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## Research Article

### Senior Citizens' Health and Social Services in Cebu City

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#### ABSTRACT

Senior citizens are an important sector in society. Some began their new career during the middle age and many continued a long legacy of productivity and passionate social service living a life of commitment. The aims of the study is to assess the senior citizen's health and social services in Cebu City. The study uses quantitative and qualitative methods. A statistical computation was used to achieve an acceptable accuracy of findings and the qualitative research double-checks the quantitative research. Furthermore, the qualitative method was used to measure the data since it allowed the participants to give in-depth, detailed answers by personal interview. The Researchers explored the participant's answers, thus clearing any ambiguity before analyzing and publishing the collected data. The study revealed that the level of implementation of social services for senior citizens was well implemented; The level of perception of health services for senior citizens were provided; The management of senior citizens office has the biggest financial appropriation; that there was no correlation between social services and the perception level since both were labeled not significant. To address the gap a substantial budget shall be allocated to the sixty (60) barangays of Cebu City to be incorporated in OSCA budget. A development plan was proposed as the output of the study.

**Keywords:** Senior citizens, health and security services, Cebu City

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#### Background

Senior citizens are considered an important sector in society and are not dependent burdens. To completely track their great

contributions is quite different since some began their new career during the middle age and many continued a long legacy of productivity and passionate social service living a life of

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commitment. The "Senior Citizens Act" in 1992 (amended in 2003 and 2010) was designed to address their basic needs by providing benefits and privileges in healthcare, income, social assistance, food, personal enhancement and leisure activities. Providing health and social services to senior citizens is a necessity rather than a luxury for them to reminisce their memorable lives and enjoy their remaining years to the fullest.

The Office of Senior Citizen Affairs in Cebu City focuses on the increased number of senior citizens of which the Office practices the multi-stakeholder approach. These services are anchored on the legal provisions of Republic Act No. 7876, the Senior Citizens Center Act of the Philippines and Republic Act No. 9994, the Expanded Senior Citizens Act of 2010 which stipulate the health and social services of Senior Citizens, the Self-Transcendence Theory of Pamela Reed (1991), the Activity Theory of Robert J. Havighurst (2002) and the Social Management Theory of Peter F. Drucker (2010).

Senior Citizens Act" in 1992 was not fully addressed by the government and this was coupled with the increased cost of living, thereby making their lives difficult. Bobby Young in his article, "Everyday Tasks Can Pose a Challenge to Senior Citizens" highlighted the different challenges they faced in their lives every single day.

The purpose of the study is to assess the senior citizen's health and safety services in Cebu City including their availing of benefits and services from the different institutions.

The researchers are concerned citizen conducted the study to explore the implementation of Senior Citizen's Welfare Act in Cebu City including their lived experiences in availing the government services mandated by law.

### **Aims of the Study**

This study aims to assess the senior citizen's health and social services in Cebu City. Specifically, this study will seek to answer the following sub-problems:

1. What is the level of implementation of social services for Senior Citizens, in terms of education, social welfare, and nutrition and how

will they manage their plans and budget, projects and activities.

2. Senior Citizens enjoy the following health services; care for the aged, medical/dental, recreational activities and physical fitness. As such, what is the level of perception of these things and how will the Senior Citizens Office manage their plans, projects and activities.
3. What are the problems encountered by OSCA in dealing with Senior Citizens and their views on the relationship between implementation and perception.
4. What recommended measures can be proposed in the developmental plan to improve the Senior Citizens' quality of life?

### **Research Method**

The qualitative and quantitative methods of research were used to assess the primary government agency involved in the management of Senior Citizens like the Office of Senior Citizen Affairs or OSCA, the social, health benefits, and services for Senior Citizens, the plans and budgets as well as the programs and activities of the organization and the problems encountered by OSCA. The descriptive research method was also used to observe and describe the behavior of a subject Senior Citizen without influencing it in any way. A statistical computation was also used to achieve findings with an acceptable degree of accuracy since qualitative research double-checks quantitative research. The Qualitative method was also used to measure the data collected during the research. This method allowed the participants to give in-depth, detailed answers by personal interview. The Researcher also had an opportunity to explore the participant's answers and clear up any ambiguity before analyzing and publishing the collected data.

