

Socio-Economic Status of Purok Manggahan, Barangay Pangatian, Cabanatuan City

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Abstract

The present work carried out to assess the socio-economic status of Purok Manggahan, Barangay Pangatian, Cabanatuan City to generate empirical data and information on the socio-economic condition of the barangay to determine what specific extension program addressed to the concerned barangay. The study was descriptive, and the researchers used survey questionnaires to gather data. A total of 30 household heads were interviewed to collect the necessary data concerning the research. Results revealed that most household heads were male, within the age range of 20 - 32 years old, married, Roman Catholic, farmers, and earning a monthly income of 1000 - 3000 with a 4 - 6 children. As to the socio-economic status of the respondents, they owned a house, single detached, made of light materials. Likewise, their sources of energy for lights were electricity and dried woods for cooking. Their source of potable water is a deep well. In terms of the health status of the respondents, they suffered from common diseases such as cough, fever, flu. They consult the doctor when sick. They used contraceptives in family planning. The pregnant women asked midwife when they were pregnant and gave birth at home. Majority of the respondents' children were currently studying at public school. The respondents have skills that may enable them to land jobs to sustain family needs. The researchers, therefore, suggest that there should be an implementation of livelihood projects to complement the capability developed among the residents and to give assistance and funding for the educational needs of their children and augment their financial obligations.

Keywords

Community Needs Assessment, Socio-Economic Status, Community

1. Introduction

Community needs assessments seek to gather accurate information representative of the needs of a community. Evaluations are performed before taking action and are used to determine current situations and identify issues for work. Needs assessments establish an essential foundation for vital planning (Taylor, 2017).

Further, the community needs an assessment process is an invaluable tool for involving the public in solving problems and developing goals. People have a natural tendency to resist change due to the lack of adequate information or lack of involvement in the decision making process. Taking advantage of a needs assessment can be an excellent way for the public to become involved and contribute to the outcomes (Utah State University Extension, 2018).

The goal of a needs assessment is to identify the assets of a community and determine potential concerns that it faces. A straightforward way to estimate the needs of a community is to ask residents their opinions about the development of services within the community, their satisfaction with services, and what particular services are needed. Their ideas can be used in building an agenda aimed at community change that can develop the capacity of community-based organizations that are designed to provide it's resident's services and development opportunities (Aparna, Lanum, and Balcazar, 2000).

According to Abdrabo and Hassaan (2003), socio-economic status can be ascribed to diverse variables and aspects which involve a combination of social and economic factors. Moreover, Winkleby, Jatulis, Frank, and Fortman (1992) defined socioeconomic-status as measured by determining education, income, occupation, or a composite of these dimensions.

Meanwhile, the results of the community need assessment conducted by Cuadrado and Mantiza (2016) at Barangay Saguma, Bayugan City, Agusan del Sur revealed that households within the locality are the large family with insufficient income to support the basic needs of the family, common skills acquired by the residents were gardening, livestock raising and driving. Access to safe drinking water, primary health care, livelihood programs or livelihood assistance, education and literacy assistance are the major areas of concerns identified; thus, the mentioned areas of interest are also the priority needs of the community.

This study aimed to assess the socio-economic profile of Purok Mangghan, Barangay Pangatian, Cabanatuan City to generate empirical data and baseline information on the socio-economic condition of the community and to determine the essential needs of the said community that will guide future action to be addressed through a particular community outreach program.

2. Objectives

- 1) To describe the socio-demographic profile of the respondents

- 2) To illustrate the socio-economic status of the respondents in terms of
 - 3.1) home and home facilities;
 - 3.2) health, membership and health-related practices;
 - 3.3) education of children and organizational membership of the respondents;
 - 3.4) job/occupation of the respondents;
 - 3.5) skills and skills utilized to generate income.

3. Methodology

The present study employs descriptive methods of research. Total enumeration was used involving 30 household's heads of the family in the community. The data gathering instrument used was a Community Needs Assessment tool developed by the Wesleyan Community Outreach Office. Part I of the questionnaire was composed of the socio-demographic profile of the respondents. Meanwhile, Part II consisted of socio-economic status of the respondents. Part III was composed of questions about health, membership, and health practice indicators. Part IV consisted of information about the education of children and organizational membership of the respondents. Part V consisted of job/occupation of the respondents. Finally, Part IV consisted of items about the skills and skills utilized to generate income.

