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Life Stories of the Filipino Rainbow Elderly

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LIFE STORIES OF THE FILIPINO RAINBOW ELDERLY

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ABSTRACT

Name	**:**	Ms. Marilyn N. Hari
Title	**:**	Life Stories of the Filipino Rainbow Elderly
Key Concepts	**:**	Aging, Challenges, Elders, Gays, Lesbian, Psychosocial Development, Support Group
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This research was conducted to explore the understudied population of the elder LGBT. To identify their challenges and how do their life stories reflect Erik Erikson's psychosocial development Integrity vs. Despair and the community support program be provided to the LGBT elders.

The participants of the study were twelve self-identified gay and lesbian elders who were 65 years of age or older and were single in status during the interview. In-depth interviews generated rich narratives which were later subjected to thematic analysis.

Results revealed that the challenges faced by gay and lesbian elders are health issues, basic needs, financial sustainability, need for companionship, fear of dependency and their clamor for support from the government. The majority of the participants' life narratives reflected sense of integrity over few who expressed their regrets. The various themes yielded from the study became the basis of several recommendations.

DEDICATION

This work is dedicated to my dear angels in heaven, my beloved Nanay and sister. You were with me all throughout this journey. I had given a good fight knowing that there were angels behind my back.

To my twelve participants, who unselfishly shared their personal life stories, thank you very much for your trust. It was never easy to share your life journey but you opened it up for a noble cause. Know that your sharing will initiate and open up new doors that will be beneficial to the Rainbow LGBT Community.

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CHAPTER I

THE PROBLEM AND LITERATURE REVIEW

Personal Context and Topic of Choice

In the researcher's growing up years, she had been exposed to friends, relatives and acquaintances who belong to the Lesbian, Gay, Bisexual and Transgender (LGBT) group. Similarly, in her practice as a Guidance Counselor of elementary, secondary and tertiary levels, she has encountered different cases from this group. Having been exposed to cases such as bullying, self-identity crisis, self-acceptance and others, she was to ponder on their experiences. These LGBTs are into what they would become in their aging period. It is in this context that the researcher came up with a desire of doing an in-depth study so as to better understand the lives of the LGBT group, specifically the elderly. She was challenged to know the different stages the LGBT group had gone through to have a better understanding of their different needs and the support they need as part of the minority and understudied individuals, and possible programs / to support aging gays and lesbians.

Background of the Study

Aging is a series of processes that begins with life and continues throughout the life cycle. It represents the closing period in the lifespan, a time when the individual looks back on life, lives on past accomplishments and begins to finish off his life course. Adjusting to the changes that accompany old age requires that an individual is flexible and develops new coping skills to adapt to the changes that are common to this time in their lives (Warnick, 1995).

Quality of life as one ages requires financial security, affordable and quality housing, strong support networks, meaningful and enjoyable activities, and accurate information to deal with life's options and stressors. As the number of older people increases throughout the world and as individuals grow older, they are faced with numerous physical, psychological and social role changes that challenge their sense of self and capacity to live happily. Aging service barriers such as food, meal and transportation allowances, healthcare, health disparities, violence, community support and engagement problems leading to impaired quality of life among elderly persons.

According to Department of Social Welfare and Development (DSWD), in the Philippines, the number of elderly or senior citizens (aged 60 above), which has grown from 6.3 million in 2010 to 7.6 million in 2015, is expected to reach 11.7 million by 2025, and 22.6 million by 2045. The projections for the senior citizen population in 2025 is nearly double the population of persons 60 years and over in 2010, while the projections for 2045 are about triple the population in 2015.

Out of the figures mentioned, no data has been found on the number of elders that belong to minority Lesbian, Gay, Bisexual and Transgender (LGBT). Older adults share many hopes and fears at retirement age and/ or end-of life, but LGBT older adults have unique needs, which research helped to elucidate. For example, LGBT individuals more often prefer the presence of non-biological social support during retirement age and or end-of-life, compared to preferences of their heterosexual peers (MetLife Mature Market Institute & the Lesbian and Gay Aging Issues Network of the American Society on Aging,

2010), and may prefer a close friend to have legal rights for retirement age and or end-of-life decisions rather than a family member (Arthur, 2015).

Furthermore, feelings of disenfranchisement, isolation, and anxieties of being discriminated against due to sexuality have been identified in previous research as negative emotions that older LGBT adults may experience as they near end-of-life (Arthur, 2015; Brotman, Bill, Collins, Chamberland, Cormier, Julien, Meyer, Peterkin, and Richard, 2007; Kimmel, 2014). Older LGBT adults have also expressed fear about receiving care within institutionalized settings, such as long-term care (Witten, 2014).

Further, the health, well-being and social networks of the older LGBT population are understudied. As people age they rely on the informal supports in their network for caregiving. Most caregiving is provided by partners and children; LGBT elders are more likely to live alone and less likely to have children than older heterosexuals. LGBT elders give and receive caregiving from their family of origin and some have been dislike by their family. Research suggests that LGBT elderly are more likely to rely on friends, sometimes referred to as the family of their choice and those without partners did not know who would care for them if they need assistance. Hence, there is need for an emerging scholarship to investigate how LGBT elders can achieve positive aging experiences, just like other older heterosexuals.

The study centered on Rainbow Elderly focusing on gays and lesbians. The word rainbow was used by the researcher in this study as it was associated with the LGBT group as early as 1978. The rainbow flag was created by artist, designer, Vietnam War veteran and then drag performer, Gilbert Baker. He was commissioned by another gay icon,

politician Harvey Milk and with the help of close to 30 volunteers from the Gay Community Center in San Francisco, Baker was able to construct the first draft of the now world-renowned rainbow flag. It was first showcased at San Francisco's Gay Freedom Day Parade on June 25, 1978.

The different colors within the flag were meant to represent togetherness, since LGBT people come in all races, ages and genders, and rainbows are both natural and beautiful. The original flag featured eight colors, each having a different meaning. At the top was hot pink, which represented sex, red for life, orange for healing, yellow signifying sunlight, green for nature, turquoise to represent art, indigo for harmony, and finally violet at the bottom for spirit.

In the years since, the rainbow flag has only grown in popularity and is now seen around the globe as a positive representation of the LGBT community. Now the rainbow flag is an international symbol for LGBTQ pride and can be seen flying proudly, during both the promising times and the difficult ones, all around the world (Morgan,2017). It is in this context that the researcher made used of the word rainbow to associate it with the LGBT community.

The researcher was inspired to conduct this research to understand the present needs of the LGBT elders. To gain information that may be used to address their needs, as well as to assist and provide them with possible interventions through community support program based on the result of the study.

Similarly, to support in filling the gaps in recent researches about the LGBT aging, the researcher wished to know how the policy makers, program planners and service providers would meet the needs of LGBT elders and facilitate their successful aging in the community.

LITERATURE REVIEW

LGBT Elderly Profile and Population

The term "LGBT" is a blanket term coined in order to broadly refer to the lesbian or female homosexual, gay or male homosexual, bisexual or sexually responsive to both sexes and transgender or non-association with one's gender (Dictionary.com, 2014).

However, these terms are fluid and the initialism is sometimes lengthened to accommodate all orientations. For instance, LGBT may be expanded to 'LGBTQ', with 'Q' meaning 'queer' or 'questioning' (Petrow, 2014). However, due to the large number of variance and the limited availability of pre-existing studies, the term LGBT will be used.

While younger LGBT youth has seen a much different reaction to his/her sexual identity, the LGBT elderly has quite a different story. Forty-five years ago, the violent Stonewall Riots that took place in New York, pushed further LGBT elderly on the edge of the age scale, aware of the socio-historical context of being a homosexual in the late 1960's.

Heterosexism – prejudice towards homosexuals by heterosexuals – was largely unchallenged and explicit (Hunter, p.13-16) Homosexuals alive at that time were forced to lead "secret lives" and were only to be shared in extremely private settings, as not only the culture of the time was not permissive, but also that the American Psychiatric Association

classified homosexuality as a mental illness until 1973. Despite the fact that the perception and reception of the LGBT community was rapidly evolving, those who have lived the majority of their lives in hiding, fear, and shame cannot so easily let go. While elderly LGBT adults do report being more content with themselves, they were still on a large scale fear discrimination, particularly in a long-term care setting (Jackson, Johnson, Roberts, 2008).

According to the National Gay and Lesbian Task Force (2011), there are currently between 1.4 and 3.8 million LGBT Americans over the age of 65. By 2030, this number is expected to increase between 3.6 and 7.2 million. Although there is no definitive measure to determine the percentage of LGBT individuals in the USA, national organizations such as the Human Rights Campaign and the National Gay and Lesbian Task Force use 3.5 % as a measure. Certainly, numerous limitations impact the LGBT census, not the least of which are individuals who do not recognize and report their sexual orientation or gender identity. Further, there are those whom the LGBT umbrella does not cover, such as persons who identify as unisex, intersex, and asexual. In addition, the Human Rights Campaign believes that the data, based on the 2010 US Census, do not represent a comprehensive picture as the Census only counts individuals from gay- and lesbian-identified households (Aggarwal, Gendron, Krinsky, Lockeman, Maddux, Metcalfe, & White, 2013). Much of the data on LGBT individuals are aggregated from national, urban studies, many of which do not include older adults; individuals from rural communities; and those who do not, or have not as yet, identified themselves as LGBT. This representation is only one component, however, of those individuals who are considered to be older adults.

In the Philippines, Motilla (2004) cited that there are few studies which featured aging lesbian, gay, bisexual, and transgender (LGBT). Short films (Gaarmand, 2010) had shown homelessness and financial instability as their plight which resulted from the lack of support or rejection by their families of origin. Researches on lesbian, gay, and bisexual (LGB) older adults showed that seniors who have been "out of the closet" for a short period of time experienced more victimization than those who were secretive of their sexual orientations for a longer period of time (Kimmel, 2014).

Brenan et. al (2004), on the other hand, assumed that gay and lesbian older adults received the same amount of familial support that hetero norm-conforming persons do but from different sources, often from friends or chosen family instead of or apart from members of their families of origin. Further, Brotman, et.al (2006) argued that claiming that LGBT persons experienced the same challenges that hetero norm-conforming persons do while aging renders them invisible, silencing their issues.

Lesbian, gay, bisexual and transgender (LGBT) older adults are varied with regard to many characteristics like gender, race/ethnicity, socioeconomic status, residential region, religiosity, and disability status. However, Meyer (2001) shared experiences of exposure to past and current stigma and prejudice and resiliency related to their sexual orientation or gender identity. Therefore, studies of LGBT older individuals are typically not large enough to provide sufficient data to encourage this great diversity to come out and foster changes and support to LGBT individulas.

Thus, many gaps on the understanding of the LGBT elder's characteristics existed. This made it difficult to provide precise information about demographic and other characteristics of this minority population.

More, various disciplines study aging. The study of older persons occurs primarily within the discipline of gerontology. Hooyman and Kiyak (2008) suggested that because of the multidisciplinary nature of gerontology, examination of aging on the societal, psychosocial, and biological levels. However, on all these levels, older sexual minorities (lesbian, gay, bisexual, transgender or LBGT) had been relatively unnoticed in gerontological research (Grossman 2008; Orel 2004; Quam 2004). Similarly, very little content on specific care needs of LGBT persons existed in the literature, especially for older adults. In addition, many other disciplines failed to see LGBT populations from programs and research to the extent that it appeared that sexual minorities do not even exist (Hall and Fine 2005; Harley and Teaser 2014). The lack of focus on LGBT elders in research and training programs frequently resulted in service providers who are inadequately to meet the needs of this population.

