

Integrity vs Despair: A Phenomenological Study on Filipino Widowed Elderly Lived Experiences

Boncay, Mari Angelu M.; Damian, Janiena Faith R.; Gregorio, Kim Courtney G.; Maraggun, Faith Henrick L.; Suarez, Andrea Reasele T.; Michael Jo S. Guballa

National University Baliwag

PSYCH13X – Field Methods in Psychology

DOI: <https://dx.doi.org/10.47772/IJRISS.2024.803056>

Received: 25 February 2024; Accepted: 05 March 2024; Published: 04 April 2024

ABSTRACT

This phenomenological study elucidated the lived experiences of seven Filipino widowed elderly in Bulacan through in-depth interviews. Interpretative phenomenological analysis of transcribed interviews yielded multifaceted insights. Findings revealed three domains that were deemed vital in the study: (1) relationship of the widowed elders with their family; (2) aging experience of widowed elders in relation to widowhood; and (3) perception of widowed elders on dying in relation to widowhood. The participants cherished spousal bonds that provided meaning amidst occasional conflicts. Spousal loss impacted physical health, mental well-being, emotions, and social connections. Participants displayed resilience anchored in familial support, faith, and inner contentment, yet regrets and vulnerabilities persisted during bereavement. Reflections on mortality revealed acceptance of death, valuing familial harmony, and aspiring for loved ones' well-being. This study offers qualitative insights into nuances, challenges, and sources of strength shaping elderly Filipino bereavement experiences. It contributes to scholarly understanding of marginalized elderly Filipinos' needs, informing supportive interventions, community engagement, and social welfare policies. Recommendations include strengthening support systems and implementing community elderly programs. Further, research on male elderly and mixed-method approaches would be beneficial. The knowledge produced can guide evidence-based services addressing multifaceted demands in grieving spousal loss amidst aging.

Keywords: aging, widowhood, lived experiences, bereavement, coping, Filipino elderly

INTRODUCTION

Aging is a natural biological process that all organisms go through. In the case of humans, it entails several life changes such as job retirements, physical decline, and dying (World Health Organization, 2022). Depending on the culture and situation, being elderly, and even the process of aging itself, can be viewed varyingly. According to Badana and Andel (2018), those who receive sufficient social support from family have more favorable views toward their aging journey. While elder Filipinos recognize the potential physical and functional challenges associated with aging, they positively perceive the aging process, attributing it to the respect and dignity gained through maturation. On the other hand, Salvador and Alqahtani (2019) found that some Filipino elders are dealing with the trauma of elderly abuse such as (1) violation of human rights, (2) the marks of physical abuse, (3) financial abuse, (4) emotional baggage and damage, and (5) feeling alone and no support from other. Not only do the elderly face changes in themselves, but they also go through the loss of significant others. With the passing of their spouses, widowed elderly continue with their lives, carrying with them the psychological and emotional implications of a lost

significant other. For instance, Xu et al. (2019) found that increases in depression among older persons occur due to widowhood. In the Philippine setting where a 4.5% widowed population was found in 2020 (Census of Population and Housing conducted by the Philippine Statistics Authority, 2023), one determinant of depressive symptoms is being widowed (Carandang et al., 2019).

Based on Erik Erikson's psychosocial stages of development, the elderly aged 65 years and older experience the dilemma of either possessing integrity with their accomplishments or feelings of despair with their regrets and unfulfilled desires (Orenstein & Lewis, 2022). Their being widowed can potentially be an additional factor as well given that their previously fulfilled desire for intimacy is replaced with isolation and restricted personal communities in the present (Collins, 2018). In agreement with this is Balasubramaniam (2018) who, in their case study, found that the occurrence of changes such as the death of a spouse, rise of physical decline, as well as transitions in careers, could reflect despair.

Thus, this qualitative study sought to gain insight into the lived experiences of widowed elderly, mainly their views on aging and widowhood, with the application of the eighth psychosocial stage – integrity versus despair. It was intended that this research be able to provide significant views and analysis of the lived experiences of the widowed elderly.

By studying the lived experiences of the Filipino widowed elderly, their thought processes and perspectives can be better brought to light. With this, individual insights will be revealed, giving way to a deeper sense of comprehension of how they view concepts such as widowhood, aging, and death, which would be difficult to obtain through other means. In addition, they could benefit from the study of their lived experiences in terms of the development or improvement of their engagement and representation in the community. Also, the issues that they experience may be better understood, giving way to the creation of policies and services that would benefit them as a marginalized group. Furthermore, studying the experiences of widowed elderly qualitatively can contribute to gerontological knowledge. This is necessary to acquire insights into the various aspects of aging, which, in this study's case, are widowhood, and feelings of integrity and despair of the elderly towards their experiences. As for the researchers' case, delving into this topic of study would help them gain significant experience and opportunity to contribute to the body of knowledge on this matter while also being able to apply current knowledge on research and psychology.

The Widowed Elderly

Part of the process of living and eventually aging with a spouse is experiencing widowhood. As with any other lost companion, the elderly may suffer from consequences such as the lack of self-management in the face of existential concerns, indicating estrangement from themselves (Nieboer et al., 2020). The pain of despair and bereavement can often be a state in which one tries to regulate their emotions. Grief and social withdrawal can exacerbate the stress associated with bereavement, which can be viewed as indicative of social deficits (Holm et al., 2019). These said social deficits could then lead to loneliness and depression (Zenebe et al, 2021). Soberano (2021), in his study, determined that Filipino older adults who are not experiencing depression may become depressed after a major stressful life event. Among the factors mentioned are the death of a spouse or a close family member. Following this in a descending manner are elders who are widowed and co-residing, currently married and co-residing, and currently married and living alone. This study also reports that the likelihood of being depressed is higher in widowed elderly than in their married counterparts. Likewise, elders who are living alone tend to be more depressed than elders who were co-residing with their spouse, with children, or with others.

On the other hand, Carandang et al. (2019) discovered that one unmet need of Filipino community-dwelling senior citizens is financial security due to unemployment, low household income, and absence or lack of pension. They also struggle with access to health care services, appropriate living environments, and family support. When it comes to their living conditions, some of the concerns are their safety, housing conditions,

and social stimulation. Lastly, while Filipinos are known for their strong family ties, it was found in this study that they still struggle with problems such as family members leaving them for abroad and taking care of grandchildren. Self-reliance and religious engagement were found to be their coping mechanisms. Others took it more negatively, turning to self-medication, avoidance, isolation, unnecessary enduring suffering, and over-dependence. Another factor to consider is widowhood duration. Yang and Gu (2021) determined that widowhood duration is significantly correlated with loneliness in widowed older adults. It was found that the risk of loneliness is higher during the first two years since becoming widowed, although significant levels of it remain present up until 40 years after spouse loss.

Aside from depression and loneliness, widowhood was also found to impair the emotional cognition of the elderly, particularly in the area of emotion recognition (Bi et al., 2022). Aligned with this is another finding of the study that the widowed elderly have a deficit in visual search efficiency, thus having problems with recognizing (attentional) and remembering (mnemonic) happy, sad, and angry emotions. It was also implicated that the grief from the loss of the widowed elderly may be causing them to have a decline in emotional cognition.

To compare and contrast, Srivastava et al. (2021) point out that other than widowhood, depression is also affected by the marital status and living arrangements of senior citizens. Other variables such as socioeconomic factors and health status were also identified to be associated with the likelihood of depression. It was also revealed in the said study that the level of depression among the elderly is higher if they are widowed and living alone, similar to the earlier studies mentioned. These instances of loneliness and depression could be further exacerbated by factors such as unmet social and economic necessities. For instance, in a study by Jiang et al. (2020) on the social capital and loneliness of widowed elderly, it was found that those residing in rural areas tend to be lonelier than those living in urban areas, and this was significantly associated with their bonding and bridging social capitals. Such findings were attributed to the lesser quantity and quality of social or group activities that exist in rural settings.

Aging and Widowhood

Not only do the elderly face physical, cognitive, and social changes, but they also go through the loss of significant others as they age, a phenomenon that occurs naturally with old age. In the study by Doblaz et al. (2018), the elderly expressed their feelings of having an emotional void with the loss of their spouses. They see this loneliness – both residential and internal, as impossible to fill, contributing to the likelihood of depression to occur. Helplessness, fear, and uncertainties when it comes to thinking about who will take care of them when they get older were also mentioned. Aside from emotions, cognitive functioning is also further affected by widowhood. Lyu et al. (2019) found that lower cognitive functioning was found among the widowed elderly participants as opposed to those who are not widowed, disregarding widowhood duration although much decline was found to exist among those who were already widowed for four to six years. Gender is also a factor to be considered when it comes to examining their coping mechanisms. In a study by Yu et al. (2019), it was found that gender differences in coping with widowhood transition are present among the elderly. It was determined that females demonstrated better coping and resilience. On the other hand, continuous increases in depressive symptoms persisted among males, even after ten years of becoming widowed.

