



## **Influence of Family Health Environment on Pupils' Level of Reading Comprehension**

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### **ABSTRACT**

This study determined the relationship between the family health environment and the level of reading comprehension of Grade 6 pupils in public elementary schools in Angat District, Angat, Bulacan during the School Year 2022 – 2023. With explanatory sequential research design and 329 Grade 6 pupils together with their respective parents as respondents to the study, the findings showed that the family health environment in terms of social and emotional health processes, health lifestyles were “always observed” while in terms of health external support, and health resources were “sometimes observed.” The performance of the pupil respondents in the silent and oral reading and reading comprehension were described as “instructional.” There is no significant difference between parents’ and pupils’ perceptions on family health environment. A highly significant relationship was found between public elementary school pupils’ family health environment in terms of social and emotional health processes, health lifestyles, external support and health resources and the level of their reading comprehension. Grounded on the results of the study, the succeeding conclusions were drawn: The assessments of the parents and their respective children as regards the family health environment are the same. Significant correlations existed between family health, the environment and pupils’ reading comprehension.

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### **Introduction**

Pupils' mental and physical well-being are substantially influenced by the type of social environment that is modeled for them by their families. This ultimately affects the academic performance of the children because they have been with their families most of the time, if not all the time. It's possible that a student's academic success will be determined by the general health and atmosphere of their family. In this setting, academic achievement is regarded as a reliable indicator of a student's prospects after graduation, therefore its significance cannot be overstated.

The family health climate is described by Niermann et al. (2020) as the shared views and cognitions towards a healthy lifestyle within a family. It reflects the individual experience of daily family life, the evaluation of health-related themes and expectations with respect to conventional values, behavior routines and interaction patterns within the family. The family health climate serves as a framework for an individual's everyday health behavior, is the basis of regulating health-related activities and gives references for valuing and interpreting individuals' own conduct and that of others. Hence, the family health climate is a component of the family environment that impacts everyday health behaviors of the family members.

As the world evolves swiftly and society generates new chances, everyone must thrive on the skills essential to adapt with these changes. The K–12 curriculum offered by the Department of Education provides skills that help students become global competitors in the twenty-first century. Since reading opens the door to other skills, learning to read is a crucial skill.

Academic performance also depends on reading. It is among the most crucial abilities for learners to possess. Because a student who has problems with reading may struggle in all subjects, it is essential in all fields of study. The gap in student accomplishment levels can be attributed to a variety of reasons. According to several studies many Filipino students, do not have the reading habits that are important for learning (Luz, 2017).

Reading for comprehension is regarded as the most significant part of reading since it defines the process of successfully obtaining meaning from something that has been written. According to the prerequisites for modern literacy, students need to be able to self-modify, self-manage, and self-monitor to develop into strategic readers who can pick information from the text, generate rationales, and incorporate critical reflection on the text while reading. In this circumstance, pupils need to be provided with a wide selection of reading and writing activities to pick from, in addition to having high reading comprehension skills (Suson et al., 2020).

In 2020, the pandemic, a global health concern, caused enormous problems in many areas of human existence, particularly in the field of education. Additionally, to continue working toward its objective of delivering high-quality education, the global education system faced difficulties in adjusting to and changing with the new and difficult circumstances. The "new normal education policy" had been implemented despite a state of emergency and local quarantines to stop the spread of the virus. (Hipolito, 2021)

While many countries pivoted to online instruction during COVID-19, few remained as reliant on distance learning as the Philippines, which kept its schools closed for more than 70 weeks. But not all families had access to the technology needed to participate, and those who did still struggled to keep their students engaged. As a result, the number of Filipino school children who can read a simple text plummeted to about three in every 20, according to a report by the United Nations Children's Fund. This equates to a learning poverty, defined by the World Bank as the amount of 10-year-olds who cannot read or understand a simple story, of more than 85%. Prior to the pandemic, it was 69.5%.

Accordingly, The Philippine Department of Education (DepEd) founded and created programs to promote reading among young Filipino students and the development of their reading abilities. The Philippine Informal System is one of these initiatives.

To address the difficulties relating to literacy progress, DepEd has mandated the implementation of the Reading Program (Phil-IRI) through DepEd Order No. 14, series 2018 in all public schools throughout the nation. The curriculum uses graded passages to track students' progress in reading comprehension, oral reading, and silent reading. These reading evaluations or the reading process. The IRI seeks to ascertain a student's reading ability at three levels: independent, instructional, and frustrated. The information gathered from the assessment is used by teachers to construct reading lessons that are sensitive to the requirements of the learners as well as to improve school reading programs that would help raise the overall reading performance.

The above-mentioned realities inspired the researcher to determine the influence of family health environment on the elementary school pupils' level of reading comprehension.

