

Institutional Assessment of Geriatric Nursing Home Facilities in the Philippines

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Abstract:

This study assessed the different geriatric nursing home facilities in the Philippines in terms of their organizational management, health services, financial management and human resource management. Out of twenty-two (22) institutions in Region 4a and NCR that were sent letters for the conduct, only three institutions ultimately agreed. These are: 1) SinagKalinga Foundation Inc. in Lucban, Quezon; 2) Kiwanis Foundation Home for the Indigent Aged in Lucena City, Quezon and; 3) Nazareth 'BahayPag-ibig' Foundation in San Pablo City, Laguna. Descriptive analysis was employed in order to analyze scores from the survey. Measures of central tendencies were used in order to provide a picture of an average patient, employee and management personnel. Based on the data collected from thirty-four (34) patients and employees residing/working in three different geriatric institutions, SinagKalinga Foundation Inc. garnered the highest mean scores compared to Kiwanis and Nazareth Foundations, across the key areas from both the perspectives of patients and employees. The analysis of the four (4) areas revealed that these aspects are actually interrelated. This means that a good management practices in one aspect impact the quality of the others. The results of this study found that SinagKalinga Foundation Inc.'s organizational structure and nature of operations are the main reasons for its predominance among the four (4) aspects in general.

Keywords :Aging, elderly, geriatric nursing, nursing home, old age,

I. Introduction

The number of older people who are no longer able to look after themselves in developing countries is forecast to quadruple by 2050. Many of the very old lose their ability to live independently because of limited mobility, frailty or other physical or mental health problems. Many require some form of long-term care, which can include home nursing, community care and assisted living, residential care and long stays in hospitals.^[1]

This growth will certainly pose a challenge to country governments, particularly to the developing countries, in caring for their aging population. In the Philippines, the population of 60 years or older was 3.7 million in 1995 or 5.4% of total population. In the CY 2000 census, this has increased to about 4.8 million or almost 6% (NSCB). At present there are 7M senior citizens (6.9% of the total population), 1.3M of which are indigents. With the rise of the aging population is the increase in the demand for health services by the elderly. A study done by Racelis et al (2003) on the share of health expenditure of Filipino elderly on the National Health Account, the elderly are "relatively heavy consumers of personal health care (22%) and relatively light consumers of public health care (5%)." From out-of-pocket costs, the aged are heavy users of care provided by medical centers, hospitals, non-hospital health facilities and traditional care facilities.^[2]

The implications of this on Philippine development are significant, specifically on social welfare dimensions. An important point in this regard is the quality of life of the elderly i.e., beyond ensuring their basic survival needs of food and health, an enabling environment should be nurtured by way of support services and opportunities for senior citizens to continue their self-development and to contribute to community and national development.^[3] The objective of the study is assess the different geriatric nursing facilities in the Philippines to determine the best practices that may facilitate the 'improvement of service infrastructures and management of institutions' as well as the 'delivery of social and human services' which will ultimately benefit the senior citizens.

II. Literature Review

1.1. Ageing Population in the Philippines

In the Philippines, the number of older people is increasing rapidly, faster than growth in the total population. In 2000, there were 4.6 million senior citizens (60 years or older), representing about 6% of the total population. In one decade, this grew to 6.5 million older people or about 6.9% of the total population. The National Statistics Office projects that by 2030, older people will make up around 11.5 % of the total population. An ageing population increases the demand for health services. Older people suffer from both degenerative and communicable diseases due to the ageing of the body's immune system. The leading causes of

morbidity are infections, while visual impairment, difficulty in walking, chewing, hearing, osteoporosis, arthritis and incontinence are other common health-related problems. According to the Department of Social Welfare and Development (DSWD), a nearly a third (31.4%) of older people were living in poverty in 2000. Currently, this number is estimated to be 1.3 million older people. More than half of all older people (57.1%) were employed in 2000. More males were employed (63.6%) than women (37.4%). The majority of those employed (41%) were involved in primary economic activities such as farming, forestry work and fishing.^[4]

In the dissertation of Dr. Letty G. Kuan, RN, RGC, EdD entitled "*Retirement and Role Discontinuities*", she found out that retirement is an inevitable change in one's life. It is evident in the increasing statistics of aging population accompanied by related disabilities and increased dependence. This developmental stage, even at the later part of life, must be considered desirable and satisfying though the determination of factors that will help the person enjoy his remaining years of life. It is of primary importance to prepare early in life by cultivating other role options at age 50 to 60 in order to have a rewarding retirement period even amidst the presence of role discontinuities experienced by this age group

