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An Assessment of Indigenous Ethnic Group Perception on Baylon's Quality Patient Nursing Care Theory in Selected Barangay Communities in Kalinga Province in the Philippines

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Author's contribution

The sole author designed, analyzed, interpreted and prepared the manuscript.

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ABSTRACT

Background: This research study entailed assessing the "Perception" of the selected barangay communities in Kalinga Province in the Philippines because they live in high lands and healthcare services are crucial in this area. This is not only due to the high elevation but also because of the long distance from the National Government, where all the health supplies are sourced.
Aims: This study aims to assess the perceptions of indigenous ethnic group from selected barangay communities in Kalinga Province regarding the quality of patient nursing care and to generate essential recommendations for the Indigenous Ethnic Group, staff nurses, doctors,

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hospital administrators, as well as officials from the Department of Health and the National Government. The valuable insights obtained from this study will be instrumental in driving positive changes in healthcare delivery.

Methods: The study employed a Quantitative Descriptive nonparametric method design in this study to assess the perception of the communities in terms of factors to consider if patients will submit to hospitalization or not, determinants of quality patient health care, factors that boost patients' recovery, expected government programs, and self-image problems due to their diagnosis. Percentage was used to identify the ranking of categories and Welch t-test was used to identify the difference between the perception of the two barangay communities.

Results: The study showed that the mean scores and standard deviation of Group 1 Barangay community of Agbannwag and Group 2 Barangay community of Malalao were 89.45 (SD=14.72) and 96.67 (SD=2.52), respectively, and the statistical analysis of the Welch t-test calculated the t-value as -3.5854, with a p-value of 0.0006964 less than alpha, the null hypothesis is rejected and the difference was statistically significant.

Conclusion: The study concludes that both selected barangay communities of Indigenous Ethnic Group from Kalinga Province differs significantly in their perception on Baylon's Quality Patient Nursing Care Theory but both barangay communities recognized the importance of Baylon's Theory.

Keywords: Quality patient nursing care; hospitalization; patients' recovery; expected government programs; self-image problems.

1. INTRODUCTION

The Kalinga people are considered native and needy in their locale area and the government classified them as an Indigenous Ethnic Group (Grande et al., 2023) with an ancestral domain in the high land of Cordillera Mountain Range in the northern Philippines. The Indigenous people (IPs) are among the poorest and most disadvantaged social group in the country (Ybes, 2017). The population of Kalinga-Apayao is mostly native-born (99.7%) and the province is predominantly inhabited by ethnic groups officially recognized by the Philippine government as cultural minorities (Miriam, 1995). The configuration of Kalinga province is unique surrounded by mountain peaks ranging from 1,500 to 2,500 meters (4,900 to 8,200 feet) in elevation and have a rugged and sloping landscape (blog850194944, 2018). This high elevation is susceptible to landslides (Cordillera Development plan 2002-2004), especially during typhoons, and is very dangerous during earthquakes

Given this scenario, healthcare services are crucial in this area. This is not only due to the high elevation but also because of the long distance from the National Government, where all the health supplies are sourced.

The assessment of the Indigenous Ethnic Group from the remote areas of Kalinga Provinces may provide a different perspective on Quality Care compared to the previous study conducted in the lowlands of La Union and Metro Manila. The results of this assessment could yield varying perceptions of quality patient nursing care.

To gauge their perception, the researcher will base the study on Baylon's Theory of Quality Patient Nursing Care (Baylon, 2024) and utilize its categories. These categories include factors influencing patients' decision to be hospitalized, determinants in delivering quality patient health care, factors contributing to patients' recovery, expected government programs for patients, and self-image issues resulting from their diagnosis (Baylon, 2024). These categories will serve as the basis for evaluating patients' perceptions of Quality Patient Nursing Care within each category to determine their level of importance.

