

# Compliance Of Students Of Cagayan State University To The Inter-Agency Task Force Protocols On Covid-19

MAITA PAJARILLO GUADAMOR, DPA

*Associate Professor 5 Dean, College of Criminal Justice Education Cagayan State University-Piat Campus Piat, Philippines*

**Abstract:** The global battle against the spread of COVID-19 requires serious public cooperation and compliance with public health policies to be effective. Health authorities and the administration of government in the Philippines have explained to the citizens the urgency to comply with the practical requirements to slow the spread of the virus. Social distancing is one common approach globally to ensure physical distance among people. The rationale behind social distancing is that the virus spread will slow down by measures such as staying home, avoiding crowds, and refraining from touching one another to diminish the transmission of the virus. This study intended to determine the compliance of students of the Cagayan State University-Piat Campus to the inter-agency task force protocols. A descriptive research design was used in the study which attempts to outline systematically a situation, problem, phenomenon, service, or program, provides information about the living conditions of a community, or describes attitudes towards an issue (Kumar, 2011). The respondents of this study were the students of the Bachelor of Science in Criminology of Piat Campus where a convenience sampling technique was employed using the online google form questionnaire which is a checklist that has been modified by the researcher based on the standard of the Inter-Agency Task Force on Covid-19 when it comes to the precautionary measures needed to avoid the spread of the virus. The data needed for the study was interpreted, treated, and analyzed by means of frequency counts, percentages, weighted mean, using a Likert Scale. The University may occasionally disseminate accurate and reliable information and continuously adapt and enhance the precautionary measures that are required to prevent infection from illness.

**Keywords:** Compliance, inter-agency task force, Covid-19, health awareness, symptoms, social distancing, prevention, personal hygiene, lockdown, community quarantine

## INTRODUCTION

The progress of any nation all over the world would always go with good health and the ability of its people to move about and do trades to keep the economy active and advance to create bigger income. The economic activities of nations keep the lives of the people in a balanced equilibrium. Generally, the source of livelihood of almost all people is centered on trades and all relative activities that would bring in money to families so they can live normally with food and shelter being provided to all members. All the routine chores that used to be enjoyed have been put to a halt because of the emergence of the dreaded disease, the COVID-19. The world that used to be the milling space for people who are preoccupied with many things to accomplish has become an empty playground. It was a sight of devastation seeing nothing on the streets and if there are any who are going around are men and women in uniform to check on citizens' purposes of going out.

Indeed, the disease has caused the world to stop and focus on measures to keep everyone healthy and put the virus at bay so that no more lives shall perish. All levels of schools have to shut all doors

to protect all learners from contracting the disease. All private and government offices were mandated to observe the required percentage for the working skeleton of the organization so that transactions can still go on a day-to-day basis. The saddest part of any country's experience was the closures of the companies producing the basic needs of the community. There were shortages of essential supplies and many have gone jobless and so their families have suffered hunger. In all the different parts of the world, the governments have designed protocols to follow in order that their people will maintain good health and everyone is mandated to stay in the safety of their homes. Talabis, et.al. (2020) in their study on local government responses to COVID 19 management in the Philippines through its Inter-Agency Task Force (IATF) have seen the importance of the outlined measures of different quarantine levels that would correspond to the degree of rigidity. Responses of subnational government units are crucial in the containment of the spread of pathogens in a country. To mitigate the impact of the COVID-19 pandemic, the IATF outlined different quarantine measures wherein each level has a corresponding degree of compliance depending on urgency or the level of

risks. Businesses in food production and distribution are mandated to open following strict protocols so people would not go hungry. Other measures also involve prohibiting individuals at a certain age bracket from going outside of their homes. The local government units (LGUs)—municipalities and provinces—can adopt any of these measures depending on the extent of the pandemic in their locality. The purpose is to keep the number of infections and mortality at bay while minimizing the economic impact of the pandemic. Some LGUs have demonstrated a remarkable response to the COVID-19 pandemic.

The purpose of this study is to identify notable practical interventions prescribed by IATF being implemented by LGU's, Provincial government, and the National administration covering all private and government institutions as a tool to fight the spread of the virus. There are provinces and municipalities who have strictly implemented the identified protocols that resulted to earlier containment of the health problems brought by the COVID-19. The employees of the Cagayan State University are the work force to help keep the school working when all faculty members and students are advised to go on with teaching and learning in the safety of their own homes. In the study conducted by Nilsen, et.al. (2020) on implementing social distancing in the battle against coronavirus, identified the level of responses of neighboring countries of Denmark and Sweden as to compliance. Both countries remarkably differed. While Denmark initiated mandatory and severe regulations, Swedish authorities predominantly promoted voluntary recommendations. The same protocols have been given to employees of the university and other remarkable measures everyone must comply to keep the virus at bay.

The global battle against the spread of COVID-19 requires serious public cooperation and compliance with public health policies to be effective. Health authorities and the administration of government in the Philippines have explained to the citizens about the urgency to comply with the practical requirements to slow the spread of the virus. Social distancing is one common approach globally to ensure physical distance among people. The rationale behind social distancing is that the virus spread will slow down by measures such as staying home, avoiding crowds, and refraining from touching one another to diminish transmission of virus [1]. Social distancing policies have become a crucial part of mitigating pandemic influenza globally [2]. Other protocols like work from home arrangements, cancellation of mass gatherings,

wearing of face masks and face shields, lessened number of people reporting physically at work, washing hands, disinfecting hands using alcohol, stricter protocols on taking public transports, etc. are some measures believed to have helped many the countries all over the world.

As in the study undertaken by Kaso, et.al (2020), it stressed that the effectiveness of the Covid-19 preventive methods needs communities' adherence and belief in the protectiveness of the measure as a whole. Though WHO recommended physical distancing, wearing a facemask, and using hand sanitizer, there is variation in compliance to the preventive measures from country to country. To this effect the Cagayan State University is being studied as to the compliance in the identified protocols of the IATF of the province of Cagayan. Have the employees adhered when schools and Universities have closed, ordered obligatory quarantine, restricted public gatherings like mass, sport, meetings, parties during occasions, and religious festivals to reduce the spread of the virus?

The Department of Education (DepEd) shared the worries and concerns of all State Colleges and universities in the Philippines. Thereby, drafting the rules to be followed as approved by IATF to safeguard the health and wellness of all learners, their parents and guardians, and all in the teaching and non-teaching force. The highlights of the Basic Education Learning Continuity Plan (BE-LCP) clearly specified the pending dates for school opening and all other important concerns like the Adoption of various learning delivery options such as but not limited to face-to-face, blended learnings, distance learnings, and homeschooling and other modes of delivery shall be implemented depending on the local COVID Risk Severity Classification and compliance with minimum health standards; and Conduct of curricular and co-curricular activities involving gatherings such as science fairs, a showcase of portfolios, trade fairs, school sports, campus journalism, the festival of talents, job fairs, and other similar activities are canceled, except those conducted online.

**Secretary Leonor Magtolis Briones**, has presented the draft for implementation in order that all in the education sector are safeguarded from the pandemic. With the finality of decision from the governing body of DepEd, the IATF received the pre-final draft BE-LCP for dissemination to member agencies for comments and/or feedback. In the course of the discussion, Secretary Martin Andanar offered the use of the government's television and radio stations for the

implementation of the BE-LCP, especially for distance learning programs. We will work on the details of this partnership between DepEd and PCOO in the coming days. Organizations from the private sector and civil society are also offering facilities. It was further stressed by the Secretary that she acknowledged the fears and apprehensions of the learners, parents and teachers, that attending schools in August might still not be safe in light of COVID-19. Everyone was assured that what was presented to the IATF will observe all the guidelines of the DOH and the IATF, on whether the risks classification in a locality will allow face-to-face attendance in schools, or not. She vowed to implement a “**safe back to schools’ program**”, consisting of health standards that will ensure everyone’s safety in areas that will already allow physical attendance in schools.

As the Department of Education has included the private schools, SUCs and LUCs offering basic education, they are enjoined to submit their plan for compliance with minimum health standards that will be issued by DepEd, consistent with guidelines by the Department of Health (DOH), the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF), and the OP. It is to this effect that all other members of the school board, the faculty, the non-teaching force, and students are mandated to follow safety protocols to keep the dreaded disease at bay.

