

The Influence of Work Values on Work Engagement among Barangay Health Workers in the Municipality of Tagoloan, Misamis Oriental

¹Princes Sarah Mae S. Lagumbay, ¹Carmel Dominique V. Oberez, ¹April Rose M. Achas,

¹Divina B. Catalan, ¹Grapesy Pink A. Calderon, ¹Alex L. Señara

¹Tagoloan Community College, Philippines

*Corresponding Author's Email Address: irdc2025@gmail.com

DOI: 10.63941/DisKURSO.2026.1.2.04

Article Information

Received: September 02, 2026

Accepted: September 25, 2026

Published: October 14, 2026

Keywords

*Barangay health worker;
Work values; Work
engagement; Health system*

ABSTRACT

This study investigates the influence of work values on work engagement among Barangay Health Workers (BHWs) in the Municipality of Tagoloan, Misamis Oriental. Despite their pivotal role in the Philippine health system, the factors driving BHWs' commitment to their voluntary roles remain underexplored. Utilizing the Self-Determination Theory and the Hierarchy of Needs as theoretical frameworks, the study evaluates the relationship between various demographic factors and work values, and how these elements contribute to job satisfaction and performance. The methodology employed a mixed-method approach that integrates quantitative and qualitative research designs. The research locale is identified as ten barangays in the Municipality of Tagoloan. A purposive sampling design was utilized to focus on Barangay Health Workers, data collection involved structured questionnaires and in-depth interviews, ensuring comprehensive insights into the participants' work values and engagement levels. Research instruments were adapted and validated to measure intrinsic and extrinsic work values alongside cognitive, conative, and affective work engagement, employing a 4-point Likert Scale for quantitative analysis. Statistical treatments, including weighted means and Pearson correlation, were applied to interpret the data, while ethical considerations emphasized informed consent, confidentiality, and the protection of participants' rights.

The study shows a strong correlation between work values and engagement levels, with intrinsic values being particularly influential. It suggests that BHWs derive satisfaction from their roles primarily due to personal values, emphasizing the need for recognition and professional development opportunities. The majority of respondents are middle-aged females with a strong commitment to community service. Recommendations include creating supportive work environments, ensuring adequate compensation, and integrating work values into training programs.

INTRODUCTION

Barangay Health Workers (BHW) have been a crucial part of the Philippine healthcare system for nearly four decades, recognized for their significant contributions to local health services and community engagement (Mallari et al., 2020). Although their role is voluntary, BHWs have evolved into an essential component of the healthcare workforce, significantly impacting public health outcomes. The Barangay Health Workers Benefits and Incentives Act (Republic Act 7883) was enacted in 1995 to acknowledge their contributions and provide support,

including scholarships and allowances for their families (Congress of the Philippines, 1995). However, the actual implementation of these benefits often depends on local government budgets, leading to disparities in job satisfaction and engagement among BHWs.

The study aims to explore the relationship between work values and work engagement among BHWs in Tagoloan, Misamis Oriental. Work values, which include intrinsic (related to personal fulfillment) and extrinsic (related to external rewards) aspects, significantly influence work engagement and overall job satisfaction (Yulistiani et al., 2020; Primana & Permadi, 2018). The research will assess the personal and professional values that motivate BHWs, examining how these values shape their engagement in their roles.

Integrating Self-Determination Theory (SDT) and Maslow's Hierarchy of Needs, the study aims to explore how these motivational frameworks can enhance the understanding of work values and engagement among Barangay Health Workers. This understanding can lead to improved job satisfaction and health outcomes in their communities. Self-Determination Theory (SDT), developed by Richard Ryan and Edward Deci in 1985, emphasizes the interaction between an individual's social environment and innate dispositions, distinguishing between intrinsic values that foster psychological growth and extrinsic values that are less conducive to personal development (Busque-Carrier et al., 2022; Carrier et al., 2022). Intrinsic motivation arises from activities that satisfy psychological needs for autonomy, competence, and relatedness, while extrinsic motivation is driven by external rewards (Ratelle et al., 2022). For Barangay Health Workers (BHW), high autonomy enhances intrinsic motivation and engagement (Corff et al., 2021).

While, Maslow's Hierarchy of Needs, introduced in 1943, outlines a progression from basic physiological needs to higher-level needs like safety, love, esteem, and self-actualization, suggesting that individuals are motivated to fulfill these needs sequentially (Maslow, 1943). This theory underscores that meeting psychological needs is a continuous process, with safety and recognition being crucial for personal growth (Abun et al., 2019). While self-actualization is an intrinsic need, other needs such as safety and esteem are categorized as extrinsic.

Objective of the study

The study is guided by four objectives:

1) to present a detailed profile of the respondents, 2) to analyze the intrinsic and extrinsic work values of BHWs, 3) to evaluate the influence of these work values on their engagement, and 4) to explore factors that may affect the relationship between work values and work engagement. By applying frameworks such as Self-Determination Theory and Maslow's Hierarchy of Needs, the research aims to contribute to the understanding of BHWs' motivations and enhance the healthcare system at the barangay level, ultimately improving health outcomes for marginalized populations (Ali et al., 2021; Gesthuizen, 2019).

MATERIALS AND METHODS

Research Design

The study employed a mixed-methods approach, combining quantitative and qualitative research. Quantitative research aims to depict a population or phenomenon without manipulating variables (Abun et al., 2021), while qualitative research focuses on understanding the "what" and "why" behind social phenomena (Crossman, 2020). The initial part of the questionnaire utilized a descriptive style to gather demographic profiles, serving as an independent variable in the quantitative analysis. Work values and their influence on work engagement were assessed using a Likert scale, while qualitative data were collected through semi-structured interviews with Barangay Health Workers in Tagoloan. This comprehensive

approach provided valuable insights into the relationship between work values and work engagement.

Population and Sample of the Study

The study focused on Barangay Health Workers from ten barangays in Tagoloan: Rosario, Sta. Ana, Mohon, Santa Cruz, Poblacion, Baluarte, Gracia, Sugbongcogon, Natumolan, and Casinglot. These health workers serve as frontliners, providing essential health services and contributing significantly to primary healthcare and health empowerment at the barangay level (Go, 2019). Each barangay contributed five respondents for quantitative analysis, with consent obtained and questionnaires distributed. For qualitative analysis, one participant from each group of five was selected to answer three in-depth questions, resulting in a total of fifty respondents analyzed.

