DISASTER AWARENESS AND PREPAREDNESS AMONG ALLIED HEALTH STUDENTS: BASIS FOR PROPOSED PROGRAM ENHANCEMENT

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Presented to the Faculty of the College of Nursing,
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In Partial Fulfillment of the
Requirement for the Degree
Bachelor of Science in Nursing

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ABSTRACT

Disasters posed significant challenges to the people, and implementing proactive disaster preparedness across various sectors was crucial. This study evaluated the levels of disaster preparedness and awareness among allied health students at Misamis University. This study was anchored in the Protective Action Decision Model, the research explored differences in preparedness based on student profiles and proposed a program to enhance disaster preparedness and awareness.The study utilized a quantitative approach and employed Slovin's formula to determine a sample size of 805 from a population of 1,008, using stratified random sampling to ensure representation across all academic years and courses. Findings indicated commendable levels of disaster preparedness and awareness among students, evident in their adherence to safety protocols during disasters and active participation in preparedness activities.Statistical analyses revealed non-significant p-values (8.146 for courses, 0.374 for year levels), indicating uniform preparedness levels irrespective of academic discipline or progression. Although variability existed (F-value = 0.78), it did not reach statistical significance.In conclusion, while allied health students exhibited robust disaster readiness, continual enhancement through targeted interventions is essential to address identified gaps. Emphasizing the allied health students' pivotal role in disaster response and prevention, this study advocated tailored training programs to integrate students more effectively into broader disaster preparedness initiatives.

Keywords: ***allied health students, disaster awareness, disaster preparedness, program enhancement***

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INTRODUCTION

Rationale/Background of the Study

Natural disasters have become increasingly predominant, posing significant challenges to communities around the globe. Gavalas (2019) defined disasters as catastrophic incidents, especially when they occur suddenly and cause damage, great loss of life, or suffering. Disasters can impact the development of the healthcare sector. These professionals are on the front lines, providing essential medical and psychological support during these times of emergencies. The ever-changing nature of threats calls for innovative and resilient strategies to effectively tackle new challenges. To mitigate these, it is important to develop effective disaster management at both individual and institutional levels.

Its effectiveness relies on the extent of disaster awareness and readiness, beginning with their education and training. Disaster awareness involves understanding disaster risks and the reasons behind disasters, and how these factors can impact decisions made by individuals or groups to reduce exposure and vulnerability to dangers. It requires an understanding of the types of disasters, their potential impacts, and the necessary response actions. This awareness is important for allied health students as it shapes their perception of risk and informs their readiness to act in emergencies. On the other hand, disaster awareness and preparedness are connected. Disaster preparedness involves taking steps to minimize the impact of disasters by acquiring the right knowledge, abilities, and resources to respond efficiently, all of which are crucial. Efforts to be ready can greatly lessen the negative impacts of disasters, ultimately keeping lives safe and reducing harm (Pamidimukkala, et.al, 2023).

The WHO declared that achieving high levels of health and well-being is recognized as a fundamental human right in numerous local, national, and global texts. Ensuring this right means accessibility to health programs. Although the existing disaster preparedness initiatives have undoubtedly saved lives and reduced

damages, continuous enhancement, and adaptation are imperative to address evolving challenges and ensure resilience in the face of emergent threats.

The disaster framework involves four thematic areas: mitigation, preparedness, response, and rehabilitation (NDRRMC, 2011). According to the International Council of Nurses (ICN, 2009), this framework is generally divided into eight domains which are: (1) preparation and planning, (2) communication, (3) incident management, (4) safety and security, (5) assessment, (6) intervention, (7) recovery, and (8) law and ethics. In the original set of disaster nursing competencies, there were ten domains which the domains can be classified into the four thematic areas of the NDRRMC. Under the mitigation/prevention phase are the core of policy development and planning and risk reduction, disease prevention, and health promotion (ICN, 2009). For the preparedness phase, the three domains under it, these are ethical practice, legal practice, and accountability; communication and information sharing; and education and preparedness. For the response phase, there are four domains included which are the care of the community; care of individuals and families, psychological care; and care of the vulnerable populations. Lastly, for the recovery/rehabilitation phase, there is the long-term recovery of individuals, families, and communities.

This study focused on the disaster preparedness phase in which the activities under this phase vary between level 1, level 2, and level 3 nurses by the definition of the ICN (2022). The NDRRMC's thematic area of preparedness is based on sound disaster risk analysis and appropriate coordination with early warning systems, and includes activities such as emergency planning, stockpiling equipment and supplies, developing coordination, evacuation and public relations arrangements, and associated training and field exercises (RA 10121).

Many people are unaware of the detrimental effects that disasters have on kids, even though most are accustomed with the interruptions they cause. Students are impacted by disasters because they cause damage to school buildings, delay classes, and disrupt campus activities (Ibrahim et al., 2015). Furthermore, Ibrahim, stated that students' awareness of catastrophes has increased due to media,

seminars, and personal experience, and colleges have just started to acknowledge the need of disaster preparedness and the hazards involved. However, many colleges and universities still lack proper planning, response, and mitigation plans in spite of the increased awareness.

In addition, Tanner and Doberstein (2015) stated that when it comes to emergency preparedness planning, students are the least taken into account in a community. Mulilis et al. (2015) discovered comparable outcomes when assessing tornado readiness among students, non-students, renters, and homeowners, whereas a survey in China (Dong, et.al 2017) showed that over half of students were unaware of essential survival skills. Given the rise in global natural disasters, it is crucial for academic institutions to incorporate teaching of vital rescue abilities. This will enhance students' readiness for disasters and allow them to use their skills in emergency situations.

As mentioned by Al-Ziftawi (2021), future healthcare experts, policymakers, educators, doctors, nurses, and pharmacists should be taught comprehensive disaster preparedness strategies, including emergency response protocols, effective communication skills during crises, and the ability to work collaboratively across disciplines to ensure a coordinated and efficient response to disasters. Moreover, students should receive proper training in disaster management and preparedness, as previous findings highlight the inadequacy of disaster responses. Healthcare students in low- and middle-income countries (LMICs) are often found to lack sufficient knowledge on this topic. Implementing disaster management programs would greatly help in strengthening the healthcare workforce to better handle emergencies. However, there are still few studies that examine the views of future healthcare professionals on disaster preparedness (Tan, 2017). Thus, this study aims to evaluate the level of disaster awareness and preparedness among healthcare students, recognizing the importance of the issue.

Universities worldwide began realizing the need for disaster knowledge and skills incorporation into their curriculum.The research carried out in Baltimore County, Maryland, (Austin et al 2013) showed that the curriculum is a

perfect setting to introduce undergraduates to disaster management with simulation. The study found that incorporating disaster-related subjects like patient safety, patient assessment, nursing interventions, leadership, and teamwork into the undergraduate curriculum encourages students to apply their knowledge and skills during emergencies. Furthermore, this integration provides students with an opportunity to apply critical thinking skills across various aspects of disaster response.

In another study, Joes and Dufrene (2014) stated that current students are tomorrow's practitioners. Consequently, integrating disaster preparedness in the Emergency Medical Services (EMS) curriculum is valuable in exposing students to the right attitude and knowledge to be prepared for disasters (Alrazeeni, 2014).

Presently, disaster programs have been implemented especially in the nursing curriculum in the Philippines specifically in fourth-year students as it is part of the curriculum components of BS Nursing as per CHED Memorandum Order No. 15 Series of 2017.

Astudy conducted at School of Nursing, Manila Adventist College, researchers investigated reports of disaster awareness and preparedness of college students. Overall, they reported a high level of disaster awareness. It denotes that these college students are highly aware of disasters. In the study by Cho (2018), nursing students reported high disaster awareness. This is further supported by a study conducted by Benaben et al. (2019) where the result revealed that the more information obtained on disasters, the higher the level of awareness acquired.

Awareness is crucial, however students need to also receive training in essential rescue skills to be well-prepared for disasters and minimize their impact (Amri A, 2015). These rescue methods are an essential part of disaster training and should be instructed by skilled experts. The effectiveness of disaster response relies on having disaster preparedness accessible at every level, stage, and resource. Furthermore, Hooke and Rogers (2005) stated that effective preparedness systems are just one part of minimizing the effects of disasters on impacted individuals and communities.Previous studies demonstrated that

implementing a university disaster preparedness program is paramount for students to be more proactive in dealing with disasters.

The implications of this research for academics and public health practice were enormous. Filling up the gaps in the literature enabled the creation of focused teaching methods intended to improve students' readiness for disasters in the allied health field. The results helped improve current emergency response strategies in educational settings, which eventually helped develop a workforce of more flexible and resilient healthcare professionals amid disasters.

In light of these research gaps, it underscored the limited research on understanding disaster awareness and, more importantly, students' preparedness with different programs in allied health in the Philippine context. Hence, the proposed enhancement of disaster preparedness programs among allied health students seeks to address these deficiencies and foster a more comprehensive and inclusive approach to disaster preparedness education, by identifying the specific needs and challenges faced by allied health students, examining further the relationship between disaster awareness and preparedness among respondents and determine differences in disaster preparedness based on students' selected characteristics. Through the findings of the study, researchers can facilitate recommendations as a basis for Disaster Preparedness Program Enhancement.

Theoretical Framework

This study was anchored to Lindell and Perry's Protective Action Decision Model (2012). The Protective Action Decision Model (PADM) is a model with multiple stages that relies on research findings related to how individuals react to environmental hazards and disasters. The PADM combines information processing from social and environmental cues with messages transmitted by social sources through communication channels to individuals in danger. After that, the phase at which a decision is made follows. It starts with a pre-decision process (impacted by exposure to information, one's attention, and comprehension of the gained information), at the end of which, after taking into account one's

view on threats and possible protective actions, as well as stakeholder perceptions, a decision about which protective action to take is made (Lindell & Perry, 2012). The decision then leads to a behavioral response, which may include the search for further information, taking protective actions, or emotion-centered coping, and is also impacted positively by possible situational facilitators, and negatively – by situational impediments (Lindell & Perry, 2012).

Key concepts from PADM used in the study include information input, decision-making processes, and behavioral responses. Information input encompassed exposure to warning messages, social and environmental cues, and the preference for different channels of information. Decision-making processes involved an individual's or group's attention to information, comprehension of the situation, evaluation of threats, and consideration of possible protective actions. Behavioral responses could range from seeking further information to taking protective actions or engaging in emotion-centered coping.

As a whole, PADM helped in understanding the process in which different entities may make decisions about acting in response to various natural hazards or disasters. As has been noted, this model had been used for three main practical applications. For instance, the knowledge of how individuals react to messages warning about disasters allows for modifying these messages in a manner that would permit for more effectively communicating the nature of the disaster and the advised steps to be taken. The knowledge of how individuals may react to particular situations allows for better planning of evacuation efforts. In addition, responses to hazards may be impacted by perceptions of individuals pertaining to characteristics of these hazards; this has some consequences for the adoption of hazard adjustments.

In general, PADM made it possible to comprehend the procedure through which individuals may decide how to respond to distinct natural dangers or disasters. The three primary uses for this paradigm were essential in understanding people's responses to warnings regarding impending calamities which enabled the modification of warnings to better understand the nature of the danger and the

recommended course of action. It is possible to plan evacuation operations more effectively when one is aware of the potential reactions of individuals to specific scenarios. Furthermore, people's perceptions of the features of dangers could influence their responses to them, which had implications for the adoption of hazard adjustments.

In connection with this study, this model provided a comprehensive framework for understanding how students pursuing careers in allied health perceive and respond to environmental threats, such as disasters, and how various factors influence their decision-making processes regarding protective actions. Within this theory, the stages of environmental and social context and psychological processes were particularly relevant to the study.

The environmental and social context stage encompassed factors such as students' characteristics and disaster awareness, which influenced their perception of threats and access to information sources. Meanwhile, the psychological processes stage delved into students' cognitive processes related to disaster perception and decision-making, including risk assessment and consideration of protective actions. By anchoring the study within this theoretical framework, researchers could systematically examine the factors influencing allied health students' preparedness behaviors and identify opportunities to tailor disaster preparedness programs effectively to meet their specific needs.

This model provided a framework to analyze how respondents' levels of disaster preparedness and awareness influence their decision-making processes and subsequent behaviors in response to disaster scenarios. By examining how the allied health students perceive threats and protective actions and how they respond to disaster information, the study identified potential areas for enhancing disaster preparedness programs. In addition, the model's emphasis on situational facilitators and impediments helped to understand how external factors may affect respondents' preparedness and ability to act protectively. Overall, PADM offered a comprehensive approach to evaluating how individuals' and groups' disaster

awareness and preparedness align with the study's goals of proposing targeted program enhancements based on respondents' preparedness and awareness levels.