According to Gratwick, Holloway, Jihanian, Sanchez, & Sullivan,2014), even when providers of aging services expressed willingness to become more responsive to the needs of LGBT older adults there has been evidence that they do not take sufficient action. Hughes, A., Harold, R. and Boyer, J. (2011) reported that of service providers affiliated with the National Association of Area Agencies on Aging, only 15 % provided services tailored to the need of older LGBT adults. Moreover, at the organizational level, LGBT older adults are literally not being seen. Organizations are not directing resources to these

populations and it appeared that there had been agency resistance to acknowledging the distinctiveness of LGBT aging issues. Considering the increase in the number of older persons in general and the projection for continued growth in numbers and anticipated growth in the one to three million individuals in the USA over age 65 who are already identified as LGBT, the lack of focus of multidisciplinary research relegates older LGBT persons to a status of invisibility.

Furthermore, in the Philippines, families are often extended and members tend to stay together in a shared household unit (UN DESA, 2011). Jocano (1995), a renowed Filipino anthropologist stated that Filipinos are trained in an early age to be dependable to his family and to respect their parents. Later on in their lives, the influence of their parents can be observed when it comes to their major decision that they are to make.

In return, the family provides security and support. Even in trying times when a family member fails, the familys often assists him/her in getting back on track (Jocano, 1995). Older persons usually stay with their children and continue to support them financially or by taking on more reproductive work like caring for their grandchildren or helping manage their households (UN DESA, 2011). Hetero-exclusive norms highly influence family formed through various channels, such as the state, organized religions, and institutions of employment and education, among others (Tan, 2014). Household roles are often divided according to gender role assignments of productive work for men and reproductive work for women (Eviota, 1992).

In the study of Jordan and Lim (2013), they found out that family members who do not marry or form their own legally or legitimately recognized families usually continue to support their families of origin. However, the case may differ in the experiences of older Filipino sexual minorities because their actual or perceived sexual orientation or gender expression may determine whether or not they were accepted by their families. Accordingly, in many cases, hetero-exclusive norms embedded in traditional Filipino family values hinder the acceptance sexual minorities received from their families. There had been stereotypes that assumed that older sexual minorities ended up lonely and isolated (Tan, 2012). Scholars have debated on whether or not older sexual minorities find the same sense of security and satisfaction that hetero norm-conforming persons get from familial support as they face the challenges of aging (Camic & McParland, 2016). There have also been conflicting studies on whether or not sexual minority elderly receive the same quality of support from members of their social network (Brotman et. al., 2006).

Aging LGBT Issues and Concerns

Wilton (2000) mentioned that LGBT people faced many forms of prejudice, harassment and discrimination which had been rooted within the heterosexist structures of society and societal homophobic attitudes in the past 20 years, however, a number of key changes have taken place that should have a significant impact on the lives of older LGBT people into the future. In 1992, the World Health Organization has removed homosexuality as a mental illness diagnosis from the International Classification of Diseases.

According to MAP AND SAGE (2010), as LGBT individuals age, they face unique challenges that their heterosexual peers do not. Aside from the challenges that all older adults face, such as physical limitations and changes in socioeconomic status or relationships, LGBT older adults confront discrimination from entities that are traditionally rely upon for support and legal and financial barriers in preparation for older age. A 2001 Administration on Aging study found that LGBT older adults are 20% less likely than their heterosexual peers to access government services such as housing assistance, meal programs, food stamps, and senior centers (MAP AND SAGE, 2010; Czaja, Jaret, Lang, Lee, Sabbag, Schulz, Thurston, & Vlahovic, 2015). They would also more likely to delay seeking health care and to avoid continuous care from the same health provider, partly due to fear of stigma and discrimination (Czaja et al., 2015). The following are the distinct challenges and areas that LGBT older adults experience:

Isolation. Specific to older LGB individuals, studies have found that a higher proportion of LGB older adults are single or tend to live alone compared to heterosexual elders (MAP AND SAGE, 2010; Bonomo, Endimiani, Taracila, & Wallace, 2011). Isolation and fear of loneliness are major concerns of LGBT older individuals (Emlet, Erosheva, Fredriksen Goldsen, Goldse, Kim, Hoy-Ellis, Muiaco, & Petry, 2011).

Access to Healthcare. For all aging adults, access and receipt of proper health care is critical. For LGBT older individuals, finding good healthcare can be especially challenging. Study results varied on whether LGBT older adults have less access to quality healthcare than heterosexual or cisgender older adults.

Looking at LGB older adults compared with heterosexual older adults, some studies, based on probability samples found no statistically significant difference in access to healthcare measured by whether respondent reported having delayed or not received medical care or prescription when felt is needed, whether respondent visited the emergency room (ER), and number of doctor visits in the past year (Wallace et al., 2001), and no difference in prevalence of having a health care provider (Fredriksen-Goldsen et al., 2013a; Wallace et al., 2011).

Caregiving. According to de Vries, (2009); SAGE & Hunter College Brookdale Center, (1999) LGBT older adults are less likely than heterosexual adults to have children to help them and may also be estranged or continued to conceal their sexual orientation from their biological families for fear of lack of acceptance (MAP AND SAGE, 2010). Consequently, D'Augelli, Grossman, Hershberger (2000) believe that LGBT older adults tend to rely more heavily than cisgender heterosexual older adults on friends or "families of choice"—families composed of close friends—and do not have many intergenerational levels of support that heterosexual aging adults typically have.

Financial Instability and Legal Issues. Many LGBT older adults indicated they worry about financial stability as they age (Alliance Healthcare Foundation, 2003; de Vries, 2009).

Housing. Housing discrimination is a primary concern among LGBT older adults (Equal Rights Center, 2014). Housing decisions can be even more critical for older adults as issues of mobility, limited income earning opportunities, and proximity to social support need to be considered (Equal Rights Center, 2014).

Stressors. Minority stress theory suggests that sexual and gender minorities are exposed to unique stress related to stigma and prejudice and that this stress led to adverse health outcomes (Meyer, 2003; Hendricks & Testa, 2012). Minority stressors include external events and conditions, such as major life events, everyday discrimination (smaller magnitude events, such as daily hassles, or micro aggressions), as well as more proximal (internalized) stressors such as internalized stigma, expectations of rejection and discrimination, and concealment of one's sexual or gender identity.

Prejudice events. This refers to events stemming from antigay prejudice, discrimination, and violence. Prejudice events include the structural exclusion of LGB individuals from resources and advantages available to heterosexuals, including their exclusion from the institution of marriage discussed herein. Prejudice events also include interpersonal events, perpetrated by individuals either in violation of the law (e.g., perpetration of hate crimes) or within the law (e.g., lawful but discriminatory employment practices). There had been numerous accounts of the excess exposure of LGB people to such prejudice events (Herek, 2009; Herek, Gillis, and Cogan, 2009; Meyer 2003; Frost, Meyer & Schwartz, 2008).

Concealment. It refers to an LGB or transgender person hiding their sexual or gender identity from others. It is typically used as a coping mechanism, to prevent being subject to prejudice, discrimination, or violence. However, concealment is also a stressor that can have negative health consequences (Meyer, 2003).

Expectation of rejection and discrimination. This is a stressor because of the almost constant vigilance required by members of minority groups to defend and protect themselves against potential rejection, discrimination, and violence (Meyer, 2003).

In the abovementioned stressors, LGBT elders also showed resilience by having strategy or coping and through their social support.

Resilience Factors for Successful LGBT Aging

Woolf (2000) et.al. have cited that myths and negative stereotypes abound in relation to LGBT aging. The image and negative stereotype of the older lesbian or gay man as unhappy, isolated and celibate, is not supported by the scientific evidence. Many studies have highlighted the range of diversity among the life courses and life experiences of older LGBT people. Research has demonstrated that there is no single normative older LGBT lifestyle. Rather, there existed a wide variety of life course trajectories and attitudes to aging that are influenced by gender identity, sexual orientation, coming out histories, marital status and friendship networks (Beeler, Herdt, & Rawls,1999; Heaphy, 2007).

Most studies, however, suggested that older LGBT people adjusted to aging more successfully than their non-LGBT counterparts (Bradford, Ryan, & Rothblum, 1994; Brotman et al. 2003 & Orel 2004). Kimmel (1979) coined the term ‘crisis competency’ to describe how the stress and challenges of the coming out process may buffer the LGBT person against later crises. Other theorists asserted that, in contrast to the older heterosexual population who have not previously come across active discrimination, LGBT people have become adept at dealing with prejudice, stigma and loss throughout their lifetime. As a

consequence, LGBT people have developed a range of coping mechanisms to deal with discriminatory experiences and environments (Woolf 2000; Jones & Nystrom 2002; Schope 2005). The participants in Jones and Nystrom's (2002) study viewed that the adversity and hardships they experienced have made them stronger. Similarly, Gabbay and Wahler (2002) found that the experience of repeatedly coming out fosters the development of adaptive coping strategies that help deal with the challenges of aging.

Identified strengths that LGBT people bring to the aging process include: well-developed coping skills; acceptance of diversity; creation of families of choice; and flexibility in gender roles (Berlin 2008; Burke, Dorfman, Hardin, Karanik, Raphael, Silverstein, & Walters, 1995; Healey 1994 & Jones 2001). In addition, researchers have reported higher levels of life satisfaction, greater flexibility in gender role definition, lower self-criticism and fewer psychosomatic problems among the LGBT population as compared to the older heterosexual population (Humphreys & Quam 1998; Barranti & Cohen 2000). Bryan, Carr, Kitching & Mayock, 2009). An Irish study suggested that resilience is something that develops over time, as opposed to being a trait possessed by some individuals and not others. They identified friends, family, LGBT communities, and school and workplace environments as key sources of social support in the development of resilience. Heaphy et al. (2004) are skeptical of an overwhelmingly positive picture of older LGBT coping and resilience, as in their view most of this research has been based on small samples or young (40-60 years) middle-class populations. They also asserted that too much emphasis in these studies has been placed upon personal coping mechanisms as the primary

determinant of “successful aging”, thus neglecting the influence of economic, material, physical, social and cultural factors on living as one ages.

The role of social supports has been a variable associated with the study of older LGBT people. Existing researches affirmed the view that older LGBT people have significantly less traditional forms of support when compared to the heterosexual older population. They are more likely to live alone, be no partnered, not have children, and to lack a family member to call on in a time of need (Brookdale Center on Aging of Hunter College and Senior Action in a Gay Environment 1999). It should be noted, however, that same-sex relationships and heterosexual relationships are not necessarily independent of each other. In a report by Herdt et al. (1999), about one-third of gay men over 55 and nearly half of lesbian women over 55 reported a previous marriage to a spouse of the opposite sex. LGBT people may also have biological children from heterosexual relationships, biological children from LGBT relationships and adopted children from both heterosexual and non-heterosexual relationships (Patterson, 2000).

In the context of accessing family support, the research indicated that older LGBT people’s relationships are more friend-based, rather than family-based (Cahill, South & Spade 2000; Grossman et al. 2000; Nystrom and Jones 2003). Cahill et al. (2000) found that older LGBT people tend to have stronger non-familial social networks than heterosexuals. These ‘friendship families’ (Dorfman et al. 1995) or ‘families of choice’ (Jones & Nystrom 2002), which could include current and previous partners and friends, were found to play a crucial role in providing care-giving and social support for older gay men and lesbian women (Kosberg & Kayne 1997; Weinstock 2000). McFarland and

Sanders (2003) highlighted the dependence on LGBT friends as a particular concern for older LGBT people, especially when the person is living in a small town or rural community, where the lack of visibility and networking among the LGBT community make the amount of social support available scarce. Other researches challenge the notion that family relationships are not sources of support for older lesbian and gay people. While describing the ways in which friends and 'families of choice' were often the primary sources of support, researchers have also found that family relationships can play a role in the support networks of older lesbian and gay people (Shippy et al. 2004; Richard & Hamilton-Brown 2006).