Instrumentation

This research utilized an adapted questionnaire for Barangay Health Workers as the primary data source, employing a 4-point Likert scale to facilitate responses. The questionnaire consisted of two main sections: the first part obtained respondents' voluntary consent to participate, while the second part included questions designed to gather essential data for the study. This second part was divided into four sections: Part I focused on the demographic profile, Part II addressed Work Values (both Intrinsic and Extrinsic), and Part III examined Work Engagement (including Cognitive, Conative, and Affective aspects). Additionally, open-ended questions were used in structured interviews to gain in-depth insights into the participants' work values and engagement, specifically exploring their motivations for being BHWs, reasons for continuing despite limited compensation, and how they balance personal life with their duties.

Hypothesis of the Study

The study's findings revealed that for Problem 1, the demographic profile of respondents—including age, sex, civil status, and education, length of service, family income, personal income, and training attended—showed no significant association with the Barangay Health Workers. For Problem 2, there was no significant difference between the intrinsic and extrinsic work values of the workers. Problem 3 indicated that work values did not significantly influence the cognitive, affective, and conative aspects of work engagement among the Barangay Health Workers. Lastly, Problem 4 found no significant relationship between work values and overall engagement.

RESULTS AND DISCUSSION

The analysis and interpretation of the data focus on both quantitative and qualitative aspects related to the demographic profiles and work values of Barangay Health Workers, examining how these factors influence their work engagement.

The overall results and findings of the study disproved the null hypothesis, suggesting that there was a relationship between the work values and work engagement of Barangay Health Workers. This indicated that comprehending the connection between what health workers prioritize and their level of engagement in their work was vital. By acknowledging the significance of both intrinsic and extrinsic values, organizations could formulate improved strategies to engage their workforce. When health workers felt appreciated and valued, they were more inclined to remain motivated and perform effectively. Thus, emphasizing the creation of a work environment that fostered these values could have resulted in a more engaged workforce. Organizations could have gained from investing in initiatives that resonated with the values of their employees, leading to favorable outcomes for both staff and the community they served. Additionally, it demonstrates that intrinsic values in relation to

work values affect their work engagement across various dimensions, which include cognitive, affective, and conative.

Problem 1. What are the demographic profiles of barangay health workers in terms of:

Table 1 presents the age distribution of respondents, revealing that the majority (60.0%) were aged 44 and above. This age group tends to exhibit higher work engagement, likely due to their enhanced personal capabilities and extensive life and professional experiences. In contrast, only 12.0% of respondents were in the 25-34 age range, reflecting a lower participation among younger individuals who may prioritize career advancement or education over community-based roles like barangay health work. The demands of health work may require maturity and life experience that younger individuals feel they lack, along with less attractive compensation compared to other sectors. This trend indicates a potential gap in attracting younger workers, which could impact the sustainability of the barangay health workforce. As noted by Abun et al. (2019), younger individuals often prioritize aspirations for wealth and fame, although some may choose paths focused on health, family, philanthropy, and personal development.

Table 1 Distribution of Respondents in Terms of Age Profile

Age Range	Frequency (f)	Percent (%)
25-34	6	12.0
35-44	14	28.0
44 and above	30	60.0
Total	50	100

Table 2 illustrates the sex distribution of respondents, revealing that the majority (96.0%) were female. Female Barangay Health Workers are often perceived as more empathetic and compassionate, making patients feel more comfortable, particularly in services related to prenatal care, childbirth, and child immunization. This comfort may contribute to their strong commitment and higher engagement levels in their roles. According to Gumba (2024), societal stereotypes often associate caregiving roles with women, leading to their concentration in lower-status, lower-paid positions while facing gender bias and harassment. In contrast, only 4.0% of respondents were male, reflecting social expectations that discourage men from pursuing traditionally feminine roles like nursing or community health work. This low male representation may limit diversity in perspectives and experiences, potentially affecting team dynamics and health strategies. Encouraging more men to enter the field could help challenge stereotypes and foster a more inclusive environment for all health workers.

Table 2 Distribution of Respondents in Terms of Sex Profile

Sex	Frequency (f)	Percent (%)
Male	2	4.0
Female	48	96.0
Total	50	100

Table 3 presents the civil status distribution of respondents, indicating that the majority (62.0%) were married. Married individuals often exhibit therapeutic qualities and handle situations with care and confidence (Taburnal, 2017). Their commitment to relationships may lead to a stronger focus on professional responsibilities, as job tenure typically increases with age. Additionally, emotional support from spouses can help health workers manage job-related stress, although married respondents may also face challenges like time management that could affect work performance. Understanding the link between marital status and work engagement

can aid leaders in developing better support systems for health workers, enhancing job satisfaction and performance.

In contrast, only 4.0% of respondents were single or separated. Single individuals often prioritize personal goals and career advancement, which can influence their work engagement. Separated respondents may experience emotional stress that detracts from their job responsibilities, negatively impacting motivation and performance. Recognizing these differences is essential for fostering an inclusive work environment. Implementing support programs tailored to the needs of single and separated health workers can improve engagement and job satisfaction, ultimately benefiting both employees and the communities they serve (Gumba, 2024).

Table 3 Distribution of Respondents in Terms of Civil Status Profile

Civil Status	Frequency (f)	Percent (%)
Single	2	4.0
Married	31	62.0
Cohabited	7	14.0
Separated	2	4.0
Widowed	8	16.0
Total	50	100

Table 4 indicates that the majority of respondents (56.0%) were high school graduates, highlighting that most Barangay Health Workers (BHWs) have completed basic education, which is essential for their roles. High school education equips them with necessary skills such as reading, writing, and effective communication, enabling them to understand health information and engage with the community. Many respondents graduated from high school due to financial constraints, and the position's minimal formal education requirements make it accessible to those who may not have pursued higher education. Additionally, the voluntary nature of BHW roles often attracts individuals with high school diplomas, as college graduates typically seek higher-paying jobs. The community-based aspect of their work allows high school graduates, who are often well-known in their neighborhoods, to build trust and rapport effectively.