Widowhood Impacts and Factors Involved

According to van Boekel et al. (2019), recently widowed elders, as opposed to those currently married, widowed community-dwelling elders, suffer more from psychological problems than elders who are not widowed. It was also highlighted that the more recent the loss of their spouse is, the effects become more negative concerning the elders' perception of their well-being and quality of life. Similarly, Jones et al. (2018) found three themes among young widowed individuals – relationships before death, coping, and

fears. Daycare, counseling, and financial support for young widows to be made more readily available were recommended as a result. In agreement with these is Xu et al. 's (2019) study on widowhood and depression, where it was found that widowhood affects the progression of depression among the elderly. The said depression reaches its peak six months beginning widowhood. It was also found that despite the presence of interventions such as social and familial support, and adjustments in living arrangements, the bereavement-depression relationship of the participants remained the same. Blanner et al. (2019), on the other hand, stated that depression and anxiety were the most prevalent disorders present in widowhood. Not only is psychological well-being affected by widowhood, but physical health as well. According to Carandang et al. (2019), some of the determinants of depressive symptoms among community-dwelling Filipino senior citizens are chronic diseases and loneliness. Furthermore, the study also mentioned that those who had positive subjective psychological well-being had lower levels of depressive symptoms. Concerning this, De Carvalho et al. (2019) found that the positive perceptions of widows about their health were evidenced by the presence of family members looking out for them. Even with existing health conditions, as long as they were managed, optimism was observed. Lastly, it was determined that widowhood influences the life of the widowed in the form of loneliness.

However, not all experiences post-widowhood is negative. For instance, Klaus' (2021) study presented a significant increase in social support and networks within four years after becoming widowed, then a gradual decrease seven years post-widowhood was determined. It was also found that educational attainment and time limitations in socialization played roles in the growth of the social networks of the widowed. Contrary to this is Yang and Gu's (2021) study on widowhood, widowhood duration, and loneliness of older Chinese adults. This study states that the risk of loneliness is higher during the first two years since becoming widowed, although significant levels of it remain present up until 40 years after spouse loss.

Views on Aging and Death

Moving on to the elderly's views on aging and death, Tjernberg and Bökberg (2020) probed into the perspectives of the elderly staying in nursing homes. While most did not worry about death itself, they still expressed anxiety related to how they could die, particularly thoughts of experiencing a long process of dying. They also wished to go through death with as little pain as possible, and that they be provided with their needs until their last moments. In relation to this, it is important to note that need satisfaction also plays an integral role in shaping either integrity or despair among the widowed elderly (Carandang et al., 2019). Another theme also present in the study is control over reactions toward death. With the concept of control being mentioned, Abozied et al. (2023) stated that older adults who have a high desirability for control also have higher levels of fear of dying and death. This is due to the reason that the occurrence of death cannot be manipulated or controlled by anyone, leading to feelings of worry and fear. Such perspective and feelings towards death are indicative of despair. Contrary to this though is Liu et al. 's (2022) study which states those who are nearing death but continue to have a sense of control over their lives experience less death anxiety. In another study on elders in residential care (Dezutter et al., 2019), the Despairing, Struggling, and Integrated groups were each associated with depressive symptoms, life satisfaction, and subjective health, respectively.

Similar to approaches on widowhood and its aftereffects, views on aging and death are not always seen as negative, either (Kwak, 2022). To give an example, among Japanese elders, it has been observed that many of them are getting more involved in active aging, or more specifically, *shūkatsu*. It is a process where they get to be involved in planning and preparing for the afterlife through activities such as nursing home and funeral preparations, organizing properties or belongings, writing letters, considering finances for such preparations, and any activity related to preparing for death. Chan and Thang (2021) found Japanese elders engaged in the act of *shūkatsu* to ease worries and fears of dying. For the Japanese elderly, engaging in the

practice of active aging is a way for them to remain in control of their aging process, while still keeping their familial relationships. In addition, those who were more active and healthier even during old age exhibited more independence in terms of functional, economic, social, and psychological aspects in contrast with the elderly of previous generations. For such a process of active aging engagement, one must be willing to open conversations about aging and death first. For instance, Bergenholtz et al. (2020) identified variations in responses regarding end-of-life conversations among hospital patients and their spouses. On one hand, some were open to such discussions, even going as far as talking about funeral preparations with their relatives, while on the other, some did not wish to have such conversations. Conflicts and feelings of isolation also arise when differences appear in terms of having end-of-life discussions. It is important to take note though of the benefits associated with engaging in end-of-life conversations, such as improvements in quality of care and costs.

Going back to the necessity for need satisfaction among widowed elderly Kaap-Deeder et al. (2020) studied the association between lifelong psychological need-based experiences and dying attitudes in older persons. The study also delved into whether such experiences influence ego integrity and despair. Its findings show that need satisfaction was positively connected with ego integrity and negatively correlated with despair. Desperation and frustration were linked, too. Death acceptance and ego integrity have a good association, but despair and death fear have a negative one. The degree to which need satisfaction influenced attitudes toward mortality was mediated in a significant way by the outcomes of ego integrity.

Synthesis

Several studies have examined the multifaceted dimensions of aging and widowhood, emphasizing the heightened vulnerability to mental health challenges, cognitive decline, and emotional difficulties among elderly individuals coping with spousal loss (Holm et al., 2019; Srivastava et al., 2021; Jiang et al., 2020; Carandang et al. 2019; Yang & Gu, 2021; Bi et al., 2022; Lyu et al., 2019). Factors such as limited social support, rural residence, financial insecurity, widowhood duration, and inadequate healthcare access exacerbate the impacts of grief and loneliness (Jiang et al., 2020; Carandang et al., 2019; Yang & Gu, 2021). However, maintaining an active lifestyle, having more children, and engaging in conversations about end-of-life concerns can positively influence well-being and life satisfaction (Bergenholtz et al., 2020; Kaap-Deeder et al., 2020). Overall, these studies highlight the importance of resilience, social support, and societal awareness in addressing the psychological needs of elderly individuals coping with spousal loss.

Despite existing research, the topic of Filipino widowed elderly lived experiences was chosen for this study because of gaps in the literature. Many studies lack diversity in their sample populations, focusing solely on specific locations rather than including participants from varying geographic areas (Lucas et al., 2018; Carandang et al., 2019; Yu et al., 2019; Tjernberg & Bökberg, 2020). There is also a need for research clarifying how marital status histories influence post-widowhood health (Lyu et al., 2019). Additionally, overreliance on self-report measures may introduce biases (Jiang et al., 2020; Carandang et al. 2019). Further research addressing these limitations would provide greater insight into the experiences of Filipino elderly coping with spousal loss.

STATEMENT OF THE PROBLEM

As older widowed adults experience a major life change, their life becomes affected holistically, as evidenced by many studies. This in turn could influence their perception of life as they reflect on their past. The extent of discussion on widowhood in the Philippine context is minimal. Hence, the aim of this study is to examine the lived experiences of Filipino widowed elderly to determine whether they are able to achieve Integrity or Despair. Conducting this study will identify the most significant themes that will reveal the indicators of the last stage of Erikson's psychosocial development.

Particularly, this research aimed to answer the following central and specific questions:

Central Question

How does widowhood influence the widowed elderly's perception of living, aging, and dying?

Specific Questions

1. How can the relationship of the elderly couples be described prior to widowhood?
2. What life realizations have they brought as they grew older?
3. What do they want to pass on to their children and the next generation?

METHOD

Research Design

The researchers employed a phenomenological research design. Specifically, the research aimed to describe the lived experiences of the Filipino widowed elderly, how they perceive the loss of a significant other, the life before and after it, and whether they are able to achieve Integrity or Despair. As defined, the phenomenological research design entails attempting to describe the significance of the participants' experiences (Creswell & Creswell, 2018), thus fitting the aim of this research.

Table 1: Profile of the Participants

Sex	
Male	3
Female	4
Age	66-88
Years Widowed	3-41

The interviewees for this study were selected from widowed senior citizens residing in Bulacan. The researchers used a non-random sampling technique, specifically purposive sampling, to gather seven (7) participants, fitting within the range recommended by Creswell and Creswell (2018) for a phenomenological study which is five to ten participants. They were either approached face-to-face or contacted online to invite them to participate. The participants consented to share their lived experiences, and (a) showed articulation in either the Filipino or English language, or both. (b) Their ages ranged from 65 years and older, (c) and have been widowed for at least two years, in agreement with Yang and Gu's (2021) findings that a widowhood duration of at least two years will be significantly correlated with loneliness, and Klaus' (2021), which, on the other hand, will state that social networks will increase among the widowed elderly within four years after getting widowed.

Instruments

To gather the necessary and sufficient data for the study, the researchers used interviews as their research instrument. The interview was composed of a structured interview with a set of fifteen questions that were initially validated by three field experts to further probe into significant information that will answer the central and specific questions under the statement of the objectives. The interview duration varied, ranging from 12 to 30 minutes, depending on the amount of information gathered and the necessity for additional

probing questions. Furthermore, recorders and notes were utilized during and after the interviews, respectively, to ensure that data were well-kept. To also aid in the reporting of the study's data, Tong and Sansbury's (2007) Consolidated Criteria for Reporting Qualitative Research was used. This aided in identifying aspects of data reporting such as the personal characteristics of the researchers, participant selection, analysis, and others. de Jong et al. (2021) support this as stated in their study that improvements in the quality of data reporting will be observed upon utilization of the said checklist.

Data Gathering/Procedure

To gather participants, the researchers had an initial screening in the form of purposive sampling. This also ensured that participants would fit the criteria for inclusions and exclusions in the study. By inquiring to different people and utilizing social media posts, the researchers were able to find seven (7) participants, three (3) male and four (4) female, who were willing to take part in interviews that took place in their residences. This was to ensure the participants' comfortability, also add that some had family members to accompany them to assist during the interview process, a brief description of the study was also included to ensure that they understood the reason for the need for their participation. Days before conducting the interviews, the screened respondents were once again informed about the study and the interview. This included a general explanation of the study and the nature of the interview questions that will be asked. On the days of the interviews, their informed consent forms were obtained to guarantee their willingness to participate before the interview itself, providing them a copy of the said consent as well. Following this, the interview commenced with the researchers taking notes and obtaining voice recordings with the participants' consent. The interviews were conducted from October 16 to 21, 2023, depending on the availability of the participants and researchers. The researchers also divided their roles into interviewers, those who would take documentation and recordings, and those who would check if all questions were answered. The interview guide consisted of questions about the lived experiences of the Filipino widowed elderly participants. Afterward, the participants received small incentives as a token of appreciation. Obtained data were recorded and kept for data analysis.