The outreach coordinators and selected students administered the questionnaire and assisted the respondents in answering the survey. The data were analyzed using descriptive statistics like frequency, percentage, and ranking.

4. Results and Discussions

4.1. Socio-Demographic Profile of the Respondents

The results of the profile of the respondents in terms of sex, age, civil status, religion, occupation, and monthly income are shown in **Table 1**.

The data reveals that the majority of the household heads in the community were male (83.33%); only 16.67% constitutes a female household head. Out of 30 respondents, there were 10% or 33.33% belonged within the age bracket of 20 - 32 years old, followed by nine or 30% within the age range of 33 - 45 and five or 16.67% belonged to 59 - 71 years old. In terms of civil status, the majority of the respondents were married (93.33%) and two or 6.67% were lived-in. Most of them were Roman Catholic (86.67%), three or 10% were Born Again, and only one had Methodist religious affiliation.

Out of 30 respondents, there were ten or 33.33% were farmers, followed by eight or 26.67%, construction workers and two or 6.67% recorded that they were carpenter and laundry women.

As to the monthly income of the respondents, there were 14% or 46.70% had a monthly income of 1000 - 3000, followed by seven or 23.30% had 3001 - 5000 and three or 10% had a monthly income ranging from less than 1000 and 7001 - 9000, respectively.

They are shown in **Figure 1**, the distribution of respondents according to the

Table 1. Socio-demographic profile of the respondents.

Sex	f	%
Male	25	83.33
Female	5	16.67
Total	30	100.00
Age	f	%
20 - 32	10	33.33
33 - 45	9	30.00
46 - 58	4	13.33
59 - 71	5	16.67
72 - above	2	6.67
Total	30	100.00
Civil Status	f	%
Married	28	93.33
Separated	0	0.00
Lived-in	2	6.67
Total	30	100.00
Religion	f	%
Born Again	3	10.00
Roman Catholic	26	86.67
Methodist	1	3.33
Total	30	100.00
Occupation	f	%
Carpenter	2	6.67
Construction worker	8	26.67
Driver	1	3.33
Farmer	10	33.33
Helper	1	3.33
Housewife	1	3.33
Laundrywoman	2	6.67
Laborer	1	3.33
Vendor	3	10.00
Repairman	1	3.33
No occupation	2	6.67
Total	30	100.00
Monthly Income	f	%
less than 1000	3	10.00
1000 - 3000	14	46.70
3001 - 5000	7	23.30
5001 - 7000	2	6.70
7001 - 9000	3	10.00
9001 - above	1	3.30
Total	30	100.00

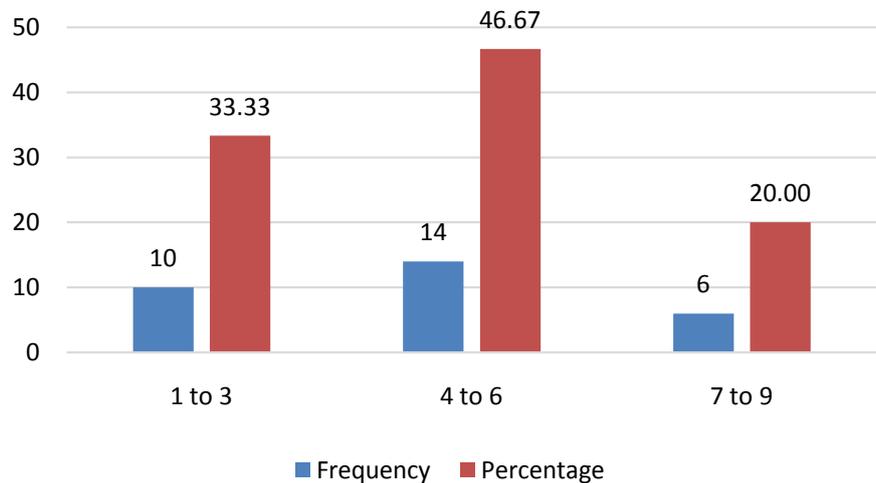


Figure 1. Distribution of respondents according to the number of children.

number of children. There were 14% or 46.67% who have 4 - 6 children, followed by ten or 33.33% who have 1 - 3 and six of 20% have 7 - 9 children.

4.2. Socio-Economic Status of the Respondents

Table 2 illustrates the socio-economic status according to the home and home facilities of the respondents. The data collected included which includes house, types of house, materials used for the house, residential lots, sources of electricity, cooking facilities, comfort room, types of comfort room, vehicle, types of vehicle and sources of water.

