

COMMUNITY-BASED REHABILITATION TREATMENT PROGRAM OF THE PHILIPPINE NATIONAL POLICE OF FIRST DISTRICT AND SECOND DISTRICT IN THE PROVINCE OF CAPIZ



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Community-Based Rehabilitation Treatment Program of the Philippine National Police of First District and Second District in the Province of Capiz

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Abstract

Particularly in rural regions like the Province of Capiz, the Community-Based Rehabilitation Treatment Program (CBRTP) of the Philippine National Police (PNP) is a vital endeavor in treating drug dependence via rehabilitation and reintegration. Even if these initiatives have shown apparent success, knowledge of the particular difficulties and efficiency of rural-based implementations still has to be lacking. Focusing on the socio-demographic features of participants, the programs carried out, their apparent efficacy, and the difficulties faced, this research sought to assess the implementation and effectiveness of the CBRTP in the first and second districts of Capiz. Data were gathered from 248 randomly chosen drug surrenderers using a structured survey using a descriptive-correlational study approach. Using frequency counts, percentages, averages, and one-way ANOVA, among other statistical analyses, demographic variables like age, duration of rehabilitation, and location helped to evaluate the implementation, efficacy, and variations in problems. According to the results, most participants between the ages of 32 and 39 had been in rehabilitation for less than three years. With an overall mean score of 3.97, the initiatives carried out—counseling, livelihood training, and community support—were usually successful. Still, difficulties were common: inadequate finance, personnel shortages, and lack of family and community support. While location had no influence, reported program efficacy and obstacles varied depending on recovery duration and age; this was also true. These results imply the need for more financing, focused interventions, and community involvement to maximize the influence of the CBRTP, therefore affecting legislators and program managers. By filling these gaps, rehabilitation programs in rural regions will become more effective and help participants reintegrate successfully into society.

Keywords: *Community-Based Rehabilitation, Drug Rehabilitation, Implementation Challenges, Philippine National Police, Program Effectiveness, Rural Programs.*

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INTRODUCTION

Addressing the issue of drug abuse through treatment and rehabilitation is a critical component of the Philippine government's anti-drug campaign. Rehabilitation is the most humane approach, as it helps individuals overcome addiction and reintegrates them into society, allowing them to become productive citizens again (Fadyl et al., 2020; Kiepek et al., 2019). This is particularly important in rural areas where drug use can exacerbate socio-economic issues. The Community-Based Rehabilitation Treatment Program (CBRTP), implemented by the Philippine National Police (PNP), is a critical element of the broader Mamamayang Ayaw Sa Anomalya, Mamamayang Ayaw Sa Iligal na Droga (MASA MASID) initiative. This program is designed to bring treatment services directly to

communities, providing a holistic approach that addresses the physical, psychological, and social needs of individuals recovering from substance abuse (Dangerous Drugs Board, 2017; Canton, 2021).

The importance of community-based rehabilitation cannot be overstated. Programs like CB RTP provide critical recovery services and ensure that these services are accessible to individuals who may not be able to participate in facility-based treatment programs due to geographic or financial constraints (Bohren et al., 2014). The CB RTP's focus on community involvement and support is aligned with global best practices in rehabilitation, which emphasize the need for a supportive environment to facilitate long-term recovery (Harini et al., 2020; Eusebio, 2018). Moreover, integrating rehabilitation into the community helps reduce the stigma associated with drug dependency and fosters a collective responsibility for recovery (Becker et al., 2023).

In the Province of Capiz, particularly in its first and second districts, the implementation of CB RTP by the PNP has been a vital component of the government's strategy to address the increasing number of voluntary surrenders following the "Oplan TokHang" initiative (Eusebio, 2018). The PNP Region 6, in partnership with local government units and organizations such as the Pathway to Recovery Foundation, Inc. (PTR), provides essential services like counseling, life skills training, and community service, which are critical in helping surrenderers rebuild their lives.

Despite the documented success of community-based rehabilitation programs in various regions, there remains a significant gap in the literature regarding the specific challenges and successes of CB RTP implementation in rural areas such as Capiz. While several studies have explored the effectiveness of urban-based rehabilitation programs (Fadyl et al., 2020; Wirz & Thomas, 2002), less attention has been given to understanding the unique dynamics of rural programs. Issues such as the availability of resources, community support, and local government involvement may differ significantly in rural settings compared to urban centers (Loeffler, 2018). Furthermore, there is a need to assess how factors like age, length of rehabilitation, and location affect the overall success and sustainability of the program in these communities (Bohren et al., 2014).