1.1 Objective

This study is an important initiative to assess the perceptions of selected barangay communities in Kalinga Province regarding the quality of patient nursing care. Its ultimate goal is to generate essential recommendations for the Indigenous Ethnic Group, staff nurses, doctors, hospital administrators, as well as officials from the Department of Health and the National Government. The valuable insights obtained from this study will be instrumental in driving positive changes in healthcare delivery.

2. METHODOLOGY

2.1 Setting of the Study

The study was conducted in two specific barangay communities in Kalinga Province in the Philippines: Barangay community of Agbannawag and Barangay community of Malalao. Barangay community of Agbannawag was chosen because of its proximity to Kalinga Provincial Hospital, being only 18 kilometers away, while Barangay community of Malalao was selected for its remoteness from the hospital.

The research design employed in this study was a Quantitative Descriptive nonparametric method design, non-Probability Convenience Sampling was used for 110 respondents; they were chosen from the two barangays through GPower two-tailed, effect size of 0.5, alpha error prob. of 0.05 and power of 95 percent: 55 from Barangay Agbannawag and 55 from Barangay Malalao. The inclusion criteria for Barangay community of Agbannawag were: 1. Filipino citizenship; 2. Indigent residency in Barangay Agbannawag; 3. Accessibility and willingness to participate in the study; 4. Proximity of their location to the hospital.

Similarly, participants from Barangay community of Malalao were selected through convinience sampling based on the criteria of: 1. Filipino citizenship; 2. Indigent residency in Barangay Malalao; 3. Accessibility and willingness to participate in the study; 4. Remoteness of their location from the hospital.

2.2 Tool of the Study

Baylon's Quality Patients Nursing Care Theory questionnaires was used to assess the perceptions of participants regarding the importance of Quality Patient Nursing Care Theory. The assessment includes five categories:

1. Factors influencing a patient's decision to be hospitalized or not
2. Determinants of quality patient healthcare
3. Components that contribute to a patient's recovery
4. Anticipated government programs
5. Self-image issues resulting from a diagnosis

Respondents will provide their input on these five categories to assess the level of the community's indigenous perception on Baylon's theory.

2.3 Data Gathering Procedure

The data was collected using Baylon's quantitative questionnaires, and a survey was carried out in Barangay community of Agbannawag and Barangay community of Malalao, Kalinga Province. A total of 110 respondents took part in the survey, with 55 from each barangay. The use of this questionnaires enabled an evaluation of key stakeholders' perceptions of Baylon's Quality Patient Nursing Care Theory.

2.4 Quantitative Analysis

The information gathered from the participants was meticulously arranged into tables to offer a detailed and comprehensive overview. Statistical analyses were conducted through Statkingdom.com, utilizing percentages to illustrate the significance of Baylon's Quality Patient Nursing Care Theory in both locations, and employing Welch's T-test with a significance level of 0.05 to identify any notable differences between the two barangay communities, ensuring a comprehensive and precise assessment.

3. RESULTS

From the results shown in Table 1, the mean for the parameter on "Factors to consider if patient will submit to hospitalization or not" perceived as "Important" was 97.58 percent for Barangay community of Agbannawag and 98.18 for Barangay communiy of Malalao. In Barangay community of Agbannawag, the top concern was financial problems and constraints (n=55) at an overwhelming 100 percent, closely followed by accessibility of health care and issues (n=54) at 98.18 percent, and long confinement issues (n=52) at 94.55 percent. Meanwhile, in Barangay Malalao, accessibility of health care and issues (n=55) took the lead at 100 percent, closely followed by financial problems and constraints (n=54) at 98.18 percent, and long confinement issues (n=53) at 96.36 percent.

Comparatively, the mean for the parameter on "Factors to consider if patient will submit to hospitalization or not" perceived as "Not mportant" was 2.42 percent for both Barangay community of Agbannawag and 1.82 percent for Barangay community of Malalao. The most not important factor for Barangay community of Agbannawag was Long confinement issues (n=3) with 5.45 percent followed by Accessibility of health care and issues (n=1) with 1.82

percent. While the most perceived not important for Barangay community of Malalao was Long confinement issues (n=2) with 3.64 percent and folowed by financial problems and constraints (n=1) with 1.82 percent.

