



EFFECTIVENESS OF ADOLESCENT JOB AID MANUAL IN MANAGING HEALTH ISSUES AND CONCERNS AMONG ADOLESCENT STUDENTS OF SORSOGON STATE UNIVERSITY

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ABSTRACT

This study determined the effectiveness of the Adolescent Job Aid Manual in managing health issues and concerns among adolescent students of Sorsogon State University. Specifically, it identified the health issues and concerns faced by the respondents and determined their profile according to sex, combined family income, academic level, and academic performance. It also evaluated the effectiveness of the ADJA manual in managing adolescents' health issues and problems along General Health Concerns, Mental Health Concerns, Psychosocial Concerns, and Sexual and Reproductive Health Concerns. Further, it investigated if there is a significant relationship between the respondents' profile and the level of effectiveness in managing health issues and concerns among adolescent students of Sorsogon State University and if there is a significant difference between the rank order of the mean in the level of effectiveness of ADJA manual among the group of respondents.

Purposive sampling was used in selecting the prime respondents of this study who came from junior, senior high school, and tertiary levels with ages 12 to 21 and who had been clientele of the Health Services Unit. This Descriptive Inferential Correlational study used a validated questionnaire as the main instrument in gathering data, this was adopted from the Adolescent Job Aid Manual proposed by the World Health Organization. The data gathered were validated by the responses of the

participants in an unstructured interview administered by the researcher.

This study revealed that most of the respondents are female, have a combined family income of 5,000.00 to 25,999.00, in the collegiate level, and have an average academic performance. It was also found that the ADJA manual is very effective in managing the health issues and concerns among adolescent students of Sorsogon State University along general health concerns, mental health concerns, psychosocial concerns, and sexual and reproductive health concerns. Further, the respondents' combined family income and academic level are significantly associated with the level of effectiveness of the ADJA manual in managing their varied issues and concerns. Finally, it was divulged that there is no significant difference in the rank order of the mean in the level of effectiveness of the ADJA manual in managing adolescents' health issues and concerns.

The findings imply that adolescents' health issues and concerns should be given urgent attention and intervention. This could be done through the use of the ADJA Manual which will maintain and reinforce trust and confidentiality when providing health care for adolescents.

The use of the Adolescent Job Aid Manual was proposed to be institutionalized by putting up a Youth-Friendly Center at Sorsogon State University. The birth of youth-friendly health services with the use of the Adolescent Job Aid Manual, at Sorsogon State University, aims to reach adolescents and meet their needs in difficult and sensitive circumstances. Further, its

objectives are not only to protect young people against dangers but also to help them build knowledge, skills, and confidence as they develop to their fullest potential.

INTRODUCTION

Adolescence marks the turning point of an individual's life, establishing the foundation of their development. It is during this phase that individuals leave behind the comfort of childhood and enter a reality beset with new perceptions of life. According to Hawkins, et al. (2010), it is a period in which an individual undergoes major physical and psychological changes. Alongside this, there are enormous changes in the person's social interactions and relationships. It is a phase in an individual's life rather than a fixed period, a phase in which an individual is no longer a child but is not yet an adult.

In this period of exploration, Aubin (2012) states that adolescence is a time of opportunity, but also risk. It presents a window of opportunity because actions could be taken during this period to set the stage for healthy adulthood and reduce the likelihood of problems in future years. At the same time, it is a period of risk, when health problems that have serious immediate consequences can and do occur, a period when problem behaviors that could have serious adverse effects on health in the future are initiated.

Many adolescents make the transition to adulthood in good health and development. Unfortunately, many others do not do so. According to Serido (2015), tens of millions of adolescents' experience health and development problems that hinder their ability to study, learn, and work as well as they might have, and to grow and develop to their full potential.

Due to increasing health risk behavior among Filipino adolescents, the DOH embarks on addressing adolescent health problems through Administrative Order 34-A S 2000, the Adolescent and Youth Health Policy. It envisions well-informed, empowered, responsible, and healthy adolescents and youth. Administrative Order 34-A S 2000 states:

Keywords: Adolescent job aid manual, adolescence, general health concerns, mental health concerns, psychosocial concerns, and sexual and reproductive health concerns.