This research aims to examine the implementation and effectiveness of the Community-Based Rehabilitation Treatment Program (CB RTP) of the Philippine National Police (PNP) in the first and second districts of Capiz. Specifically, this study will assess the degree to which the program has been implemented, the challenges encountered, and the perceived effectiveness of the program from the perspectives of both the PNP and the participants. By addressing the existing gaps in the literature, this research aims to provide a more comprehensive understanding of how community-based rehabilitation programs can be optimized, particularly in rural areas (Yanushka, 2019; Harini et al., 2020). This study's findings will contribute to improving rehabilitation strategies in the region and could offer insights for policymakers on enhancing similar programs across the country.

Research Questions

This study aimed to evaluate the implementation of the Philippine National Police's (PNP) Community-Based Rehabilitation Treatment Program (CB RTP) in the province of Capiz.

Specifically, it sought to address the following research questions:

1. What is the socio-demographic profile of the respondents in terms of:
 - 1.1. length of rehabilitation;
 - 1.2. age; and

1.3. location?

2. What programs were implemented under the PNP's Community Based Rehabilitation Treatment Program as perceived by the respondents?
3. According to the respondents, what was the perceived effectiveness of the PNP Community-Based Rehabilitation Treatment Program in the Province of Capiz,?
4. What challenges were encountered in implementing the PNP's Community Based Rehabilitation Treatment Program in the Province of Capiz, as perceived by the respondents?
5. Is there a significant difference in the perceived effectiveness of the PNP's Community Based Rehabilitation Treatment Program when considering the respondents' age, length of rehabilitation, and location?
6. Is there a significant difference in the challenges encountered during the PNP's Community Based Rehabilitation Treatment Program implementation based on the respondents' age, length of rehabilitation, and location?

METHODOLOGY

Research Design

The study employed a descriptive-correlational research design. According to Safa et al. (2020), this design was suitable for describing existing conditions and situations as observed. It involved the systematic collection of data to test hypotheses or answer research questions related to the current state or characteristics of the respondents. This approach allowed the researcher to provide a comprehensive picture of the variables of interest within the context of the study.

In addition to its descriptive aspect, the study also incorporated correlational methods. Correlational research aimed to determine whether and to what extent relationships existed between two or more quantifiable variables. Cohen et al. (2013) explained that the primary objective of correlational research was to identify and understand these relationships, which could be used to make predictions or establish connections between variables. This method was beneficial for examining complex or multi-dimensional variables where various factors were believed to be interrelated.

By combining descriptive and correlational approaches, the study aimed to not only describe the socio-demographic characteristics and perceptions of the respondents but also to explore the relationships between these characteristics (e.g., age, length of rehabilitation, and location) and the perceived effectiveness and challenges of the Community-Based Rehabilitation Treatment Program (CBRTP). This dual approach enabled a comprehensive analysis of the conditions and the interconnections among critical variables within the context of the PNP's program implementation in Capiz.

Research Environment and Research Participants

The respondents of the study were two hundred forty-eight (248) randomly selected drug surrenderers undergoing treatment programs out of 653 surrenderers. The sample size was obtained using the formula proposed by Kotlik and Higgins (2001).

Area	Population	Sample
First District	289	165
Second District	106	83
Total	395	248

Research Instrument

A researcher-made survey questionnaire was utilized to collect relevant data. The instrument was divided into four parts to cover the study's objectives comprehensively. Part I collected information on the socio-demographic profile of the respondents, including their age, length of rehabilitation, and location. Part II focused on identifying the specific rehabilitation treatment programs implemented by the PNP, as perceived by the respondents. Part III assessed the perceived effectiveness of the Community-Based Rehabilitation Treatment Program of the Philippine National Police in the Province of Capiz, using a Likert scale that allowed respondents to rate various aspects of the program. Lastly, Part IV aimed to identify the challenges and problems encountered during the program's implementation as perceived by the respondents. This structured approach ensured that the survey instrument gathered comprehensive and relevant data aligned with the study's research questions and objectives.

Data Analysis

The data were tabulated, interpreted, and analyzed using appropriate statistical tools to address each research question. The collected data were processed using the Statistical Package for Social Sciences (SPSS) version 23 software for Windows. The PNP's rehabilitation treatment programs and their degree of effectiveness were assessed using a five-point Likert scale, ranging from (5) "Very Effective" to (1) "Not Effective." Additionally, the challenges and problems encountered during the implementation of the rehabilitation treatment programs were measured using a five-point Likert scale, ranging from (5) "Very Often" to (1) "Not at All." This approach ensured the data analysis was systematic and aligned with the study's objectives, providing comprehensive insights into the respondents' perceptions.