Conversely, only 2.0% of respondents were elementary graduates or held NC II qualifications, indicating a limited number of BHWs with further education or vocational training. Those with only elementary education may struggle to perform their duties effectively, while the low representation of individuals with NC II qualifications suggests a need for more support and training opportunities in the community. Insufficient education and skills among health workers can negatively affect their engagement and the quality of services provided (Taburnal et al., 2017).

Table 4 Distribution of Respondents in Terms of Educational Attainment Profile

Educational Attainment	Frequency (f)	Percent (%)
Elementary Graduate	1	2.0
High School Level	6	12.0
High School Graduate	28	56.0
College Level	12	24.0
College Graduate	2	4.0
Vocational Training	0	-

NC II	1	2.0
Total	50	100

Table 5 reveals that 40.0% of respondents had 1-5 years of service, indicating that many Barangay Health Workers (BHWs) are relatively new to their roles, which may impact their engagement and performance. Hartingan-Go et al. (2021) note that BHWs often feel pressured to align politically with elected officials to maintain their positions. Conversely, 32.0% of respondents had over 15 years of service, suggesting that longer tenure enhances commitment, participation, and connection to work values. Experienced BHWs develop a deeper sense of purpose, improve their skills, and find their work more fulfilling, which boosts their engagement. Recognition from the community further strengthens their dedication.

In contrast, only 8.0% of respondents had 11-15 years of service, indicating fewer long-term workers. One BHW expressed a strong commitment to community service, stating, “I truly love my work for 11 years, and I am willing to give even my own money...” (BHW B). According to R.A. 7883, BHWs may be accredited after five years of service, but those not registered under the act are not considered part of the formal labor market. This highlights the importance of formal recognition and support for BHWs to enhance their roles and contributions to the community.

Table 5 Distribution of Respondents in Terms of Length of Service Profile

Length of Service	Frequency (f)	Percent (%)
1-5	20	40.0
6-10	10	20.0
11-15	4	8.0
15 and above	16	32.0
Total	50	100

Table 6 presents the estimated personal monthly income distribution of respondents, revealing that 82.0% earned between ₱2,001-2,500, which is below the basic Philippine salary rate. BHW C noted, “*Ang BHW kabalo biya ta na honorarium lang, pero sa akong trabaho gakalingaw ko... kung naa mi trabaho gina enjoy nako... naa na sa akong heart ang pagka BHW.*” reflecting a common sentiment among BHWs who find fulfillment in their roles despite low compensation. BHW D and E echoed similar feelings, emphasizing their happiness in serving the community, even with minimal pay, “*Malipayon ko Sir magsirbisyo sa katawhan bisag honorarium ra akong sweldo.*” The honorarium received by BHWs is linked to the Internal Revenue Allotment (IRA) funds allocated to barangays, which vary based on criteria set by the Local Government Code and the efforts of barangay officials (Veray, 2021). As BHWs are not full-time workers, many rely on additional income sources, such as running Sari-Sari stores or engaging in online selling, to supplement their earnings (Go et al., 2023).

Only 4.0% of respondents reported an income in the ₱1,501-2,000 range, highlighting the financial challenges faced by some BHWs, who may lack alternative income sources. Their status as community volunteers rather than formal employees limits their compensation, as their allowances depend on the constrained budgets of Local Government Units (LGUs), which often prioritize other services.

Table 6 Distribution of Respondents in Terms of Estimated Personal Monthly Income Profile

Estimated Personal Monthly Income	Frequency (f)	Percent (%)
P 500 - 1,000	3	6.0

P1,001-1,500	4	8.0
P1,501 – 2,000	2	4.0
P2,001 – 2,500	41	82.0
Total	50	100

Table 7 indicates that the majority of respondents (78.0%) had a family monthly income in the P5,000-10,000 range, suggesting that many Barangay Health Workers (BHWs) live with limited financial resources. Engaging in BHW activities is generally not seen as a sustainable income source, leading many to rely on support from other working family members to meet their expenses. Household income significantly influences work engagement and values; individuals from higher-income households can often prioritize intrinsic values such as professional success and personal development, as they are less reliant on their jobs for basic needs (Abun, 2021). Conversely, only 4.0% of respondents reported an income of P20,001 and above, indicating that few BHWs experience higher financial security. Those from lower-income households may place greater emphasis on extrinsic factors like pay and benefits, reflecting their financial constraints.

Table 7 Distribution of Respondents in Terms of Estimated Family Monthly Income Profile

Estimated Family Monthly Income	Frequency (f)	Percent (%)
P 5,000-10,000	39	78.0
P10,001-15,000	5	10.0
P15,001-20,000	4	8.0
P20,001 and above	2	4.0
Total	50	100

Table 8 highlights the training, seminars, and workshops attended by respondents, revealing that 46.0% had participated in 10 or more training sessions. This indicates a strong eagerness among Barangay Health Workers (BHWs) to enhance their skills and knowledge, recognizing that such training is essential for improving their performance and the health of the community. Regular participation reflects their commitment to staying updated on health practices, which can lead to better service delivery and improved health outcomes.

According to Taburnal (2017), regular training intervals are crucial for maximizing skill retention, particularly in areas like basic life support. Additionally, 32% of BHWs with over 15 years of service have likely benefited from attending more than 10 training sessions, enhancing their competence in their roles. Conversely, the lowest number of respondents (16.0%) attended 7-9 training sessions, possibly due to barriers such as time constraints or financial issues, which could hinder their performance and motivation. Those with fewer training opportunities may miss critical updates and best practices, limiting their ability to provide quality care. The World Health Organization (2020) emphasizes the importance of developing competent health workers through adequate training and capacity building to effectively manage their responsibilities.

Table 8 Distribution of Respondents in Terms of Number of Training, Seminars, and Workshops Attended Profile

Number of Training, Seminars, and Workshops Attended	Frequency (f)	Percent (%)
1 – 3	10	20.0
4 – 6	9	18.0

7 – 9	8	16.0
10 and above	23	46.0
Total	50	100

Table 9 assesses the intrinsic work values of Barangay Health Workers (BHWs), revealing an overall "Very High" rating with a mean of 3.92 (SD = 0.26). This indicates that BHWs derive significant personal satisfaction from their roles, reflecting a strong commitment to their work and a sense of purpose that enhances their motivation and performance. When BHWs feel fulfilled and valued, they are more likely to engage positively with the community, improving the quality of health services and fostering trust among community members.