### **Research Environment**

This study was conducted in Cebu City with a population of about 88,000 Senior Citizens in 2014 but however, only about 60,000 senior citizens were recipients of financial assistance given by the city government having qualified the requirements of OSCA. The eight (8) barangays in this study came from the northern and southern barangays of Cebu City namely:

Busay, Lahug, Camputhaw, Hippodromo, Inayawan, Guadalupe, Punta Princesa and Calamba.

**Research Respondents**

There were five groups of respondents in the study, namely: OSCA Council, Department of Social Welfare Services (DSWS) Supervisors, NGO Officers, Senior Citizen Presidents and their members. They were chosen on the basis of their involvement in the implementation of the R.A. 9994. Many of them are members of Senior Citizen organizations. The rest were senior citizen council officials of OSCA, Supervisors of DSWS and NGO Officers.

A focus group discussion was conducted among the senior citizen council officials during their quarterly meetings. The first group under Government is the OSCA Council and DSWS Supervisors while under the NGO are the NGO Officers from Golden Center of Cebu Incorporated. The second group is the Senior Citizen members, beneficiaries of the benefits provided by OSCA.

**Data Gathering Instruments**

Self-made questionnaires were used in the gathering of relevant data. The first part elicited data on the respondents’ (Senior Citizens and Senior Citizen Presidents) profile in terms

of age, gender and barangay. The second part dealt with the level of implementation of social services provided by OSCA in terms of education, social welfare and nutrition. It was rated using the scale: 5- very well implemented; 4 – well implemented; 3 – implemented; 2- fairly implemented and 1- not implemented. The third part dealt with the level of perception of health services in terms of care for the aged, recreational activities, medical/dental and physical fitness. The respondents were asked to rate themselves as honestly and objectively using the scale: 5 – strongly agree; 4- agree; 3 – uncertain; 2 – disagree and 1 - strongly disagree. The last part of the questionnaire dealt with the problems encountered in the implementation of the R.A. 9994.

Focus group discussions were also conducted and later interviews were also conducted to the NGO Officers. In the conduct of the interview, participants were asked a series of open-ended questions in a semi-structured format from the interview guide.

**Statistical Treatment of Data**

The statistical treatment of data used a five-point scale with numerical range, descriptive equivalent and interpretation in evaluating the social services implemented by the city government.

<u>Scale</u>	<u>Range</u>	<u>Descriptive Equivalent</u>	<u>Interpretation</u>
5	4.21-5.00	Very Well Implemented (VWI)	OSCA implemented social services in all cases.
4	3.41-4.20	Well Implemented (WI)	OSCA implemented social services in majority of cases.
3	2.61-3.40	Implemented (I)	OSCA implemented social services in half of the cases.
2	1.81-2.60	Fairly Implemented (FI)	OSCA implemented social services in a few cases.
1	1.0-1.80	Not Implemented (NI)	OSCA did not implement services.

This statistical treatment of data used a five-point scale with numerical range, descriptive equivalent and interpretation in evaluating

how health services were perceived by validators.

Scale	Range	Descriptive Equivalent	Interpretation
5	4.21-5.00	Strongly Agree (SA)	R.A. 9994 was beneficial to the validator in all cases.
4	3.41-4.20	Agree (A)	R.A. 9994 was beneficial to the validator in majority of cases.
3	2.61-3.40	Uncertain (U)	R.A. 9994 was beneficial to the validator half of the cases.
2	1.81-2.60	Disagree (D)	R.A. 9994 was beneficial to the validator in few cases.
1	1.0-1.80	Strongly Disagree (SD)	R.A. 9994 was not beneficial to the validator.

