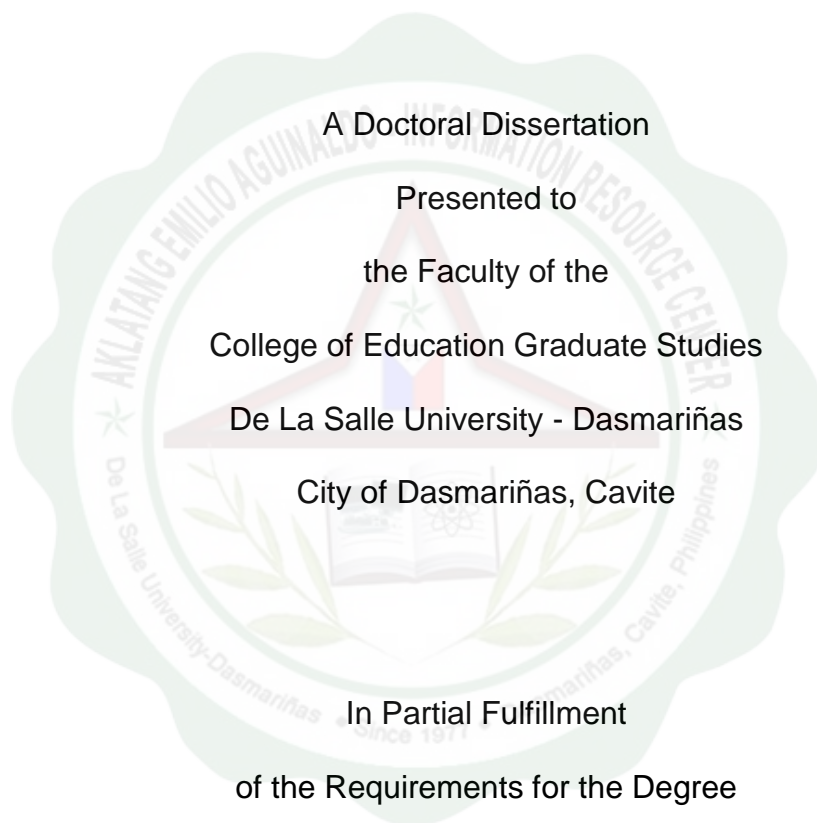


**EXTENT OF COMMUNITY ORGANIZING PARTICIPATORY ACTION
RESEARCH (CO-PAR) IMPLEMENTATION BY SELECTED
COLLEGES OF NURSING IN THE PROVINCE OF CAVITE:
BASIS FOR CURRICULUM ENHANCEMENT**



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In Partial Fulfillment

of the Requirements for the Degree

Doctor of Philosophy

Major in Educational Management

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March, 2013

ABSTRACT

Title of the Research: **EXTENT OF COMMUNITY ORGANIZING – PARTICIPATORY ACTION RESEARCH (CO-PAR) IMPLEMENTATION BY SELECTED COLLEGES OF NURSING IN THE PROVINCE OF CAVITE: BASIS FOR CURRICULUM EHNANCEMENT**

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This descriptive design was utilized in this study to obtain information concerning the extent of Community Organizing-Participatory Action Research (CO-PAR) implementation by selected Colleges of Nursing in the province of Cavite, AY 2012-2013. Specifically it described what exist with respect to variables such as the profile of the four groups of respondents and their extent of CO-PAR implementation. Also, significant differences in the implementation as evaluated by the 8 participating Colleges of Nursing and the four groups of respondents were determined and consequently the findings of the study were the basis for curriculum enhancement undertakings. The conceptual framework was based on the theory of Von Bertalanffy's Input-Process-Output Model System

This study utilized a researcher-made questionnaire integrating the essential activities of each phase of CO-PAR by the Health Resource

Development Program (HRDP). The main sources of data came primarily from the responses of a total of 590 respondents from 8 participating Colleges of Nursing with 8 Deans, 8 Related Learning Experience (RLE)/ Community Health Nursing (CHN) Coordinators, 22 CHN Faculty/Clinical Instructors, 464 BSN IV Students, 10 Rural Health Unit Personnel and 58 Core-group Members.

Purposive sampling was utilized to determine the College of Nursing who would qualify to be part of the study. Since the specific implementers of CO-PAR in the College of Nursing were limited in number, the 100 percent of the CO-PAR implementer and the Core-group members of the partner barangay were utilized.

