

## Care of the Community

### Community Health Nursing

Community Health Nursing focuses on promoting, protecting, and preserving the health of populations. The community is considered the client rather than an individual, and a systematic nursing process is used to address community health needs.

### Community Health Nursing Process

- Community Assessment
- Community Diagnosis
- Community Health Planning
- Community Health Intervention
- Community Health Evaluation

This process is continuous and cyclical.

### Community Assessment

Community assessment involves the systematic collection of data to identify the health status, needs, and problems of a community.

Windshield survey – observation of the community's physical and social environment

Demographic data – age, sex, income, education, occupation

Health data – morbidity, mortality, common health problems

Community resources – health facilities, leaders, NGOs

### Community Diagnosis

Community diagnosis is the analysis of assessment data to identify health problems that affect the population.

Actual community health problem – existing problem

Potential community health problem – risk for a problem

Wellness diagnosis – readiness to improve health status

### Community Health Planning

Planning involves setting priorities, formulating goals and objectives, and identifying appropriate interventions.

- Magnitude of the problem
- Severity of the condition
- Community awareness and concern
- Availability of resources
- Capability of the nurse to intervene

### Community Health Intervention

- Health education
- Immunization programs
- Environmental sanitation
- Home visits
- Community mobilization
- Referral and follow-up

### Roles of the Community Health Nurse

- Educator
- Facilitator
- Organizer
- Advocate
- Counselor
- Collaborator

## **Community Health Evaluation**

Structure evaluation – adequacy of resources

Process evaluation – implementation of activities

Outcome evaluation – changes in health status or behavior

## **Community Organizing Participatory Action Research (COPAR)**

A people-centered, participatory, and action-oriented approach used by community health nurses to help communities identify their own health problems, plan solutions, and take collective action to improve their health conditions.

## **ROLES AND RESPONSIBILITIES OF A COMMUNITY HEALTH NURSE**

Care Across the Life Stages

### **I. General Role of a Community Health Nurse**

A Community Health Nurse (CHN) provides health-promotive, preventive, curative, and rehabilitative care to individuals, families, and communities across all stages of life.

General Responsibilities:

Health educator

Care provider

Advocate

Counselor

Collaborator and coordinator

Monitor and evaluator of health programs

### **II. Roles of a CH Nurse According to the Stages of Life**

#### **1. Maternal Stage (Pregnancy, Childbirth, Postpartum)**

Roles of the CH Nurse:

Promote safe pregnancy and delivery

Prevent maternal and newborn complications

Support family planning and responsible parenthood

Responsibilities:

Conduct prenatal and postnatal check-ups

Provide health teaching on nutrition, pregnancy danger signs, and breastfeeding

Promote safe delivery and skilled birth attendance

Assist in maternal immunization (e.g., Tetanus Toxoid)

Monitor mother for postpartum complications

Counsel on family planning methods

Refer high-risk pregnancies appropriately

#### **2. Newborn and Infant Stage (0–12 months)**

Roles of the CH Nurse:

Ensure survival, growth, and development

Prevent infant morbidity and mortality

Responsibilities:

Promote early initiation and exclusive breastfeeding

Conduct newborn screening and follow-up

Administer routine immunizations

Monitor weight, length, and head circumference

Educate parents on:

Cord care

Infant nutrition

Recognition of danger signs

Conduct home visits for newborn care  
Prevent common illnesses (e.g., pneumonia, diarrhea)

### **3. Toddler and Preschool Stage (1–5 years)**

Roles of the CH Nurse:

Promote normal growth and development  
Prevent childhood illnesses and accidents

Responsibilities:

Continue immunization (catch-up doses if needed)  
Monitor growth and developmental milestones  
Promote proper nutrition and deworming  
Conduct health teaching on hygiene and sanitation  
Educate parents on injury prevention  
Detect early signs of malnutrition or developmental delay  
Coordinate with childcare centers and daycares

### **4. School-Age Stage (6–12 years)**

Roles of the CH Nurse:

Support physical, mental, and social development  
Promote a healthy school environment

Responsibilities:

Implement School Health Programs

Conduct:

Physical examinations  
Vision and hearing screening

Teach:

Proper hygiene  
Oral health  
Nutrition

Participate in school-based immunization  
Identify and refer children with health or learning problems  
Promote healthful school policies and environment

### **5. Adolescent Stage (13–19 years)**

Roles of the CH Nurse:

Promote healthy lifestyle and responsible behavior  
Address physical, emotional, and psychosocial needs

Responsibilities:

Provide health counseling on:

Nutrition  
Mental health  
Substance abuse prevention  
Sexual and reproductive health

Promote adolescent-friendly health services

Prevent:

Teenage pregnancy  
Sexually transmitted infections

Encourage positive coping skills and self-esteem  
Identify at-risk adolescents and refer as needed

## **6. Adult Stage (20–59 years)**

Roles of the CH Nurse:

Promote productive and healthy adulthood

Prevent and manage chronic diseases

Responsibilities:

Conduct health screening (BP, blood sugar, BMI)

Promote healthy lifestyle:

Balanced diet

Exercise

Stress management

Educate on family planning and parenthood

Monitor and manage chronic illnesses

Promote workplace and community health programs

Encourage regular health check-ups

## **7. Elderly Stage (60 years and above)**

Roles of the CH Nurse:

Promote healthy aging and functional independence

Improve quality of life of older adults

Responsibilities:

Conduct regular health assessment and monitoring

Manage common geriatric conditions:

Hypertension

Diabetes

Arthritis

Promote medication compliance

Prevent falls and injuries

Provide caregiver education and support

Encourage participation in:

Senior citizen programs

Social and recreational activities

Support palliative and end-of-life care when needed

## **Care of the Community During Disasters**

A disaster is a serious disruption of the functioning of a community that exceeds its ability to cope using its own resources.

- Mitigation
- Preparedness
- Response
- Recovery and Rehabilitation

### **A. Mitigation / Prevention Phase**

Goal: Reduce or eliminate the impact of disasters before they occur.

Community Care Activities:

Conduct community risk and hazard assessment (e.g., flood-prone, earthquake-prone areas)

Identify vulnerable populations (children, elderly, pregnant women, persons with disabilities)

Participate in health education on disaster prevention (safe housing, sanitation, hygiene)

Promote environmental measures such as proper waste disposal and flood control initiatives

Mitigation activities are based on the understanding that prevention reduces loss of life and health resources during disasters. [openstax.org], [boisestate...sbooks.pub]

### **B. Preparedness Phase**

Goal: Enhance community readiness to respond effectively when a disaster occurs.

Community Care Activities:

Participate in disaster preparedness planning and drills

Educate families and communities on:

Emergency evacuation plans  
First aid and basic life support  
Safe water and food storage

Assist in establishing early warning systems

Coordinate with barangay officials, LGUs, and disaster response teams

Ensure readiness of health supplies and referral systems

Preparedness strengthens community resilience and reduces panic and confusion during disasters.

### **C. Response Phase**

Goal: Provide immediate care to save lives and prevent further health deterioration.

Community Care Activities:

Conduct rapid health assessment and triage

Provide emergency care and first aid

Assist in managing:

Evacuation centers  
Temporary shelters

Ensure provision of essential health services, including:

Medical and public health services  
Water, sanitation, and hygiene (WASH)  
Nutrition services  
Mental health and psychosocial support

Monitor for disease outbreaks (e.g., diarrhea, respiratory infections)

Educate the public on:

Infection prevention  
Safe food and water practices

In the Philippines, these actions are guided by the DOH's Disaster Risk Reduction and Management in Health (DRRM-H) policies.

### **D. Recovery and Rehabilitation Phase**

Goal: Restore community health, function, and normal living conditions.

Community Care Activities:

Continue disease surveillance and health monitoring  
Support rehabilitation of affected individuals

Promote mental health recovery and psychosocial support  
Assist in rebuilding community health services  
Evaluate effectiveness of disaster response  
Strengthen disaster preparedness plans based on lessons learned

Recovery focuses not only on physical health but also on psychological and social well-being, which is essential for long-term community resilience.