Table 2 shows that the mean for parameter on "Determinants in providing in providing quality patient health care" as perceived "important" was 98.18 percent for Barangay community of Agbannawag and 99.39 percent for Barangay community of Malalao. The most important determinants in providing quality patient care was Good nursing service, care, and other issues (n=55) with 100 percent, followed by Good doctor-patient-relationship (n=54) with 98.18 percent, and lastly Good doctor-nurse-patient relationship (n=53) with 96.36 percent. While for Barangay Malalao the most "important" was Good doctor-nurse-patient relationship (n=55) and Good nursing service, care and other issues (n=55) that shared with 100 percent. Followed by Good doctor-patient relationship (n=54) with 98. 18 percent.

Table 1. Assessment on community perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Factors to Consider if Patients will Submit to Hospitalization or Not" if it is Important or Not Important frequency distribution results, June 2024

	Important				Not Important			
	Barangay Agbannawag		Barangay Malalao		Barangay Agbannawag		Barangay Malalao	
Factors to consider if patient will submit to hospitalization or not	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Accessibility of health care and issues	54	98.18	55	100	1	1.82	0	0.00
Long confinement issues	52	94.55	53	96.36	3	5.45	2	3.64
Financial problems and constraints	55	100	54	98.18	0	0.00	1	1.82
Mean		97.58		98.18		2.42		1.82

Barangay community of Agbannawag n= 55, Barangay community of Malalao n= 55

Table 2. Assessment on Community Perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Determinants in Providing Quality Patient Health Care" if it is Important or Not Important frequency distribution results, June 2024

	Important				Not Important			
	Barangay Agbannawag		Barangay Malalao		Barangay Agbannawag		Barangay Malalao	
Determinants in providing quality patient health care	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Good doctor-nurse-patient relationship	53	96.36	55	100.00	2	3.64	0	0.00
Good doctor-patient relationship	54	98.18	54	98.18	1	1.82	1	1.82
Good nursing service, care, and other issues	55	100	55	100.00	0	0.00	0	0.00
Mean		98.18		99.39		1.82		0.61

Barangay community of Agbannawag n= 55, Barangay community of Malalao n= 55

Table 3. Assessment on Community Perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Components (factors) that Boost Patients' Recovery" if it is Important or Not Important frequency distribution results, June 2024

	Important				Not Important			
	Barangay Agbannawag		Barangay Malalao		Barangay Agbannawag		Barangay Malalao	
Components (factors) that boost patients' recovery	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Prayer and God's help issues	55	100.00	54	98.18	0	0.00	1	1.82
Visitation and token issues	45	81.82	49	89.09	10	18.18	6	10.91
Mean		90.91		93.64		9.09		6.36

Barangay Agbannawag n= 55, Barangay Malalao n= 55

Comparatively, the mean for parameter on "Determinants in providing in providing quality patient health care" as perceived "not important" was 1.82 percent for Barangay community of Agbannawag and 0.61 for Barangay community of Malalao. The most "not important" for Barangay community of Agbannawag was Good doctor-nurse-patient relationship (n=2) with 3.64 percent followed by Good doctor-patient relationship (n=1) with 1.82 percent. While for Barangay community of Malalao the most "not important "was good doctor patient relationship (n= 1) with 1.82 percent.

Table 3 shows that the mean for parameters on "Components (factors) that boost patients' recovery" perceived as "Important" was 90.91 percent for Barangay community of Agbannawag and 93.64 percent for Barangay community of Malalao. The most important component that boost patients' recovery for Barangay community of Agbannawag was prayer and God's help issues (n=55) with 100 percent and followed by Visitation and token issues (n= 45) with 81.82 percent. While for Barangay community of Malalao, the most important component that boost patients' recovery was prayer and God's help issues (n=54) with 98.18 percent followed by Visitation and token issues (n=49) with 89.09 percent.