The Department of Health (DOH) in the Philippines has identified helpful ways to keep everyone healthy through the workgroup as an integral component of the University of Southern Mississippi’s comprehensive efforts to plan to keep students and faculty safe while also offering learning and social opportunities to keep students engaged. The group stressed that individual responsibility and commitment to abide by health guidelines are key to the success of our institutional efforts. Institutional controls are only as effective as the willingness of individuals to carry them out. It will be imperative for everyone—faculty, staff, and students—to take responsibility for their actions and adhere to the guidelines of the Centers for Disease Control and Prevention (CDC) and the Mississippi State Department of Health (MSDH), as well as the guidelines issued by USM to protect themselves and others while helping to contain the spread of COVID-19.

The University of Southern Mississippi provided documents that will allow departments to manage operations in a safer and more effective manner throughout the COVID-19 pandemic. The objective is not to eliminate all potential risks, but

to provide a systematic and feasible path for operation within the pandemic environment. The given guidance in the document is subject to change, even after these plans are put into place. The University community will need to remain flexible, patient, and empathetic as we move forward. While on campus, all campus community members must acknowledge:

- The serious nature of COVID-19
- The importance of each individual being knowledgeable of the risks presented by the virus
- The need to monitor their own health
- The need to notify appropriate personnel if they are symptomatic and/or exposed and be tested if necessary

Everyone has a personal responsibility to practice physical distancing, frequent handwashing, cough/sneeze etiquette, proper tissue usage and disposal, avoidance of touching their face, adhering to quarantine/isolation protocols, and respecting others.

In the Cagayan State University, all the assigned personnel are mandated to carry out the components of active surveillance like;

1. To conduct daily monitoring of temperatures, symptoms, absences, and positive cases and clusters, which shall be consolidated by management to track ongoing transmission within the setting;
2. Design active surveillance mechanisms that include testing of employees that are at high risk given the nature of their work, such as workers who cannot dutifully meet minimum public health standards, or in areas with frequent clusters of symptoms, absences, or positive cases, subject to established and evidence-based protocols and guidelines on testing.

Other important measures are observed to prevent COVID-19 transmission like;

- ✓ Installations of physical barriers in enclosed areas where physical distancing may be compromised, i.e. sneeze guards (Acrylic Plastic Sheets), fixed glass panels, theater ropes and stanchions, hazard warning tape, etc.

- ✓ Maximize natural ventilation through open windows to ensure adequate air exchange;
- ✓ Additional fans are used regularly to ventilate spaces with many occupants;
- ✓ Air filtration devices are also positioned in crowded places;
- ✓ Hygiene and sanitation facilities are installed with adequate water and hand-washing soap or 70% Isopropyl alcohol;
- ✓ Hands-free dispensers, temperature equipment, and trash receptacles are positioned systematically within the work areas;
- ✓ The entry and exit points are designed to keep people from bumping from each other;
- ✓ Contact-tracing log book is maintained and health declarations are mandatory before entering establishments;
- ✓ Physical distancing of at least one-meter distance;
- ✓ Cough and sneeze etiquette

### STATEMENT OF THE PROBLEM

This study intended to determine the compliance of students of the Bachelor of Science in Criminology of Cagayan State University-Piat Campus to the inter-agency task force protocols. Specifically, it sought to answer the following:

1. What is the demographic profile of the respondents as to:
  - 1.1 Age
  - 1.2 Sex
  - 1.3 Civil status
  - 1.4 Religious affiliation
  - 1.5 Highest educational attainment of father
  - 1.6 Highest educational attainment of mother
  - 1.7 Occupation of father
  - 1.8 Occupation of mother
  - 1.9 Number of household members
2. What is the level of awareness of the respondents as to:
  1. IATF protocol
  2. Symptoms of the virus
  3. Prevention of virus spread
3. What is the extent of compliance of the respondents to the IATF protocols and other related Covid-19 guidelines?
4. Is there a significant difference between the level of awareness of the respondents

and their profile variables in the dimensions of:

1. IATF protocol
  2. Symptoms of the virus
  3. Prevention of virus spread
5. Is there a significant relationship between the level of awareness of the respondents and the extent of their compliance to the IATF protocols and other related Covid-19 guidelines?

### HYPOTHESIS

This study was guided by the following hypotheses to wit:

1. That there is no significant difference between the level of awareness of the respondents and their profile variables in the dimensions of:
  1. IATF protocol
  2. Symptoms of the virus
  3. Prevention of virus spread
2. That there is no significant relationship between the level of awareness of the respondents and the extent of their compliance to the IATF protocols and other related Covid-19 guidelines?

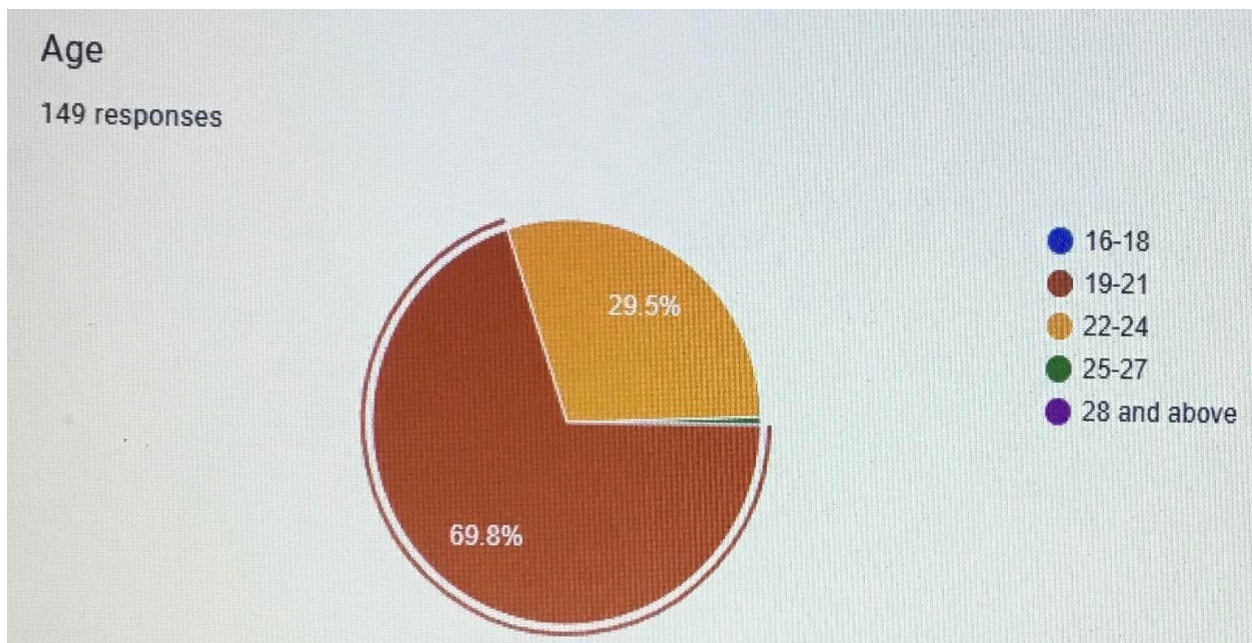
### RESEARCH METHODOLOGY AND STATISTICAL TREATMENT AND TOOLS

The quantitative descriptive research design was employed in this study to answer the aforementioned questions. A descriptive study attempts to outline systematically a situation, problem, phenomenon, service or program, or provides information about the living conditions of a community, or describes attitudes towards an issue (Kumar, 2011). The respondents of this study were the students of the Bachelor of Science in Criminology of Piat Campus where a convenience sampling technique was employed using the online google form questionnaire which is a checklist that has been modified by the researcher based on the standard of the Inter-Agency Task Force on Covid-19 when it comes to the precautionary measures needed to avoid the spread of the virus. The data needed for the study was interpreted, treated, and analyzed by means of frequency counts, percentages, weighted mean, using a Likert Scale.