She also identified determinants of positive perceptions in retirement and positive reactions toward role discontinuities:

1. Health Status – refers to physiological and mental state of the respondents, classified as either sickly or healthy
2. Income – (economic level) refers to the financial affluence of the respondent which can be classified as poor, moderate or rich.
3. Work Status
4. Family Constellation – means the type of family composition described either close knit or extended family where three or more generations of family members live under one roof; or distanced family, whose members live in separate dwelling units; or nuclear type of family where only husband, wife and children live together.
5. Self-Preparation^[5]

1.2. Nursing Home in the Philippines

In the Philippines, the idea of sending old family members to institutional care such as nursing homes continues to receive a negative perception. Filipinos believe that caring for a family member is a filial responsibility and should not be transferred to external institution. Hence, nursing home in the Philippines, which are mostly run by the government and NGOs care for those elderly people who are generally abandoned by their families. It is only fairly recent that private nursing homes were established to care elderly people whose families can afford to pay for the cost of professional geriatric care. The trend in nursing homes is gradually changing, due to the changing social dynamics brought about by globalization and industrialization in the country. For people who have less time and means to care for their aged parents or grandparents but have the financial capability to do so, the idea of professional care in nursing homes becomes a welcome alternative.^[6]

In 1985, the Philippines government has created the Philippines Retirement Authority (PRA) to attract and assist foreign nationals to invest and retire in the country through land and real estate investment schemes. Now under the Department of Tourism, the program has been coupled with government effort to promote Philippines as a tourist and retiree haven in the region. Processes for retirement visa application and entry to the Philippines have become easier to make the country a top choice for foreign retirees. In fact, the PRA (2013) reports a surge of retirement facilities being established in the following provinces: Cebu, Batangas, Laguna, Tagaytay (in Cavite), Pampanga and Subic (in Zambales). The retirement market in the country has now expanded to include institutional and home-based care for elderly clients needing medical and daily care. Several caring institutions in the Philippines have begun to cater to elderly foreign nationals for long-term care. These nursing homes have accommodated elderly patients of various nationalities: American, Canadian, Chinese and Japanese among others.^[7]

III. Methodology

In order to facilitate the assessment, descriptive research was specifically purposive sampling. The researcher initially surveyed on the presence of geriatric institutions in CALABARZON after which, letters of permission to conduct surveys were sent to the respective management. Although more than 15 geriatric institutions were asked to participate, only 3 agreed to the survey which is quite a testament to the inherent 'high degree of discretion' among these institutions. After the initial selection of institutions, two types of surveys were performed in each institution. The first survey was designed to facilitate assessment on two angles; both patients and the management. Complete enumeration was employed among patients who are physically and mentally fit to participate in the survey. On the other hand, the participants from the management side were only those which the organization allowed. The research was thus able to explore not only comparisons/contrasts among institutions but that of patients and the management as well.

The second type of questionnaire which is designed to be filled-up both by the researcher and representatives from the institution, aimed to gather information pertaining to organizational structures, human resource management, health programs, financial management.

The researcher scheduled personal visits to the three geriatric institutions. Each question was thoroughly read and explained together with the corresponding rating system to the respondents. For instances when respondents were not able to immediately give answers to some questions, the data gatherer would proceed first to the next questions, after which, they will go back to questions which somehow for some reasons the respondents found challenging.

A minimum of two visits were done for each of the three institutions. This frequency was made necessary particularly by the second questionnaire. The researcher was therefore able to validate information on the profiles of the homes and became acquainted with their facilities. After the conduct, contents of the survey were encoded using Excel.

Research Instrument

Descriptive analysis was employed in order to analyze scores from the set-A survey. Measures of central tendencies were used in order to provide a picture of an average patient, employee and management personnel. In order to interpret the weighted means, a range scale shown in table 1 was utilized.