“All adolescents and youth should have access to quality comprehensive health care and services in an adolescent and youth-friendly environment.”

Due to a rise in the number of adolescents and an increase in risky behaviors among Filipino adolescents over the years, the mission of Administrative Order 34-A S 2000 was to ensure that all adolescents and youth have access to quality comprehensive health care and services in an adolescent and youth-friendly environment.

The program strategies to be implemented include health promotion and behavior change for adolescents to utilize health services, practice healthy behaviors, and avoid risks. Second, improve access to quality and adolescent-friendly healthcare services and information. Third, expanding health insurance and enhancing the skills of service providers, families, and adolescents to protect their health and development. Fourth, strengthen partnerships among adolescent groups, government agencies, civil society, the private sector, families, and communities. Fifth, strengthen policy at all levels to ensure that all adolescents have access to information and services, and lastly, ensure sufficient resources to implement a sustainable adolescent health program.

However, because of the continuous threat that Covid-19 poses to the world, adolescents may experience anxiety and stress that greatly affect how they view things around them, even their performance in school and their health and development. Social distancing to slow the spread of COVID-19 can be especially hard for teens, who may feel cut off from their friends. Many also face big letdowns as graduations, proms, sports seasons, college visits, and other long-planned events are canceled or postponed. The ongoing stress, fear, grief, and uncertainty created by the COVID-19 pandemic have weighed heavily on teens. Many are having a tough time coping emotionally. Depending on their age and developmental stage, some

adolescents may have a hard time understanding what the pandemic means and how it impacts their world so not only General Health Concerns are to be taken care of, but also Mental Health Concerns, Psychosocial Concerns, and Sexual and Reproductive Health Concerns are really to watch out for.

With this concern, many individuals and institutions need to contribute to the health and development of adolescents. However, the big question is, when adolescents have health-related concerns or are experiencing health problems, to whom do they turn for help? Studies show that adolescents who are well tend to see no good reason for visiting a health facility. Those adolescents who fall ill with, for example, commonly occurring conditions such as fevers, coughs, and colds, may have no hesitation in seeking care. On the other hand, they may be less willing to do so for more sensitive matters. Not surprisingly, a key factor that influences adolescents' healthcare-seeking behavior is whether or not the act of seeking healthcare could get them into trouble with their parents or guardians.

In the Philippines, social norms strongly forbid premarital sex, therefore, unmarried adolescents are likely to be wary about seeking care even if they have a painful genital ulcer or a possible unwanted pregnancy (Muthengi, 2020). They are likely to try to deal with the problem themselves, or with the help of friends or siblings whom they can trust to keep their secrets and ensure that no one around them comes to learn about their problems. Especially with the Covid-19 global pandemic, because of distance learning, teachers will not be physically present to accommodate and listen to adolescents' complaints and concerns. However, even in distance learning, here will enter the role of schools in providing friendly health services provision for adolescents. Indeed, schools are in a unique position to provide adolescents with comprehensive health services and referrals to community-based health centers, due to their accessibility to students and their ability to provide health education and services targeted specifically for young people. Sorsogon State University has been one of the schools in

Sorsogon City, which has long been adamant in ensuring that effective adolescent service provision is delivered to its clients, especially now that learners are just being met online thru distance learning brought about by the Covid-19 Pandemic.

For long arduous years, SorSU faculty and health services personnel have been employing differentiated measures in addressing adolescents' health and development issues. However, as adolescents nowadays get much tougher to deal with, with the pandemic that we are currently battling, with the distance learning mode of education, World Health Organization strongly posits that adolescents, indeed, have significant needs for more effective health service provision. More effective health services, means, service provided by a health worker to a patient aimed at preventing a health problem, or detecting and treating one (UNICEF.2020 <https://www.unicef.org/adolescence>). It includes the provision of information, advice, and counseling with the utmost respect, sensitivity, confidentiality, and care. With this goal in mind, World Health Organization has taken up the challenge to improve the quality of adolescent health care and to further strengthen the abilities of health workers to respond to adolescents through the development of Adolescent Job Aid in 2010.