Another factor that contribute to the resiliency of older LGBT is the *Community involvement*. It can be defined as 'actions wherein older adults participate in activities of personal and public concern that are both individually life enriching and socially beneficial to the community' (Cullinane 2006: P.66). Reported benefits of community involvement for older people include: improved self-reported quality of life; increased self-reported health and functioning levels; a decrease in depression; and improved mortality rates for those who volunteer or engage with their community on a regular basis (Barry 2009; Cullinane 2006; Lum and Lightfoot 2005; Martison & Minkler 2006 & Putnam 2000;).

Studies have illustrated the importance of LGBT community organizations and networks, both formal and informal, for older LGBT people (Berger, 1984; Health & Mulligan 2008; Heaphy et al. 2004 & Richard & Hamilton-Brown 2006;). In many cases, these networks or organizations (which have often stemmed from strong friendship ties and a shared experiences of aging as an LGBT person) offered support, friendship,

resources, and a sense of community that can act as a 'buffer' against potential stigma and discrimination (Masini & Barrett 2006; Nystrom & Jones 2003; Richard & Hamilton Brown 2006).

Moreover, Baltes SOC model of Successful Aging included the **t**he selection, optimization and compensation (SOC) model, first presented by Baltes and Baltes (1990), provided a general theory for conceptualizing processes of successful development generally and in aging in particular (Li & Freund, 2005). The meta-model of SOC evaluated cognitive-motivational processes regulating human development across the life span and was originally designed and developed as an explanatory framework for adaptation to aging.

The key concept of SOC described a general *process of adaptation* that individuals are likely to engage in throughout life and is essential for the achievement of higher levels of functioning (Baltes & Baltes, 1990). The model took the global view that at all stages of human development individuals manage their lives successfully through the developmental regulation processes of selection, optimization, and compensation. Successful development involved the orchestration of these three processes (selection, optimization, and compensation) which in turn, regulate the maximization of gains and minimization of losses over time. Selection, optimization, and compensation can be conceived of as one single "integrative" process of adaptive mastery and also on a lower or more micro level of aggregation, the facets of SOC can be viewed as separate processes, each contributing to successful development (Freund & Baltes, 1998b).

Selection refers to an individual focusing attention on fewer, more important goals e.g. rescaling/reconstructing goals.

Optimization involves engaging in goal-directed actions and means; examples include investing time and energy into the acquisition, refinement and application of goal-relevant means, seizing the right moment, persistence, acquisition of new skills/resources, and practice of skills.

Compensation maintains a given level of functioning in the face of loss and decline in goal-relevant means by individuals investing in compensatory means.

These strategies acknowledge and address the declines and losses which occur; examples include modifying behaviors, the use of external aids (zimmer frame, tripod), and activating unused resources (e.g. help from others). Selection, optimization, and compensation can occur at various levels of analysis or integration ranging from the macro-level (e.g. societies) to the micro-level (e.g. biological cells) (Baltes & Freund, 2002).

Overall, the theory posited that across the life span, individuals further their development adaptively by maximizing their potential gains and minimizing losses.

SOC strategies have been measured experimentally in studies that involved dual-task performance or patterns of task priority (Freund, & Baltes, Li, & Lindenberger, 2001), qualitatively using content analysis (behavioral adaptation interview responses categorized as selection, optimization and compensation (Badley, Cott, & Gignac, 2002) and quantitatively using SOC measures: the SOC-12 (Baltes, Freund, & Lang, 1995) and the SOC-48 (Baltes, Freund, & Lang, 1999). Other quantitative versions of SOC measures

also exist within the literature e.g. SOC-15 (Donnellan, Hevey, Hickey, & O'Neill, 2012), SOC-36 (Chou & Chi, 2001) and SOC-9 (Gestsdottir & Lerner, 2007).

The empirical evidence for the use of the SOC model has mainly been applied in life-span developmental psychology, e.g., life management strategies in a general aging context (Freund & Baltes, 1998a, 2002) and in industrial-organizational psychology, e.g., life management strategies and human performance in a work place setting (Abraham & Hansson, 1995; Bajor & Baltes, 2003; Wiese, Freund, & Baltes, 2000, 2002). There is currently less empirical evidence of the use of SOC within the context of health-related conditions although the use of SOC as a theoretical framework has been applied in some instances (Collins & Smyer, 2006; Donnellan & O'Neill, 2014; Ireland & Arthur, 2006; Volicer & Simard, 2006).

Erik Erikson's' Stages of Psychosocial Development

Erikson's stages of psychosocial development are based on (and expand upon) Freud's psychosexual theory. Erikson proposed that we are motivated by the need to achieve competence in certain areas of our lives. According to psychosocial theory, we experience eight stages of development over our lifespan, from infancy through late adulthood. At each stage there is a crisis or task that we need to resolve. Successful completion of each developmental task resulted in a sense of competence and a healthy personality. Failure to master these tasks leads to feelings of inadequacy.

At each stage of psychosocial development, people are faced with a crisis that acts as a turning point in development. Successfully resolving the crisis leads to developing a psychological virtue that contributes to overall psychological well-being. At the integrity versus despair stage, the key conflict centers on questioning whether or not the individual has led a meaningful, satisfying life.

Integrity vs. Despair

This stage begins at approximately age 65 and ends at death. Psychologists, counselors, and nurses today use the concepts of Erikson's stages when providing care for aging patients (Giblin, 2011). He said that people in late adulthood reflect on their lives and feel either a sense of satisfaction or a sense of failure. People who feel proud of their accomplishments feel a sense of integrity, and they can look back on their lives with few regrets. However, people who are not successful at this stage may feel as if their life has been wasted. They focus on what "would have," "should have," and "could have" been. They face the end of their lives with feelings of bitterness, depression, and despair.

The integrity versus despair stage begins as the aging adult begins to tackle the problem of his or her mortality. The onset of this stage is often triggered by life events such as retirement, the loss of a spouse, the loss of friends and acquaintances, facing a terminal illness, and other changes to major roles in life (Hassevoort, Perry, Ruggiano, Shtompel, 2015).

During the integrity versus despair stage, people reflect back on the life they have lived and come away with either a sense of fulfillment from a life well lived or a sense of

regret and despair over a life misspent. Successfully resolving the crisis at this stage leads to the development of what Erikson referred to as ego integrity. People are able to look back at their life with a sense of contentment and face the end of life with a sense of wisdom and no regrets. (Perry et. al.,2015) Erikson defined this wisdom as an "informed and detached concern with life itself even in the face of death itself."

Those who feel proud of their accomplishments will feel a sense of integrity. Successfully completing this phase means looking back with few regrets and a general feeling of satisfaction. These individuals will attain wisdom, even when confronting death. (Perry et. al.,2015) Those who are unsuccessful during this phase will feel that their life has been wasted and will experience many regrets. The individual will be left with feelings of bitterness and despair.

Support for Aging LGBT

Mabey (2011 p.86) contended that the omission of LGBT elders in gerontological research "leaves professional counselors without a substantive bridge with which to connect resources with treatment planning when working with sexual minorities". Moreover, ageism as experienced in LGBT communities has the additional impact of making a marginalized and stigmatized group feel even more of a minority.

According to Barker et al., as cited in MAP AND SAGE (2010), the most common and most studied form of social support network among LGBT adults and LGBT older adults is "families of choice". Families of choice as defined by them refers to partners, friends, and other individuals such as neighbors, who are considered and act in place of

one's biological family. Many LGBT older adults, in particular, who left or were kicked out of home as youth often found support in large urban areas, among people like themselves (Barker, de Vries & Herdt,2006).

LGBT older adults turn to each other for the support that families were unable or unwilling to provide (Barker, de Vries & Herdt, 2006). A survey of 495 older adults in the Twin Cities Metropolitan area found that 75% of older LGBT people were reported of having a chosen family (Croghan et al., 2012). Another survey based in the Midwest found that LGBT older adults on average received more types of care from families of choice than from their biological families (Brennan-Ing et al., 2014).

In a study of older gay and bisexual men in New York City, among the 36% who were partnered, the majority (70%) were reported of relying on their partners for primary support (Brennan, Cantor, & Shippy, 2004). In the absence of a partner, about 40% were reported of counting on friends for support rather than any existing family, though not all friendships were functional in terms of providing instrumental and emotional support (Shippy et.al., 2004). Masini and Barrett (2008) also found LGBT adults who got support from friends rather than family reported better mental health and lower levels of depression.

Studies have found positive effects of social support among LGBT older adults (Barret, Dirkes, & Ramirez-Valles, 2014; Fredriksen-Goldsen et al, 2001; MAP AND SAGE, 2010). A larger number of people in one's social network is associated with better health (Benjamin, Kuhns, Ramirez-Valles, & Vasquez, 2014). Social support not only served as a function of support towards aging, but also in dealing with lifelong stigma and

discrimination of being LGB (D'Augelli & Grossman, 2001). Social support has been associated with better health outcomes (White et al., 2009), as a safeguard to stigma and effects of discrimination (D'Augelli, Grossman, Hershberger, & O'Connell, 2001; Silliman, 1986), better general health and higher quality of life (Fredriksen-Goldsen et al., 2015), and decreased depression and internalized stigma (Masini & Barrett, 2008).

Health services for LGBT older adults can be challenging as access and utilization of health services is complicated by fear of discrimination and poor treatment.

Researches on lesbian, gay, and bisexual (LGB) older adults show that seniors who have been "out of the closet" for a longer period of time experienced more victimization than those who are secretive of their sexual orientations for a longer period of time (Kimmel, 2014).

Motilla (2004) believes that loneliness experienced by gay and lesbian elderly may have been caused by the same factors that other hetero norm-conforming elderly experience such as death of a family member. Others say that LGBT elders receive the same amount of familial support that hetero norm-conforming persons do, but from different sources (Brennan, Cantor, & Shippy, 2004), often from friends or chosen family instead of or apart from members of their families of origin.

Some researchers argued that claiming that LGBT persons experience the same challenges that hetero norm-conforming persons do while aging renders them invisible, silencing their issues (Brotman, Ryan, & Meyer, 2006).

The policy research and literature on lesbian, gay, bisexual, and transgender (LGBT) aging dates back to 2000, though most policy reports on this subject were produced from 2010 to the present. In Outing Age: Public Policy Issues Affecting Gay, Lesbian, Bisexual, and Transgender Elders, the first in-depth policy report on LGBT elders, Cahill et al. (2000) outline a variety of political, social, and cultural challenges faced by LGBT older people, including the lack of LGBT-friendly social services, unequal treatment in safety net programs such as Medicaid and Medicare (among others), ongoing discrimination in housing and nursing homes, and a general lack of policies that protect LGBT people. They noted that ageism in the LGBT community coupled with heterosexism in the aging field has colluded to exclude the realities of LGBT older people from policy conversations on aging, long-term care, health, and LGBT rights.

