

Ordeals in Combating COVID-19 Pandemic and Acceptability of COVID-19 Vaccine Among Frontliners in Digos City, Davao del Sur

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ABSTRACT

The study primarily focuses on the ordeals in combating COVID-19 pandemic and acceptability of COVID-19 vaccine among frontliners in Digos City, Davao del Sur. The number of respondents was calculated using Stratified Random Sampling and Slovin's formula at 0.05 margin of error, wherein it resulted to one hundred forty (140) individuals. A survey questionnaire prepared by the researcher was the method utilized for gathering the data. The analysis and computation of data was done through employing the Frequency Count, Mean, and Levene's Test and ANOVA, which were the statistical tools of this study. The study's findings revealed that the average mean for the level of ordeals of frontliners in combating COVID-19 pandemic was 3.66 which indicated as high, and for the level of acceptability of COVID-19 vaccine among frontliners, the average mean was 3.36 which indicated as moderate. Therefore, there is no significant difference on the level of ordeals in combating COVID-19 pandemic and the acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile. This concludes that the null hypothesis of this study was accepted.

Index Terms: COVID-19 Pandemic, Frontliners, Ordeals, COVID-19 vaccine

INTRODUCTION

The struggle against the coronavirus disease 2019 or COVID-19 has been experienced by the people all around the world. This pandemic COVID-19 had triggered a worldwide emergency on the aspect of public health, which caused further pressure to numerous countries regarding health programs and services. On March 12, 2020, WHO proclaimed the outbreak of COVID-19 to be a pandemic. The virus was initially discovered in December of the year 2019 from Wuhan, China, which has rapidly dispersed through various countries and had a massive impact on people's lives, creating problems and putting the entire world at risk. Since around June 18, 2020, there are over eight million individuals being infected internationally, including more than 439,000 of fatalities (Hopkins, 2020).

According to Han et al. (2020), this international health crisis has considerable repercussions in terms of frontliners health, welfare, environment, as well as their work effectiveness as they are faced with an unusual circumstance in which they undertake challenging actions and work amid intense pressure as the virus keeps spreading that leads to the increase of people getting infected. This COVID-19 pandemic caught many health systems and frontliners off guard, causing problems in battling against this viral disease.

This pandemic COVID-19 pervasiveness in the Philippines highlighted several flaws in the government's action, their system in terms of healthcare, and the country's overall crisis preparedness. During its first month of nationwide lockdown due to COVID-19, it impacted a significant number of frontliners that were constantly performing their work. The armed forces, police departments, and the local government units that include the officials and functionaries of the barangay, which are also considered frontliners, are responsible for the implementation of community lockdown as well as imposing of protective equipments and social distancing as per accordance with the order of President Duterte to ensure that minimum public health

standards are met. However, their problem with it is that there are individuals who disobey these health protocols, resulting in uncertainty on the safety of everyone (Recuenco, 2020). Caliwan (2020) states that front liners are also in charge of tracing and assisting infected people, inspecting quarantine passes, managing checkpoints, and patrolling during curfew to mitigate the threat and increase COVID-19 cases. Due to the exposure of these front liners in public places for doing their duties, they have no exemption from COVID-19. Many of them have the possibility of acquiring coronavirus disease (Ismael, 2020).

In Digos City, Davao del Sur, there was a continuous increase on the cases of COVID-19 that becomes a severe challenge to the frontliners, including their concerns for those protocol violators that makes it more difficult for them to manage the situation on preventing further spread of coronavirus disease and ensuring that minimum public health standards are followed for combating this virus. Moreover, the city is placed under strict policies intended for avoiding its escalation of cases, whereby barangay officials and tanods or front-liners were instructed by the City Mayor Josef Fortich Cagas to issue citation tickets to the violators of minimum public health standards, intended for people to adhere with the health protocols (Trozo, 2021). Through this study, the researcher discovered the ordeals in combating COVID-19 pandemic and acceptability of COVID-19 vaccine among frontliners in Digos City, Davao del Sur.

Objective of the Study

This study aimed to determine the ordeals in combating COVID-19 pandemic and acceptability of COVID-19 vaccine among frontliners in Digos City, Davao del Sur.

Specifically, the study sought to:

1. Determine the demographic profile of frontliners in Digos City in terms of:
 - Position
 - Age
 - Gender
 - Civil Status
 - Educational Attainment
2. Determine the level of ordeals of frontliners in combating COVID-19 pandemic in terms of:
 - Lack of Pandemic Preparedness
 - Shortage of Personal Protective Equipment (PPE)
 - Anxiety and Fear Amongst Professionals
 - Challenges in Enforcing Social Distancing
 - Challenges in Fulfilling Social Shielding Responsibility
 - Anxiety and Fear Amongst Residents and Service Users
 - Delay in Testing
 - Evolving PPE Guidance
 - Shortage of Staff
3. Determine the level of acceptability of COVID-19 vaccine among frontliners.
4. Determine if there is a significant difference on the level of ordeals in combating COVID-19 pandemic among frontliners in Digos City when grouped according to their profile.
5. Determine if there is a significant difference on the level of acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile.

Significance of the Study

This study was about frontliners' ordeals upon performing their duties in fighting against the COVID-19 pandemic and their acceptability when it comes to the vaccine for COVID-19. The study's outcome will be beneficial for City Government of Digos, Davao del Sur. This will provide a quick look-up guide to have a

refreshing view of how the government addresses the issues and concerns of the frontliners from the previous and in the present. The Inter-Agency Task Force (IATF) will become more focused on responding to the circumstances of the frontliners regarding the emerging infectious diseases in the city. This may assist the IATF in organizing, assessing, monitoring, controlling, and preventing virus pervasiveness.

Additionally, this can help City Health Office of Digos, Davao del Sur, give a clear perspective and overview to the City Health Office of Digos to provide equitable access to adequate healthcare services at all levels. The Barangay Local Government Units (BLGU) will be able to provide the health care needs with empathy and courage while helping to address all the real-life battles of the frontliners in line with the correct information being supplied from this study. Moreover, this will provide the community of Digos City, Davao del Sur, with an essential perception and knowledge about the difficulties experienced by the frontliners since most people in the community are unaware of this aspect. Consequently, this would alter the way people treat the frontliners and instead help them cope and overcome their challenges. Lastly, future researchers, wherein those who conducted research with relevant studies, can use this to gather additional information and serve as their source of reference to support their research study.