The highest-rated indicator was "My work as a barangay health worker was a delight," with a mean of 3.98 (SD = 0.14), suggesting that BHWs genuinely enjoy their jobs, which is crucial for maintaining motivation and encouraging extra effort in service delivery. This joy likely stems from the positive impact they have on people's lives, promoting a collaborative work environment and inspiring advocacy for community health needs.

Conversely, the lowest-rated indicator was "I enjoyed organizing activities for the community," with a mean of 3.88 (SD = 0.33). This suggests that while BHWs find pleasure in their work, they may be less enthusiastic about organizing community activities, which are essential for engagement and health education. Local leaders should recognize this sentiment and provide additional support or training in organizing activities to empower BHWs, strengthen community bonds, and improve health outcomes.

Problem 2. What are the work values of Barangay Health Workers in terms of:

Table 9 Level of Work Values of Barangay Health Workers in Terms of Instric Values

Indicators		Mean	SD	Description
1. I enjoy organizing activities for the community.		3.88	0.33	Very High
2. I feel satisfied using my abilities to help the people in the community.		3.92	0.27	Very High
3. I get the feeling of satisfaction from serving people.		3.90	0.30	Very High
4. I am happy to put a lot of effort into my job.		3.92	0.27	Very High
5. My work as a barangay health worker is a delight.		3.98	0.14	Very High
Overall		3.92	0.26	Very High
Legend: Rating Scale		Range Values	Verbal Description	
	4	3.26 – 4.00	Very High	
	3	2.51 – 3.25	High	
	2	1.76 – 2.50	Low	
	1	1.00 – 1.75	Very Low	

Table 10 Responses on Motivations and Experiences of Barangay Health Workers

Theme	Respondents Code (BHW)	Frequency (n)	Percentage (%)
Autonomy	A, B, D, E	4	80
Relationships	C	1	20
Total		5	100

Table 11 Responses on Motivations and Experiences of Barangay Health Workers despite Receiving Honorarium

Theme	Respondents Code (BHW)	Frequency (n)	Percentage (%)
Autonomy	A, B	2	40
Achievement	C, D	2	40
Status	E	1	20
Total		5	100

Table 10 and 11 details the motivations of Barangay Health Workers (BHWs) for volunteering, revealing that most respondents, including BHW A, BHW B, BHW D, and BHW E, are driven by a sense of responsibility to serve their community. This aligns with their high intrinsic work values, reflected in a mean score of 3.92, indicating significant personal fulfillment in their roles. BHWs often remain in their positions due to their emotional connection to the community and the positive impact of their work, which fosters a sense of purpose.

As they build rapport with community members and witness positive changes in people's lives, their appreciation for their profession deepens. The highest-rated motivation was the enjoyment of their work, emphasizing its importance in maintaining their motivation. However, the lowest-rated factor was their enjoyment of organizing community activities, suggesting a lack of enthusiasm in this area, which could hinder community engagement in health programs.

Despite facing challenges, BHWs continue their roles due to their commitment to helping others. Recognizing the relationship between job satisfaction and performance could lead to improved support systems for these health workers, ultimately enhancing health outcomes for the community they serve. This understanding is crucial for fostering a more effective and dedicated workforce.

Table 12 Level of Work Values of Barangay Health Workers in Terms of Extrinsic Work Values

Indicators	Mean	SD	Interpretation
1. I like going to work because I earn money.	3.74	0.44	Very High
2. I received certificates and awards because I did well as a barangay health worker.	3.50	0.71	Very High
3. I gained friends as I get along with my co- barangay health workers.	3.88	0.33	Very High
4. I am happy to receive honor and recognition for doing my job.	3.82	0.44	Very High
5. I am praised for my accomplishments as a barangay health worker volunteer.	3.82	0.44	Very High
Overall	3.75	0.47	Very High
Legend:	Rating Scale	Range Values	Verbal Description
	4	3.26 – 4.00	Very High
	3	2.51 – 3.25	High
	2	1.76 – 2.50	Low
	1	1.00 – 1.75	Very Low

Table 12 assesses the extrinsic work values of Barangay Health Workers (BHWs), revealing an overall "Very High" rating with a mean of 3.75 (SD = 0.47). This indicates that BHWs highly value external rewards, such as compliments and appreciation, which are crucial for their job satisfaction and motivation to serve their community effectively. The highest-rated indicator was the appreciation received for their work, with a mean of 3.88 (SD = 0.33), highlighting the importance of supportive relationships among colleagues. These connections foster teamwork and create a positive work environment, enhancing the effectiveness of BHWs in their roles.

In contrast, the lowest-rated indicator was the receipt of certificates and awards, with a mean of 3.50 (SD = 0.71). This reflects concerns about the fairness of compensation, as many BHWs feel their efforts are not adequately recognized in their pay. Such feelings of undervaluation could lead to dissatisfaction and impact their motivation and performance. To address these issues, community leaders should consider improving compensation structures and providing additional benefits to enhance job satisfaction and health outcomes in the community (Abun, 2019).

Table 13 Overall Summary Table of Level Work Values of Barangay Health Workers

Indicators	Mean	SD	Interpretation
Intrinsic	3.92	0.26	Very High
Extrinsic	3.75	0.47	Very High
Overall	3.84	0.37	Very High
Legend:	Rating Scale	Range Values	Verbal Description
	4	3.26 – 4.00	Very High
	3	2.51 – 3.25	High
	2	1.76 – 2.50	Low
	1	1.00 – 1.75	Very Low

Table 13 summarizes the work values of Barangay Health Workers (BHWs), showing an overall "Very High" rating with a mean of 3.84 (SD = 0.37). This indicates that BHWs have a strong understanding of their roles and responsibilities, fostering a connection to their work that motivates them to provide better services. Their positive outlook likely contributes to job satisfaction and commitment, enhancing the quality of health services for the community.

The highest-rated indicator was "Intrinsic Work Values," with a mean of 3.92 (SD = 0.26), suggesting that BHWs derive personal satisfaction and meaning from their jobs. Motivated by a desire to assist others, they experience higher morale and engagement, which leads to improved health services. Personal testimonies from BHWs illustrate their commitment to helping their community, emphasizing fulfillment over challenges.

