

Exploring interpersonal communication strategies in the healthcare system: insights from Barangay health workers (BHW) in the Philippines

A Camasin¹, R Estur², C Jomadio³, A Paet⁴, J Nacionales⁵,
N Claridad⁶

Eastern Visayas State University, Philippines^{1,2,3,4,5,6}

¹Email: angelica.camasin@evsu.edu.ph

Abstract - Effective communication between providers and patients is one of the most important factors for achieving better health outcomes in the delivery of healthcare and in order to achieve effective communication, the use of the right communication strategy is beneficial. In relation to this, Barangay Health Workers (BHW) are exposed to a lot of interpersonal communication between them and their constituents. With the lack of studies on BHW, it is important to understand the nature of their work by exploring the interpersonal communication strategies they use and how it helps them resolve health care miscommunication in their areas. This qualitative research was guided by interpretative phenomenological analysis in analyzing the experiences of BHW in terms of communication. The data was gathered from 18 BHWs using semi structured interviews. Based on thematic analysis, the following are the interpersonal communication strategies employed by BHWs': interaction in a face-to-face context, usage of a particular language as means of communication, use of non-verbal communication, informing in an appropriate manner, use of electronic devices to transmit information, and observance of ethical communication. The participants also shared the contribution of these strategies towards overcoming miscommunication: helps in relaying information effectively which leads to better understanding of constituents, helps reduce conflict between the BHW and the constituents, and helps encourage constituents and change their perceptions.

Keywords: interpersonal; communication strategies; healthcare system; barangay health workers

I. INTRODUCTION

Over the past decades, considerable investments have been made to expand access to essential healthcare services in the developing world. Health counseling and provider-client communication are consistently poor across countries, regions, and health services, according to research on the quality of care. Even when aware of the messages to convey, a provider fails to communicate effectively due to a lack of effective communication strategies. Thus, it is evident that effective communication strategies play a significant role in achieving health goals. According to scholars, there is a correlation between communication and the success of a health institution or organization (Nicholas et al, 2022).

Effective communication between providers and patients is one of the most important factors for achieving better health outcomes in the delivery of healthcare. When patients comprehend the nature of their illness and its diagnosis and perceive that their well-being is of utmost importance to their healthcare provider, they express a high level of satisfaction with the treatment and care they receive, and they are highly likely to adhere to their prescriptions (Negri et al, 2016). Often, inadequate communication is the main cause of mortality in hospitals. In a retrospective analysis of 14,000 in-hospital fatalities, communication errors were found to be the leading cause, occurring twice as frequently as clinical skill-related errors, according to a study published in the *Clinical Biochemist Review* in 2006. Despite the fact that communication errors can have grave consequences, they are frequently simple to correct, so many patient fatalities caused by communication errors are preventable. This is one of the most significant reasons why communication is so crucial for patients' safety.

Similarly, in medical institutions, effective health communication is crucial in the communities. Community health workers, assigned to barangay or village health stations, are one of the means of delivering preventative and promotional health services in the Philippines. Barangay Nutrition Scholars (BNSs) and Barangay Health Workers (BHWs) are the two main types of Community Health Workers (CHWs) in the Philippines (Anonim, n.d.) Volunteers and low-wage workers in both groups offer or direct constituents to basic health care services in their local communities. The BNS program primarily focuses on nutrition-related efforts with malnourished infants and children (0-5 years) and nutritionally susceptible pre-and post-natal women, it also targets nutritionally vulnerable women. While the BHWs offer education, counseling, and referrals on a wide range of health-related issues, from pregnancy and childbirth to family planning and illness prevention to treatment (Administrative Order, 2020).

Additionally, under the scope of Primary Health Care (PHC), the Barangay Health Worker (BHW) serves as the initial point of contact between the community and the healthcare system. The research of Quitevis (2011) highlighted the relevance of barangay health workers, as they demonstrated that barangay health workers attend to more than one duty in terms of community health. They act as leaders, teachers, and service providers, which attend to community health monitoring, and medical services, and give basic curative services to patients. Undoubtedly, BHWs are valuable assets of the community in assessing health needs of the constituents and connecting them to healthcare.