Table 1. Transmutation table for weighted mean analysis

Point	Scale	Descriptive Analysis
5	4.21 – 5.00	Strongly Agree
4	3.41 – 4.20	Agree
3	2.61 – 3.40	Uncertain
2	1.81 – 2.60	Disagree
1	1.00 – 1.80	Strongly Disagree

IV. Results And Discussion

The assessments of institutions were facilitated by comparing their respective operations and facilities with that of the Philippine standards for a health-care facility. Moreover, the Likert-scale questionnaire provided another line of assessment from the angles of the implementers and the end-users or patients.

4.1. Organizational Management & Human Resource Management Assessment

SinagKalinga Foundation, Inc. (SKFI) is an accredited non-government organization (NGO) established in 1995 and is duly accredited by the Department of Social Welfare & Development (DSWD). The operation of SKF is unique among institutions under this scholarship since it operates both as a profit and non-profit institution. As shown in Figure 1, the board of directors (BOD) of SKFI through its manager caters both to private individuals who can afford to pay and those who were referred to by the DSWD. It is the researcher's impression that the BOD is quite involved in all the operations of SKFI as the researcher had to get the board's approval to conduct the study in the institution. Majority of those who compose the SKFI's current board are either nurses or medical doctors, thus have a good background in the field of geriatrics. SKFI's activities such as annual planning, fund raising activities as well as repair and maintenance activities are relatively structured among the three institutions considered in this analysis. The board of directors regularly meets once a month and during these occasions, reporting is often being conducted by the manager.

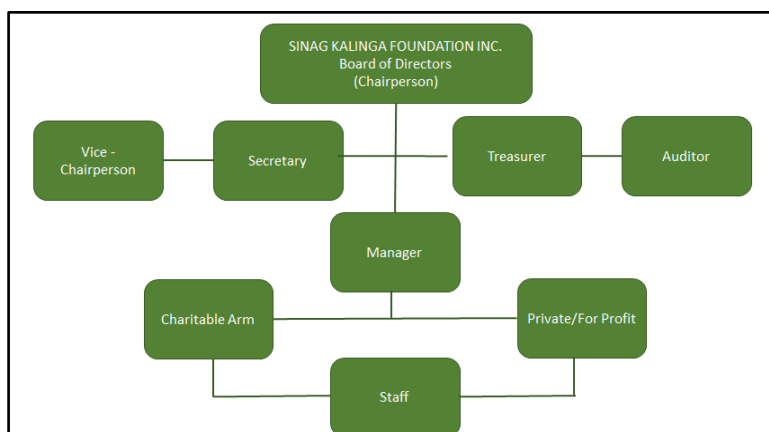


Figure 1. Organizational structure of SinagKalinga Foundation Inc. in Lucban, Quezon

On the other hand, Nazareth BahayPag-ibig Home for the Aged, Inc. is a charitable institution under the management of the Diocese of San Pablo City in Laguna. What's unique about this organization is that it operates solely through volunteer staff. And since the Diocese has a relatively 'large flock' of congregation, it has many volunteers composed of people from different ages and walks of life. Personal interview with the management revealed a diversity of volunteers from licensed medical doctors to high school students whom the foundation assists in terms of their schooling. However, due to its charitable orientation and sectarian nature, Nazareth is the most informal among the three institutions in terms of management. Almost all decisions are made by the head of the religious group in lieu of a board of directors present in the other two institutions. Nazareth's organizational structure is illustrated in figure 2.

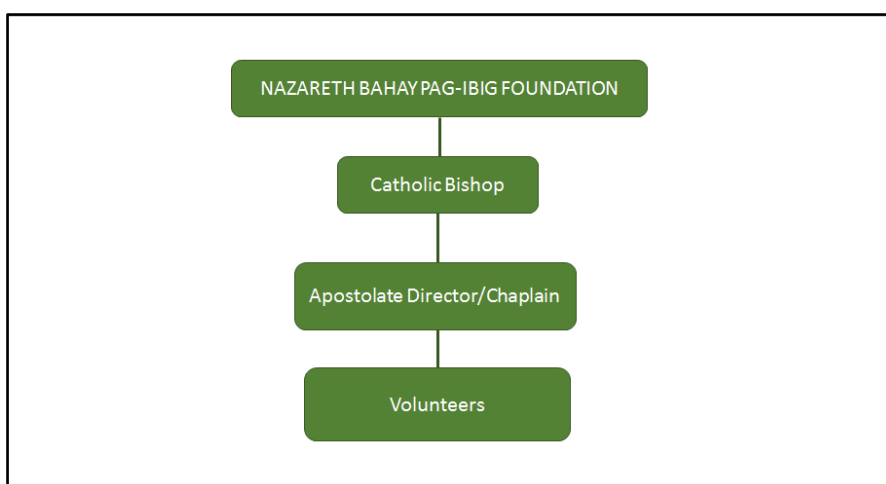


Figure 2. Organizational structure of Nazareth Foundation in San Pablo City, Laguna