Life-course and intersectionality approached to research would provide a more complete picture of the lived experiences of LGBT older adults (IOM, 2011). Though many life-course perspective studies have shown how historical and social contexts can affect LGBT older adults' health and general wellbeing (D'Augelli & Grossman, 2001; Fredriksen-Goldsen & Muraco, 2010), many gaps in knowledge remain. For example, little is known about chronic physical health, health outcomes measured through biomarkers, and cognitive health among LGBT older adults (Czaja, 2015).

Longitudinal studies could help fill this knowledge gap as researchers can identify patterns over time and connections between determinants and outcomes can be better examined. Studies that take an intersectionality approach are even less available among LGBT older adults. The lived experiences of LGBT older adults who live in rural areas,

are of different race/ethnicities, and are in lower socio-economic standing are particularly missing from the literature.

Finally, many areas studied in gerontology go unexamined among the LGBT older population. For example, little or no empirical research exists on family dynamics (older LGBT adults with children or grandchildren), caregiving patterns, workplace issues, bereavement and grief, cognitive health decline, mobility issues, chronic health issues, and program evaluations of health interventions among the LGBT older adult population.

While research is important to increase our knowledge and educate policy makers and other entities involved with LGBT older adults, policy and program initiatives can provide more immediate and direct support and change (MAP AND SAGE, 2010). One major policy need is raising awareness and increasing advocacy about LGBT older adult needs and issues among LGBT and older adult service agencies and communities. LGBT older adults are part of both communities, yet many remained unaware of their needs (MAP AND SAGE, 2010).

Education and advocacy can instigate individuals and groups to develop targeted social service programs for LGBT older adults, funding for research, programs, and data collection, and formalize advocacy groups to represent LGBT older adults at different levels of government (MAP AND SAGE, 2010). Bringing visibility to these issues can also signal to LGBT older adults that organizations are welcoming and aware of their needs (Brotman et al. 2003).

Unfortunately, research about LGBT elders is still underrepresented in gerontological literature, and representative samples of populations within that body of research are even more limited (Berger & Kelly, 2001; Butler, 2006; D'Augelli, Grossman & Hershberger, 2000; Jackson, et al., 2008; Kimmel, 2002; Quam & Whitford, 1992).

Sometimes an older adult individual in the LGBT community has difficulty coping with the stressors of homophobia and coming-out, and professional counselors might witness psychological distress or unhealthy behaviors.

Kimmel (2002) outlines suggestions that can be adapted by mental health professionals to enhance the development of crisis competency and combat maladaptive thoughts and behaviors with this population. The suggestions include: 1. To aid the client to discover any familial or peer support. 2. To identify positive role models locally or nationally that embody characteristics to which the client would aspire. 3. To practice the use of effective coping skills. 4. To assist in managing the integration of their multiple identities to enhance their sense of self.

As professional counselors continued to balance a scholar-practitioner role, increased research and experience with LGBT older adults and their aging will promote and elevate the counseling profession. It will also serve to enrich the lives of millions of LGBT older adults and their supporters. Both historically and in contemporary times, the counseling profession thrives as a fertile ground for pioneering and ground breaking research; LGBT aging represents a generally underexplored, but vital new challenge. Indeed, the dynamic and diverse nature of older adult LGBT communities provides

opportunity for expanding academic inquiry and new and innovative treatment modalities in the counseling profession. (Mabey, 2011)

Synthesis

The foregoing conceptual and research literature suggested several important points about the aging LGBT focusing mainly on gay and lesbian elders. The related literature gathered on the profile of the elderly LGBT came mostly from foreign resources. The only available data from our country were the data of the senior citizens in general. There were no data available pertaining to the special population LGBT elders.

The present study bears similarity with the studies cited in terms of issues and concerns of LGBT elders such as physical limitations due to old age, changes in socio economic status, financial stability, and stressors like resources of basic needs and non-issuance and inequality on giving of social pension. Basing on the result of the study, elder LGBT in other countries also encountered similar challenges as the LGBT elders in the Philippines.

However, the present study differs in terms of other areas such as harassment and isolation. These areas were not evident among the participants of this study. The result showed that participants were accepted and supported by their family. As a result, the participants were able to experience a meaningful life. They were able to achieve and accomplish their goals in life.

In the review of the literature, the resilience factors for successful aging of LGBT were apparent. This included a well developed coping skills, acceptance of their diversity, creation of "families of choice" and flexibility in gender roles.

The support for aging LGBT were deemed necessary so they could continue to practice meaningful and enjoyable aging experience.

Research Problems

The present study examined the life stories of rainbow elderly or Lesbian, Gay, Transgender and Bisexual (LGBT) specifically Lesbian and Gay elders, the study answered the following research questions:

1. What life challenges were faced by aging lesbian and gay elders?
2. How is Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair, shown or reflected on the life stories of the Lesbian and Gay elders?
3. What Community Support Program could be proposed for the LGBT elders?

Conceptual Framework

This study looked into the aging realities of gays and lesbians such as the challenges that they are facing. The researcher recognized that by looking into the aging experiences of gays and lesbians, there will be an understanding of their aging experience and will give information on the overall theme of their aging experiences, concerns related to aging, support needed as part of the minority and understudied individuals, and possible programs

/ interventions for aging gays and lesbians. Also, this study see how their life stories will reflect on the last stage of Psychosocial Theory of Erik Erikson's Integrity vs. Despair.

Wagenen, Driskel & Bradford, (2012) stated in their study that LGBT older adults formed part in the unique history of the LGBT community. They have witnessed the variety of social changes in relation to sexuality and gender identity concerns. Many LGBT elders have lived through the emergence of social exclusion, medicalization of homosexuality, the rise of gay liberation and lesbian feminist movements, emerging impact of HIV/AIDS, explosion of sexual and gender minority individualities, the stabilization of the movement and change towards civil rights, the increased visibility and incorporation of LGBT issues in social and political discourse among others.

Thus, it is believed that LGBT older adults have a distinct experience of aging stemming from shared experiences in relation to LGBT community, the lifelong process of coming out, the experience of sexual and gender minority stress, marginalization inside and outside LGBT community, and LGBT pride and resilience.

More so, while it may be observed that LGBT older adults have their distinct experience, many experiences of aging as an LGBT person may be unrelated to sexual or gender minority status. The challenges of aging, achieving well-being and happiness in older age, the experience of the body failing, the loss of friends and social networks, and adjustment to new social roles in retirement are common challenges experienced by people of all sexual orientations and gender identities. However, it may be hypothesized that LGBT older adults in a way may have different ways of facing aging. Thus, it is the

objective of this study to look into the challenges of aging among gay and lesbian elders, the aging experiences, and to gain an overall understanding of this population.

In this study, the gay and lesbian elders are treated holistically, and the researcher had explored on their challenges and experiences and discovered how these experiences relate to their sexual and gender orientation and on how these experiences related to the general processes of aging.

Fredriksen-Goldsen, (2015) in her study investigated how social, historical, and environmental contexts influence the health and well-being of LGBT older adults as scholars move forward in aging-related research, services, and policies. This also applies if scholars are to understand the realities of older adulthood across diverse and vulnerable communities. As such, the insights gleaned from this study among aging gays and lesbians can deepen our understanding of the richness, diversity, and resilience of lives across the life course.

On the other hand, the traditional theory of life span development by Erik Erikson's Stages of Psychosocial Development, 1950 offered general framework within which to understand issues and experiences common to persons in later stages of life (Hash & Rogers, 2013). A theory is a general statement, proposition, or hypothesis about a real situation that can be supported by evidence obtained through a scientific method. A theory explains in a proven way why something happens and offers guidance in explaining and responding to forgoing problems (Gratwick et al. 2014). Theory serves the function of providing practitioners a guide for behavior in very specific circumstances and making decisions.

Ego integrity versus despair is the eighth and final stage of Erik Erikson's stage theory of psychosocial development. This stage begins at approximately age 65 and ends at death. Erikson described ego integrity as "the acceptance of one's one and only life cycle as something that had to be" (1950, p. 268) and later as "a sense of coherence and wholeness" (1982, p. 65).

As lesbian and gay grow older (65+ yrs.) and become senior citizens, their productivity tends to slow down and explore life as a retired person. It is during this time that they contemplate their accomplishments and can develop integrity if they see themselves as leading a successful life.

Erik Erikson believed that if an individual see his/her life as unproductive, feel guilty about their past, or feel that they did not accomplish their life goals, they become dissatisfied with life and develop despair, often leading to depression and hopelessness.

Success in this stage will lead to the virtue of wisdom. Wisdom enables a person to look back on their life with a sense of closure and completeness, and also accept death without fear. Wise people are not characterized by a continuous state of ego integrity, but they experience both ego integrity and despair. Thus, late life is characterized by both integrity and despair as alternating states that need to be balanced.

The theory underscores the necessity of helping present and future professionals who understand differences among LGBT elders and the complex nature of identity and their psychosocial adjustment that affects their well-being.

As previously mentioned, the theory of Erikson (1950) and Levinson (1978, 1996) have foundational significance in explaining the psychological development of LGBT

elders. In Erikson's final stage of psychosocial development, Ego Integrity vs. Despair, older adults (age 65 and over) reflect upon and evaluate their lives. When confronted with loss, the older person must arrive at acceptance of his or her life or will fall into despair. The ability to accept one's life and self in the ego integrity stage may be more complicated for LGBT elders (Hash & Rogers 2013; Humphreys & Quam 1998). According to Humphreys and Quam, the social stigma experienced by LGBT elders can adversely affect how they view their identity and life. Despair can be influenced by the culmination of losses over a lifetime. Moreover, older LGBT adults may have struggled with development as reflected in earlier stages of Erikson's theory, which could impact developmental tasks during the final stage. Furthermore, this stage involves reflecting on one's life and either moving into feeling satisfied and happy with one's life or feeling a deep sense of regret. Success at these stages leads to feelings of wisdom, while failure results in regret, bitterness, and despair.

Through narrative life stories of aging lesbian and gay participants in this study, the researcher discovered that their stories reflected Erik Erikson's last stage of Psychosocial Development Theory specifically the last stage i.e. Integrity vs. Despair. The researcher came up with better understanding of the aging experience. In this study, the overall theme of the aging experiences, the concerns related to aging, the support needed as part of minority and understudied individuals, and possible programs/interventions were explored.

