quality services and educations to develop the individual physically, mentally, socially, and spiritually healthy to become a productive, self-reliant, and responsible member of society. Specifically, the program will be able to: (1) detect early signs and symptoms of illness and/or disabilities and deviations from normal; (2) provide preventive and remedial measure, for simple and common ailments among the school population; (3) coordinate with other health personnel, the translation of scientific knowledge to desirable health behavior; (4) participate in the dissemination of health messages to teachers and pupils; (5) create awareness among school children, teachers, non-teaching staff, and school administrators on the importance of health and safety; (6) monitor the implementation of the standards of school health program relative to the school plant; (7) establish/strengthen linkages with government and non-government organization for school-community

health work; (8) encourage the provision of needed health facilities; (9) provide opportunities for research and studies on health related concerns; (10) increase the mental and physical health of school children, teachers, non-teaching staff, and school administrator; (11) increase the productivity and reduce absenteeism; and (12) increase job satisfaction and loyalty as well as strengthen the organization's values and culture.

The program participants include the school administrator/head, the teachers, the non-teaching personnel, and the school children, and it is conducted quarterly every school year to promote a healthy school environment.

##### B. Respondents' Socio-Demographic Profile

Age. This shows the varying age of the respondents, which represents all the age ranges. Data show that 32 or 19.75% belonged to the age bracket of 21 to 25 years old; 37 or 22.84% belonged to 26 to 30 years old; 28 or 17.28% belonged to 31 to 35 years old; 28 or 17.28% belonged to 36 to 40 years old; 16 or 9.88% belonged to 41 to 45 years old; 15 or 9.26% belonged to 46 to 50 years old; three (3) or 1.85% belonged to 51 to 55 years old, and three (3) or 1.85% belonged to 56 to 60 years old.

The respondents were distributed among the age brackets. Most of them belonged to the age range 26 to 30 years old. This indicates that the school heads' and the teachers' age belonged to middle adulthood.

Sex. Data shows that 40 or 24.69% were male and 122 or 75.31% were female.

It can be gleaned from the table that the majority of the respondents are female. This means that female school heads and teachers had that strong trust and confidence needed to carry out their teaching skills in the framework of morale and a better school environment.

Civil Status. Statistical data show that 57 or 35.18% were single; 99 or 61.11% were married; one (1) or 0.62% were separated, and five (5) or 3.09% were widowed.

The majority of the respondents were married, which means that their family seems to act as a school support system and a secure base upon which they build their careers.

This indicates that the majority of the respondents were bachelor's degree holders, which means that the teachers in Catarman III District should exert effort to upgrade themselves professionally.

Length of Service. It shows that 41 or 25.31% had been in the service for five (5) and below; 50 or

30.86% served for 6 to 10 years; 38 or 23.46% served for 11 to 15 years; 17 or 10.49% served for 16 to 20 years; eight (8) or 4.94% served for 21 to 25 years; five (5) or 3.09% served for 26 to 30 years, and three (3) or 1.85% served for more than 30 years.

Based on the results, most of the respondents have been in the service for 6 to 10 years. Data indicate that the school heads and the teachers had already gained experience in being classroom teachers and school managers.

Based on the results, most of the respondents participated in the on-site fitness programs. This implies that the school heads and the teachers of Catarman III District are very health conscious and participates in the different wellness programs conducted by the Department of Education Division of Northern Samar.

### ***C. Impact of the Wellness Program Conducted in Catarman III District***

The wellness program conducted in Catarman III District was "much extensive" as assessed by the school heads and the teachers in terms of health and nutrition education with a mean of 3.712. This indicates that a majority of the respondents agreed that the wellness program conducted confers with the teachers about the kind of follow-up needed by the pupils (3.969); initiates/assists in planning in-service trainings and seminars for teachers on current health and nutrition problems (3.858); assist teachers in the selection of appropriate health and nutrition instructional materials (3.734); acts as resource person in health classes and other health-related activities (3.734); demonstrates to teacher the different screening procedures and their implication to the learning process (3.679); conduct the different screening procedures like vision test, hearing test, height and weight measurement, health examination/assessment of pupils (3.673); gives health lectures/talks to classes or pupils before and after any health activity or procedure and on different levels, on different health and nutrition topics (3.660); assists the administrators in providing the school with adequate health education references for pupils and teachers (3.586); and initiates/conducts training of teachers as school health guardians (3.518).

As to the healthful school living aspect of the wellness program conducted in Catarman III District, the school heads and the teachers assessed it as "much extensive" with a 3.611 mean. The results indicate that the respondents agreed that the wellness program encourages the promotion of wholesome interpersonal relationships (3.778); helps supervise the maintenance of safe, healthful, and sanitary conditions of the school plant (3.592); encourages the school administrator to provide safe and sanitary

health facilities (3.574); assists the administrator in the organization of a healthful school day (3.562); and looks into the sanitation of the lunch counter, in the selection, preparation and serving of food (3.549).