ADJA is a handy desk reference, which provides step-by-step guidance on dealing with adolescent patients. Its purpose is to enable health workers to respond to adolescents more effectively and with greater sensitivity. It provides precise and step-wise guidance on how to deal with adolescents when they present a problem or concern regarding their health and development.

ADJA has been one of the several WHO tools used by many different countries around the world. Here in the Philippines, the Department of Health has been pushing School Health Services Personnel to mandate the use of ADJA in different schools to minimize behaviors that endanger health and safety, to ensure that tomorrow's adults will be productive, and to achieve more improved and much effective

Adolescent Health Management. It is with such premise that this study was conducted. In this time of the Covid-19 Pandemic with Distance and Blended Learning as modes of Education, with the ADJA used as an intervention, the researcher

determined the effectiveness of the ADJA Manual in managing health issues and concerns among adolescent students of Sorsogon State University and came up with recommendations as the outcome of the study.

STATEMENT OF THE PROBLEM

This study determined the effectiveness of the Adolescent Job Aid Manual in managing health issues and concerns among adolescent students of

Sorsogon State University. Specifically, it answered the following questions:

1. What is the profile of the respondents according to:
 - a. sex
 - b. combined family income
 - c. academic level
 - d. academic performance
2. What are the health issues and concerns among adolescent students of Sorsogon State University along:
 - a. General Health Concerns
 - b. Mental Health Concerns
 - c. Psychosocial Concerns
 - d. Sexual and Reproductive Health Concerns
3. What are the level of effectiveness of the ADJA manual in managing the health issues and concerns among adolescent students of Sorsogon State University along:

- e. General Health Concerns
 - f. Mental Health Concerns
 - g. Psychosocial Concerns
 - h. Sexual and Reproductive Health Concerns
4. Is there a significant relationship between the respondents' profiles and the level of effectiveness of the ADJA manual in managing health issues and concerns among adolescent students of Sorsogon State University?
 5. Is there a significant difference between the rank order of the mean in the level of effectiveness of the ADJA manual among the group of respondents?
 6. What recommendation can be proposed to institutionalize the use of the ADJA manual?

GAP BRIDGED BY THE STUDY

Several studies have been conducted about different aspects of Adolescent Health Services along different perspectives. However, none of them discussed this issue in the context selected by the researcher, specifically, adolescents in Blended Learning due to Covid-19 Pandemic. As well, the previous studies focused on the roles of different agencies' collaborative efforts in improving the quality of adolescent health services in the community as a whole.

None of the studies cited specifically dealt with evaluating a specific tool that will lead to an improvement in the quality of adolescent health services. In this study, it is the effectiveness of the utilization of the Adolescent Job Aid Manual was tested and evaluated. Moreover, another feature of the present study is the development of an action plan or a project proposal to institutionalize the use of the ADJA manual. Hence, these gaps were bridged by this study.

THEORETICAL FRAMEWORK

Adolescents pose different and much more difficult challenges for the healthcare system than children and adults, due to their rapidly evolving physical, intellectual, and emotional development. Theory-based evaluation by Weiss (1995) supports this claim as the main theoretical framework used in this study.

Theory-based evaluation helps to guide the decision-making process and provides a framework for understanding what works and what needs improvement. This approach can be used to assess the effectiveness of program goals, objectives, activities, and outcomes. It is also useful for identifying potential gaps and solutions, as well as monitoring progress. Theory-based evaluation helps to ensure that

program activities are conducted in a way that will lead to desired results, by taking into account

the underlying theories that inform the program design (Weiss, 1995).