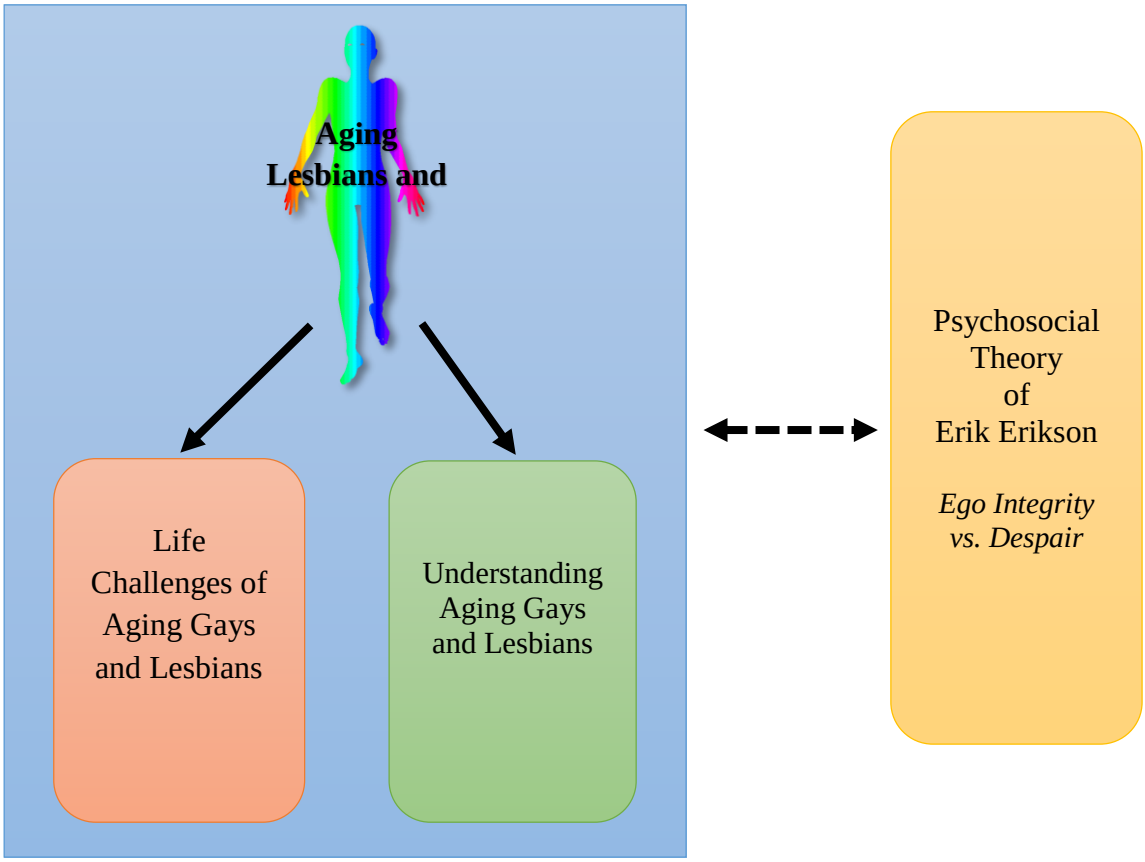

Figure 1. Conceptual Framework of the Study

Definition of Terms

Aging - refers to the physical and psychological changes that occur with maturation. While this term technically refers to the changes that occur at any stage of life, it is most commonly used to refer to the changes that occur in midlife and into old age. These include the physical and mental decline that normally occurs as a part of growing old': intellectual decline, loss of physical strength and dexterity, and health problems that are associated with aging (Psychology Glossary). In the current study, aging is a process into

the elderly years (aged 65 years and older) and as part of the inclusion criteria of the participants.

LGBT - stands for lesbian, gay, bisexual and transgender and along with heterosexual it describes people's sexual orientation or gender identity.

Lesbian **-** is a woman who is romantically, sexually and/or emotionally attracted to women. Many lesbians prefer to be called lesbian rather than gay.

Gay **-** is one who is romantically, sexually and/or emotionally attracted to men. The word gay can be used to refer generally to lesbian, gay and bisexual people, but many women prefer to be called lesbian. Most gay people don't like to be referred to as homosexual because of the negative historical associations with the word and because the word gay better reflects their identity.

Bisexual **-** is a person who is someone romantically, sexually and/or emotionally attracted to people of both sexes.

Transgender or Trans **-** is an umbrella term used to describe people whose gender identity (internal feeling of being male, female or transgender) and/or gender expression, differs from what is usually associated with their birth sex. Not everyone whose appearance or behavior is gender-atypical will be identified as a transgender person. Many transgender people live part-time or full-time in another gender. Transgender people can be identified as transsexual, transvestite or another gender identity. (Definitions adapted from More Than a Phase (Pobal, 2006), For a Better Understanding of Sexual Orientation (APA, 2008).

In the current study, self-confessed lesbians and gays were the target participants under 65 years of age or older; single or without partner during the interview; professionals and non-professionals, with part-time, full time and/or unemployed working status at the moment as part of the inclusion criteria of the participants.

Psychosocial Development Theory – is Erik Erikson's' theory that describes the impact of social experience across the whole lifespan. It consists of eight (8) developmental stages such as *Trust vs. Mistrust; Autonomy vs. Shame/Doubt; Initiative vs. Guilt; Industry vs. Inferiority; Identity vs. Role Confusion; Intimacy vs. Isolation; Generativity vs. Stagnation and Integrity vs. Despair*. (Erikson, E.H. Childhood and Society. (2nd ed.). New York: Norton; 1993). In the present study, the focus of the developmental stage is in ***integrity vs. despair*** (65 years and above) and an inclusion on the criteria of participants. At this point in development, older adults need to look back on life and feel a sense of fulfillment. Success at this stage leads to feelings of wisdom, while failure results in regret, bitterness, and despair.

Minority –minority is usually defined as a group of people with common interests or characteristics which distinguish them from the majority of the population of which they form a part or with whom they live in close proximity within a common political jurisdiction. In this present study, LGBTs specifically lesbians and gays were the target participants of the study who represent as members of the minority group (International Encyclopedia of the Social and Behavioral Sciences, 2001).

Families of choice, or 'friendship families'- could include current and previous partners and friends who were found to play a crucial role in providing care-giving and social support for older gay men and lesbian women (Kosberg and Kayne 1997; Weinstock 2000). In the present study, this refer to their non-biological families, non-familial social networks and organizations that the lesbian and gay serve as support system.

Rainbow - is a positive representation of LGBTQ community as a whole. The eight different colors of the rainbow represented togetherness, since LGBT people come in all races, ages and genders, and rainbows are both natural and beautiful. At the top was **hot pink**, which represented sex, **red** for life**, orange** for healing, **yellow** signifying sunlight, **green** for nature, **turquoise** to represent art, **indigo** for harmony, and finally **violet** at the bottom for spirit.

Support Program/s –is an act of kindness, assistance and/or set of activities and programs that support for an aging lesbian and gay elders to cater their needs to achieve a happy and successful aging.

CHAPTER II

PROCEDURES

Qualitative Design and Methodology

This study employed a qualitative methodology. According to Creswell (1994) qualitative study is defined as an inquiry process of understanding a social or human problem, based on building a complex, holistic picture, formed with words, reporting detailed views of informants, and conducted in a natural setting further it seeks to explore and understand the meaning individuals or groups ascribe to a social or human problem.

Specifically, this study used narrative approach. From a theoretical perspective, the life story is constructed from autobiographical memory, broadly defined as memory for our own experiences (Conway, Singer, & Tagini, 2004; Loftus & Fathi, 1985; Nelson & Fivush, 2004). As individuals, we experience a large number of events both in our everyday lives and over our lifetime (Davis & Burns, 1999; Heady & Wearing, 1989).

"Life stories do not simply reflect personality. They are personality, or more accurately, they are important parts of personality, along with other parts, like dispositional traits, goals, and values," writes Dan McAdams, a professor of psychology at Northwestern University, along with Erika Manczak, in an article for the APA Handbook of Personality and Social Psychology.

McAdams's life story model of identity (1985, 1993, 1996), which asserts that people living in modern societies provide their lives with unity and purpose by constructing internalized and evolving narratives of the self. Further, the McAdams Life Story interview

(McAdams, 1995) will be adapted to concentrate on the following question categories: life chapters, critical events, life challenges, influences on the life story, stories and the life story, alternative futures for the life story, personal ideology, and life themes. Within each category, the interview questions prompted participants to play the role of storyteller to provide narratives specific to their perceived pasts, presents, and futures. The structure of this interview protocol will serve the study's purpose because it prompted participants to provide narratives embedded with a strong sense of identity and purpose (McAdams, 2013).

In this study, in-depth interview served as a method to facilitate the gathering of life stories of the lesbian and gay elders with focus on their life's challenges. In-depth interviewing is a qualitative research technique that involves conducting intensive individual interviews with a small number of participants to explore their perspective on a particular experience, idea or situation. It is one of the common qualitative methods today and is useful in providing detailed information about an individual's thought, behaviors and other issues in depth. By using in-depth interview, the researcher raises questions to the interviewees, listens attentively to their responses and may ask follow-up questions and/or probing questions if necessary. To come up with an accurate narration of what life story should be given emphasis. Thus, their narration provides a detailed analysis of the rich descriptions of an individual's experiences that lead to possible explanations of a phenomenon (Maxwell, 2005).

Selection Criteria and the Participants

The present study comprised a total of twelve (12) participants; six (6) gays and six (6) lesbians who at the time of interviews were self-identified gays and lesbians. Originally, fourteen participants were purposively selected (seven gays and seven lesbians). However, one participant who agreed to join the study earlier on but decided to backed-out due to busy schedule and personal reasons. She also informed the researcher that she was not comfortable talking about her experiences. On the other hand, one participant was excluded by the researcher due to constatnt repetition of answers during the initial interview.

The participants were allowed to withdraw anytime from the study and the researcher respected their decision.

The participants were also chosen using purposeful sampling to ensure they will meet the inclusion and exclusion criteria. The inclusion criteria consisted of the following:

1. self-identified gay and lesbian;
2. must be 65 years of age or older;
3. single or without partner during the interview;
4. professionals and/or non-professionals; and
5. with part-time, full time and/or unemployed status during the interview.

The exclusion criteria of the participants composed of aging lesbian and gays who cannot articulate and/or verbalize their answers, feelings and emotions, inability to recall or remember some events and stories of their lives and with mental condition (e.g. Dementia/Alzheimer's Disease). The participant/s of the research are not relative or

friend/s of the researcher and that the researcher will not give financial or non-financial benefit in return of being favored of to facilitating the interview process.

The participants of the study were referred by the researcher's colleagues in the field of counseling profession, her former and present classmates, friends, and relatives.

The participants were interviewed in this study to understand how they conceptualized and described their aging experience. More so, a snowball sampling technique was used to capture the richness and detail (both commonalities and differences) regarding how the Lesbian and Gay elders in this study experienced aging.

Demographic Profile

Table 1 shows the demographic profile of the gay elder participants. Their ages ranges from 65 to 77 years old. The educational attainment of the gay participants are as follows: 1 is elementary graduate, 2 secondary level graduate, 1 college graduate and 2 Doctoral graduates. Of the 6 participants, 1 is a full time businessman, 1 is unemployed due to disability (blindness), 1 is a part-time professor, 1 is a part-time flower arranger, 1 is a practicing full time doctor, and 1 is a loteng agent. The source of their finances came from their pension and their part time/full time jobs. Only one received financial assistance from a church organization.

Table 1. Demographic Profile of Gay Elders

Pseudo-nym*	Age **	Address	Educational Attainment	Occupation	Employment Status	Source/s of Income
Luring	77	Bulacan	Elementary Graduate	Businessman	Full time	Business
Alda	72	Bulacan	High School Graduate	Unemployed	No work	Allowance from the organization
James	67	Manila	Doctoral Graduate	Professor	Part-time	Part-time and Pension
Kurne	67	Laguna	High School Graduate	Flower Arranger	Part-time	Part-time
Doc	66	Makati	Doctor of Medicine	Doctor	Runs own clinic	Full-time and Pension
Renee	65	Laguna	College Undergraduate	Loteng Agent	Part-time	Part-time

** Names are fictional to protect the identity of the respondents*
*** As of date of interview*

Table 2. Demographic Profile of Lesbian Elders

Pseudo-nym*	Age **	Address	Educational Attainment	Occupation	Employment Status	Source/s of Income
Dory	67	Bulacan	High School Graduate	Businesswoman	Full time	Business and pension
Eli	70	Paranaque	College Graduate	Unemployed	No work	Pension
Jane	67	Makati	Vocational Graduate	Massage Therapist	Part-time	Part-time
Lily	65	Bulacan	Elementary Graduate	Loteng Agent	Part-time	Part-time
Epong	69	Makati	High School Graduate	Unemployed	No work	Pension
Teng	66	Bulacan	Vocational Graduate	Businesswoman	Full time	Business and Pension

** Names are fictional to protect the identity of the respondents*
*** As of date of interview*

The demographic profile of the lesbian elder participants. Their age ranges from 65 to 70 years old. For their educational attainment, 1 is elementary graduate, 2 were secondary graduate, 2 vocational graduates and 1 college graduate. Their current occupation as of interview was two unemployed, two fulltime business woman, two with part-time jobs. Most of them relying on their pension and part-time/full time jobs for their finances.