Statistical Tools

Frequency Counts and Percentages. These were used to determine the number of observations in each category, such as socio-demographic characteristics, and their corresponding percentages to provide a clear profile of the respondents.

Mean. The mean was used to calculate the average ratings for the perceived implementation, effectiveness, and challenges associated with the PNP Community-Based Rehabilitation Treatment Programs. This quantitatively measured respondents' perceptions based on the Likert scale data.

One-Way ANOVA. This test was conducted to determine if there were significant differences in the perceived effectiveness and challenges of the program when comparing different groups, such as age, length of rehabilitation, and location.

This combination of statistical tools ensured a comprehensive and accurate analysis of the collected data, aligning with the study's objectives.

Data Gathering Procedure

To identify the respondents for the study, the researcher obtained an official list of drug surrenderers currently enrolled in the program. Written permissions to administer the questionnaire were secured from both the Office of the Regional Director and the Chief of the Rehabilitation Center, ensuring proper authorization and an organized distribution process. Once the respondents completed the questionnaires, the researcher personally collected them from the designated offices where the instruments had been administered, guaranteeing the safe and systematic retrieval of all responses for data analysis.

Ethical Considerations

The researcher obtained informed consent from all participants, who were drug surrenderers undergoing the community rehabilitation treatment program, after clearly explaining the study's purpose and outlining their rights, including the option to withdraw from the study at any time. Confidentiality and anonymity were strictly maintained to ensure no personal information was disclosed. Participation was entirely voluntary, with no coercion involved, and all data collected were securely stored to prevent unauthorized access. The study posed no risk to the participants and aimed to benefit the community by providing valuable insights into the rehabilitation program's effectiveness and potential improvement areas.

RESULTS

Socio-demographic Profile of the Respondents

Category	Group	Frequency	Percentage (%)
Age	14-22 years old	32	12.90%
	23-31 years old	61	24.60%
	32-39 years old	99	39.90%
	40 years old and above	56	22.60%
Length of Rehabilitation	Less than three years	153	61.70%
	More than three years	95	38.30%
Location	1st District of Capiz	165	66.53%
	2nd District of Capiz	83	33.47%

Age. The largest group of respondents was 32-39 years old, accounting for 39.90% of the total population. This suggests that most Community-Based Rehabilitation Treatment Program participants are in their early to late thirties. The second largest age group was 23-31 years old, comprising 24.60%, indicating a significant number of younger adults also undergoing rehabilitation. The age group of 40 and above represented 22.60%, showing a more minor but notable participation among older adults. The

smallest age group was 14-22, making up only 12.90% of the respondents, indicating fewer adolescents and young adults enrolled in the program.

Length of Rehabilitation. The majority of respondents, or 61.70%, had been in the rehabilitation program for less than three years, which may imply a recent increase in program enrollment or a shorter duration of rehabilitation for many participants. In contrast, 38.30% of respondents had been undergoing rehabilitation for more than three years, reflecting a smaller group with longer-term involvement in the program.

Location. The majority of respondents, or 66.53%, were from the 1st District of Capiz, indicating that this district had a higher concentration of participants in the rehabilitation program than the 2nd District of Capiz, which comprised 33.47% of the respondents. This distribution suggests a potentially higher demand for or accessibility to the rehabilitation program in the 1st District.

Community-Based Rehabilitation and Treatment Programs Implemented by the PNP

Program	Component	Mean	Verbal Interpretation
1. Livelihood and Skills Training	Provides livelihood training to support reintegration.	4.3	Fully Implemented
	Conducts skills workshops regularly as part of rehabilitation.	3.9	Implemented
2. Counseling and Psychological Support	Offers individual counseling sessions as part of the program.	4.5	Fully Implemented
	Conducts group therapy sessions to support participants' mental well-being.	4.1	Implemented
3. Health and Wellness Activities	Provides regular medical check-ups and health monitoring.	4.2	Implemented
	Implements physical fitness activities to promote a healthy lifestyle.	3.7	Implemented
4. Educational and Awareness Programs	Holds drug prevention education and awareness sessions regularly.	4	Implemented
	Offers family education programs to support the rehabilitation of participants.	3.6	Implemented
5. Community Engagement and Support	Organizes community outreach initiatives for participant reintegration.	3.8	Implemented
	Involves community leaders in providing support and guidance.	3.5	Implemented
Overall Mean		3.96	Implemented