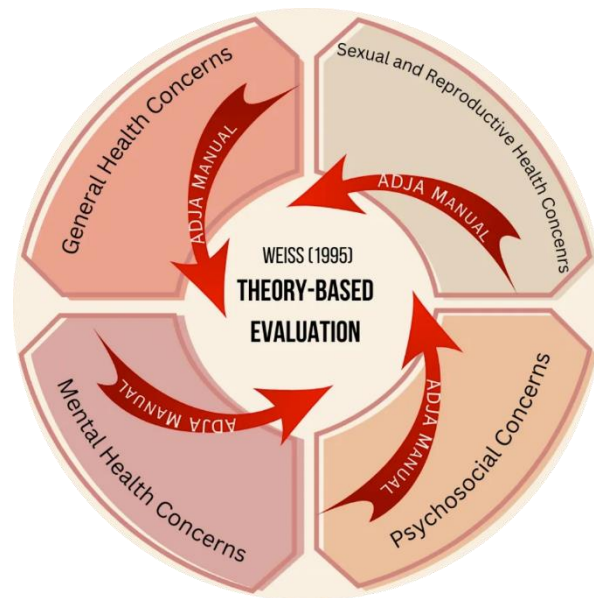


Figure 2. **Theoretical Paradigm**

Additionally, theory-based evaluation provides an opportunity to consider the underlying assumptions on which the program is based and identify potential areas for improvement and expansion. By doing so, it can help to inform further development of the program and increase its overall success in achieving its objectives. Again, the theory-based evaluation approach provides a comprehensive way to assess the overall effectiveness of a program. It allows for an examination of the assumptions on which the program is based and provides insight into how it can be improved or expanded for better results and greater success in meeting its objectives. This approach to evaluation is an invaluable tool for enhancing

programs to ensure that they are reaching their desired outcomes.

In this study, it's the effectiveness of an instrument that is being assessed. The ADJA as a WHO tool is a product of an evidence-based pursuit to achieve effective adolescent health provision. With this, theory-based evaluation allows for the use of evidence-based strategies to achieve desired outcomes and adjust programming based on findings. Theory-based evaluation is an invaluable tool for understanding programs and making informed decisions.

Similarly, the purpose of theory-based evaluation in health care is to gather the information required to bring about change

beneficial to the health of the population (Hepworth, 2007). Thus, this study is anchored on theory-based evaluation. This approach is based on the idea that any new solution or program should focus on addressing the social needs of the population. For health-related interventions, it is important to identify gaps in the current system and services, which may require a new solution. This study is anchored on the above theory since it evaluated and assessed the effectiveness of one healthcare intervention as

RESEARCH DESIGN

The Descriptive-Inferential-Correlational type of research was used in this study. According to Earl (2010), this type of research describes the linearity of a relationship between two variables. Inferring the causal relationship between the variables is a theoretical matter. Usually, an experiment generates a correlation coefficient because the theory under scrutiny would predict a correlation between an

THE RESPONDENTS

Adolescent students of Sorsogon State University-Sorsogon City Campus were the prime respondents of this study. All participants in this study were chosen through purposive sampling. Thus, students who were selected as participants had been clients of the Health Services Unit and had undergone consultation

an approach to informing resource allocation. The use of a health outcomes approach in health promotion has made increasing demands on evaluation methodologies to demonstrate program effectiveness and ultimate impact. Thus, Theory-based evaluation as the main theoretical framework used in this study brings out supporting concepts and strong claims on adolescents' apparent need for effective health service provision.

independent and a dependent variable, and the result would support a specific hypothesis.

Inferential Statistics are often used to compare the differences between the treatment groups. It uses measurements from the sample of subjects in the experiment to compare the treatment groups and make generalizations about the larger population of subjects (C.H. Kuhar, 2010).

and treatment this First Semester of the Academic Year 2022-2023. Purposive sampling was done in choosing the respondents from SorSU Junior High School, Senior High School, and Collegiate level in SorSU – Sorsogon City Campus. As shown in Table 1, the respondents are broken down as follows.