Data Analysis

The data analysis began with the transcription of records verbatim, familiarizing the researchers with the acquired data by repeatedly listening to the recordings and transcribing them. Keywords and phrases related to aging and widowhood were identified in the process of coding where a spreadsheet application was utilized (Google Sheets). The said process involved undergoing the first and second cycles of coding, as well as writing analytic memos sequentially, per Saldaña's (2021) guidelines in qualitative research coding. Initial codes in the first cycle were derived from the transcripts, emphasizing significant statements or phrases that captured the participants' experiences. For each transcript, one researcher independently coded and was then cross-checked by other researchers, comparing and discussing to reach a consensus, thus producing initial codes. The said preliminary coding framework became the basis for determining more extensive themes. Interpretative phenomenological analysis (IPA), a qualitative research approach focused on the exploration of and understanding of lived experiences, was used. In this form of analysis, domains, themes, and sub-themes were identified to help make sense of the participants' individual lived experiences (Smith & Fieldsend, 2021). They were developed through the continuous process of comparison, grouping together codes with similar meanings and patterns. To do this, data were revisited as needed to ensure accurate reflections of the participants' views. Following this, the finalized themes were processed and interpreted in accordance with the research questions and related literature. Such a process entailed examining the relationships between the themes and analyzing how they contributed to a comprehensive understanding of the lived experiences of the widowed elderly participants. Reflexive discussions were conducted by the researchers to reflect on their personal biases and interpretations during the analysis process. Lastly, in accordance with the guidelines in qualitative research, specifically for enhancing

trustworthiness and credibility, member checking was conducted during and after the interviews. The statements of the participants were clarified and the researchers' records and notes were verified. This was done to ensure accuracy and offer additional insights.

Trustworthiness

According to Lincoln and Guba (1985), credibility, dependability, transferability, and confirmability are factors necessary in determining the trustworthiness of a study. Credibility pertains to the researchers' confidence in the truth of both the data and its interpretation. To ensure credibility, the interview questions were validated through expert reviews to confirm alignment with research objectives. It involved proper conduct of the study and ensuring necessary actions were taken to demonstrate credibility to readers. Furthermore, investigator triangulation, a process by which the researchers compared and collated their analyses of findings, and evaluated them as a group, was conducted. Dependability, on the other hand, refers to the consistency and replicability of a study. However, such is not the aim of qualitative research as it emphasizes individual, varying experiences, rather than standardized means of gathering and analyzing data. However, detailed explanations of all research processes like participant selection, data collection, and analysis had to be considered. An inquiry audit was done as well, wherein an external reviewer audited the data presented in this research. Moving on, confirmability refers to the consistency between the presented data and the researchers' interpretation of it. This involved potential researcher biases and assumptions that may have influenced interpretations, which should be acknowledged and described. As a measure, the researchers utilized a reflexive journal containing reflections on the research process. Lastly, transferability in research pertains to how generalizable or applicable it can be to other contexts. However, qualitative research does not aim for its findings to be replicable in the same way as it is in quantitative research. To measure this, thick descriptions of the data, participants, and data collection processes were included.

Ethical Considerations

Ethical considerations are paramount in any research, and adherence to established guidelines is essential to ensure the protection and well-being of research participants. In this study, the researchers have closely followed the ethical principles outlined by the World Health Organization (2016a, 2016b, 2016c, 2017a, 2017b) to guide research design, implementation, and reporting.

First, following the said organization's guidelines, all participants were provided with clear and comprehensive information about the study's purpose, procedures, potential risks, and benefits. Informed consent was obtained from each participant, ensuring they had autonomy to voluntarily participate and were aware of their right to withdraw at any stage without consequence. Second, to ensure confidentiality and privacy, personal identifiers were coded and substituted by pseudonyms across all transcripts, reports, and publications resulting from the study. Records such as notes and voice recordings were also kept securely in password-protected devices and cloud storage accessible only to the researchers and the professor. The participants were assured of their anonymity in the presentation of the findings as well. During the interview, the participants were given the freedom to not answer any question they felt uncomfortable with. Any concerns before, during, and after the interview were also addressed. Afterward, small incentives were given as tokens of gratitude.

The research also aimed to maximize benefits, practicing beneficence and non-maleficence. As for the crafting of the research design and methodology, adherence to scientific and ethical standards was practiced. The research process was reviewed and approved by validators, an external auditor, as well as the research adviser before, during, and after initiation. To ensure fair participant selection, inclusion criteria were transparently defined. The findings were also reported accurately and transparently, including any limitations or challenges encountered during the research process.

Lastly, collected data during this research were securely stored up until the publication of the study. Afterward, they were permanently disposed in a manner that ensured irretrievability. As per ethical standards, any identifiable information was destroyed, and aggregated, de-identified data were retained for possible use in future research.

RESULT AND DISCUSSION

This section involves the qualitative analysis of the gathered data from the widowed elderly participants regarding their lived experiences and views on aging, death, and widowhood. Shown below are the domains, themes, and sub-themes derived from the participants' data gathered from the interviews.

Table 2: Domains of the Lived Experiences of Filipino Widowed Elderly

Specific Questions	Domains
How can the relationship of the elderly couples be described prior to widowhood?	Relationship of the Widowed Elders with their family
What life realizations have they brought as they grew older?	Aging Experience of Widowed Elders in Relation to Widowhood
What do they want to pass on to their children and the next generation?	Perception of Widowed Elders on Dying in Relation to Widowhood

Table 2 presents the domains that represent the patterns of the participants' responses in the qualitative interviews. Each domain provides answers to the specific questions that the researchers sought to study.

Table 3: Relationship of the Widowed Elders with their Family

Domains	Themes	Subthemes
Relationship of the Widowed Elders with their Family	Spousal Bond	(1) Built Through Proximity; (2) Companionate; (3) Experience Before Marriage; (4) Love
	Before Widowhood	(1) Harmonious Relationship; (2) Marital Conflicts; (3) Role Sharing; (4) Parental Resilience; (5) Financial Stability; (6) Distant Temptation
	After Widowhood	(1) Familial Support; (2) Fulfillment; (3) Provision of Needs; (4) Companion; (5) Concern

Spousal Bond

This section provides insights garnered from participants, into their moments of affection and shared commitment. Under this domain, experiences before marriage, including lengthy courtships and enduring relationships, emerge as significant factors shaping the depth of their connections. The participants also emphasized the nature of their genuine affection, underscoring the emotional resonance that forms the foundation of their said love.

Built Through Proximity. The participants stated that they met their spouses through the close distance between them. Several also said that they had already met their spouses and knew each other even before their courting phases.

Participant 2 said, *“Well, we just live near each other. We are neighbors.”*

Participant 5 also mentioned, *“Let me tell you, I was on an excursion. He found out about it, so he joined even though he had no money.”*

Companionate. The majority of participants characterized their crucial moments with their spouse as purely full of affection and commitment as they worked to nurture and grow their relationship into a rich bond.

As Participant 5 said, *“He takes good care of me as a husband. He cooked meals for our children. He liked to take them on trips often. Whenever the Antipolo festival came, we went to church. He’ll borrow a car then we’ll just go on trips. We’d go to church, then to Laguna where his sibling lived. We enjoyed our time.”*

Experience Before Marriage. Some participants stated that they had previous experiences before marrying their spouses. These experiences are about courting before marriage and getting to know each other.

Participant 2 stated, *“I courted her for ten years. We would constantly get into fights and then makeup. That’s why it took ten years.”*

Upon recalling the cherished moments with her spouse, Participant 5 shared her memories of courtship, stating, *“I didn’t know that I was going to be courted because my house used to be a variety store. The reason he always bought Orange (brand of soda) and bread was because he was keeping an eye on me. He made sure he would get me in any way possible.”*

Love. One of the significant moments that participants frequently recalled is their genuine love for each other.

As Participant 6 stated, *“Yes, of course, I remembered how much he loved me.”*

Participant 2 also shared, *“Yes, I remember her to this day because we rarely fought [after marriage]. It’s like our love remained the same always.”*

Before Widowhood

This section provides the participants’ accounts of their relationship with mutual understanding, love, and support, even amidst challenges like separation due to illness and distance. Financial stability and expressions of gratitude for spouses’ hard work also underscored the couples’ collaborative efforts in building a stable family life.

Harmonious Relationship. The participants, despite facing challenges such as separation due to illness and distance, emphasize mutual understanding, love, and support, highlighting the positive aspects of their shared life experiences.

Participant 7 stated that, *“We had a good relationship as parents with our children. He was especially kind to his children, treating them just like friends. They always chatted, joked around, whatever. He was very close to them.”*

Participant 6 also said that, *“This is all I can tell you: he loved me very much.”*

Marital Conflicts. Most of the participants described their relationships as generally positive, with occasional disagreements and challenges, such as the husband working abroad, the wife taking care of the family, and the impact of illness on their lives.

Participant 6 said, *“While it was rare, the two of us had fights when were together. It’s just impossible to not have fights with your spouse.”*

Role Sharing. The statements by the participants involved a dynamic partnership where responsibilities such as providing for the family, managing household tasks, and ensuring the well-being and education of the children were shared and complemented each other.

As shared by Participant 3, *“Well, of course, my married life was good because we worked together. While I was out working, she would be at home. Once I got home, she would cook food. She was attentive and also did the laundry and other chores. On the other hand, I worked in farm fields. That’s what I did to sustain my family.”*

Parental Resilience. The participants believed in their abilities to have worked with their partner to provide for their family’s needs and make sacrifices for the well-being and education of their children, even in the face of challenges.