Home and home facilities

It can be noted from the data that most of the respondents owned their house (21% or 70%), and 2% or 6.67% rented their home.

Moreover, most of them had single-detached housed (16% or 53.33%), five or 16.67% had to concrete, two or 6.67% had the duplex type of house. Further, 18 or 60% were made of light materials, five of 16.67% concrete and three or 10% were shanty or *barong-barong*. Out 30 respondents, 10% or 33.33% owned their residential lots, five or 16.67% squatted, and two or 6.67 percent rented their residential lots.

Majority of the respondents' households were powered by electricity (27% or 90%) and two or 6.67% used kerosene as their sources of lights. Twenty or 66.67 percent used dry woods in cooking, other recorded that they used kerosene (4% or 13.33%), LPG (4% or 13.33%), coal (1% or 3.33%) and rice hull (1% or 3.33%).

Moreover, 16% or 53.33% have toilet facilities, while 6% or 20% have no toilet facilities. Sixteen or 53.33% have pail flush toilets.

Similarly, there were 10% or 33.33% have, seven of 23.33% have a motorcycle, and three or 10% have tricycles. Most of the respondents had their deep well as the primary source of water, while others recorded that they were using their neighbor deep well and public deep well (**Figure 2**).

Table 2. Socio-economic status of the respondents.

House	f	%
Owned	21	70.00
Rented	2	6.67
Others	5	16.67
No data are given	2	6.67
Total	30	100.00
Types of House	f	%
Single-detached	16	53.33
Duplex	2	6.67
Row house	0	0.00
Concrete	5	16.67
Others	1	3.33
No data are given	6	20.00
Total	30	100.00
Materials used for house	f	%
Light materials	18	60.00
Barong-barong	3	10.00
Concrete	5	16.67
No data are given	4	13.33
Total	30	100.00
Residential lot	f	%
Owned	10	33.33
Rented	2	6.67
Squatter	5	16.67
Others	7	23.33
No data are given	6	20.00
Total	30	100.00
Sources of energy	f	%
Lights		
Electricity	27	90.00
Kerosene	2	6.67
LPG	0	0.00
No data are given	1	3.33
Total	30	100.00
Cooking Facilities	f	%
Kerosene	4	13.33
LPG	4	13.33
Wood	20	66.67
Coal	1	3.33
Rice hull	1	3.33
Total	30	100.00

Continued

House Facilities	f	%
With comfort room	16	53.33
Without comfort room	6	20.00
No data are given	8	26.67
Total	30	100.00
Types of Comfort Room	f	%
Pail flush	16	53.33
No response	14	46.67
Total	30	100.00
Vehicle	f	%
with vehicle	10	33.33
without vehicle	20	66.67
Total	30	100.00
Types of Vehicle	f	%
Motorcycle	7	23.33
Tricycle	3	10.00
No vehicle	20	66.67
Total	30	100.00

Deepwell

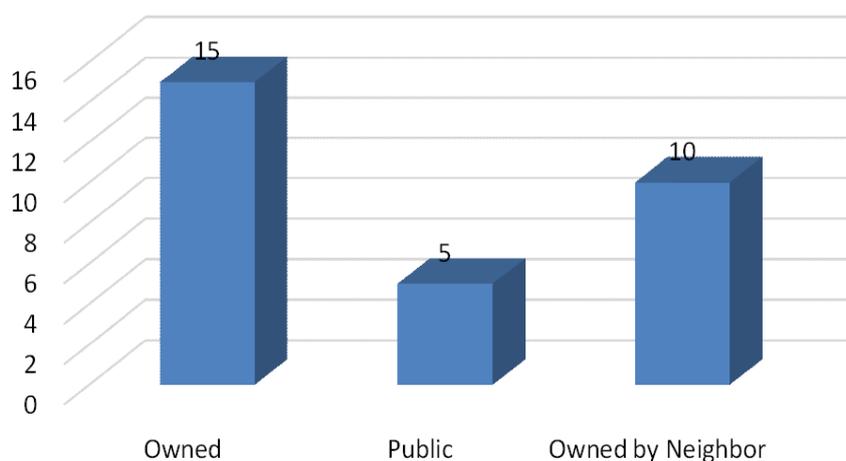


Figure 2. Distribution of respondents according to the sources of water.