Research Instrument

To collect the data needed for the study, a semi-structured interview guide questions was formulated by the researcher to elicit information needed for the purpose of the study. It is composed of 14 questions which were formulated based on the researchers' evaluation of related literature and studies. The questions were written in English but with Filipino translation considering that the participants are non-english speakers. The questions were formulated by the researcher so that the participants would spontaneously narrate stories about themselves, their experiences and challenges as an aging gay and lesbian individuals.

For the researcher to elicit the vital information needed, the participants were allowed to use the Filipino language so that they could express themselves fully and freely. A voice recorder was used to record the entire conversation between the participant and the researcher.

Furthermore, to ensure the quality and rightfulness of the questions, the said instrument was subjected for validation by four experts and professionals in the field of research and guidance and counseling. Each of them was given the form Validation of the

Research Instrument (Appendix B). The validators were asked to put a check mark whether the questions were acceptable, rejected and for revision. A particular column was provided for the comments and suggestions of the validator for the enhancement of the research instrument. After gathering all the validation forms from the experts, the researcher summarized the report. The summary of their comments and suggestions is presented in Appendix C.

Moreover, the semi-structured interview guide (see Appendix A) was piloted with a lesbian to determine the appropriateness of the instrument, the approximate time of the interviews, if the questions would elicit a conversation and look at the richness of data gathered in the instrument. Also, it gave the researcher an opportunity to practice the pacing of the questions. The participant in the pilot interview was qualified in the inclusion and exclusion criteria and willing to participate in the study but she was not included in the actual study.

Data Collection

In the data collection process, the researcher identified and recognized the kinds of data that would answer the research questions. Exploration of the life story narrative of aging LGBT, specifically the lesbians and gay elders, was the primary objective of the research question.

The life story narrative design was used in this study as it allowed the researcher to gather personal reflections of aging experiences. With this in mind, the in-depth interview method was used to collect the life story narrative data of the participants. Since an

interview of the participants could be comprised of sensitive questions, data distortion occured when the participants feared to tell the true story (Creswell, 2012). To help alleviate this problem, this study used interview.

Individual Interview - The interview method is best suited for this research inquiry, as well as the main method of data collection because it allowed the researcher to capture what was in the participants' minds. It enabled access to phenomena that could not be observed, such as thoughts, feelings, intentions, perspectives, experiences, and meanings (Patton, 1990).

An interview method does not only involve the design of interview questions. It also involves many procedures, including identifying interviewees who could best answer the questions, determining which type of interview is practical (telephone, focus group, or one-on-one interview), establishing a recording procedure, and designing the interview protocol (Creswell, 2013).

In addition to these interview processes, when conducting an interview, the researcher should also pay attention to the three levels of listening. The researcher should listen to what is being said, as well as the "inner voice" of the participants. The researcher should also filter out unguarded responses that are irrelevant, remain aware of the overall interview process, and be sensitive to nonverbal cues (Seidman, 2006).

Field notes refer to notes created by the researcher during the act of qualitative fieldwork to remember and record the behaviors, activities, events, and other features of an observation. Field notes are intended to be read by the researcher as evidence to produce meaning and an understanding of the culture, social situation, or phenomenon being

studied. The notes may constitute the whole data collected for a research study [e.g., an observational project] or contribute to it, such as when field notes supplement conventional interview data. This is widely recommended in qualitative research as means of documenting needed contextual information. (Schwandt, 2015)

In the search of determining and finding the data that would contribute in attaining the research purposes, the researcher applied for the approval of the ethics committee of Philippine Normal University to gather data for the life story narratives of aging lesbian and gay elders. (see Appendix D). Upon approval, a pool of candidates was created. A pool of candidates for interview using the following criteria: The present study comprised a total of twelve participants; six gays and six lesbians who at the time of interviews were self-identified gays and lesbians. Originally, fourteen (14) participants were purposively selected (seven (7) gays and seven (7) lesbians). However, one (1) participant agreed to join the study but decided to back out due to busy schedule and personal reasons. She informed the researcher that she was not comfortable talking about her experiences. On the other hand, another participant was excluded by the researcher due to constatnt repetition of answers during the initial interview.

Researcher asked and sent a personal invitation (Appendix G). Upon the approval of the participants. The researcher explained and conducted an initial interview to ensure that the participant understood the research procedure; provided an overview of the study; verified participants qualifications to be included in the study; clarified the interview process; obtained their consent form (see Appendix E); verified that the candidates did not

have difficulties articulating her experiences and to set interview dates. Subsequently, the full conduct of the study was done.

More so, in order to collect data for transcription, interviews were audio recorded. To secure confidentiality, all audio recordings from the interviews were kept in locked cabinet of the researcher. Audio recordings were destroyed after transcriptions were made, along all other data sources (i.e., transcriptions, informed consents, researcher process notes, data analysis documentation) at the end of the study.

Depending on the availability and preference of participants, the researcher set the date for a one-on-one, 40 minutes to 60 minutes' interview. This was done at the place convenient for each participant such as their house or a coffee shop near their residence, which was conducive for the conduct of the interview.

Before conducting the interview, the researcher reminded the participants about the statement on recording the interview in the consent form and asked the participants for their permission to record the interview digitally via an application in the researcher's cell phone. Also, the researcher reminded the participant that he/she could make a request to stop the interview at any time he/she could feel distress on the questions. The participant could withdraw at any time during the study.

Data Analysis

Data analysis was carried out using thematic analysis; and by looking for designs and themes as well as ruptures in the data. Thematic analysis was used to identify the themes, in example patterns in the data that are essential or interesting, and use these

themes to address the research or say something about a topic. It is more than simply summarizing the data; a good thematic analysis construes and makes sense of it.

In this study, the researcher completed all the interviews and transcription before analyzing the data to avoid imposing meaning from one interview onto the next interview (Seidman, 2006). The researcher begun the data analysis process by creating a profile for each participant to present participants in context (Seidman, 2006). Demographic data of all participants were combined into a descriptive statistical format. The data analyzed were from life story narrative told by the participants, which included transcription of words interviews. Data analysis in the study included transcribing, coding, and constructing life story narratives.

All the interview proceedings were transcribed verbatim by the researcher. Transcripts were evaluated several times to acquaint herself with the respective quotations and stories of the participants as a whole. Preliminary codes, impressions, meanings and possible themes were initially identified and noted. Respondents validation was likewise done. The researcher asked the participants to comment on the transcripts of the interview for modification and additions to ensure that they adequately reflect their life narratives on aging.

The researcher also produced a narrative written story of each of the participant which was derived from the interview transcripts. Each story presented the participants' narratives of themselves of how they grew up, the impacts and influences of their family acceptance, and their aging experience.

More so, the researcher sought the help of three independent judges who are Registered Guidance Counselors. All of them have prior experiences in the conduct of qualitative research studies. The judges met and brainstormed on the significant statements based on their individual coding. Statements agreed on by at least two judges were considered as significant statements.

Role of the Researcher

The researcher plays an important role in qualitative research methodology because the researcher is the primary data gatherer (Lincoln & Guba, 1985). Creswell (2013) noted the researcher is a "key instrument". In his words, the qualitative researchers gathered data through groping and investigating documents, observing behavior, and interviewing participants. An instrument maybe used but it is one designed by the researcher using open-ended questions. The researcher does not incline to use or depend on on questionnaires or instruments developed by other researchers. Since a researcher is a primary data collector, developing a bond with the participant becomes an inevitable task (Creswell, 2012, p. 502).

For this study, the researcher needed to relate to the participants' stories, established credibility with participants, and understood the context when interpreting the data. The researcher informed the participants of her background and introduced herself before the interview.

Collaboration between researcher and participants was also critical in collecting and analyzing narrative data (Creswell, 2012). The researcher needed to actively collaborate with the participants and carefully listened to their stories, not only in hoping

to make them feel their stories were significant and being heard (Creswell, 2012), but also to work with the participants to reduce the gap between the stories told and the narrative reported (Clandinin & Connelly, 2000).

Creswell (2012) cited that the researcher collaborates with the participants throughout the process of research from formulating the central phenomenon to deciding which types of field texts will yield helpful information to writing the final restored story of individual experiences

Also, the researcher needed to be cautious about the authenticity of the data. Data distortion may occur when the participants do not tell the real story for one or more reasons such as fear of telling the true story or simply because of memory errors (Creswell, 2012). The researcher's goal is to uncover stories told, but the researcher at the same time needs to be careful about the possibility of data distortion.

To establish a relationship with the participants so that they will provide authentic and truthful responses, the researcher has to set up an initial interview prior to the actual interview to have a casual conversation with the participant. During the initial interview in this currently study, the researcher explained the nature and objectives of the conduct of study, participants had the right or freedom not to answer questions during the actual interview if they feel distress on the questions, the right to withdraw at any time during the study, and the anonymity of their identities; and informed participants about the impact or the usefulness of the research findings to help the LGBT (lesbian, gay, bisexual and transgender) community.

Ethical Considerations

As previously mentioned, the study used one-on-one interviews or in-depth interview in the data collection process. Since the study involved human participants, researcher was required to have their proposals to be reviewed by their college's Research Ethics Committee. This ensures that human subjects are protected and that vulnerable populations are not involved (Creswell, 2009).

The researcher needed to see and or ponder what ethical issues might arise during the study and to strategize how these issues would be properly addressed. In order to protect the rights and welfare of the participants, the researcher was guided with the standards and procedures of the Research Ethics Committee of the Philippine Normal University in the conduct of the study.

The informed consent was reviewed and approved by the Research Ethics Committee of the Graduate Research of the University. The researcher informed her own participants verbally and/or in writing so that they would clearly understood the conduct of the interview and/ or study. Informed consent was obtained and explained to the participants, specifically on how the information coming from them were used and protected (Light, Singer, & Willett, 1990).

The research protocol, instrument, and communication materials were reviewed and approved by the Philippine Normal University Institutional Review Board Ethics on Research.

The participants' participation in the study could be seen as voluntarily and all information shared were treated with utmost confidentiality. The participants were identified using pseudonyms or aliases.

More so, in order to collect data for transcription, interviews were audio recorded. To secure confidentiality, all audio recordings from the interviews were kept in locked cabinet of the researcher. Audio recordings were destroyed after transcriptions were made. Correspondingly, all other data sources (i.e., transcriptions, informed consents, researcher process notes, data analysis documentation) was destroyed after the study ended.

Lastly, if the participant/s exhibited signs of distress because of the potentially emotional nature of the discussion, participants was provided with debriefing process and/ or be refer to a mental health community referral resources.

CHAPTER III

FINDINGS

This chapter presents the results of the study. These results are divided into three major sections addressing the three research problems presented in Chapter 1. A lot of quotes directly extracted from the verbatim transcriptions of the interviews are included to preserve and assure that the data remain factual as shared by the participants.