As stated by Partipant 1, *“All four (referring to family) of us were okay. I and my husband had two children. He also got along well with our children.”*

Financial Stability. Some participants described how their spouses had to work for them to have a stable life. They expressed their appreciation for their spouse’s hard work and how they can put food on the table.

Participant 5 said, *“Every payday, he would always bring home full-packed groceries, with all kinds of food and other items.”*

Distant Temptation. One of the participants claims to have felt distant temptation while working far away from his wife, justifying his actions because of the reason that he is a man. The participant goes on to say that others can withstand temptation while others cannot.

Participant 6 stated, *“Of course, we’re men. We’ll see women sometimes and try to lure them. Some would get tempted, some would not.”*

After Widowhood

This section provides the participants’ experiences and views post-widowhood. Under this domain, almost all participants stated experiencing care, concern, and comfort from families and other relationships. Some expressed improvements or maintenance of existing relationships, while others the emergence of financial challenges.

Familial Support. All participants stated having maintained or improved their relationship with their children and grandchildren after widowhood, both showing commitment to remain together even after the loss of a family member. Their families can help them, especially in terms of finances and support since some already find it physically difficult to move and do tasks on their own. Their children’s commitment does not solely manifest through the provision of material things, but through emotional support as well.

As Participant 7 stated, *“All my children supported me. When her mommy (referring to granddaughter) was still in Dubai, she would call me every night. They all supported me and never left me.”*

Fulfillment. Some participants expressed contentment with their current relationship with their families, stating that they feel satisfied in knowing that when they pass away, their children will stay close to each

other.

Participant 6 shares the same sentiments, stating that his children already fulfilled his spouse’s wish. *“She only dreamed two things when she was still alive, and I think her children fulfilled that. She hoped that once she was gone, her children would continue loving each other, that they remain in good terms at all times. She wanted them not to get into fights. That’s all she wanted,”* he narrated.

Provision of Needs. Some participants said that with the loss of their spouses, help from families, relatives, and other people around them came.

Participant 5 said, *“Right now, of course, no one provides for my needs except for my kind relatives. Losing a spouse is really hard. One of my children doesn’t have a house. I help her take care of her five children. It’s so difficult that I lost weight. I do all sorts of chores including laundry and washing the dishes.”*

Companion. The participants stated having found companionship with their children after their spouses’ passing. This helps them cope with widowhood, aging, and other struggles they face such as financial instability. They get help when it comes to performing household chores, some said they were constantly in contact with children who live far away, getting comfort and emotional support from them during their grieving process. Another participant also stated that even with the presence of occasional conflict, he remains on good terms with his son, living with him under one roof.

Participant 4 said, *“Through God’s mercy, even though our life is simple, I and my children are happy. I have no problem with them. They have been helping me until now.”*

Concern. When asked about their relationship with their children post-widowhood, most of the participants stated having concerns for them. In the same way, their children expressed concerns. For instance, one participant stated the grief his children experienced when their mother died.

Participant 5 shared her concern for one of her sons, stating, *“Actually, my eldest son is still a bachelor. He’s already 53 years old but dates no one. He lives with me. He sometimes drinks and I tell him not to drive drunk. I sometimes don’t allow him to drink because a lot of things could happen.”*

Table 4: Aging Experience of Widowed Elders in Relation to Widowhood

Domain	Themes	Subthemes
Aging Experience of Widowed Elders in Relation to Widowhood	Resilience	(1) Contentment; (2) Faith; (3) Needs Assistance; (4) Responsibilities, (5) Difficulties; (6) Longing; (7) Decline; (8) Social Life; (9) Respect; (10) Solitude
	Positives and Negatives	(1) Complexity; (2) Grandchildren; (3) Acceptance; (4) Vulnerability
	Regrets	(1) Complications; (2) Unemployment; (3) Belief in Fate

Resilience

Under the second domain which involves the participants’ aging experience in relation to widowhood, one theme derived is resilience. This includes subthemes identifying how they deal with their aging and widowhood processes, namely contentment, faith, needs assistance, responsibilities, difficulties, longing, decline, social life, respect, and solitude.

Contentment. Throughout the interviews, the widowed elders were able to show satisfaction in life despite

losing a loved one. This is rooted in the current pleasant state of their life and from the good relationship of the people around them.

“I’m happy now that I’m getting older. I’m okay as long as my children and grandchildren get along well and are happy. That’s all I want. That’s the good part of my life as I’m aging,” Participant 1 stated.

Faith. For the participants, faith plays a significant role in their aging experience. For instance, one participant mentioned his thought that having physical strength even in old age is God’s way of compensating for the loss of his spouse. They also added that in the presence of problems and conflicts, they cling to God and their belief. Another participant also added that holding on to their faith helps them to not worry about aging.

As Participant 7 stated, *“I’m not afraid of aging and anything that has to do with it. My point of view is that I want my life to be pleasant and comfortable while putting my focus on God.”*

Needs Assistance. A common response of the participants was familial support. As they are people who are going through the loss of a partner, it was evident in the interviews that they are receiving proper assistance, especially from their children. Other close relatives were also mentioned to have been giving help to the widowed elders financially and by providing basic needs.

In sharing his aging experiences, Participant 2 narrated, *“My wife was the eldest among her siblings. Whatever love they gave to their sister, they also gave to me because I maintained good relationships with them.”*

Responsibilities. One of the impacts and significant learnings brought about by widowhood as the participants were aging is their realization of the value of their responsibilities. While they were already playing their roles in their respective families, the participants stated that they experienced changes in their responsibilities with age. This was further emphasized by their widowhood, given that they now have to take on more than one role in their families, one example being their having to take care of their children on their own. For some participants, this is a burden they carry. On the other hand, a participant copes with their loss by taking advantage of their responsibilities to distract themselves. Another form of responsibility brought about by aging and further impacted by widowhood for one participant is being able to hold themselves accountable in front of their children when they commit mistakes.

Participant 3 stated, *“You just need to focus on doing something that will keep you distracted. Most of those who are widowed constantly ruminate about their lost spouses. Because of that, they quickly deteriorate and follow their deceased loved ones as well, especially when they are already old.”*

Difficulties. After being widowed, the participants faced differing forms of struggles. First, one participant recalled initially experiencing difficulty in coping with the loss of their spouse. However, with time and busyness, he eventually moved on and now focuses on supporting his family. However, this is not the same for the other participants as some stated experiencing challenges such as loneliness and employment limitations. The decline in job opportunities is already imminent given that they are already aging, but it became more impactful with the occurrence of widowhood for the participants.

Participant 2 said, *“I don’t make much of a living anymore. My children just give me money from time to time...”*

Longing. Another subtheme present in the participants’ responses was longing. This includes reminiscing about their spouse and thinking about what might have been if they were still alive. Realizations were also

expressed as they longed for their spouses' presence.

Participant 2 narrated, *"Yes, I still long for my wife. That's why I pray for her every night. We used to talk a lot about many things. We rarely had conflicts. That could be why our love lasted."* He added, *"If only she was still alive, I would have loved her more. I realized that as couples get older, the more love that they should give to each other."*

Further, Participant 7 responded to a question about regrets, stating, *"Regrets? My regret is that he died early, leaving me alone. That's what I constantly think about."*

Decline. Participants stated experiencing declines due to aging. More so, they mentioned physical decline as affecting their functioning. For instance, one participant detailed having cataracts and numbness in their foot due to nerve complications. Another participant complained of high blood pressure, rheumatism, and abnormal uric acid levels.

As Participant 3 stated, *"Well, it's hard to get old because as it says in the Bible, life after 70 years of age is just full of difficulties and pain. You feel yourself decline, physically, to be specific."*

Social Life. In describing their experiences as they age without their spouse, the participants mentioned socialization with other elderly. They shared how they are engaging in various activities and enjoying their time despite the commitment it brings.

Participant 4 stated, *"I am part of a group of senior citizens [in our community]. We gather every month."*

Participant 5, when asked about their significant experiences brought about by their aging process, answered *"I do a lot of things. I participate in dancing and other social activities. There are times when I go home late at night because of those."*

Respect. Among the responses of the participants, one expressed the importance of respect during his aging process accompanied by widowhood. According to Participant 6, this respect should not only be directed to other people but also to one's children. To him, it could be in the form of acknowledging his mistakes and insufficiencies as a parent.

As Participant 6 stated, *"If you are wrong, recognize your mistake and humble yourself. Don't think you would always be right as a parent. If your children are right, admit it."*

Solitude. Among all participants, some gave a unique response about the experience of an elder after being widowed. One looked back to when her husband was still alive and shared how big of an impact it was, especially in the household. She described her solitude as part of aging, understanding that her children are bound to be away from them. Another participant emphasized work division as well.

Participant 7 stated, *"Widowhood had a big impact on me because I'm now left alone. When my husband was still with me, I didn't mind that my children already had lives of their own. I and my spouse were sad about it, but we still had each other back then."*

In answering the question of how widowhood changed their life, Participant 2 narrated, *"I now cook and do laundry on my own. I look for ways to earn money even though I know I won't get much. I can't rely everything on my children.."*

Positives and Negatives

This theme includes sub-themes relating to the participants' understanding of and views on aging. Some

show responses indicative of the participants' positive disposition, while some present the elderly participants' challenges.

Complexity. When asked about his understanding of and views on aging, one participant expressed difficulty in describing his point of view. He stated that he finds it challenging given that he is going through the phase of aging himself and has yet to experience more of its impact on him.