Conceptual Framework

The Conceptual framework of this study explored the relationship between respondents' disaster preparedness and awareness and the enhancement of disaster preparedness programs. This study aimed to examine how different levels of preparedness and awareness among the respondents, as well as the respondents' demographic profile, influence the development and improvement of disaster preparedness programs.

The independent variables were the respondents' level of disaster preparedness, which measured their readiness to handle emergencies, and their level of disaster awareness, which assessed their knowledge and understanding of potential disasters and risk mitigation measures. The dependent variable was the proposed programs for disaster preparedness, aimed at improving existing initiatives based on the respondents' awareness and preparedness levels. The respondents' profiles, including their year level and program, served as intervening variables, influencing their disaster awareness and preparedness due to varying exposure to disaster education and training. The study also analyzed the differences in preparedness levels when respondents were grouped according to their profiles to propose targeted and effective enhancements to disaster preparedness programs, ensuring they addressed the specific needs of different respondent groups.

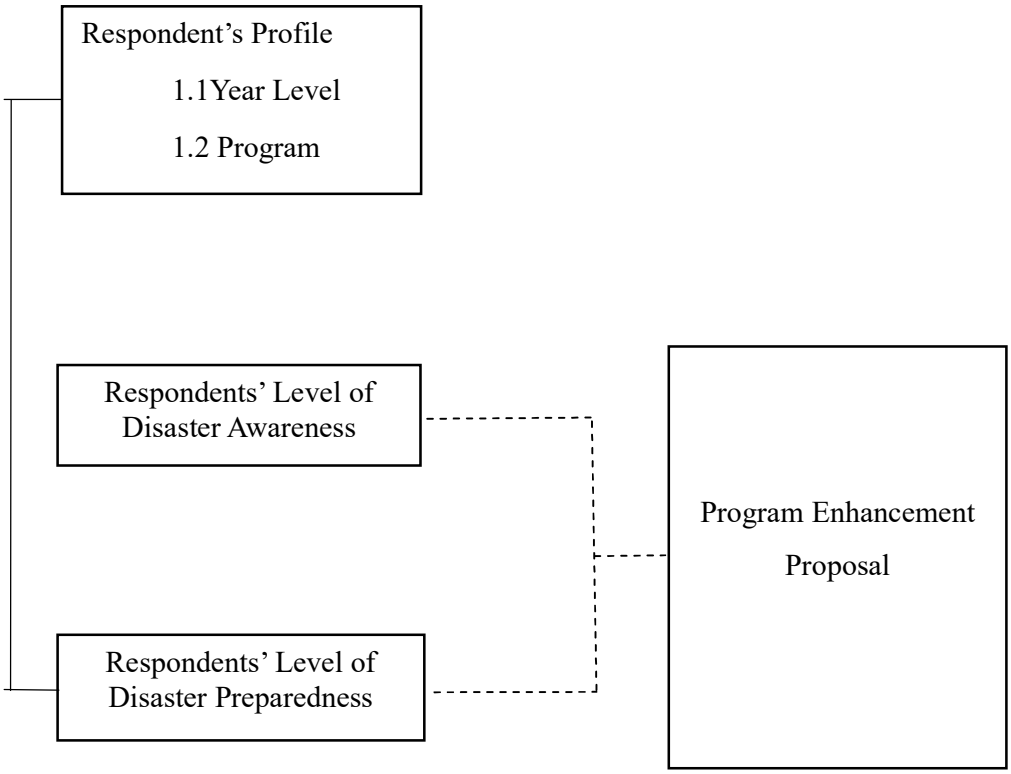

Figure 1. Schematic Presentation of the Study

Objectives of the Study

This study's main goal was to evaluate allied health students' current levels of awareness and preparedness for disasters. Through an extensive survey and analysis, the study aimed to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness. Specifically, this study aimed to: (1) Describe respondents' profiles in terms of year level and program; (2) Determine the respondents' level of disaster awareness; (3)Assess the respondents' level of disaster preparedness; (4) Explore the significant difference between the respondents' level of disaster preparedness when grouped according to their profiles; and (5) Develop a program enhancement proposal for Awareness and Preparedness among Allied Health Students.

Significance of the Study

Understanding the level of disaster preparedness and awareness among allied health students is crucial, as these future healthcare professionals will be at the forefront of responding to emergencies. This study is significant because the results will contribute to the readiness of allied health students, which can directly impact their effectiveness in real-world disaster scenarios. By identifying gaps in knowledge and preparedness, educational institutions can implement targeted interventions to equip students with the skills and information to handle emergencies confidently.

Moreover, the findings of this study can serve as a basis for curriculum enhancement, ensuring that disaster preparedness is integrated into the training of future healthcare professionals. This is especially vital given the increasing frequency and intensity of natural and man-made disasters, which demand a workforce that is not only skilled in clinical practices but also adept at managing crises.

Lastly, the study holds significance for educational administrators by highlighting the need for improved disaster preparedness initiatives within allied

health education. The proposed program enhancement can be a model for other institutions, promoting a culture of readiness and resilience among healthcare students. Ultimately, this research aims to contribute to the overall safety and preparedness of communities, as well-prepared healthcare professionals are essential in mitigating the impact of disasters on public health.

METHODOLOGY

This chapter outlined the methodologies employed in the study. It includes the research design, study setting, participant selection, tools used, data gathering and analysis procedures, validation measures, reliability considerations, ethical guidelines, and the statistical approaches applied to the data.

Research Design

This study employed a quantitative research method. Sreekumar (2023) defines quantitative research methods as used to observe events that affect a particular group of individuals, the sample population. The standard format in quantitative research design is for each respondent to be asked the same questions, ensuring that the entire data sample can be analyzed fairly. The data is supplied in a numerical format and can be analyzed quantifiable using statistical methods. The research design was a cross-correlational, comparative quantitative design to assess the level and extent of disaster awareness and preparedness of the respondents and determine any significant difference in disaster preparedness based on the respondents' profile specifically on year level and program.

Research Environment

The study was conducted in one of the tertiary universities in Misamis Occidental, located in Ozamiz City. This particular institution was chosen for its accessibility, which facilitated effective data gathering for the researchers. Moreover, the university provided a suitable setting as it housed the primary study participants, ensuring a diverse and representative sample size. This environment was crucial for conducting a comprehensive analysis of the relationship between disaster awareness and preparedness among respondents. In addition, it allowed for the examination of differences in disaster preparedness based on students' profiles, thereby enhancing the study's ability to propose tailored enhancements to disaster preparedness programs. The research setting in Ozamiz City provided a conducive

backdrop for obtaining meaningful insights into the preparedness of allied health students in the face of potential disasters.

Respondents of the Study/Unit of Analysis and Sampling Procedure.

The primary objectives of this study were to assess the level of disaster awareness, assess the level of disaster preparedness among allied health students, and to compare the assessed level of awareness and preparedness between the different profiles of the respondents in a chosen university in Ozamiz City.

The respondents of this study were students from the following programs: nursing, radiologic technology, medical technology, psychology, and dentistry in the chosen university. First- to third-year students enrolled in these health-related programs were the target respondents. Exclusion criteria were applied to easily identify the study's focus by eliminating certain groups. Fourth-year and higher-year levels were excluded, as they had already advanced coursework and clinical experiences in terms of their levels of disaster awareness and preparedness. Students enrolled in programs outside the specified colleges were also excluded as this study mainly focused on allied health disciplines. Lastly, students not currently enrolled in the university were excluded to ensure that all data came from actively participating students. By focusing on different subgroups such as year levels and specific health-related programs, the study aimed to provide a comprehensive assessment of the current state of disaster preparedness and awareness among students in the healthcare field.

Furthermore, the researchers used Slovin’s formula to determine the appropriate sample size for the study. The target population (N) for this study is 1,008 while the sample size upon computation is 805 comprising all the year levels of each program. The researchers utilized stratified random sampling to ensure representation from all year levels of each program within the population. The population was divided into strata based on the year levels of each program, with each stratum representing one year level. This ensures that the sample

includes participants from each year's level, providing a more accurate representation of the entire population.

The following are the population and sample size for each category:Where;(N = target, n = sample size, L = year level)

Table 1. Population and Sample Size for Each Category

Program	L1 (N)	L1 (n)	L2 (N)	L2 (n)	L3 (N)	L3 (n)
Nursing	194	130	148	108	117	90
Radiologic Technology	38	34	25	23	20	19
Medical Technology	84	69	81	67	87	71
Psychology	36	33	33	30	30	27
Dentistry	41	37	38	34	36	33

Validity and Reliability of the Instrument

The instrument was a validated questionnaire sourced from a previous study conducted by "Disaster Awareness and Preparedness of College Students: A Descriptive Correlational-Comparative Study." Toensure the credibility of the questions, the researcher used published questionnaires from previous researchers associated with the present study. Although attempts had been made to communicate with the original author regarding the usage of the instrument, a response has not yet been received. Utilizing a pre-existing validated instrument reduces ambiguity and ensures the credibility of the survey questions.

Data Gathering Instruments and Procedure

The researchers employed a standardized questionnaire from a study entitled "Disaster Awareness and Preparedness of College Students: A Descriptive

Correlational-Comparative Study," conducted at the School of Nursing, Manila Adventist College, comprising items related to the level of disaster awareness and preparedness of the respondents. The questions are categorized into two parts: the Level of Disaster Awareness of the Respondents and Level of Disaster Preparedness of the Respondents. For the level of disaster awareness, the questions explored various aspects, including knowledge about different types of disasters, understanding potential risks, familiarity with disaster response protocols, and awareness of available resources and support systems during emergencies. Meanwhile, for the level of disaster preparedness, the questions focused on evaluating the respondents' readiness for potential disasters. This included assessing the presence of emergency plans and supplies, participation in disaster preparedness training or drills, awareness of evacuation routes, readiness to cope with different disaster scenarios, and proactive measures taken to mitigate risks. By addressing these areas, the study aimed to provide a comprehensive assessment of both the awareness and preparedness levels of the respondents concerning potential disaster situations.

The study took a crucial step in securing approval from the Deans of the five programs—Nursing, Radiologic Technology, Medical Technology, Psychology, and Dentistry. This ensured the research adhered to both ethical standards and institutional guidelines. Upon approval was granted, the researchers prepared detailed consent forms and questionnaires. These documents provided essential insights into the respondents' levels of disaster awareness and preparedness, ensuring that the participants were well-informed and that their participation was ethically sound.

This study used stratified random sampling to be able to gather an equal representative of each stratum. There were a total of 459 respondents for the College of Nursing, 93 College of Radiologic Technology, 252 College of Medical Technology, 99 College of Psychology, and 115 College of Dentistry. From the list obtained from the college registrar per level and per program, the researchers performed a random sampling technique.

The researchers used fishbowl sampling for all strata. First, the researchers identified and wrote on a small sheet of paper a total of 805 numbers corresponding to the total number of students in each level of each program. For ease of implementation, the researchers further subdivided the data gathering process per section and conducted the data gathering during a block section class of the students' major subject class. For example, in level 1 of nursing, there were small papers with individual numbers, rolled individually corresponding to the list of names of students per section, per level. Second, each sheet of paper was rolled and picked up on a lottery way corresponding to the target sample for level 1 nursing students. Third, each chosen number was checked from the list, and the respondent present during the data gathering whose name appeared to be the number corresponding to the picked number was selected as a respondent. The same method was applied to the rest of the strata until the total number of samples per stratum was achieved

The distribution phase included providing consent forms and explaining the purpose of the study and the rights of the respondents. Once consented, the survey questionnaires were given out to the selected participants. Researchers were present during the data collection to answer any queries of the respondents. Once the respondents were done, the researchers ensured the completeness of the forms to avoid a high attrition rate.

Scoring Guidelines

To accurately assess the level of disaster awareness and preparedness among the respondents, the following Likert scale was utilized. This scale will help quantify their knowledge and readiness to handle potential disaster scenarios.

A. Level of Disaster Awareness Questionnaire. In assessing the level of disaster awareness of the study, the following scale was used:

Table 2. Scale Used in Level of Disaster Awareness Questionnaire

Responses	Continuum	Interpretation
5 – Strongly Agree	4.21-5.00	Very High (VH)
4 – Agree	3.41-4.20	High (H)
3 –Neutral	2.61-3.40	Moderate (M)
2 – Disagree	1.81-2.60	Low (L)
1 – Strongly Disagree	1.00-1.80	Very Low (VL)

B. Level of Disaster Preparedness Questionnaire. In assessing the level of disaster preparedness of the study, the following scale was used:

Table 3. Scale Used in Level of Disaster Preparedness Questionnaire

Responses	Continuum	Interpretation
5 – Strongly Agree	4.21-5.00	Very High (VH)
4 – Agree	3.41-4.20	High (H)
3 –Neutral	2.61-3.40	Moderate (M)
2 – Disagree	1.81-2.60	Low (L)
1 – Strongly Disagree	1.00-1.80	Very Low (VL)

Mode of Analysis, Statistical Instruments/Procedure

This study employed several analytical tools to process the collected data. The frequency count and percentage were used to determine the respondents' profiles based on year level and program, the formula $P(\%) = (f/N) \times 100$, where $P(\%)$ represents percentage, f is frequency, and N denotes the number of respondents. Meanwhile, to assess the level of disaster awareness and preparedness, a Likert scale was utilized. This scale was used to quantify subjective data, making it possible to measure and analyze attitudes, opinions, or perceptions to assess numerically.