Scope and Limitation

The scope of this study was focused on determining the ordeals in combating COVID-19 pandemic and acceptability of COVID-19 vaccine among frontliners in Digos City, Davao del Sur. The respondents of the selected barangays in Digos City, such as Barangay Zone I, Barangay Zone II, and Barangay Zone III, were the study's primary source of information to accomplish the accurate outcome.

The limitation of this study was only focused on the barangay officials and appointed functionaries with the exclusion criteria from the residents of the said barangays. The survey was conducted in Barangay Zone I, Barangay Zone II, and Barangay Zone III of Digos City and began in March 2022 until May 2022. An adapted questionnaire was the instrument used by the researcher for this study.

REVIEW OF RELATED LITERATURE

Lack of Pandemic Preparedness

The outbreak of contagious virus or COVID-19 made severe damage to the systems of health worldwide, resulting in the accumulation of diverse narratives from those front liners fighting against this widespread disease. Those frontliners came not just from the healthcare specialties but also from other areas that assisted in protecting and mitigating the public from the dangers of an infectious virus (Favini, 2020). Since the outbreak of COVID-19 that became prevalent in various countries, some data have converged for understanding the disease's transmission and impact. While acknowledging the virus's propagation and risk factors is crucial, it is also necessary to investigate and perceive the experiences and status of those frontliners affected by the situation (Xiong & Peng, 2020). According to World Health Organization (2020), there are growing numbers of frontline workers worldwide that are becoming involved in the crisis of COVID-19. Their presence in this period of the pandemic is undeniable since these front liners are serving an essential role and providing notable contributions while facing severe challenges as the COVID-19 cases grow that necessitate greater public awareness regarding what the front liners are going through.

The fundamental aspect of controlling and managing diseases in different areas is pandemic preparedness. However, in the sector of social and health care, their preparedness in such emergencies or situations are inadequate due mainly on the absence of the guidelines, protocols, and policies for managing and controlling the pandemic. Since frontliners were unable to determine the scope of the risk brought by this pandemic COVID-19, it led to concern and uneasiness to them. Additionally, it caused complexity for frontliners, which decreases their productivity and cohesion at work. In order to ensure the protection and

safety of the people as well as the frontliners, the sector of social and health care needs adequate plans and initiatives to be able to manage and provide immediate action in times of pandemic. When dealing with a pandemic like COVID-19, such policies can guide frontliners (Aronson & Smith, 2011).

Shortage of Personal Protective Equipment (PPE)

The lack of resources to carry out their duties is one of the concerns of front liners for their health, and the inadequacy of protection for their safety to manage their changing responsibilities are challenges that the front liners experience as it puts them at risk (Banks et al. 2020).

As for Salsabila (2020), the front liners in the country are bearing the burden of the government's lack of strategic and substantial support. Constant requests for sufficient PPE for the protection of health and supply of resources have gone unheeded. Therefore, in battling an infectious disease such as COVID-19, personal protective equipment was among the most critical necessities for the frontliners. Working lacking proper protective equipment puts the front liners' well-being, as well as the safety of their families and co-workers, in jeopardy, mainly when the disease is still shrouded in uncertainty, putting them in increasingly unexpected scenarios (Cook, 2020).

According to Santic et al. (2020), it was reported that frontliners from various social and health care environments are at risk for infection because of a considerable PPE deficiency in their work areas. Among their problems is undoubtedly the inadequacy of equipment for protection as it brought the threat to the lives of social and health care frontliners. Furthermore, this viral infection is considered as risk for people receiving treatment and visitors because of PPE inadequacy for frontliners. A specified private protective equipment procurement policy should be implemented by all institutions providing social and health care. This will guarantee a sufficient supply of personal protective equipment available so that everyone is protected. The central government should implement more extraordinary guidelines or policies on personal protective equipment, which will be regarded policy of the nation towards the institutions of social and health care. In a COVID-19 pandemic, this will ensure the timely provision on the equipments needed for safety and health protection (Grasselli et al. 2020).

Anxiety and Fear Amongst Professionals

The study of DeJean et al. (2013) specified that front-liners had been chiefly enveloped with anxiety and fear when faced with a new and challenging to be treated pandemic. These professionals in social services and health care as well as frontliners were frightened or became worried due to the increasing number of people infected with COVID-19, considering that it was contagious, wherein plenty of them had died, and the capability to do their duties might also be seriously impacted by it. Therefore, the working areas of these sectors of social services and health care must provide an actual and effective assistance modalities on combating the fear and anxiety of frontliners in such situations (Knapp et al. 2011).

Those health and social care front-liners who assist in this situation of COVID-19 are much more prone to have psychological wellbeing problems (Liu et al. 2020). Blake et al. (2020) added that numerous front liners are also more likely to experience mental and emotional suffering, caused by several aspects such as being away or separated from respective families, fatigue from a lot of significant workload, lack with essential equipments for safety, distress, and uncertainty on the matter of making risky life choices or decision. Thus, when it comes to high-risk places where the frontliners are assigned, they have opted to self-isolate to prevent spreading the virus to others. Physical harassment, assault, and even death threats against front liners have also been reported worldwide due to public misunderstanding and fear of people. These factors can contribute to anxiety, frustration, fatigue, or even post-traumatic stress disorder (PTSD) over time. Hence, it is essential to keep an eye on the front liner's well-being (Ayanian, 2020).

Additionally, those front-liners performing their duties during this COVID-19 pandemic undergo intense physical discomfort caused by excessive working hours, and it is suggested that the government should

provide adequate risk allowance to compensate front-liners for the additional risks they carry and to motivate them to keep on working (Chersich et al. 2020).

The other sources of the frontline's concern are the lack of adequate current information and communication and worries over COVID-19 exposure at work, which could be transmitted to their family members when they get home. There was also apprehension regarding if the government would sustain and provide the necessities for them as well their respective families, in case the frontliners were to be tested positive with the viral disease. Furthermore, the frontliners' confidence towards themselves and the healthcare delivery system is affected as a result of their worry and anxiety, especially when it comes to maintaining their calmness and reassuring public assistance (Shanafelt, 2020).

The majority of the front liners are isolated from their family, which causes an emotional and physical impact on them, apart from their struggle with long working hours and exhausting shifts. Amid this pandemic, anxiety, despair, avoidance, insomnia, and frustration will cause problems in healthcare provision, which adds up to rising morbidity and ill health. This situation where COVID-19 became pervasive has inflicted mental health-related challenges to frontliners in ways that go beyond affecting their decision-making capacity, cognition, attentiveness, and disease comprehension. Therefore, it has lengthy influence over frontliners' general welfare (Kang et al. 2020).

