

## The Volunteer Phenomenon of Nurses in the Philippines

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**Abstract** - Graduate nurses are now facing massive unemployment and underemployment. Statistics of unemployed Filipino nurses hit 150,000 in 2008. Newly licensed nurses would volunteer to work in the hospitals to get the needed experience and training. The Philippine Nurses Association (PNA) claims that volunteer nurses are being exploited by requiring volunteers to pay a fee at the same time availing of the volunteers' professional services. This study aims to explore the nature of volunteer programs and to measure the volunteer nurses' level of self-concept. Utilizing both quantitative and qualitative methods, the respondents were chosen using purposive sampling technique. Focused group discussions (FGD) with volunteer nurses and interview with hospital administrators were both utilized. Questionnaire on Professional Self Concept Scale was used. Data were analyzed using SPSS and Pearson R. The result of the study showed that newly graduate nurses enter into volunteerism program offered by different hospitals to gain clinical experience for future employment. This study concludes that graduate nurses are most likely to volunteer because of lack of opportunity to work.

**Keywords** - volunteer nursing program, nurse's self-concept, newly graduate nurses

## INTRODUCTION

Nursing is the nation's largest health care profession, with 2.6 million registered nurses (RN's), and many more needed in the future. Nurses are the largest single component of any hospital staff, the primary provider of hospital patient care and they deliver most of the nation's nursing home care. Nurses work in a variety of other settings.

Nursing has become the preferred course of a growing number of college enrollees. The CHED's Policy, Planning, Research and Information Office sees almost half a million or 497,000 students taking the nursing course in the school year 2008-2009 (manilatimes.com).

While many countries in the world are experiencing nursing shortage, the Philippines appear to have an oversupply of nurses. The Officer-in-Charge of the Professional Regulation Commission (PRC), Commissioner Ruth R. Padilla, revealed that the country has an oversupply of 400,000 licensed nurses and that the hospitals can only accommodate 60,000 nursing positions (Jaymalin, 2008). Padilla also pointed out that the country yearly produces 100,000 licensed nurses; however, no additional positions are created in the government and private hospitals nationwide. The recent board exam of November 2008 revealed additional 39,000 new registered nurses (PDI Inventory of nurses cited in Lorenzo 2008).

According to Francisco (2009), history of nursing in the Philippines showed that the enrolment in nursing schools is directly proportional to the demand of nurses in the USA. With the retrogression in US immigration process for almost three (3) years now, the deployment of Filipinos nurses in the USA has also gradually decreased. The demand for health care professionals especially nurse is still present in the USA, but the openings are centered on RN's with acute care experience and training, in special or intensive care areas. Adding to the gloom is the pronouncement of US President Obama to support domestic employment due to the recession. He articulated openly the possibility of penalizing US employers who will employ human resources from the US.

Graduate nurses are now facing massive unemployment and underemployment. Statistics of unemployed Filipino nurses hit a whooping 150,000 (estimated count) in 2008. More graduates were

added since then. Although many of the unemployed nurses passed the board examination, one of the key pains of nursing recruiters in the country is the lack of nurse's experience and training in actual and hospital work. The sad news is, there are reported cases that some new nurses are even sacrificing and more than willing to pay the local hospital just to allow them to have work experience in their resume'. This is becoming a trend and some folks are reported to be benefiting from it ([www.filipinonurses.com](http://www.filipinonurses.com)).

Registered nurses volunteer for many reasons. A volunteer experience can bring physical and spiritual renewal to their personal and professional lives (Vali 2009). They may volunteer for many of the same reasons as anyone else, to meet new people, to gain new skills, to feel part of a group and to help people.

The Philippine Nurses Association through its National President Leah Paquiz has disclosed that the oversupply of nurses is fast becoming the country's problem (Melencio 2008). Some newly licensed nurses would volunteer to work in the hospitals if only to get the needed experience and training. There are varying reports about the repercussions of nurses' volunteers' work. The PNA claims that volunteer nurses are being exploited (Balagtas 2008) by requiring volunteers to pay a fee at the same time availing of the volunteers' professional services. On the other hand, the Department of Health (DOH) is defending the "training-for-free" scheme in government hospitals, saying that the fees are cancelled by hospitals for specialized training courses for nurse trainees.

Although there are a number of arguments and counter arguments exchanged by authorities through the media, no research has been done to document these volunteer programs and explore the experience of volunteer nurses. Furthermore, there is a question of how the circumstances of volunteer nurses have an impact on their professional self-concept or how they feel about themselves as nurses.

Examining professional concept is vital since it has profound effect not only on the nurses' professional performance, but also on patient care (Arthur & Randle, 2007).