Furthermore, the data were analyzed using the Statistical Package for Social Sciences (SPSS) software. A One-way ANOVA was conducted due its ability to compare means across multiple groups efficiently. Hence, it helped the researchers identify differences in the levels of disaster awareness and preparedness when the respondents were grouped according to their profiles. In addition, this statistical analysis helped to determine if there were significant variations based on year level and program, thereby providing deeper insights into the preparedness and awareness among the different subgroups of students.

Ethical Considerations

The researchers adhered to stringent ethical guidelines in conducting this study. The researchers maintained authenticity and complied with established research protocols concerning respondents'engagement. Necessary steps were taken to obtain permission, the researchers used a secured consent letter made and addressed to the deans of the five colleges—Nursing, Medical Technology, Dentistry, Radiologic Technology, and Psychology, this step enabled the researchers to determine the required number of participants for the study. The respondents were given informed consent before participating in the study outlining the study's purpose, procedures, and benefits. Respondents were informed that their involvement was voluntary and that they could withdraw from the study at any time without any negative consequences. The records of the study will be kept entirely private and confidential, with access limited to the researchers involved in the study. The respondents' anonymity and right to privacy will always be maintained during the conduct of the study.

RESULTS AND DISCUSSIONS

This chapter presents the data gathered and analyzed by the researchers. The presentation of results is based on the order of specific problems.

Respondents Profile in Terms of Year Level and Program

In Table 4, the distribution of respondents according to their year level and program was presented. Among the overall participants, 303 individuals (37.64%) were in their first year, while 262 participants (32.55%) were in their second year. Furthermore, 240 respondents (29.81%) were in their third year. The highest frequency was observed in the 1st Year category, with 303 respondents. Among the total participants, 328 individuals (40.75%) were studying Nursing, while 207 participants (25.71%) were studying MedTech. Moreover, 76 respondents (9.44%) were studying RadTech. The Dentistry field had 704 participants (12.92%), and 90 respondents (11.18%) were from Psychology. Data revealed that the majority of the respondents were coming from Nursing.

Table 4. Respondents Profile in terms of year level and program

Year Level	**Frequency**	**Percentage**
1st Year	303	37.64
2nd Year	262	32.55
3rd Year	240	29.81
Total	**805**	**100**
Program	**Frequency**	**Percentage**
Nursing	328	40.75
Radiologic Technology	76	9.44
Medical Technology	207	25.71
Dentistry	104	12.92
Psychology	90	11.18
Total	**805**	**100**

Respondents' Level of Awareness

The level of disaster awareness among students highlighted a generally high understanding of disaster-related information and preparedness measures with a total weighted mean of 3.75 and a standard deviation of 0.98. There was a very high understanding among respondents that natural disasters such as typhoons, floods, tsunamis, storm surges, and earthquakes can occur at any time. There was also a very high recognition that there are specific action responses during a disaster, emphasizing the importance of having an emergency supply kit ready and preserving food post-disaster. Moreover, respondents very highly recognize that the Philippines is highly disaster-prone and that local government units provide essential hotlines for disaster events.

There was a high recognition among respondents that the country experiences numerous disastrous events annually, such as an average of 20 typhoons per year, and that additional disastrous events may follow a disaster. The Philippines' geographic location in the Typhoon Belt and its vulnerability during storm surges as an archipelago were also acknowledged. There was a very highly recognition that the government and schools host seminars and forums to prepare for disasters and that disaster plans are in place at their school.

Overall, the respondents exhibited a high level of disaster awareness, with a weighted mean of 3.75. They demonstrated strong knowledge and readiness in many areas but also highlight areas that require improvement for comprehensive disaster preparedness and response.

A study by Patel (2023) found that the university curriculum affects students' disaster awareness, and university emergency procedures influence students' disaster preparedness. Multiple research projects have pointed out the efficacy of disaster-specific initiatives like educational campaigns, drills, trainings, and simulations in enhancing disaster awareness and readiness (Craft, 2019; Jasper et al., 2013; Nazli et al., 2015; Tkachuck et al., 2018). Nevertheless, Rañeses et al. (2018) stated that the concept of "being prepared" focuses on recognizing potential disasters rather than readying for a specific disaster.

Table 5. Respondents' Level of Awareness

Variables	Total Mean	SD	Interpretation
Level of Disaster Awareness	3.75	0.98	High

Scale: 4.21 – 5.00 = Very High (VH); 3.41 – 4.20 =High (H); 2.61 – 3.40 = Moderate (M); 1.81 – 2.60 = Low (L); 1.00 – 1.80 = Very Low (VL)

Respondents' Level of Preparedness

Table 6 presented the level of disaster preparedness of the respondents. The variable garnered a total weighted mean of 3.62 and a standard deviation of 1.33 with a verbal description of high with several disaster preparedness behaviors, indicating a high level of preparedness in these areas. Respondents very highly recognize key preparedness actions. They avoid large bodies of water during potential disasters and evacuate calmly when necessary. In addition, they practice proper safety measures during earthquakes, demonstrating high awareness and readiness.

In terms of proactive preparedness, respondents acknowledge participating in disaster plans and attending preparedness seminars hosted by their school. They also participate in government-hosted mass simulation drills and forums for additional knowledge. Despite this, they recognize that they have not established a specific meeting place to reunite with other students and teachers and do not have emergency contact details of qualified personnel such as the local fire department, police, hospitals, and barangay officials.

Overall, the students exhibited a high level of preparednessdemonstrating strong preparedness and readiness in several critical aspects of disaster response. It showed a solid understanding of key safety measures, such as avoiding hazardous areas during potential disasters and practicing appropriate actions during emergencies. Their proactive participation in disaster plans, seminars, and drills further underscores their commitment to being well-prepared. This high level of preparedness indicates that the students are not only knowledgeable about

the necessary steps to take in various disaster scenarios but are also actively engaged in maintaining their readiness. It is also important to address the identified gaps and reinforce the importance of consistent and safe practices will enhance their overall disaster readiness.

Chivinda, et.al (2020) conducted a study examining college students' readiness and knowledge of disasters. In general, their disaster awareness level was reported as high. This indicates that these college students have a high level of awareness of disasters. Moreover, Cho (2018) found that allied health students demonstrated a strong understanding of disaster awareness. Benaben et al. (2019) noted that the greater the amount of information gathered on disasters, the increased level of awareness is gained as well. In addition, this research produced similar findings to Natividad's study in 2019, where college students in Batangas indicated a moderate to high extent.

Table 6. Respondents' Level of Preparedness

Variable	Total Mean	SD	Interpretation
Level of Disaster Preparedness	3.62	1.33	High

Scale: 4.21 – 5.00 = Very High (VH); 3.41 – 4.20 =High (H); 2.61 – 3.40 = Moderate (M); 1.81 – 2.60 = Low (L); 1.00 – 1.80 = Very Low (VL)

Significant Difference between the Respondents' Level of Disaster Preparedness when Grouped According to their Profiles

Presented in Table 7 was the test of the significant difference in the respondents' level of disaster preparedness when grouped according to their profiles. The analysis of the disaster preparedness data based on students' year levels revealed that the p-value of 0.99 was higher than the common significance level of 0.05. Results showed that the null hypothesis must be accepted, indicating that there was not enough statistical evidence to suggest a significant difference in disaster preparedness among students of different year levels.

In addition, the F-value of 9.918 showed some degree of variability in preparedness, but the associated p-value demonstrated that this variability was not statistically significant. Therefore, the observed differences in disaster preparedness between students of various year levels were not large enough to be considered meaningful. In practical terms, this result suggested that disaster preparedness among students did not significantly differ by year level. This could imply that the university's disaster preparedness training and resources were equally effective across all year levels, or that other factors unrelated to year level influenced disaster preparedness.

This result was further supported by a study entitled "Disaster Preparedness: Relationships among Prior Experience, Personal Characteristics, and Distress," (Hittner, 2000). This study found that individual preparedness for disasters was influenced more by personal characteristics and prior experiences rather than educational levels or stages in academic progression. This aligned with the finding that year level alone did not significantly impact disaster preparedness.

A One-way ANOVA was employed to find the significant difference between the level of respondents' disaster preparedness when grouped according to their profiles in terms of their program. The analysis of the disaster preparedness data revealed that the p-value of 2.60 was significantly greater than the common significance level of 0.05. As a result, we failed to reject the null hypothesis. This suggested that there was no statistical difference between the level of disaster preparedness based on the students' program.

Furthermore, while the F-value of 36.276 indicated some degree of variability in the data, the corresponding p-value demonstrated that this variability was not statistically significant at the 5% level. Therefore, despite observing differences in disaster preparedness among students from different programs, these differences were not statistically significant, implying that the preparedness levels across various programs were similar.

A study entitled "Disaster Awareness and Preparedness of College Students: A Descriptive Correlational-Comparative" (Malonecio, 2020), results

showed that there was no significant difference identified between the various programs in terms of their preparedness for disasters This indicated that disaster preparedness was the same for all the programs. Moreover, prior research has discussed the connection between awareness of disasters and being prepared (Gerdan, 2014; Park, 2019). Significant findings from the study showed that disaster preparedness was moderately and positively correlated with disaster awareness. This suggests that increased awareness of disasters leads to increased readiness. Turan et al. (2017) emphasized the importance of education in delivering knowledge to people and translating it into actions. Hence, emphasizing the significance of disaster awareness will enhance students' readiness regardless of their courses.

Table 7. Test of Significant Difference between Respondents' Level of Disaster Preparedness when Grouped According to their Profiles

Variables	F- value	P-value	Interpretation
Disaster Preparedness and Year Level	9.918	0.99	No Significant Difference
Disaster Preparedness and Program	36.276	2.60	No Significant Difference

This study evaluated the levels of disaster preparedness and awareness among allied health students at Misamis University. This study was anchored in the Protective Action Decision Model, the research explored differences in preparedness based on student profiles and proposed a program to enhance disaster preparedness and awareness. The study utilized a quantitative approach and employed Slovin's formula to determine a sample size of 805 from a population of 1,008, using stratified random sampling to ensure representation across all academic years and courses.

Students exhibited a high level of disaster awareness and preparedness, demonstrating strong awareness in key areas such as avoiding hazardous areas, practicing safety measures during earthquakes, and participating in disaster preparedness seminars and drills. The analysis of the disaster preparedness data revealed that the p-value of 8.146 was significantly greater than the common significance level of 0.05. As a result, we failed to reject the null hypothesis. Statistical analysis revealed that the p-value (0.374) was greater than the alpha level of 0.05, indicating that there was no significant difference in disaster preparedness among students of different programs and year levels. The F-value of 0.78 showed some variability, but it was not statistically significant.

Overall, the study found that the disaster awareness and preparedness among Allied Health Students was commendable, continuous efforts and targeted interventions were necessary to address the identified gaps and enhance overall disaster readiness.

FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

This chapter presents theconclusions and recommendations based on the salient findings of the study.

Conclusion

Based on the findings, the following conclusions are drawn:

1. The demographic analysis revealed a representative sample of Allied HealthStudents, Data revealed that the majority of the respondents were coming from Nursing. Despite the high levels of reported disaster awareness and preparedness among students, the results were statistically insignificant to conclude any meaningful differences across year levels. This underscores the need for further research to better understand factors influencing disaster preparedness.
2. The respondents demonstrateda high level of awareness, understanding disaster-related information measuresbut it also highlights areas that require improvement for comprehensive disaster preparedness and response.By implementing targeted education campaigns, improving access to emergency resources, enhancing communication strategies, and strengthening collaboration with local authorities, the university can ensure that all students are well-aware for potential disasters.
3. The students exhibited a high level of preparednessdemonstrating strong readiness in several critical aspects of disaster response. It showed a solid understanding of key safety measures, such as avoiding hazardous areas during potential disasters and practicing appropriate actions during emergencies.Following these guidelines will enable the institution to maintain and further enhance the disaster preparedness of its students, ensuring their safety and resilience in the face of emergencies.
4. The study's results failed to reject the null hypothesis, suggesting that any observed differences in disaster preparedness among students of different year levels, when grouped by their profiles, are likely due to chance and not

statistically significant. Hence, there is no evidence to support a meaningful or consistent variation in disaster preparedness levels across the year levels.

Recommendation

From the findings and conclusions of the study, the following recommendations are offered:

1. It is recommended for future researchers to investigate other variables that can affect the level of awareness and preparedness of the respondents aside from program and year level.