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## Statement of the Problem

This study determined the relationship between the family health environment and level of reading comprehension of Grade 6 pupils in public elementary schools in Angat District, Angat, Bulacan during the School Year 2022 – 2023.

It specifically looked for answers to the following questions:

1. How may the public elementary school pupils' family health environment as perceived by the pupils themselves and their respective parents be described in terms of:
  - 1.1 social and emotional health process;
  - 1.2 health lifestyles;
  - 1.3 health external support; and
  - 1.4 health resources?
2. How may the level of pupils' reading comprehension be described in terms of Phil-IRI results along the following areas:
  - 2.1 Silent Reading
  - 2.2 Oral Reading; and
  - 2.3 Reading Comprehension?
3. Is there a significant difference between parents' and pupils' perceptions on family health environment?
4. Is there a significant relationship in the public elementary school pupils' family health environment on their level of reading comprehension?
5. What are the views and insights of the parents as regarding the importance of family health environment on the pupils' level of reading comprehension?
6. What programs of activities can be crafted based on the result of the study?

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## Hypotheses

The following hypotheses were tested in the study:

1. There is no significant difference between the perceptions of pupils and their parents on family health environment.
2. There is no significant relationship in the public elementary school pupils' family health environment on their level of reading comprehension.

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## Conceptual Framework

The family is essential to the health of both parents and children. Studies that do focus on children's health or health-related behaviors tend to focus on family-level factors. In summary, the family is a crucial social environment for parents' and kids' health. There are, however, few studies that address

family-level factors, and the ones that do exist only consider the implications for the health or behaviors related to health of children. To the best of our knowledge, no research has looked at parents' and kids' health-related behaviors at the same time.

An association between eating habits and physical activity has been shown by earlier studies. Because physical activity and eating occur within the family environment and are natural parts of daily family life, it will be more advantageous to examine the determinants of physical activity and food behavior concurrently rather than separately. This permits inquiry into the relationship between these two behavioral domains. It is particularly useful for detecting similarities as shared variance and differences as unique variance.

On the other hand, student perseverance and achievement result in retention, which is the institution's goal. Stephen et al. (2020) focuses on specific student elements such as self-regulation, self-direction, and self-efficacy, which are all linked to the motivation construct as crucial to perseverance. Time management is essential for success and determination in handling school responsibilities, family obligations, and independently planning and managing time (Broadbent & Poon, 2015). On the other side, students' misconceptions or false expectations regarding the workload, time, effort, and discipline, as well as their own available time, preparation, and capacities, may be attributed to a lack of experience (Korstange et al., 2020). Although committed students can overcome such challenges, they need time to adjust, especially during their first semester. Therefore, negotiating the first-year transfer may be particularly challenging for online students. When a student's life circumstances change, such as pregnancy, illness, or unanticipated financial or employment changes, work-study and family-study conflicts may arise, placing a strain on students' time constraints and, consequently, their persistence.

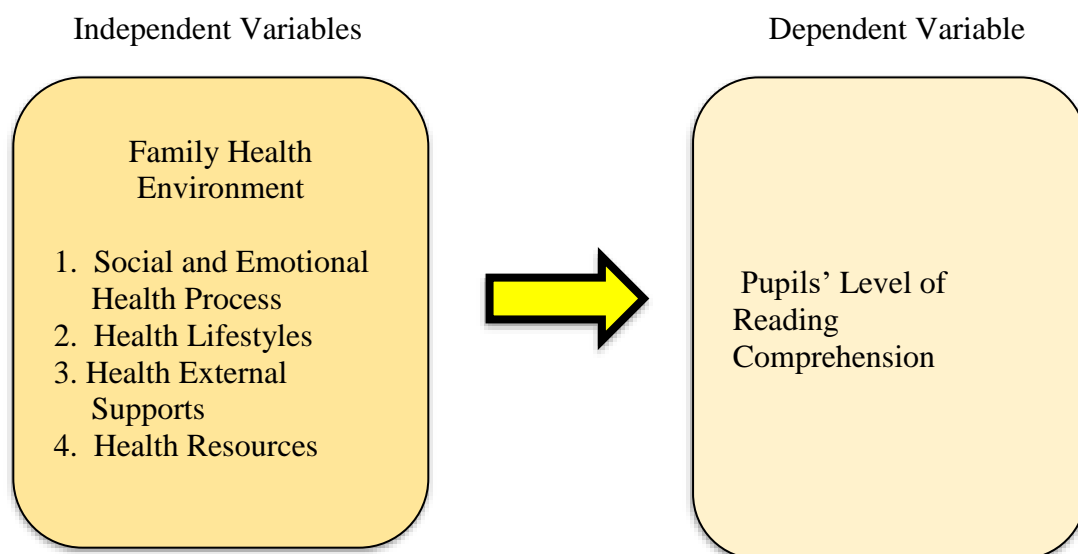
On the other hand, reading is the capacity to understand the words found in a text and apply the information to one's own development. Making sense of the printed and unprinted records of a person's life is necessary for this. Individuals read for a wide range of objectives and reasons, including knowledge, leisure, pleasure, and information. Reading so gives us access to a wealth of information that is necessary for our daily survival and development. Additionally, a recent study by Sari (2017) found that reading is very important and helpful for us in other classes as well, such math and other subjects, in addition to English class.