As has been noted, Negri et al (2016) explained that one of the most vital elements for improved customer satisfaction, compliance, and health outcome in the provision of healthcare is effective communication between providers and clients. Thus, in order to achieve effective communication, the use of the right communication strategy is beneficial. As previously said, BHWs play a vital role in the community, notably in the provision of

healthcare. Previous studies (Britt et al, 2022; Koderro, 2017; McGee et al, 2019) however, were unable to explore how these health workers deliver healthcare to constituents; rather, researchers concentrated on how healthcare professionals, such as physicians, communicate with patients. Hence, despite being one of the most dedicated parts of government with some of the hardest jobs remaining, the efforts put forward by BHWs are seldom acknowledged.

Furthermore, this study intends to focus on interpersonal communication, as it is the most prevalent form of communication between healthcare providers and patients, which has not been addressed in earlier studies. To address these gaps, the researchers aim to explore the interpersonal communication strategies in the healthcare system through the insights of the Barangay Health Workers (BHW) in the Philippines specifically in the city of Tacloban. Specifically, this study aims to fill the gap by answering the following questions: (1). What Interpersonal Communication Strategies do Barangay Health Workers find effective when relaying information to their constituents? (2). How do these interpersonal strategies help the Barangay Health Workers overcome miscommunication?

II. METHOD

2.1 Research Design

The study specifically used interpretative phenomenological analysis under the qualitative research method. Qualitative research design allows researchers to create an in-depth analysis on the lived experiences of individuals. Interpretative Phenomenological Analysis (IPA) is the analysis of people's major life experiences. IPA is influenced by ideography which focuses on examining and interpreting the similarities and differences of the stories disclosed by the individuals (Smith et al, 2009). This method allows the researcher to gather and interpret the different experiences of barangay health workers in relation to the interpersonal communication strategies they use in communicating with their constituents. Overall, IPA was utilized in this study to promote an open-ended discussion between the researcher and the participants, which helped us see things from a different perspective.

2.2 Research Participants

A total of eighteen (18) Barangay Health Workers (BHW) in different Barangays in Tacloban City were selected as participants of this study, most of them are in their late 30's who have been in this line of work for more than a year. This study was conducted through purposive convenience sampling in which participants are actively chosen based on their qualities, expertise, and experiences as well as their availability, willingness, or ease of access on a practical level. The participants were purposely selected considering the following criteria: (a) must be a resident of Tacloban City; (b) must be a BHW for at least a year; (c) must not be a Barangay Nutrition Scholar (BNS) nor Barangay Service Point Officer (BSPO). They were interviewed in Barangay Health Centers, Barangay Halls, or in their respective households according to their choice of convenience. The study was carried out across Tacloban City. The rationale behind the choice of place was because the City of Tacloban has the necessary workers specially Barangay Health Workers (BHWs) which is timely and relevant to our study. Therefore, the possibility of obtaining all the necessary and relevant data from the Barangay Health Workers (BHWs) is relatively high.

2.3 Data Gathering Procedures

Ethical considerations were secured prior to the data collection, including a consent form which served as an evidence that the participants agreed to have an interview, participants' permission to take photos and recordings, the assurance that the participants' refusal will not be used against them, and the anonymity of their identity by using BHW 1, BHW 2, and so on. The collection of data was done through semi-structured interviews

with 18 Barangay Health Workers in Tacloban City using four (4) open-ended questions and probe questions to further explore their responses. It was administered face-to-face, and the participant's responses were recorded using an audio recording. Before asking the interview questions, the researchers explained first the purpose of conducting the interview as well as the objectives of the study. After the interview, the collected data was transcribed. Transcription is the process of converting recorded audio into a written form that may be utilized in looking into a specific occurrence or event (Duranti, 2006).