The table also shows that the health and nutrition services of the wellness program were assessed as "much extensive" by the school heads and the teachers of Catarman III District, with a mean of 3.672. This means that the respondents agreed that the wellness program treats common ailment identified (3.846); identifies, refers, and follows through exceptional and physically handicapped children (3.790); renders first aid treatment (3.747); isolates cases of communicable diseases and refers them to the medical officer or any health agencies for proper diagnosis and management (3.716); utilizes tried and tested medicinal plants (3.611); conducts individual health and nutrition assessment/examination (3.592); provides health guidance and counseling to pupils found with defects (3.586), and helps organize a functional school clinic (3.488).

The school heads and the teachers of Catarman III District assessed the school-community coordination for health and nutrition, with a mean of 3.729, as "much extensive". This means that the respondents agreed that the wellness program coordinates with the community health agencies regarding proper management and referrals and other health and nutrition projects (4.056); confers with parents/teachers concerning the health status of pupils/students (3.821); conducts school-community assemblies (3.728); acts as resource person in school-community health-related activities (3.703); initiates or reactivates the organization of the school-community health council; (3.685) coordinates with the community health agencies regarding proper management and referrals and other health and nutrition projects (3.617); and follows-up cases of sick children, teachers and other school personnel through home/hospital visits (3.494).

The wellness program was assessed as "much extensive" by the school heads and the teachers of Catarman III District, with a mean of 3.715 in terms of the related health and nutrition activities. This implies that the respondents agreed that the wellness program conducts school health and nutrition survey and utilizes results for planning research and other purposes (4.062); participates in the evaluation of the school health and nutrition programs and projects (3.796); initiates projects related to health and nutrition education/service (3.691); establish health and nutrition data bank (3.679); consolidates, prepares and submits required promptly and regularly (3.617); conducts action research in relation to school health and health education (3.586), and participates

in meetings/conferences and other health and nutrition-related activities (3.574).

With the grand mean of 3.693, the impact of the wellness program conducted in Catarman District III on the well-being of the school heads and the teachers was much extensive in terms of health and nutrition education, healthful school living, health and nutrition services, school-community coordination for health and nutrition, and other related health and nutrition activities.

The statements of the Luxembourg Declaration of 1997 and the World Health Organization support the findings as it considers the workplace as one of the priority settings for health promotion into the 21st century because it influences physical, mental, economic, and social well-being and offers an ideal setting and infrastructure to support and improve the health and well-being of people at work. Furthermore, emphasizes that the health and well-being of employees at work can be achieved through a combination of improving the organization and the working environment, promoting active participation, and encouraging personal development.

Corollary, the study conducted by Chua confirms this because a wellness program can have favorable results on the employees' health and productivity after engaging in a wellness program.

#### ***D. Problems Encountered with the Conduct of the Wellness Program in Catarman III District***

Statistical data shows that 158 of the respondents do not trust the wellness program because they are afraid to disclose their habits, medical conditions, or lifestyle choices; 142 responded that the wellness program does not provide principles and approaches that will strengthen the participants' skills to respond to their own stress and challenges; 130 responded that they feel personalized interventions are intrusive and compromise privacy; 129 responded that they do not gain emotional resiliency and improve performance in the face of academic, personal, and social pressures; 106 responded that the wellness program do not help or encourage to quit smoking, lose weight, exercise routinely or have periodic health screenings for high blood pressure or high cholesterol; 98 responded that telling people about the participants' risks and giving them advice would not necessarily lead them to take action on well-being; 88 responded that there are too many options can overwhelm the participants, and school

environment can waste money on programs that would not effectively address teachers' biggest health problems; 35 responded that the implementers penalized for not participating in a wellness program; 27 responded that rewarding teachers for simply showing up to a wellness program does not mean they will actually get healthier; and 18 responded that the incentives do not encourage healthy behavior beyond the completion of the required programs.

The results show that a greater number of the school heads and the teachers of University Laboratory Elementary School do not trust the wellness program conducted in their school because they are afraid to disclose their habits, medical conditions, or lifestyle choices.

### **V. RECOMMENDATIONS**

1. The University Laboratory Elementary School should pay close attention to the well-being of the teachers, inclusive of their wellness.
2. The teachers should not put their wellness behind just because they are busy with their school works. They should also trust the school administration's program for wellness.
3. The DepEd should provide strict rule implementation of the wellness of the teachers and provide adequate materials in order to do so.

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