Proficiency in reading is crucial for understanding as well as academic success. Experts claim that both academic tasks—reading comprehension in particular—share cognitive abilities such as outcome prediction and event sequencing (Suson, et al., 2020). According to Alghonaim (2020), reading comprehension ought to be every reader's top priority. The ability of readers to identify what they are reading, comprehend ideas, and give meaning to written words is known as incomprehension. To apply a variety of mental processes, readers must be able to integrate words as part of the paragraph and paragraphs as part of the selection. They continued by saying that reading cannot be taught in isolation because it is a complex activity. Gaining proficiency in a variety of reading competencies is a prerequisite for acquiring reading abilities.

From the theory, related studies and literature cited, presented, and explained above, the researcher came up with the paradigm that will serve as guide in the conduct of the study.

Figure 1 shows that the independent variable is the pupils' family health environment. This variable was hypothesized to influence (as implied by the arrowhead) the dependent variables which are the pupils' level of reading comprehension. The family health environment of the pupils will be described in terms of family social and emotional health processes, family health lifestyles, family health external supports and family health resources. On the other hand, the pupils' level of reading comprehension will be described using series of statements.

Based on the Phil-IRI Philippine Informal Reading Inventory (Phil-IRI) scale, the learners are grouped into four levels: Nonreader, frustrated, instructional and autonomous. Pupils under the frustration reading level prefer to remove themselves to read by refusing it. In the instructional reading level, the pupil can only read when being directed while in the independent reading level, the pupil can read alone with ease without the supervision of the teacher.



**Figure 1.** Paradigm of the Study

Figure 1 shows that the independent variable is family health environment. This variable was hypothesized to influence (as implied by the arrowhead) the dependent variable which is the pupils' level of reading comprehension.

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## **MATERIALS and METHODS**

### **Research Design**

To investigate the relationship between family health environment and the level of reading comprehension of elementary school pupils, this study utilized an explanatory sequential research design to gather and analyze quantitative and qualitative data. This design started with the collection and analysis of quantitative data, which has priority for addressing the study questions. Since the study is about the relationship of two variables, Teddlie & Tashakkori, (2009) explained that the explanatory sequential design (also referred to as the explanatory design) is the appropriate approach.

The gathering and analysis of quantitative data was the starting point for studies, which then identified the quantitative results that needed a thorough justification to be built into a qualitative technique. After the initial phase of the study is complete, the researcher developed qualitative questions, methodology, and data gathering tools. The researcher analyzes how the qualitative findings contribute to an understanding of the initial quantitative findings.

### **Data Gathering Techniques**

Prior to the submission of a request letter to the Schools Division Office of Bulacan, the researcher accomplished all the needed requirements by the said office. Moreover, the researcher finds it that ethical considerations were properly observed during the collection of the quantitative and qualitative data needed in the study. Ensured that no classes were disrupted during the administration of questionnaires and conduct of interview. Moreover, the respondents were given the option to withdraw and refrain from answering the survey questionnaire as well as the interview questions whenever they feel uncomfortable doing it in accordance with College Memorandum No. 9 s 2022. To uphold the ethical standards in research, informed consent from the researchers was also obtained before they started answering the questionnaires, as required by Republic Act 10173, also known as the Data Privacy Act of 2012. They were informed that all data that were gathered from them were used solely for the research purposes and assurance was given to them that after passing the final defense in June 2023, all the collected data was permanently deleted from the researcher's laptop or any electronic storage.

Upon completing all the needed documents, the researchers sought an approval letter from the Schools Superintendent to conduct the research to Grade 6 pupils in Angat District, Angat, Bulacan. Once approved, the researcher coordinated to the principals of the school respondents for the schedule of quantitative and qualitative data collection.

In the quantitative data gathering, the questionnaire that was utilized which composed of questions about pupils' family health environment this was assessed by the pupils and their respective parents with item statements on family social and emotional health processes, family health lifestyles, family health external supports and family health resources.

Meanwhile, the level of pupils' reading comprehension along areas such as silent reading, oral reading, and reading comprehension was obtained from the latest results of their test in Phil-IRI results of School Year 2022-2023 in English and Filipino subjects.