2.4 Data Analysis

In addition, the data was analyzed using thematic analysis (TA). According to Boyatzis (1998), TA is utilized for identifying, analyzing, and reporting patterns (themes) within data. A theme captures something important about the data in relation to the research question, and represents some level of patterned response or meaning within the data set (Braun & Clarke, 2008). Thus, by utilizing thematic analysis, it was easier to approach large data sets by sorting them into broad themes. In analyzing the data, the six phases of thematic analysis developed by Braun & Clarke (2008) were followed: familiarization, coding, generating themes, reviewing themes, defining and naming themes, and producing reports. In coding the collected data, In Vivo Coding was employed in the first cycle in which the codes were taken from the actual language found in the qualitative data record. In the second cycle, Eclectic and Axial coding were used to determine which codes in the research are the dominant ones and which are less important. Through its theoretical approach, thematic analysis provides a flexible and useful research instrument that has the potential to provide this study with rich, detailed, and complex account data.

III. RESULTS AND DISCUSSION

This section presents the findings of the study around the research questions: the interpersonal communication strategies used by Barangay Health Workers, and how these strategies help them overcome miscommunications.

3.1 Interpersonal Communication Strategies in the Healthcare

The interpersonal communication strategies employed by Barangay Health Workers (BHW) can be categorized into six major themes: (1) interaction in a face-to-face context; (2) usage of a particular language as means of communication; (3) use of non-verbal communication; (4) informing in an appropriate manner; (5) use of electronic devices to transmit information; (6) observance of ethical communication.

3.1.1 Interaction in a face-to-face context

From the responses of the BHW, one of their strategies was to do house-to-house visitation to convey the information to their constituents.

"...First time ako nga hi ako talagan nagbabalay-balay, nag hahouse-to-house, nanmimiling... Minsan pag makada ako ha ira balay pagtuktok, "uy ano, бага mayda kuan nasiring nga burod ka" kun sugad ba hiton nga diri pa halata it ira mga tiyan, maaram naman hira nga ako it ira BHW, napakianat hira..." [BHW 2]

(Unlike the first time, I do house-to-house to find them...I sometimes hear information about someone being pregnant, which is why I go to their residence to check and ask, especially when the bump is not yet visible....)

"Naghahouse to house survey kame, pagpabaro haera kun mayda kame immunization ngan pre-natal every second of the month so naka- kausa ito, tas an immunization linat tun usa Kabolan nakakaka so amo ito an amon Kun may mga announcement, ginhakadtu namon iton mga kag-anak house to house para masayod hera na may mga panhinabo dide brgy base kumadi hera." [BHW 14]

(We have what we say in the health center, we are doing house to house surveys to inform the constituents if the immunizations are already available, and we do prenatal every second day of the month, that is only done once, then the immunizations are done once a month, so that is what we are doing as BHWs. If there are any announcements, we inform the parents house to house to make them clear on the happenings here in Brgy, for them to come.)

These two responses discussed that in order to deliver an efficient communication they really need to have an interaction in face-to-face context. The participants in the house-to-house visitation already know the BHW's motives when someone approaches them because they have known them for years, as was previously indicated. They also mentioned that conducting house-to-house visitation enables them to relay information such as the schedule for prenatal checkup and immunization. By this strategy, they are also able to check up on their constituents. This theme relates to the study of Vermeir et al (2015) which discovered that face-to-face communication is highly regarded and is preferable among healthcare workers.

3.1.2 Usage of a particular language as means of communication

Based on the responses of the BHW, an effective strategy in communicating with the constituents is through the use of a particular language.

"Nagwawaray la tapos papaintindi haira na kun ano an imo sakit, igspespecific naton an iya sakit na ginaabat. makuri man kita maginenglishon kay winaray man it mga tawo dinhi." [BHW 5]

(I just use Waray-waray then I would make them understand their ailments in a specific manner. Waray-waray, it is difficult to communicate using the English language since the constituents here are Waray.)

"...an amon language na ginyayakan kay an iba kasi, diba mayda kita borders, so an nahihinabo kailangan namon mag, kailangan namon gumamit hin universal naton na language which is Tagalog or Filipino." [BHW 10]

(... since we have borders, we need to use a universal language which is Tagalog or Filipino.)

It can be deduced from the above response that Barangay Health Workers (BHW) in Tacloban City utilize Waray-waray and the Filipino language in relaying information since it is what the constituents use. According to the participants, the dialect they use primarily in communicating is the Waray-waray dialect. However, since there are borders in their respective areas, they also utilize the Filipino language which all the constituents are familiar with. Similarly, in the study of Britt et al (2022), it was emphasized that it is best to know the patient's preferred language when speaking so as not to cause any confusion.