4.3. Health, Membership and Health Practices

Table 3 presents the socio-economic status of the respondents in terms of health and health practices. The data collected includes: common illness experienced, intervention when sick family planning contraceptive used, practices during pregnancy, and birthing place.

Table 3. Socio-economic status according to health and health practices.

Common Disease	f	Rank
Cough, Fever, Flu	26	1
High blood	5	3
Toothache	13	2
*multiple responses		
Intervention when sick	f	Rank
Consult the doctor	13	1
Hospitalization	4	4
Consult faith healer	8	3
self-medication	10	2
*multiple responses		
Family planning	f	%
Yes	20	66.67
No	10	33.33
Total	30	100.00
Contraceptive Used	f	Rank
Calendar/rhythm notes	2	3.5
Depo-Provera	3	2
Condom	1	5
Pills	14	1
Control	2	3.5
*multiple responses		
The previous contraceptive Used	f	Rank
Pills	5	1
Control	2	3
Depo-Provera	4	2
Withdrawal	1	4
*multiple responses		
Practices during pregnancy	f	Rank
consultation with the doctor	12	2
consultation with midwife	17	1
no consultation at all	3	4
eating health foods	6	3
*multiple responses		
Birthing place	f	%
at home	18	60.00
at hospital	12	40.00
Total	30	100.00

The data shows that the common illness experienced by the respondents were cough, fever, and flu with a frequency of 26, followed by toothache (n = 5) and high blood (n = 5). As claimed by the respondent, when they were suffering from this illness, they consult the doctor (n = 13), others recorded that they did self-medication (n = 10), consult a faith healer (n = 8), and four were hospitalized.

Meanwhile, 20% or 66.67% responded that they were using family planning, and 10% of 33.33% answered “No.” Fourteen of them used pills (n = 4). Others recorded that they were used Depo-Provera (n = 3), calendar/rhythm notes and control (n = 2) and others using condoms. Likewise, the previous contraceptive used by the respondents were pills (n = 5), Depo-Provera (n = 4), control (n = 2), and withdrawal (n = 1).

During pregnancy, the respondent stated that they consulted midwife (n = 17) and doctors (n = 12), others recorded that they eat healthy foods (n = 6), and three said that they have no consultation at all. The majority of the respondents gave birth at home (18% or 60%), while 12% or 40% had their babies delivered at the hospital.

4.4. Education of Children and Organizational Membership of the Respondents

Table 3 presents the socio-economic status as to the education of children and organizational membership of the respondents.

As shown in **Figure 3**, there were 71% or 79.78% of the respondents’ children are currently studying, and 18% or 20.22% were not studying due to sickness (n = 7), not interested in studying, and forced to work (n = 3) and lack of budget (n = 2). Further, the majority of the respondents’ children were studying at public school (65% or 91.5%) as shown in **Table 4** that the available facilities at home used by their children in studying were television (n = 12), books (n = 10),

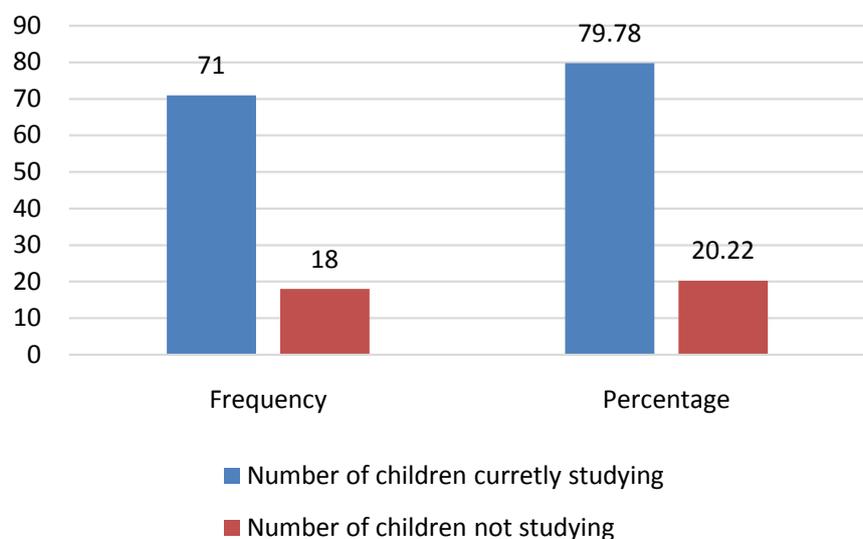


Figure 3. Distribution of respondent’s education of children.