Challenges in Enforcing Social Distancing

An evident reason why front liners are immediately infected with the virus is that they will interact to the public, especially with those people which were COVID-19 positive. These frontliners face the disturbing fact that they are typically exposed to the life-threatening virus and are at risk of infecting their own families, as well as their co-workers (Santarone et al. 2020).

In this infectious pandemic, social distancing is crucial for minimizing its widespread and public's exposure to viral disease (Fong et al. 2020). It is challenging on them to enforce distance to be apart from another person, and this measure is imperative to do so mainly on places that is crowded or within confined settings like establishments to avoid unwanted infection. Being ready and prepared at these certain situations becomes even more required if dealing on individuals who were confirmed to be inflicted with virus. Additionally, this is critical to raise the proportion of front liners for people in times of viral outbreak in order to assist civilians keep their distance from others and avoid cross-infection, as well as guaranteeing that the public will be accommodated with their service (Krumer-Nevo & Benjamin, 2010).

Challenges of Fulfilling Social Shielding Responsibility

The front liners are the ones who address several of the most critical concerns pertaining on contagious disease which is COVID-19. However, there was continuous update on overall confirmed cases and fatalities throughout the country, and the challenges that health and social frontliners experienced during the pandemic were less well-known. Since they are in contact with various people while conducting their duties, health and front social liners are particularly vulnerable to the coronavirus disease. As these front liners perform public services, they become susceptible with such possibility on developing this virus infection (Sim, 2020).

There were instances when frontliners had to stay at work for weeks to safeguard the people they cared for after getting diagnosed with COVID-19. As shifting on workplace and home might raise the possibilities on obtaining virus, it is essential to recognize that frontliners carry out a responsibility such as social protection or shielding towards people, including the members within their respective households. This appears that the institutions of social and health care must establish explicit policies in place for administering this concept on shielding and protecting the society with the absence of putting the burden to frontliners (Yu et al. 2018).

Anxiety and Fear Amongst Residents and Service Users

It was acknowledged that the people they care for, the residents and service users, were experiencing anxiety and fear. Those experiences were impacted due to the lack of treatment and explicit tactics to safeguard them against COVID-19. Since COVID-19 deemed to be a novel disease to people which is complicated to resolve, numerous people had many inquiries with regards to it, and even those health and social care frontliners had difficulty on responding. Therefore, it is significant for the institutions of social and health care to provide all frontliners the adequate expertise and capabilities for helping the people that being managed by frontliners amid pandemic (Ho et al. 2020).

Delay in Testing

A key to easing surging COVID-19 cases is an immediate and timely operation of tracing people as well as conducting testing within every area for alleviating severe cases and rates (McMichael et al. 2020). Jernigan et al. (2011) stated undergoing tests and diagnosis are vital on forestalling the virus pervasiveness, and this will serve as an intervention for this kind health emergency or when there is pandemic potential. However, the constantly evolving pandemic posed several hurdles to the rapid health and social care frontliners. It was reported that the frontliners were unable to access COVID-19 diagnostic testing when they needed it, and their testing took longer than expected that makes it more challenging when determining if they had COVID-19 or not, which made them self-isolate that leads to a shortage of staff. Burke et al. (2020) asserted that challenges related to testing delays are test accuracy and reliability, as well as obtaining the correct equipment supply and logistics. Despite the likelihood that some frontliners may test or be confirmed of not being infected, lacking with certainty about the cause of the disease or symptoms influences management decisions (Binnicker, 2020).

Evolving PPE Guidance

According to Patel et al. (2010), the published guidance on personal protective equipment (PPE) is a dynamic document during a pandemic. Kraemer (2013) stated that a living document's principle may be revised if it contains systematic, credible, as well as legitimate information for amending particular part of the guidance, while paper stays unchanged as for the remainder. It is necessary for them on keeping up every direction to figure out what applies for frontliners circumstances or safety evaluation. Frontliners are put in uncertainty regarding their approach effectiveness on preventing virus because of constantly evolving instructions in handling this pandemic. Furthermore, it became necessary to have adequate use as well as acquisition with stuffs intended for protection or safety. Transparency of these aspects may contribute substantially on various institutions of government sector or frontliners wherein it promotes resilience and steadiness. Prior to probable widespread viral infection, objectives including directions must explicit in addressing the possibility for organization's facilities might perhaps in risky place. The frontliners may gain expertise through instruction in infection prevention and management related with virus breakout (Poon et al. 2020).

Shortage of Staff

This outbreak of virus had an impact on rising absenteeism, worsening the tasks and pressure of frontliners, which leads into deficiencies of workforces. This frontliners shortage is caused by the unavailability of frontliners who prefer to self-isolate when they are feeling ill, even though they are unsure if it is COVID-19 or not. It is noteworthy that the pandemic aggravated the situation, and the current frontliners shortage is severe since it is hindering the adequate provision of public health services. Necessity on immediate screening tests and monitoring for potential infected individuals is fundamental towards preventing frontliners shortages within government services amid perilous situations (Beech et al. 2019).

This shortage of frontliners in the Philippines is becoming severe as the pandemic greatly impacted the country’s health system. The long-standing issue of low worker pay drives more front liners to seek employment abroad, wherein salary is much higher. The government of the nation has prohibited the frontline workers on going overseas to help battle the pandemic in the country. This was the government’s strategy to avoid additional shortages of frontliners, but it soon generated criticism and was eventually altered to permit those with existing contracts overseas to depart. However, aside from the growing issues that frontline confront regarding their welfare, the delay in providing their assistance has added to their increasing list of concerns. The country’s survival from this outbreak tremendously depends with perseverance of Philippine systems and frontliners that combat this virus (Ramos, 2020).

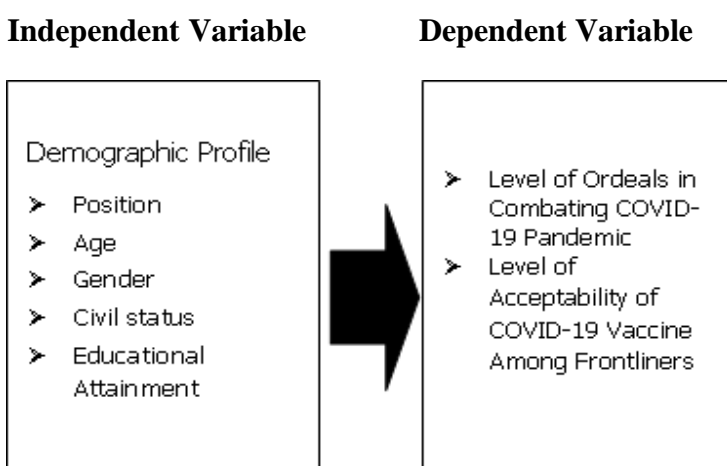
Acceptability of COVID-19 Vaccine Among Frontliners

According to Lurie et al. (2020), acknowledging precautionary measures might unlikely sufficient for suppressing this outbreak by virus. Therefore, creating then implementing such immunization or vaccination considered as one of initiative strategies on health aspects as a great potential for halting the development of virus transmission. The quantity of immunizations that are accepted and received, nevertheless, determines how well immunization programs work. Gaining trust of the people with regards to provision of vaccine for this crisis in virus pandemic is indeed primary impediment. If there is no such confidence, the vaccine’s hesitancy remains, which leads to prolonged pandemic resolution (Rhodes et al. 2020).