### RESULTS AND DISCUSSIONS

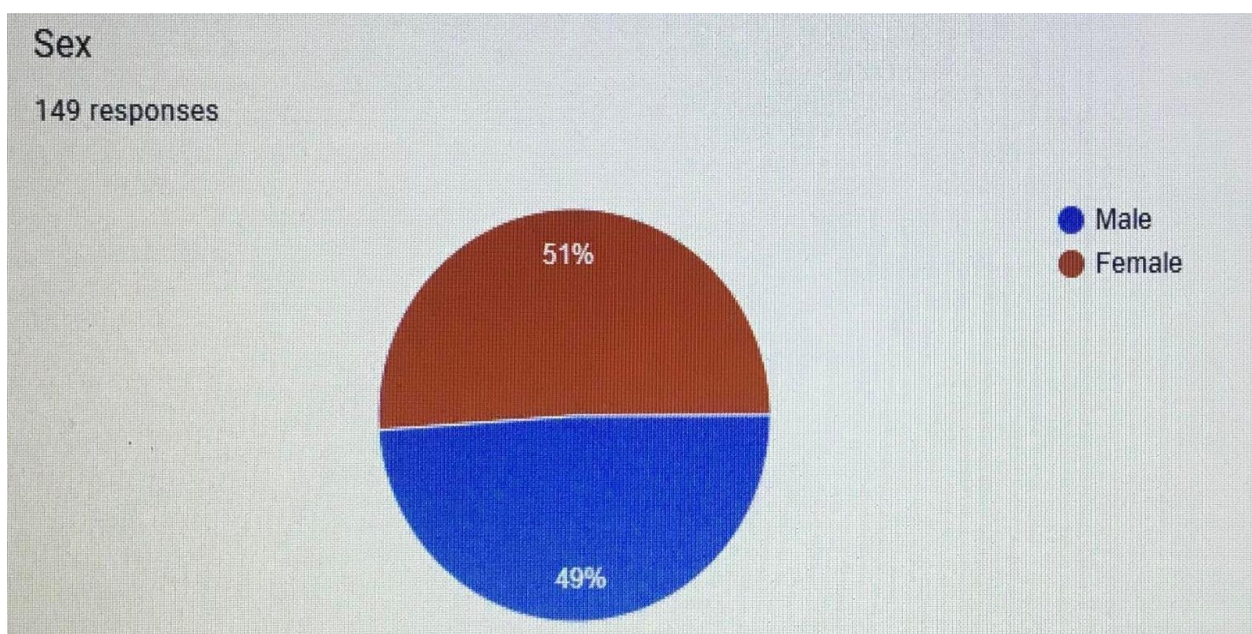
#### A. DEMOGRAPHIC PROFILE





The chart shows the frequency and percentage distribution of the student-respondents' profile relative to age. It shows that the bulk of the respondents are aged 19 to 21 while the least – numbered, are aged 25 and above years old. This implies that majority of the student – respondents are already at the age of majority. This stage in the life of individuals as explained in **exploringyourmind.com** manages to create a personal identity which is the result of the

integration of his previous being with his new and free personal choices, creating new social relationships and internalizing moral and ethical values that will determine progressive entry and functioning in the adult world. This means that the individual starts the ability to make independent decisions while taking full responsibility of the consequences of their actions.



Pie chart 1.2 shows the frequency and percentage distribution of the student-respondents' profile relative to sex. As shown on the result, the female student – respondents out-numbered the males, a result generated coincides with the 2020 Global Gender Gap Report of the World Economic Forum (WEF). By comparison, more females than males had attained tertiary education and such finding is supported in the report published in the Philippine Daily Inquirer by Matthew Reysio-Cruz who stated that Filipino women are enrolled in high school and college at significantly higher rates than men, according to

an annual report that measures gender equality in 153 countries. Furthermore, this finding concurs with the study conducted by Kevin Williamson published in Wall Street Journal report who stressed that college attendance by men, and by white men in particular, has declined steeply relative to attendance by women. He further stressed that men today make up only two out of five college students, and the men who do enroll are less likely to graduate than the women.



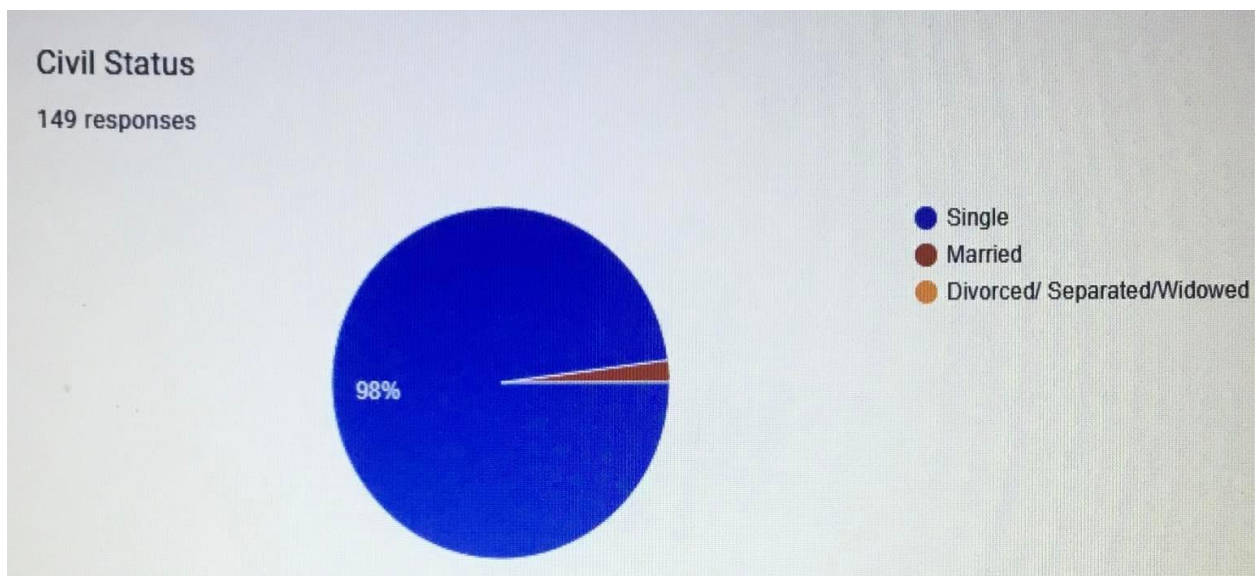
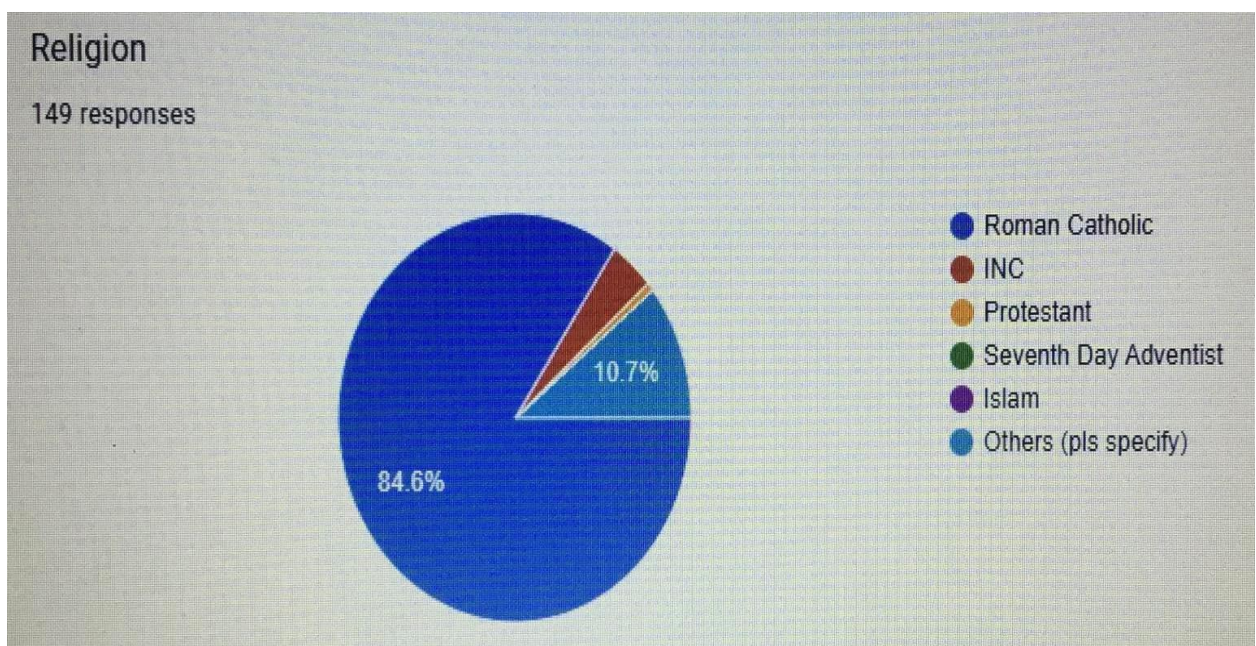