Meanwhile, for the collection of the qualitative data, semi structured interviews were conducted. Open-ended questions were formulated by the researcher with the guidance of her adviser. The questions were asked to selected respondents in the interview with the main purpose of soliciting their views and insights about the importance of family health environment to pupils' reading comprehension.

The gathered data from this phase were used to validate and further support the quantitative results of the study.

### **Sampling Procedures**

The study employed random sampling procedures in selecting the pupil respondents.

For the quantitative data, the researcher used a purposive sampling procedure. Only Grade 6 pupils were considered in choosing the respondents of the study. The researcher decided to use Grade 6 pupils as the respondent because pupils in this grade level can easily understand the questionnaire, there is a more reliable responses from this group of pupils. It can be noted from Table 1 that a total of 1096 constitutes the population of Grade 6 pupils in Angat District, Angat, Bulacan. Since the population is quite large, only thirty percent or 329 pupils (with their respective parents) will be chosen at random to answer the closed-ended questionnaire. These respondents will be selected using lottery or fishbowl technique. In using this technique, each pupil will be numbered using separate slips of paper and put into a fishbowl/ container and shuffled and each slip is randomly picked out one- by- one until the 329 pupils are completed. The parents of this pupils will automatically be considered as respondents of this research.

For the qualitative part, 1 pupil per school will be selected at random to participate in the semi-structure interview. This pupil will also pick out using lottery or fishbowl technique.

**Table 1.***Distribution of Respondents of the Study*

School	Pupil		
	Population (N)	Sample (n)	Parents
1. Matias A. Fernando MS	289	87	87
2. Pablo C. Capistrano ES	29	9	9
3. Baybay ES	20	6	6
4. Col. Vicente L. Salvador ES	24	7	7
5. Don Pablo Amisola MS	57	17	17
6. Teodoso R. Manuel ES	69	21	21
7. Dr. Antonio C. Villarama MS	64	19	19
8. Francisco F. Illescas ES	108	32	32
9. Marcelo L. Adriano MS	87	26	26
10. Paltok ES	34	10	10
11. Osias M. Esteban ES	132	40	40
12. Benito C. Cruz ES	42	13	13
13. Antonio C. Cruz-Sulucan ES	79	24	24
14. Atilano S. De Guzman ES	62	19	19
Total	1096	329	329

**Data Analysis Scheme**

After collecting all the questionnaires needed for quantitative phase of the study, these were organized, tallied, tabulated, and analyzed using some statistical tools.

The range, mean, and standard deviation of descriptive statistics will be calculated to characterize the students' reading comprehension level. Standard deviation is used to determine the homogeneity or heterogeneity of the collected data.

Weighted mean was computed to describe the pupils' family health environment in terms of family social and emotional health processes, family health lifestyles, family health external supports and family health resources.

The dependent variable (students' reading comprehension level) and the independent factors (family health environment) were compared using correlation analysis to see if there was a significant link. A research method known as content analysis is used to identify the existence of particular words, topics, or concepts in each set of qualitative data (such as text). Researchers can count and evaluate the occurrences of specific words, topics, or concepts as well as their meanings and relationships using content analysis. (Elo et al., 2014).

**RESULTS AND DISCUSSIONS****The Public Elementary School Pupils' Family Health Environment**

Family health environment is a component of the family that influences the members' everyday health behaviors both inside and outside the family. In conclusion, the family is a critical social setting for the health of both parents and children.

The assessments of the parents and their respective children as regards family health environment in terms of social and emotional health processes, health lifestyles, health external support, and health resources are provided in Tables 2 to 5.

**Social and Emotional Health Processes**

Social and emotional health reflects a child's developing ability to form close, guarantee relationships with other familiar people in their lives such as parents, relatives, and other fostering caregivers. This trusting bond helps children to feel safe in exploring their world.

The assessments of the parents and their respective children regarding family health environment in terms of social and emotional health processes are summarized and presented in Table 2.

**Table 2.***The Public Elementary School Pupils' Family Health Environment in terms of Social and Emotional Health Process*

Item Statement	Parent		Child	
	Mean	VD	Mean	VD
<i>In our family...</i>				
1. We discuss problems and feel good about the solutions.	4.26	AO	4.26	AO
2. Family members pay attention to me.	4.47	AO	4.43	AO
3. I am happy with my relationship with my family.	4.73	AO	4.79	AO
4. I feel safe in my family relationships.	4.79	AO	4.84	AO
5. My mental health or the mental health of my family members got in the way of my family's normal daily activities (such as household chores, work, school, or recreation).	4.21	AO	4.21	AO
Overall Mean	4.49	AO	4.51	AO

Legend: AO-Always Observed (4.21-5.00); OO-Often Observed (3.41-4.20); SO-Sometimes Observed (2.61-3.40); RO-Rarely Observed (1.81-2.60); NO-Never Observed (1.00-1.80) )

Interestingly, all items indicated in the table including the computed overall mean of 4.49 for the parents and 4.51 for the child respondents receive the highest verbal interpretation of "always observed". The table reveals that item "In our family, I feel safe in my family relationships" garnered the highest computed weighted mean of 4.79 from the parent respondents and 4.84 from the child respondents. However, when it came to the item "In our family, my mental health or the mental health of my family members got in the way of my family's normal daily activities (such as household chores, work, school, or recreation)," these groups of respondents (parent and child respondents alike) gave the lowest computed weighted mean of 4.21.