Table 1
The Respondents of the Study

Indicators	n	%	Ranking
Junior Level	60	15.58	3
Senior Level	61	15.84	2
Collegiate Level	264	68.57	1
Total	385	100	

INSTRUMENTS

This study used structured and semi-structured tools for data collection. The main instrument that was utilized in this study was a survey questionnaire adopted from the ADJA Manual, itself. The official ADJA manual can be

found, viewed, and downloaded at <https://doh.gov.ph/sites/default/files/publications/AdolescentJobAidManualFA.pdf>.

In this study, the questionnaire that was used has two parts. Part I discussed the profile of

the respondents, e.g. sex, combined family income, academic level, and academic performance. Also, a checklist of different health issues and concerns faced by adolescents was accomplished by the respondents. Further, Part II determined the level of effectiveness of the ADJA Manual for it consisted of questions regarding the service the respondents have received from the health worker. It is a checklist of choices that revealed the respondents' views

about the quality and effectiveness of the health services provided.

Further, in-depth unstructured interviews with the clients were conducted after the intervention was done. This elicited the respondents' views about the quality, success, and effectiveness of the Adolescent Job Aid Manual in managing adolescents' health issues and concerns.

Table 2
Table of Specifications

Indicators	No. of Items	Percentage	Placement
1. Profile	4	2.90	1-4
2. Health Issues and Concerns among adolescent students of SorSU			
a. General Health Concerns	5	3.62	5-9
a.1. Sub indicators	17	12.32	10-26
b. Mental Health Concerns	3	2.17	27-29
b.1. Sub Indicators	10	7.25	30-39
c. Psycho-social Concern	4	2.90	40-43
c.1. Sub Indicators	5	3.62	44-48
d. Sexual & Reproductive Health Concerns	8	5.80	49-56
d.1. Sub Indicators	15	10.87	57-71
3. Level of Effectiveness of ADJA Manual in managing health issues and concerns of adolescent students of SorSU			
a. General Health Concerns	5	3.62	72-76
b. Mental Health Concerns	3	2.17	94-96
c. Psycho-social Concerns	4	2.90	107-110
c.1. Sub Indicators	5	3.62	111-115
d. Sexual & Reproductive Health Concerns	8	5.80	116-123
d.1. Sub Indicators	15	10.87	124-138
	138	100	

DATA GATHERING PROCEDURES

The following procedures were followed in conducting this research study.

Permission to conduct the study. Permission was sought from the concerned officials, specifically, from the President of Sorsogon State University (See Appendix A for the letter and its approval). A consent letter was also secured for the respondents (See Appendix B for the respondents' Consent Letter).

Questionnaire. The questionnaire that was devised and utilized during data gathering was adopted from the ADJA manual, itself. This was checked for further revisions and approval.

Validation of Instrument. The first draft of the questionnaire was presented to the panel and the adviser for corrections and suggestions. Upon checking with the concerned individuals, changes were made and revisions were adopted in the drafting of the improved

questionnaire. Before the administration of the survey, the researcher conducted a dry run, which ensured the validity and reliability of the instrument. The survey was administered to 10 students of SorSU-LHS and 10 college students from the SorSU Tertiary Department who had already been clients in the SorSU Health Services Unit. These 20 students were not included anymore in the actual survey that was administered. After the dry run, the researcher drafted the final questionnaire, and the survey was administered to the respondents.

Gathering of Data. To gather the needed data, the respondents who came for consultation were accommodated and were given health services with the use of the Adolescent Job Aid Manual, its step-by-step guidance and algorithm. After treatment, clients were advised to return for a follow-up consultation. The unstructured

interview was conducted during the follow-up consultation. The questionnaire was also given and this determined their personal opinions about the services of the Unit, this also determined their health issues and concerns and how effective were the services provided to them with the use of the ADJA manual.

Retrieval of documents from the respondents. The accomplished survey questionnaires were retrieved from the respondents right after the follow-up consultation. These were checked accordingly if parts of the questionnaire were correctly answered.

Tabulation of Data gathered. The responses of the respondents were tabulated accordingly with the use of appropriate statistical tools.