Conversely, the lowest-rated indicator was "Extrinsic Work Values," with a mean of 3.75 (SD = 0.47). This lower rating indicates that BHWs may prioritize intrinsic motivations over external rewards like salary or benefits. Their commitment appears to stem from a genuine desire to help rather than financial incentives. While extrinsic rewards are still important, there is a need for community programs that recognize their efforts through non-monetary means, such as awards or community events.

To enhance motivation, it is essential to focus on intrinsic factors, such as opportunities for skill development and career advancement, rather than relying solely on honorarium or financial incentives. Understanding the balance between intrinsic and extrinsic work values can help leaders create a supportive environment that improves job satisfaction and performance among health workers (Shofiya et al., 2023).

Problem 3. What is the level of influence of work values on work engagement of Barangay Health Workers in terms of:

Table 14 analyzes the influence of work values on the cognitive work engagement of Barangay Health Workers (BHWs), showing a very high average impact rating of 3.67 (SD = 0.52). This suggests that BHWs' work values significantly shape their approach to their duties, with those who appreciate the importance of their roles being more mentally engaged and attentive. This

engagement improves service quality and strengthens their commitment, as their work aligns with their core beliefs. A supportive work environment, enhanced by strong work values, fosters teamwork and motivation.

The highest-rated indicator was “I gave mental attention to my work,” with a mean of 3.74 (SD = 0.49), indicating BHWs' focus and dedication, which leads to better community care and effective health interventions. This engagement also reflects the meaning BHWs find in their work, contributing to job satisfaction. In contrast, the lowest-rated indicator was “I thought about a time when I was working,” with a mean of 3.50 (SD = 0.71). This indicates that BHWs may not often reflect on past experiences, which could hinder their learning and improvement. Encouraging reflective practices could enhance their problem-solving skills and overall engagement. Health organizations should facilitate opportunities for reflection and discussion to promote continuous improvement and better community care.

Table 14 Level of Influence of Work Values on Work Engagement of Barangay Health Workers in Terms of Cognitive Work engagement

Indicators	Mean	SD	Interpretation
1. My mind is full of ideas about my work.	3.70	0.46	Very High
2. My mind is fully engaged with my work.	3.68	0.51	Very High
3. I think about a time when I am working.	3.50	0.71	Very High
4. My thoughts are fully focused when thinking about my work.	3.72	0.45	Very High
5. I give mental attention to my work.	3.74	0.49	Very High
Overall	3.67	0.52	Very High

<i>Legend:</i>	Rating Scale	Range Values	Verbal Description
	4	3.26 – 4.00	Very High
	3	2.51 – 3.25	High
	2	1.76 – 2.50	Low
	1	1.00 – 1.75	Very Low

Table 15: Level of Influence of Work Values on Work Engagement of Barangay Health Workers in Terms of Affective Work engagement

Indicators	Mean	SD	Interpretation
1. I am fully committed to doing my work in the community.	3.90	0.30	Very High
2. I am zealous to perform my work as a barangay health worker volunteer.	3.84	0.42	Very High
3. I am motivated to carry out my responsibilities.	3.94	0.24	Very High
4. I feel enthusiastic about helping people in the community.	3.88	0.33	Very High
5. I am interested in actively participating in community-building.	3.90	0.30	Very High
Overall	3.89	0.32	Very High

<i>Legend: Rating Scale</i>	Range Values	Verbal Description
4	3.26 – 4.00	Very High
3	2.51 – 3.25	High
2	1.76 – 2.50	Low
1	1.00 – 1.75	Very Low

Table 15 evaluates the influence of work values on the affective work engagement of Barangay Health Workers (BHWs), revealing a very high average rating of 3.89 (SD = 0.32). This indicates that BHWs' values are closely linked to their commitment and actions, enhancing their engagement when they recognize the importance of their roles and their impact on the community. Supporting positive work values, such as compassion and responsibility, can lead to improved performance and dedication among BHWs, fostering a stronger connection to their mission.

The highest-rated indicator was “I was motivated to carry out my responsibilities,” with a mean of 3.94 (SD = 0.24), reflecting a strong sense of duty towards the community. This motivation is crucial for enhancing health services and inspiring teamwork among health workers. Conversely, the lowest-rated indicator was “I was zealous to perform my work as a barangay health worker volunteer,” with a mean of 3.84 (SD = 0.42). This suggests that some BHWs may lack passion for their volunteer roles, which could hinder their energy and proactivity in serving the community. To address this, programs that foster emotional connections to their work and highlight the impact of their contributions are essential. By enhancing their sense of purpose, BHWs may become more engaged, leading to better health outcomes for the community. High levels of engagement are linked to increased job satisfaction (Anwar et al., 2017).

Table 16 Level of Influence of Work Values on Work Engagement of Barangay Health Workers in Terms of Conative Work engagement

Indicators	Mean	SD	Interpretation
1. Helping the community creates an impact on its people.	3.82	0.39	Very High
2. Serving the community as a barangay health worker volunteer has benefited the recipients.	3.90	0.30	Very High
3. My work contributes to the general well-being of the people in the community.	3.88	0.33	Very High
4. The services rendered to the community have improved the living conditions of the people.	3.88	0.33	Very High
5. My enthusiasm for my work inspires others in the community.	3.84	0.37	Very High
Overall	3.86	0.34	Very High
Legend: Rating Scale	Range Values	Verbal Description	
4	3.26 – 4.00	Very High	
3	2.51 – 3.25	High	
2	1.76 – 2.50	Low	
1	1.00 – 1.75	Very Low	

Table 16 evaluates the influence of work values on the conative work engagement of Barangay Health Workers (BHWs), revealing a very high average rating of 3.86 (SD = 0.34). This indicates that strong work values significantly enhance BHWs' engagement, as they feel more connected to their roles and motivated to help others. The highest-rated indicator was “Serving the community as a barangay health worker volunteer has benefited the recipients,” with a mean of

3.90 (SD = 0.30), reflecting BHWs' pride in their work and its positive impact on the community. This sense of accomplishment fosters motivation and encourages others to participate in community service. Conversely, the lowest-rated indicator was “Helping the community creates an impact on its people,” with a mean of 3.82 (SD = 0.39), suggesting that some BHWs may not fully recognize their work's impact. Leaders should communicate success

stories to enhance workers' understanding and motivation, leading to greater engagement and effectiveness.