Section 1. Challenges faced by aging gay and lesbian elders

The first section contains the data that addressed the first research problem: *What life challenges were faced by the aging lesbian and gay elders?* The themes generated through thematic analysis were presented reflecting the following contexts: **health issue -** pertains to participants' current state of mind of not wanting to be sick and be taken care of by their relatives; **basic needs -** refers to their daily needs which includes food, shelter, clothing and medicine; **need for companionship -** is their longing for someone to take care of them and be with them in their aging aside from their family and relatives**; financial sustainability -** refers to the participants financial status and need for income to sustain their daily living; **fear of dependency -** refers to their fear of getting terrible illness and be a burden to the family for a longer period of time; and **support from the government -** refers to concerns of participants and their appeal to the government for additional benefits that will help them sustain their daily needs.

A. On Health Issues

Looking over the results, the experience of aging brought impact of health issue of gays and lesbians it could be gleaned because of the present situation that they are in. Most of them were living alone and the rest stayed with their family. They are afraid of getting sick or getting terrible illness that would mean them to be bed ridden and would require someone to take care of them full time. The thought of being a burden in terms of the time that they would take away or require from their family members as well as the finances that will incur makes them feel afraid to face their aging in an unhealthy state. Some of them were able to take care of their sick parents who were bed ridden for several years. Their first hand experience on taking care of a bed ridden patient made them aware of how difficult life would be if they will be in that situation. Both for the patient and the caregiver. It has been an eye opener and a precaution to them on what could possibly happen in the future should they be in that situation. With that thought in mind, some of the participants mentioned that one of their prayers were for their relatives to be healthy as they rely mainly on them. They stated that they prefer to die before any of their relatives.

Some are thankful of the current health status they enjoying and wished they could remain the same. The following accounts reflect the participants' view regarding health issue.

Luring, 77 years old, is living alone, but has a nephew acting as his caregiver who constantly visit and checked in him out from time to time. He was attacked by stroke thrice during which he had no companion to attend him. Because of that, he became conscious

on his health and he longed to have someone to take care of him regularly. He narrated that:

> *"Kaya nga po eh, ako nga na stroke na po ng tatlong beses. Katunayan di na ako nakakapagluto na dahil nga natatakot ako. Dalawang beses na po akong natumba dito. Ayaw ko po mag ano nang, baka mabuwal na naman ako."*
>
> (I had stroke three times already. The truth is I can no longer cook because I am afraid. I have stumbled twice here already. I don't want to; I might fall again.)

Meanwhile, Alda, 72 years old, is a resident of Bulacan since 2000. He had disability due to blindness in the left eye. Because of his disability he did not have any source of income and just relied on the allowance being given by the church organization that he had joined. He was not receiving pension from the local and national government. During his younger years, he spent his earnings on traveling, enjoyment with friends and other activities to the extent of failing to contribute even in social security system (SSS). He narrated that:

> *"Well, ang gusto kong mangyari sa akin ay dumating sana sa punto yung inaano kong cornea, kasi ano, kasi nakalinya na ako sa eyebank, tapos sa operation ko sa East Avenue. Magtwo two years na nga wala pa talaga yung ano, yung ano, yung donor. Kasi sabi sa East Avenue ay sa eyesbank, hindi lahat ng namamatay nagdodonate ng cornea, yun nga sa mga namatay nila, so kapag ikaw donor lang mag aantay ka. E hindi lang naman ako ang nakapila. Yun lang siguro ang makapagbibigay sa akin ang magkaroon ng liwanag sa mata ko, malinaw makakapagtrabaho na ako sa ibang pamamaraan."*
>
> (Well, what I would like to happen to me is when the time to come that the cornea that I. because. I am lined up already in the Eye Bank, then the operation will be at East Avenue. It has been two years now, but still there is no donor yet. East Avenue said that it's the Eyes Bank, not all dying person is willing to donate their cornea. They say that if you are donor receiver, you have to wait. I am not the only one lined up. That is the only chance that I can regain the vision of my eye. By then I can work in other places.)

James, 67 years old, is a retired professor. At the time of the interview, he is a part-time professor in an academic institution. He was able to provide for his family and helped his niece and nephews in their educational finances. He has an adopted daughter who was in grade 12 at the time of interview. His prayer is to stay healthy so that he could still provide for his daughter until she has a stable life on her own. According to him:

> "*Ang hiling ko lang a*y *bigyan pa ako ng panahon na sana ay makapagpatapos pa ako ng aking unica hija. She is my adopted child pero anak din sya ng pamangkin ko, ako na ang nagpalaki sa kanya simula pa lamang noong sanggol pa sya nasa akin na sya. Patuloy pa rin sana sa pagtuturo at paghahanap buhay hanggang able pa at matalas pa ang isip."*
>
> (My wish is that I be given more time so I could see my Unica Hija finish her studies. She is my adopted daughter but she is the daughter of my niece. We were together and took care of her since she was still a baby. I hope I can still continue to teach and work until I am able and still have a sharp mind.)

Doc, 66 years old from Makati City. He is a doctor by profession. He is an affiliate in one of the well-known hospitals in Manila. He said that he was contented on the life he had, experienced both the best and worst in life but continued to achieved his goals and ambitions for himself and his family. A person with a very positive outlook in life, being healthy individual was one of his priorities. He said that:

> "*Sa ngayon, masaya naman ang buhay. Yun nga lang at matanda na pero hija kalabaw lang ang tumatanda, tama ba ako?.Salamat sa Diyos, sinikap ko talagang maging healthy living na simula noong ako ay nag edad kwarenta, kung dati or noong ako ay bata pa bata pa maraming bisyo tulad ng alak, sigarilyo at pagkain ng masasarap… sa ngayon talagang strict na diet."*
>
> (Life is good nowadays. Only the carabao is getting old. Isn't it? Thank God. I strived so hard to be healthy since I reached forty. When I was younger, I used to have vices like liquor and cigarette and would often eat unhealthy food. I am in strict diet nowadays.)

Renee, 65 years old from Lumban Laguna, is currently living with his niece and nephews. He was relying on his pension and had a part-time job of being a loteng agent. He always prioritized the needs of his niece and nephews, most especially when it comes to health. He was praying that they be in good health at all the time because he was afraid that no one would take care of him and that he had no family of his own. According to him:

> "*Sana maging healthy pa ako, kinatatakutan ko e, sana mga pamangkin ko ay wag magkasakit. Sana kapag ka ano ay mauna na ako sa kanila. (tawang impit). Ayaw kong maunang ano. Basta gusto ko mauna ako sa kanila. Wala naman akong pamilya, kasi nga kapag sila ay maysakit, wala naman akong maitutulong. Wala akong trabaho. Kaya ayaw kong sila ay magkasakit. Basta mauna ako sa kanila."*
>
> (I wish I could still be healthy, I am afraid that my nephews and niece will not get sick. I hope that when time comes,that I will go first before them. (silent laugh). I want to go first before them. I don't have a family, if they will get sick, I can't give the any help. I don't have a job. That's why I don't want them to get sick. Whatever, I want to go first.)

In the case of lesbian participants, these are some of their verbatim transcriptions on health issue.

Dory, 67 years old from Bulacan, worked in Hong Kong as a domestic helper for twenty years. She lived alone in the house which she bought from her hard earned money by working abroad. It is her investment which consisted of a five door apartment and one commercial space. She was very cautious of her health and very afraid of getting sick. She said:

> "*Yung magkasakit ako. Na kayang wini wish ko nga pag nagkasakit sana kako't kung ako ay kukunin na ni Lord, sana wag na akong magpabigat pa sa pamilya ko Mostly mga sakit yung mga alagain. Na stroke. Yun ang ayaw ko. Dahil ayaw kong maranasan ng mga kapatid ko. Na alagaan pa nila ako. Kasi alam o yung hirap nga ng buhay. Yun ang takot ako na ganun ang mangyari sa akin din na magkasakit ako o wag naming mangyaring ganun. Yun yung fear ko talaga. Avoid yung mga*

pagkain katulad sa Pilipinas. Mga oily food. Yung maging aware ka sa mga kinakain mo. Sa mga liquors. Hindi pwedeng abusuhin sa lahat ng ano e. Sobrang matamis, sobrang maalat, sobrang oily. Vegetables, meat ganun!"

(That I will get sick. That is why my wish is that if the Lord will get me, I hope I will not be a burden to my family. Most of those who are sick are being taken care of. Stroke. That's what I do not like. I don't want my sibling to experience to take care of me. Because I know how hard life is. That is what I fear that it might happen to me or forbid that it will happen. That is my fear. I am avoiding foods here in the Philippines. Oily foods. That I should be aware of what I eat. In liquors. It cannot be abused. Too sweet, too salty, too oily. Vegetables, meat, like that!)

While, Eli, 70 years old from Makati City, used to work as an office staff in different companies. She is currently living with the family of her brother. She is relying on her pension for her medicine maintenance and daily needs. She fears of getting sick and be take care of by her own family. She stated:

"*Ang fear ko ay yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailanganin pa nila akong gastusan."*
(My fear is that I might got sick and that I will be a burden to my family. That I will have terminal illness or what and that they have to spend money for me.)

Jane, 67 years old who was residing in Makati City, has a son who was a product of her being a victim of rape. She was living separately from her son who had a family on his own. They were living separately due to privacy issues. She seldom asked for help except for extreme health cases that she could no longer bear. This is manifested in the following statement:

"*Yung minsan maysakit, may nararamdaman ako na masakit na masakit sa kanang tagiliran ng stomach ko. Natakot ako kasi, unang una pamilyado yung anak ko. E dahil nga sa pamilyado na, kailangan ko matutong mag isa. Natatakot. Nanduduon yung takot. Syempre nag iisa ka lang. Yung mga ganung insidente na emergeny. Pero tumatawag pa din ako, nagbabakasakali. Pero naghahati yung puso at isipan ko kasi iiwan nya mag- iina nya. Paano kung ma admit ako, kawawa nman yung mag iina, kaya, yun ang kinatatakutan ko.Yung wala akong kasama."*

(Sometimes when I am sick, I feel pain at the right side of my stomach. I am afraid because my son has a family. And because he has a family, I have to learn especially at times to learn to be alone. I am afraid. The fear is there. Of course because you are alone. Incidents like emergency. But I still call. Hoping. But my heart and mind is divided because he has to leave his family. What if I would be admitted, I pity his family. That is what I fear of that I don't have companion.)

Lily, 65 years old, was residing in Bulacan and living alone in the house she bought through hard labor. Her mother adopted her nephew and they raised him together. The nephew is now working abroad and helped her with her finances. She works as a part-time loteng agent and she also received monthly pension. Because she witnessed the agony of her mother who died due to old age, she did not want to undergo the same experience. She said:

"Magkasakit ako. Kunin ako ni Lord, pwede. Huwag lang patatagalin dahil kawawa ako kapag ako ay nahiga. Sa pag alaga ako sa nanay ko, ako nagdusa. Isipin mo limang taon nakahiga. Ako ang nag alaga. Inalagaan ko hanggang sa namatay."

(I got sick. The Lord will take me. But I hope he will not let me suffer for a long time because if I will be bed ridden, It will be pitiful. I took all the pain taking care of my bed ridden mother. I took care of her for five years. I took care of her till the day she died.)

Epong, 69 years old and living alone in a rented room, was retired MAPSA traffic enforcer in Makati City. She took pride on her previous job. It was the most precious memories she had in her life. According to her:

"Dasal lang ng dasal sa Panginoon na huwag sana akong magkasakit. Kakapit na lang kay Lord."

(Keep praying to the Lord that may I not be stricken with sickness. I will hold on to the Lord.)