The healthcare workers or front liners have an essential role in vaccination success. It has been found that their perception and preferences regarding vaccinations influence their intentions for vaccine acceptability, as well as their vaccine recommendation (Leask et al. 2012). Asma et al. (2016) claimed that based on some data and reports, some frontliners are unwilling and apprehensive to get vaccinations. The level of frontliners’ vaccination reluctance significantly influences aversion or disinclination of citizens on receiving it. Several factors were found as to why it is a challenge for them to accept vaccination, and those were such as small apparent advantages and unsure of being immune from virus. They have concern regarding the vaccine’s potential consequences as well as its effectiveness and reliability, and other aspects that may cause a negative impact on themselves. Furthermore, it has been found that healthcare workers or frontliners that have unfavorable perceptions regarding vaccines reflect similar negative views and infrequently recommend vaccination to their patients (Mereckiene, 2014).

Figure 1. Research Paradigm

Figure 1 shows the relationship between the independent and dependent variables of the study “ORDEALS IN COMBATING COVID-19 PANDEMIC AND ACCEPTABILITY OF COVID-19 VACCINE AMONG FRONTLINERS IN DIGOS CITY, DAVAO DEL SUR”



Hypothesis

The null hypothesis will be tested at 0.05 level of significance.

Ho1: There is no significant difference on the level of ordeals in combating COVID-19 pandemic among frontliners in Digos City when grouped according to their profile.

Ho2: There is no significant difference on the level of acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile.

METHODOLOGY

Research Locale

The City of Digos consists of 26 barangays and serves as the provincial capital of Davao del Sur. It has a population of 188,376, which embodies 27.68% of Davao del Sur province's total population based on the 2020 census. Digos City has an estimated 19.2 meters (63.0 feet) above sea level. This study was conducted in Barangays Zone I, Zone II, and Zone III, which were formerly known as Poblacion in the City of Digos, Davao del Sur, Philippines. According to the 2020 census, Barangay Zone I has a population of 16,942, which accounts for 8.99 percent of Digos City's total population. Barangay Zone II has a population of 7,565, which accounts for 4.02 percent of Digos City's total population. Barangay Zone III has a population of 18,068, which accounts for 9.59 percent of Digos City's total population. From the 2015 Census, Barangay Zone I had a household population of 14,920 people that is divided into 3,637 homes with an average of 4.10 people per household. Barangay Zone II had a household population of 8,381 people, which is divided into 2,335 homes with an average of 3.59 people per household. Barangay Zone III had a household population of 17,824 people, which is divided into 4,756 homes with an average of 3.75 people per household.

Research Design

This study utilized Descriptive – Comparative research design to find out and describe the ordeals in combating COVID-19 pandemic and acceptability of COVID-19 vaccine among frontliners in Digos City, Davao del Sur. It describes the fundamental features of the study as well as the data. This utilized a survey research method for the data collection wherein the researcher conducted and provided printed survey questionnaires to respondents. The collected data from the survey was then statistically analyzed and interpreted to obtain significant research findings.

Respondents of the Study

The main respondents of this study were those barangay officials and appointed functionaries within the respective area of Barangay Zone I, Barangay Zone II, and Barangay Zone III, Digos City, Davao del Sur. These includes the barangay captain, barangay councilors, and appointed functionaries of the barangay like the barangay secretary, barangay treasurer, barangay health workers, and barangay tanods or CVOs who were mentally able to participate actively and willing to respond to the needs of the researcher's study.

Sampling Technique

In order to determine the participants or respondents for this study, the researcher used stratified random sampling to identify the samples of the barangay officials and appointed functionaries from the Barangay Zone I, Barangay Zone II, and Barangay Zone III of Digos City, Davao del Sur. This assists in specifying the sample that represents the group in the study's participant population. The researcher also used Slovin's formula to get the sample size which was 140 from the population size of 217. According to the study of

Hayes (2021), the researcher can acquire the number of participants, which most accurately indicates overall quantity of respondents by using this stratified random sampling for the study.

Formula and Result:

$$n = \frac{N}{1 + (Ne^2)}$$

$$n = \frac{217}{1 + (217) (0.05)^2}$$

$$n = \frac{217}{1 + (217) (0.0025)}$$

$$n = \frac{217}{1 + 0.5425}$$

$$n = \frac{217}{1.5425}$$

$$n = 140.6807131 \text{ or } \underline{140}$$

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Where:

n = Sample Size

N = Population Size

e = Margin of Error

(5% or 0.05)

Population Size (N) = 217

Sample Size (n) = 140

Table 1. Population and Sample Size Distribution for the Respondents at 0.05 Slovin’s Margin of Error

Barangay	Population Size	Sample Size
Zone I	68	44
Zone II	59	38
Zone III	90	58
Total	217	140

Research Instrument

The researcher used a survey questionnaire that was distributed to the respondents upon gathering the data. The survey questionnaire was composed of two (2) parts: Part I is the Demographic Profile, while Part II determines the Level of Ordeals of Frontliners in Combating COVID-19 Pandemic, in terms of Lack of Pandemic Preparedness, Shortage of Personal Protective Equipment (PPE), Anxiety and Fear Amongst Professionals, Challenges in Enforcing Social Distancing, Challenges in Fulfilling Social Shielding Responsibility, Anxiety and Fear Amongst Residents and Service Users, Delay in Testing, Evolving PPE Guidance, Shortage of Staff, and the Level of Acceptability of COVID-19 Vaccine Among Frontliners. The questionnaire was adapted from the study “Exploring the Challenges Faced by Frontline Workers in Health and Social Care Amid the COVID-19 Pandemic: Experiences of Frontline Workers in the English Midlands region, UK” which was published on July 17, 2020, by Mathew Nyashanu, Farai Pfende, and Mandu Ekpenyong, and “Acceptability of a COVID-19 Vaccine Among Healthcare Workers in the Kingdom of Saudi Arabia” that was published on March 01, 2021, by Ameerah M. N. Qattan, Noor Alshareef, Omar Alsharqi, Naseem Al Rahaleh, Gowokani Chijere Chirwa, and Mohammed Khaled Al-Hanawi. Furthermore, this applied Likert Scale in order to ascertain the degree of respondent’s response on the topic, as well as to know the quantitative data of the study. It contains numerical value along with its level of description, associated with interpretation that best aligns with the respondents’ view of choice. It was used as a basis to measure the results, and all answers have been calculated after carrying out the survey or assessment for accurate discussions and explanations of the data results.