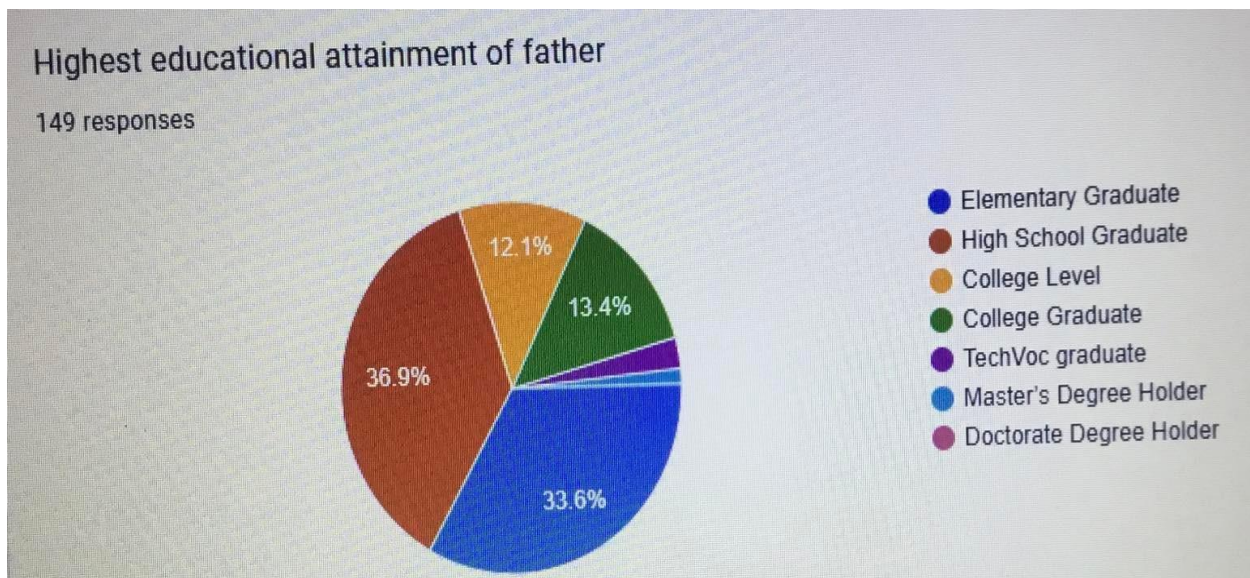
Chart 1.3 shows the frequency and percentage distribution of the student-respondents' profile relative to civil status. The data shows that majority of the respondents are married. The result shows that marriage to an undergraduate student is not the norm as mentioned by Michael Langlais which many people consider it as a stumbling block to the attainment of goals or objectives in life. This data is supported by the discussion presented by Bella de Paulo on psychologytoday.com where lifelong single

people do better than married people in a variety of ways that don't get all that much attention. This means according to her, that single individuals can do more to maintain their ties to friends, siblings, parents, neighbors, and coworkers than married people do. They do more than their share of volunteering and helping people, such as aging parents, who need a lot of help. They experience more autonomy and self-determination, and more personal growth and development.



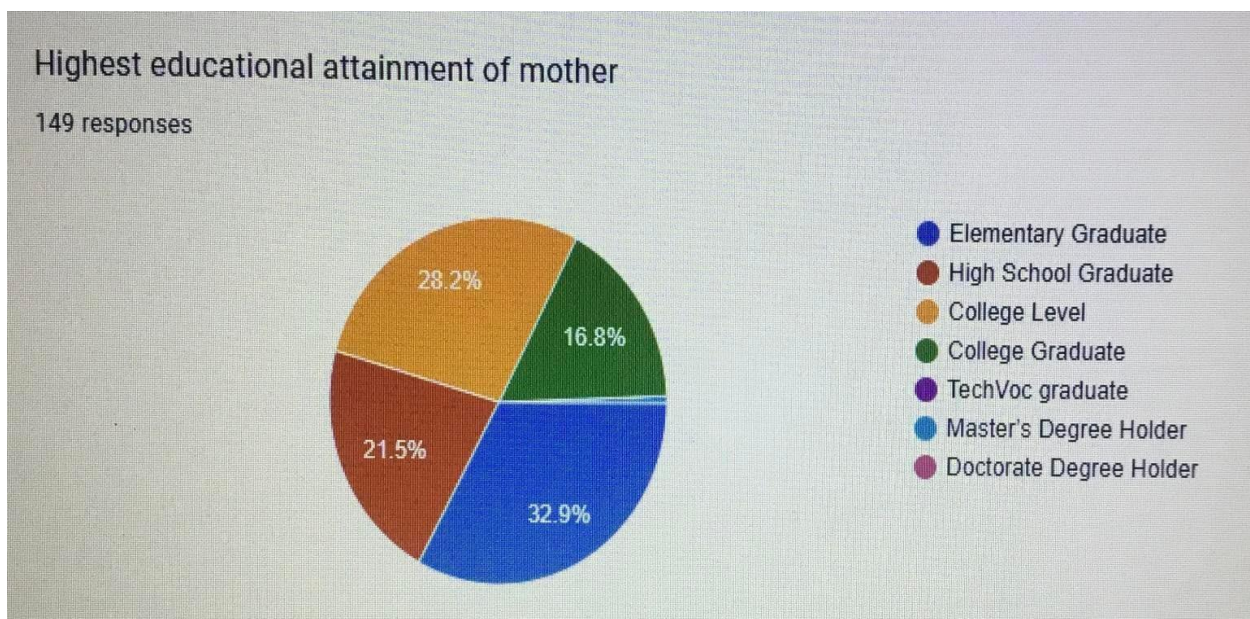
The data in the chart shows the religious affiliation of the respondents. As seen from the chart, majority of the respondents are Roman Catholics which manifest the predominant religion of the Philippines. This data is evidently showing the religious influence which can be traced from the Spanish colonization of the country for more three (3) centuries that have brought changes in the traditional religious beliefs of the natives which have stamped out and were replaced by Christianity.





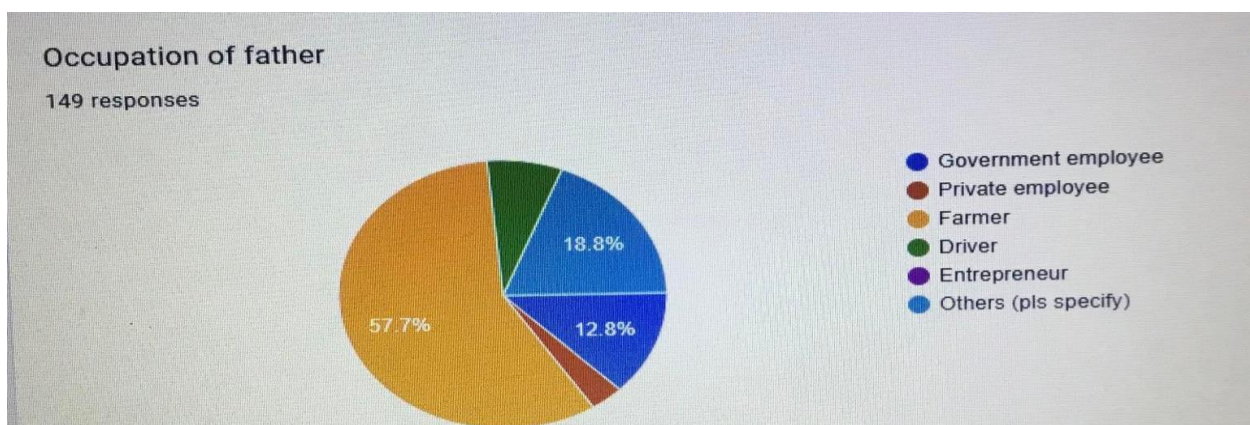
The data in the chart reveals the frequency and percentage distribution of the student-respondents' profile relative to the highest educational attainment of father. As seen on the chart, a higher frequency of the respondent's

father is high school graduate. This data coincides with the occupation of the respondents' fathers who are aligned in farming which does not traditionally require a higher degree of formal education.