Comparatively, the mean for parameters on "Components (factors) that boost patients' recovery" perceived as "not mportant" was 9.09 percent for Barangay community of Agbannawag and 6.36 percent for Barangay community of Malalao. The most "not important" component that boost patients' recovery for Barangay community of Agbannawag was Visitation and token issues (n=10) with 18.18 percent while for Barangay community of Malalao the most "not important" component that boost patients' recovery was Visitation and token issues (n=6) with 10.91 percent followed by Prayer and God's help issues (n=1) with 1.82 percent.

Table 4. Assessment on Community Perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Hansens' Patients Expected Government Programs" if it is Important or Not Important frequency distribution results, June 2024

	Important				Not Important			
	Barangay Agbannawag		Barangay Malalao		Barangay Agbannawag		Barangay Malalao	
Hansens' patients expected government programs	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Food accessibility and other supply issues	52	94.55	54	98.18	3	5.45	1	1.82
Source of livelihood, DOH programs and others	55	100.00	54	98.18	0	0.00	1	1.82
Medicine accessibility and other issues	53	96.36	54	98.18	2	3.64	1	1.82
Mean		96.97		98.18		3.03		1.82

Barangay community of Agbannawag n= 55, Barangay community of Malalao n= 55

Table 5. Assessment on Community Perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Self-Image Problems Due to Diagnosis" if it is Important or Not Important frequency distribution results, June 2024

	Important				Not Important			
	Barangay Agbannawag		Barangay Malalao		Barangay Agbannawag		Barangay Malalao	
Self image problems due to diagnosis	**No.**	**%**	**No.**	**%**	**No.**	**%**	**No.**	**%**
Avoidance of others, rejection of community, and discomfort	35	63.64	48	87.27	20	36.36	7	12.73
Deformity Issues	33	60.00	54	98.18	22	40.00	1	1.82
Discomfort with others	37	67.27	54	98.18	18	32.73	1	1.82
Mean		63.64		94.54		36.36		5.45

Barangay community of Agbannawag n= 55, Barangay community of Malalao n= 55

Table 4 shows that the mean for parameter on "Hansens' patients expected government programs" perceived as "Important" was 96.97 percent for Barangay community of Agbannawag and 98.18 percent for Barangay community of Malalao. The most important Hansen's patients expected government program for Barangay community of Agbannawag was Source of livelihood, DOH programs and others (n=55) with 100 percent, followed by Medicine accessibility and other issues (n=53) with 96.36 percent, lastly Food accessibility and other supplies issues (n=52) with 94.55 percent. While for Barangay community of Malalao, the most "important" Hansens' patients expected government programs were Food accessibility and other supplies issues (n=54), Source of livelihood, DOH programs and others (n=54), Medicine accessibility and other issues (n=54) shared with 98.18 percent.

Comparatively, the mean for parameter on "Hansens' patients expected government programs" perceived as "Not important" was 3.03 percent for Barangay community of Agbannawag and 1.82 percent for Barangay community of Malalao. The most not important "Hansens' patients expected government programs" for Barangay community of Agbannawag was Food accessibility and other supplies issues (n=3) with 5.45 perecent followed by Medicine accessibility and other issues (n=2) with 3.64 percent. While for Barangay community of Malalao, the most "not important" "Hansens' patients expected government programs were Food accessibility and other supplies issues (n=1), Source of livelihood, DOH programs and others (n=1), and Medicine accessibility and other issues (n=54) shared with 1.82 percent.

Table 5 shows that the mean for the parameter on "Self Image Problems due to diagnosis" perceived as "Important" was 63.64 for Barangay community of Agbannawag and 94.54 percent for Barangay community of Malalao. The most "important" Self Image Problems due to diagnosis for Barangay community of Agbannawag was Discomfort with others (n=37) with 67.27 percent followed by Avoidance of others, rejection of community, and discomfort (n=35) with 63.64 percent, lastly Deformity issues (n=33) with 60.00 percent. While for Barangay community of Malalao, the most "important" Self Image Problems due to diagnosis was Deformity issues (n=54) and Discomfort with others (n=54) shared with 98.18 percent followed by Avoidance of others, rejection of community, and discomfort (n=48) with 87.27 percent.