These results imply that parents took precautions to ensure their children's safety when they are at home. Additionally, parents always make time for their children to talk so that anytime a problem arises, it can be discussed and resolved to maintain peaceful ties in the family.

In accordance with the findings of the present study, Michaelson et al., (2021) reported that the family is an important environment for promoting health. Modern family models that promote health can create frameworks for influencing health behaviors and serve as effective teaching and health promotion resources.

In the conducted interview with the pupil respondents, they were asked to describe their relationship with the members of their respective families. All the pupils replied that they have a strong relationship with their siblings as well as with their parents. Further, they added that whenever there are problems, they discussed it and find solutions. In finding the solutions, suggestions of each member of the family are being considered.

### **Health Lifestyles**

A healthy lifestyle is any pattern of activity that promotes health depending on one's personal decisions. A healthy lifestyle can help people maintain and enhance their physical and mental well-being as well as assist them cope with high levels of stress. Living a healthy lifestyle is all about doing activities that bring people joy and well-being.

The assessments of the parents and their respective children as regards family health environment in terms of healthy lifestyles are manifested in Table 3.

**Table 3.***The Public Elementary School Pupils' Family Health Environment in terms of Health Lifestyles*

Item Statement	Parent		Child	
	Mean	VD	Mean	VD
<i>In our family...</i>				
1. We make it a point of being physically active during daily life.	4.29	AO	4.35	AO
2. We help each other avoid unhealthy habits	4.34	AO	4.37	AO
3. We make a point to follow medical recommendations.	4.36	AO	4.37	AO
4. We help each other in seeking health care services when needed (such as doctor's appointment).	4.38	AO	4.43	AO
5. We stay hopeful even in difficult times.	4.48	AO	4.58	AO
Overall Mean	4.37	AO	4.42	AO

Legend: AO-Always Observed (4.21-5.00); OO-Often Observed (3.41-4.20); SO-Sometimes Observed (2.61-3.40); RO-Rarely Observed (1.81-2.60); NO-Never Observed (1.00-1.80)

All items indicated in the table, including the computed overall mean of 4.37 for the parents which is a little bit lower than the computed overall mean of 4.42 for the child respondents yielded the highest verbal interpretation of “always observed”. Further perusal of the tabulated findings reveals that item “In our family we stay hopeful even in difficult times” obtained the highest computed weighted mean of 4.48 from the parent and 4.58 from the child respondents. Meanwhile, item “In our family we make it a point of being physically active during daily life” received the lowest computed weighted mean scores of 4.29 from the parent and 4.35 from the child respondents.

The results imply that members of the family are optimistic despite so many problems that they encountered. Moreover, they always see to it that all members of their family are safe and free from any illness.

In conjunction to the present findings, Diaz and Ang asserted that the Philippines often experiences different calamities and disasters. Despite that, Filipinos continue to be strong and optimistic, seemingly unaffected by such situations. Most survivors in the Philippines can deal with their experiences, but some may continue to feel uncomfortable and respond badly for a long time, which, if left untreated, may result in mental issues including psychological trauma.

In the conducted interview with the parent respondents, most of them do not have time to engage their family in physical activities due to the work and other responsibilities. On the other hand, in the interview with the pupil respondents, they were asked to describe their lifestyle in so far as health is concerned. 10 out of the 14 respondents replied that they do not have any schedule for physical activities, but any member of the family can join (if they want) in sports activities in their barangay. Additionally, they stated that their parents always see to it that everyone is free from any illness. Further, these young children said that they are health conscious, and they believe that health is wealth.

### **Health External Support**

Health external support means rendering of appropriate advice or assistance as needed and periodic monitoring of the circumstances of an individual with respect to health concerns.

The assessments of the parents and their respective children regarding family health environment in terms of health external support are indicated in Table 4.

The item “In our family we have people outside of our family we can turn to when we have problems at school or work” got the highest computed weighted mean of 3.82 from the parent respondents and 3.90 from the child respondents, both of which are verbally described as “often observed”. On the other hand, item “In our house we do not trust doctors and other health professionals” received the lowest computed weighted mean of 2.26 (rarely observed) from the parents and 2.19 (rarely observed) from the child respondents. The overall mean was registered at 3.28 (sometimes observed) for the parent respondents which is almost equal to the computed overall mean of 3.29 (sometimes observed) for the child respondents.