The greater percentage of the respondents' mothers are elementary graduates which may attributed to the traditional culture where the women especially housewives do all the household related chores while the heavy works which requires strength is done by the males and this belief has previously denied women to obtain

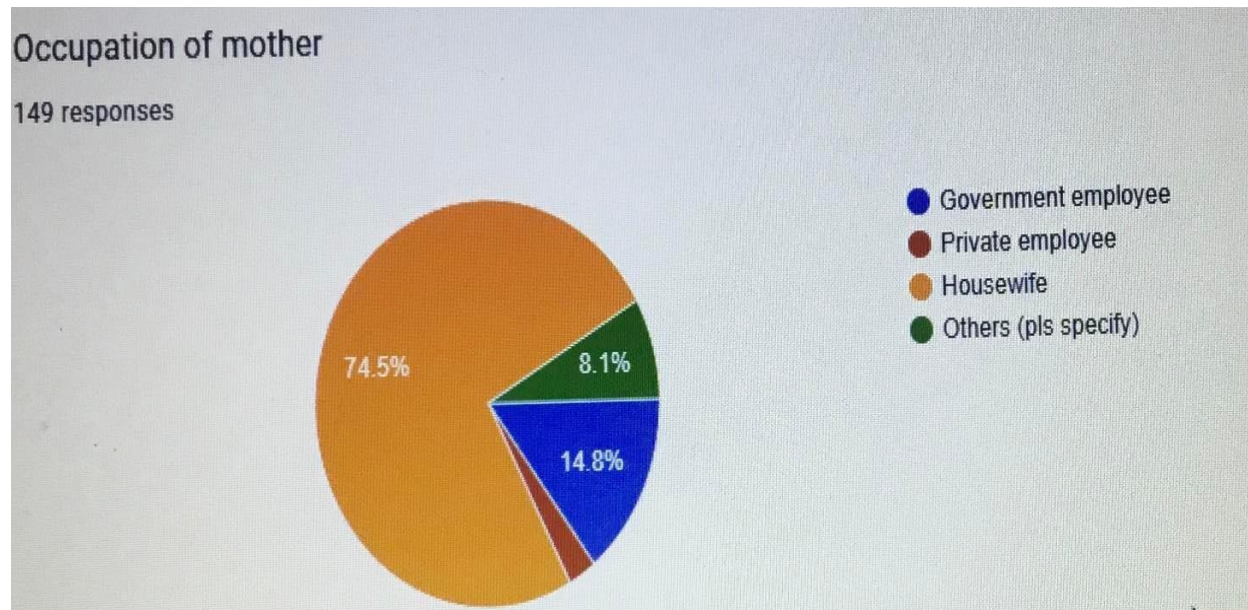
higher formal education. Such household chores encompass the functions of cooking, washing clothes budgeting and helping their husbands in the farm. This role according to Clamonte, Nitz on Women in the Philippines, given to the housewives gave pride and do not alienate from their roles for they are working for their families.





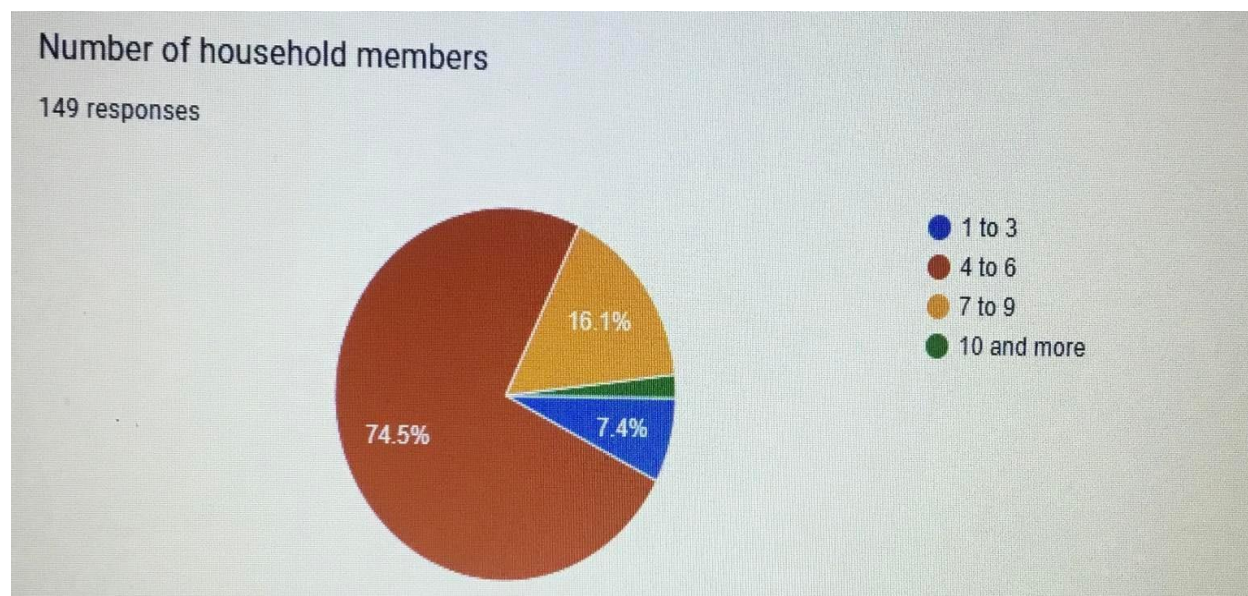
The chart shows the frequency and percentage distribution of the student-respondents' profile relative to the occupation of the father. As seen on the pie chart, the highest frequency 57.7 percent are farmers, which data shows that majority of the parents of the student-respondents are farmers and minimum wage earners. This data can be traced from the traditional means of

livelihood and be attributed to the nature of the Philippine landscape which is primarily an agricultural country according to [www.agrifarming.in](http://www.agrifarming.in) despite the plan to make it an industrialized country in 2000. The country's agricultural sector is divided into: farming, fisheries, livestock etc.



The chart shows the frequency and percentage distribution of the student-respondents' profile relative to the occupation of the mother. As seen on the chart, the highest percentage of 74.5 percent is housewife, which data imply that almost a majority of the respondents' mothers are living in the traditional family structure where the mother takes the role of a housekeeper who manages to foster the love and throws herself with

more extra time to the care of her children. Such household chores encompass the functions of cooking, washing clothes budgeting and helping their husbands in the farm. This role according to Clamonte, Nitz on Women in the Philippines, given to the housewives gave pride and do not alienate from their roles for they are working for their families.



The data shows that majority of the respondents belong to a family with an average of 4 to 6 members. The above observation is being backed up by the 2017 National Demographic and Health Survey wherein they have found out that Filipino households consist of an average of 4.2 people.

The same result was found out by the National Wages and Productivity Commission in their study of the socio-economic profile where the average household size is 4.4. Similarly, Berger (1980) as expatiated in [www.hhs.gov](http://www.hhs.gov) (2005) showed that family size is an important



determinant of whether a family or individual is in poverty because the official poverty measure incorporates family size.

**Table 2. 1 Mean Level of Awareness of respondents as to IATF Protocol**

ITEMS	Mean	Descriptive Rating
1. Gatherings outside of residences shall be prohibited	3.60	Fully Aware
2. those with immunodeficiency, comorbidity, or other health risks shall be required to remain in their residences at all times	3.58	Fully Aware
3. those who are over sixty-five (65) years of age shall be required to remain in their residences at all times	3.58	Fully Aware
4. Strict home quarantine shall be observed in all households	3.56	Fully Aware
5. All persons are mandated to wear full-coverage face shields together with face masks whenever they go out of their residences.	3.56	Fully Aware
6. Gatherings at residences with any person outside of one immediate household shall be prohibited.	3.54	Fully Aware
7. Entertainment venues with live performers such as karaoke bars, bars, clubs, concert halls, theaters, and cinemas are not permitted	3.53	Fully Aware
8. pregnant women shall be required to remain in their residences at all times	3.52	Fully Aware
9. Compliance to Minimum public health standards	3.50	Fully Aware
10. work-from-home and other flexible work arrangements	3.47	Fully Aware
11. The movement of all persons shall be limited to accessing essential goods and services	3.47	Fully Aware
12. Religious gatherings shall be allowed at a certain percentage of the venue capacity	3.46	Fully Aware
13. Personal care services which include beauty salons, beauty parlors, medical aesthetic clinics, cosmetic or derma clinics, make-up salons, nail spas, reflexology, aesthetics, wellness and holistic centers, and other similar establishments are not permitted	3.44	Fully Aware
14. Amusement parks or theme parks, fairs/peyas, kid amusement industries such as playgrounds, playroom and kiddie rides are not permitted	3.44	Fully Aware
15. Uniform curfew hours are imposed by LGUs	3.44	Fully Aware
16. Any person below eighteen (18) years old shall be required to remain in their residences at all times	3.44	Fully Aware
17. All establishments, persons, or activities not permitted to operate, work, or be undertaken shall be allowed to operate at a certain percentage on-site capacity	3.43	Fully Aware
18. Recreational venues such as internet cafes, billiard halls, amusement arcades, bowling alleys, and similar venues are not permitted	3.43	Fully Aware
19. Outdoor sports courts or venues for contact sports, scrimmages, games, or activities are not permitted	3.42	Fully Aware
20. Indoor sports courts or venues, fitness studios, gyms, spas or other indoor leisure centers or facilities, and swimming pools are not permitted	3.40	Fully Aware
21. Casinos, horse racing, cockfighting and operation of cockpits, lottery and betting shops, and other gaming establishments except for the draws conducted by the Philippine Charity Sweepstakes Office are not permitted	3.40	Fully Aware
22. Gatherings for necrological services, wakes, inurnment, funerals for those who died of causes other than COVID-19 shall be allowed, provided that the same shall be limited to immediate family members	3.40	Fully Aware
23. Indoor visitor or tourist attractions, libraries, archives, museums, galleries, and cultural shows and exhibits are not permitted	3.38	Fully Aware
24. Conduct of religious services through online	3.37	Fully Aware