Table 17 summarizes the influence of work values on the work engagement of Barangay Health Workers (BHWs), revealing a very high average rating of 3.81 (SD = 0.39). This indicates that work values are essential for BHWs' engagement, as believing in values like helping others and teamwork enhances their passion and dedication. When BHWs feel valued and connected to their work, it leads to improved community service and overall well-being.

The highest-rated indicator was “Affective Work Engagement,” with a mean of 3.89 (SD = 0.32), reflecting BHWs' strong commitment to their roles and their proactive approach to making a difference in their communities. This motivation highlights the importance of programs that inspire and focus workers, ultimately improving health outcomes. Conversely, the lowest -rated indicator was “Cognitive Work Engagement,” with a mean of 3.67 (SD = 0.52). This suggests that while BHWs are dedicated, they may struggle with the mental aspects of their work, potentially missing opportunities for problem-solving and innovation. Organizations should provide training and resources to enhance cognitive skills, enabling BHWs to think critically and tackle challenges effectively. Addressing this gap can improve both worker experiences and the quality of care provided to the community, emphasizing the significance of affective engagement in delivering competent health services.

Table 17 Overall Summary Table of Level of Influence of Work Values on Work Engagement of Barangay Health Workers

Indicators	Mean	SD	Interpretation
Cognitive	3.67	0.52	Very High
Affective	3.89	0.32	Very High
Conative	3.86	0.34	Very High
Overall	3.81	0.39	Very High
Legend:	Rating Scale	Range Values	Verbal Description
	4	3.26 – 4.00	Very High
	3	2.51 – 3.25	High
	2	1.76 – 2.50	Low
	1	1.00 – 1.75	Very Low

Problem 4. Is there a relationship between work values and work engagement?

Table 18 Relationship Between Work Values and Work Engagement

Correlation		Work Engagement			Decision	Interpretation
Work Values		Cognitive	Affective	Conative		
Intrinsic	Pearson <i>r</i>	0.358	0.393	0.350	0.439	Reject H0
	Relationship Strength	Weak	Weak	Weak	Moderate	
	p-value	0.011	0.005	0.013	0.001	
Extrinsic	Pearson <i>r</i>	0.722	0.442	0.386	0.657	Reject H0
	Relationship Strength	Strong	Moderate	Weak	Strong	

p-value	<0.000	0.001	0.006	<0.000
---------	--------	-------	-------	--------

Note: Relationship Strength Scale: 1 (Perfect); ± 0.80 to ± 0.99 (Very Strong); ± 0.61 to ± 0.79 (Strong); ± 0.41 to ± 0.60 (Moderate); ± 0.21 to ± 0.40 (Weak); ± 0.01 to ± 0.20 (Very Weak). **. Correlation is significant at the 0.01 level (2-tailed); **. Correlation is significant at the 0.05 level (2-tailed). $p < 0.05$ (significant) and $p > 0.05$ (not significant)

Table 18 presents the correlation analysis results examining the relationship between work values and work engagement among Barangay Health Workers (BHWs). The analysis revealed a significant correlation between Intrinsic Work Values and Overall Work Engagement (Pearson r

$= 0.439$, $p < 0.001$), indicating a moderate relationship. This suggests that as intrinsic work values increase, so does work engagement, reflecting a positive association. Health workers who find meaning and satisfaction in their jobs are more likely to be engaged, leading to greater commitment and productivity.

Conversely, Extrinsic Work Values showed a stronger relationship with Overall Work Engagement (Pearson $r = 0.657$, $p < 0.001$), indicating that extrinsic motivations, such as pay and recognition, play a critical role in enhancing engagement. Health workers tend to exert more effort when driven by external incentives, highlighting the importance of both intrinsic and extrinsic factors in fostering employee engagement.

Overall, the findings reject the null hypothesis, indicating a significant relationship between work values and work engagement. Understanding this link is crucial for organizations to develop effective strategies for engaging their workers. By nurturing both intrinsic and extrinsic values, organizations can create a supportive work environment that leads to higher motivation and better performance, benefiting both employees and the communities they serve.

CONCLUSION AND RECOMMENDATION

The study highlights the importance of recognizing and addressing specific work values that significantly impact the work engagement of Barangay Health Workers (BHWs). It found a strong correlation between higher work engagement and both intrinsic and extrinsic work values. Most BHWs were middle-aged females, married, and predominantly high school graduates, with a monthly income between Php 2,001 and Php 10,000. Intrinsic work values were rated "Very High" (mean = 3.92), indicating personal satisfaction in their roles, while extrinsic values were rated "Very Low" (mean = 3.75), suggesting a lesser focus on financial incentives.

The study revealed that work values influence engagement across cognitive, affective, and conative dimensions, with affective engagement rated highest (mean = 3.89). However, cognitive engagement was the lowest (mean = 3.65), indicating challenges in applying knowledge. Overall, the findings confirmed a significant relationship between work values and work engagement, emphasizing the need for both intrinsic and extrinsic factors to foster BHW engagement.

Recommendations include addressing BHWs' broader needs, such as compensation and training, and implementing Republic Act 7883 to ensure benefits. Local government units should collaborate to enhance the health system and provide equitable financial incentives. Additionally, educational institutions should create supportive environments for BHWs, while Rural Health Units can offer resources and recognition. Future research should expand to include larger populations and additional variables related to leadership competencies.