Table 4. Socio-economic status as to the education of children and organizational membership of the respondents.

Reasons for not studying	f	Rank
No budget for children's education	2	3
Child is sick	7	1
Not interested in studying	3	4
Parents obliged their children to work	3	2
<i>*multiple responses</i>		
Types of the school where children are studying	f	%
Public	65	91.55
No response	6	8.45
Total	71	100.00
Equipment's/Facilities that are used in the study	f	Rank
Books	10	2
TV	12	1
Radio	3	3
DVD/CD Player	7	4
<i>*multiple responses</i>		
Organizational Membership	f	Rank
4 Ps	17	1
Senior Citizen	2	2
<i>*multiple responses</i>		

DVD/CD player ($n = 7$) and radio ($n = 3$). In terms of membership to the organization, most of them were beneficiaries of 4Ps, and only two were a member of the Senior Citizen Association.

4.5. Job/Occupation of the Respondents

Figure 4 shows the distribution of respondents according to the occupation. Out of 30 respondents, six of them recorded that they were vendor, five were farm tenants, four were tricycle drivers, three were construction workers and one housemaid. This indicates that the common job/occupation of the respondents was vending. They sold their products from their vegetable gardens and meat from their animals like pigs, goats, chicken and ducks.

Table 5 shows the distribution of respondents according to necessary expenses. Daily school allowance of children obtained the highest frequency (31% or 30.10%), followed by household expenses such as food (28% or 27.18%), electricity (26% or 25.24%), medicines (13% or 12.62%) and consultation to a doctor (5% or 4.85%). This indicates that most of the households spent in the daily school allowance of their children.

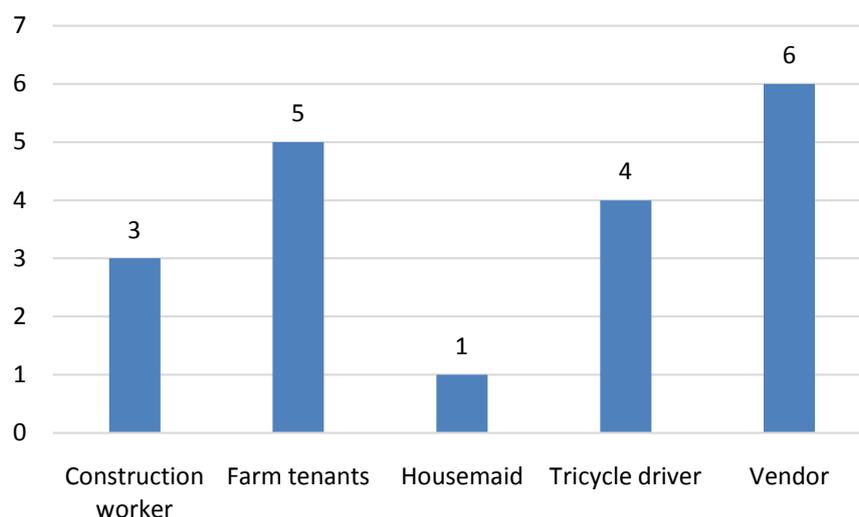


Figure 4. Distribution of respondents according to occupation.

Table 5. Distribution of respondents according to necessary expenses.

Necessary Expenses	f	%
Daily school allowance of children	31	30.10
Medicines	13	12.62
Consultation to doctor	5	4.85
Foods	28	27.18
Electricity	26	25.24
*multiple responses		

4.6. Skills and Skills Utilized to Generate Income

They are shown in **Table 6**, the distribution of respondents on the skills that can be utilized to generate income. The top three cited skills were animal raising (20% or 17.54%), vending (19% or 16.67%) and vegetables and plants growing (18% or 15.79%). Others recorded that they want to utilize their skills in babysitting, cooking, carpentry, massaging, housekeeping, driving, heavy equipment operation and cosmetology in generating income. The result indicated that most of the households were engaged in animal raising as they honed their skills to generate income.

They are shown in **Figure 5**, the distribution of respondents according to reasons for not utilizing skills. The top three cited reasons were no sources of investment and materials (n = 25) followed by no vacant time (n = 15) and lack of opportunities and busy in babysitting and caring of the sick (n = 14). These cited reasons hinder the respondents from utilizing their skills and enhancing their skills for better sources of livelihood in the community.