Table 2. Range of Mean for Ordeals in Combating COVID-19 Pandemic and Acceptability of COVID-19 Vaccine Among Frontliners in Digos City, Davao Del Sur

Range of Mean	Numerical Value	Descriptive Level	Interpretation
4.20 - 5.0	5	Very High	This indicates that the respondents were very challenged with the statement.
3.40 - 4.19	4	High	This indicates that the respondents were challenged with the statement.
2.60 - 3.39	3	Moderate	This indicates that the respondents were moderately challenged with the statement.
1.80 - 2.59	2	Low	This indicates that the respondents were not challenged with the statement.
1.00 - 1.79	1	Very Low	This indicates that the respondents were not very challenged with the statement.

Data Gathered

The barangay officials and appointed functionaries were the main respondents of this study and the primary source of information. The data gathered includes the determination of the Demographic Profile of the Frontliners, the Level of Ordeals of Frontliners in Combating COVID-19 Pandemic in terms of Lack of Pandemic Preparedness, Shortage of Personal Protective Equipment (PPE), Anxiety and Fear Amongst Professionals, Challenges in Enforcing Social Distancing, Challenges in Fulfilling Social Shielding Responsibility, Anxiety and Fear Amongst Residents and Service Users, Delay in Testing, Evolving PPE Guidance, Shortage of Staff, and the Level of Acceptability of COVID-19 Vaccine Among Frontliners.

Data Gathering Procedure

The data gathered in the study include the demographic profile of the barangay officials and appointed functionaries, together with the letter for the respondents and the survey questionnaire. All necessary data was gathered through the use of prepared survey questionnaires with the following guidelines:

1. **Before the Conduct:** The researcher prepared the barangay survey letter to the barangay captain as a means of having permission to conduct a survey, accomplished by the researcher intended for the actual conduct of the study noted by the program head and the thesis adviser.
2. **During the Conduct:** The researcher distributed the survey questionnaire to the respondents along with the consent, and the signature of the respondents was required for identification and confirmation after answering the survey questionnaire. During the conduction of the survey for the study, the researcher observed and followed the minimum public health standards.
3. **After the Conduct:** The results of the survey were analyzed, evaluated, and interpreted by the researcher with assistance from the adviser and statistician upon the computation of the data being gathered.

RESULTS AND DISCUSSION

Demographic Profile of Frontliners in Digos City

Table 3. Demographic Profile of Frontliners in Digos City. May 2022

Profile	Frequency	%
Position		
Barangay Captain	3	2.14
Barangay Secretary	3	2.14
Barangay Treasurer	3	2.14
Barangay Councilors	10	7.14
Barangay Tanods/CVOs	57	40.71
Barangay Health Workers	64	45.71

Age

24 – 35 Years Old	20	14.30
36 – 47 Years Old	50	35.70
48 – 59 Years Old	47	33.60
60 – 75 Years Old	23	16.40

Gender

Male	69	49.29
Female	70	50
LGBTQIA+	1	0.71

Civil Status

Single	25	17.86
Married	99	70.71
Separated	2	1.43
Widowed	14	10

Educational Attainment

High School Level	21	15
High School Graduate	39	27.86
College Level	52	37.14
College Graduate	28	20

Total	140	100
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Table 3 shows the demographic profile of frontliners in Digos City wherein based on the result of the data, it revealed that the respondents are 64 Barangay Health Workers, 57 Barangay Tanods, 10 Barangay Councilors, and 3 Barangay Captain, Secretary, and Treasurer. The respondent’s age range that took part during the conduct of study’s survey was from 24 to 75 years old, which denotes that the frontliners differed on how old they were, wherein there were adults, middle age adults, and senior citizens. Many respondents are around 36 – 47 years old, which garnered 35.70% in terms of age.

Out of 140 respondents, half of it was females having 70 participants (50%), while the males had 69 participants (49.29%), and there was 1 participant (0.71%) that belonged to LGBTQIA+. As observed from the result, there was 1 participant difference between female and male, and the reason why half of the respondents were women is that there were many participants from the Barangay Health Workers where all of them were women, including those barangay treasurers as well as women who are barangay tanods/CVOs. It was also found that only 1 of the respondent was part of the LGBTQIA+, which means that individuals are not yet widely open as to what is their actual gender identity. Based on the Philippine

Statistics Authority (2018), the employment rate for females was 57.1%, while 34.9% are for males. There are 3.4 million females employed as frontline healthcare workers compared to 2.6 million males.

The result showed that most of them are married (70.71%), while 25 are single (17.86%), 14 are widowed (10%), and 2 of them are separated (1.43%). Married respondents evidently had the large portion who cooperated and been involved since they were the ones that actually have occupations to sustain their families' necessities, compared with those single where some of them have work to earn for themselves. Deligero & Laguador (2014) claimed that those who are married have higher number in employment as opposed on others. This is for the reason of greater adult job duties and obligations, and having to support their families. Aside from that, separated or separation had the lowest findings in the result as it is not so common in the Philippines, and most Filipinos values marriage. Separation on married couples is unusual as they usually part through death or the complicated legal separation or annulment process, considering that there is also an absence of legislation on divorce to terminate their marriage in the country (Santos, 2015).

With regards to educational attainment, the respondents who reached the college level consist of 52 individuals (37.14%), 28 of them are college graduates (20%), 39 high school graduates (27.86%), and there are 21 participants that are high school level (15%). It was found that most of the respondent's educational attainments were college level, as shown in the data result. The researcher observed that a large portion of participants who were college-level was from the Barangay Health Workers, and the Barangay Captain, Secretary, Treasurer, and Councilors are usually college graduates. This means that those who were college graduates or had reached college level were mostly the ones being employed for these job positions or handled such duties and responsibilities in the said barangays. On the other hand, a lot of high school graduates and high school level are from the participants of the barangay tanods, indicating that they can carry out this job no matter what level of education they have attained. In the study of Santos (2011), a barangay worker's educational level has a considerable impact on work reliability and performance, wherein the higher the level of education a barangay worker has attained, the more effective they are with their performance in their job role. Therefore, their educational background is typically taken into consideration as one of the qualifications since the competency of the barangay workers partly relies on their knowledge regarding their responsibilities and functions.