### Specialized Fields of Community Health Nursing

- School Health Nursing

Key Responsibilities

Implementation of school-based immunization

Nutrition assessment and feeding programs

Control of communicable diseases in schools

Maintenance of school health records

Health referrals and follow-up

- Occupational Health Nursing

Key Responsibilities

Periodic health examinations of employees

Monitoring workplace environmental hazards

Implementation of occupational health programs

Maintenance of employee health records

Reporting and documentation of occupational illnesses and injuries

- Safety Health Nursing

Key Responsibilities

Accident investigation and reporting

Safety education and training

Promotion of safe environments

Participation in disaster and emergency preparedness programs

Collaboration with safety committees and agencies

### National Health Programs

#### 1. National Safe Motherhood Program

Goal: Reduce maternal morbidity and mortality

Strategies:

Antenatal care (at least 8 prenatal visits)

Skilled birth attendance

Facility-based deliveries

Postpartum care and family planning

Management of obstetric emergencies

#### 2. National Family Planning Program

Goal: Enable couples and individuals to decide freely the number and spacing of children

Methods Provided:

Natural (LAM, calendar method)

Modern (pills, injectables, IUD, implants, condoms)

Permanent (BTL, vasectomy)

#### 3. Infant and Young Feeding

Goal: Improve child survival, growth, and development

Core Practices:

Exclusive breastfeeding for 0–6 months

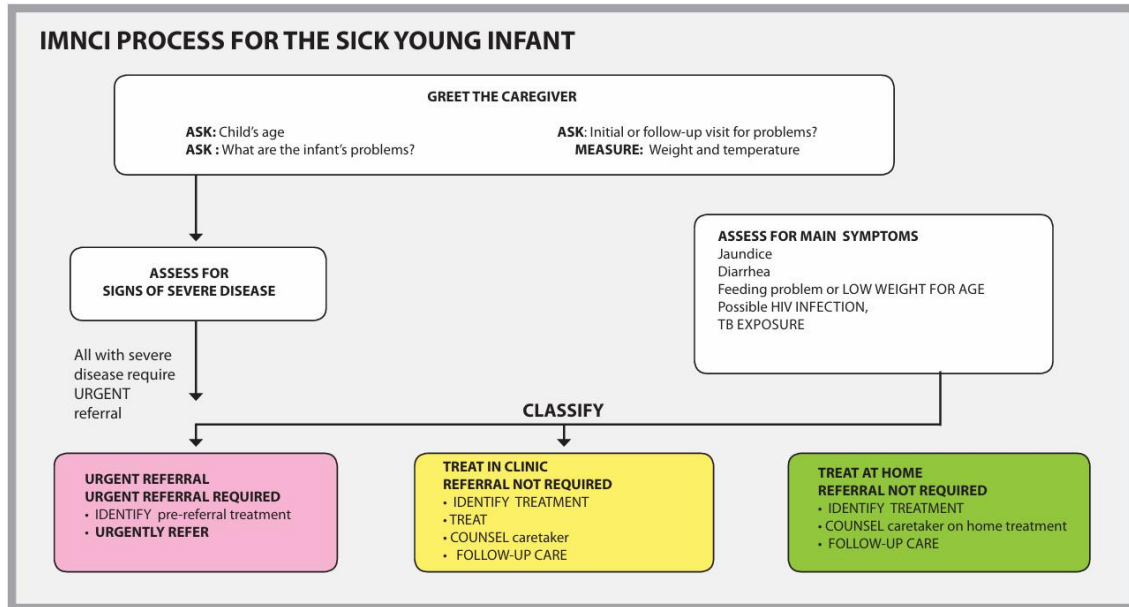
Complementary feeding starting at 6 months

Continued breastfeeding up to 2 years or beyond

Supporting Policies:  
 Milk Code (EO 51)  
 Mother-Baby Friendly Hospital Initiative

4. Integrated Management of Childhood Illness (IMCI)  
 Target Group: Children under 5 years old

**SICK YOUNG INFANT AGE: BIRTH UP TO 2 MONTHS**



5. Expanded Program on Immunization  
 Goal: Reduce morbidity and mortality from vaccine-preventable diseases

Vaccine	Maximum age at 1 <sup>st</sup> dose	Number of doses	Maximum interval between doses
BCG	Birth or anytime after birth	1	
DPT	6 weeks	3	4 weeks
OPV	6 weeks	3	4 weeks
Hepatitis B	6 weeks	3	4 weeks