2. Given students' strong awareness, the institution should continue tracking and enhancing educational programs. Implement advanced simulations and scenario-based training should be implemented to deepen students' understanding and practical skills in real-life disaster scenarios. This approach aims to reinforce decision-making abilities and ensure readiness beyond theoretical knowledge.

3. Since students demonstrate a high level of preparedness, the institution should continuously maintain and expand current preparedness initiatives. This includes regular drills, workshops, and seminars that incorporate hands-on exercises and collaborative learning opportunities.

4. It is recommended to implement a unified disaster preparedness curriculum for all students, as no statistical differences in preparedness levels were found based on students' programs. This curriculum should incorporate cross-disciplinary workshops and collaborative exercises to promote a cohesive approach to disaster response. Periodic reassessments and updates to the curriculum are advised to integrate emerging threats and technologies, ensuring ongoing relevance and effectiveness in disaster readiness education.

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APPENDIX A - Research Questionnaire (Blank)

Questionnaire

The following questionnaire asks you about your personal information. Please note that this survey is conducted for academic research purposes only. Your participation in this survey would be greatly appreciated, and the confidentiality of any information provided will be ensured.

Direction: Please answer the following questions by putting a check (✓) mark in the parenthesis or providing the information being asked.

Year level: 1st Year ( ) 2nd Year ( ) 3rd Year ( )
Program: Nursing( ) MedTech ( ) RadTech ( ) Dentistry ( )
Psychology ( )

PART 1. RESPONDENTS' DISASTER AWARENESS

PLEASE INDICATE THE EXTENT TO WHICH YOU DISAGREE WHICH THE FOLLOWING STATEMENTS BY CHEKING THE APPROPRIATE NUMBER.

1- STRONGLY DISAGREE 3- NEUTRAL 5- STRONGLY AGREE
2- DISAGREE 4- AGREE

APPENDIX A Cont'd

Statements	1	2	3	4	5
A natural disaster such as typhoons, floods, tsunamis, storm surge, and earthquakes can occur anytime					
There are specific action responses during a disaster event					
The country has been experiencing numerous disastrous events in a year (e.g. an average 20 typhoons/year)					
As a result of a disaster, more possible disastrous events may likely to follow.					
A small kit with emergency supplies must be brought always if evacuation is necessary.					
Preserving or keeping food safe after a disaster should be taught in disaster seminars.					
The Philippines ranks among the most disaster-prone country in the South-East Asia.					
The government has several seminars and forums laid out in preparation for passible new disaster that may occur in the future (e.g. "The Big One")					
The Philippines, as an archipelago, puts risk during a storm surge.					
The Philippines is situated in a weather pathway near the equator known as the Typhoon Belt.					
The government hosts several mass simulation drills to prepare the population for future unwanted disastrous events.					
Local government units and agencies has provided hotlines which can be contacted during an event of a disaster.					
There is a disaster plan that has been formulated at my school.					
My school hosts seminars and forums to prepare us for a disaster.					
There is no message that encourage the students to takes steps to be prepared for emergency situations in the school.					
There is no possible dangers that can occur after a disaster.					
The local media has not given any information regarding preparation in disasters.					
There is no established specific meeting placed to reunite with my classmates and teachers.					

APPENDIX A Cont'd

The government's assigned agency has not been inspecting the vulnerability of public and private institutions in a disaster.					
Damaged areas can't be a reservoir site for possible aftershocks which can be more severe.					

PART 2. RESPONDENTS' DISASTER PREPAREDNESS

Statements	1	2	3	4	5
I stay away from large body of waters, especially when I hear about a new disaster may happen.					
I will evacuate calmly.					
I practice how to drop to my hands and knees, cover my head and neck with my arms, and hold on to any sturdy furniture until the shaking stops					
I follow the way leading to the river during a storm					
In an event of an earthquake, I will stay near glass windows, outside doors and walls.					
If my house has been slightly destroyed after a typhoon, I will go inside my house right away.					
I participate in the disaster plan that has been formulated by my school.					
I attend seminars about being prepared for a disaster hosted by my school.					
I do not participate in the practice drills hosted by my school.					
I do not stay home whenever there are announcements by the government through their social media accounts about dangerous disasters that may happen.					
I will not leave immediately even if I have been told to do so.					
I attend seminars and forums laid out by the government, in partnership with several non-government offices for					

more knowledge.						

APPENDIX A Cont'd

I participate in government-hosted mass simulation drills in preparation for future disastrous events.					
I have not obtained the established specific meeting place to reunite with other students and teachers.					
I do not have the emergency numbers and contact details of the qualified personnel such as the local fire department, police, hospitals, and barangay officials.					

APPENDIX B - Sample of Filled Out Questionnaire

Questionnaire

The following questionnaire asks you about your personal information. Please note that this survey is conducted for academic research purposes only. Your participation in this survey would be greatly appreciated, and the confidentiality of any information provided will be ensured.

Direction: Please answer the following questions by putting a check (✓) mark in the parenthesis or providing the information being asked.

Year level: 1st Year (✓) 2nd Year ( ) 3rd Year ( )

Course: Nursing (✓) MedTech ( ) RadTech ( ) Dentistry ( ) Psychology ( )

PLEASE INDICATE THE EXTENT TO WHICH YOU DISAGREE WHICH THE FOLLOWING STATEMENTS BY CHEKING THE APPROPRIATE NUMBER.

1- STRONGLY DISAGREE 3- NEUTRAL 5 - STRONGLY AGREE
2- DISAGREE 4- AGREE

Disaster Awareness of the Respondents	**1**	**2**	**3**	**4**	**5**
A natural disaster such as typhoons, floods, tsunamis, storm surge, and earthquakes can occur anytime				✓	
There are specific action responses during a disaster event			✓		
The country has been experiencing numerous disastrous events in a year (e.g. an average 20 typhoons/year)				✓	
As a result of a disaster, more possible disastrous events may likely to follow.				✓	
A small kit with emergency supplies must be brought always if evacuation is necessary.			✓		

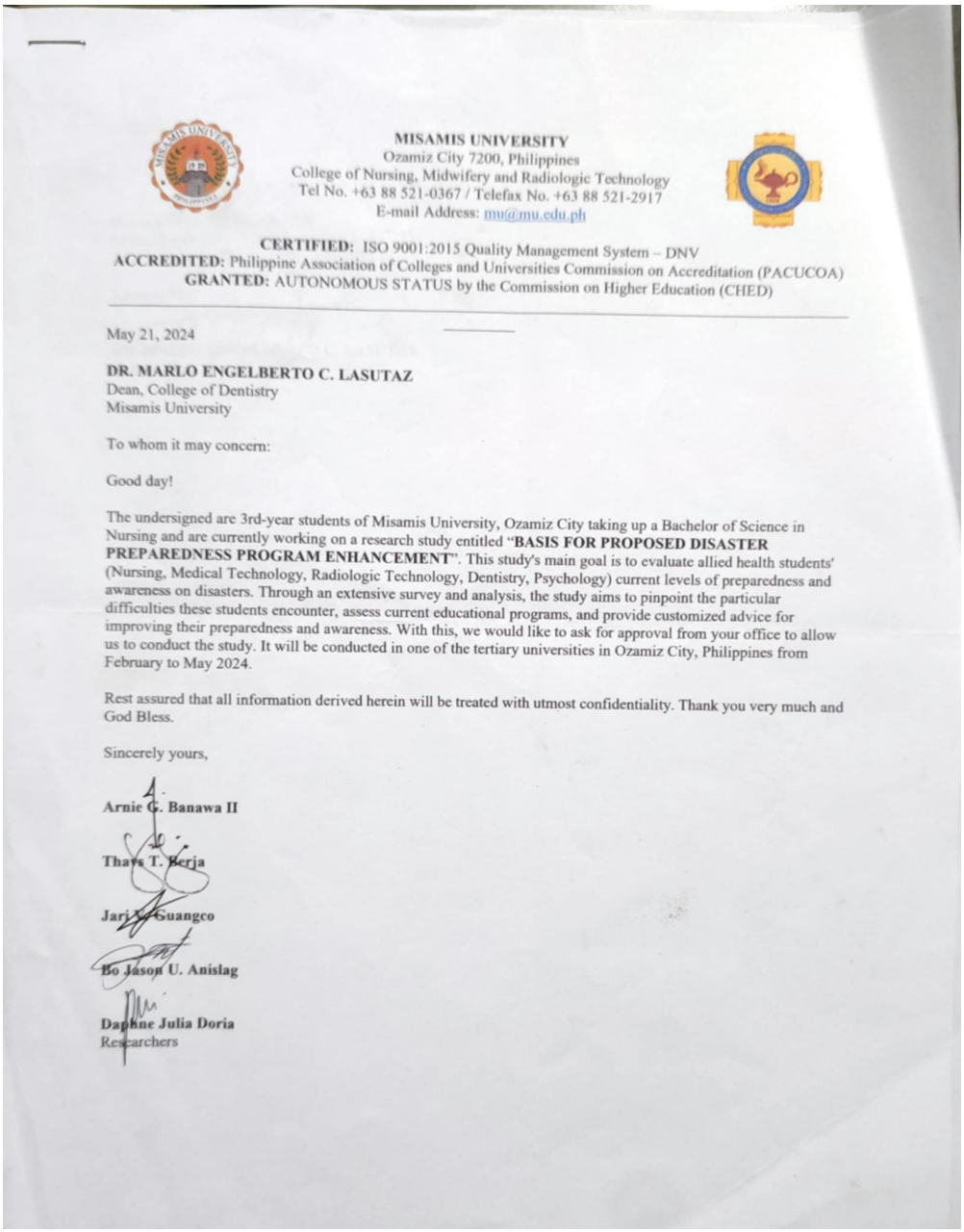
APPENDIX B Cont'd

Preserving or keeping food safe after a disaster should be taught in disaster seminars.				✓	
The Philippines ranks among the most disaster-prone country in the South-East Asia.				✓	
The government has several seminars and forums laid out in preparation for passible new disaster that may occur in the future (e.g. "The Big One")				✓	
The Philippines, as an archipelago, puts risk during a storm surge.				✓	
The Philippines is situated in a weather pathway near the equator known as the Typhoon Belt.					✓
The government hosts several mass simulation drills to prepare the population for future unwanted disastrous events.				✓	
Local government units and agencies has provided hotlines which can be contacted during an event of a disaster.					✓
There is a disaster plan that has been formulated at my school.			✓	✓	
My school hosts seminars and forums to prepare us for a disaster.			✓		
There is no message that encourage the students to takes steps to be prepared for emergency situations in the school.				✓	
There is no possible dangers that can occur after a disaster.				✓	
The local media has not given any information regarding preparation in disasters.				✓	
There is no established specific meeting placed to reunite with my classmates and teachers.				✓	
The government's assigned agency has not been inspecting the vulnerability of public and private institutions in a disaster.				✓	
Damaged areas can't be a reservoir site for possible aftershocks which can be more severe.					✓
Disaster Preparedness of the Respondents					
I stay away from large body of waters, especially when I hear about a new disaster may happen.					✓

APPENDIX B Cont'd

I will evacuated calmly.					✓
I practice how to drop to my hands and knees, cover my head and neck with my arms, and hold on to any sturdy furniture until the shaking stops					✓
I follow the way leading to the river during a storm				✓	
In an event of an earthquake, I will stay near glass windows, outside doors and walls.				✓	
If my house has been slightly destroyed after a typhoon, I will go inside my house right away.					
I participate in the disaster plan that has been formulated by my school.		✓			
I attend seminars about being prepared for a disaster hosted by my school.					
I do not participate in the practice drills hosted by my school.		✓			
I do not stay home whenever there are announcements by the government through their social media accounts about dangerous disasters that may happen.		✓			
I will not leave immediately even if I have been told to do so.		✓			
I attend seminars and forums laid out by the government, in partnership with several non-government offices for more knowledge.			✓		
I participate in government-hosted mass simulation drills in preparation for future disastrous events.					✓
I have not obtained the established specific meeting place to reunite with other students and teachers.				✓	
I do not have the emergency numbers and contact details of the qualified personnel such as the local fire department, police, hospitals, and barangay officials.				✓	

APPENDIX C - Permission Letters



MISAMIS UNIVERSITY
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CERTIFIED: ISO 9001:2015 Quality Management System – DNV
ACCREDITED: Philippine Association of Colleges and Universities Commission on Accreditation (PACUCOA)
GRANTED: AUTONOMOUS STATUS by the Commission on Higher Education (CHED)

May 21, 2024

DR. MARLO ENGELBERTO C. LASUTAZ
Dean, College of Dentistry
Misamis University

To whom it may concern:

Good day!