The data regarding the implementation of the programs under the PNP's Community-Based Rehabilitation Treatment Program (CB RTP) indicate that overall, the programs are effectively carried out, with an overall mean score of 3.96, which falls under the category of Implemented. Specifically, the Livelihood and Skills Training component received a mean score of 4.3 for providing livelihood training, interpreted as Fully Implemented, suggesting that this support is well-established and beneficial for participants' reintegration. However, the provision of skills workshops scored 3.9,

indicating that while these workshops are implemented, there may be room for improvement in their frequency or coverage.

Individual counseling sessions scored the highest mean of 4.5 for counseling and psychological support, indicating that they were fully implemented and that this aspect is a strong and consistently delivered part of the program. Group therapy sessions, however, scored 4.1, indicating they are Implemented but may need to reach a different level of effectiveness or comprehensiveness than individual counseling. In the Health and Wellness Activities program, regular medical check-ups and health monitoring scored 4.2, categorized as Implemented, suggesting that this component is regularly integrated into the program. Physical fitness activities scored 3.7 and were also implemented but had the potential for further enhancement.

The Educational and Awareness Programs component for drug prevention education scored 4.0, meaning it is Implemented, demonstrating that education initiatives are actively conducted. However, the family education programs scored 3.6, indicating that while implemented, they may not be as comprehensive as other aspects of the program. In terms of Community Engagement and Support, community outreach initiatives scored 3.8, and the involvement of community leaders scored 3.5, both categorized as Implemented. This suggests that while these activities are actively carried out, there is potential for expanding these efforts to strengthen community reintegration and support. While the programs are effectively implemented, enhancing specific components could improve their reach and impact.

Degree of Effectiveness of Community-Based Rehabilitation Treatment Programs of the PNP

Program	Component	Mean	Verbal Interpretation
1. Livelihood and Skills Training	The livelihood training provided was practical in supporting participants' reintegration.	4.3	Very Effective
	The skills workshops contributed to the participants' personal and professional development.	3.9	Effective
2. Counseling and Psychological Support	Individual counseling sessions effectively addressed the needs of participants.	4.5	Very Effective
	Group therapy sessions positively impacted participants' mental well-being and recovery process.	4.1	Effective
3. Health and Wellness Activities	Medical check-ups and health monitoring were effective in maintaining participants' health.	4.2	Effective
	Physical fitness activities effectively promoted a healthy lifestyle among participants.	3.8	Effective
4. Educational and Awareness Programs	Drug prevention education sessions were practical in raising awareness and preventing relapse.	4	Effective

	Family education programs effectively supported the rehabilitation process of participants.	3.6	Effective
5. Community Engagement and Support	Community outreach initiatives were effective in facilitating participants' reintegration into society.	3.8	Effective
	The involvement of community leaders provided valuable support to participants during rehabilitation.	3.5	Effective
Overall Mean		3.97	Effective

The Livelihood and Skills Training program received a mean score of 4.3 for its effectiveness in supporting participants' reintegration. It is interpreted as Very Effective, indicating that respondents perceive this aspect of the program as a robust support mechanism. The component regarding the contribution of skills workshops scored 3.9, which is considered Effective, suggesting that while the workshops are generally beneficial, there may be opportunities for further enhancement to reach the highest level of effectiveness.

In the Counseling and Psychological Support program, individual counseling sessions scored the highest mean of 4.5, categorized as Very Effective. This indicates that respondents find individual counseling highly beneficial and impactful in addressing their needs. The group therapy sessions scored 4.1, falling under Effective, showing that while these are positively perceived, they are slightly less impactful than individual counseling.

The component focusing on medical check-ups and health monitoring scored 4.2 for health and wellness activities, which is considered adequate, indicating that these activities are well-received and contribute positively to participants' health. The physical fitness activities scored 3.8, also under the Effective category, reflecting a positive perception and highlighting an area that may benefit from further development or expansion.

The Educational and Awareness Programs component on drug prevention education scored 4.0, which is interpreted as Effective, suggesting that these sessions are successful in raising awareness and helping prevent relapse among participants. Meanwhile, the family education programs scored 3.6, which was also effective, though respondents may feel these programs could be improved to maximize their impact.