Finally, Kiwanis Foundation for the Indigent Aged Inc. (KFIA) is an institution directly under the supervision of Kiwanis Club of Lucena City as shown in figure 3. KFIA was established in 1974 which aims to give shelter to the abandoned & neglected female elderly of Lucena City and neighboring towns in Quezon Province. As an institution operating under an international club, KFIA occasionally receives financial and technical support from its mother organization. The officers of the Kiwanis Club of Lucena determine who will be the Chief Executive Officer (CEO) among its members. The CEO is in charge of all the operations of the home for the aged from financial budgeting, repair and maintenance, fund raising activities and acceptance of new patients all of which are subject to the approval of the officers of the club. Since KFIA's organizational structure is comparatively 'flat' compared to SKFI, the conduct of its organizational management is less formal. The club meets regularly on Friday in order to discuss issues and decide on plans of activities including matters pertaining to the foundation.

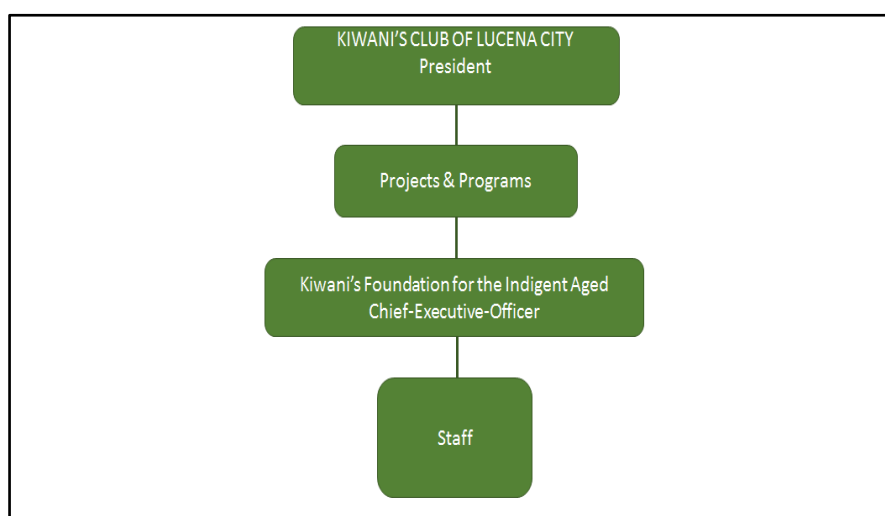


Figure 3. Organizational structure of Kiwanis Foundation in Lucena City, Quezon

The organizational assessment of the three geriatric institutions was facilitated through the questionnaire which pertains to questions on ‘organizational management’ and ‘human resource management’. Table 2 shows the comparative organizational performance of the geriatric institutions as rated by the patients as well as the employees. Moreover, an overall score was also provided in order to get a general idea of the performance of the institutions in this area.

The aspect of organizational management was ascertained through nine questions pertaining to the clearness of vision & mission, unity of management, division of labor, proper evaluation etc. The mission and vision statements are of a particular importance since these serve as the guiding principle of any institution in administering their operations. It is crucial that both the clients and the management adequately understand their mission & vision as this has direct implications on the quality of services rendered. The results show that both among patients and the management, SinagKalinga gained the highest weighted mean score of 3.67 and 4.50 respectively. When interpreted using the range scale, these mean that patients in SinagKalinga mostly agree on the notion that they clearly understand the mission & vision statements on their organization while the management strongly agree on the notion.