Participant 6 stated, *"Well, I can't describe it to you. It's hard to describe as I'm old."*

Grandchildren. A participant stated that aside from enriching her faith, she also turns to her family, particularly her grandchildren, in facing her process of aging. This helps her view aging in a better light.

As Participant 7 said, *"I strive to live life worry-free, and I also spend my time focusing on my grandchildren."*

Acceptance. When asked about how their widowhood impacted their life and views on aging, all stated having been affected emotionally and physically. However, one of the participants said that he only initially struggled but eventually was able to cope up with the loss of his spouse. With time, understanding that death is inevitable and that it will come at any time, he became more at ease and eventually came back to performing his responsibilities.

As Participant 3 stated, *"So... at the beginning, it was really hard. But after a few months and years, I was able to bounce back and move on."*

Vulnerability. Some participants mentioned the pain they felt with their spouses' loss. A few of the participants had to deal with the sudden passing of their spouses. This was more painful for them since they were not expecting such losses early, nor did they not think that their spouses would pass away in ways such as accidents and killings. When asked about her realizations and learnings from widowhood, one participant was not even able to respond, opting to not answer the inquiry due to the emotional vulnerability involved in sharing such a particular experience of hers.

In response to being asked about a significant experience brought about by widowhood that affected them, Participant 4 stated, *"It's the grief that I went through when I first became widowed."*

Regrets

This theme discusses the participants' feelings of pain caused by their past actions and regretful events that occurred in their lives after the passing of their spouse. It includes sub-themes related to the occurrence of spouse's health complications, lack of employment opportunities, and belief in fate.

Complications. One participant expressed regretting allowing his spouse to go abroad to provide for their family. He believes such was the reason for his early loss. According to him, in the country where his wife used to work, the way of life and of eating there severely affected his wife's health, leading to the development of diabetes.

Participant 3 stated, *"If I hadn't allowed her to go abroad, maybe she would still be alive today."*

Unemployment. Participant 2 feels sorry for not being able to work and provide for his children anymore. When he was younger, he used to farm, but could not do it anymore due to his age.

Participant 2 also added, *“I help my children from time to time because I can’t earn a living anymore. Even if I want to, I will not be accepted in job hiring. They’d say I’m already old and that instead of doing work, I might end up being the employer’s liability if I get into an accident.”*

Belief in Fate. As the participants reflected on their lives and the regrets they had, their belief in fate was seen. In the narrative of the widowed, the sudden death of their spouse led them to think about life being predestined by God, even though she described her spouse’s passing as a regret she has. Another participant’s views contribute to this subtheme as she narrated the experience of being deceived by other people. Although this event caused a great misfortune to her, she believes that there is a consequence in doing that.

Participant 7 said, *“I think I’ve already accepted it... I guess that was really God’s plan... to take him before me.”*

“Those who do bad things do not get blessed as for me, with God’s mercy, I am able to get by with the love I receive from my family.”, Participant 5 shared in her interview.

Participant 6 also stated, *“I read somewhere that when humans are still in their mother’s wombs, God already set their destiny, including how long they will live and when they will die.”*

Table 5: Perception of Widowed Elders on Dying in Relation to Widowhood

Domain	Themes	Subthemes
Perception of Widowed Elders on Dying in Relation to Widowhood	Openness	(1) Concern for Family; (2) Entrusting; (3) Acceptance; (4) Sudden Loss
	Aspirations	(1) Spirituality; (2) Long Lifespan; (3) Harmony; (4) Pleasant Life
	Values	(1) Familial Love; (2) Perseverance and Hard Work; (3) Opportunities

Openness

Under the theme of openness, subthemes demonstrating the participants’ accepting demeanor towards dying are presented. However, while they expressed openness, some of the other participants’ views were still affected by the sudden loss of their spouses, as stated in the last subtheme. Concern for family and the sudden loss of spouses was also mentioned.

Concern for Family. When asked about their understanding of and views on death, most expressed acceptance. However, what concerns them are their families who they will be leaving behind once they pass away. They hope for their children to remain harmonious in their relationships with each other.

As Participant 1 stated, *“Well, my only wish is, if I lose my life too, I hope that my youngest son and his wife, as well as his two children, still get along and that they live happily. That is what I dream of before I pass away.”*

Entrusting. Other than acceptance, a participant also stated that if there comes a time for him to pass away, he believes his children and in-laws would be taking care of him. He trusts that with his relationship with them when such a situation occurs, his family would remain by his side.

Participant 2 stated, *“I’ll let my children and brothers-in-law take care of that for me.”*

Acceptance. One common subtheme among almost all of the participants is their acceptance of death. They see it as a part of fate that they have no control over. Some also mentioned God, stating that a time for occurrences such as birth, happiness, sadness, and death, are all part of human fate as created by a higher being. For them, such a pre-destined occurrence is something they openly accept and, as stated by one participant, something one must be prepared for.

Participant 4 said, *“Well, I’m okay about it if it’s really going to be my time. How long is a person’s life supposed to be? No one will ever know.”*

Sudden Loss. Some participants talked about what they felt about death by talking about the painful feelings they experienced due to their spouses’ sudden loss. One participant stated that for a while, they carried with them the pain and burden of losing their spouse to a vehicular accident. The others continue to grieve their spouses’ in the present, affecting how they view death.

Participant 5 stated, *“Well, it was painful and shocking. This is especially true since my husband was shot, he died very fast.”*

Aspirations

Involved in this theme are elderly participants’ wishes and hopes for their families. All themes point to their desire of wanting their children to live good lives, may it be in spiritual, family-related, or socioeconomic areas.

Spirituality. Some participants said that when they die, their request is for their children to remain in service to the church they belong to, and that they may have strong faith. They wish for them to always be a happy and strong family, even if they are gone. They wish for them to remain trusting of God and continue participating in religious activities as well.

Participant 1 said, *“Even if I am gone, I hope my children will remain in service to the God, as well as my daughter-in-law and grandchildren.”*

Long Lifespan. One participant stated that his only dream is to prolong his life, not for his own sake, but for him to continue supporting his children in any way he can. Some participants also said they want to live longer so that they can see their grandchildren and take care of them.

Participant 3 stated, *“If I get to live longer, I want to see my grandchildren finish their studies and graduate.”*

Harmony. All the participants expressed having good family relations. The participants hope that this continues among their families who will be left behind once they pass away. While they also want their children to experience living better lives in terms of finances, what is more important for them is that their families remain close to each other.

Participant 4 said, *“I wish for my children to live good lives.”*

Pleasant Life. All the participants had stated their wishes for their families to live pleasant lives. Knowing fully well the struggles they faced in the past and continue to experience in the present, they hope that their families will be able to find ways to exceed their successes. To be specific, many of them expressed their hopes for their children to become more financially stable. This is in response to their own experience with

living in poverty. Aside from finances, some also stated that they want their children to be more socially adept as they believe this will contribute to their quality of life.

Participant 4 stated, *“That’s my dream for my children, that they live comfortably.”*

Values

Included in this section are sub-themes relating to the participants’ ideals of values that inspire or direct behavior. These ideals determine the type of person they want their children and families to be, including the way they treat one another, the way they engage with those around them, and how they deal with various situations encountered.

Familial Love. Participants want their families to remain loving of each other even as the day comes for them to pass away.

Participant 7 stated, *“I want them to learn to love each other as siblings. That is also what I want for my grandchildren.”*

Perseverance and Hard Work. The participants wish for their children and the younger generation to realize the value of striving for the things they aspire to achieve. With the belief that life becomes more difficult with time, they stated that possessing an industrious characteristic is important to survive and provide their needs such as food and education for their children.

As Participant 3 said, *“You just have to work hard and be patient because that’s what I did to raise my family...”*

Opportunities. When asked about their hopes for their children and the younger generation, the participants lamented that their children were not able to attain higher education which led them to have fewer opportunities for employment and success. They expressed their wishes for those who are younger to learn how they sustained their families. For instance, one participant expressed disappointment that his children, unlike him, have not learned how to farm. He said wants them to find more stable sources of income instead of jumping from one job to another.

Participant 5 stated, *“I am sad that I did not get to witness any of my children graduate from school.”*

Discussion

The results revealed that prior to widowhood, the participants cherished deep spousal bonds nurtured through lengthy courtships, shared affections, collaborative efforts, and mutual support, despite occasional conflicts. This aligns with Holm et al.’s (2019) finding that spousal relationships provide meaning in late life. The emphasis on courtship and growing affection highlights how the foundation of their marital bonds was built over time, underscoring the depth of their connection. However, one participant also hinted at distant temptation while working abroad, reflecting the complex interplay between commitment and circumstances that shape relationship dynamics. This introduces nuance into the overall portrait of largely positive marital bonds.

In coping with spousal loss, participants highlighted the importance of familial support, faith, contentment, and keeping busy. This resonates with Carandang et al.’s (2019) study which found self-reliance and religious engagement as key coping mechanisms among elderly Filipinos. Participants’ emphasis on familial support also aligns with findings on the centrality of family in Filipino culture (Enriquez, 1978). However, some participants still expressed difficulties like loneliness, employment limitations, and longing, indicating unresolved grief. The qualitative results reveal a multifaceted bereavement experience, where sources of

resilience coexist with ongoing struggles.

Regarding perceptions of aging and dying, participants expressed general acceptance, prioritizing familial harmony and loved one's well-being. The recurring theme of valuing family connections in late life aligns with Bergenholtz et al.'s (2020) finding that the elderly derive peace from reduced family conflicts. Concerns about loved ones' welfare after death also emerged, reflecting Kaap-Deeder et al.'s (2020) link between need satisfaction and attitudes toward mortality. However, some noted the pain of losing a spouse suddenly, highlighting how circumstances of death impact perceptions. Overall, participants displayed openness towards aging and mortality, while still expressing vulnerabilities and worries for family.