3.1.3 Use of non-verbal communication

An effective strategy in communicating with their constituents is through the use of non-verbal communication, this is based on the responses of the Barangay Health Workers (BHWs).

"Usahay kuan iton nga, ha pamaagi pagistorya, paghatag han sugad hiton mga pictures." [BHW 3]
(Occasionally, through communication, by displaying images.)

"Ginsasample'an nam. Ginsasaka kasi namon ira balay for example an surudlan pinggan, ilarom iton may nabibi'aw na tubig, hinuhuwad. Actual an amon, more on actual nga pagpapakita ha ira. Diri la verbal. Ginkakadto namon mismo haira balay." [BHW 8]

(We show them how to do it. We usually go up to their houses, and for example the shelf of their plates, we throw out the pool of water underneath. We are more on actual, more on actually showing them. Not just verbal. We really go to their house.)

It can be understood from the responses that Barangay Health Workers (BHWs) in Tacloban City also convey information by showing illustrations like images and actually showing what should be done. The BHW shows images for them to have a better understanding of the information they want to relay. On the other hand, BHW also demonstrates to them the proper way on how to do things as mentioned above, for they can have a better understanding if you actually show it to them. Thus, aside from the use of verbal communication, they also utilize the usage of non-verbal communication in interacting with their constituents. Just like what Barron and Joseph (2010) said, the

packaging, transmission, and dissemination of information includes both verbal and non-verbal methods.

3.1.4 Informing in an appropriate manner

In communicating with the constituents, the collected data revealed another way to effectively relay the information is by explaining properly and slowly. It can be noted in the following excerpts.

"Ig kukuan ko ha ira, ig e-eksplikar, explain hin tuhay ngan sakto, kun paano kamo mahihingangadto hini nga lugar. Kay it amon, ha health center man kami naka assign, igin kukuan ko't hira gintututdo, pakadto kamo hini nga center, adi didi ini nga lugar." [BHW 1]

(I explain to them properly how they would go to a certain place. As for us, we are assigned to a health center. I show them where the health center is.)

"Ginhihinay hinay pagpasabot nga sugad hiton... mayda talaga mga nanay na diri talaga naruruyag hiton nga sinisiring na family planning. Ifofocus ta ha family planning... ano mayda talaga nanay nga nadiri, ha una una an ira asawa diri naruruyag an kalalakin'an so iginkukuan ta hira kun anot magiging kaupayan kun sumulod hira ito na sinisiring na family planning." [BHW 5]

(I slowly inform them about it... there are some mothers who are not interested in family planning. I'll make family planning a focus... but there are mothers who don't want to do it, and their spouses aren't into it either, so I explain the benefits of family planning to them.)

Based on the responses, it can be deduced that by explaining properly and exactly, the Barangay Health Workers are able to relay the information needed by the constituents. Also, they emphasized the importance of slowly explaining the vital information to the parents, specifically the mothers, so that they understand what they have to do. In addition, according to OnPage Corporation (2020), healthcare workers must be clear, timely, and discrete especially when the patient's diagnosis is being elaborated.

3.2 Use of electronic devices to transmit information

Based on these responses, one of the means of communicating is through the use of electronic devices.

"...Danay naman messenger. an akon strategy nga maghimo group chats upod nak mga constituents. Ada kay may mga mayda naman kasi ako, tungod nga kamaiha na nakon nga BHW, mayda na kami group chat hit akon bug os nga barangay." [BHW 2]

(...Sometimes in messenger. Creation of group chat with my constituents is one of my strategies. Since I've been a BHW for a very long time, we already have a group chat with the constituents in our barangay...)

"Instead na matawag ngadi Kay mayda man ngadi cellphone number, haamon mismo mmessage through messenger or napakadto gud mismo haamon balay." [BHW 6]

(They message us through messenger or visit us at home instead of contacting us here.)

"Mayada man liwat kami mga... sugad nahatag ba hira hin contact no. gin aano nala... kay sugad yana nag te-text text nala kami, contact contact nala." [BHW 17]

(We also have their contact numbers so we contact them through text messages.)