Level of Ordeals of Frontliners in Combating COVID-19 Pandemic

Presented in Table 4 were the results on level of ordeals of frontliners in combating COVID-19 pandemic. Based on the results, respondents on experiencing Challenges in Enforcing Social Distancing (4.35) and in Fulfilling Social Shielding Responsibility (4.32) were interpreted as very high on the descriptive level. This implies that these are the factors where the frontliners or barangay officials and appointed functionaries Statistics Authority (2018), the employment rate for females was 57.1%, while 34.9% are for males. There are 3.4 million females employed as frontline healthcare workers compared to 2.6 million males.

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The result also shows that respondents on the Lack of Pandemic Preparedness (3.69), Shortage of Personal Protective Equipment (PPE) (3.48), Anxiety and Fear amongst professionals (3.80), Anxiety and Fear Amongst Residents and Service Users (3.67) and Shortage of staff (3.43) as ordeals of frontliners in combating COVID-19 were interpreted as high on the descriptive level. These challenges encountered by frontliners had a severe impact on their physical, emotional, as well as financial aspects. Inadequacy preparedness for pandemic as well as deficiency of safety equipments are among the issues that have contribute to their problems since the outbreak of COVID-19, as they do not have enough preparation on what they ought to do or appropriate action to carry out, as well as regarding their protection which has a possibility on jeopardizing their health. In the study of Eftekhari et al. (2020), due to their lack of pandemic preparedness, where they do not have enough expertise in responding to the dreaded virus, frontliners are stressed out and encountering a number of issues as a result of the COVID-19 pandemic. They also encountered challenges with inadequacies of the personal protective equipment along with other necessities for the standard precautions (Goes et al. 2020).

As for Nyashanu et al. (2020), majority with frontliners that provide care and services to people were found to be experiencing anxiety and fear as a result of the limited amount of time they had to prepare to prevent the escalation of COVID-19. It was also perceptible that the anxieties that the frontliners feel affect their emotional and mental health, which also influences how they perform their duties and responsibilities. With regards to the shortage of staff, the frontliners are overworked, leading them to burnout due to many roles they have to fulfill, and this is the reason they experience sickness and stress, which is also a problem in performing their work. In addition, managing the distance as well as shielding were hard to implement during viral outbreak owing to a staffing deficit, which resulted in people being infected with the virus. There is a severe shortage of staff as a result of being quarantined, their test were prolonged, and other factors wherein the staff that showed up at work was exhausted and overburdened, which has undesirable impact to their psychological or on overall welfare (Holmes et al. 2020).

It revealed that respondents are moderate in terms of Delay of testing (3.07) and Evolving PPE Guidance (3.11) as presented with their mean score. The delays in testing are one of the concerns of public health officials, including frontliners, as it would be a hindrance to providing immediate measures on someone who is possibly infected with the virus to avoid its further spread. It is added that the lack of PPE guidance for frontline workers is a challenge to protecting the people of the community (Ducharme, 2020). Working without specific PPE guidance is challenging as constantly changing guidance brings uncertainty to operational procedures. Such a situation is associated with the constant evolving of guidelines, including negative impacts on the health of frontliners because of inconsistent protocols for pandemic management and prevention (Bryson, 2018). This means that frontliners cannot carry out their duties well if they do not have enough knowledge and appropriate guidance with the evolving PPE.

The study has an overall result of 3.66, where respondents with the challenges being indicated as based on their experiences in combating the COVID-19 pandemic were interpreted as high on the descriptive level. Therefore, healthcare providers or front liners are unprepared for this pandemic and are dealing with much uncertainty. As a result, they struggle to cope effectively since there is a deficiency of adequate resources, equipment, and workforce, as well as concerns about the value of work (Liu et al. 2020).

Table 4. Level of Ordeals of Frontliners in Combating COVID-19 Pandemic. May 2022.

Level of Ordeals in Combating COVID-19 Pandemic	Mean	Description
1. Lack of Pandemic Preparedness	3.69	High
2. Shortage of Personal Protective Equipment (PPE)	3.48	High
3. Anxiety and Fear Amongst Professionals	3.80	High
4. Challenges in Enforcing Social Distancing	4.35	Very High
5. Challenges in Fulfilling Social Shielding Responsibility	4.32	Very High
6. Anxiety and Fear Amongst Residents and Service Users	3.67	High
7. Delay in Testing	3.07	Moderate
8. Evolving PPE Guidance	3.11	Moderate
9. Shortage of Staff	3.43	High
Average	3.66	High

Level of Acceptability of COVID-19 Vaccine Among Frontliners

Presented in Table 5 were the results on level of acceptability of COVID-19 vaccine among frontliners. The participants on the safety and efficacy concern (4.40) of the vaccine was interpreted as very high on the descriptive level, implying that this is the primary concern of the respondents in terms of accepting the vaccine for COVID-19 as they are unsure about its efficiency against the virus. On the other hand, respondents on the Fears of adverse effect (4.17), the speed of making the vaccine (3.63), and short duration of clinical trials (3.80) were interpreted as high on the descriptive level. Bish et al. (2011) discovered that the most significant predictors of immunization refusal appeared to be their worries regarding vaccine's efficacy if it is reliable, safe, or effective, as well as their fear of adverse side effects. Frontliners have also pointed to the rapid period of vaccine formulation and trials as a factor in the lack of vaccination intention. Despite acknowledging that approval came after careful consideration of all scientific evidence confirming vaccine reliability, some uncertainties still exist. While there is a necessity to develop efficient outreach strategies to address worries about vaccination safety and efficacy, particularly among front liners, they must be supplemented by efforts to foster trust and ensure transparency in the vaccine approval process in order to instill confidence and increase vaccine acceptance (MOH, 2020).

The frontliners perceptions and beliefs wherein scientists and authorities exploited people for scientific experiments, together with the immunization's safety as well as efficacy cannot also be assured, hampered people's willingness for getting vaccinated. Their fears towards the vaccine prevail as it might have negative consequences to them. In order to address the skepticism and uncertainty of the general public, including the frontliners, governments in countries that has poor vaccine compliance must commence promoting and strengthening vaccination campaigns (Khan et al. 2021).