Moreover, Erikson's (1997) theory of psychosocial development enriches analysis of the central phenomenon. Participants' emphasis on spousal intimacy and familial ties connects to Erikson's stage of intimacy vs. isolation. Their openness to discuss mortality relates to ego integrity in later life. However, regrets and longing for spouses manifest aspects of despair. This highlights the interplay between achieving integrity and succumbing to despair in shaping elderly experiences amidst spousal loss.

Overall, the qualitative findings reveal nuanced insights into Filipino widowed elderly's experiences, from fond spousal bonds to complex grief, highlighted by resilience and openness amidst vulnerability. While cherished bonds, faith, and family nurture integrity, the results also unveil unresolved pain and struggles. This elucidates the central phenomenon of how widowhood multifariously impacts health, emotions, and social connections while shaping elderly Filipinos' dynamic perceptions of living, aging, and dying. The results underscore the need for supportive resources to assist elderly Filipinos coping with spousal bereavement.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

This phenomenological study provided insights into the lived experiences of seven Filipino widowed elderly through in-depth interviews. To describe the relationship of the elderly couples before widowhood, spousal bonds played a significant role in shaping their life stories. Even with the presence of some conflicts, they were able to withstand those with their commitment to keep their relationships afloat. On the other hand, their life experiences, which were enriched by the multilayered widowhood impacts of spousal loss as they age, are characterized by resilience and coping. This led to the realization of a strong character, self-regulation strategies, as well as regrets and vulnerabilities that persist in grief. Lastly, the values of familial harmony and togetherness comprise what the widowed elderly aspire to pass on to their children and the next generation as they reflect on life and death.

Despite the small sample size, this study contributes to understanding the complex challenges and sources of strength among elderly Filipinos coping with spousal bereavement. The knowledge generated can inform supportive interventions, community engagement, and policies to address their needs.

Recommendations

To the Filipino widowed elderly, it is recommended that they continue to strengthen their support system and engage in activities that give meaning and purpose to them. Seeking professional help and/or elderly support can facilitate healthy coping processes as they go through aging and widowhood.

To the families of the widowed elderly, it is important to provide emotional, social, and tangible support. Frequent communication and quality time together are essential. However, respecting their autonomy and

not being overbearing is also advised.

To communities, it is recommended that they implement programs within their scope in support of the widowed elderly, as well as education on what one can do in terms of addressing the multi-faceted difficulties they experience, which may include physiological, psychological, socioeconomic, and other factors. Their support toward this particular group would help in easing the burden of living as widowed elderly.

To the government, the needs of elderly Filipinos, those who are widowed in particular, should be considered in policy-making and social services. Their rights and welfare, which include but are not limited to healthcare, pensions, social protection, and other benefits, should be taken care of more closely. Incorporating their needs into government programs and policymaking is crucial in ensuring that their concerns are heard, and their experiences accounted for.

To future researchers, may this study be a relevant source of information for further exploration of the topic and other related concepts. Also, an emphasis on male widowed elderly could be done, given that for this study, difficulty was found when it came to identifying participants under the said group. Such could contribute more insights into the lived experiences of the male widowed elderly.

ACKNOWLEDGMENT

We would like to express our deepest gratitude to all those who made this research study possible. First and foremost, we are thankful to our professor, Mr. Michael Jo Guballa, for his invaluable guidance, encouragement, and support throughout this journey. His insights and direction were instrumental in helping us conduct the study and write the manuscript.

We would also like to extend our appreciation to Mrs. Teri Del Rosario-Ramos for her meticulous review and feedback which pushed us to refine our work further. Her thoughtful critiques challenged us to think more deeply and critically about our topic. Much appreciation is given for their time and effort.

Also, we would like to thank all of the participants who generously shared their personal lived experiences and perspectives with us. It was a privilege to hear their stories and insights firsthand. This research would not have been possible without their openness and trust.

We would also like to give special thanks to our family for their unwavering love, patience, and assistance during this demanding period. Their faith in our capabilities inspired us to persevere.

Finally, we wish to acknowledge our classmates and friends who lent a sympathetic ear and inspired us with their own dedication. The solidarity, humor, and kindness in difficult moments will always be cherished.

It was through the collaborative efforts of all these individuals that this research study came to fruition. We cannot thank them enough for being part of this journey with us.

REFERENCES

1. Abozied, A. M., Abdelwahed, A. Y., Sayed, S. M. E., Hakami, M. S., Hassan, N. I., El-Hie, H. a. A., & Metwaly, S. M. (2023). Satisfaction with life in relation to desirability of control and fear of death, dying among community dwelling older adults. *Egyptian Journal of Health Care*, 14(2), 637–649. <https://doi.org/10.21608/ejhc.2023.301089>
2. Badana, A. N. S., & Andel, R. (2018). Aging in the Philippines. *The Gerontologist*, 58(2), 212–218.

<https://doi.org/10.1093/geront/gnx203>

3. Balasubramaniam, M. (2018). Rational Suicide in Elderly Adults: A Clinician's Perspective. *Journal of the American Geriatrics Society*, 66(5), 998–1001. doi:10.1111/jgs.15263. <https://agsjournals.onlinelibrary.wiley.com/doi/abs/10.1111/jgs.15263>
4. Bergenholtz, H., Missel, M., & Timm, H. U. (2020). Talking about death and dying in a hospital setting – a qualitative study of the wishes for end-of-life conversations from the perspective of patients and spouses. *BMC Palliative Care*, 19(1). <https://doi.org/10.1186/s12904-020-00675-1>
5. Bi T, Kou H, Kong Y., & Shao B. (2022). Widowhood Impairs Emotional Cognition Among Elderly. *Front. Aging Neurosci.* 13:808885. doi: 3389/fnagi.2021.808885
6. Blanner Kristiansen, C., Kjær, J. N., Hjorth, P., Andersen, K., & Prina, A. M. (2019). Prevalence of common mental disorders in widowhood: A systematic review and meta-analysis. *Journal of Affective Disorders*, 245, 1016–1023. doi:1016/j.jad.2018.11.088
7. Carandang, R. R., Asis, E., Shibnuma, A., Kiriya, J., Murayama, H., & Jimba, M. (2019). Unmet needs and coping mechanisms among community-dwelling senior citizens in the Philippines: a Qualitative study. *International Journal of Environmental Research and Public Health*, 16(19), 3745. <https://doi.org/10.3390/ijerph16193745>
8. Carandang, R. R., Shibnuma, A., Kiriya, J., Asis, E., Chavez, D. C., Meana, M., ... Jimba, M. (2019). Determinants of depressive symptoms in Filipino senior citizens of the community based ENGAGE study. *Archives of Gerontology and Geriatrics*, 82, 186–191. doi: 1016/j.archger.2019.02.01
9. Chan, H. H., & Thang, L. L. (2021). Active aging through later life and afterlife planning: Shūkatsu in a super-aged Japan. *Social Sciences*, 11(1), 3. <https://doi.org/10.3390/socsci11010003>
10. Collins, T. (2018). The personal communities of men experiencing later life widowhood. *Health & Social Care in the Community*, 26(3), e422–e430. <https://doi.org/10.1111/hsc.12542>
11. Creswell, C. (2018). Creswell, J.W., Creswell, J.D. (2018). Research design: Qualitative, quantitative, and mixed method approach.
12. De Carvalho, M. L., Barbosa, C. N. S., Bezerra, V. P., Santos, A. M. R. D., Silva, C. R. D. T., De Brito, C. M. S., & Figueiredo, M. D. L. F. (2019). Health situation in the perception of elderly widows assisted by primary health care. *Revista Brasileira De Enfermagem*, 72(suppl 2), 199–204. <https://doi.org/10.1590/0034-7167-2018-0549>
13. de Jong, Y., van der Willik, E. M., Milders, J., Voorend, C. G. N., Morton, R. L., Dekker, F. W., Meuleman, Y., & van Diepen, M. (2021). A meta-review demonstrates improved reporting quality of qualitative reviews following the publication of COREQ- and ENTREQ-checklists, regardless of modest uptake. *BMC Medical Research Methodology*, 21(1). <https://doi.org/10.1186/s12874-021-01363-1>
14. Dezutter, J., Toussaint, L., & Dewitte, L. (2019). Finding a balance between integrity and despair: a challenging task for older adults in residential care. *Journal of Adult Development*, 27(2), 147–156. <https://doi.org/10.1007/s10804-019-09332-1>
15. Doblas, J., Del Pilar, M., & Conde, D. (2018). Widowhood, loneliness, and health in old age. *Revista Española de Geriatria y Gerontología. Rev Esp Geriatr Gerontol*, 53(3), 128–133. <https://doi.org/10.1016/j.regg.2017.09.005>
16. Holm, A. L., Severinsson, E., & Berland, A. (2019). The meaning of bereavement following spousal loss: a qualitative study of the experiences of older adults. *Sage Journals*, 9(4), <https://doi.org/10.1177/2158244019894273>
17. Jiang, D., Hou, Y., Hao, J., Zhou, J., Jiang, J., & Wang, Q. (2020). Association between personal social capital and loneliness among widowed older people. *International Journal of Environmental Research and Public Health*, 17(16), 5799. doi:3390/ijerph17165799
18. Jones, E., Oka, M., Clark, J. J., Gardner, H., Hunt, R., & Dutson, S. (2018). Lived experience of young widowed individuals: A qualitative study. *Death Studies*, 43(3), 183–192. <https://doi.org/10.1080/07481187.2018.1445137>