The participants indicate that we can use electronic devices to convey information with others. From the responses above, the BHW communicates with the constituents via offline and online messaging. Our time now is more flexible such as using electronic devices is convenient but Vermeir et al (2015), contradicts this because he discovered that, while written communication is still the most popular means of communication among healthcare workers, face-to-face communication is highly regarded and preferable because, in addition to hearing the words being spoken, both parties may observe each other's body language and facial expressions, gaining a deeper understanding of the message being conveyed.

3.3 Observance of ethical communication

Another effective strategy in communicating with the constituents is through the observance of ethical communication, this is based on the responses of the constituents.

"Bagat kailangan may respect kita. Dapat ha public maram ka magdara, ma riko man o mapobre, ano man tim pwesto, the same, waray dicrimination, dapat waray importante na hiya kay anak ni kuan, dri. Tanan, kun napila, napila tanan. Kun naaro priority number, ngatanan maaro. Para atleast fair hit pasyente nga naghihinulat na early pa nganhi, kontra naman hit riko hiya, umabot hiya hin alas dies, hiya't uunahon. Dri unfair ito, dapat fair." [BHW3]

(We should be respectful. You should know how to deal with needy people, affluent or poor, regardless of the position, there should be no discrimination; you should not prioritize someone only because they are the mayor's children. Everyone, everyone should line up and ask for a priority number, so that it is fair to the patients who arrived early, as opposed to rich individuals who arrived at 10 a.m., who would be prioritized, which is unfair; rather, we should be fair.)

"Hmm kuan aaahh pinakakuan talaga na strategy is magkuan ba bagan makitawo Kaba, friendly. So ginclaclarify namon, justifiable hiya ini dapat friendly ka haim constituents, an imo tone haim pakikigistorya is okay para han deliver and receiver is okay para haiya. Once makigistorya ako haiya na "maupay adi ngadi he kuan, mayda ngadi tawo" (shouting) Diba diri hiya maayon so an Amon talaga treatment or bagan bungad is "maupay na aga, ano ini an taga Barangay kuan" (calm voice) sugad hini." [BHW10]

(The best strategy for me is you're sociable and friendly. So we clarified it to them in a justifiable way. We're supposed to be friendly to them, the tone when you talk to them is okay when you deliver and the receiver is also okay with it. Once I talked to them like "Is this the house of (name), is there anybody home? (in a shouting manner). They won't like it so our treatment or our greetings should be "Good morning, se are from Barangay (number)" (calming way).

The participants emphasized the importance of the observation of etiquettes and respect. The participants indicate that they practice proper etiquettes, and respect their constituents especially in public. Through exercising proper etiquettes and showing respect, the communication between the Barangay Health Workers (BHWs) and their constituents is harmonious. This is just what as described previously by Wood (2013), an effective communication is essential for establishing patient engagement. He also added that proper provider-patient communication fosters patients' trust, thereby fostering an atmosphere conducive to determining medical treatments and objectives.

3.4 How these strategies help overcome miscommunication

The contribution of these strategies towards overcoming miscommunication can be categorized into three major themes: (1) helps in relaying information effectively which leads to better understanding of constituents; (2) helps reduce conflict between the BHW and the constituents; (3) helps encourage constituents and change their perceptions. Helps in relaying information effectively which leads to better understanding of constituents. The interview transcripts revealed that strategies such as nonverbal communication, face-to-face interaction, and the use of electronic devices to transmit information aid in effectively relaying information, which leads to a better understanding of constituents and can overcome miscommunication.

"Para ha akon, nakakabulig it mga pictures kay mas naiintindihan nira... nakakaintindi it mga tawo kun ano it ira panginahanglanon..." [BHW 1]

(For me, images can help in a way that constituents could understand better, they could understand what they need.)

"Nakakabulig an house-to-house visitation pinaagi nga na e-eksplikar namon kun ano an ira mga dire naiintindihan para masugot na hira pagkadto ha health center kay para man ito ha ira kaupayan." [BHW 18]

(House-to-house visitation could help in a way that we can explain to them what they don't understand so they would follow through and visit the health center since it is for their own good.)