Table 2. Comparative organizational performance of geriatric institutions in the Philippines

Aspects	Weighted Mean, Patients				Weighted Mean, Employees				Weighted Mean, Total*
	Sinag	Nazareth	Kiwanis	Mean	Sinag	Nazareth	Kiwanis	Mean	
1. Vision & Mission are clear & easily understood	3.67	1.17	2.80	2.44	4.50	3.00	3.50	3.25	2.82
2. Management has unity	3.00	3.33	4.60	3.55	4.75	4.20	2.75	3.94	3.74
3. Management open to new ideas & policies	3.33	2.50	3.00	2.94	4.75	3.60	3.50	3.94	3.42
4. Institution is patients' centred	4.00	3.67	3.80	3.89	4.25	4.40	4.75	4.44	4.15
5. Division of labour is practiced	4.50	3.83	4.20	4.22	4.00	4.00	4.25	4.00	4.12
6. Reward system is in place	3.83	3.00	2.81	3.33	3.25	3.80	4.00	3.56	3.44
7. Challenges adequately addressed	3.17	3.33	2.40	3.39	4.00	4.00	3.25	3.63	3.50
8. Regular evaluation is practiced	3.00	2.33	2.40	2.56	3.75	3.40	3.75	3.50	3.00
9. Salaries & benefits are adequate	4.00	2.17	2.80	2.78	2.25	2.80	3.50	2.85	2.81
Average	3.61	2.81	3.20	3.23	3.94	3.69	3.69	3.68	3.44

Across all questions under this area, SinagKalinga garnered the highest weighted average both among the patients with a score of 3.61 and the employees with a score of 3.94. Overall, all three institutions’ patients and employees said that they ‘agree’ (mean = 3.44) on the statement that they clearly understand their respective institutions’ vision and mission. Later in the analysis, it will be explored whether the differences of weighted means among patients across institutions were statistically significant. This analysis will also be undertaken for patients as well as across institutions combining the scores of patients & the management.

The way an institution manages its human resources is another dimension of organizational performance. In the first place, a service industry such as the care for elderly is one that can be characterized as labor intensive. Therefore, the way the institution manages its human resources has a significant impact on the quality of its organizational performance.

The assessment of this aspect is quite interesting and an eye-opener at the same time. As prior discussions revealed, the organizational structure of the three institutions under this study are quite different among each other. SinagKalinga operates as both charitable and for profit, and although this study included only the charitable arm of SinagKalinga, personal interview with the management revealed that the charitable part also enjoys the amenities coming as a ‘spillover’ from the ‘for-profit’ side. Thus, according to the management, the patients residing on the charitable facilities become better-off through the presence of facilities and staff shared by the private half of SinagKalinga. On the contrary, the other institutions operate solely as charitable institutions. This nature means that Nazareth & Kiwanis have to depend entirely on donations for their financial resources. In order to address this issue, foundations usually conduct fund raising activities in order to augment

their financial capability, though this financial stream is still irregular compared to regular incomes achieved by semi-private geriatric institutions.

The results of the comparative analysis on human resources among geriatric institutions as shown in Table 3 support the notions put forward in the discussions outline above. As a matter of fact, SinagKalinga did in fact garner the highest mean score among institutions as rated by the patients. On the other hand, the results among employees showed that Nazareth gained the highest mean score among institutions. The reason behind this, as revealed by the interview, has something to do with the kind of culture being cultivated by the Nazareth Foundation which emphasizes on voluntarism and community service. The researcher also perceived a high degree of personal & spiritual fulfillment among staff of Nazareth who are all working on a voluntary basis. Kiwanis foundation garnered the lowest average score among the three. Although Kiwanis staff also work on a voluntary basis, they may not be receiving the level of spiritual support enjoyed by those workers under a parochial-type of foundation such as Nazareth.

Table 3. Comparative human resources management among geriatric institutions in the Philippines

Aspects	Weighted Mean, Patients				Weighted Mean, Employees				Weighted Mean, Total*
	Sinag	Nazareth	Kiwanis	Mean	Sinag	Nazareth	Kiwanis	Mean	
1. Management treats me well	4.33	3.57	3.40	3.77	4.67	4.38	4.00	4.44	4.09
2. I know the head of institution	3.50	4.23	3.80	3.94	3.00	4.38	3.75	3.88	4.91
3. The staff are qualified for their jobs	4.00	3.57	3.80	3.78	4.00	3.63	3.25	3.63	3.71
4. There is no 'favouritism' in the management	3.67	3.00	3.60	3.39	4.25	3.75	3.75	3.88	3.62
5. I would like to continue working/staying in this institution	3.83	3.43	3.80	3.67	3.75	4.38	3.00	3.88	3.76
Average	3.87	3.56	3.68	3.71	3.93	4.10	3.55	3.94	4.02