19. Klaus, D. (2021). Differential effects of widowhood on network and support. *Journal of Family Issues*, 42(12), 2755-2781. <https://doi.org/10.1177/0192513X20988068>
20. Kwak, J. J. (2022). Death attitudes among older Asian and Pacific Islander Americans: The role of religiosity, spirituality, and psychosocial health factors. *Death Studies*, 46(3), 648-657. <https://pubmed.ncbi.nlm.nih.gov/32324111/>
21. Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Sage.
22. Liu, H., Liu, X., Liu, Z., Wang, Y., Feng, R., Zheng, R., ... & Wu, X. (2022). Death anxiety and its relationship with family function and meaning in life in patients with advanced cancer—A cross-sectional survey in China. *Asia-Pacific Journal of Oncology Nursing*, 9(10), 100134. <https://doi.org/10.1016/j.apjon.2022.100134>
23. Orenstein, G. A., & Lewis, L. (2022). Eriksons stages of psychosocial development. In StatPearls [Internet]. StatPearls Publishing. <https://www.ncbi.nlm.nih.gov/books/NBK556096/>
24. Philippine Statistics Authority (2023). Philippine Statistics Authority. <https://psa.gov.ph/statistics/population-and-housing>
25. Lyu, J., Min, J., & Kim, G. (2019). Trajectories of cognitive decline by widowhood status among Korean older adults. *International Journal of Geriatric Psychiatry*, 34(11), 1582–1589. <https://doi.org/10.1002/gps.5168>
26. Nieboer, A. P., Hajema, K., & Cramm, J. M. (2020). Relationships of self-management abilities to loneliness among older people: a cross-sectional study. *BMC Geriatrics*, 20(1). doi:10.1186/s12877-020-01584-x <https://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-020-01584-x>
27. Saldaña, J. (2021). *The coding manual for qualitative researchers*. Sage.
28. Salvador, J. T., & Alqahtani, F. M. (2019). The Phenomenon of Aging: The Adaptation of Filipino Elderly. *Activities, Adaptation & Aging*, 1–18. doi:1080/01924788.2019.1692466
29. Smith, J. A., & Fieldsend, M. (2021). Interpretative phenomenological analysis. In P. M. Camic (Ed.), *Qualitative research in psychology: Expanding perspectives in methodology and design* (pp. 147–166). American Psychological Association. <https://doi.org/10.1037/0000252-008>. <https://psycnet.apa.org/record/2021-54192-008>
30. Soberano, J. I. D., Siongco, K. L., Kabristante, E. I. A., Leyva, E. W. A., & Evangelista, L. S. (2021). Stress relief, living arrangements, and depression among community-dwelling older adults in the Philippines. *International Forum for Nursing and Healthcare*, 5, 68–72. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10190681/?report=reader>
31. Srivastava, S., Debnath, P., Shri, N., & Muhammad, T. (2021). The association of widowhood and living alone with depression among older adults in India. *Scientific Reports*, 11(1). <https://doi.org/10.1038/s41598-021-01238-x>
32. Tjernberg, J., & Bökberg, C. (2020). Older persons' thoughts about death and dying and their experiences of care in end-of-life: a qualitative study. *BMC Nursing*, 19(1). <https://doi.org/10.1186/s12912-020-00514-x>
33. Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*, 19(6), 349–357. <https://doi.org/10.1093/intqhc/mzm042>
34. Vaismoradi, M., Jones, J., Turunen, H., & Snelgrove, S. (2019). Theme development in qualitative content analysis and thematic analysis. *Journal of Nursing Education and Practice*, 6(5), 100–110. <https://doi.org/10.5430/jnep.v6n5p100>
35. Van Boekel, L. C., Cloin, M., & Luijkx, K. (2019). Community-dwelling and recently widowed older adults: Effects of spousal loss on Psychological Well-Being, Perceived Quality of life, and Health-Care costs. *International Journal of Aging & Human Development*, 92(1), 65–82. <https://doi.org/10.1177/0091415019871204>
36. Van Der Kaap-Deeder, J., Soenens, B., Van Petegem, S., Neyrinck, B., De Pauw, S., Raemdonck, E., & Vansteenkiste, M. (2020). Live well and die with inner peace: The importance of retrospective need-based experiences, ego integrity and despair for late adults' death attitudes. *Archives of*

- Gerontology and Geriatrics*, 91, 104184. <https://doi.org/10.1016/j.archger.2020.104184>
37. World Health Organization. (2022). *Ageing and health*. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>
38. World Health Organization. (2017). *Ethical considerations for health policy and systems research*. World Health Organization. <https://iris.who.int/handle/10665/330033>
39. World Health Organization. (2016). *Global standards for quality health care services for adolescents*. World Health Organization. <https://www.who.int/publications-detail-redirect/9789241549332>
40. World Health Organization. (2017). *Operational guidelines for ethics committees that review biomedical research*. World Health Organization. <https://iris.who.int/handle/10665/66429>
41. World Health Organization. (2016). *Standards and operational guidance for ethics review of health-related research with human participants*. World Health Organization. <https://www.who.int/publications/i/item/9789241502948>
42. World Health Organization. (2016). *WHO ethical & safety recommendations for researching, documenting and monitoring sexual violence in emergencies*. World Health Organization. <https://www.who.int/publications/i/item/9789241595681>
43. Xu, J., Wu, Z., Schimmele, C. M., & Li, S. (2019). Widowhood and depression: a longitudinal study of older persons in rural China. *Aging & Mental Health*, 24(6), 914–922. <https://doi.org/10.1080/13607863.2019.1571016>
44. Yang, F., & Gu, D. (2021). Widowhood, widowhood duration, and loneliness among older adults in China. *Social Science & Medicine*, 283, 114179. <https://doi.org/10.1016/j.socscimed.2021.114179>
45. Yu, J., Kahana, E., Kahana, B., & Han, C. (2019). Depressive symptoms among elderly men and women who transition to widowhood: comparisons with long term married and long term widowed over a 10-year period. *Journal of Women & Aging*, 33(3), 1–16. <https://doi.org/10.1080/08952841.2019.1685855>
46. Zenebe, Y., Akele, B., W/Selassie, M., & Necho, M. (2021). Prevalence and determinants of depression among old age: a systematic review and meta-analysis. *Annals of general psychiatry*, 20(1), 55. <https://doi.org/10.1186/s12991-021-00375-x> <https://annals-general-psychiatry.biomedcentral.com/articles/10.1186/s12991-021-00375-x>

APPENDICES

Appendix A

Informed Consent / May Alam na Pahintulot

Greetings! We are 3rd-year BS Psychology students at National University Baliwag. We are currently conducting a qualitative research study entitled “Integrity vs Despair: A Phenomenological Study on Filipino Widowed Elderly Lived Experiences.” You have the right to participate or opt out of the study.

Pagbati! Kami ay 3rd-year BS Psychology students sa National University Baliwag. Kasalukuyan kaming nagsasagawa ng qualitative research study na pinamagatang “Integrity vs Despair: A Phenomenological Study on Filipino Widowed Elderly Lived Experiences.” May karapatan kang lumahok o tumanggi sa pagsali sa pag-aaral.

Information Sheet / Pahina ng Impormasyon

Purpose of the Research / Layunin ng Pananaliksik

To describe the lived experiences of Filipino widowed elderly residing in Bulacan.

Upang ilarawan ang mga buhay na karanasan ng mga matatandang Pilipinong balo na naninirahan sa Bulacan.

Type of Research Intervention / Uri ng Interbensyon sa Pananaliksik

For this study, interviews will be conducted to obtain the necessary information from the participants. The said interview will be structured.

Para sa pag-aaral na ito, magsasagawa ng mga panayam upang makuha ang mga kinakailangang impormasyon mula sa mga kalahok. Ang nasabing panayam ay magiging structured.

Participant Selection / Pagpili sa mga Kalahok

In this study, we will be needing participants who are 65 years or older, widowed for at least two (2) years, articulate in either the Filipino or English language, or both, and residing in Bulacan.

Sa pag-aaral na ito, mangangailangan kami ng mga kalahok na 65 taong gulang o mas matanda pa, balo nang hindi bababa sa dalawang (2) taon, nakapagsasalita sa alinman sa wikang Filipino o Ingles, o pareho, at naninirahan sa Bulacan.

Voluntary Participation / Boluntaryong Pakikilahok

As a participant, your engagement in this study is guaranteed to be voluntary. You are free to choose whether to participate or not. If you wish to take part, you will be asked to fill out this consent form. Doing this will not prevent you from withdrawing at any moment without explanation. If you withdraw from this study, your relationship, if there is any, with the researchers will not be affected. Your data will be disposed of should you decide to withdraw from the study prior to the conclusion of data collection.

Bilang isang kalahok, ang iyong pakikibahagi sa pag-aaral na ito ay garantisadong boluntaryo. Malaya kang pumili kung lalahok o hindi. Kung nais mong makilahok, hihilingin sa iyo na punan ang consent form na ito. Ang paggawa nito ay hindi makapipigil sa iyo na umatras anumang sandali nang walang paliwanag. Kung aalis ka sa pag-aaral na ito, ang iyong relasyon, kung mayroon man, sa mga mananaliksik ay hindi maaapektuhan. Itatapon ang iyong data kung magpasya kang umalis sa pag-aaral bago ang pagtatapos ng pangongolekta nito ng mga mananaliksik.

Procedures and Protocol / Mga Pamamaraan at Protokol

The interview will be conducted in the homes of the participants. After giving the needed information about the study being conducted and having the consent form signed, the researchers will proceed with the interview proper. The participants will have to answer the set of questions prepared by the researchers, as well as any additional inquiries if deemed necessary.