"Mas madali pag messenger. Kay ano? Mmessage ako, mmessage hiya, nagkakaauruistorya kasi kami hin бага hin face-to-face na gihapon. Kay iya pakiana, nababaton ko didto, ngan naiintindihan man niya kun ano man liwat iton akon karuyag sidngon." [BHW 2]

(It's easier. Why? When I message them, and they message me, it's like we're talking face-to-face, because I can answer their questions easily there, and they can understand what I mean to say.)

Communicating effectively with patients is essential to imparting important information and ensuring that it is understood. It also improves the patient experience, leading to higher patient

satisfaction. From the above response, it can be concluded that the indicated strategies are helpful in that they assist Barangay Health Workers (BHW) in efficiently relaying information to constituents. With the use of pictures, the constituents are able to understand what they need. Furthermore, through house-to-house, according to the participant, it could help in a way that they are able to relay the information thoroughly and explain what the constituents don't understand. Similarly, the use of messenger might provide the same consequence because people can speak as they would in a face-to-face setting.

3.5 Helps reduce conflict between the BHW and the constituents

The data gathered further explained that the strategies used by the Barangay Health Workers (BHWs), specifically the "Observance of Ethical Communication" strategy helps them in reducing the conflicts, especially verbal conflicts between them and their constituents.

"Kun narespect ka hit im kalugaringon, respetuhan liwat hira, para hira may respeto liwat ha imo. Para an iyo... it iyo communication maupay it deliver para waray away. Diri ka puyde maging snob, aringit, ngahin... ano iron? estrikta kay aanhi ka ha public." [BHW 3]

(If you respect yourself, you should respect others in order for them to respect you. So that you may communicate effectively and to avoid arguments. Because you're in public, you can't be snobbish or strict.)

"Kay Kun diri maupay tim ipapakita na pamatasan, maapproach ka ngadto mga household mayakan na "kamaglain man ini na BHW", so macomment hira na "dirit maupay na BHW, maraot mant batasan hito". So dapat once madaop ka hin household maupay tim kaburut'on para maiwasan it di pagkakaintindihan." [BHW 15]

(If you don't show good manners, the constituents will perceive the BHW as ill-mannered individuals. So you should approach every household with a good intention to avoid misunderstanding.)

Good communication aids in the prevention of conflicts that may emerge as a result of the ambiguity of misunderstanding. Good communication starts with effective listening. Also, showing respect is one of the key elements in a good communication that makes the conversation last long. As was already mentioned, if you convey the message clearly, there won't be any disputes. Just like what Schilling (2012) explained, communication encompasses more than just the messages we transmit; it also covers how we receive messages. When communication is efficient, it leaves all parties satisfied and with a sense of accomplishment.

3.6 Helps encourage constituents and change their perceptions

Based on the responses, it indicates that through the strategies mentioned such as house-to-house visitation and proper ways of approaching someone the Barangay Health Workers are able to encourage the constituents and change their perceptions in some things that the BHW wanted them to understand.

"Han una mga kuan gud talaga an mga nanay, mga diri ba natuod sanglit damo an sinisiring na mga defaulters dinhi ha amon barangay pero sige la iton follow-up namon. Ha pagka yana, mga pagka yana, siguro nakukuan nagud ito hira, na e-educate kay sugad damo man dinhi it amon kuan, may pag edukar man dinhi ha amon liwat, mga... nagkukuan kami, nag co-conduct kami hin mga health literacy, amo ito bagan na e-edukar na hira yana, natuod na hira." [BHW 9]

(Back then, there were a lot of "defaulters" in our barangay because some of the mothers did not obey us, but still we checked on them. I think they are educated enough since we educate them by conducting health literacy. That's why they are now educated, and obey us.)

"Kay pag siring nam haira na schedule na an immunization, na.naparticipate hira. Kun di nakakakadi ha district or center Kun an ira baby may sakit, nasumat liwat ito hira "Uy di laanay kami makakakadto Kay it Akon baby may sip'on, may ubo," so kun waray, napartisipar hira pagkuan. So asya ito tak pakasabot na nakakaintindi hira Kun ano tam gusto ipasabot, ipahatod ngadto haira" [BHW 15]

(When I tell them about the schedule of immunization, they participate. If they cannot go to the district or center because their baby is sick, they'll just inform us that "We cannot go because my baby is sick, has a cold and cough" if not, they would participate. In that way, I could determine if they really understand what we're trying to tell them.)