4.2 Assessment on Health Programs

The institutions offer diverging health services depending on their financial and facilities endowments. SinagKalinga offers the most number of health-related services among the three which include: 1) counseling; 2) medical services for Alzheimer’s disease, Hypertension, Arthritis and even Tuberculosis. On the other hand, Nazareth and Kiwanis foundations in general focus solely on care-giving; usually they outsource medical treatments from nearby hospitals. While SinagKalinga pays for the services of some of their doctors, the medical practitioners attending to Nazareth and Kiwanis offer their services on a purely voluntary basis.

Table 4 shows the comparative analysis of medical services among the three institutions as rated by their respective patients and employees. The health aspect was assessed using four questionnaires pertaining on the effectiveness, qualifications, modernity and affordability of health services offered. Kiwanis garnered the highest mean score among patients while SinagKalinga topped the survey among employees on the aspect of health programs’ effectiveness. In terms of the qualifications of attending doctors, Kiwanis’ patients once again said that they highly agree to the notion that their doctors and nurses are qualified professionals. Among employees, SinagKalinga and Kiwanis had the same average score on the assessment regarding the capabilities of attending doctors and nurses.

On the aspect of modernity and being scientific, SinagKalinga topped the survey for both among patients and employees. Finally, patients and Employees at Kiwanis foundation highly agreed to the affordability of medical services provided by their institution. Overall, SinagKalinga got the highest degree of approval among patients with a mean of 3.54 as well as employees with a mean of 3.75. This result is supported by personal inspection of research through which Sinag has been found to have adequate facilities and experts for sustaining its medical programs.

Table 4. Comparative health programs among geriatric institutions in the Philippines

Aspects	Weighted Mean, Patients				Weighted Mean, Employees				Weighted Mean, Total*
	Sinag	Nazareth	Kiwanis	Mean	Sinag	Nazareth	Kiwanis	Mean	
1. Our health programs are effective	3.67	3.57	4.00	3.72	4.25	3.13	2.82	3.38	3.56

2. We have qualified doctors & nurses	3.33	4.29	4.00	3.89	3.75	3.25	3.75	3.50	3.71
3. We subscribe to modern & scientific medical practices	3.83	2.43	2.20	2.83	4.25	2.25	2.75	2.88	2.85
4. Our health services are affordable	3.33	3.43	3.60	3.44	2.75	2.75	3.00	3.00	3.24
Average	3.54	3.43	3.45	3.47	3.75	2.85	3.08	3.19	3.34

4.3 Assessment on Financial Management

The final component of assessment concerns on the comparative financial management among institutions. This aspect was evaluated through four questions pertaining on: 1) awareness on financial utilization; 2) sourcing of funds; 3) utilization and 4) production of relevant financial statements shown in Table 5. Patients and employees from Kiwanis rated their institution highest in terms of them being aware of financial utilization by their institution. This result can be explained by the fact that Kiwanis's organizational structure is relatively the smallest among the three institutions and therefore, information such as those relating to finances are easily shared within the components of the organization.

SinagKalinga garnered the highest weighted mean in terms of sourcing out funds both among their patients and employees. This result is somehow expected since SinagKalinga has a private arm which serves as a regular source of financial inflows. Also, among the three institutions, SinagKalinga updates its facebook page the most where it places requests for donations on item and cash basis. Kiwanis conducts creative fund raising activities such as 'Binggoparakay Lola' and 'Zumbaparakay Lola' in order to raise funds, although it should be noted that these activities appear to be only occasional. The management of Nazareth said that they don't conduct any fund raising activities since they subscribe sole to voluntary donations.

In terms of utilization, patients at Kiwanis rated their management utilization as the highest while employees rated their institution highest under the same aspect. SinagKalinga was rated highest in terms of financial statement preparation both among patients and employees. Kiwanis prepares relevant financial statements once a year while Nazareth does not produce formal financial statements. Overall, Kiwanis foundation was rated highest in terms of financial management both among their patients and employees.