Comparatively, the mean for the parameter on "Self Image Problems due to diagnosis" perceived as "not important" was 36. 36 percent for Barangay community of Agbannawag and 5.45 percent for Barangay community of Malalao. The most "Not important" Self Image Problems due to diagnosis for Barangay community of Agbannawag was Deformity issues (n=22) with 40 percent followed by Avoidance of others, rejection of community, and discomfort (n=20) with 36.36 percent. Lastly, Discomfort with others (n=18) with 32.73 percent. While for Barangay community of Malalao, the most "not important" was Avoidance of others, rejection of community, and discomfort (n=7) with 12.73 percent followed by Deformity issues (n=1) and Discomfort with others (n=1) shared with 1.82 percent.

Table 6. Assessment on Community Perception in Barangay Agbannawag, and Barangay Malalao in Kalinga Province on "Themes of Baylon's Quality Patient Nursing Care Theory" if it is Important or Not Important, frequency distribution results, June 2024

Themes	Important		Not Important	
Quality Patient Nursing Care	**Barangay Agbannawag**	**Barangay Malalao**	**Barangay Agbannawag**	**Barangay Malalao**
Factors to consider if patient will submit to hospitalization or not	97.58	98.18	2.42	1.82
Determinants in providing quality patient health care	98.18	99.39	1.82	0.61
Components (factors) that boost patients' recovery	90.91	93.64	9.09	6.36
Hansens' patients expected government programs	96.97	98.18	3.03	1.82
Self image problems due to diagnosis	63.64	94.54	36.36	5.45
Mean	89.45	96.79	10.55	3.21

Table 7. Results of Welch T Test between Barangay Agbannawag (Group 1), and Barangay Malalao (Group 2) in Kalinga Province as to their Perception Regarding the Baylon's Quality Patient Nursing Care Theory Based on its Five Themes

Welch T Test Results				t-value	P-value	p < .05	Interpretation
	Mean	SD	N				
Group 1	89.45	14.72	55	-3.5854	0.0006964		Statistically
Group 2	96.67	2.52	55				Significant

Note: Level of significance is 0.05

Table 6 illustrates that the mean score for the parameter related to the importance of Themes of Quality Patient Nursing Care Theory was 89.45 percent for Barangay community of Agbannawag and 96.79 percent for Barangay community of Malalao. In Barangay community of Agbannawag, the most important theme identified in Baylon's Quality Patient Nursing Care Theory was the "Determinants in Providing Quality Patient Health Care," which received a mean score of 98.18 percent. This was followed by "Factors to Consider When a Patient Decides to Submit to Hospitalization," with a mean of 97.58 percent, and lastly, "Hansen's Expected Government Programs," which had a mean score of 96.97 percent. While the most "crucial" Theme in Baylon's Theory on Quality Patient Nursing Care as perceived by Barangay community of Malalao was the Determinants in providing quality healthcare to patients with a mean of 99.39 percent, closely followed by Factors to consider if a patient will submit to hospitalization or not and Hansen's patient anticipated government initiatives with a shared mean of 98.18 percent. Lastly, an issue of Self-Image image problem due to diagnosis with a mean of 94.54 percent.

Problem No. 1: Is there a significant difference between the Perception of Barangay Agbannawag, and Barangay Malalao of Kalinga Province Based on its Five Themes of Baylon's Quality Patient Nursing Care Theory?

***Null Hypothesis**: There is no significant difference between the Perception of Barangay Agbannawag, and Barangay Malalao in Kalinga Province Based on Its Five Themes of Baylon's Quality Patient Nursing Care Theory*

***Alternative Hypothesis**: There is significant difference between the Perception of Barangay Agbannawag, and Barangay Malalao in Kalinga Province Based on its Five Themes of Baylon's Quality Patient Nursing Care Theory*

Table 7 shows the results of whether there are significant differences between Perception of Barangay community of Agbannawag, and Barangay community of Malalao in Kalinga Province regarding with Quality Patient Nursing Care Theory on its Five Themes.