Findings from the study significantly showed that only 50% of the Deans had formal CO-PAR Training and 75% of the CHN/RLE Coordinators had formal CO-PAR training, and 90.91% of the Faculty members had no formal CO-PAR Training. Meanwhile, 50% of the RHU Personnel had no formal CO-PAR Training and 63.79% of the Core-group members had no formal CO-PAR training. In terms of length of CHN exposure of the BSN students, 62.60% responded 1-4 weeks exposure per school year. The overall mean rating of the eight participating Colleges of Nursing and the four groups of respondents revealed that CO-PAR implementation at all phases was partially implemented. When comparing the extent of implementation of CO-PAR

process among participating Colleges of Nursing, data showed that the eight participating Colleges of Nursing differ in their implementation of the essential CO-PAR activities at all phases. Same findings were noted when comparing the evaluation of the four groups of respondents at each phase of CO-PAR, except at the community study/diagnosis/research phase that the evaluation of the four groups of respondents was the same. Based on the findings of the study, a Clinical Instructional Program for Community Health Nursing Related Learning Experience (CHN-RLE) is hereby proposed.

The study concludes that the Nursing personnel are academically prepared in their positions but majority of the CO-PAR implementers (Dean, CHN Faculty members, Core-group members and RHU Personnel) do not have formal CO-PAR training. On the other hand, the most common length of CHN RLE exposure of the BSN IV students is 1-4 weeks per school year. The CO-PAR process was partially implemented as rated by the eight participating Colleges of Nursing and the four groups of respondents. Furthermore, the eight participating Colleges of Nursing differ in their implementation of the CO-PAR Process and the same conclusion can be drawn when comparing the four groups of respondents (College of Nursing Personnel, Students, RHU Personnel, and Core-group Members).

This present study thereby recommends a Clinical Instructional program for Community Health Nursing (CHN) Related Learning Experience (RLE) that will serve as a guide for Colleges of Nursing to fully implement the essential activities of Community Organizing-Participatory Action Research (CO-PAR), along with the co-implementers from their partner communities.

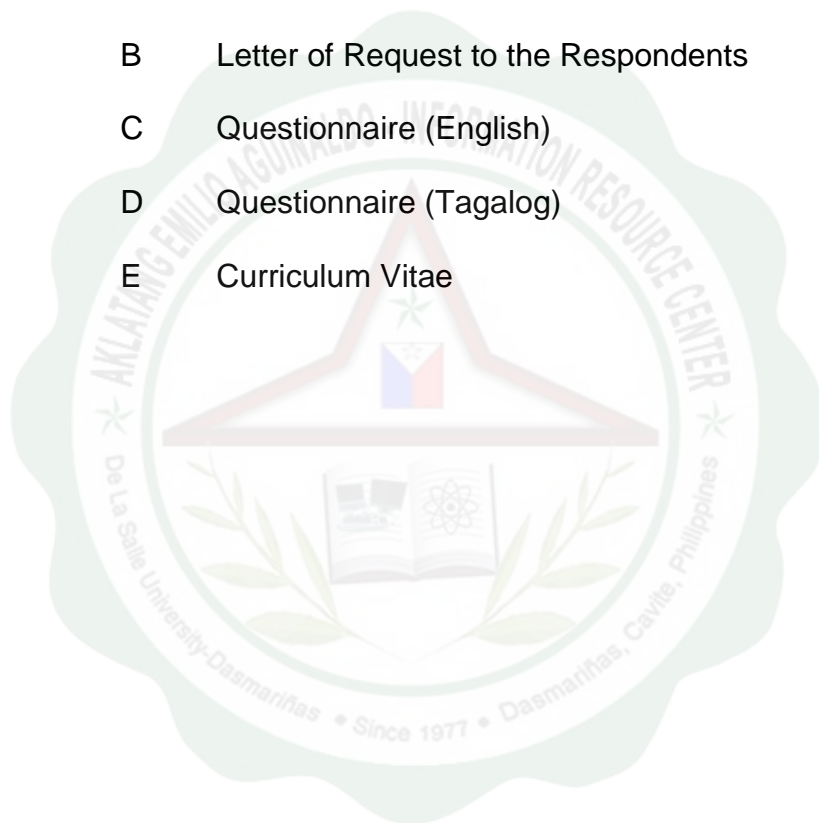


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FIGURE

FIGURE

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1 The Paradigm of the Study

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