25. Outdoor tourist attractions are not permitted	3.36	Fully Aware
26. Venues for meetings, incentives, conferences, and exhibitions are not permitted	3.36	Fully Aware
27. Home service for these activities are likewise not permitted	3.36	Fully Aware
28. Private corporations are encouraged to process payrolls online	3.26	Fully Aware
29. Face-to-face or in-person classes at all levels shall be suspended	3.25	Fully Aware
<b>Category Mean</b>	<b>3.45</b>	<b>Fully Aware</b>

On level of awareness on Inter-Agency Task Force (IATF) protocols, the table shows the Category mean of 3.45 and that respondents have complied and are fully observant on the rules of gatherings outside of residences are prohibited with a total mean of 3.60. Following the highest figure is 3.58 are those with immunodeficiency, comorbidity, or other health risks and giving the rules on those who are over sixty-five (65) years of age and shall be required to remain in their residences at all times. Another difficult adjustment was the strict home quarantine shall be observed in all households and all persons are mandated to wear full-coverage face shields together with face masks whenever they go out of their residences. These first five protocols of the IATF have manifested the serious concern of the government to protect its people from possible contacts of the dreaded disease. The limited movement of people has controlled the influx of buyers from congesting the groceries, going to gatherings outside their homes was prohibited, indoor visits or tourist attractions, libraries, archives, museums, galleries, and cultural shows and exhibits are not also permitted.

Ranging from the highest mean of 3.60 down to 3.45 all public activities and even personal services were not allowed to be done during the heightened alert level of IATF restrictions. The good number of noted awareness of respondents manifests that public activities, household events, other personal and recreational functions and services, all indoor functions for whatever purpose wherein air circulation is congested were sacrificed in order to comply.

Over-all, the small differences in the mean scores of each of the IATF protocols during the heightened level of restrictions of people in the community in the war against COVID-19 shows that the respondents have good understanding of what to comply in accordance to the rules pertaining the combat of pandemic.

The lockdowns, which gave students more time and opportunities to watch news and browse the internet to broaden their knowledge of COVID-19 and the various protocols established by the IATF, are one of the reasons cited as to why respondents became fully aware of the IATF protocols (Carducci A., et.al., 2019).

These results are consistent with earlier research done in other Asian nations (Ferdous et al., 2020; Neupane et al., 2020; Sulistyawati et al., 2021; Widayati, 2021; Zhang et al., 2020; Zhong et al., 2020; Zhou et al., 2020). The Philippines' Department of Health kept up informational campaigns about the necessity of handwashing, covering the nose and mouth when coughing and sneezing, using sanitizers, using face masks, and avoiding contact of fingers with the mouth, nose, and eyes after the pandemic's early onset (Philippine Daily Inquirer, 2020; Republic of the Philippines, 2020). Another public action is social or physical distance, which requires people to practice keeping at least 6 feet between each other and avoiding group gatherings and crowded places (Centers for Disease Control and Prevention, 2020a).

**Table 2. 2 Mean Level of Awareness of respondents as to Symptoms of the Virus**

ITEMS	Mean	Descriptive Rating
1. New loss of taste or smell	3.54	Fully Aware
2. Dry Cough	3.51	Fully Aware
3. Shortness of breath or difficulty breathing (DOB)	3.50	Fully Aware
4. Trouble breathing	3.48	Fully Aware
5. Fever or chills	3.47	Fully Aware
6. Persistent pain or pressure in the chest	3.46	Fully Aware
7. Headache	3.46	Fully Aware
8. Sore throat	3.45	Fully Aware
9. Congestion or runny nose	3.39	Fully Aware
10. Nausea or vomiting	3.38	Fully Aware
11. Fatigue	3.36	Fully Aware



12. Muscle or body aches	3.36	Fully Aware
13. Diarrhea	3.34	Fully Aware
14. New confusion	3.31	Fully Aware
15. Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone	3.30	Fully Aware
16. Inability to wake or stay awake	3.28	Fully Aware
<b>Category Mean</b>	<b>3.41</b>	<b>Fully Aware</b>

The table shows the level of awareness of the respondents in terms of the symptoms to observe in any event they are identified as close or direct contact with people who are tested positive of the dreaded disease with a category mean of 3.41.

The new loss of taste and smell ranged to be the highest response with 3.54. It is an unusual incident for anyone to be losing her or his sense of smell and taste so this must have been noted as the number one signal for respondents to suspect that he or she has contracted the disease. The following symptoms like dry cough, shortness of breath or difficulty breathing (DOB), trouble breathing, fever or chills are manifestations at the flu-like symptoms are known with an extent alert consideration on trouble and difficulty of breathing. Flu-like symptoms which the respondents are aware to be alarmed and do home remedies to arrest the possible spread of the virus.

The alarming symptoms like pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone, and inability to wake or stay awake must have left the respondents wondering so these have shown the last two at the bottom in the hierarchy of mean scores. This findings have been supported based on the research done by Wolka et al. 2020, a number of participants noted that fever, sneezing, diarrhea, throat pain, difficulty breathing, and headaches were typical symptoms of the illness. The data also demonstrated that the respondents are fully aware of the various symptoms of the disease, making them conscious once they become ill with it. The data also demonstrated the importance of having a thorough understanding of the signs and symptoms of a contagious disease like COVID-19 in order to understand the disease (Huang C. et al, 2020).

**Table 2. 3 Mean Level of Awareness of respondents as to Prevention of virus spread**

ITEMS	Mean	Descriptive Rating
1. Observe proper distancing.	3.88	Fully Aware
2. Wash hands regularly.	3.85	Fully Aware
3. Wear a mask in public indoor spaces in areas with widespread transmission of the SARS-CoV-2 virus	3.84	Fully Aware
4. Do away with social gatherings.	3.83	Fully Aware
5. Travel safely.	3.83	Fully Aware
6. Avoid close contact with people who are sick.	3.83	Fully Aware
7. Stay home when you are sick.	3.83	Fully Aware
8. Get your COVID shot.	3.81	Fully Aware
9. Be mindful of your mental health	3.81	Fully Aware
10. Avoid crowds and poorly ventilated spaces	3.81	Fully Aware
11. Dine out carefully.	3.79	Fully Aware
12. Cover coughs and sneezes.	3.79	Fully Aware
13. Frequently clean and disinfect touched objects and surfaces regularly	3.77	Fully Aware
14. Get your flu shot.	3.73	Fully Aware
15. Minimize touching your eyes, nose, and mouth.	3.72	Fully Aware
16. Differentiate between flu, colds, and COVID-19	3.68	Fully Aware
17. Seek routine medical care.	3.66	Fully Aware
<b>Category Mean</b>	<b>3.79</b>	<b>Fully Aware</b>

The table shows the level of awareness of the respondents as to the prevention of the spread of the virus. The table shows a category mean of 3.79 or a descriptive rating of “fully aware” which only shows that creating awareness during an outbreak is an effective measure to help

prevent the spread of the disease (Johnson and Hariharan, 2017).