A Welch T Test was used to examine the difference between the perception of Group 1 Barangay community of Agbannawag and Group 2 Barangay community of Malalao. The data showed that the mean scores and standard deviation of Group 1 and Group 2 were 89.45 (SD=14.72) and 96.67 (SD=2.52), respectively, and the statistical analysis of the Welch t-test calculated the t-value as -3.5854, with a p-value of 0.0006964 less than alpha, the null hypothesis is rejected and the difference was statistically significant.

The perception of Barangay community of Agbannawag and Barangay community of Malalao in Kalinga Province differs significantly based on five key themes of Baylon's Quality Patient Nursing Care Theory. Despite this difference, both barangays recognized the importance of these themes in Baylon's Quality Patient Nursing Care Theory, as reflected in the mean scores of 89.45 in Barangay community in Agbannawag and 96.67 in Barangay community of Malalao. This underscores the universal significance of these Baylon's Theory in ensuring quality patient nursing care.

4. DISCUSSION

The interconnectedness of all variables of Baylon's theory show the perceptions of the indigenous community in Kalinga Province, the first variabl shows that both barangays, Barangay community of Agbannawag and Barangay community of Malalao perceived that "Factors to consider if the patient will submit to hospitalization or not" as "Important" with 97.58 percent both Barangay community of Agbannawag and Barangay community of Malalao. Supported by Accessibility of Health Care and related issues; Long confinement and related issues; Financial problems and related issues.

Accessibility to health care gathered 98.18 percent for Agbannawag and 100 percent for Malalao shows that Accessibility to health care is significant for indigenous people in Kalinga maybe because of its long distance from the National government where all the supplies are sourced. According to William, lack of acces to healthcare has a greater impact to the indigenous people (Williams, 2020). It is the reason why the National government do their effort to help and sustain the needs of all his indigent people in this areas in order to provide a good access of health care it strengthen the faith of this people to the government that the government can provide high quality health care and proper treatment and this help the people to decide to visit their hospital (The Importance of patient access in health care).

Second factor is Long confinement issue gathered 94.55 percent for Barangay community of Agbannawag and 96.36 percent for Barangay community of Malalao shows that long confinement is also important to indigenous people in Kalinga Province it can be on the different reasons; long confinement can help to be sure that the patient is well before of his discharge but for some long confinement may have had a negative impact on perceived quality of care and symptoms in patients with chronic disorders (Aafke, 2014). Failure to explain the timeframe of confinement the patients may tend to choose not to be admitted in the hospital. Another reason that really happening that hospitalization is difficult times for patients and to their families, especially for those who need long term care upon discharge (California Advocates for Nursing Home Reform, 2024).

Financial problems and constraints gathered 100 percent for Barangay community of Agbannawag and 96.36 percent for Barangay community of Malalao shows that “Financial problems and constraint” is important to them before they will decide to hospitalize or not. Normally patients refuses to be admitted due to hospital expenses specially if they belongs to indigenous people - thingking that hospitalization is expensive but not knowing that the government has a budget for them. On the other side the government faces challenges and this worsen more of growing financial concerns, like spiked labor costs and inflation on medical supplies, puts them on pace to have the worst financial performance into the pandemic period (Michael, 2022). The overwhelming demands of insurer-mandated administrative tasks drive up costs and significantly impede the delivery of quality patient care (Milligan et al., 2023). These three factors: Accessibility of health care, long confinement issues, and financial problems must be properly addressed and this can open the chance for the patients to decide to be admitted to the different hospitals.

For the second main variable, it shows that both barangays, Barangay community of Agbannawag and Barangay community of Malalao perceived that “Determinants in quality patient health care” are important supported by good doctor-nurse-patient relationship; Good doctor-patient relationship; Good nursing service, care, and other related issues.