Researches have not focused on exploitation and abuse related to volunteer work, especially in the nursing and allied health fields. It appears that the volunteer work of nurses in the Philippines is a

unique phenomenon which merits an in-depth exploration. Thus, a research study in this area is imperative.

### OBJECTIVES OF THE STUDY

The College of Nursing is very much interested in this study since this will be the first in the country and that results contribute to the nursing profession to uplift the condition of professional nurses in the country. The main purpose of the study was to explore and describe the nature of volunteer programs for nurses and the experiences of volunteer nurses in the country; specifically it determined the profile of the respondents in terms of age, gender, religion, length of volunteer experience, and area of assignment. It also described the Volunteer programs in major government and private hospitals. This study also explored the experiences of volunteer nurses and measured the volunteer nurses' level of self-concept. Lastly, the study determined the relationship between volunteer nurses' professional self-concept and selected demographic and non-demographic variables.

### MATERIALS AND METHODS

This research utilizes both quantitative and qualitative methods of data collection. In many aspects, qualitative research is considered a direct approach to expand an experience or phenomenon where findings are generated in a manner that is not arrived at by means of statistical procedures or quantification. Data are elicited by an explicit account of the experiences of the subjects.

Focus group discussions (FGD) with volunteer nurses on their experiences and in depth interview to hospital administrators were used as a method of data collection. The researchers compiled various statements from the interviews with the participants in order to arrive at a holistic view of their experiences (Polit & Beck, 2004). Through the social interaction with the participants, the researchers were then able to identify and understand the phenomenon in several ways and construct the realities of these participants' experiences. In-depth interviews were done to come up with a view of reality that the participants recognized as vital and significant. The interviews were exhaustively transcribed while focusing on the experiences that were

common among them. The researchers knew these different realities, by carefully analyzing the statements as verbalized by the participants and reporting them through extensive quotations and identification of themes that reflect the descriptions of the participants' experiences (Gillis & Jackson, 2002).

A quantitative method of research was also employed in this study to identify the respondent's profile, determine the level of Professional Self Concept of the volunteer nurses, and to identify the relationship of the profile variable and the level of professional self-concept of the respondents. The researchers used the Professional Self Concept Scale, a tool by Dr. Arthur David (2006) of National University of Singapore. It is composed of 30 items measuring the self-concept of a professional nurse.

This study was conducted in the CALABARZON area specifically Batangas City and Cavite City. The setting included three hospitals, a tertiary government hospital with 300 bed capacity and two private tertiary hospitals with 100 bed capacities each.

## RESULTS AND DISCUSSION

Majority(63.64%) of the respondents were aged 21-22 years old, followed by 23-24 years old (25.00%). This means that they were new graduates who recently passed the board examination. Most were female and single, reflective of their age. Majority (88.64%) were Roman Catholic.

In terms of length of experience, many of them had 3 - 6 months volunteer work. The longest time was 12 months. Most of the hospitals accepting trainees had their own duration of training, the shortest was 3 months and the longest was one year, or in some hospitals it can be extended as long as there is a need and there is a possibility of being absorbed as a staff nurse. They were rotated in the different wards or areas but mostly, they were assigned in the general ward. This is expected because nurse trainees are just beginners and the special areas in the hospital need more experienced nurses.

Based on the FGD, volunteering was often seen as an opportunity to acquire job related skills and improve job opportunities which are a much more common motivation for volunteering among younger and unemployed volunteers.

Batangas Regional Hospital had the most number of respondents because it was the biggest hospital in the region with 300 bed capacity, followed by Jesus of Nazareth which is also a tertiary hospital with a hundred bed capacity, and lastly there were only few volunteers from Bautista Hospital which is not as big as the other two hospitals. (p.3 states this also was a 100-bed hospital)

Reasons for choosing the institution include the number of bed capacity; according to the volunteers, the more patient, the more that they will get experience. There is also autonomy in a government hospital than the private ones which usually offers limited exposure because of the hospital's policies. Some volunteers chose the hospital for practical reasons, based on proximity and the availability of volunteer slots.

### Volunteer Programs Offered by Private and Government Hospitals

The Volunteer Program in the government hospital, Batangas Regional Hospital according to the chief nurse, usually lasted for 3 months but may be extended for another three months upon request, depending upon the availability of slots. The maximum period of volunteer program was six months to one year. The volunteers were under the direct supervision of the staff nurse on duty and could have limited function as a staff nurse. At least 70-80 volunteers per program were accepted and rotated to different wards. After the period of the training program, the participants were given certificates of attendance.