There are two (2) items out of eight (8) where the result of their response was moderate, and those items are the personal desire not to be vaccinated (3.24), and I feel that masks and sanitizers are sufficient for protection (3.25). With the result of their response, it indicates that front liners or healthcare workers are not entirely sure if they want to be vaccinated, as they are considering various factors such as the vaccination's safety, effectivity, consequences on taking it, and tests that the vaccine is subjected. In the case of masks and sanitizers, it depends on the situation of respondents whether it is sufficient for them as protection against the virus, which is why it is neutral in response. According to Fleming-Dutra et al. (2022), the hesitancy of accepting the vaccine for COVID-19 became the downright rejection to being vaccinated.

In the statement "I think the vaccine is a plot" (2.56) and "I do not believe in the existence of COVID-19" (1.86), the results are low, which are affected by various unsubstantiated rumors which have emerged and have a detrimental impact on conducting immunization, and such notions constitute major factor over accessibility of COVID-19 vaccine. Even though the beliefs in conspiracy theory have been embedded in their distrust towards the government and its institutions in the accumulation of vaccines, they had an integral function in engaging people, boosting their confidence in vaccine initiatives, and interacting the reliable information (Jensen, 2021). Thus, trust in the vaccine against COVID-19 concerning with provision of amenities really are essential on people's willingness to accept or be vaccinated (Palamenghi et al. 2020).

Generally, the average mean score is 3.36, interpreted that they are moderate in the challenges in acceptability of COVID-19 vaccine. These front liners pay substantial attention to information concerning anything that could affect their health prior to making decisions. Therefore, they carefully consider the information before making decisions. This offers conclusive data which could help numerous institutions perform the operation of vaccine more effectively. It is essential to comprehend the differences in the perspectives of the frontliners, vaccination preferences, or even concerns which could lead vaccine repudiation of people in order to overcome and address vaccine apprehension (Joshi et al. 2021).

Table 5. Level of Acceptability of COVID-19 Vaccine Among Frontliners. May 2022.

Level of Ordeals in Combating COVID-19 Pandemic	Mean	Description
1. Fear of adverse side effects	4.17	High
2. Safety and efficacy concerns	4.40	Very High
3. The speed of making the vaccine	3.63	High
4. The short duration of clinical trials	3.80	High
5. Personal desire not to be vaccinated	3.24	Moderate
6. I think the vaccine is a plot	2.56	Low
7. I do not believe in the existence of COVID-19	1.86	Low
8. I feel that masks and sanitizers are sufficient for protection	3.25	Moderate
Average	3.36	Moderate

Difference on the Level of Ordeals in Combating COVID-19 Pandemic Among Frontliners in Digos City When Grouped According To Their Profile

Table 6 presented that Position has 0.497 as P-value; Age with 0.345 as P-value; Gender with 0.710 as P-value; Civil Status with 0.325 as P-value; and lastly, Educational Attainment with 0.401 as P-value. The P-value results, as well as its average, which is 0.456 for the significant difference were higher than 0.05 significance level, indicating that the null hypothesis was accepted. Therefore, this implies that there is no significant difference on the level of ordeals in combating COVID-19 pandemic among frontliners in Digos City when grouped according to their profile. It further means that the ordeals mentioned do not vary or have nothing to do with what are the respondent’s position, age, gender, civil status, and educational attainment. Every frontliners differs in their state of life, wherein they have varied coping mechanisms and ways of responding to challenging circumstances and working environments.

Arnetz et al. (2020) found that some frontliners had complications in coping with the unexpected occurrence and challenges brought by the virus outbreak, which led them to be confronted with a series of problems while performing their work. They were also drained and becoming vulnerable in their work area throughout this outbreak crisis, and frontliners faith with government’s administration slowly fades, as they perceived insufficient sources of support for them.

The challenges that the frontliners experienced in dealing with this pandemic are due to numerous factors in relation to the virus that could put them at risk, causing uncertainty about the quality of their performance in preventing virus transmission (Bennett et al. 2020). Gupta & Sahoo (2020) specified that there are numerous healthcare professionals and frontliners with different demographic aspects who suffer from diverse health-related issues and various challenges that arise in times of virus outbreaks. Depending on their health status and challenging experiences, healthcare workers and frontliners needed a specialized set of interventions that may aid them against the virus. They may face other adversities if the pandemic continues to prevail, which means that they will require additional attention to prevent this unforeseen predicament.

In the place where the frontliners worked, coordination and preventive failure among several administrative sectors was prevalent, which led to an unsafe and risky situation. Frontliners throughout the pandemic experienced severe challenging problems. Hence, they applied coping strategies such as having faith in God, being compassionate to one another, and showing uplifting interactions with a peer group to a certain point to overcome the difficulties encountered (Liu et al. 2020). Their experiences in battling with life-threatening virus diseases taught them to handle and overcome challenging situations and develop more resilience with themselves and their work (Aughterson et al. 2020).

Table 6. Difference on the Level of Ordeals in Combating COVID-19 Pandemic Among Frontliners in Digos City When Grouped According to Their Profile. May 2022.

Profile Variable	F-value	P-value	Interpretation	Decision
Position	1.023	0.497	No Significant Difference	Accepted Null Hypothesis
Age	1.130	0.345	No Significant Difference	Accepted Null Hypothesis
Gender	0.410	0.710	No Significant Difference	Accepted Null Hypothesis
Civil Status	2.217	0.325	No Significant Difference	Accepted Null Hypothesis
Educational Attainment	1.401	0.401	No Significant Difference	Accepted Null Hypothesis
Average	1.236	0.456	No Significant Difference	Accepted Null Hypothesis

Difference on the Level of Acceptability of COVID-19 Vaccine Among Frontliners in Digos City When Grouped According To Their Profile

Table 7 presented that Position has 0.442 as P-value; Age with 0.479 as P-value; Gender with 0.526 as P-value; Civil Status with 0.258 as P-value; and lastly, Educational Attainment with 0.659 as P-value. The P-value results, as well as its average, which is 0.473 for the significant difference were higher than 0.05 significance level, indicating that the null hypothesis was accepted. Therefore, this implies that there is no significant difference in the acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile. Despite with respondent’s position, age, gender, civil status, and educational attainment, it has nothing to do or does not vary with what is their response towards accepting or getting vaccination. The acceptability of frontliners with the vaccine substantially depends on their own decision and perception of whether they will receive or refuse it, as they have to consider numerous aspects before agreeing to get vaccinated.