Determinants of quality patient care are important. There is some evidence that aspects of nurse–doctor communication are associated with the quality of care and treatment patients receive while they are in hospita (Sandesh et al., 2023) and this produces a good patients outcomes. Another determinants of quality care is the good relationship. This relationship is important to establish the good communication where orders from doctors are clearly received by nurses on duty and the orders are properly carry out by nurses to their indigenous Kalinga patients. According to Miss Zhang & Chen (2022), Quality Patients Care had a good and promising effect that doctor-nurse-patient integrated nursing management intervention had good safety and was worthy of further promotion in clinical practices (Milligan et al., 2023).

The quality of care provided to indigenous Kalinga patients is directly influenced by the type of relationship established with them. It's crucial for nurses to understand that fostering a strong rapport significantly enhances both the quality of care and the patient's healing process (Aiqiong and Qiuxiang, 2022). One key factor in ensuring top-notch care is exceptional nursing services delivered with the invaluable support of the Nursing Committee. Nursing services must be dynamic and aware of every detail of the patients’ needs.

This dynamic committee plays a pivotal role in enhancing the quality of nursing services through the development and review of nursing policies and procedures, meticulous monitoring and evaluation of nursing practices, provision of training and professional development, fostering seamless collaboration between nurses and health teams, and passionately advocating for

the well-being of both nurses and patients (Yolanda et al., 2023). The Table 7 shows that all the Kalinga's barangay communities are in favor of good doctors-nurse-patient relationships together with good nursing services. This perception must be valued by nurses and doctors to promote a good relationship and quality care.

The third main variable shows that both barangays, Barangay community of Agbannawag and Barangay community of Malalao perceived that "Components (factors) that boost patients' recovery" are important supported by Prayers and God's help and related issues; and Visitation and token-related issues.

Components that boost patients' recovery are also important. Asian countries and even Western countries belief in God existence and this is the last source of the patient's strength. The faith that they have is very important, through this faith they can regain the patient's strength, comfort their feelings, and healed their sickness through devotional prayers. Kalingas people can use prayer, this component can boost patients' recovery specially when they believe in God. Their experience in prayer can not be detached from them specially when they prayed and the prayer was answered. It is important to understand these values of faith to support forms of care that aim to enhance the quality of life during confinement (Molina-Mula et al., 2020). Enhancement of quality life through prayers depends on the individual's belief but religious beliefs are discussed as an effective resource for the enhancement of adjustment to chronic and life-threatening illness (Raditya et al., 2024) and this should not be disregarded.

Another component that boost patient recovery is Visitation and token related issue. Visitation can sooth patient's feeling. It gives comfort specially for patient experience a long hospital confinement. Visitation can help to express their feelings to their relatives that helps to release the burden of their feelings. Token or gift from the visiting relatives or friend can ease, gives happiness, and feeling of appreciation from their love ones. These things, prayers, token, and gift can boost patients' recovery.

The fourth main variable shows that both barangays, Barangay community of Agbannawag and Barangay community of Malalao perceived that "Hansen's patients expected government programs" to be important supported by Food accessibility and other supplies-related issues; Source of livelihood and DOH programs and other related issues; Medicine accessibility and other related issues.

Hansens' patients expected government programs that they perceived "important", Primarily, one of the expected government program is food accessibility. Accessing healthy food is paramount to one's nutritional status (Liu et al., 2023). This maybe, food is the basic needs of patients to regain their strength during the long hospital confinement. It also help to replenish the micronutrients needed by the body and help for good prognosis of Kalinga's patients.

Medicine accessibility is also important because of having inequity in health services can impact health outcomes (Jatav, 2024). Medicine is significant to patients specially if they are experiencing severe pain, it can relaxes the emotional tension, can lower the high blood pressure, and it can shorten the hospitalization. Hence

Hence, It is vital to enhance the availability of medicines and medical supplies in Kalinga Province because they are far from the national government, once their acessibility is strengthened (Jatav, 2024) most of the patients' concerns will be addressed.