**Level of Implementation of Social Education Services for Senior Citizens**

The level of implementation of social services given to senior citizens by the city government is presented and tabulated in terms of education, social welfare and nutrition.

This refers to the education courses offered to senior citizens to fully provide them with health and social services. An example of this is the livelihood training program given by the city government.

Table 2 presents the implementation of social services given to Senior Citizens in terms of education.

Table 2. Education

n= 88

Indicators	Average Weighted Mean	Description
Media coordination to disseminate information.	3.92	Well Implemented
City government thru OSCA regular visits to the barangays.	3.86	Well Implemented
Information about benefits and privileges.	3.73	Well Implemented
Literacy classes and free education.	3.40	Implemented
Livelihood trainings in Cebu City.	3.38	Implemented
Average Weighted Mean	3.66	Well Implemented

Legend:

4.21-5.0	Very Well Implemented	1.81-2.60	Fairly Implemented
3.41-4.20	Well Implemented	1.0-1.80	Poorly Implemented
2.61-3.40	Implemented		

The following table presents the implementation of social services for senior citizens in terms of social welfare.

Table 3. Social welfare

n= 88

Indicators	Average Weighted Mean	Description
Annual assemblies and meetings for Senior Citizens' Organization.	4.24	Very Well Implemented
Special lane to avail with privileges in groceries, movie houses and other establishments.	4.18	Well Implemented

Indicators	Average Weighted Mean	Description
Monthly or quarterly basis financial assistance.	4.16	Well Implemented
Reserve or special seats in public transportation.	4.14	Well Implemented
Respect by the young generation.	4.03	Well Implemented
Average Weighted Mean	4.15	Well Implemented

Legend:

4.21-5.0	Very Well Implemented
3.41-4.20	Well Implemented
2.61-3.40	Implemented
1.81-2.60	Fairly Implemented
1.0-1.80	Poorly Implemented

### Nutrition

This refers to nutrition-assist programs and services provided to the elderly like the

feeding programs being done by OSCA every year in the different barangays as shown in this table:

Table 4. Nutrition

n=88		
Indicators	Average Weighted Mean	Description
Discounted meal payments.	3.97	Well Implemented
Quarterly feeding programs.	3.74	Well Implemented
Supply of vitamins and nutritious food.	3.69	Well Implemented
Substantial assistance in food.	3.63	Well Implemented
Discounted purchase of basic commodities.	3.57	Well Implemented
Average Weighted Mean	3.72	Well Implemented

Legend:

4.21-5.0	Very Well Implemented
3.41-4.20	Well Implemented
2.61-3.40	Implemented
1.81-2.60	Fairly Implemented
1.0-1.80	Poorly Implemented

### Level of Implementation of Health Services

#### Care for the Aged

Table 5 contains perception of social and health services for senior citizens in Cebu City in terms of care for the aged.

#### Recreational Activities

Table 6 contains the perception of social and health services for senior citizens in Cebu City in terms of recreational activities.

#### Medical/Dental Services

Table 7 contains the perception of social and health services for senior citizens in Cebu City in terms of medical and dental.

#### Physical Fitness Services

Table 8 contains the perception of social and health services in Cebu City in terms of physical fitness services.

Table 5. Care for the aged

n=88		
Indicators	Average Weighted Mean	Description
Free burial assistance.	4.17	Agree
Recreational activities.	3.99	Agree
Free hospitalization for disabled senior citizens	3.77	Agree
Quick Response Team assistance.	3.64	Agree
Free caregiver in emergencies.	3.45	Agree
Average Weighted Mean	3.80	Agree

Legend:

4.21-5.0	Strongly Agree
3.41-4.20	Agree
2.61-3.40	Uncertain
1.81-2.60	Disagree
1.0-1.80	Strongly Disagree

Table 6. Recreational activities

n=88		
Indicators	Average Weighted Mean	Description
Free movie passes and discounts	4.19	Agree
Recreational parks.	3.92	Agree
Excursions and field trips.	3.86	Agree
Parties, dances and social gatherings.	3.76	Agree
Fun runs/walk for a cause.	3.76	Agree
Average Weighted Mean	3.90	Agree