The benefits in the volunteer program in the government hospital were the same with private hospital. These include the clinical experiences in the hospital and training for future employment and certificate of training. They could also have a chance to be employed depending on the availability of positions. No monetary benefits were accorded to the volunteers.

Similarly, the volunteer programs for the private hospitals were also offered for three months with allowable extension of another three months with no renewal of contract unless they could be absorbed as contractual staff depending on their performance. However, they could be recalled in cases of emergency. They were rotated at different wards including the Operating Room and Emergency Room.

To be accepted in the Volunteer Program, nurses need to submit an application letter, and should pass the qualifying exam given by the training office and final interview by a panel. A one day orientation and lecture prior to exposure was given before they started the program. Included in the program were seminars/ lectures about nursing care. They were also included in monthly meetings and all the activities of the hospitals and in service training.

### Experiences of Volunteer Nurses

Using Colaizi's methodology, six significant essences or themes surfaced from the statements of the respondents. The positive side included: need for professional growth, joy and fulfillment, improved interpersonal and communication skills, and motivation. The negative aspects were degrading feeling and anxiety.

In the discussion that follows, the English translation is provided. The original excerpt of the transcripts of interviews is provided in the appendix.

### Need for Professional Growth

Professional growth was a continuous learning and growing in one's profession to stay competent in the field. The need experienced by the participants arose from their desire to find a job in the hospital to be able to practice the nursing profession. Volunteering was the perfect vehicle to discover something one is really good at and develop a new skill.

FGD participants quoted;

"I can get more experience and skills in the government hospital" "I feel that I will be productive here."

"I don't want to be a standby."

Joy and Fulfillment "Real Nurse" feeling

Joy and fulfillment described as being able to satisfy one's desire was a feeling that most of the volunteers expressed during the conversation.

The volunteer nurses who graduated and spent much of their financial resources in their education, didn't feel that they were real

nurses even after they passed the Nurse Licensure Examination because of the lack of opportunity to work in a hospital. As a newly graduated nurse, the first thing that came to mind was where to work. Unfortunately, jobs for nursing graduates were not available. This prompted most of the respondents to volunteer in the hospitals to have that feeling that they were indeed nurses.

Participant's statement;

"I feel that I have grown. It's a big deal to be able to practice (being a nurse)"

"I like the experience in the hospital. I feel I'm a (real) nurse. I'm excited every time I go on duty."

"We functioned as staff nurses even without item, we can even give IV meds as long as we have IV therapy license but countersigned by staff nurses. "We know our limitations and we follow our preceptors."

Doing volunteer work was a chance to do something that someone felt passionate about. By doing volunteer work, most of the respondents felt a new sense of belonging and confidence and it gave them a chance to meet new people and added a variety of experience and skills to themselves (Deeds and Paul, 2009).

The nurse volunteers had unstructured orientation to their legal responsibilities and they were made aware of their liability and limitations and preceptors were always available prior to during the training.

## Motivation

Motivation is a temporal and dynamic state that should not be confused with personality or emotion. It involves having the desire and willingness to do something. Working in a clinical area, functioning as staff nurses and no longer as student nurses without supervising teachers gave motivation to newly licensed nurses to render their services without expecting anything in return. Being called nurses gave them the joy and encouragement to continue in their profession. There were also benefits gained in being a volunteer nurse or nurse trainee as some hospital calls it. There was a possibility of job or tenure, with the experiences gained while waiting for employment locally or abroad. Volunteerism increased their technical and communication

skills because of exposure and practice in the clinical area.

Participants quoted;

“I’ve been a graduate of 2008, I couldn’t find work so I decided to volunteer which is okay because the staff is accommodating.”

“It is more fulfilling to work in line with your course rather than working in call center.”

“It’s a big thing to be able to practice, it’s quite difficult when you were a student, and relatives were not so cooperative.”

“I gain confidence to face other people and the certificate that we can get is motivating.”

Unlike many things in life, there is a choice involve in volunteering. Volunteers predominantly express a sense of achievement and motivation, which is derived from the desire and enthusiasm to help others.

### Improved Interpersonal and communication skills

Interpersonal relationship is a social association, connection or affiliation between two or more people. They vary in differing levels of intimacy and sharing, implying the discovery or establishment of common good and may be centered on something shared in common.

Nurses volunteer in hospital to be part of the team, make more friends and associates, and develop their communication skills with patients and hospital personnel

Participants quoted:

“I become more confident talking to patients as well as dealing with doctors.”

“I really believe that my technical and communication skills improved because of my training in this hospital.”

“I have new friends because of this exposure.”

Negative experiences were also evident with the volunteer nurses as shown in the following section.