ETHICAL CONSIDERATIONS

Several ethical considerations were taken into account to ensure that the study was conducted appropriately. First and foremost, the purpose of the research was explained to the participants, they were informed what the study is about, the risks and benefits of taking part, how long the survey and interview will take and they were fully informed that they are free to choose whether they want to participate, and they can withdraw from the study anytime without any negative repercussions. In the questionnaire, participants were not required to indicate their names so their identities were fully protected. It was further explained to the participants that some of the questions regarding their issues and concerns may bring up negative emotions. Thus, the participants were assured that all their information, responses, and the data they

provided would be kept highly confidential. The data gathered were also stored in a laptop safeguarded with a password to which the researcher has sole access.

At the end of the interview, the participants were debriefed by talking about the interview process itself and the impact of the interview. The debriefing aimed to ensure that the participants were not left emotionally harmed or traumatized from the survey and interview conducted. The observable benefits of the study were immediate as the participants stated that they enjoyed the entire process. The participants all appeared freely engaged in the conversations and this indicates that the interview process allowed the participants to share their stories in a safe environment and without being judged.

NORMS AND INTERPRETATION

Below is the scale, which was used to determine how effective is the ADJA Manual in

managing the health issues and concerns of SorSU adolescent students.

Level of Effectiveness

<i>Scale</i>	<i>Range</i>	<i>Verbal Interpretation</i>
5	4.5-5.0	Very much Effective
4	3.5-4.49	Very Effective
3	2.5-3.49	Effective

2	1.5-2.49	Slightly Effective
1	1.0-1.49	Not Effective

STATISTICAL TREATMENT

The data gathered in the study were tallied, analyzed, and interpreted with the use of appropriate statistical tools and measures. To answer problem 1, frequency count and percentage were used to get the descriptive data that identified the profile of respondents according to sex, combined family income, and academic performance. To identify the health

issues and concerns, frequency count, percentage, and ranking were also used. Weighted mean was used to determine the level of effectiveness of the ADJA Manual in managing health issues and concerns of SorSU adolescent students along with General Health Concerns, Mental Health Concerns, Psychosocial Concerns, and Sexual and Reproductive Health Concerns.

To test the significant relationship between the profile of the respondents to the level of effectiveness of the ADJA Manual in managing health issues and concerns of SorSU adolescent students, the chi-square was used.

Formula: $x^2 = \frac{(fo-fe)^2}{fe}$

where: x^2 = unknown
 fo = observed frequency
 fe = expected frequency

To test the significant difference in the rank order of the mean in the level of effectiveness of the ADJA manual in managing health issues and concerns among the group of respondents, the Kendall Coefficient of Concordance was used.

Formula:

$$W = \frac{S}{\frac{1}{2} K^2 (N^3 - N)}$$

where: W = Unknown
 S = Summation of the squared deviation from the mean of ranks
 $\frac{1}{2}$ = Constant
 K = No. of Columns
 N = No. of entities

The significance of Coefficient Concordance was determined using Chi-Square Test (Siegel, 1988).
 Formula:

$$x^2 = K (N-1) W$$

where: x^2 = Unknown
 K = No. of columns
 N = No. of entities
 W = Computed Kendall

Level of Significance. The significant level was set at 0.05 level.

FINDINGS

Based on the data collected, the following are the findings of the study:

1. The profile of the students relative to sex is that out of the 385 respondents, 186 (48.3%) are male and 199 (51.7%) are female. In terms of combined family income, the majority of the respondents (49.9%) had a combined family income between 5,000–15,999, and 14.8% had a combined family income between 16,000-25,999. The rest of the students (35.3%) have 26,000 and above combined family income.

Concerning academic level, most of the respondents (68.57%) were at the collegiate level, 15.58% were at the junior level, and 15.85% were at the senior level. Also, along academic performance, there are 90 or 23.38% of the respondents were performing above average academically, 292 (75.84%) students were performing average, and 3 (0.78%) students have below average academic performance.