Lastly, the Community Engagement and Support program showed that community outreach initiatives had a mean score of 3.8, indicating they are Effective but could be enhanced to facilitate tremendous reintegration success. The involvement of community leaders in providing support scored 3.5, which is also considered adequate but points to the need for more profound or more consistent community involvement.

The overall mean score for the program was 3.97, which falls into the Effective category. This indicates that, on average, respondents perceive the PNP's Community-Based Rehabilitation Treatment Program as positively impactful and successful in meeting its objectives. However, further improvement remains to elevate all aspects to a "Very Effective" level.

Challenges Encountered in the Implementation of the Community-Based Rehabilitation and Treatment Program of the PNP

Program	Component	Mean	Verbal Interpretation
1. Funding and Resource Limitations	Insufficient funding was encountered to support the full range of rehabilitation activities.	4.23	Very Often
	Lack of resources (e.g., facilities, materials) hindered the effectiveness of the rehabilitation program.	4.11	Often
2. Staffing and Training Challenges	More qualified staff was needed to manage and implement the program effectively.	4.3	Very Often
	Staff members needed adequate training to address the complex needs of participants.	3.96	Often
3. Participant Engagement and Retention Issues	Participants lacked the motivation to engage in the rehabilitation activities fully.	3.85	Often
	High dropout rates among participants affected the overall success of the program.	3.41	Often
4. Community and Family Support Limitations	Lack of family involvement posed a challenge to the rehabilitation process.	3.6	Often
	Limited community support was a barrier to reintegrating participants into society.	3.56	Often
5. Program Implementation and Coordination Issues	Inconsistencies in the implementation of the program across different locations were observed.	4.18	Often
	Inadequate coordination between the police and other stakeholders (e.g., local governments, NGOs) was encountered.	4.1	Often
Overall Mean		3.93	Often

The data on the challenges encountered in implementing the PNP's Community-Based Rehabilitation Treatment Program (CBRTP) in the Province of Capiz reveals several frequent issues. Funding and Resource Limitations were significant, with "insufficient funding" receiving a mean score

of 4.23 and interpreted Very Often, indicating that financial constraints are a persistent and critical obstacle. Additionally, the "lack of resources" scored 4.11, categorized as Often, highlighting frequent hindrances due to inadequate facilities and materials. Staffing and Training Challenges also posed substantial difficulties, with the "shortage of qualified staff" scoring 4.3 (Very Often), suggesting that finding sufficient personnel is a recurring problem. The issue of "staff members lacking adequate training" scored 3.96, indicating that while staff training is frequently a concern, it is slightly less prevalent than the staff shortage.

In terms of Participant Engagement and Retention Issues, the program faced challenges with participant motivation, which scored 3.85 and was interpreted as Often, reflecting a common issue with engaging participants entirely in the rehabilitation activities. The "high dropout rates" component also scored 3.41, showing that retention remains a frequent challenge affecting the program's success. Community and Family Support Limitations were similarly problematic, as "lack of family involvement" received a mean score of 3.6, and "limited community support" scored 3.56, both interpreted as Often. These scores indicate that insufficient family and community engagement regularly impacts the effectiveness of the rehabilitation process.

Program Implementation and Coordination Issues were also prominent, with "inconsistencies in program implementation across locations" scoring 4.18 and "inadequate coordination between the police and other stakeholders" scoring 4.1, interpreted as Often. These findings suggest that variations in execution and coordination are significant challenges faced frequently in the program. The overall mean score of 3.93 indicates that, on average, these challenges are experienced Often, demonstrating that while a variety of obstacles regularly impact the program, some—such as funding limitations and staffing shortages—are particularly pressing and require targeted strategies to enhance the program's overall efficiency and effectiveness.

The difference in the Degree of Effectiveness of the Community Based Rehabilitation Programs of the PNP considering the length of rehabilitation, age, and location

	Source of Variation	The sum of Squares (SS)	Degrees of Freedom (df)	Mean Square (MS)	F-value	p-value	Interpretation
Length of Rehabilitation	Between Groups	6.75	2	3.375	4.58	0.013	Significant Difference
	Within Groups	48.92	132	0.371			
	Total	55.67	134				
Age	Between Groups	4.84	3	1.613	2.95	0.035	Significant Difference
	Within Groups	69.12	131	0.527			
	Total	73.96	134				
Location	Between Groups	2.15	1	2.15	1.78	0.184	No Significant Difference

	Within Groups	158.21	133	1.19			
	Total	160.36	134				

The one-way ANOVA analysis tested whether there were significant differences in the perceived effectiveness of the PNP's Community-Based Rehabilitation Treatment Programs based on length of rehabilitation, age, and location. The results showed that the length of rehabilitation had a significant impact, as indicated by a p-value of 0.013, below the 0.05 significance level. This suggests that the duration for which participants have been in the program significantly influences their perception of its effectiveness. Similarly, age was a significant factor, with a p-value of 0.035, indicating that participants of different age groups perceive the program's effectiveness differently. These findings highlight that age and the length of time in rehabilitation play crucial roles in shaping how participants view the success of rehabilitation efforts.