**Table 4.**

*The Public Elementary School Pupils' Family Health Environment in terms of Health External Support*

Item Statement	Parent		Child	
	Mean	VD	Mean	VD
<i>In our family...</i>				
1. If we needed help from others, we would have real difficulty finding transportation to get to the help.	3.66	OO	3.88	OO
2. If we needed outside help, we would not know what sort of help was available.	3.33	SO	3.28	SO
3. Financial difficulties would be an obstacle to getting outside help.	3.31	SO	3.22	SO
4. We do not trust doctors and other health professionals.	2.26	RO	2.19	RO
5. We have people outside of our family we can turn to when we have problems at school or work.	3.82	OO	3.90	OO
Overall Mean	3.28	SO	3.29	SO

Legend: AO-Always Observed (4.21-5.00); OO-Often Observed (3.41-4.20); SO-Sometimes Observed (2.61-3.40); RO-Rarely Observed (1.81-2.60); NO-Never Observed (1.00-1.80)

Results of the analyses imply that respondents do not depend too much on the people around them when they need help or health assistance.

Like the present findings, Martinez et al. (2020) asserted that despite high rates of psychological distress, Filipinos worldwide generally have a negative attitude and reluctance towards formal help-seeking. They would rather ask their close friends and relatives for assistance. The inaccessibility of services and financial limitations are two obstacles mentioned by Filipino residents of the Philippines.

In the conducted interview with the parents and the pupil respondents, they were asked about the ways to avail health external support when one members of their family is sick. Almost all the pupils' respondents and of the parent respondents answered that when one of the members is sick, they asked for help from their barangay health center where are available medicine that can cure simple illness like fever, cough, or flu.

### Health Resources

Drugs, biological products, medical equipment, facilities, materials, health supplies, services, and equipment needed to identify, lessen, or prevent the impairment of, enhance, treat, cure, or restore the population's physical or mental health issues are all considered health resources.

The assessments of the parents and their respective children about their family health environment in terms of health resources are shown in Table 5.

The item "In our family if we needed help, we have people outside of our family could provide our family with a place to live" yielded the highest computed weighted mean of 3.68 from the parent respondents and 3.81 from the child respondents, both of which are verbally described as "often observed". Meanwhile, item "In our house my family did not have adequate housing" received the lowest computed weighted mean of 2.56 (rarely observed) from the parents and 2.50 (rarely observed) from the child respondents. The overall mean was recorded at 3.08 (sometimes observed) for the parent respondents which is a little bit lower than the computed overall mean of 3.15 (sometimes observed) for the child respondents.

**Table 5.**

*The Public Elementary School Pupils' Family Health Environment in terms of Health Resources*

Item Statement	Parent		Child	
	Mean	VD	Mean	VD
<i>In our family...</i>				
1. If we needed financial help, we have people outside of our family we could turn to for a loan.	3.48	OO	3.58	OO
2. If we needed help, we have people outside of our family could provide our family with a place to live.	3.68	OO	3.81	OO
3. My family did not have enough money at the end of the month after bills were paid.	2.99	SO	3.08	SO
4. My family did not have adequate housing.	2.56	RO	2.50	RO
5. We rarely fight over issues involving food or diet.	2.70	SO	2.78	SO
Overall Mean	3.08	SO	3.15	SO

Legend: AO-Always Observed (4.21-5.00); OO-Often Observed (3.41-4.20); SO-Sometimes Observed (2.61-3.40); RO-Rarely Observed (1.81-2.60); NO-Never Observed (1.00-1.80)

The results imply that the families of the respondents are of average level of living in so far as financial status is concerned. They do not always ask for any monetary help from others, instead they tried to live on their own.

Accordingly, Albert et al., (2020) reported that in December of 2018. Based on the findings of the 2018 Family Income and Expenditure Survey (FIES), the Philippine Statistics Authority (PSA) announced official estimates of poverty. The PSA (2019a) reports that as of 2018, the poverty incidence, or percentage of individuals living in poverty, was 16.6 percent nationwide. This estimate is significantly lower than the similar (updated) estimate of 23.3 percent of impoverished Filipinos in 2015. Additionally, the subsistence poverty rate, which measures the percentage of Filipinos living in extreme poverty who are a part of households with (per capita) earnings below food needs, is estimated at 5.2% in 2018, which is less than half of the 9.1% of extremely poor Filipinos in 2015.

In the conducted interview with the pupil respondents, they were asked about the ways to address health problems. All the pupils are aware that when one member of the family is sick, they resorted to first aid by asking the workers from the barangay health center if they have any medicine. Meanwhile, when the parents are interviewed few of the respondents preferred to seek help to hospitals but due to the fee needed, they went to the municipal health center instead if they need professional help from doctors.