2. The health issues and concerns faced by adolescents along with general health concerns were identified as toothache and headache with 58% followed by Severe Dental Caries (12.97%), being overweight, and gum bleeding/swelling (4.74%), tenderness/swelling of breast just before menstrual period (3.16%) and being underweight (2.85%). In terms of Mental Health Concerns, rank 1 is anxiety, followed by difficulty sleeping and problems concentrating. Next on the list is a change in appetite that led to a change of weight and feeling restless at times. These were followed by feeling less confident, (4.35%) and feeling guilty about something (4.35%), respectively.

Concerning Psycho-social Concerns, 57.14% of the respondents are experiencing symptoms such as confusion stupor, mood swings, drunken gait, and impaired judgment. Rank 2 is Smoking and Tobacco Use, which is experienced by 3 adolescents or 42.86% of the respondents. This was followed by Substance Use and Physical/Sexual Abuse. Along Sexual and

Reproductive Health Concerns, 24.14% of the respondents were experiencing pain in the lower abdomen during menstruation. Rank 2 is having a Menstrual cycle of more than 21 days or less than 35 days which is experienced by 10 adolescents. Rank 3 is having no period for the last three months. These were followed by abnormal vaginal discharge, (8.62%) and frequent spotting/bleeding between periods (6.90%).

3. The level of effectiveness of the ADJA manual in managing the health issues and concerns among adolescent students of Sorsogon State University along general health concerns is generally very effective with an overall weighted mean of 4.10 with the senior level giving the highest composite mean of 4.01. On the other hand, the junior level gave this area the lowest weighted mean of 4.36.

In terms of mental health concerns, the students generally assessed this as very effective with an overall weighted mean of 4.12. In particular, the junior level evaluated this area with the highest weighted mean of 4.37 whereas the collegiate level rated it with a composite mean of 3.92 which is the lowest value.

Concerning psychosocial concerns, the students rated this with an overall weighted mean of 4.11 which is interpreted as very effective. Specifically, the junior level gave the highest weighted mean of 4.30 whereas the senior level delivered the lowest weighted mean of 3.92.

Along sexual and reproductive health concerns, the students generally assessed this as very effective with an overall weighted mean of 4.20. In particular, the junior level gave the highest weighted mean of 4.48 while the lowest composite mean was 3.95 which was delivered by the collegiate level.

4. In terms of general health services, the computed X^2 value of 74.24 and 38.49 for combined family income and academic

level, respectively, are greater than the tabular X^2 values of 55.76 and 15.51 with degrees of freedom of 36 and 8, correspondingly, at 0.05 level of significance. Thus, the rejection of the null hypothesis. It means that there is a significant relationship between respondents' combined family income and academic level to the level of effectiveness of the ADJA manual in managing their health issues and concerns.

Concerning mental health concerns, the computed X^2 values of 70.07 and 15.09 for combined family income and academic level, correspondingly, exceed the tabular X^2 values of 55.76 (df=36) and 15.51 (df=8) at 0.05 level of significance. Hence, the null hypotheses are rejected and this implies that the said respondents' profiles are significantly related to the level of effectiveness of the ADJA manual in managing their health issues and concerns.

Along psychosocial concerns, the computed X^2 values of 68.30, 21.61, and 16.29 for combined family, academic level, and academic performance, respectively, are greater than the tabular X^2 values of 55.76 (df=36) and 15.51 (df=8) at 5% significance level. Therefore, the hypotheses which are stated in null form are rejected. This indicates that the respondents' combined

family income, academic level, and performance are significantly dependent on the level of effectiveness of the ADJA manual in managing their health issues and concerns.

Relative to sexual and reproductive health concerns, the computed X^2 values of 78.54 and 32.90 for combined family and academic level, correspondingly, exceed the tabular X^2 values of 55.76 and 15.51 with degrees of freedom of 36 and 15, respectively, at 0.05 level of significance. Thus, the rejection of the null hypotheses means that there is a significant relationship between the said respondents' profile and the level of effectiveness of the ADJA manual in managing their health issues and concerns.