Observe proper distance received the highest mean (3.88), as shown in the table. One of the most important public health measures to

decrease COVID-19 infections, according to Wilder-Smith et al., 2020, has been social distance. This measure ultimately received the highest mean in a survey of Cagayan State University students, indicating that these students are fully aware that an appropriate distance can stop the virus from spreading. Additionally, this outcome is consistent with the research done by Tripathi, Alqahtani, et al. According to Al (2020), the majority of respondents to their study were knowledgeable about COVID-19, took

precautions, and were well-prepared to combat it. Additionally, Bautista, Balibrea, and Bleza (2020) discovered that the study's participants were more aware of preventive measures and were taking actions to stop the virus from spreading. The outcome could also be attributed to the public guidance given by the WHO to raise the necessary awareness among the populace so that they have sufficient knowledge of self-prevention and protection against COVID-19 (Siddiqui et al., 2020).

**Table 3. Mean Extent of Compliance of the respondents to the IATF protocols and other related covid-19 guidelines**

ITEMS	Mean	Descriptive Rating
1. Stay at home when you are sick	3.74	Fully Compliant
2. Cover your mouth and nose when coughing and sneezing	3.73	Fully Compliant
3. Practice proper hygiene	3.72	Fully Compliant
4. Have your COVID vaccine	3.71	Fully Compliant
5. Avoid close contact with people who are sick	3.71	Fully Compliant
6. Observe proper health protocols when traveling	3.70	Fully Compliant
7. Be mindful of your mental health	3.68	Fully Compliant
8. Avoid crowds and poorly ventilated spaces	3.68	Fully Compliant
9. Wash hands regularly.	3.67	Fully Compliant
10. Observe proper health protocols when dining out	3.67	Fully Compliant
11. Alcohol/sanitizers are provided	3.66	Fully Compliant
12. Temperature is checked upon entry at workplace	3.66	Fully Compliant
13. Minimize touching your eyes, nose, and mouth.	3.65	Fully Compliant
14. Regular/Frequent cleaning and disinfecting of surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, taps, phones, etc.	3.64	Fully Compliant
15. Issuance of COVID shield pass/certification	3.64	Fully Compliant
16. Health declaration forms are properly filled out	3.64	Fully Compliant
17. Regular/routine cleaning and disinfection of work space/place	3.64	Fully Compliant
18. Increase of desk space/cubicle within the work place	3.64	Fully Compliant
19. Observe proper physical/social distancing	3.63	Fully Compliant
20. Wearing of face mask and face shield in shared public spaces and/or in public indoor spaces where there is a possibility of widespread transmission of the SARS-CoV-2 virus	3.62	Fully Compliant
21. Post signs encouraging good hand and respiratory hygiene practices	3.62	Fully Compliant
22. Appointment times are staggered to enable social distancing, screening and time for cleaning workspace and common areas/equipment	3.62	Fully Compliant
23. Installation of hand washing areas within the workplace	3.61	Fully Compliant
24. Minimize the use of common breakrooms, coffee stations or refrigerators to store food	3.60	Fully Compliant
25. Use signs, ground markings, tape, barriers and other means to maintain 2 meter distance in queues around entrance	3.60	Fully Compliant
26. Waiting areas have been rearranged to maintain 2m physical distancing with signage and floor decals as reminders	3.60	Fully Compliant
27. Ensure proper ventilation in the workplace	3.60	Fully Compliant
28. Know the difference between ordinary flu/colds, and COVID-19	3.60	Fully Compliant
29. Seek routine medical care	3.60	Fully Compliant
30. Disinfecting mats are provided	3.59	Fully Compliant



31. Senior Citizens shall be required to remain in their residences at all times	3.58	Fully Compliant
32. Work stations and all equipment are sanitized before and after use or as needed throughout the work day, including high touch surfaces such as desks, phone, computer, printer, pens, door handles etc.	3.58	Fully Compliant
33. Pregnant women shall be required to remain in their residences at all times	3.56	Fully Compliant
34. Face-to-face or in-person classes at all levels shall be suspended	3.56	Fully Compliant
35. Plexiglas/Plastic barriers/ screen guards are installed in areas where people frequent for necessary face-to-face transactions	3.56	Fully Compliant
36. Risk communication and management is in place	3.55	Fully Compliant
37. Conduct of online academic gatherings (seminars, orientation, symposia, fora)	3.54	Fully Compliant
38. Those with immunodeficiency, comorbidity, or with other health risks shall be required to remain in their residences at all times	3.54	Fully Compliant
39. The movement of all persons shall be limited to accessing essential goods and services only	3.54	Fully Compliant
40. In-person meetings should be done virtually where possible, (e.g. student interviews)	3.51	Fully Compliant
41. Any person below eighteen (18) years old shall be required to remain in their residences at all times	3.49	Fully Compliant
42. students are responsible for cleaning the equipment and high touch surfaces in between each appointment in all areas of the locations	3.44	Fully Compliant
43. Uniform curfew hours are imposed by LGUs	3.44	Fully Compliant
44. Have your flu vaccine	3.38	Fully Compliant
<b>Category Mean</b>	<b>3.61</b>	<b>Fully Compliant</b>

The table shows the extent of compliance of the respondents to the Inter-Agency Task Force protocols and other related covid-19 guidelines. As gleaned from the table, “**stay at home when you are sick**” garnered the highest item mean of **3.74** followed by “**cover your mouth and nose when coughing and sneezing**” with an item mean of **3.73**, and “**practice proper hygiene**” with an item mean of **3.72**. The respondents who are aware of the imaginable effect of the transmission of the deadly virus on other people take these precautionary measures which act will help prevent the brisk transmission of the virus. This result was supported by the study conducted by **Denford, S et.al (2021)** where they emphasized that increased efforts were taken by participants from vulnerable groups to protect themselves or vulnerable members of their households. Many of the participants who considered themselves or their households to be vulnerable, and felt that the risk of exposure to the virus was high, reported engaging in additional, precautionary measures to protect themselves and their families. Further emphasis on their finding

was that super-adherence was particularly prominent among vulnerable participants who did not consider government recommendations to be sufficient for protecting them.

On the other hand, “**have the flu vaccine**” has garnered the lowest item mean of **3.38** which implies that the respondents have not given priority to having vaccinated with the flu vaccine prior to the deadly disease. This data coincides with the results on the respondents’ low level of awareness of the preventive measures against the transmission of the virus as shown in the previous table. This finding is supported by the study conducted by **E Paul et.al** of The Lancet Regional Health-Europe, 2021 where 16% of respondents displayed high levels of mistrust about vaccines across one or more domains. In their findings, distrustful attitudes towards vaccination were higher amongst individuals from ethnic minority backgrounds, with lower levels of education, lower annual income, poor knowledge of COVID-19, and poor compliance with government COVID-19 guidelines.

**Table 4. 1 Test of significant difference between level of awareness of the respondents in AITF Protocols and their profile variables**

Profile Variables	T/F-value	p-value	Interpretation
Age	1.021	0.241	NS
Sex	3.201	0.037*	Significant
Civil Status	1.920	0.450	NS
Religious Affiliation	2.228	0.098	NS
Highest educational attainment of Mother	-1.361	0.225	NS
Highest educational attainment of Father	-1.499	0.301	NS
Occupation of mother	2.033	0.076	NS
Occupation of father	2.105	0.066	NS
Number of Household members	0.871	0.781	NS

\*significant at 0.05 level

Table 4. 1 illustrates test of significant difference between level of awareness of the respondents in AITF Protocols and their profile variables. There is a significant difference between the mean level of awareness of the respondents in AITF protocols when grouped according to sex. This means that female (m=3.77, SD=0.102) are more aware of the IATF protocols on covid-19 than the male (m=3.33, SD=0.113). The result was supported by the studies conducted by Taylor M.(2020) and Guo B. et al. (2012) wherein they have stated that women has higher health awareness and that men were significantly less likely to take preventive and protective measures

than women (Moran K. R. and Del Valle S. Y., 2016). Frederiksen et al., 2020 also stated in their study that women are also more concerned about contagion risk in their families, loss of economic income and access to COVID-19 testing and treatment

Other variables such age, civil status, highest educational attainment of parents, occupation of parents and number of household members found no significant differences in relative to their mean level of awareness in AITF protocols on covis-19 since the p-values >0.05 level of significance.