It is imperative to develop effective outreach strategies to address suspicions pertaining on vaccine’s authenticity whether it is effective or safe, considering current attention to the COVID-19 vaccine on a global scale, particularly among front liners or healthcare workers. In order to promote confidence and boost vaccination acceptability, this concept on assenting vaccination must be accompanied by efforts to foster trustworthiness and guarantee integrity (Ministry of Health, 2020). According to Loomba et al. (2021), despite the life status or knowledge of frontliners regarding accepting the COVID-19 vaccine, numerous aspects influence the possibility of individuals getting vaccinated. Misinformation about the COVID-19 vaccination has an impact on their decision and might hinder the attainment of herd immunity.

The public and frontliners are nonetheless apprehensive regarding the safety of the COVID-19 vaccination despite several researches or authorization of health regulators. Immunization’s credibility, the dependability and expertise of organizations providing these vaccines, as well as the guiding principles that direct government actions and decisions have integral factors towards good outcome in vaccine intervention. Organization for Economic Cooperation and Development (2021) asserted that there is a necessity to have a thorough understanding and consideration of every front liner’s vaccination concerns and life circumstances, including their cultural or religious beliefs. The most severe COVID-19 cases and fatalities emphasized the need for risk assessment when deciding and determining whether to get vaccinated, encouraging even the most reluctant individuals to acquire the COVID-19 vaccination (Caserotti et al. 2021).

Table 7. Difference on the Level of Acceptability of COVID-19 Vaccine Among Frontliners in Digos City When Grouped According to Their Profile. May 2022.

Profile Variable	F-value	P-value	Interpretation	Decision
Position	1.146	0.442	No Significant Difference	Accepted Null Hypothesis
Age	1.011	0.479	No Significant Difference	Accepted Null Hypothesis
Gender	0.924	0.526	No Significant Difference	Accepted Null Hypothesis
Civil Status	2.355	0.258	No Significant Difference	Accepted Null Hypothesis
Educational Attainment	0.744	0.659	No Significant Difference	Accepted Null Hypothesis
Average	1.236	0.473	No Significant Difference	Accepted Null Hypothesis

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The fundamental objectives of the study were to determine the demographic profile of frontliners in Digos City; determine the level of ordeals of frontliners in combating COVID-19 pandemic; determine the level of acceptability of COVID-19 vaccine among frontliners; determine if there is a significant difference on the level of ordeals in combating COVID-19 pandemic among frontliners in Digos City when grouped according to their profile; and determine if there is a significant difference on the level of acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile.

There were one hundred forty (140) respondents in this study wherein the participants were the barangay officials and appointed functionaries from the three (3) Barangays of Digos City, Davao del Sur, which were the Barangay Zone I, Barangay Zone II, and Barangay Zone III. The researcher conducted the study through the utilization of a survey questionnaire that was given to the respondents. The data gathered was statistically computed using statistical tools, such as Frequency Count, Mean, and Levene’s Test and ANOVA.

Based on the results of the gathered data, the Barangay Health Workers accumulated highest respondents’ frequency, subsequently the Barangay Tanods, then the Barangay Councilors, and the Barangay Captain, Secretary, and Treasurer had an equal number of participants. Many of the respondents are aged 36 – 47 years old, and in terms of gender, females had the most number compared to males since the number of participants in female is 70, while the male had 69, and there was also 1 LGBTQIA+ participant. Regarding civil status, most of them were married with 99 participants, while others were single, widowed, and 2 of the participants were separated. A lot of them reached college level, and the rest were college graduates, high school graduates, and high school level as for respondent’s educational attainment. In level of ordeals in combating COVID-19 pandemic, result shows with an average mean 3.66, interpreted as “high” on the descriptive level, implying that the respondents were very challenged on this aspect. In level of acceptability of COVID-19 vaccine among frontliners, result shows that the average mean is 3.36, interpreted as “moderate” on the descriptive level, implying that the respondents were moderately challenged about the indicated matters of the COVID-19 vaccine. Furthermore, there is no significant difference on the level of ordeals in combating COVID-19 pandemic and the acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile. Therefore, the decisions for both are “Accepted Null Hypothesis.”

Conclusions

From the results presented, the researcher has come up to a conclusion that:

1. The respondents from three (3) barangays who answered the survey questionnaire of this study, many of them were in the age of 36 – 47 years old. It was also evident that females have the dominant number of participants, majority of the respondents were married, and a lot of them had reached college level.
2. The result of the data for the Level of Ordeals of Frontliners in Combating COVID-19 Pandemic shows that the average mean is 3.66, indicating that the respondents on the ordeals based on what they have experienced were interpreted as high on the descriptive level.
3. In the Level of Acceptability of COVID-19 Vaccine Among Frontliners, result revealed that it was moderate on the descriptive level, indicating that the respondents moderately have safety and efficacy concerns, and it is also a challenge for them regarding the acceptance of COVID-19 vaccine as they are worried whether it is safe and effective to take.
4. It was found in the result that there is no significant difference on the level of ordeals in combating COVID-19 pandemic among frontliners in Digos City when grouped according to their profile.
5. There is also no significant difference found in the result of the level of acceptability of COVID-19 vaccine among frontliners in Digos City when grouped according to their profile.

Recommendations

In accordance with the study's data and conclusions, the researcher suggested that:

1. The Local Government Unit of Digos City should allocate each barangay sufficient budget for the safety needs of the frontliners that are valiantly reporting to their duties and jeopardizing their personal health. Frontliners have to be given financial support or an additional honorarium for risking their lives in fighting against the virus and ensuring the safety of the people.
2. The Local Government Unit should implement a project intended for outbreak preparedness and provide adequate Personal Protective Equipment (PPE) that is beneficial for the frontliners to ensure their safety and well-being.
3. The City Health Office and BLGU should coordinate and facilitate seminars and trainings for coping various risk emergencies like COVID-19, to enable frontliners to be more reliable and knowledgeable on enforcing safety matters and sustaining their own as well as people's lives from the virus.
4. The City Health Office must collaborate with the Department of Health (DOH) regarding with COVID-19 vaccine to undergo an in-depth assessment to guarantee and have substantiation on reliability of vaccination. They should also set an orientation about the vaccine to provide information and educate frontliners or health workers, which will encourage them to accept and take the vaccine.
5. Each frontliners or member of the barangay must tightly follow the health protocol mandated by IATF to avoid further spread or transmission of the virus.
6. For future researchers who will conduct research in relation to this topic, this study is recommended by the researcher to serve as a reference and source of gathering information. The researcher also recommends future researchers who are aiming to improve this study to conduct a detailed study on looking into their ordeals related to COVID-19 per Barangay to continuously monitor the frontliners and their needs for the future.

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