The undersigned are 3rd-year students of Misamis University, Ozamiz City taking up a Bachelor of Science in Nursing and are currently working on a research study entitled "**BASIS FOR PROPOSED DISASTER PREPAREDNESS PROGRAM ENHANCEMENT**". This study's main goal is to evaluate allied health students' (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) current levels of preparedness and awareness on disasters. Through an extensive survey and analysis, the study aims to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness. With this, we would like to ask for approval from your office to allow us to conduct the study. It will be conducted in one of the tertiary universities in Ozamiz City, Philippines from February to May 2024.

Rest assured that all information derived herein will be treated with utmost confidentiality. Thank you very much and God Bless.

Sincerely yours,

Arnie G. Banawa II

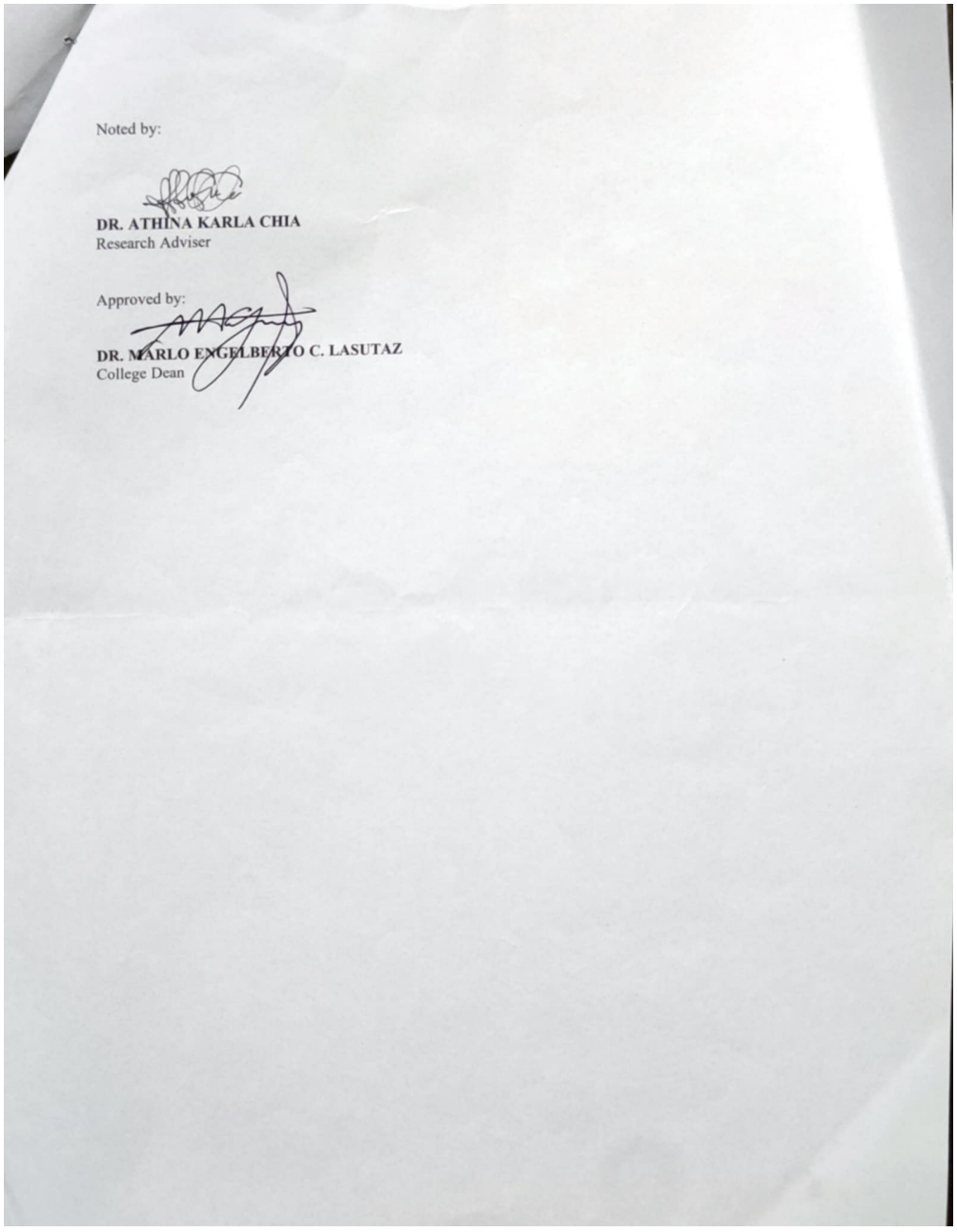
Thays T. Berja

Jari[illegible] Guangco

Bo Jason U. Anislag

Daphne Julia Doria
Researchers

APPENDIX C Cont'd



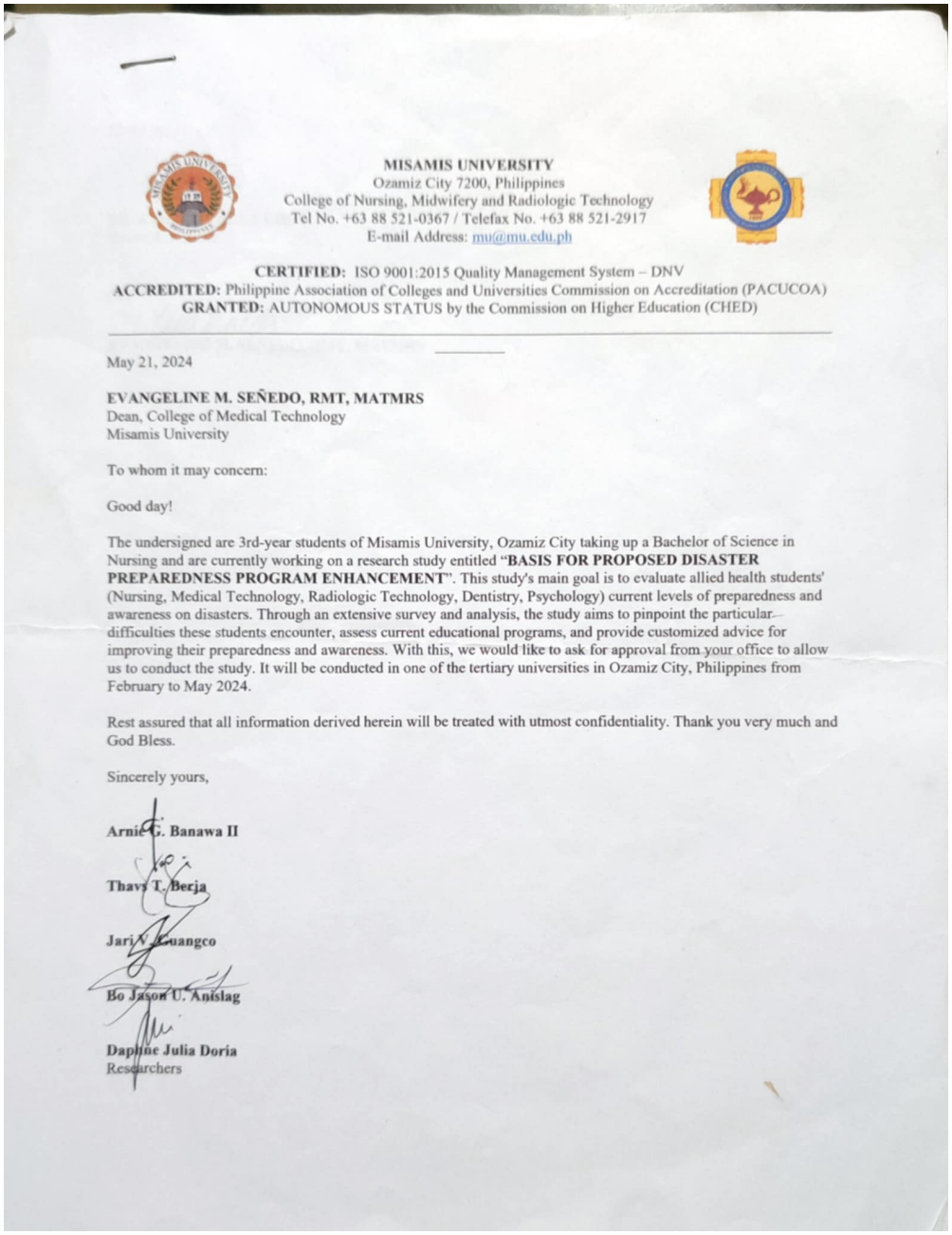
Noted by:

DR. ATHINA KARLA CHIA
Research Adviser

Approved by:

DR. MARLO ENGELBERTO C. LASUTAZ
College Dean

APPENDIX C Cont'd



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May 21, 2024

EVANGELINE M. SEÑEDO, RMT, MATMRS
Dean, College of Medical Technology
Misamis University

To whom it may concern:

Good day!

The undersigned are 3rd-year students of Misamis University, Ozamiz City taking up a Bachelor of Science in Nursing and are currently working on a research study entitled "**BASIS FOR PROPOSED DISASTER PREPAREDNESS PROGRAM ENHANCEMENT**". This study's main goal is to evaluate allied health students' (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) current levels of preparedness and awareness on disasters. Through an extensive survey and analysis, the study aims to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness. With this, we would like to ask for approval from your office to allow us to conduct the study. It will be conducted in one of the tertiary universities in Ozamiz City, Philippines from February to May 2024.

Rest assured that all information derived herein will be treated with utmost confidentiality. Thank you very much and God Bless.