Legend:

4.21-5.0	Strongly Agree
3.41-4.20	Agree
2.61-3.40	Uncertain
1.81-2.60	Disagree
1.0-1.80	Strongly Disagree

Table 7. Medical and dental services

n=88		
Indicators	Average Weighted Mean	Description
Discounts in medical and dental.	3.91	Agree
Discounts in the purchase of vitamins and medicines.	3.74	Agree
Regular medical mission.	3.74	Agree
Eyeglasses for indigent senior citizens.	3.68	Agree
Regular visits by health care workers.	3.15	Uncertain
Average Weighted Mean	3.64	Agree

Legend:

4.21-5.0	Strongly Agree
2.61-3.40	Uncertain
1.0-1.80	Strongly Disagree
3.41-4.20	Agree
1.81-2.60	Disagree

Table 8. Physical fitness services

n=88		
Indicators	Average Weighted Mean	Description
Safe venue for regular exercise.	3.83	Agree
Lessons about proper exercise.	3.44	Agree
Qualified physical education instructors.	3.35	Uncertain
Regular assembly for the tai-chi, taeboo or zumba exercise.	3.32	Uncertain
Physical sports equipment.	3.25	Uncertain
Average Weighted Mean	3.44	Agree

Legend:

4.21-5.0	Strongly Agree
3.41-4.20	Agree
2.61-3.40	Uncertain
1.81-2.60	Disagree
1.0-1.80	Strongly Disagree

### Senior Citizens Office Management

The Office of Senior Citizens Affairs in Cebu City implements its budget for health and social services for senior citizens through a goal oriented management process.

#### Plans and Budget

Plans and budget refers to the planning of actual operations in order to consider how conditions might change, steps to undertake and

problems to consider before they arise. OSCA has its plans and budgets for the senior citizens since funds are needed to finance its various health and social activities.

In the preparation of its annual budget for senior citizens, the OSCA Management and the Senior Citizen's Council focused on the immediate needs of the majority of the senior citizens in Cebu City.

#### Projects and Activities

Table 9. Projects and activities

n=12		
Project/Activity Title	Schedule	Location
1. Valentines Day	February every year	MCWD Auditorium
2. Santacruzán	May every year	Mariners Court
3. Medical/Dental Mission	October every year	SRP
4. Senior Citizens Forum	October every year	Senior Citizens Center Social Hall, SRP
5. Senior Citizens Walk	October every year	Fuente to City Hall
6. Cultural Show and Halad	October every year	Plaza Sugbo
7. Awarding of Centenarians	October every year	Cebu Coliseum
8. Pasko ni Lolo ug Lola	December every year	Senior Citizens Park
9. Livelihood Activities	January to December	All barangays
10. Botica sa Barangay	January to December	All barangays
11. Cooperative sa Senior Citizen	January to December	All barangays

Source: OSCA Office, 2014

Valentine's Day is celebrated on February 14 every year, feast for romantic love by giving cards, letters, flowers given to spouse or partners highlighting the coronation of the Mr.

and Mrs. Valentines Day chosen among the candidates sent by each barangay.

Santacruzán is held annually in May and considered to be the “Queen of Filipino Festivals”. Senior citizens are selected to participate in this colorful pageant parade based not for the looks, but for their embodiment of traditional feminine qualities.

Medical and Dental Missions are held in October of every year and are organized by the Department of Social Welfare Department (DSWD), the OSCA Office and other NGOs. Senior citizens avail of various services, such as medical checkup and treatment, dental checkup and treatment, blood pressure checkup, blood typing, blood sugar testing and monitoring, height and weight checkup, and x-ray through the mobile van. The SM Foundation Inc. provides free medicines to the beneficiaries during the medical and dental mission.

Awarding of Centenarians are held in October of every year wherein a cash gift of P100,000 is given to every centenarian plus an increase in the senior citizens discount from 20 percent to 50 percent in the sale of goods and services. Pasko ni Lolo ug Lola is celebrated every December of every year at the Senior Citizens Park.

