
| RESEARCH ARTICLE

Factors Affecting the Utilization of Mental Health Services in Selected Rehabilitation Centers in Lanao del Norte: A Basis for a Quality Improvement Project

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| ABSTRACT

The utilization of mental health services remains a critical concern in rehabilitation settings, particularly in resource-constrained areas. This study examined the factors affecting the utilization of mental health services in selected rehabilitation centers in Lanao del Norte. A mixed-methods approach was employed, combining quantitative survey data from 155 respondents with qualitative insights from interviews and focus group discussions. Descriptive statistics and inferential analyses were used to determine relationships between demographic variables, perceived barriers, and service utilization patterns. The findings revealed that most respondents were middle-aged, predominantly male, married, and had at least secondary education. Service utilization was generally moderate, with most respondents accessing services monthly or 3–4 times per month. However, significant barriers persisted, particularly service-related issues, financial constraints, and accessibility challenges. Educational attainment and socioeconomic status were found to have significant relationships with perceived barriers, while age and gender significantly influenced utilization frequency. The absence of younger respondents highlighted a critical gap in youth engagement. The study concluded that mental health service utilization was influenced by a combination of structural, socioeconomic, and psychosocial factors. A multi-component Quality Improvement Project was proposed to enhance accessibility, affordability, and service quality.

| KEYWORDS

Mental Health Services; Service Utilization; Rehabilitation Centers; Barriers to Access; Quality Improvement; Philippines

| ARTICLE INFORMATION

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Introduction

Mental health and substance use disorders have remained significant public health concerns globally, particularly in developing regions where access to care is limited. In Lanao del Norte, increasing cases of substance abuse and mental health disorders, coupled with socioeconomic challenges and post-conflict conditions, had contributed to the growing demand for rehabilitation services. Despite the availability of these services, their utilization remained suboptimal.

Previous observations indicated that rehabilitation centers were underutilized due to multiple factors, including stigma, lack of awareness, financial limitations, and perceived ineffectiveness of services. These issues resulted in negative consequences not only at the individual level but also at the community and societal levels, including increased morbidity, reduced productivity, and social instability.

This study aimed to examine the factors affecting the utilization of mental health services and to develop a Quality Improvement Project to enhance service delivery in rehabilitation centers.

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Determinants of Service Utilization

Research showed that service utilization was influenced by need, access to resources, and social support systems. Johnson and Smith (2020) found that individuals with greater perceived need and better access to resources were more likely to utilize services. Similarly, Andersen's Behavioral Model emphasized that predisposing, enabling, and need factors significantly influenced healthcare utilization.

Effectiveness of Integrated Mental Health Services

Studies demonstrated that integrated care models produced better outcomes compared to standalone treatment approaches. Lee et al. (2021) reported improvements in both mental health conditions and substance use outcomes when services were combined, highlighting the importance of comprehensive care delivery systems.

Barriers to Mental Health Service Access

Multiple studies identified barriers such as stigma, financial constraints, transportation difficulties, and lack of culturally appropriate services. Garcia et al. (2022) emphasized that cultural stigma and lack of culturally sensitive interventions limited service utilization. Chen et al. (2023) further highlighted the role of socioeconomic inequality in restricting access.

Role of Social Support and Peer Influence

Peer support programs were found to enhance engagement and retention in rehabilitation services. Williams et al. (2019) showed that peer support increased motivation and treatment adherence among clients.

Global and Policy Perspectives on Mental Health Care

Guidelines from WHO (2019), SAMHSA (2016), and NIDA (2018) emphasized the need for integrated, accessible, and individualized mental health services. These frameworks highlighted the importance of addressing both clinical and social determinants of health.

Research Objectives

This study investigated the factors affecting utilization of mental health services in selected rehabilitation center in Lanao Del Norte towards development of accessible project strategies service for improvement.

The specific objectives of the study were:

1. To describe the profile of the users' utilizing mental health services at the selected rehabilitation center in Lanao Del Norte in terms of age, gender, marital status, educational attainment, socioeconomic status.
2. To describe the barriers that affect the utilization of mental health services at the selected rehabilitation center in Lanao Del Norte.
3. To measure the utilization of mental health services at the selected rehabilitation center in Lanao Del Norte.
4. To determine the relationship between the users' profile and the barriers of mental health services' effectiveness of the selected rehabilitation center in Lanao Del Norte.
5. To determine the relationship between the users' profile and the utilization of mental health services' effectiveness of the selected rehabilitation center in Lanao Del Norte.
6. To develop accessible project strategies service for improvement based on the identified utilization patterns and perceived effectiveness of health services at the selected rehabilitation center in Lanao Del Norte.