Ang panayam ay isasagawa sa mga tahanan ng mga kalahok. Matapos maibigay ang mga kinakailangang impormasyon tungkol sa isinagawang pag-aaral at mapirmahan ang consent form, magpapatuloy ang mga mananaliksik sa pakikipanayam. Ang mga kalahok ay kailangang sagutin ang hanay ng mga tanong na inihanda ng mga mananaliksik, pati na rin ang anumang karagdagang mga katanungan kung itinuring na kinakailangan.

Duration / Tagal ng Panayam

The interview is expected to last for 30-40 minutes, from the signing of consent forms until the end of the

interview. However, the duration will still be dependent on the speed by which the interviewers and participants will be able to finish inquiring and answering, respectively.

Ang panayam ay inaasahang tatagal ng 30-40 minuto, mula sa pagpirma ng consent form hanggang sa pagtatapos ng panayam. Gayunpaman, ang tagal ay depende pa rin sa bilis kung saan ang mga tagapanayam at kalahok ay makatapos ng pagtatanong at pagsagot.

Risks / Mga Panganib

Signing this consent form means taking the time to participate in the study. It is also possible that you may be sensitive or uncomfortable with certain parts of the interview. You are permitted to decline to answer any or all of the questions asked, and you are also entitled to withdraw from the interview at any moment.

Ang pagpirma sa consent form na ito ay nangahulugan ng paglalaan ng oras upang makilahok sa pag-aaral. Posible rin na maaari kang maging sensitibo o hindi komportable sa ilang bahagi ng panayam. Pinahihintulutan kang tumanggi na sagutin ang anuman o lahat ng mga tanong na ibibigay, at may karapatan ka ring umatras sa panayam anumang sandali.

Benefits / Benepisyo

We hope that the data gathered and the results that will come out of this study may be used to provide credible and useful information that would benefit the participants.

Umaasa kami na ang mga datos na makakalap at ang mga resulta na lalabas sa pag-aaral na ito ay maaaring magamit upang makapagbigay ng kapani-paniwala at kapaki-pakinabang na impormasyon para sa mga kalahok.

Confidentiality / Kasunduan sa Pagiging Kumpidensyal at Hindi Pagsisiwalat

The gathered records for this study will be treated as confidential. Individual identities will not be disclosed in any of the study's findings. All data will be stored properly and only the researchers will have access to the files, and any reports, or summaries, and only those with a critical need to view names or other identifying information will have access to the specific file containing identifying information. Any identifying information will be deleted once the study has been concluded.

Ang mga nakalap na tala para sa pag-aaral na ito ay ituturing na kumpidensyal. Ang mga indibidwal na pagkakakilanlan ay hindi ibubunyag sa alinman sa mga natuklasan ng pag-aaral. Ang lahat ng datos ay tulad ng mga ulat o buod maiimbak nang maayos at ang mga mananaliksik lamang ang may karapatang makita at gamitin ang mga ito. Tanging ang mga may kritikal na pangangailangan na tingnan ang mga pangalan o iba pang impormasyon sa pagkakakilanlan ang magkakaroon ng karapatang makita ang mga partikular na tala na naglalaman nito. Ang anumang impormasyong nagpapakilala sa mga kalahok ay tatanggalin kapag natapos na ang pag-aaral.

Sharing of Results / Pagbabahagi ng mga Resulta

Should any of the participants wish to be informed about the results and findings of the study, it will be made available to them upon request.

Kung nais ng sinuman sa mga kalahok na malaman ang tungkol sa mga resulta at mga natuklasan ng pag-aaral, ito ay ibibigay sa kanila kung hihilingin.

Right to Refuse or Withdraw / Karapatang Tumanggi

Participants are permitted to withdraw from this study whenever they want. The researchers value and respect the participants' rights. You have the option to decide whether or not you are interested in participating.

Ang mga kalahok ay pinahihintulutan na umalis sa pag-aaral na ito kung kailan nila gusto. Pinahalalagan at iginagalang ng mga mananaliksik ang kanilang mga karapatan. May opsyon kang magpasya kung interesado ka o hindi lumahok. For any further information, please do not hesitate to contact us through the following email addresses: Para sa anumang karagdagang impormasyon, mangyaring makipag-ugnayan sa amin sa pamamagitan ng mga sumusunod na email address:

boncaymm@students.nu-baliwag.edu.ph

damianjr@students.nu-baliwag.edu.ph

gregoriokg@students.nu-baliwag.edu.ph

maraggunfl@students.nu-baliwag.edu.ph

suarezat@students.nu-baliwag.edu.ph

Certificate of Consent / Sertipiko ng Pahintulot

I have been invited to participate in research about my lived experiences as Filipino widowed elderly. I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. I consent voluntarily to participate as an interviewee in this study.

Ako ay naimbitahan na lumahok sa isang pananaliksik tungkol sa aking mga karanasan bilang isang matandang Pilipinong biyuda. Nabasa ko na ang naunang impormasyon, o nabasa na ito sa akin. Nagkaroon ako ng pagkakataon na magtanong tungkol dito at anumang mga naitanong ko ay nasagot sa aking kasiyahan. Ako ay kusang pumapayag na lumahok bilang isang kinapanayam sa pag-aaral na ito.

Participant's or Witness' Name and Signature/ Pangalan at Pirma ng Kalahok o Saksi

Date / Petsa

Statement by the Researcher Taking Consent / Pahayag ng Kumukuha ng Pahintulot I have accurately read out the information sheet to the potential participant, and to the best of my ability made sure that the participant understood what will be done during the interview. I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and that it has been given freely and voluntarily. A copy of this consent form has also been provided to the participant.

Nabasa ko nang tumpak ang pahina ng impormasyon sa potensyal na kalahok, at sa abot ng aking makakaya ay tiniyak na naiintindihan ng kalahok kung ano ang gagawin sa panahon ng panayam.

Kinukumpirma ko na ang kalahok ay binigyan ng pagkakataong magtanong tungkol sa pag-aaral, at lahat ng mga ito ay nasagot nang tama at sa abot ng aking makakaya. Kinukumpirma ko na ang indibidwal ay hindi pinilit na magbigay ng pahintulot, at ito ay ibinigay nang malaya at kusang-loob. Binigyan din ang kalahok ng kopya ng form na ito.

Pangalan at Pirma ng Mananaliksik/Kumuha ng Pahintulot

Petsa

Appendix B

Certificate of Interview Guide Questions Validation



Certificate of Interview Guide Questions Validation

This certifies that the undersigned has examined and validated the interview guide questions of researcher/s (name of author/s) for their paper entitled,

Title:

Signature over printed name

Validator

Date:

Appendix C

Certificate of Qualitative Research Inquiry Audit



Certificate of Qualitative Research External Audit

This certifies that the undersigned has examined and audited the qualitative research paper entitled *Integrity vs Despair: A Phenomenological Study on Filipino Lived Experiences* of researchers Mari Angelu Boncay, Janiena Faith Damian, Kim Courtney Gregorio, Faith Henrick Maraggun, and Andrea Reasele Suarez.



Handwritten signature of Teri Del Rosario-Ramos.

Teri Del Rosario-Ramos
Validator
Date:

Appendix D

Interview Guide

English Version:

1. How long have you been widowed?
2. How did you come to meet your spouse?
3. How would you describe your marriage prior to widowhood?
4. Can you recall any significant moments or experiences with your spouse, may it be positive or negative?
5. How would you describe your and your spouse's relationship with your children or family as a whole?
6. What is your understanding of and thoughts on aging?
7. How would you describe your aging experience?
8. How do you think widowhood affected your life and views in old age?
9. Do you still long for your spouse's presence?
10. How would you imagine your experience of aging if your spouse was still present?
11. Are there any significant experiences or learnings that you think were significantly brought about by your aging process and widowhood?
12. Do you carry regrets from your past actions or experiences? How did the presence or absence thereof affect your perception of living?
13. How would you describe your relationship with your children after your spouse's passing?
14. What are your wishes or aspirations for your children or family?
15. What realizations or learnings would you want to instill in your children or the younger generation?

Tagalog Version:

1. Gaano ka na katagal na balo?
2. Paano mo nakilala ang iyong asawa?
3. Paano mo ilalarawan ang iyong buhay may asawa bago ang pagkabalo?
4. Naaalala mo ba ang anumang mahahalagang sandali o karanasan kasama ang iyong asawa, na maaaring positibo o negatibo?
5. Paano mo ilalarawan ang relasyon mo at ng iyong asawa sa iyong mga anak o pamilya?
6. Ano ang iyong pang-unawa at pananaw tungkol sa pagtanda at pagkamatay?
7. Paano mo ilalarawan ang iyong karanasan sa pagtanda?
8. Paano sa palagay mo naapektuhan ng pagkabalo ang iyong buhay at mga pananaw sa katandaan?
9. Inaasam o hinahanap mo pa ba ang presensya ng iyong asawa?
10. Paano sa tingin mo ang iyong karanasan sa pagtanda kung kasama mo pa ang iyong asawa?
11. Mayroon ka bang anumang karanasan o natutuhan na sa tingin mo ay may makabuluhang naidulot ng iyong proseso ng pagtanda at pagkabalo?
12. Nagdadala ka ba ng mga panghihinayang mula sa iyong mga nakaraang aksyon o karanasan? Paano nakaapekto ang presensya o kawalan nito sa iyong pananaw sa pamumuhay?
13. Paano mo ilalarawan ang iyong relasyon sa iyong mga anak pagkatapos ng pagpanaw ng iyong asawa?
14. Ano ang iyong mga nais o hangarin para sa iyong mga anak o pamilya?
15. Anong mga realisasyon o natutuhan ang gusto mong itanim sa iyong mga anak o sa nakababatang henerasyon?