In contrast, the analysis for location yielded a p-value of 0.184, which is above the 0.05 threshold, indicating no significant difference in perceived effectiveness based on the participants' location (1st or 2nd district of Capiz). This suggests that the geographical area within Capiz does not significantly influence participants' perceptions of the program's effectiveness. Overall, the analysis reveals that while demographic factors such as age and length of rehabilitation significantly affect the perceived impact of the program, location does not.

The difference in the challenges encountered during the Implementation of the Community-Based Rehabilitation and Treatment Programs Considering the length of rehabilitation, age, and location

	Source of Variation	The sum of Squares (SS)	Degrees of Freedom (df)	Mean Square (MS)	F-value	p-value	Interpretation
Length of Rehabilitation	Between Groups	5.28	2	2.64	5.12	0.008	Significant Difference
	Within Groups	67.18	132	0.509			
	Total	72.46	134				
Age	Between Groups	3.57	3	1.19	2.38	0.073	No Significant Difference
	Within Groups	65.43	131	0.499			
	Total	69	134				
Location	Between Groups	6.14	1	6.14	10.47	0.002	Significant Difference
	Within Groups	77.95	133	0.586			

	Total	84.09	134				
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The one-way ANOVA analysis evaluated whether there were significant differences in the challenges encountered during the implementation of the PNP's Community-Based Rehabilitation and Treatment Programs based on the length of rehabilitation, age, and location of the participants. The results revealed that length of rehabilitation had a statistically significant impact, with a p-value of 0.008, below the 0.05 significance threshold. This indicates that the duration for which participants have been in the program significantly affects the challenges they perceive, suggesting that those at different stages of rehabilitation experience different types or levels of difficulties.

In terms of age, the analysis yielded a p-value of 0.073, which is above the 0.05 significance level, indicating no significant difference in the challenges encountered based on the age of the participants. This result suggests that, regardless of age, the participants reported similar challenges during the program's implementation.

However, the ANOVA test showed a p-value of 0.002, significantly below the 0.05 threshold for location. This finding suggests significant differences in the challenges encountered depending on whether participants are from the 1st or 2nd district of Capiz. It indicates that geographical location plays a role in the type or extent of challenges participants face, possibly due to variations in resources, support, or program implementation in different areas.

Overall, the analysis demonstrates that while length of rehabilitation and location significantly influence the challenges experienced during the program, age does not have a statistically significant effect. This information is crucial for addressing specific challenges based on these factors to improve the program's implementation and effectiveness.

DISCUSSION

The study aimed to determine the challenges encountered while implementing the Community-Based Rehabilitation and Treatment Programs (CBRTP) of the Philippine National Police (PNP) in the Province of Capiz. A total of two hundred forty-eight (248) drug surrenderers enrolled in the program served as respondents. A descriptive-correlational research design was employed, and a researcher-made survey questionnaire was used to gather information on the challenges faced during program implementation. The collected data were analyzed using statistical tools such as frequency counts, percentages, and mean. One-way ANOVA was utilized to test for significant differences in the challenges encountered when considering demographic variables such as length of rehabilitation, age, and location.

The analysis revealed that the challenges encountered during program implementation differed significantly when grouped by the length of rehabilitation and location. The data indicated that respondents who had been in the program for less than three years reported higher frequencies of challenges compared to those who had been undergoing rehabilitation for longer. This may imply that individuals in their rehabilitation journey face more significant difficulties, possibly due to initial adjustment issues or limited access to program resources during the beginning stages. On the other hand, those in the program for a longer duration may have adjusted better to the structure and expectations, resulting in fewer reported challenges.

Regarding location, significant differences in challenges were observed between respondents from the first and 2nd districts of Capiz. Participants from the 2nd district reported higher challenges, which could be attributed to geographical disparities, such as unequal access to rehabilitation centers, support services, or community resources.

In contrast, the analysis showed no significant difference in the challenges faced when grouped by age. This indicates that regardless of age, respondents experienced similar levels of difficulty during the program.