REFERENCES

- Abdulrahman, B. S., Qader, K. S., Jamil, D. A., Sabah, K. K., Gardi, B., & Anwer, S. A. (2022). Work engagement and its influence in boosting productivity. *International Journal of Language Literature and Culture*, 2(6), 30–41. <https://doi.org/10.22161/ijllc.2.6.3>
- Abun, D., Magallanez, T., Agoot, F., & Barroga, J. R. (2019). Extrinsic and Intrinsic Aspirations of students of Divine Word Colleges in Ilocos Region, Philippines and their Academic performance. *International Journal of English Literature and Social Sciences*, 4(2), 405–419. <https://doi.org/10.22161/ijels.4.2.32>
- Abun, D., Ranay, F. B., Magallanes, T., Encarnacion, M. J., & Alkalde, F. (2022). Employee Treatment and Work Engagement: The Philippines Context. *HAL (Le Centre Pour La Communication Scientifique Directe)*. <https://doi.org/10.5281/zenodo.5831289>
- Abun, D., Ruadap-Macaspac, L. G., Magallanes, T., Encarnacion, M. J., & Flores, N. (2021). Measuring the Work Values and work engagement of Employees: The Philippines Context. *Technium Social Sciences Journal*, 18(1), 444–464. Retrieved from <https://techniumscience.com/index.php/socialsciences/article/view/29611>
- Ali, B. J., & Anwar, G. (2021). Work Engagement: How Does Employee Work Engagement influence Employee Satisfaction? *International Journal of Advanced Engineering, Management and Science*, 7(6), 10–21. <https://doi.org/10.22161/ijaems.76.2>
- Altecin, E. J., De Leon, R. B., Gomez, C. a. T., Grijalvo, C. B. Y., Magabo, J. P. B., & Villanueva, M. M. (2023). The Silent Heroes of Bocaue: A Phenomenology of Barangay Health Workers in Responding to the COVID-19 Pandemic. *American Journal of Interdisciplinary Research and Innovation*, 2(4), 8–19. <https://doi.org/10.54536/ajiri.v2i4.1983>
- Anwar, K., & Qadir, G. H. (2017). A Study of the Relationship between Work Engagement and Job Satisfaction in Private Companies in Kurdistan. *International Journal of Advanced Engineering, Management and Science*, 3(12), 1102–1110. <https://doi.org/10.24001/ijaems.3.12.3>
- Ariza-Montes, A., Molina-Sánchez, H., Ramirez-Sobrinio, J., & Giorgi, G. (2018). Work Engagement and Flourishing at Work Among Nuns: The Moderating Role of Human Values. *Frontiers in Psychology*, 9. <https://doi.org/10.3389/fpsyg.2018.01874>
- Bai, J., & Liu, J. (2018). A Study on the Influence of Career Growth on Work Engagement among New Generation Employees. *Open Journal of Business and Management*, 06(02), 300–317. <https://doi.org/10.4236/ojbm.2018.62022>
- Bakker, A. B., & Albrecht, S. (2018). Work engagement: current trends. *Career Development International*, 23(1), 4–11. <https://doi.org/10.1108/cdi-11-2017-0207>
- Baliolaa, M. Y. T., Golpe, M. R., & Advincula-Lopez, L. V. (2023). Gains and Challenges of the Barangay Health Worker (BHW) Program during COVID-19 in Selected Cities in the Philippines. *Journal of Health Research*, 38(1). <https://doi.org/10.56808/2586-940x.1060>
- Bangalan, S. G. (2022). Mental health and protective strategies among community-based health workers in region 3, Philippines during COVID-19 pandemic. *Behavioral Medicine*, 49(4), 344–351. <https://doi.org/10.1080/08964289.2022.2069666>
- Bermio, J. B. (2018a). Barangay Health Workers' Benefits and Incentives Act of 1995 (RA7883) in Santa, Ilocos Sur, Philippines. *Liceo Journal of Higher Education Research*, 13(2). <https://doi.org/10.7828/ljher.v13i2.1062>
- Busque-Carrier, M., Ratelle, C. F., & Le Corff, Y. (2021). Work Values and Job Satisfaction: The Mediating Role of Basic Psychological Needs at Work. *Journal of Career Development*, 089484532110438. <https://doi.org/10.1177/08948453211043878>
- C. Barnes, D., & E. Collier, J. (2013). Investigating work engagement in the service environment. *Journal of Services Marketing*, 27(6), 485–499. <https://doi.org/10.1108/jsm-01-2012-0021>
- Calipjo, N. M. G. G., Nicolas, N. M. T., Julian, N. F. P., & Abun, D. (2023). Examining the Influence of Leadership Competencies on Employees' Work Engagement. *Divine Word International*

-
- Journal of Management and Humanities (DWIJMH)* (ISSN 2980-4817),2(2).
<https://doi.org/10.62025/dwijmh.v2i2.24>
- Carrillo, V. R., RN, Dael, J. C., RN, MAEM, Retuya, K. M. A. Q., RN, Tangapa, L. H., RN, Vistal, J. C., RN, MN, Yañez, D. R., RN, . . . Médecins Sans Frontières- Doctors without Borders, Operational Center of Amsterdam, Hongkong, Asia Pacific Region. (2023, April). The Situation of Barangay Health Workers in the Philippines: A Review (journal- article). *International Journal of Research Publication and Reviews* (Vol. 4, pp. 5687– 5690). Retrieved from <https://ijrpr.com/uploads/V4ISSUE4/IJRPR12273.pdf>
- De Mesa, R. Y. H., Marfori, J. R. A., Fabian, N. M. C., Camiling-Alfonso, R., Javelosa, M. a. U., Bernal-Sundiang, N., . . . Dans, A. M. L. (2023a). Experiences from the Philippine grassroots: impact of strengthening primary care systems on health worker satisfaction and intention to stay. *BMC Health Services Research*, 23(1). <https://doi.org/10.1186/s12913-022-08799-1>
- De Mesa, R. Y. H., Marfori, J. R. A., Fabian, N. M. C., Camiling-Alfonso, R., Javelosa, M. a. U., Bernal-Sundiang, N., . . . Dans, A. M. L. (2023b). Experiences from the Philippine grassroots: impact of strengthening primary care systems on health worker satisfaction and intention to stay. *BMC Health Services Research*, 23(1). <https://doi.org/10.1186/s12913-022-08799-1>
- De Vera Aquino, R. (2024, January 28). Awareness and Practices of Barangay Health Workers to Waterborne Diseases: Basis for a Proposed Capability Training Plan. Retrieved from <https://puissant.stepacademic.net/puissant/article/view/248>
- Elrod, J. K., & Fortenberry, J. L. (2020). Marketing communications in health and medicine: perspectives from Willis-Knighton Health System. *BMC Health Services Research*, 20(S1). <https://doi.org/10.1186/s12913-020-05598-4>
- Ferraro, T., Santos, N. R. D., Moreira, J. M., & Pais, L. (2020). Decent Work, Work Motivation, Work Engagement and Burnout in Physicians. *International Journal of Applied Positive Psychology*, 5(1–2), 13–35. <https://doi.org/10.1007/s41042-019-00024-5>
- Furnham, A., MacRae, I., & Tetchner, J. (2021). Measuring work motivation: The facets of the work values questionnaire and work success. *Scandinavian Journal of Psychology*, 62(3), 401–408. <https://doi.org/10.1111/sjop.12723>
- Gesthuizen, M., Kovarek, D., & Rapp, C. (2019). Extrinsic and Intrinsic Work Values: Findings on Equivalence in Different Cultural Contexts. *The ANNALS of the American Academy of Political and Social Science*, 682(1), 60–83. <https://doi.org/10.1177/0002716219829016>
- Gumba, B. G. (2024). The Workforce of the Community Health Programs in the Partido District, Camarines Sur, Philippines: Through a Gender Lens. *International Journal of Research and Innovation in Social Science*, VIII(VIII), 2508–2518. <https://doi.org/10.47772/ijriss.2024.8080190>
- Gunda, A. M. (2017). *Commitment and satisfaction of barangay health workers in Marawi City, Philippines*. Retrieved from <http://acikerisim.nku.edu.tr:8080/xmlui/handle/20.500.11776/2374>
- Hartigan-Go, K., Valenzuela, S., & Prieto, M. L. (2023). Important but Neglected: A Qualitative Study on the Lived Experiences of Barangay Health Workers in the Philippines. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.4461587>
- Ibo, J. a. S. (2020). Assessment of Workplace of Barangay Health Workers in Selected Municipalities in the Province of Albay, Philippines. *Bicol University Research and Development Journal*. <https://doi.org/10.47789/burdj.mbtcbbs.20192201.7>
- Ismail, H. N., Iqbal, A., & Nasr, L. (2019). Employee engagement and job performance in Lebanon: the mediating role of creativity. *International Journal of Productivity and Performance Management*, 68(3), 506–523. <https://doi.org/10.1108/ijppm-02-2018-0052>
- Jin, Y., Wang, H., Wang, D., & Yuan, B. (2019). Job satisfaction of the primary healthcare providers with expanded roles in the context of health service integration in rural China: a cross-sectional
-