The responses from the Barangay Health Workers (BHWs) above suggest that the strategies they've employed to resolve misunderstanding were indeed successful. They are able to urge and persuade people to join in activities like immunization by conducting house-to-house visits. Furthermore, by using appropriate ways of approaching someone, they are able to convey information more successfully. With respect, the sender and receiver can understand each other when conversing, and it may help them sort out problems easily.

IV. CONCLUSION

Employing communication strategies is crucial especially in the provision of healthcare as it leads to effective communication which is an important factor for achieving better health outcomes. In terms of Barangay Health Workers (BHW), they are considered as a part of the health workforce of a country. Communication strategies are important on their line of work as they meet with different people. As observed in the statements of the participants, they have already established strategies that they have been using. The results indicated that various strategies of BHW as per mentioned above have been found effective in dealing with their constituents. Most BHWs have been communicating with their constituents face-to-face as their strategies, however with the emergence of technology, some support this strategy by using online platforms for easier access to communication, also for convenience. Overall, it is necessary for BHWs to use a strategy effective and appropriate to their constituents.

Moreover, this study indicates that using communication strategies is an advantage to properly deliver the message you want others to understand. It was found that the strategies used by the BHWs are able to resolve miscommunication between the health workers and the constituents. This only proves how effective and useful it is to create interpersonal communication strategies. Future researchers can use this study for reference coming from the insights of the BHW. Any communication strategies that are not mentioned in this paper shall be investigated by the future researchers. It is also recommended for future researchers to widen the scope of the study, and explore deeper on interpersonal communication strategies being used by BHWs.

REFERENCES

- Administrative Order. (2020). Rules and Regulations on the Licensing and Registration of Radiation Facilities Involved in the Use of Radiation Devices and Issuance of Other Related Authorization. Republic of the Philippines Department of Health Office Of The Secretary.
- Ahmed, A. (2020, October 21). *The Importance of the Interpersonal Communication Process Within the HealthCare Workplace*. Chron. <https://work.chron.com/importance-interpersonal-communication-process-within-health-care-workplace-7377.html>
- Anonim. (n.d.). What are the roles of BHWs? (n.d.). Department of Health. <https://doh.gov.ph/faqs/what-are-the-roles-of-the-bh>
- Barron, A.R. and Joseph, A. (2010). "Toward fast reliable communication at rates near capacity with Gaussian noise," *2010 IEEE International Symposium on Information Theory*, Austin, TX, USA, 2010, pp. 315-319, doi: 10.1109/ISIT.2010.5513330.
- Braun, V; and Clarke, V. (2008). Using thematic analysis in psychology. Taylor & Francis online (2008).
- Britt, M.J.B., Caña, K.P.V., Espiritu, R.M., Fabella, L.T., Idul, A.W., & Tang-O, D.M.R.I. (2022). Understanding the Communication Dynamics of Healthcare Professionals and Low-income Patients in the Philippines. *TalastAñan: A Philippine Journal of Communication and Media Studies*, 1(1), 1-1. <https://www.ejournals.ph/article.php?id=18268>
- Cawthon C, Walia S, Osborn CY, Niesner KJ, Schnipper JL, Kripalani S. Improving care transitions: the patient perspective. *J Health Commun.* 2012;17 Suppl 3(Suppl 3):312-24. doi: 10.1080/10810730.2012.712619. PMID: 23030579; PMCID: PMC3603351.