Sincerely yours,

Arnie G. Banawa II

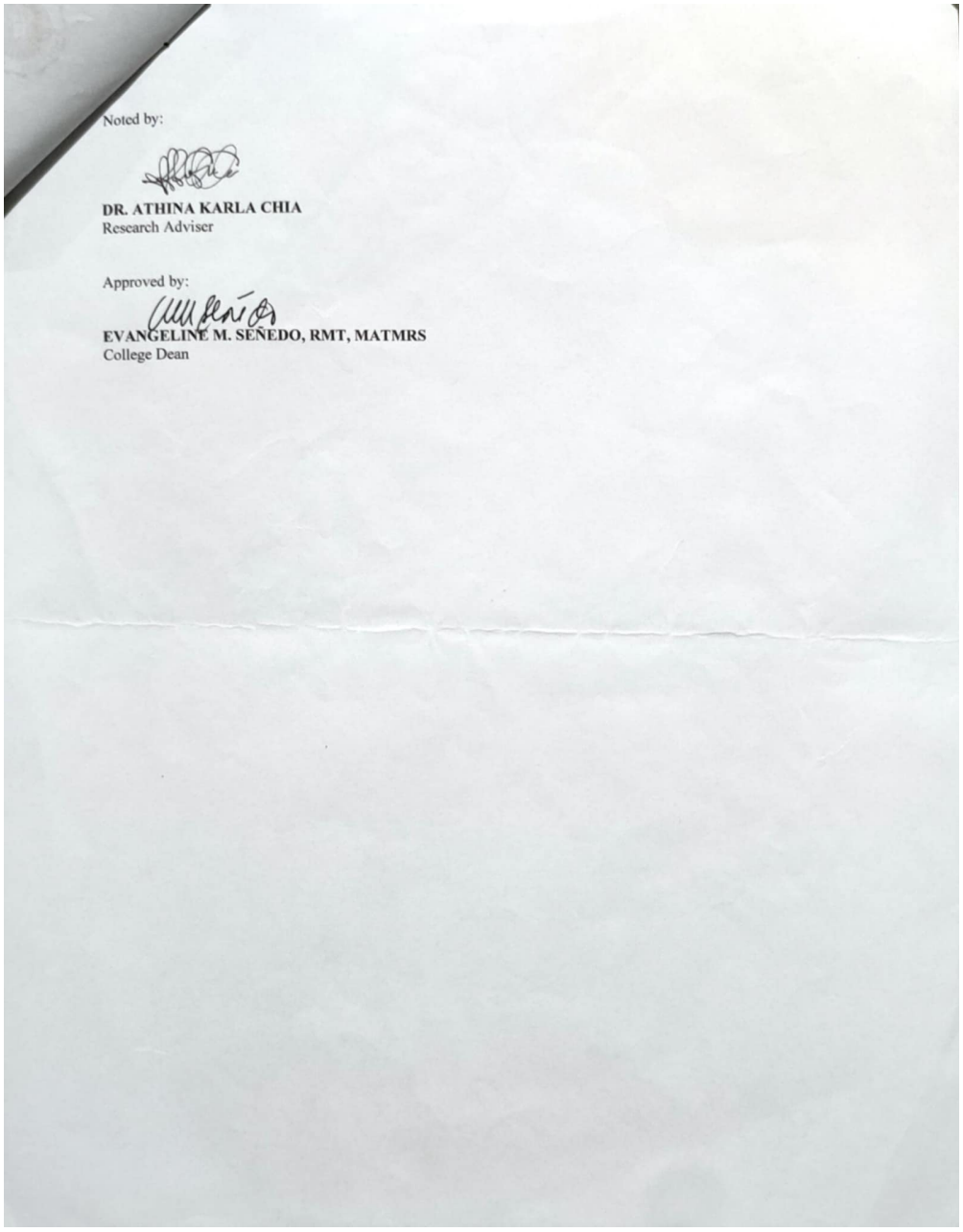
Thavy T. Berja

Jari V. Cuangco

Bo Jason U. Anislag

Daphne Julia Doria
Researchers

APPENDIX C Cont'd



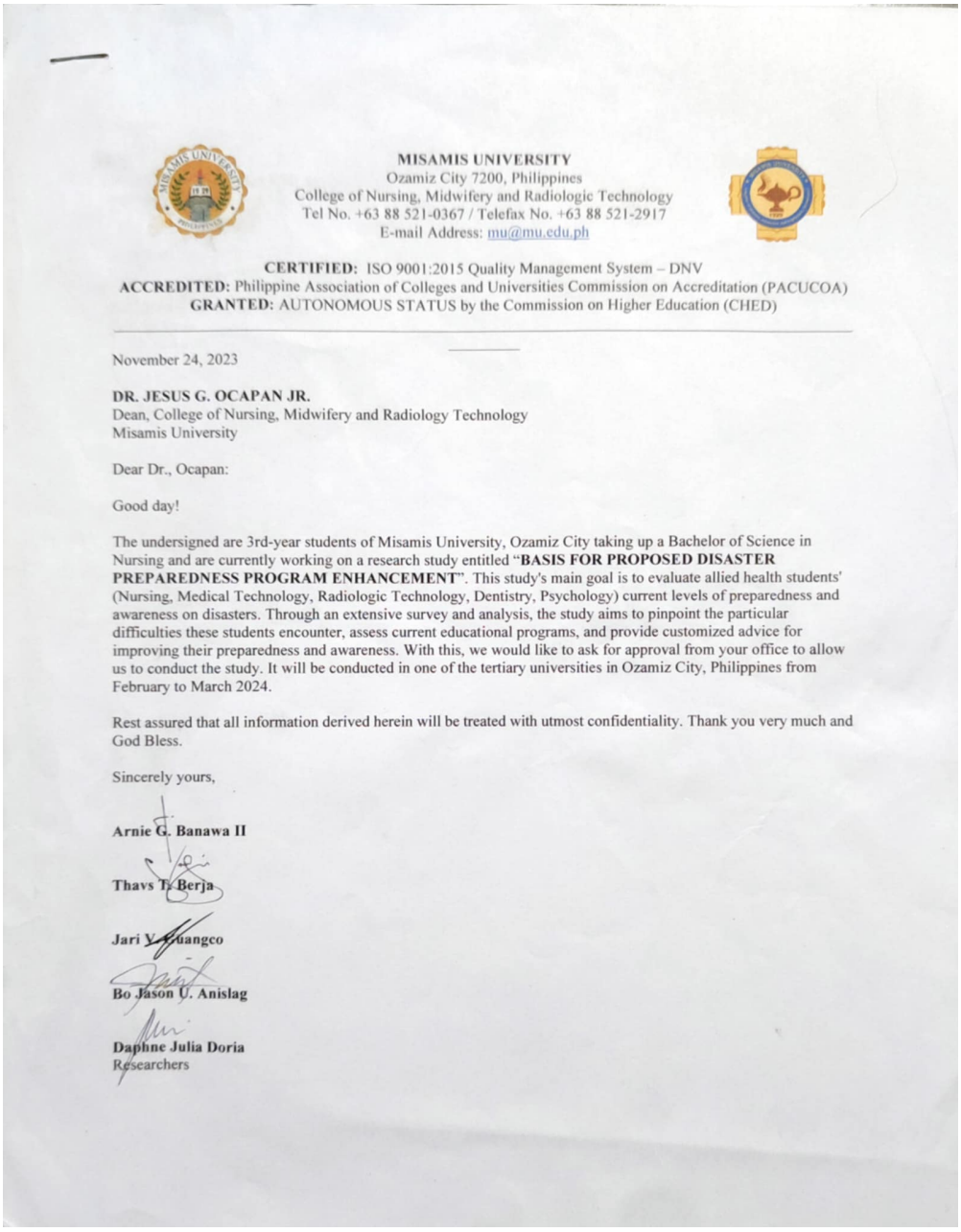
Noted by:

DR. ATHINA KARLA CHIA
Research Adviser

Approved by:

EVANGELINE M. SEÑEDO, RMT, MATMRS
College Dean

APPENDIX C Cont'd



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November 24, 2023

DR. JESUS G. OCAPAN JR.
Dean, College of Nursing, Midwifery and Radiology Technology
Misamis University

Dear Dr., Ocapan:

Good day!

The undersigned are 3rd-year students of Misamis University, Ozamiz City taking up a Bachelor of Science in Nursing and are currently working on a research study entitled "**BASIS FOR PROPOSED DISASTER PREPAREDNESS PROGRAM ENHANCEMENT**". This study's main goal is to evaluate allied health students' (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) current levels of preparedness and awareness on disasters. Through an extensive survey and analysis, the study aims to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness. With this, we would like to ask for approval from your office to allow us to conduct the study. It will be conducted in one of the tertiary universities in Ozamiz City, Philippines from February to March 2024.

Rest assured that all information derived herein will be treated with utmost confidentiality. Thank you very much and God Bless.

Sincerely yours,

Arnie G. Banawa II

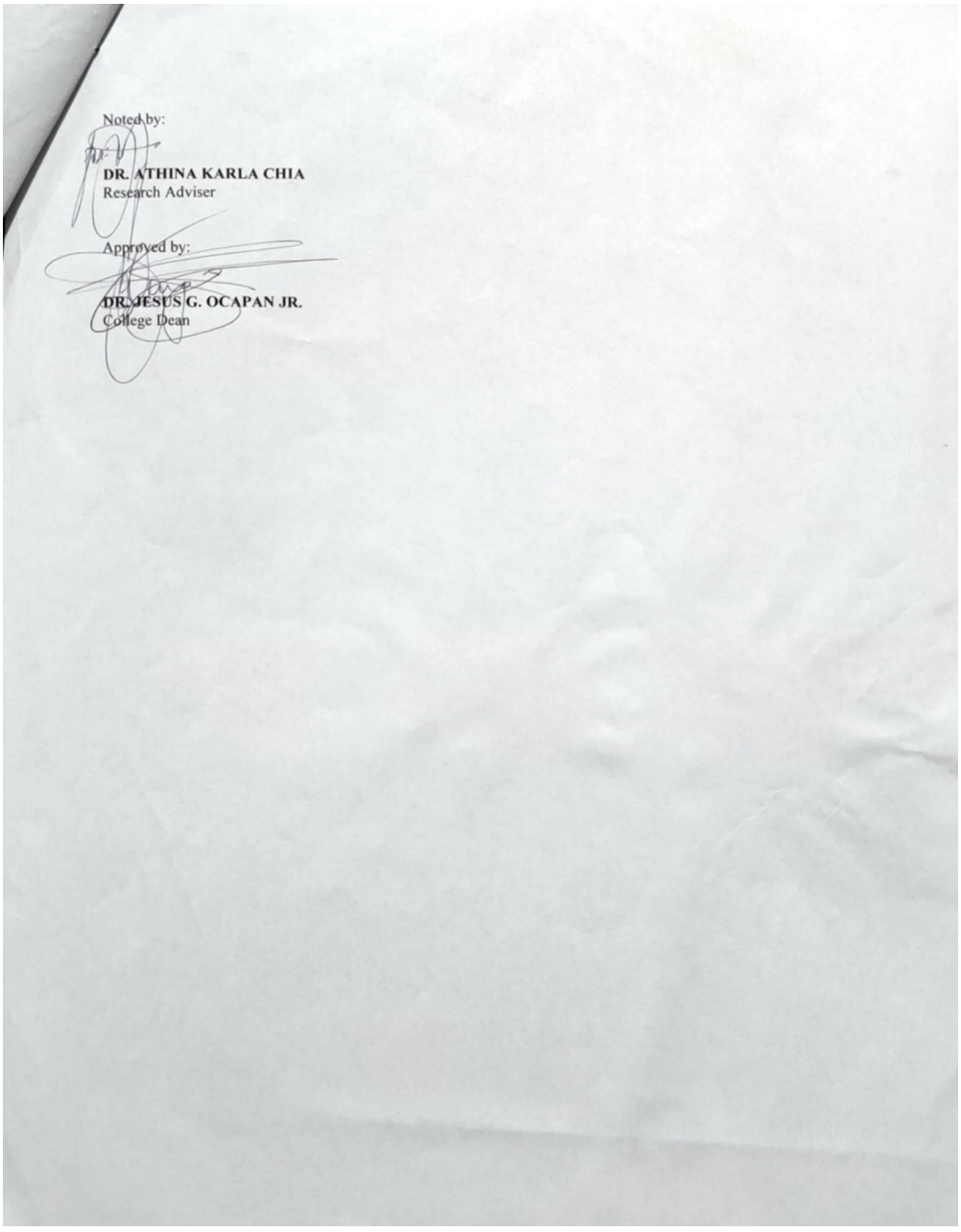
Thavs T. Berja

Jari V. Cuangco

Bo Jason U. Anislag

Daphne Julia Doria
Researchers

APPENDIX C Cont'd



Noted by:

DR. ATHINA KARLA CHIA
Research Adviser

Approved by:

DR. JESUS G. OCAPAN JR.
College Dean

APPENDIX C Cont'd

MISAMIS UNIVERSITY
Ozamiz City 7200, Philippines
College of Nursing, Midwifery and Radiologic Technology
Tel No. +63 88 521-0367 / Telefax No. +63 88 521-2917
E-mail Address: mu@mu.edu.ph

CERTIFIED: ISO 9001:2015 Quality Management System – DNV
ACCREDITED: Philippine Association of Colleges and Universities Commission on Accreditation (PACUCOA)
GRANTED: AUTONOMOUS STATUS by the Commission on Higher Education (CHED)

May 21, 2024

APRIL FARELL M. RELACION, MPA, MPS, MBA, JD
Dean, College of Arts and Sciences
Misamis University

To whom it may concern:

Good day!

The undersigned are 3rd-year students of Misamis University, Ozamiz City taking up a Bachelor of Science in Nursing and are currently working on a research study entitled "**BASIS FOR PROPOSED DISASTER PREPAREDNESS PROGRAM ENHANCEMENT**". This study's main goal is to evaluate allied health students' (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) current levels of preparedness and awareness on disasters. Through an extensive survey and analysis, the study aims to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness. With this, we would like to ask for approval from your office to allow us to conduct the study. It will be conducted in one of the tertiary universities in Ozamiz City, Philippines from February to May 2024.

Rest assured that all information derived herein will be treated with utmost confidentiality. Thank you very much and God Bless.

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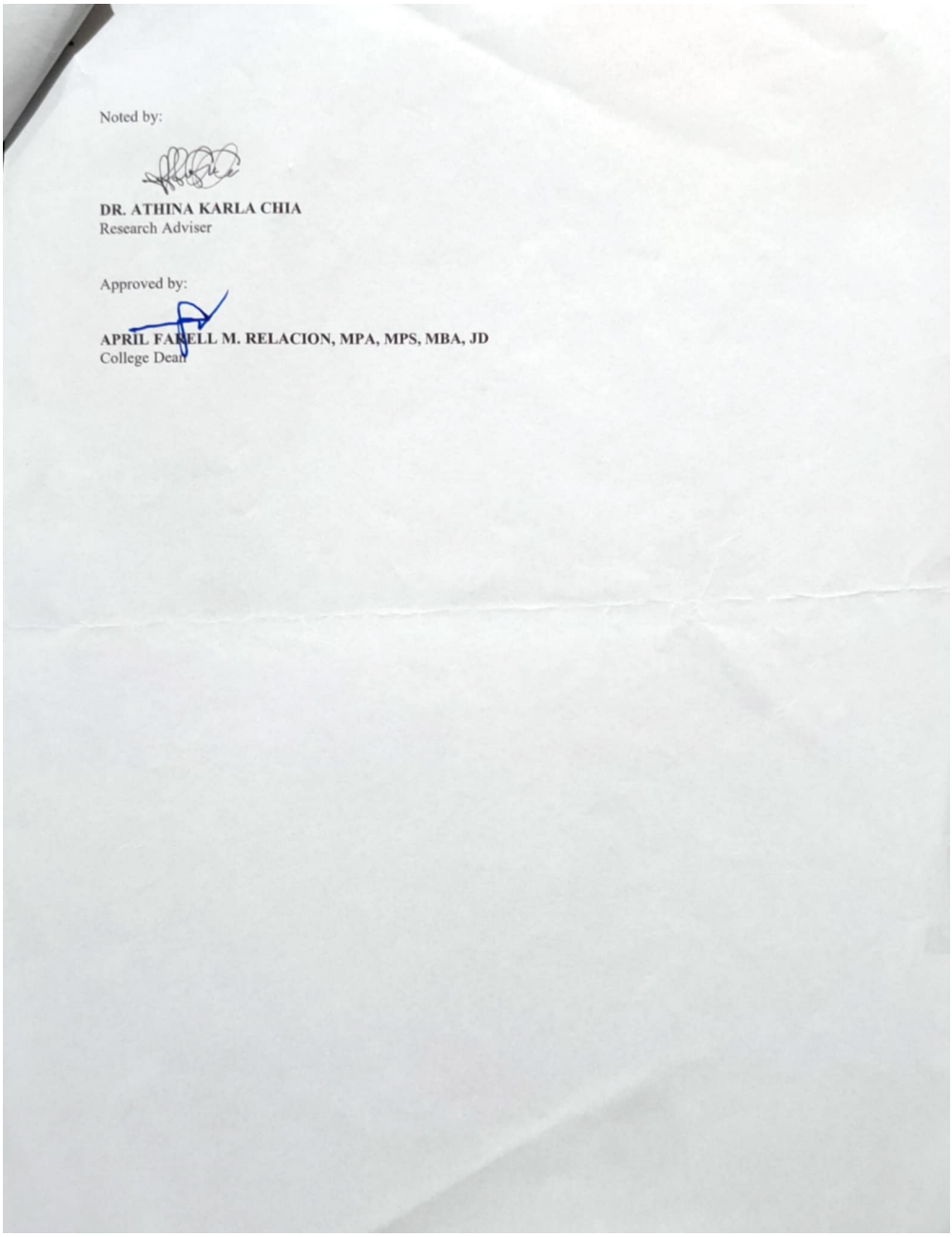
Researchers