During the Covid 19 outbreak, Covid-19 patients are similar to Hansen's patients because it has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food systems, and the world of work (Sung et al., 2024). Most of the patient inflicted by any diseases can lead to different scenarios of life. It can be mild diseases that any one could be discharged in a few days.

Other patients can experience a serious condition that can be admitted for a long period of time. It was observe during the Outbreak of Hansens a decade ago and during Covid 19 during in our time. Covid-19 fallouts is the loss of jobs and livelihoods. Livelihood losses don't just affect women's incomes – they can also create additional hardships as family resources dwindle and savings and assets diminish. It's crucial to recognize the broader impact of these losses and take action to address them (Bina, 2021) during this time specially if you are admitted. When the patient experience a long years of hospital confinement, once discharge he needs a good source of livelihood to be productive in community again. Therefore, Hansenites like

Covid-19 patients need support once discharged. Once they live in the community, they must have a source of livelihood.

The fifth main variable shows that both barangays, Barangay community of Agbannawag and Barangay community of Malalao perceived that “Self-image problems due to diagnosis” are important supported by Avoidance of others, rejection of the community, and discomfort; Deformity issues; Discomfort with others.

One self-image problem due to their diagnosis, this is common among Hansenites patient a decade ago due to the irreversible disability and the social stigma it causes, leprosy has been a public health problem for many centuries (Yudhy et al., 2021). Self-image problem due to their diagnosis is also true among Covid 19 patients like one of the article said, “main themes which emerged from the qualitative responses were social stigma and rejection, humiliating behaviour of others, breach of confidentiality, loss of trust/ respect, and impact of Covid-19 diagnosis on their business (Nazish et al., 2020). It is really true that self-image problem due to their diagnosis can lead to social rejection or stigma.

Another supporting variable is deformity issues - deformities can be seen among the patient that has long confinement, neglegted or improper management (Borbo and Conde, 2012). In order to address this problem, the Philippine government has different health facilities that can provide services and health workers willing to treat leprosy patients and to provide MDT free of charge (Dijkstra et al., 2017) to eliminate self-image problems.

The National government can maintain and enhance health facilities to help indigenous ethnic groups, especially those who live in highlands.

Since this was the result of the study, the researcher would like to propose seminars on quality patient nursing care based on this emerging theory because the success of quality patient nursing care is to focus on the actual patients’ evaluation on the actual hospitalization (Dahiru et al., 2023).

This study's limitation was that the data was collected from respondents in the community rather than from those within the hospital. Future research could focus on assessing the perceptions of respondents within hospitals in the Kalinga Province.

5. CONCLUSION

The study concludes that both selected barangay communities of Indigenous Ethnic Group from Kalinga Province differs significantly in their perception on Baylon’s Quality Patient Nursing Care Theory but both barangay communities strongly perceived the importance of Baylon’s Quality Patient Nursing Care Theory, highlighting the critical role of quality healthcare and supportive government programs in addressing self-image issues among patients.

The perception of Barangay community of Agbannawag and Barangay community of Malalao in Kalinga Province differs significantly based on five key themes of Baylon’s Quality Patient Nursing Care Theory. Despite this difference, both barangays recognized the importance of these themes in Baylon’s Quality Patient Nursing Care Theory, This belief is consistent among respondents from both highlands barangay communities and lowlands barangay communities, highlighting the significance of Baylon’s emerging theory on Quality Patient Nursing Care.

CONSENT AND ETHICAL APPROVAL

This study aims to ensure the rights and safety of the respondents by adhering to ethical considerations that protect and respect their autonomy and rights. The research followed the ethical guidelines outlined in Good Clinical Practice. The researcher obtained approval from the Barangay Captain of both Barangay community of Agbannawag and Barangay community of Malalao in Kalinga Province. Additionally, the researcher sought consent from the respondents in the Barangay communities of Agbannawag and Barangay community of Malalao.

DISCLAIMER (ARTIFICIAL INTELLIGENCE)

Author(s) hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

COMPETING INTERESTS

Author has declared that no competing interests exist.

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