### The Level of Pupils' Reading Comprehension

The pupils' level of reading comprehension which was measured in terms of silent and oral reading and reading comprehension are indicated in Tables 6 and 7.

#### *Silent and Oral Reading*

Silent reading fluency is the capacity to comfortably read aloud while maintaining focus, reading at a suitable rate, and understanding well. The gap between word recognition and comprehension is filled by this ability.

Conversely, because oral reading fluency has a high empirical relationship with reading comprehension, it has been extensively utilized to track pupils' reading progress in the early elementary grades.

The performance of the pupil respondents in the silent and oral reading are presented in Table 6.

In silent reading, 13.68 percent were classified as "non-reader", 44.38 percent are "instructional", and the remaining 41.95 percent were classified as "reader".

In oral reading, 5.47 were classified as "non-reader", 54.71 are "instructional" and the remaining 39.82 percent as "reader".



**Table 6.***Distribution of the Respondents According to their Performance in Silent and Oral Reading*

Scores (verbal description)	Silent Reading		Oral Reading	
	F	%	f	%
14 and above (reader)	138	41.95	131	39.82
8 – 14 (instructional)	146	44.38	180	54.71
0 – 7 (non-reader)	45	13.68	18	5.47
Range	2 – 20		2 – 24	
Mean	12.60		13.28	
Verbal description	instructional		instructional	

Results of the analyses imply that despite so many interventions made to increase the reading skills of elementary school pupils, some of them are still non-readers. This may be since pupils spent two years at home during the pandemic wherein there is no personal guidance from the teachers.

In conformity with the findings of the present study, Tomas et al., (2021) investigated of the reading profiles of students in English and Filipino, their challenges, difficulties, and lessons, the school's goals, and activities for enhancing reading programs to overcome these challenges and difficulties, and the support and commitment of stakeholders. The responses from the interviews with school administrators and instructors, as well as the reading profiles of 4056 Filipino and 4216 English children in grades 1 through 7, were described using descriptive measures and subjected to thematic analysis.

The findings showed that most students felt frustrated. Other reported causes, origins, and attendant characteristics of the students' reading level were the lack of a reading culture, the presence of learners-at-risk, and the non-mastery of the reading elements.

### **Reading Comprehension**

The capacity to comprehend written material, combine it with prior knowledge, and process it is known as reading comprehension. Comprehension is a "creative, multifaceted process" that depends on the phonological, syntactic, pragmatic, and semantic abilities of language.

**Table 7.** Distribution of the Respondents According to their Performance in Reading Comprehension

Scores (verbal description)	F	%
80% – 100% (independent)	65	19.76
59% – 79% (instructional)	141	42.86
58% and below (frustration)	123	37.39
Total	329	100.00
Range	30 – 95	
Mean	64.95	
Verbal description	instructional	

In terms of reading comprehension, 42.86 percent of the students, or more than two-fifths, performed at an "instructional" level. Conversely, a higher percentage of respondents—37.39 percent—exhibited "frustration," while the remaining 19.76 percent demonstrated a reading comprehension level that could be described as "independent." Results indicate that some young learners are still unable to understand what they read, even after spending a lot of time in school. A closer look at the table shows that the mean was computed at 64.95, which is orally translated as "instructional."

Decena (2021) reported that, in line with the current findings, the most recent results of the Organization for Economic Cooperation and Development's (OECD) Program for International Student Assessment (PISA) revealed in the study conducted in 2018 that Filipino children performed lower than students in the majority of the participating nations and economies in reading, mathematics, and science. With a mean score of 340, the Philippines scored the lowest on reading comprehension—below the survey average of 487 points. Additionally, it received scores in math and science that were the second lowest, at 357 and 353, respectively, both below the survey's average of 489 points.

### **The Difference between Parents' and Pupils' Perceptions on Family Health Environment**

The findings of the t-test analysis, which were carried out to ascertain whether there were any meaningful differences between the parents' and their respective children's views of the family health environment.

**Table 8.***Results of the t-test Analysis on the Difference between Parents' and Pupils' Perceptions on Family Health Environment*

Family Health Environment	Mean		Mean Diff.	t-value	p-value
	Parent	Child			
social and emotional health processes	4.49	4.51	-0.02	-0.08ns	0.94
health lifestyles	4.37	4.42	-0.05	-0.95ns	0.37
health external support	3.28	3.29	-0.01	-0.04ns	0.97
health resources	3.08	3.15	-0.07	-0.21ns	0.84

Legend: ns = not significant ( $p > 0.05$ )

No significant difference was found between the assessments of the parents and their respective children regarding family health environment in terms of social and emotional health processes ( $p=0.94$ ), health lifestyles ( $p=0.37$ ), health external support ( $p=0.97$ ) and health resources ( $p=0.84$ ). This no significant difference was brought about by the fact that the computed probability values for these variables are smaller than the 0.05 significance level. These results disclose that the assessments of the groups of respondents in so far as family health environment are the same.