Degrading /lowered self confidence

Working as a volunteer made them feel inferior to other staff nurses. They had lower self-esteem, were intimidated by others and lacked confidence in doing the nursing procedures.

Participants quoted;

“I feel bad... people have different view of us (volunteers) than with the staff nurses.”

“Sometimes the patients don’t want us to do the procedure.”

“Sometimes, there are questions from patients that I cannot answer.”

“There are staffs who always give us things to do that we become toxic sometimes.”

“If you are new in the area, you still need to ask, sometimes staff is not approachable. We feel intimidated.”

When we see our former classmates working already as a staff and we are still volunteers, we envy them; we would like to hide because we felt that we are left behind.”

### Anxiety

Anxiety is used to describe feelings of uncertainty, uneasiness, apprehension, or tension that a person experiences in response to an unknown object or situation. There were instances that these volunteer nurses experienced anxiety because of the following; difficulties encountered in the area; overworked because of understaffed hospital, staff issues like not willing to teach a novice nurse, demanding doctors, difficult handwriting of doctors; patient issues such as language barrier, demands, and personal preference.

One source of anxiety was the shortage of staff nurses common not only in the government hospital but also in the privately owned hospitals.

Participants quoted;

“There are so many works, busy, no time to eat, tiring but staff are supportive. “It is a challenge for us to read the doctor’s order.”If the patient cannot understand what we are explaining, we use sign language.”

“I was thinking why this hospital can’t add more nurses considering the number of patients and work to do.”

Demanding relatives especially in the ICU.”

Table 1. Level of professional self-concept of the volunteer nurses

Item	Weighted Mean	Verbal Interpretation	Rank
1. When I am at work and the situation calls, I will be able to think of alternatives.	3.64	Agree	9.5
2. I will be a skillful nurse.	3.82	Agree	4.5
3. I am a competent leader.	3.43	Tend to Agree	17
4. I believe that flexibility is one of my attributes.	3.55	Agree	13
5. Competency is one of my characteristics.	3.52	Agree	14
6. When I am in charge, people work efficiently.	3.34	Tend to Agree	19.5
7. I generally look forward to going to work.	3.73	Agree	6
8. When confronted with nursing problems, my creativity will help me solve them.	3.57	Agree	12
9. I do not believe I am particularly empathic.	2.73	Tend to Agree	24
10. Nursing is a rewarding career.	3.61	Agree	11
11. Flexibility helps solve nursing problems.	3.84	Agree	3
12. I think it is important to have a barrier between the nurse and patient.	2.95	Tend to Agree	22
13. I would rather not have the responsibility of leadership.	1.75	Tend to Disagree	29
14. I know what to expect when I start work as a nurse.	3.36	Tend to Agree	18
15. I am quick to grasp the essentials of problems, to see alternative solutions and to select the most appropriate solution.	3.27	Tend to Agree	21

Continuation of Table 1

16. I think it is important for a nurse to share emotions with patients.	2.14	Tend to Disagree	28
17. Most of my colleagues seem willing to work with me as a leader.	2.93	Tend to Agree	23
18. I think I will regret ever starting nursing.	1.64	Tend to Disagree	30
19. On the whole I am satisfied with my creative approach to work and will apply this to nursing.	3.45	Tend to Agree	15.5
20. Competency is the demonstrated ability to successfully apply knowledge and skills in the performance of complex tasks. I will be a competent nurse.	3.68	Agree	7
21. I feel more comfortable not getting too emotionally close to the people I work with.	2.72	Tend to Agree	25
22. Decision making is one of my attributes.	3.45	Tend to Agree	15.5
23. Most nurses find nursing less satisfying than they thought it would be.	2.68	Tend to Agree	26
24. I usually perform skills as well as my other colleagues.	3.64	Agree	9.5
25. Many nurses feel trapped in their job.	2.30	Tend to Disagree	27
26. My flexible approach will bring out the best in my patients.	3.66	Agree	8
27. I think I will continue in nursing for the most of my working life.	3.34	Tend to Agree	19.5
28. In nursing, it is important to have professional interaction with colleagues.	3.86	Agree	2
29. Most people would say nursing is a valuable profession.	3.82	Agree	4.5

Continuation of Table 1

30. I think I will be respected as a nurse by other professionals.	3.93	Agree	1
Composite Mean	3.25	Tend to Agree	

Based on Table 1, the respondents tend to agree on their professional self-concept as revealed by the composite mean of 3.25. Among the items cited, the topmost included “I will be respected as a nurse by other professionals (3.93); in nursing, it is important to have professional interaction with colleagues (3.86); flexibility helps solve nursing problems (3.84); I will be a skillful nurse and most people would say nursing is a valuable profession both obtained 3.82 weighted mean values. All were positively agreed. This means that the volunteer nurses had a high level of self-esteem in terms of being professionals and the skills that they will acquire in the volunteer program.