APPENDIX C Cont'd



Noted by:

DR. ATHINA KARLA CHIA
Research Adviser

Approved by:

APRIL FARELL M. RELACION, MPA, MPS, MBA, JD
College Dean

APPENDIX D - Informed Consent Form

MISAMIS UNIVERSITY
Ozamiz City 7200, Philippines
College of Nursing, Midwifery and Radiologic Technology
Tel No. +63 88 521-0367 / Telefax No. +63 88 521-2917
E-mail Address: mu@mu.edu.ph

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MISAMIS UNIVERSITY
Ozamiz City
College of Nursing, Midwifery and Radiologic Technology

RESEARCH INFORMED CONSENT FORM

Title
Thisstudy istitled "**DISASTER AWARENESS AND PREPAREDNESS AMONG ALLIED HEALTH STUDENTS: BASIS FOR PROPOSED PROGRAM ENHANCEMENT**" in partial fulfillment of the requirements for the degree of Bachelor of Science in Nursing.

Researcher
This study is to be conducted by **Thavs T. Berja, Arnie G. Banawa II, Jari V. Guangco, Bo Jason U. Anislag, and Daphne Julia Doria** who is pursuing the degree in Bachelor of Science in Nursing at Misamis University College of Nursing, with Dr. Athina Karla C. Chia as the adviser. The researchers can be contacted through this mobile number 09383617676 or email address thaverz.berja@gmail.com.

Purpose of the Research
This study's main goal is to evaluate allied health students' (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) current levels of preparedness and awareness on disasters. Through an extensive survey and analysis, the study aims to pinpoint the particular difficulties these students encounter, assess current educational programs, and provide customized advice for improving their preparedness and awareness.

APPENDIX D Cont'd

Description of the Research

The study will involve collecting data from allied health students (Nursing, Medical Technology, Radiologic Technology, Dentistry, Psychology) through a questionnaire or survey. The questions are items under Level of Disaster Awareness of the Respondents and Level of Disaster Preparedness of the Respondents. For the level of disaster awareness, the questions under this section will delve into various aspects of disaster awareness, such as knowledge about different types of disasters, understanding of potential risks, familiarity with disaster response protocols, and awareness of available resources and support systems during emergencies. Meanwhile, for the level of disaster preparedness, this section will focus on evaluating the respondents' preparedness for potential disasters. Questions will cover areas such as the presence of emergency plans and supplies, participation in disaster preparedness training or drills, awareness of evacuation routes, readiness to cope with different disaster scenarios, and proactive measures taken to mitigate risks.

Risk and Benefits

Privacy and confidentiality will be ensured by making sure that only relevant data will be gathered from the respondents and that any distinguishing information about their identity will not be divulged to anyone. All-access to the data collected will be restricted to authorized personnel only, such as the research team members directly involved in the study. All data will be securely stored using encrypted digital methods and will be accessible only to those with a legitimate need to access it. The records of the study will be kept entirely private and confidential, with access limited to the researchers involved in the study. The respondents' anonymity and right to privacy will always be maintained during the conduct of the study. There will be no monetary or in-kind benefit that the respondents of this study will receive.

Confidentiality

Your participation in this study will be kept confidential. Your responses will be coded and stored securely, accessible only to the research team. Any identifying information will be removed to ensure anonymity. Only the researchers involved in this study will have access to the data. Your information will not be shared with any third parties unless required by law.

Publication

The results of this study may be published in any form for public and scholarly consumption or usedinclassroominstructiontoenrichlearningandgeneratemoreknowledgeforfuturere search.

Participation

Participation in this study is entirely voluntary. You have the right to withdraw at any time without penalty or consequences. Your decision to participate or
APPENDIX D Cont'd

withdraw will not affect your current or future academic standing or any other relationships with the institution or researchers.

Informed Consent

Given the information above, I confirm that the potential harms, benefits, and alternatives have been explained to me. I have read and understood this consent form, and I understand that I am free to withdraw from my involvement in the study any time I deem it to be necessary or to seek clarification for any unclear steps in the research process. My signature indicates my willingness to participate in the study.

_____ _____

Printed Name and Signature of the Research RespondentDate

Appendix E - Communication Letter to the Author of the Tool

Letter Seeking Permission to Use Questionnaire Tool

Ryan Ray M. Mata, RN, MN
Corresponding Author
School of Nursing, Manila Adventist College

Greetings!

We, the students from Misamis University (MU) under the Bachelor of Science in Nursing (BSN), are writing to request your permission to utilize the research questionnaire you developed titled "Disaster Awareness and Preparedness of College Students: A Descriptive Correlational-Comparative Study."

Our group is currently working on a study titled "Basis for Proposed Disaster Preparedness Program Enhancement," which aims to examine the relationship between disaster awareness and preparedness among respondents and determine differences in disaster preparedness based on students' selected characteristics.
Given the relevance and significance of your research to our study, we believe that incorporating your validated questionnaire will greatly enhance the comprehensiveness and reliability of our study's data collection process.

We will assure that all usage of your questionnaire will be properly credited in our research report, and we will strictly adhere to any guidelines or conditions you may have regarding its usage.

We understand the importance of respecting intellectual property rights and academic integrity, and we sincerely appreciate your consideration of our request. If you have any questions or require further information, please do not hesitate to contact us at thaverz.berja@gmail.com or 09383617676.

Thank you very much for your time and consideration. We look forward to your favorable response.

Warm regards,

Thavs T. Berja

APPENDIX F - Statistical Computations

Statistical Computations

1. **Describe respondents' profiles in terms of year level and program**

Course	Count	Percent
1	328	40.75
2	207	25.71
3	76	9.44
4	104	12.92
5	90	11.18
Total	***805***	***100***
Year Level		
1	303	37.64
2	262	32.55
3	240	29.81
Total	***805***	***100***

2. **Determine the respondents' level of disaster awareness.**

Level of Disaster Awareness

Disaster Awareness of the Respondents	Mean	SD	Interpretation
A natural disaster such as typhoons, floods, tsunamis, storm surge, and earthquakes can occur anytime	4.78	0.61	Very High
There are specific action responses during a disaster event	4.60	0.70	Very High
The country has been experiencing numerous disastrous events in a year (e.g. an average 20 typhoons/year)	4.19	0.94	High
As a result of a disaster, more possible disastrous events may likely to follow.	4.29	0.84	Very High
A small kit with emergency supplies must be brought always if evacuation is necessary.	4.61	0.75	Very High
Preserving or keeping food safe after a disaster should be taught in disaster seminars.	4.55	0.79	Very High

APPENDIX F Cont'd

The Philippines ranks among the most disaster-prone country in the South-East Asia.	4.37	0.78	Very High
The government has several seminars and forums laid out in preparation for passible new disaster that may occur in the future (e.g. "The Big One")	4.08	1.10	High
The Philippines, as an archipelago, puts risk during a storm surge.	4.18	0.88	High
The Philippines is situated in a weather pathway near the equator known as the Typhoon Belt.	4.16	0.83	High
The government hosts several mass simulation drills to prepare the population for future unwanted disastrous events.	3.99	1.09	High
Local government units and agencies has provided hotlines which can be contacted during an event of a disaster.	4.37	0.90	Very High
There is a disaster plan that has been formulated at my school.	4.21	0.99	Very High
My school hosts seminars and forums to prepare us for a disaster.	4.19	0.99	High
There is no message that encourage the students to takes steps to be prepared for emergency situations in the school.	2.18	1.18	Low
There is no possible dangers that can occur after a disaster.	1.98	1.28	Low
The local media has not given any information regarding preparation in disasters.	2.28	1.31	Low
There is no established specific meeting placed to reunite with my classmates and teachers.	2.32	1.18	Low
The government's assigned agency has not been inspecting the vulnerability of public and private institutions in a disaster.	2.36	1.06	Low
Damaged areas can't be a reservoir site for possible aftershocks which can be more severe.	3.23	1.37	Moderate
Total	**3.75**	**0.98**	**High**

Scale: 4.21 – 5.00 = Very High (VH); 3.41 – 4.20 =High (H); 2.61 – 3.40 = Moderate (M); 1.81 – 2.60 = Low (L); 1.00 – 1.80 = Very Low (VL)

APPENDIX F Cont'd

3. Assess the respondents' level of disaster preparedness

Level of Disaster Preparedness

Disaster Preparedness of the Respondents	**Mean**	**SD**	**Interpretation**
I stay away from large body of waters, especially when I hear about a new disaster may happen.	4.43	0.92	Very High
I will evacuate calmly.	4.38	0.84	Very High
I practice how to drop to my hands and knees, cover my head and neck with my arms, and hold on to any sturdy furniture until the shaking stops	4.32	0.96	Very High
I follow the way leading to the river during a storm	2.80	1.59	Moderate
In an event of an earthquake, I will stay near glass windows, outside doors and walls.	2.19	1.58	Low
If my house has been slightly destroyed after a typhoon, I will go inside my house right away. **APPENDIX E Cont'd**	2.24	1.63	Low
I participate in the disaster plan that has been formulated by my school.	4.13	1.27	High
I attend seminars about being prepared for a disaster hosted by my school.	4.14	1.06	High
I do not participate in the practice drills hosted by my school.	3.80	1.59	High
I do not stay home whenever there are announcements by the government through their social media accounts about dangerous disasters that may happen.	3.80	1.59	High
I will not leave immediately even if I have been told to do so.	2.80	1.59	Low
I attend seminars and forums laid out by the government, in partnership with several non-government offices for more knowledge.	3.85	1.08	High

APPENDIX F Cont'd

I participate in government-hosted mass simulation drills in preparation for future disastrous events.	3.87	1.05	High
I have not obtained the established specific meeting place to reunite with other students and teachers.	3.80	1.59	High
I do not have the emergency numbers and contact details of the qualified personnel such as the local fire department, police, hospitals, and barangay officials.	3.80	1.59	High
Total	**3.62**	**1.33**	**High**

Scale: 4.21 – 5.00 = Very High (VH); 3.41 – 4.20 =High (H); 2.61 – 3.40 = Moderate (M); 1.81 – 2.60 = Low (L); 1.00 – 1.80 = Very Low (VL)

4. **Explore the significant difference between the respondents' level of disaster preparedness when grouped according to their profiles**

Variables	F- value	P-value	Interpretation
Disaster Preparedness and Year Level	9.918	0.99	No Significant Difference
Disaster Preparedness and Program	36.276	2.60	No Significant Difference

Note: p<0.01 (Highly Significant; p<0.05 (Significant); p>0.05 (Not Significant)

- The analysis of the disaster preparedness data based on students' year levels revealed that the p-value of 0.99 was higher than the common significance
  level of 0.05. Results showed that the null hypothesis must be accepted, indicating insufficient statistical evidence to suggest a significant difference in disaster preparedness among students of different year levels. In addition, the F-value of 9.918 showed some degree of variability in preparedness, but the associated p-value demonstrated that this variability was not statistically significant.

- The analysis of the disaster preparedness data revealed that the p-value of 2.60 was significantly greater than the common significance level of 0.05.