The results imply that parents validated the truthfulness of their child's assessments about family health environment. Further, this shows that parents and children are fully aware of the healthy climate in their homes.

In a similar line, Zare (2021) discovered in his research that there is a statistically significant agreement between the assessments of the family health climate made by the parents and their children. They also concluded that moms might become more conscious of health-oriented actions toward their children by being educated and informed about the faults that they model for their children, particularly girls. These results underlined the significance of emphasizing behaviors that promote a healthy lifestyle (a balanced diet and regular exercise) among students, with a particular focus on parental support, particularly from moms, and role modeling.

#### **The Relationship between Public Elementary School Pupils' Family Health Environment and the Level of their Reading Comprehension**

The findings of the correlation analysis, which was carried out to ascertain whether a meaningful association existed between the family health environment and reading comprehension level of students in public elementary schools. Reverse coding was done on comments that are stated negatively prior to data analysis.

**Table 9.***Results of Correlation Analysis on the Relationship between Public Elementary School Pupils' Family Health Environment and the Level of their Reading Comprehension*

Family Health Environment	Reading Comprehension		
	Silent Reading	Oral Reading	Reading Comprehension
social and emotional health processes	0.741** (0.000)	0.563** (0.000)	0.577** (0.000)
health lifestyles	0.847** (0.000)	0.821** (0.004)	0.872** (0.000)
health external support	0.249** (0.009)	0.335** (0.007)	0.468** (0.000)
health resources	0.327** (0.007)	0.257** (0.009)	0.428** (0.000)

Legend: \*\* = highly significant ( $p \leq 0.01$ ) Numbers in the upper entry are correlation values (r-values) Numbers inside the parentheses are probability values (p-values)

Highly significant relationship was found between public elementary school pupils' family health environment in terms of social and emotional health processes, health lifestyles, health external support and health resources and the level of their reading comprehension. This highly significant relationship is manifested by the computed probability values that ranged from 0.000 to 0.009 for these variables which are less than the 0.01 level of significance. Results reveal that direct relationship between variables existed (as implied by the positive sign of the correlation values that ranged from 0.257 to 0.847). This indicates that as the level of public elementary school pupils' family health environment in terms of social and emotional health processes, health lifestyles, health external support and health resources increases, the level of their reading comprehension in terms of silent reading, oral reading and reading comprehension also increases.

These results imply that when the elementary school pupils provided extra time for their health, they would be able to perform well in silent and oral reading as well in reading comprehension.

In conjunction to the present findings, Popa (2020) conducted a study which aimed to determine the relationship between the family health climate and students' reading performance in school. There were selected 125 selected respondents, the samples varied according to age, geographical area, and

number of subjects. The results of the studies showed that there is a significant relationship between the family health climate of the students and their reading performance as well as their academic results, which may vary according to gender, geographical area, and age of the children.

The views and insight of the pupil respondents about the importance of family health environment on their reading abilities were asked and they responded that they firmly believed being healthy played a crucial part in how well they learned their teachings. Furthermore, they added, they won't be able to think clearly if they feel uncomfortable or unwell.

#### Intervention/s or Program of Activities Crated from the Results of the Study

The results of the study revealed that there are pupils that cannot read and are considered as non-readers. Hence, the researcher offered an intervention program to address the non-reader problems in public elementary schools.

**Table 10.**

*Proposed Intervention Program to Improve Pupils Reading Abilities*

Objectives	Action	Timeline	Persons Involved	Expected Outcome
To develop positive study habits among elementary school pupils.	Conduct lecture series/activities focusing on study habits for elementary school pupils.	4 <sup>th</sup> Quarter of S.Y. 2022-2023	Researcher, School Guidance Counselor, Teachers, Parents, Pupils	At the end of the project, pupils are expected to get higher develop positive study habits which may results to higher academic performance.
To develop study skills among elementary school pupils.	Conduct lecture series/activities focusing on study skills for elementary school pupils.			Pupils are expected to be aware of the techniques on how to study effectively.
To improve the learning strategy of the pupils by means of speaking.	Provide activities that would enhance the pupils' learning through speaking.		Researcher and pupils	Higher academic achievement of the pupils through the application of speaking learning strategy.

#### Conclusions

Based on the results of the study, the following conclusions were drawn:

The assessments of the parents and their respective children as regards family health environment are the same.

Significant correlations existed between family health environment and pupils' reading comprehension.

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