Livelihood activities and programs in the form of sewing, cooking, candle making, soap making, etc. are taught to them so they can have something to do during their idle time and so that they can earn extra money. Botica sa Barangay was established by concerned senior citizen officials in the different barangays thru a cooperative organization of senior citizens.

Table 10. Relationship of implementation and interpretation

Level of Perception	Level of Implementation		
	r	p-value	Decision
	-0.085	0.764	Failed to reject null hypothesis
			Interpretation
			No significant relationship

Legend:

r = Pearson r value

P-value = level of significance

Table 11. Problems encountered

	Frequency	Rank
Additional budget to fully meet the requirements of the senior citizens affairs.	88	1
Lack of home for the aged to cater indigent senior citizens.	87	2
Lack of geriatric or senior citizens ward in government hospitals.	86	3
Lack of nutritionist for indigent senior citizens.	70	4
Need for clothing to indigent senior citizen.	69	5
Senior citizens need adequate dental care.	66	6
Senior citizens need for adequate attention.	62	7
Lack of supply of vitamins and nutritious food.	60	8
Lack of substantial assistance in food.	56	9
Need for livelihood programs for senior citizens.	54	10
Lack of skills training to make senior citizens busy.	53	11
City government lacks vehicle transportation to ferry senior citizens to places of engagement.	50	12
Lack of health care workers to teach senior citizens on personal hygiene and sanitation.	49	13
Monitor compliance of private company in the giving of senior citizen discounts.	47	14

	Frequency	Rank
No seat in public transportation and no fare discount.	45	15
Lack of physical therapist facilities for senior citizens in government hospitals.	42	16
Lack of information and dissemination by OSCA on senior citizens affairs.	41	17
Lack of physical sports facilities in government parks.	38	18
No legal assistance to file complaints to violators of R.A. 9994.	34	19
No discount given.	0	20

#### \* Multiple Responses

Table 11 showed that OSCA needed additional budget to fully meet the various requirements of senior citizens with a frequency of 88. For example, in the approved 2014 Plans and Budget, the distribution of financial assistance had the biggest appropriation equivalent to 99.86% of the budget.

The second highest problem encountered is the lack of home for the aged since the number of indigent senior citizens in the city increased. It cannot be denied that there are many senior citizens in temporary shelters and in the streets unattended for nutrition and good grooming. Presently, no government home for the aged is provided.

Third problem was the lack of geriatric or senior citizens' ward in government hospitals to include in the construction of the new Cebu City Medical Center.

The fourth problem is the lack of nutritionists who are knowledgeable in dietary requirements including the list of vitamins and nutritious foods.

The fifth problem encountered is the need for clothing to indigent senior citizens who are frail, sickly or with disability and without pension or permanent source of income, compensation or financial assistance from relatives to buy clothes to protect them from bad weather and enhance their safety.

### **Respondents' Feedback on The Senior Citizens' Health and Social Services Implemented by The Cebu City Government**

#### ***Focus Group Discussion with Senior Citizens Council:***

The Council Members expressed satisfaction with the big appropriation the city

government financial assistance in the 2014 budget recognizing the city's well implementation of the health services in spite of the tight budget.

The top five (5) problems given by the Council are the following; budget for a home for the aged, geriatric ward, inadequate number of drugstores, miscommunication and lack of focus on the senior citizens' welfare.

#### ***Focus Group Discussion with DSWS Supervisors:***

The Researcher also held a focus group discussion (FGD) with DSWS Supervisors. The Supervisors lamented on the lack of centers for the abandoned and unattached senior citizens, lack of geriatric ward in government hospitals and lack of a home for the aged.

#### ***Key Informant Interview with NGO (Golden Center of Cebu)***

The researcher further held a key informant interview with NGO Officers from the Golden Center of Cebu.