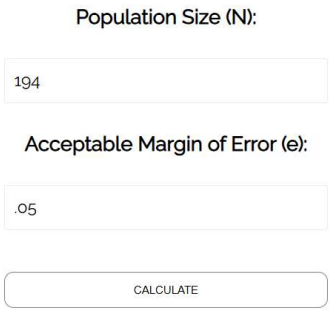
APPENDIX F Cont'd

As a result, we failed to reject the null hypothesis. This suggested that there was no statistical difference between the level of disaster preparedness based on the students' program. Furthermore, while the F-value of 36.276 indicated some degree of variability in the data, the corresponding p-value demonstrated that this variability was not statistically significant at the 5% level.

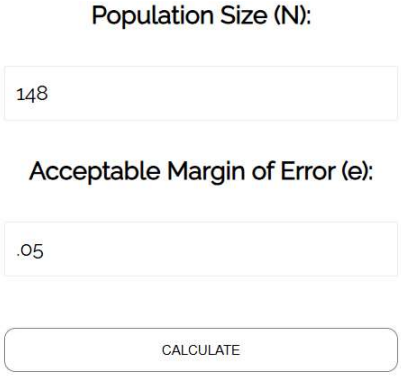
APPENDIX G - Sampling Computation

NURSING

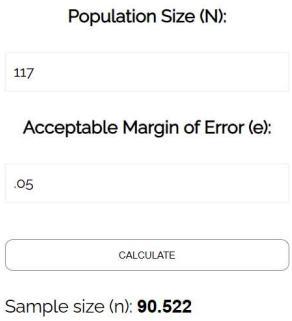
1ST YEAR



2ND YEAR



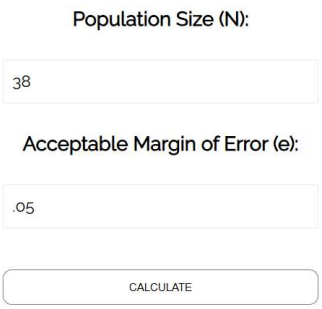
3RD YEAR



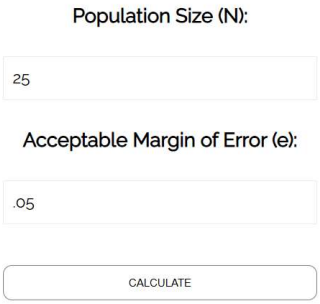
APPENDIX G Cont'd

RADTECH

1ST YEAR



2ND YEAR

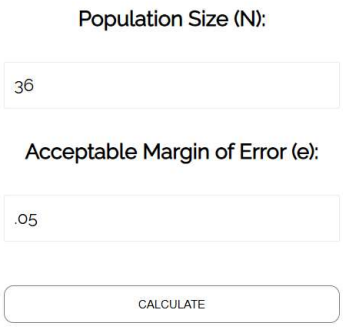


3RD YEAR

APPENDIX G Cont'd

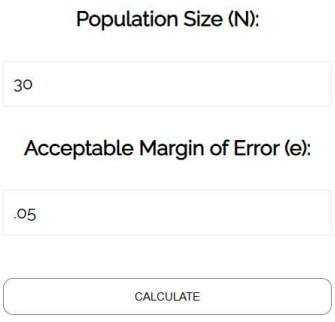
PSYCHOLOGY

1ST YEAR



2ND YEAR

3RD YEAR



APPENDIX G Cont'd

DENTISTRY

1ST YEAR

Population Size (N):

41

Acceptable Margin of Error (e):

.05

CALCULATE

Sample size (n): **37.188**

2ND YEAR

Population Size (N):

38

Acceptable Margin of Error (e):

.05

CALCULATE

Sample size (n): **34.703**

3RD YEAR

Population Size (N):

36

Acceptable Margin of Error (e):

.05

CALCULATE

Sample size (n): **33.028**

APPENDIX G Cont'd

Program	L1 (N)	L1 (n)	L2 (N)	L2 (n)	L3 (N)	L3 (n)
Nursing	194	130	148	108	117	90
Radiologic Technology	38	34	25	23	20	19
Medical Technology	84	69	81	67	87	71
Psychology	36	33	33	30	30	27
Dentistry	41	37	38	34	36	33

APPENDIX H - Program Enhancement Proposal

Program Name: Campus Preparedness Initiative (CPI)

Program Overview:

The Campus Preparedness Initiative (CPI) is designed to improve disaster readiness among students by emphasizing key aspects of the Protective Action Decision Model (PADM). This all-encompassing program will equip students with the essential knowledge, skills, and resources needed to respond effectively to emergencies, thereby fostering a culture of safety and resilience throughout the campus.

Objectives:

1. Enhance Information Sources: Deliver reliable, timely information about disaster risks and protective measures.
2. Improve Risk Perception and Interpretation: Increase students' awareness and understanding of disaster risks and their consequences through education and outreach.
3. Strengthen Cognitive Processes: Facilitate informed decision-making regarding protective actions through targeted training and practical tools.
4. Encourage Proactive Behavioral Responses: Motivate students to adopt proactive measures to prepare for potential disasters.
5. Create Feedback and Continuous Improvement Mechanisms: Develop a system for ongoing feedback to refine and enhance disaster preparedness programs.

Key Components and Actions

1. Enhancing Information Sources
    - Comprehensive Communication Plan: Utilize multiple channels (emails, social media, campus bulletins) to disseminate information about potential hazards and preparedness measures.
    - Collaboration with Experts: Engage local authorities, disaster management agencies, and academic experts to ensure the accuracy of information.
    - Disaster Preparedness Portal: Develop an online portal containing resources, guidelines, and real-time updates for easy access to disaster-related information.
2. Improving Risk Perception and Interpretation

APPENDIX H Cont'd

- Curriculum Integration: Introduce modules on disaster risk management across various academic levels and programs.
- Awareness Campaigns: Organize workshops, seminars, and guest lectures on types of disasters, their impacts, and mitigation strategies.

3. Strengthening Cognitive Processes
   - Risk Identification Training: Offer training sessions on identifying potential hazards and assessing their risks.
   - Simulations and Drills: Conduct regular disaster response drills to practice decision-making in real-time scenarios.
4. Encouraging Proactive Behavioral Responses
   - Emergency Preparedness Kits: Encourage students to assemble emergency kits with essential supplies.
   - Evacuation Plans: Develop clear campus-wide evacuation plans and ensure all students are familiar with them.
5. Creating Feedback and Continuous Improvement Mechanisms
   - Post-Drill Evaluations: Conduct evaluations after drills or simulations to gather feedback for improvement.
   - Feedback Channels: Set up platforms for students to provide feedback on preparedness activities and suggest enhancements.
   - Annual Program Review: Conduct annual reviews of all disaster preparedness initiatives, incorporating feedback for continuous improvement.

Expected Outcomes

- Increased awareness and preparedness for disaster risks among students.
- Enhanced capacity for making informed decisions regarding protective actions.
- Greater community involvement in disaster awareness and preparedness efforts.
- A sustainable framework for continuous improvement in campus safety initiatives.

Conclusion

The Campus Preparedness Initiative aims to empower students with the necessary knowledge and skills for effective disaster response. By prioritizing information sharing, education, cognitive training, proactive measures, and

APPENDIX H Cont'd

continuous feedback, CPI seeks to cultivate a safer campus environment that emphasizes resilience in the face of potential disasters.

Matrix for Campus Preparedness Initiative (CPI)

Objective	Key Component	Action Steps	Time Frame	Resources	Success Indicators
Enhance Information Source	Comprehensive Communication Plan	Utilize emails, social media, and bulletins for information dissemination.	Months 1-3	Communication tools, social media platforms	Increased engagement metrics on communication channels.
	Collaboration with Experts	Partner with local authorities and agencies for accurate information.	Months 1-6	Local emergency management agencies	Number of partnerships established.
	Disaster Preparedness Portal	Develop an online portal for resources and real-time updates.	Months 4-8	IT support, web development resources	Portal usage statistics and user feedback.
Improve Risk Perception and Interpretation	Curriculum Integration	Introduce disaster risk management modules in academic programs.	Months 2-12	Faculty training materials, curriculum guides	Number of courses integrating disaster preparedness.
	Awareness Campaigns	Organize workshops and seminars on disaster impacts and strategies.	Ongoing	Guest speakers, promotional materials	Attendance rates at events and surveys on awareness.
Strengthen Cognitive	Risk Identification	Offer training on identifying	Months 5-10	Training materials,	Number of participants

Processes	Training	hazards and assessing risks.		expert trainers	trained and

APPENDIX H Cont'd

					assessment scores.
	Simulations and Drills	Conduct regular drills for real-time decision-making practice.	Biannual	Emergency management resources	Performance evaluation post-drills.
Encourage Proactive Behavioral Responses	Emergency Preparedness Kits	Encourage students to assemble kits with essential supplies.	Months 1-6	Supply lists, promotional materials	Percentage of students with competed kits.
	Evacuation Plans	Develop clear campus-wide evacuation plans and familiarize students with them.	Months 3-9	Planning resources, maps	Familiarity rates among students via surveys.
Create Feedback and Continuous Improvement	Post-Drill Evaluations	Conduct evaluations after drills to gather feedback for improvements.	After each drill	Evaluation forms, feedback tools	Quality of feedback received and implemented changes.
	Feedback Channels	Set up platforms for student feedback on preparedness activities.	Months 4-12	Online survey tools	Volume of input collected and response rates.
	Annual Program Review	Conduct annual reviews of initiatives, incorporating feedback for improvement.	Annually	Review templates, data analysis tools	Improvements made based on review findings.

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APPENDIX I - Grammarly Report and Turnitin Results

grammarly

DISASTER-AWARENESS-AND-PREPAREDNESS-AMONG-ALLIED-HEALTH-STUDENTS-BASIS-FOR-PROPOSED-PROGRAM-ENHANCEMENT-3

by Sola Sola

General metrics

75,021	10,449	798	41 min 47 sec	1 hr 20 min
characters	words	sentences	reading time	speaking time

Score

90

This text scores better than 90% of all texts checked by Grammarly

Writing Issues

338	84	254
Issues left	Critical	Advanced

CURRICULUM VITAE

PERSONAL DATA

Name	:	Daphne Julia M. Doria
Date of Birth	:	July 9, 2002
Place of Birth	:	Maranding, Lala, Lanao Del Norte
Home Address	:	Purok Rambutan, Fernan 1 Subdivision, Maranding, Lala, Lanao Del Norte

EDUCATIONAL BACKGROUND

Elementary	:	Maranding Central Elementary School Maranding, Lala, Lanao Del Norte
Secondary	:	Lala National High School Maranding, Lala, Lanao Del Norte
Senior High School	:	Lala National High School Maranding, Lala,Lanao Del Norte
College	:	Cagayan De Oro College Max Suniel Carmen, Cagayan De Oro City
	:	Misamis University H.T. Feliciano St., Ozamis City

CURRICULUM VITAE

PERSONAL DATA

Name	:	Jari V. Guangco
Date of Birth	:	April 29, 2003
Place of Birth	:	Ozamis City
Home Address	:	Rosa Vayso, Maningcol, Ozamis City

EDUCATIONAL BACKGROUND

Elementary	:	Ozamis City Central School Tinago, Ozamis City
Secondary	:	Clarin National High School Purok 1, Poblacion 3, Clarin
Senior High School	:	Misamis University H.T. Feliciano St., Ozamis City
College	:	Misamis University H.T. Feliciano St., Ozamis City

CURRICULUM VITAE

PERSONAL DATA

Name	:	Bo Jason U. Anislag
Date of Birth	:	April 27,2002
Place of Birth	:	Ozamis City
Home Address	:	Purok 1,Molicay, Ozamis City

EDUCATIONAL BACKGROUND

Elementary	:	Lighthouse Christian Academy Purok 1,Bañadero, Ozamiz City
Secondary	:	Ozamis City National High School Mayor Bernad Avenue, Lam-an, Ozamiz City
Senior High School	:	Misamis University H.T. Feliciano St., Ozamis City
College	:	Misamis University H.T. Feliciano St., Ozamis City

CURRICULUM VITAE

PERSONAL DATA

Name	:	Arnie G. Banawa II
Date of Birth	:	September 28, 2002
Place of Birth	:	Clarin, Misamis Occidental
Home Address	:	Poblacion 3, Purok 1 Clarin, Misamis Occidental

EDUCATIONAL BACKGROUND

Elementary	:	Clarin Central School Purok 1, Poblacion 3, Clarin, Misamis Occidental
Secondary	:	Clarin Central School Purok 1, Poblacion 3, Clarin, Misamis Occidental
Senior High School	:	Clarin Central School Purok 1, Poblacion 3, Clarin, Misamis Occidental
College	:	Misamis University H.T. Feliciano St., Ozamis City

CURRICULUM VITAE

PERSONAL DATA

Name	:	Thavs T. Berja
Date of Birth	:	March 12, 2002
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