- Davis, E. (2022, June 15). *What Is a Healthcare Provider? Doctors and nurses aren't the only types of healthcare provider*. Very Well Health. <https://www.verywellhealth.com/what-is-a-provider-1738759>
- Declaro-Ruedas, M.Y.A. (2022). Communication strategies employed by the Barangay health workers in promoting reproductive health in Magsaysay, occidental Mindoro. *Journal of Agricultural Extension and Rural Development*, 14(2), 46-51. <https://doi.org/10.5897/JAERD2021.1290>
- Guevarra, J. P., Zuñiga, Y. M. H., Uezono, D. R., Go, J. J. L., Granada, C. N., & Manese, D. T. (2021). Developing an interpersonal communication material for primary health-care workers for the prevention and control of noncommunicable diseases: experience from a case in Manila, Philippines. *Journal of Health Research*, 36(4), 685-695. <https://doi.org/10.1108/JHR-07-2020-0283>
- Johnson, T. (2019). The Importance of Physician-Patient Relationships Communication and Trust in Health Care. <https://bit.ly/3DRFpVC>
- Kodero, J. (2017). *An Investigation of the Communication Strategies Used in Promoting Maternal Health Among Women in Kawangware, Nairobi County* (Doctoral dissertation, University of Nairobi). <http://hdl.handle.net/11295/102546>
- Mallari, E., Lasco, G., Sayman, D. J., Amit, A. M. L., Balabanova, D., McKee, M., & Palafox, B. (2020). Connecting communities to primary care: a qualitative study on the roles, motivations and lived experiences of community health workers in the Philippines. *BMC health services research*, 20(1), 1-10. <https://doi.org/10.1186/s12913-020-05699-0>
- McGee, L.U.M.D. & Suh, J.J.D. (2019). Communication Strategies to Address Vaccine Hesitancy in Healthcare Settings and on Social Media. *Communication Strategies to Address Vaccine Hesitancy in Healthcare Settings and on Social Media*, 10(2), A7. <https://digitalcommons.library.tmc.edu/childrenatrisk/vol10/iss2/7>.
- Negri, B.D, Brown, L.D, Prete, H.O., Rosenbaumz, J., and Roter, D. (2016) Improving Interpersonal Communication between Healthcare Providers and Clients: USAID.
- Nicholas, Aderinto; Opanike Joshua, Oladipo Elizabeth. (2022). Accessing Mental Health Services in Africa: Current state, efforts, challenges and recommendation, *Annals of Medicine and Surgery*, Volume 81, 2022, 104421.
- Onpage Corporation (2020). Effective Communication Between Healthcare Professionals - Best Practices. <https://bit.ly/31ZMNks>
- Parvanta, C., & Bass, S. (2018). *Health Communication: Strategies and Skills for a New Era: Strategies and Skills for a New Era*. Jones & Bartlett Learning.
- Quitevis, R.B. (2011). Level of Acceptability of Roles and Performance of Barangay Health Workers in the Delivery of Basic Health Services.
- Raasikh, C. (2013). *Influencing Change in Healthcare Providers: Communication Strategies for a New Era in Healthcare* [Doctor of Nursing Practice (DNP)]. <https://repository.usfca.edu/dnp/17>
- Smith, J.A; Flower, P. and Larkin, M. (2009). *Interpretative Phenomenological Analysis: Theory, Method and Research*. London: Sage.
- Sumaylo, D.J.F. (2013). Information Delivery in the Provision of Barangay Health Services in Barangay Dawis, Digos City, Philippines. *Journal of Asia Pacific Studies*, 3(1).
- Taburnal, M. V. (2017). Barangay Health Workers' Level of Competence. *Asia Pacific Higher Education Research Journal* (APHERJ), 4(1),1-15. <https://po.pnuresearchportal.org/ejournal/index.php/apherj/issue/view/23>
- Tacheva, V. (2013). Communication – the master key to the patient's heart. *Jahr-European Journal of Bioethics*, 4(1), 601-620. <https://hrcak.srce.hr/ojs/index.php/jahr/issue/view/698>.
- Vermeir, P., Vandijck, D., Degroote, S., Peleman, R., Verhaeghe, R., Mortier, E., Hallaert, G., Van Daele, S., Buylaert, W., & Vogelaers, D. (2015). Communication in healthcare: a narrative review of the literature and practical recommendations. *International journal of clinical practice*, 69(11), 1257-1267. <https://doi.org/10.1111/ijcp.12686>
- Wood, AT. (2013). *Communication in our lives*. USA: Cengage Learning.