### **Findings, Conclusions and Recommendations**

#### ***Findings***

The findings of the study are as follows:

1. Level of Implementation of Social Services for Senior Citizens
  - 1.1 The educational aspect was well implemented for the good coordination with the media, visitations and OSCA seminars to the different barangays for information dissemination.
    - a. The social welfare aspect was well implemented specifically on special lanes for groceries, free and discounted tickets in some movie

houses and establishments. Likewise, financial assistance was given on a monthly or quarterly basis and reserve special seats offered in public transportation.

- b. The nutrition aspect was likewise well implemented through special discounts in restaurants, and purchase of basic commodities. Further, feeding programs were also held.

## 2. Level of Perception of Health Services for Senior Citizens

2.1 For the care of the aged, senior citizens revealed that free burial assistance, hospitalization and recreational centers were provided by the city government hospitals.

2.2 For recreational activities, they revealed the unwinding and relaxation through free and discounted tickets in movie houses, recreational parks and organized excursions, field trips, parties, dances, social gatherings and fun runs or walks for a cause.

2.3 For medical and dental services, they agreed that there were medical and dental discounts, purchase of vitamins and medicines. Regular medical and dental missions from the city government were provided.

2.4 For physical fitness services, safe venues for their regular exercises were provided.

## 3. Management of Senior Citizens Office

The Distribution of Financial Assistance took the biggest appropriation considering that there are about 60,000 registered senior citizens in the city who are expected to receive Php 12,000.00 each. This started in 2009 considering the registered voters in the City in the 2007 elections were initially given Php 2,000.00 and gradually increased years later.

## 4. Relationship between the Level of Implementation of Social Services and Level of Perception between Health Services for Senior Citizens.

There was no correlation between Social Services and Perception level, both are labeled not significant.

## 5. Problems Encountered

Five ranked problems of senior citizens were identified as follows: (a) additional budget to fully meet the requirements of senior citizens' affairs, (b) lack of home, (c) lack of geriatric ward in government hospitals, (d) lack of nutritionist, (e) need for adequate clothing.

The second ranked problem was the lack of home for the aged since the increase of the number of senior citizens in the city. Most are sheltered in temporary homes and in the streets unattended in their specific needs like nutrition and good grooming. Presently, no city government home for the aged is afforded.

The third ranked problem was the lack of geriatric ward in government hospitals because of the limited budget from City government including geriatric nurses and gerontologists.

The fourth ranked problem was the lack of nutritionist who would advise senior citizens on the right vitamins and food to purchase specific sustenance considering the high cost of items in drugstores and groceries.

The fifth ranked problem encountered was the need for clothing for those who are frail, sick or disabled and without pension or permanent source of income, compensation or financial assistance from relatives since food and medicines are their priority.

## Conclusion

The health and social services provided for senior citizens in Cebu City were well implemented and attended to by the city government. The Office of Senior Citizens Affairs and the Department of Social Welfare Services exerted great efforts to ensure that senior citizens benefits and privileges are provided.

## Recommendations

Additional budget to the sixty barangays of Cebu City should be incorporated in the proposed OSCA budget. Together with the Mayor, the OSCA should request the City Congressmen the assistance from Senators and the Senate Committee for Welfare, Rural Development

and Social Justice for additional national assistance.

+ Additional budget for the City's first Home for the Aged to be incorporated in the proposed OSCA budget. The proposed Home for the Aged shall have 50 beds, constructed in the government lot located at Barangay Guba, with estimated cost to occupy 2,000 square meters is about

+ A substantial budget is needed for the City to construct geriatric ward incorporated in the proposed OSCA budget. The proposed geriatric ward shall be in the Cebu City Medical Center.

+ An additional budget for the City to upkeep the nutritional needs of indigent senior citizens. The OSCA Head should present a realistic budgetary plan to the City Council to get their recommendation and ultimately get the approval of the Mayor.

+ A substantial budget for the City to provide the clothing requirements to be incorporated in the proposed OSCA budget.