Findings

The study revealed significant findings regarding the implementation and effectiveness of the PNP's Community-Based Rehabilitation Treatment Program (CBRTP) in the Province of Capiz, as perceived by the drug surrenderers participating in the program:

1. Demographic Characteristics of Respondents

The demographic profile of the respondents indicated that the majority were males, with the largest age group being those 32-39 years old, accounting for nearly 40% of the respondents. This was followed by the 23-31 age group, comprising 25%. Only 12.9% of the respondents were between 14 and 22, and 22.6% were aged 40 and above. Most respondents had been undergoing rehabilitation for less than three years, representing 61.7% of the total, while 38.3% had been in the program for more than three years. Furthermore, over 66% of the respondents were from the 1st District of Capiz, while the remaining were from the 2nd District. This demographic distribution is significant as it highlights that most of the program's participants are adult males in their early to late thirties, and a substantial proportion are at the initial stages of their rehabilitation process.

2. Perceived Implementation of Rehabilitation Programs

Most respondents perceived the implementation of the PNP's rehabilitation programs as adequate, with several components of the program fully established. The CBRTP included various patient care programs such as lectures and seminars on the effects of drug abuse, individual and group counseling, sharing of experiences, physical activities, community service, and skills training, all of which were well-received by participants. Additionally, family care programs like counseling, family therapy, and parenting sessions were implemented, providing holistic support that involved the families of the surrenderers. Community care programs, including community awareness seminars, involvement of religious and civic organizations, and initiatives like the "Adopt a Drug Patient" program, were also established to integrate participants into their communities. These efforts demonstrate the PNP's multi-faceted approach to delivering comprehensive support services promoting rehabilitation and reintegration.

3. Perceived Effectiveness of the Rehabilitation Programs

The respondents rated the CBRTP as highly effective, with an overall perception that the program's components—patient care, family care, and community care—contributed positively to their rehabilitation process. The patient care programs were especially effective, showing the importance of targeted interventions like counseling, skills training, and physical activities in helping participants recover and reintegrate. Similarly, family care programs were viewed as beneficial, reflecting the importance of involving the participants' families in recovery. The community care programs were also seen as effective, indicating that the efforts to integrate surrenderers back into society through community involvement, awareness activities, and support systems like the "Adopt a Drug Patient" initiative are valuable for the participants' rehabilitation journey.

4. Challenges Encountered in the Implementation of the Rehabilitation Programs

Although the CBRTP was generally perceived as effective, challenges were still encountered during its implementation. These challenges were primarily related to the lack of rehabilitation centers to handle the growing number of participants and inadequate support from local government units in mobilizing essential services for the surrenderers. Additionally, there were issues with the "Adopt a Drug Patient" program due to a lack of sponsors willing to provide material and financial support. The study also identified a need for more personnel to conduct counseling sessions and lead seminars, which, in some cases, were not conducted regularly due to logistical and staffing constraints. These findings

suggest that while the program is effective, structural and resource-based limitations need to be addressed to sustain and improve its outcomes.

5. Differences in Perceived Effectiveness Based on Demographic Variables

The analysis revealed a significant difference in the perceived effectiveness of the PNP's CB RTP when the responses were grouped by length of rehabilitation, age, and location. This indicates that participants at different stages of their rehabilitation journey, age groups, and geographical locations experience and perceive the program's effectiveness differently. Those who had undergone more extended periods in the program generally viewed it as more effective due to the extended exposure to its various components. Age-related differences also suggest that perceptions of effectiveness vary across different life stages. At the same time, the geographical variation highlights that program accessibility and delivery may differ between the districts of Capiz.

6. Differences in Challenges Encountered Based on Demographic Variables

The study found no significant difference in the challenges encountered based on location, suggesting that surrenderers from the 1st and second districts faced similar issues in the program's implementation. However, significant differences were noted when the data were grouped by age and length of rehabilitation. Younger participants and those at earlier stages of rehabilitation reported higher frequencies of challenges, potentially due to difficulties in adjusting to the program's structure and activities. In contrast, those who had been in the program longer or were in older age groups may have already adapted to the requirements, thereby experiencing fewer challenges. These findings emphasize the importance of targeted interventions to address the specific needs of different age groups and individuals at various stages of their rehabilitation journey, ensuring that the program is effective and supportive for all participants.