It is shown in **Table 7**, the distribution of respondents according to skills that are needed to be learned to have other sources of income. The top three cited skills were vegetable gardening (25% or 26.04%), followed by animal raising (21% or

Table 6. Distribution of respondents on the skills that can be utilized to generate income.

Skills and Skills utilized to generate income	f	%
Cooking	15	13.16
Housekeeping	4	3.51
Babysitting	2	1.75
Vending	19	16.67
Carpentry	13	11.40
Animal raising	20	17.54
Driving	5	4.39
Agent	2	1.75
Massage	2	1.75
Vegetable and plants gardening	18	15.79
Heavy equipment operator	6	5.26
Cosmetology	8	7.02
*multiple responses		

Table 7. Distribution of respondents according to skills that are needed to be learned to have other sources of income.

Skills that are needed to be learned to have other sources of income	f	%
Sewing/embroidery	18	18.75
Cosmetology	8	8.33
Animal raising	21	21.88
Food Processing	15	15.63
Vegetable gardening	25	26.04
Computer education	9	9.38
*multiple responses		

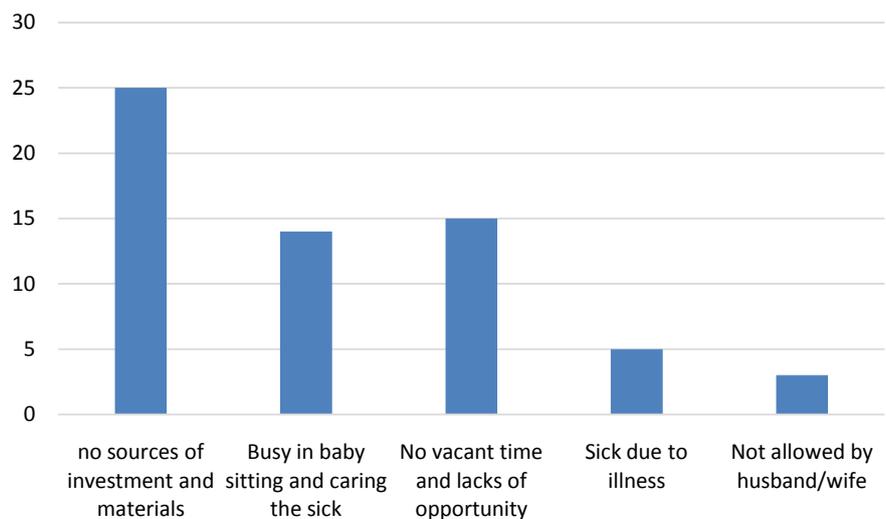


Figure 5. Distribution of respondents according to reasons for not utilizing skills.

21.88%) and sewing/embroidery (18 or 18.75). Other recorded that they want to learn food processing, cosmetology, and computer education.

5. Conclusion

This study was conducted to assess the socio-economic status of *Purok Manggahan, Barangay Pangatian, Cabanatuan City*.

The study reveals that most of the respondents' sources of income were vending in which they sold their products from their vegetable garden, meat from their animals like pigs, goats, chicken and ducks.

Their earnings were not sufficient to provide all their basic needs due to the number of household members. Most of them owned their houses made of light materials. They used electricity as a significant source of light. They cooked their foods using dry woods. They have a comfort room and owned a motorcycle. Most of them had their deep well as sources of potable water.

Similarly, they suffered from a common illness like cough, fever, and flu, they consulted doctors and sometimes did self-medication. Most of them used family planning using contraceptives. On the other hand, pregnant women asked midwives and delivered their babies at home.

Most of their children were currently studying, but sometimes they stopped to go to school due to sickness. They have limited facilities in studying. Meanwhile, their meager income was divided into their necessary expenses.

Moreover, the respondents want to utilize their skills like animal raising, vending and vegetable plants growing to generate income.

Likewise, they were no sources of investment and materials that hinder them from utilizing their skills. These cited reasons maybe likewise address and provided by the partner-institution in collaboration with the community outreach program to have sources of livelihood and investment.

Although they have employable skills, they were not looking for employment due to domestic responsibilities. Hence, a community-based source of income would best suit the respondents. On the other hand, coordination with government and non-government organizations to conduct training and seminars concerning livelihood programs would be carried out by the institution. Health check-ups and the like, and feeding activities would be done in order to augment the health status of the people in the barangay. Finally, to further explore needs assessment to other communities, a similar study in the future may be conducted.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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