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## Appendix A. The Proposed Development Plan for Senior Citizens of Cebu City

### I. Rationale

The findings of the study revealed that the level of implementation of social services for senior citizens in Cebu City was well implemented. Senior citizens further agreed that care for the aged, medical/dental, recreational activities and physical fitness were provided and attended to by the City government.

There was also no significant relationship between the level of implementation of social services with the level of perception of health services. However, there were problems encountered and the top five problems were the following; 1) the need for additional budget to fully meet the requirements of the senior citizens affairs, 2) the lack of home for the aged, 3) the lack of geriatric ward in government hospitals, 4) the lack of nutritionist and 5) the need for clothing.

### II. Objectives

To realize the goals of improving the quality of life of senior citizens, the following should be considered as priorities:

- 1) An additional budget to improve the social and health services, 2) Construct a home for the aged to cater to the needs of indigent senior citizens, 3) Construct a twenty bed capacity geriatric ward in Cebu City Medical Center, 4) To provide proper nutrition to indigent senior citizens and 5) To provide clothing to indigent senior citizens.

### III. Timetable of Implementation

1. **First Quarter** - Request for Additional Budget for Senior Citizens, Home for the Aged, Geriatric or Senior Citizens' Ward, Nutrition and Clothing.
2. **Second Quarter** - Prepare Purchase Orders thru Competitive Bidding and Accounting Papers necessary for the release of the approved budget.
3. **Third Quarter** - Organize a team who will supervise the implementation, monitoring and evaluation of projects and activities.
4. **Fourth Quarter** - Implementation, monitoring and evaluation of projects and activities.

### IV. Budget

#### A. Personnel

Financial Assistance	Php 720,000,000.00
Salary of Job Order (OSCA)	522,720.00
Honorarium- Judges	15,000.00
Salary of Personnel for Social and Health Services	10,130,000.00
Salary of Personnel in Home for the Aged	2,844,000.00
Salary of Personnel in Geriatric Ward	1,752,000.00
Salary of Nutritionist	120,000.00
	<b>Php 735,383,720.00</b>

#### B. Maintenance and Operating Expenses

Materials for Preparation of Financial Statements and Constitution and By-Laws	Php 117,280.00
Preparation of Financial Statements and Simple Bookkeeping Seminar	100,000.00
Food and Polo Shirts for various activities	250,000.00
Rental of Sound System and Venue	9,000.00
Flowers and Balloons	6,000.00
Social and Health Services Operating Expenses	15,340,000.00

Home for the Aged Operating Expenses	2,300,000.00
Geriatric Ward Operating Expenses	26,360,000.00
Monthly Feeding Programs	360,000.00
Clothing Requirements for Indigent Senior Citizens	1,200,000.00
	<b>Php 46,042,280.00</b>

**C. Capital Outlay**

Recreational Parks	Php 5,000,000.00
	1,500,000.00
Service Vehicle for OSCA Officials and Personnel	
Ambulance (5 barangays)	15,000,000.00
Sports Equipment in Recreational Parks	2,000,000.00
Home for the Aged - Lot (2,000 sq.m. at P3,000/sq.m.)	6,000,000.00
Home for the Aged - Building (1,000 sq.m. at P20,000/sq.m.)	20,000,000.00
Home for the Aged - Service Vehicle	1,500,000.00
Home for the Aged - Ambulance	1,500,000.00
Geriatric Ward at CCMC (700 sq.m. at P20,000/sq.m.)	14,000,000.00
Geriatric Ward - Beds	200,000.00
Geriatric Ward - Medical Equipment	5,000,000.00
	<b>Php 71,700,000.00</b>
<b>D. Total Budget</b>	<b>Php 853,126,000.00</b>

**V. Output**

1. Improved social and health services for senior citizens in Cebu City.
2. Establishment of the First Home for the Aged in Cebu City.
3. Establishment of the First Geriatric or Senior Citizens Ward in Cebu City.
4. Provision of proper nutrition to indigent senior citizens.
5. Provision of clothing to indigent senior citizens.