The respondents volunteered for a wide variety of reasons, especially wanting to help others. Some of the many possible motivations identified by other volunteer are: they felt needed, to share a skill, to gain leadership skills, satisfaction from accomplishment, to keep busy, for recognition, to have an impact, to learn something new, to be challenged, to feel proud, to make new friends, to explore a career, to keep skills alive, to assure progress, to feel good, to be part of a team, and to build the resume.

These findings confirm that the professional self-concept of nurses was an important component in the professional and academic development of the nursing profession. Nursing literature strongly suggests that the self-concept of nurses is an important concept for academics, administrators and clinicians to consider in the development of the profession. The issue of self-concept is a central issue in the study and practice of education and psychology. How psychology translates into professional life or identity and how it impacts on an individual's performance is an issue, which several nurse authors have pursued (Arthur 2006, Arthur and Thorne 1998, Frahm and Hyland 1995). Items

which were agreed were “on the whole I am satisfied with my creative approach to work and will apply this to nursing”, “decision making is one of my attributes,” “I am a competent leader”, “I know

what to expect when I start work as a nurse”, “When I am in charge, people work efficiently” and “I think I will continue in nursing for the most of my working life.” These statements show that these nurses had a moderate level of self-esteem when it comes to competency and leadership. This is expected because as novice nurses, they still have to learn advanced and critical nursing skills.

Competency is also an important factor of nurse’s self-concept. Being competent means the ability to control and operate the things in the environment and the environment itself. It is very important for a nurse to be competent to be able to give the best possible intervention to the client. It is clear therefore, that competence is more than the possession of qualifications. It involves having sufficient and relevant experience as well.

This is supported by the theory of Patricia Benner (1984). One of the hallmarks of the theory is that each level is built heavily upon the experiences at lowest levels. For instance, the only usable experiences novice can rely on are textbook knowledge and black or white “rules”, laid out prior to clinical exposure. Without the benefit of real life scenarios that are often perplexing to the novices and any given situations tends to veer towards “gray areas.” A novice will be very limited to performance of routine tasks with little analysis.

A step up from the novice, an advance beginner may be able to perform simple emergency department tasks such as triaging of simple, straightforward cases and recognizing normal variability in vital signs in common clinical scenarios, although atypical settings (e.g. relative bradycardia in typhoid fever) maybe misleading. Competent nurses utilize substantial analytical and critical thinking effort in order to assess multiple relevant elements in a patient’s condition and arrive at plans that possess both short and long term goals.

There were items which were disagreed such as “many nurses feel trapped in their job”, “I think it is important for a nurse to share emotions with patients”, “I would rather not have the responsibility of leadership” and “I think I will regret ever starting nursing” with 2.30, 2.14, 1.75 and 1.64 weighted mean values, respectively.

This means that the respondents’ self-esteem was slightly affected by their status as volunteer nurses. Some of the respondents felt that they were trapped in their job and some have regrets in choosing the

nursing profession. This was validated by the result of the focus group discussion.

Table 2. Relationship between the profile variables and the level of professional self-concept

Profile Variables	Eta <sup>2</sup>	p-value	Interpretation
Age	0.049	0.734	Not Significant
Gender	0.006	0.617	Not Significant
Status	0.029	0.267	Not Significant
Religion	0.115	0.081	Not Significant
Length of Volunteering	0.248	0.302	Not Significant
Department Assigned	0.311	0.188	Not Significant
Hospital	0.030	0.541	Not Significant

It can be gleaned from Table 2 that all computed eta values indicated very weak to slight association while the resulted p-values were all greater than 0.05 level of significance, thus the hypothesis of no significant relationship between the profile of the volunteer nurses and the level of professional self-concept is accepted. This means that there is no relationship exists and implies that their professional self-concept was not affected by their profiles.

This can be attributed to the level of the self-concept of the respondents, since most of them view volunteerism as training for their own professional growth and this is true regardless of their age, gender, length of volunteer work and hospitals.

## CONCLUSIONS

The volunteer nurses had both positive and negative experiences on the volunteer program. There were implications of these volunteer programs to the nursing profession especially in terms of the status of volunteer nurses. The government and nursing organizations need to provide directions and guidelines to address the concerns of volunteer

nurses. Volunteer nurses encounter same difficulties as the regular staff in the performance of their duty as volunteers. Volunteer nurses were oriented with regards to legal responsibilities and are aware of liability and limitations.

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