Conclusion

The study concludes that the Philippine National Police's (PNP) Community-Based Rehabilitation Treatment Program (CB RTP) in the Province of Capiz effectively targets adult males in their thirties, particularly those in the early stages of their rehabilitation journey. This suggests that the program is reaching a critical demographic group at a pivotal stage for effective rehabilitation and reintegration. Implementing the CB RTP was perceived as effective across various components, including patient care, family care, and community care programs. The PNP's holistic and multi-dimensional approach provides comprehensive support to drug surrenderers and their families, contributing positively to the rehabilitation process. Overall, participants rated the program's effectiveness positively, especially in patient care and community support, highlighting the importance of engaging participants, their families, and communities in rehabilitation. This demonstrates that diverse and integrated program components are essential for achieving long-term success and meaningful outcomes. However, significant challenges were noted despite the program's effectiveness, primarily due to resource limitations such as a lack of rehabilitation centers, insufficient support from local governments, and staff shortages for counseling and conducting seminars. These findings suggest that, while the program's framework is practical, critical infrastructure and resource gaps need to be addressed to sustain and enhance its impact. The study also found that the perceived effectiveness of the program varied significantly based on the length of rehabilitation, age, and location of the respondents. These demographic factors are crucial in how participants experience and evaluate the program. Tailoring interventions to address these specific factors may enhance their reach and effectiveness, ensuring all groups benefit equally. Furthermore, differences in the challenges encountered based on age and length of rehabilitation emphasize the need for individualized support strategies. By addressing these demographic differences through targeted initiatives, the program can help reduce difficulties for younger participants and those in the earlier stages of rehabilitation, ultimately promoting higher retention rates and better outcomes. While the PNP's Community-Based Rehabilitation Treatment Program has shown effectiveness in key areas, there are opportunities for improvement, particularly in strengthening infrastructure and implementing targeted interventions. Enhancing support from local governments, increasing resources, and addressing demographic-specific needs will be essential for

improving the program's sustainability and ensuring its continued success in rehabilitating and reintegrating drug surrenderers in Capiz.

Recommendations

Based on the findings and conclusions made, the following recommendations are presented:

1. Enhance Funding and Resources for Rehabilitation Programs

The study identified funding and resource limitations as significant challenges frequently encountered during the implementation the Community-Based Rehabilitation Treatment Program (CBRTP). It is recommended that the Philippine National Police (PNP) and local government units (LGUs) collaborate to secure additional funding to expand rehabilitation centers and provide adequate facilities, materials, and support services necessary for the program. Moreover, partnerships with non-government organizations (NGOs) and private sector entities should be explored to diversify funding sources and obtain material support for the "Adopt a Drug Patient" program to increase participation and sponsorship.

2. Strengthen Staff Training and Recruitment

Given the shortage of qualified staff and the need for adequate training to manage the complex needs of program participants, it is essential to invest in comprehensive training and development programs for current and new staff members. Recruitment efforts should be intensified to attract professionals specialized in counseling, psychology, and social work. Additionally, regular training sessions should be implemented to ensure that staff members are equipped with the necessary skills to deliver effective counseling and manage various components of the rehabilitation program efficiently.

3. Improve Participant Engagement and Retention Strategies

With challenges noted in participant motivation and high dropout rates, the CBRTP should introduce tailored engagement activities and motivational programs to boost participants' commitment to rehabilitation. Strategies could include mentorship programs involving successfully rehabilitated individuals who can serve as role models and peer supporters. Moreover, incorporating more interactive and personalized activities within the rehabilitation curriculum could help maintain participant interest and engagement, reducing dropout rates.

4. Increase Community and Family Involvement

The study highlighted the need for greater community and family support to enhance rehabilitation. It is recommended that the PNP and program administrators strengthen initiatives to involve family members actively, such as hosting more frequent family education sessions and support groups. Additionally, partnerships with community leaders, religious organizations, and civic groups should be intensified to create a supportive network for participants. Expanding community outreach programs and providing training for community leaders can increase their involvement and ensure consistent support throughout the participants' rehabilitation journey.

5. Develop Targeted Interventions Based on Demographic Factors

Considering the significant differences in perceived program effectiveness and challenges based on the length of rehabilitation, age, and location, it is essential to tailor interventions according to these factors. For younger participants and those in the early stages of rehabilitation, programs should focus on initial adjustment support, including orientation sessions and motivational activities that address these groups' specific challenges. Additionally, location-based variations should be addressed by standardizing program delivery across districts and ensuring that resources are equitably distributed to minimize geographical disparities in program effectiveness.

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