**Table 4.2 Test of significant difference between level of awareness of the respondents in Symptoms of the Virus and their profile variables**

Profile Variables	T/F-value	p-value	Interpretation
Age	-0.987	0.672	NS
Sex	1.002	0.450	NS
Civil Status	1.302	0.541	NS
Religious Affiliation	1.877	0.705	NS
Highest educational attainment of Mother	-1.304	0.441	NS
Highest educational attainment of Father	-1.226	0.307	NS
Occupation of mother	0.627	0.110	NS
Occupation of father	1.510	0.661	NS
Number of Household members	-1.229	0.442	NS

Table 4.2 shows the test of significant difference between level of awareness of the respondents in Symptoms of the Virus and their profile variables. The computed p-values>0.05 level of significance shows that there are no significant differences between the profile of the respondents and their level of awareness as to symptoms of the virus. This means that their level of awareness as

to symptoms of the virus are more likely the same regardless of their age, sex, civil status, religious affiliation, parent’s educational attainment, parent’s occupation and number of household members. As what Lin et. Al. (2020) stated in their paper, enough knowledge coupled with the right attitude play a crucial part towards the prevention of COVID-19.

**Table 4. 3 Test of significant difference between level of awareness of the respondents in Prevention of Virus Spread and their profile variables**

Profile Variables	T/F-value	p-value	Interpretation
Age	1.112	0.490	NS
Sex	-1.303	0.571	NS
Civil Status	1.440	0.603	NS
Religious Affiliation	1.032	0.701	NS
Highest educational attainment of Mother	0.897	0.877	NS
Highest educational attainment of Father	1.661	0.121	NS



Occupation of mother	1.452	0.335	NS
Occupation of father	-1.772	0.110	NS
Number of Household members	1.089	0.450	NS

Table 4.3 displays the test of significant difference between level of awareness of the respondents in prevention of the virus spread and their profile variables. The computed p-values > 0.05 level of significance shows that there are no significant differences between the profile of the respondents and their level of awareness as to prevention of the virus spread. This means that their level of awareness as to prevention are more likely the same regardless of their age, sex, civil

status, religious affiliation, parent's educational attainment, parent's occupation and number of household members. This confirms the study by Matovu et al. (2021) which states that respondent's awareness of how COVID-19 is spread is proportional the practice of prevention measures and that most individuals are constantly informing themselves about the COVID-19 current situation and they believe it is a serious problem (Blanco, et.al., 2021).

**Table 5. Test of significant relationship between the level of awareness of the respondents and the extent of compliance to the IATF Protocols and other related covid-19 Guidelines**

Extent of Compliance to the IATF Protocols			
Level of awareness	r-value	p-value	Interpretation
IATF Protocol	0.792	0.000**	Significant
Symptoms of the Virus	0.574	0.000**	Significant
Prevention of Virus Spread	0.715	0.000**	Significant

\*\*significant at 0.01 level

Table 5 shows the relationship between the level of awareness of the respondents in terms of IATF protocols, symptoms of the virus and prevention of virus spread and the extent of compliance to the IATF Protocols and other related covid-19 guidelines. The p-values < 0.05 level of significant shows that there are significant differences between level of awareness and extent of compliance to the IATF protocols. Strong positive correlation was found between level of awareness on IATF protocols ( $r = 0.792$ ,  $p=0.0000$ ) and prevention of virus spread ( $r = 0.715$ ,  $p=0.0000$ ) in relation to the extent of compliance to the IATF protocols. Also, moderate correlation was found between level of compliance as to symptoms of the virus and extent of compliance to the IATF protocols. The findings of the significant relationship show that the higher the level of awareness of the respondents on covid-19, the higher their extent of compliance to the IATF protocols. Their level of awareness shows their extent of compliance to the IATF protocols on covid-19.

## CONCLUSIONS

Based from the findings of the study, it is deduced that the respondents are very much aware of the prescribed guidelines/standards of the Inter-Agency Task Force on Covid-19 and the observable symptoms together with the possible prevention against the spread of the disease. With their knowledge on the standards, symptoms and prevention, it is further concluded that they are

moderately compliant on the guidelines on Covid-19.

## RECOMMENDATIONS

It is highly recommended that the following shall be undertaken to maintain a healthy environment amidst the COVID-19 pandemic:

1. Individuals attending any function in crowded places should take and follow all health and wellness practices and protocols at all times;
2. The University should promote health literacy and COVID-19 prevention strategies to continually remind the students about the frequency and rate of COVID-19 cases and employ efforts and promotions to educate the students regarding self-protection actions.
3. The University may occasionally disseminate accurate and reliable information and continuously adapt and enhance the precautionary measures that are required to prevent infection from illness.
4. The university should make use of social and mass media's significant roles and capabilities in order to combat misinformation, impart accurate information, increase student awareness

of COVID-19, and foster preventive attitudes.

5. The university is encouraged to conceptualize online platforms to update students about current information on COVID-19 and updates regarding protection protocols.
6. In order to have a more reliable study result, increase the variables included in socio-demographic characteristics as well as the sample size of the respondents. In cooperation with relevant organizations with the mandate of protecting the health of the people, local government units, and similar ones, continuously carry out a broad information drive campaign through a variety of media to include the monitoring and implementation of preventative measures to lower the risk of infection from the COVID-19.

#### REFERENCES:

1. Blanco, M., Blanco, A., Suazo, C. Martinez, C. (2021). Coronavirus Awareness and Mental Health: Clinical Symptoms and Attitudes Toward Seeking Professional Psychological Help. *Front. Psychol., Sec. Health Psychology* <https://doi.org/10.3389/fpsyg.2021.549644>
2. Carducci A. et al., "Environment and health: Risk perception and its determinants among Italian university students," *Science of The Total Environment*, vol. 691, pp. 1162-1172, 2019.
3. Gonzales, R., Ortiz, E., Evangelista, I., (2021). Awareness, Attitude, and Prevention Practices of Selected Groups on Coronavirus (COVID-19) Pandemic. *Asian Society of Teachers for Research, Inc. Vol. 5 · November 2021.*
4. Guo B. et al., "Investigation on the status of health knowledge level of medical students in a medical university," *Medicine and Society*, vol. 25, no. 7, pp. 10-12, 2012.
5. Huang C. et al., "Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China," *The Lancet*, vol. 395, no. 10223, pp. 497-506, 2020.
6. Kaso, A.W., Hareru, H.E., Agero, G. Zemachu Ashuro, Z. (2020). Assessment of practice of Covid-19 preventive measures and associated factors among residents in Southern, Ethiopia
7. Moran K. R. and Del Valle S. Y., "A meta-analysis of the association between gender and protective behaviors in response to respiratory epidemics and pandemics," *PloS ONE*, vol. 11, no. 10, pp. 1-25, 2016.
8. Nilsen, P., Seing, I., Ericsson, C., et.al. (2020). Implementing social distancing policy measures in the battle against the coronavirus: protocol of a comparative study of Denmark and Sweden Implementation Science Communications volume 1, Article number: 77 (2020)
9. Santiago, J., Santos, A. (2021). Knowledge, attitude and practices of the university students about COVID-19 during the Luzon lockdown in the Philippines. *International Journal of Public Health Science (IJPHS)*. Vol. 10, No. 3, September 2021, pp. 670~678
10. Talabis, D.A., Babierra, A., Buhat, C.A., et.al. (2020). Local Government Responses for Covid-19 management in the Phillippines. *BMC Public Health Volume, 2020.*
11. <https://www.deped.gov.ph/2020/05/11/atf-approves-the-be-lcp-school-opening-on-august-24-2020/>
12. Taylor M., "Gender differences in health literacy about tuberculosis (TB) amongst South African high school students," *American Journal of Tropical Medicine and Hygiene*, vol. 83, no. 5, pp. 201-201, 2020.
13. Tripathi, Rina et.al. Awareness and Preparedness of Covid-19 Outbreak among Health Care Workers and other Residents of South-West Saudi Arabia: A Cross-sectional Survey. <sup>1</sup>Department of Clinical Pharmacy, Pharmacy Practice Research Unit (PPRU), College of Pharmacy, Jazan University, Jazan, Saudi Arabia
14. Wilder-Smith, A., Chiew, C. J., and Lee, V. J. (2020). Can we contain the COVID-19 outbreak with the same measures as for SARS? *Lancet Infect. Dis.* 20, 1–6. doi: 10.1016/S1473-3099(20)30129-8



15. <https://doh.gov.ph/book/export/html/33548>
16. <https://www.agrifarming.in/agriculture-in-philippines-farming-major-crops>