5. The computed X^2 values of 19.68, 8.64, 0.96, and 20.58 for general health concerns, mental health concerns, psychosocial concerns, and sexual and reproductive health concerns, respectively, are less than the tabular X^2 values of 43.77 (df=32), 28.87 (df=18), 15.5 (df=8), and 43.77 (df=28), correspondingly, at 0.05 level of significance.
6. A project proposal was planned and prepared based on the results of the study.

CONCLUSIONS

Based on the findings of the study, the researcher arrived at the following conclusions:

1. Most of the students are female, have a combined family income of 5,000 to 25,999, are at the collegiate level, and have an average academic performance.
2. The health issues and concerns of adolescent students along General Health Concerns revolve around Dental Health Concerns and Nutritional Concerns. Along Mental Health Concerns, adolescents mainly experience Anxiety and Depression. In terms of Psychosocial Concerns, adolescents were indicative of Alcohol and Smoking/Tobacco Use.

Along Sexual and Reproductive Health Concerns, adolescents' complaints are mostly pain during menstruation and irregular periods.

3. The ADJA manual is very effective in managing the health issues and concerns among adolescent students of Sorsogon State University along general health concerns, mental health concerns, psychosocial concerns, and sexual and reproductive health concerns.
4. The respondents' combined family income and academic level are significantly associated with the level of effectiveness of the ADJA manual in managing their health issues and

concerns along general health concerns, mental health concerns, psychosocial concerns, and sexual and reproductive health concerns. Similarly, academic performance is significantly related to the psychosocial concerns of the students.

5. There is no significant difference in the rank order of the mean in the level of effectiveness of the ADJA manual in

RECOMMENDATIONS

Based on the results and in the light of the findings and conclusions drawn, the following recommendations are proposed:

1. The school nurse/health practitioner should have a seamless provision of record keeping and documentation of the school's clientele profiles and health data because these records of their profiles such as sex, family income, academic level, and academic performance may have a significant bearing on the problems, issues, and concerns being faced by adolescents. These records should be accurate, comprehensive, and flexible enough to retrieve clinical data, maintain continuity of care, and track patient/client outcomes.
2. Adolescents' health issues and concerns should be given urgent attention and intervention. This could be done through the use of the ADJA manual, which will create and maintain trust and confidentiality when providing health care for adolescents. Also, health practitioners need to have a thorough understanding of the varied adolescents' issues and concerns, their causes, and their effects on their well-being. Health practitioners should also have the skill to know how to evaluate and tailor the best-suited intervention for adolescents to attain their fullest potential.
3. The ADJA manual may be officially used as a prime instrument to effectively manage the health issues and concerns among adolescent students of Sorsogon State University. The ADJA manual may also be further enhanced to make it more

managing health issues and concerns among the group of respondents along general health concerns, mental health concerns, psychosocial health concerns, and sexual and reproductive health concerns.

6. A Youth Friendly Center was proposed to institutionalize the use of the ADJA manual.

responsive and more effective toward the needs of adolescents.

4. The respondents' profiles such as sex, family income, academic level, and academic performance may be duly noted/considered when tailoring health interventions to ensure that they are suited and most effective. Also, sincere efforts should be made to ensure that adolescents who are considered below-performing academically and those who belong to low-income families are provided with the necessary resources such as nutritional & dental education, mental health and psychosocial awareness promotion and campaign, reproductive health education, and support to help them manage their health issues and concerns.
5. The effectiveness of ADJA in managing adolescents' health issues and concerns may be investigated further by exploring potential factors such as individual differences in coping mechanisms, access to healthcare resources, and varied cultural factors. Also, further evaluations on the use of ADJA may be investigated if it is also applicable and effective in managing a variety of health concerns in a wide range of setting and different contexts and populations.
6. The project proposal on putting up a SorSU Youth-Friendly Center with the utilization of the ADJA manual may be forwarded to the concerned authorities for further review and evaluation before its approval and implementation. Further studies may be conducted to evaluate the effectiveness of the ADJA

manual in a much wider scope and different contexts or locales. A bigger number of respondents and the inclusion of other variables concerning the

respondents' profile could be also done to derive new findings and address research gaps.

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