- mixed methods study. *Human Resources for Health*, 17(1). <https://doi.org/10.1186/s12960-019-0403-3>
- Kameyama, J., Hashizume, Y., Takamura, Y., Nomura, S., Gomi, T., & Yanagi, H. (2022). Work engagement, well-being, and intent to continue working based on educational support among foreign care workers in Japan. *Environmental Health and Preventive Medicine*, 27(0), 4. <https://doi.org/10.1265/ehpm.21-00248>
- Landingin, Q. K. C. (2024). Job performance of barangay health workers (BHWS): An assessment. *International Journal of Advance Research in Community Health Nursing*, 6(1), 22–26. <https://doi.org/10.33545/26641658.2024.v6.i1a.163>
- Mallari, E., Lasco, G., Sayman, D. J., Amit, A. M. L., Balabanova, D., McKee, M., . . . Palafox, B. (2020a). Connecting communities to primary care: a qualitative study on the roles, motivations and lived experiences of community health workers in the Philippines. *BMC Health Services Research*, 20(1). <https://doi.org/10.1186/s12913-020-05699-0>
- Permadi, Linda Primana, and Amanda Kristanti. (2018). *Work Values and Career Adaptability of Class IX Students in Depok*. *Journal of Psychogenesis*. Volume 6. No. 2. December. West Java. <https://doi.org/10.24854/jps.v6i2.6944>
- Querri, A. G., Ohkado, A., Kawatsu, L., Bermejo, J., Vianzon, A., Recidoro, M. J., & Medina, A. (2020). Assessment of the role of community health volunteers in delivering primary health care in Manila, the Philippines. *Journal of International Health*, 35(1), 15–25. <https://doi.org/10.11197/jaih.35.15>
- Querri, A. G., Ohkado, A., Kawatsu, L., Bermejo, J., Vianzon, A., Recidoro, M. J., & Medina, A. (2020). Assessment of the role of community health volunteers in delivering primary health care in Manila, the Philippines. *Journal of International Health*, 35(1), 15–25. <https://doi.org/10.11197/jaih.35.15>
- Randell, M., Li, M., Rachmi, C. N., Jusril, H., Abimbola, S., Tama, A. Y., . . . Bernays, S. (2024). ‘Of’ the community but not ‘of’ the health system: Translating community health workers’ knowledge into credible advice in Aceh, Indonesia. *Discover Health Systems*, 3(1). <https://doi.org/10.1007/s44250-024-00069-7>
- Shofiya, I., Safitri, R. E. R., & Komalasari, S. (2023). The Role of Work Values on Readiness to Change in Employees. *Proceedings of the First Conference of Psychology and Flourishing Humanity (PFH 2022)*, 308–317. https://doi.org/10.2991/978-2-38476-032-9_32
- Shofiya, I., Safitri, R. E. R., & Komalasari, S. (2023). The Role of Work Values on Readiness to Change in Employees. In *Advances in Social Science, Education and Humanities Research/Advances in social science, education and humanities research* (pp. 308–317). https://doi.org/10.2991/978-2-38476-032-9_32
- Taburnal, M. V. (2017). Barangay Health Workers’ Level of Competence. *po.pnuresearchportal.org*. <https://doi.org/10.56278/apherj.v4i1.437>
- WHO Guideline on Health Workforce Development, Attraction, Recruitment and Retention in Rural and Remote Areas. (n.d.). Retrieved from http://books.google.ie/books?id=VI5FEAAQBAJ&pg=PA81&dq=9789240024229&hl=&cd=1&source=gbs_api
- World Health Organization: WHO. (2019, May 28). Addressing the 18 million health worker shortfall – 35 concrete actions and 6 key messages. *World Health Organization*. Retrieved from <https://www.who.int>
- Yulistiani, D., Lubis, M. R., & Effendy, S. (2020a). Pengaruh Employee Engagemen dan Work Value Terhadap Kesiapan Berubah Pada Karyawan PT Budi Perkasa Alam. *Tabularasa: Jurnal Ilmiah Magister Psikologi*, 2(2), 76–81. <https://doi.org/10.31289/tabularasa.v2i2.302>