EPI SCHEDULE				
1 <sup>st</sup> month	2 <sup>nd</sup> month	3 <sup>rd</sup> month	4 <sup>th</sup> month	9 <sup>th</sup> month
BCG	DPT 1 OPV 1 HEPA B 1	DPT 2 OPV 2 HEPA B 2	DPT 3 OPV 3 HEPA B 3	MEASLES

## 6. Adolescent Health and Development Program

Focus Areas:

Reproductive and sexual health

Mental health

Substance abuse prevention

Nutrition

Injury prevention

## 7. Women and Children Protection Program

Goal: Protect women and children from abuse, neglect, exploitation, and violence

Legal Bases:

RA 6949: Declaring March 8 as National Women's Day

RA 7877: Anti-Sexual Harassment Act of 1995

RA 8353: Anti-Rape Law of 1997

RA 8505: Rape Victim Assistance and Protection Act

RA 9208 Anti-Trafficking in Person Act of 2003

RA 9262: Anti-Violence against Women & Their Children Act of 2004

## 8. Belly Gud for Health

Focus: Promotion of proper nutrition and healthy lifestyle

Often aligned with:

Anti-obesity campaigns

Healthy eating and physical activity

## 9. Dental Health Programs

The National Oral Health Program (NOHP) aims to improve the oral health status of the Filipino population through preventive, promotive, and basic curative dental services, with emphasis on children, pregnant women, and underserved communities.

Oral health is considered an integral part of family health, directly affecting nutrition, growth, speech, self-esteem, and overall well-being.

## 10. Garantisadong Pambata

Target Group: Children 0–6 years old

Services:

Immunization

Vitamin A supplementation

Deworming

Growth monitoring

## 11. Nutrition Program

Goal: Address malnutrition and micronutrient deficiencies

Components:

Vitamin A supplementation

Iron and iodine supplementation

Nutrition education

Feeding programs

## 12. Integrated Community-based Non-communicable Disease Prevention Program

Target Conditions:

Hypertension

Diabetes

Cardiovascular diseases

Cancer

Strategies:

Lifestyle modification  
Early screening  
Health education  
Community participation

13. Prevention of Blindness Program

Target Conditions:

Cataract  
Glaucoma  
Refractive errors  
Vitamin A deficiency

14. Mental Health Program

Legal Basis: RA 11036 (Mental Health Act)

Goals:

Promote mental well-being  
Prevent mental disorders  
Provide accessible mental health services

15. Renal Disease Control Program

Focus:

Prevention through lifestyle modification  
Early diagnosis  
Access to renal replacement therapy

16. Community-based Rehabilitation Program

Target Group: Persons with disabilities (PWDs)

Focus Areas:

Medical rehabilitation  
Skills training  
Social integration  
Family and community involvement

17. National TB Control Program

Strategy: DOTS (Directly Observed Treatment, Short-course)

Key Components:

Case detection via microscopy or GeneXpert  
Standardized treatment  
Patient support and monitoring

18. Leprosy Control Program

Goal: Elimination of leprosy as a public health problem

Intervention: Multi-Drug Therapy (MDT)

19. Filariasis Elimination Program

Goal: Interrupt transmission and prevent disability

Strategy:

Annual mass drug administration (MDA)

20. HIV/STI Prevention Program

Goals:

Prevent transmission  
Early detection  
Treatment and support

Strategies:

Voluntary counseling and testing (VCT)

Condom promotion

Treatment of STIs

Anti-discrimination advocacy

21. Malaria Control Program

Strategies:

Vector control

Early diagnosis and treatment

Community education

22. Schistosomiasis Control Program

Approach:

Mass drug administration (Praziquantel)

Environmental sanitation

Health education

23. Environmental Health Program

Concerns:

Safe water supply

Food sanitation

Waste disposal

Vector control

Relevance to Family Health:

Direct influence on disease prevention

24. Sentrong Sigla Movement

Goal: Improve quality of health services

Features:

Accreditation and certification of health facilities

Standardization of care

Continuous quality improvement