Table 5. Comparative financial conditions among geriatric institutions in the Philippines

Aspects	Weighted Mean, Patients				Weighted Mean, Employees				Weighted Mean, Total*
	Sinag	Nazareth	Kiwanis	Mean	Sinag	Nazareth	Kiwanis	Mean	
1. I'm aware of the institution's financial utilization	4.00	2.00	4.25	3.22	4.00	4.00	4.75	4.19	3.68
2. The institution sources money from donations, fund raising activities & own businesses	3.83	3.43	3.75	3.61	3.75	3.88	3.75	3.81	3.71
3. The institution uses majority of its budget solely on important things	3.83	3.00	4.25	3.56	3.75	4.25	3.75	4.00	3.76
4. We have relevant financial statements	3.83	2.57	3.74	3.29	3.50	3.00	3.00	3.13	3.04
Average	3.87	2.75	4.00	3.42	3.75	3.78	3.81	3.78	3.55

V. Conclusions

SinagKalinga Foundation Inc. garnered the highest ratings for the majority of the four (4) parameters both among employees and patients. This good performance of SinagKalinga Foundation Inc. can be attributed to its financial freedom compared to the other two institutions; SinagKalinga Foundation Inc. has a private arm which serves as a steady source of income. Personal interview with the management confirmed that significant portions of profits derived from the private arm of SinagKalinga Foundation Inc. are being utilized for the maintenance of its charitable institution.

In terms of organizational management, SinagKalinga Foundation Inc. topped the ratings both its patients and employees with mean scores of 3.61 and 3.94 respectively. SinagKalinga Foundation Inc. operates both as charitable and for profit institution. On the other hand, both Kiwanis Foundation Home for the Indigent Aged and Nazareth Bahay Pag-ibig Home for the Aged, Inc. are purely charitable institution and thus purely dependent on donations. As relayed by its management, SinagKalinga Foundation Inc. private arm benefits

those in the charitable arm with equipment and facilities. SinagKalinga Foundation Inc. also garnered the highest mean score for human resource management among its patients with an average of 3.87 while among employees Nazareth BahayPag-ibig Home for the Aged, Inc. got the highest rating of 4.0. Personal interviews with the employees gave the researcher an impression of high satisfaction. According to the staff of Nazareth BahayPag-ibig Home for the Aged, Inc., spiritual counsel given to them by the management translates to a sense of fulfillment. SinagKalinga Foundation Inc. topped the rating both among patients and employees in terms of health services. Due to its financial capacity, SinagKalinga Foundation Inc. can afford to offer a comparatively more diverse health services for its patients. Among the three (3), SinagKalinga Foundation Inc. solely has the facility for tuberculosis and Alzheimer's disease. Kiwanis and Nazareth fully relied on voluntary basis for their medical needs and often outsource serious medical treatments.

Among the three (3) institutions, only SinagKalinga Foundation Inc and Kiwanis Foundation Home for the Indigent Aged prepare formal financial statements. However, between these two, it was Kiwanis which is more open to show its statements. Thus, Kiwanis garnered the highest satisfaction among its employees and patients in terms of financial management.

The analysis of the four (4) areas for holistic geriatric institution revealed that these aspects are actually interrelated. This means that good management practices in one aspect impact the quality of the others. So far, the results of this study found that SinagKalinga Foundation Inc.'s organizational structure and nature of operations are the main reasons for its predominance among the four (4) aspects in general.

References

- [1]. Facts about aging. Retrieved from <http://www.who.int/ageing/about/facts/en/>
- [2]. Health and Well-being of Older Persons. Retrieved from <http://www.doh.gov.ph>
- [3]. Dr. Aurora de Leon, The Quality of Life of the Filipino Elderly in Selected Cities and Provinces, September 2014, Retrieved from <http://www.tsaofoundation.org>
- [4]. Help Age Global Network, Ageing population in the Philippines. Retrieved from <http://www.ageinasia.org>
- [5]. E.F. Octaviano & C. E. Balita, Retirement and Role Discontinuities, Theoretical Foundations in Nursing; The Philippine perspective, Ultimate Learning Series, 2008
- [6]. Katrina Navallo, Japanese elderly migrants in the Philippines: Opportunities and challenges, 2013. Retrieved from <http://www.academia.edu>
- [7]. Philippine Retirement Authority 2013 Accomplishment Report Retrieved from http://www.pra.gov.ph/dl_form/file_name/413/3rd_retirement_and_healthcare_summit.pdf

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