Methodology

Research Design

A descriptive-correlational was used with a total of 155 respondents from selected rehabilitation centers in Lanao del Norte included using probability sampling techniques.

Data Collection

Data were gathered through structured questionnaires, and ethical considerations such as informed consent and confidentiality were strictly observed.

Data Analysis

Descriptive statistics such as frequency, percentage, mean, with inferential tests as correlation analysis were used.

Results

Table 1. Age Distribution of Respondents

1) Age Group	2) Frequency	3) Percentage
18-25	0	0%
26-33	25	16.13%
34-41	29	18.71%
42-49	33	21.29%
50-57	38	24.52%
58+	30	19.35%

Table 1 showed that most respondents were middle-aged, with no representation from the 18-25 age group.

Table 2. Gender Distribution

Gender	Frequency	Percentage
Male	95	73.2%
Female	60	26.8%

Table 2 showed that males dominated service utilization.

Table 3. Barriers Affecting Utilization

Barrier Category	Mean	Interpretation
Service-related	3.44	Strongly Agree
Financial	3.41	Strongly Agree
Accessibility	3.39	Strongly Agree
Personal	3.35	Strongly Agree
Stigma	3.34	Strongly Agree

Table 3 showed all barriers were highly significant, with service-related issues ranked highest.

Table 4. Utilization Frequency

Barrier Category	Mean
Monthly	41.94%
Less than monthly	19.35%
Once only	17.42%
Bi-weekly	12.90%
Weekly or more	<10%

Table 4 showed that the utilization was moderate but inconsistent.

Table 5. Significant Relationships

Variable	Result
Educational Attainment	Significant
Socioeconomic Status	Significant
Age	Significant (utilization only)
Gender	Significant (utilization only)

4)

Table 5 showed significant relationships of *mental health services' effectiveness to educational attainment and socioeconomic status of the users.*

Discussion

The findings demonstrated that mental health service utilization was influenced by multiple interacting factors. Service-related barriers, including dissatisfaction and negative experiences, were the most significant obstacles. This supported previous research emphasizing the importance of service quality in healthcare utilization.

Financial and accessibility barriers also played a crucial role, particularly in rural areas where transportation and cost constraints were evident. These findings aligned with global literature highlighting economic inequality as a major determinant of health service access.

The absence of young adults in the sample indicated a critical gap in early intervention. This finding suggested the need for youth-focused mental health programs and improved outreach strategies.

Educational attainment and socioeconomic status significantly influenced perceived barriers, indicating that mental health literacy and financial capacity were essential determinants of access. Meanwhile, age and gender influenced utilization patterns, reflecting differences in health-seeking behavior.

Overall, the study confirmed that both structural and psychosocial factors shaped mental health service utilization.

Conclusion

Mental health service utilization in the rehabilitation centers was present but not optimal. Significant barriers related to service quality, financial constraints, and accessibility limited effective utilization.

Educational attainment and socioeconomic status influenced perceived barriers, while age and gender influenced utilization patterns. The absence of younger users highlighted a major service gap.

A Quality Improvement Project was proposed for rehabilitation center administrators focusing on:

1. *Service Improvement.* By implementing a client-centered service navigation system to improve understanding of services, reduce dissatisfaction, and enhance continuity of care.

2. *Financial Support.* By assisting through PhilHealth enrollment and social welfare referrals that should be strengthened to reduce financial constraints affecting utilization.

3. *Accessibility Enhancement.* By coordinating with LGUs and partner agencies in establishing transportation assistance, referral linkages, or mobile mental health services to address access barriers.

4. *Youth Engagement.* By focusing on youth mental health outreach through early intervention programs in developing and encouraging service utilization among individuals aged 18–25.

5. *Continuous Quality Monitoring.* By integrating the findings into a formal Quality Improvement Project (QIP) guided by frameworks such as the Plan–Do–Study–Act (PDSA) cycle. Local policymakers needs also to consider resource allocation and program expansion to support equitable mental health service access in provincial and rural areas.

These strategies aimed to create a more responsive and inclusive mental health system.

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