B. On the Need for Companionship

Though some, if not all of the participants, have their families on their side in their aging process, some of them still yearned for a companion other than their relative/s to stay by their side. It was their desire to have someone who would closely stay with them through thick and thin. The following narratives reflect the participants' need for companionship:

Luring was a businessman. He used to have a carinderia. He managed to keep some of his investments that were now income generating for his personal needs. He never had financial problem. Infact, he worried a lot of his wealth that might be a cause of trouble to his family should he have passed away. His greatest regret was not having someone on his side to take care of him. He said;

> *"Kung alam ko lang ganito kahirap ang mag-isa, kahit po Chongo eh pinakasalan ko nuon."*
>
> (Should I have known that being alone would be this difficult, I would have married even a Chongo (monkey).)

Inspite of being with the family of his brother, Eli still yearned for a partner. She said that though she was being loved by her relatives, there was still sadness in her heart. She longed to have someone other than her family to be by her side. She said;

> *"May sadness sa heart ko. Di ko alam kung san nagmumula. Di ko alam kung dahil ba ito sa wala akong partner na kasama sa pagtanda ko. Isip ko kasi na mas mainam siguro kung meron man lang ako na kasama na nag-aalaga at nag mamahal sa akin maliban sa kadugo ko."*

(There is sadness in my heart. I can't figure out where it is coming from. I don't know if this is because I don't have partner now that I am older.I am thinking that it may be better if I, at least, have someone to take care and love me aside from my relatives.)

-ELI

Because Jane was living separately from his son and though she was seeing them everyday, she still thought of being in a relationship again. But she hesitates because of his son. She said;

"Pag nag-iisa naman, anduon pa rin yung pumapasok sa isipan ko yung, ano kaya kung mag-asawa na lang ulit ako. Pero umiiral pa rin yung nahihiya ako sa anak ko."

(Whenever alone, it runs in my mind, what if I get into relationship again? But I am thinking that it would be shameful for my son.)

-JANE

Dory regretted not having adopted a baby during her younger years. She said that she could have adopted even one so that she would at least have someone in her house. Her statement was;

"Baby hanggat maaari. So parang alangan na sa ngayon na kung mag adopt. Iyan yung baby. Yung maski isa man lang. Yun nga ang pinaka regret ko na sana nag adopt ako. Na, para may nakasama ako dito sa bahay."

(A baby if possible. It seems that adopting is not suitable anymore. That baby, just even one, That is my greatest regret. That I could have adopted someone. So that I could have someone with me in this house.)

-DORY

Lily, on the other hand, lived alone in the house she bought through her hard labor. She used to buy and sell bottles and metals in the street. Her siblings were visiting her once in a while to check her condition. They were also communicating using cellphone. But inspite all of their efforts, she is still thought of who will take care of her. She was motivated to earn and save more to compensate for that somebody who would take care of her. She said;

> *"Ah ayun! Ang problema yung mag aalaga. Yun ang problema ko. Hinahanap ko kung sino mag aalaga. Kaya kailangan ngayon pa makaipon na para kung makaipon ka may mag- aalaga sa yo."*
>
> (That's it! The problem is on who will take care of me. That is my problem. I am looking for someone to take care of me. That is why I need to save so that I could compensate whoever will take care of me.)
>
> -LILY

C. On Basic Need

In this study, basic needs refer to the daily needs of the participants to survive their daily existence which include food, shelter, clothing and medicine. The gathered data showed that majority of the gay and lesbian elders still hoped that they could still provide for themselves. It bothered them that their needs would be provided or shouldered by their family. What they had in mind is that they were still able given a chance.

For Alda, who was not receiving pension from the government and was not living with his family, he depended his daily needs from the people around him. He narrated:

> *"Pagdating sa umaga kung saan ako kakain, kung saan ako kukuha ng pagkain, saan ako hahanap ng pagkain. Lalabas ako araw-araw. Sa umaga paggising ko, minsan doon ako nag aalmusal, sa mga close friends ko. Minsan doon ako kumakain o kaya kung may pera ako bibili ako."*

(When morning comes, where I will eat, where do I get food, where do I look for food. I go out every day. When I wake up in the morning, sometimes I would eat breakfast there with my close friends. Sometimes I eat there or even buy if I have money.)

"Na katulad nito sa lugar naming na ito para bang iaabolish kami. Ang kapit ko sa Panginoon, na parang bigyan ako ng something to, na para bang magiging panuluyan ko."

(Just like this place of ours, it seems we will be abolished soon. I hold on to the Lord, that he may give me something to - that he will give me a place to stay.)

Kurne, a native of Lumban Laguna, was 67 years old who practiced his craft as a beautician, flower arranger and wardrobe designer for different images of the saints. He was living with niece and received pension from the local government. He also considered where to get his daily needs and he vented his fear over their dilapidated house. He was afraid that he and his family would be homeless soon because of the condition of their house. He stated:

"Yung mga pang araw-araw na buhay. Iyang when it comes sa pagkain, when it comes sa mga pansariling pangangailangan. Ang pangangailangan ko ay yung stable pa rin na pagkakakitaan"

(Those daily needs in life, when it comes to food, when it comes to personal needs. I need something stable to earn from.)

"Kasalukuyan ang kinakatakot ko lang talaga dito is yung nagiging itsura ng bahay naming. Napapbayaan na. Yang nagkakaroon na ng mga lamat, ng mga sira."

(At present, my only fear now is the condition of our house. It is not taken care of. It has cracks on the walls.)

"Baka dumating ang oras wala na kaming bahay"

(Time might come in which we may no longer have a place to live.)

-KURNE

Eli who used to work as office staff in different companies also expressed her concern with regards to her daily needs. She said that she would really like to have income of her own besides the pension that she was receiving. She said:

"Yung gusto ko na meron man lang akong source of income ko na masasabi ko sa sarili ko, na eto meron pa din naman akong pang sustain sa needs ko."

(I wish I could have a source of income so that I can tell myself that I can still sustain my needs.)

-ELI

Jane, a single mother, was living alone in a room being rented by his son. His son had a family of his own who just lived nearby. They were not living together because of privacy concerns. Jane said:

"Yung makakasama ko sa buhay pag tanda at yung pang araw-araw na gastusin."
(Someone I can be with as I grow older and daily expenses.)

(Wherein you can live with someone when you get old, and that youhave something to
spend daily.)

-JANE

Proud of her job before, Epong could not but help reminisce how good it felt to have a stable job. But because of her retirement and failed business, she became busy helping her friend for her to earn an amount to sustain her daily needs. She said:

> *"Pumupunta ako doon sa kaibigan ko kasi may tindahan sya. Yun nanghihingi sya ng tulong sa akin. Pumupunta ako sa kanya tinutulungan ko sya. Happy naman ako kasi ang daming kostomer. Ako taga abot. Tol, pakitinda ng ice. Ganun. Pang araw-araw na pangtawid sa pangangailangan."*
>
> (I go to my friend because she has a store. She asked help from me. I go to her and help her am happy because there are lots of customers. I give products like ice, like that, to provide for daily needs.)
>
> -EPONG

Teng at the time of interview was the president of an association in their purok. She lived with her mother who was then 86 years old. They were living in a property owned by their family. But inspite her age, she said:

> *"Ang iniisip ko lang talaga ay magkaroon ng sarili kong bahay."*
>
> (I had been thinking of owning my own house.)
>
> -TENG

D. On Financial Sustainability

Aging gays and lesbians still hoped for a way to have their own income to sustain their daily living. For them, it is important that they can still provide for their daily needs through a part-time or a full-time job. They tend to pity themselves thinking that they will

become totally dependent to their family. Specific accounts of this impact were yielded from the following narratives:

Alda could no longer work as before because of her disability. He used to be a beautician and a manicurist. His present condition stopped him from earning for himself. He was totally dependent to the mercy and kindheartedness of their neighborhood. Luckily, he was a member of a religious group which was financially supporting him. He narrated:

> *"Binibigyan akong 400, 300 pesos, yun pinagkakasya ko yun sa isang lingo…nanghihilot ako. Yung ano'ng uso. Ta's may magbibigay ng meryenda sa akin, kung anung pwede nilang ibigay sa akin."*
>
> (I am being given 400 pesos, 300 pesos. I used it to suffice my needs for the whole week. I massage. Whatever that is in. Then, someone gives me merienda or whatever it is that they can give me.)
>
> -ALDA

Being an educator as he was, James still continued to work as a part-time professor and was still practicing the noble profession he had chosen. He planned to teach as long as he was able. He contributed his optism as he said;

> *"Patuloy pa rin sa pagtuturo at paghahanap buhay hanggang able pa at matalas pa ang isip. Make the most of our lives and live life to the fullest"*
>
> (I still continue to teach and work until I am able and still have a sharp mind. Make the most of our lives and live life to the fullest.)
>
> -JAMES

Kurne stated that what he valued the most was his source of income. That he can still do the things he did before. He was glad that he can still provide for his daily needs. He said;

> *"Ang pinahahalagahan ko siyempre, yung mga pinagkakakitaan ko pa rin. Katulad ng nasabi ko na. Yaang pag gugupit, paggawa ng damit ng Poon. Yung mairaos ang mga pangangailangan sa araw-araw katulad ng pagkain"*
>
> (What I valued of course is my source of income. Like what I have said. Hair cutting, making dresses for the "Poon", I could at least provide for daily needs like food.)
>
> -KURNE

Renee admitted that he was not able to pursue college education. It was an offset for him. It was because of that reason that he could still working as a loteng agent. But he insisted that money is much needed by everybody. He said:

> *"Ako ay walang trabaho dahil ako ay di nakapagtapos ng college. Hanggang ganun na lang ako. Nagpapataya ng loteng."*
>
> (I don't have a job because I did not finish college. I will just be like this, a loteng agent.)
>
> *"Unang-una ang kailngan natin ay pera."*
>
> (First and foremost, what we need is money)
>
> -RENEE

Because Eli is living with the family of his brother, she had always wanted to find ways how she can have a source of income. She said;

"Ang kailangan ko sa ngayon eh magkaroon ako ng income para sa sarili ko. Para di naman ako magiging pabigat sa mga kapatid ko at pamangkin. Yung gusto ko meron man lang akong source of income ko na masabi ko sa sarili na eto meron pa din naman akong makakapag sustain ng needs ko."

(What I need now is to have an income on my own, so that I would not be a burden to my siblings and their children. I hope I can at least have source of income so I could tell myself that I still can sustain my needs.)

-ELI

Since Dory arrived home from being a domestic helper in Hong Kong, she had focused her attention to her investments, which were apartment units. She had the mindset that business should come first over luxury. She stated:

"Hindi ko wish na magkaroon ng- buti pa yung sasakyang pakikinabangan pang hanapbuhay. Hindi ika yung may kotse lang pang lakad lakad. Yun ang ano ko na pakikinabangan o maging hanapbuhay pa rin."

(I did not wish of- It is better to have a vehicle that can generate an income, rather than having car only to be used for luxurious trips. That's what I consider more important, having something for livelihood.)

-DORY

Epong never stopped working since 1973. She had the strong desire of working again saying that she didn't want to be unproductive. She would like to have a job or a store to keep her busy and to have an income for herself. She expressed that staying at home was really boring her. She narrated;

"Kailangan ko sa buhay ko makapagtrabaho. Kasi ayaw ko talagang magtatambay. Kasi mula nandito ako sa Manila 1973. Namamasukan ako. Wala akong palya na maghinto. Ngayon lang, nung magretired ako sa traffic."
(What I needed in my life was to work. I don't want to be unproductive. Since I arrived here in Manila in 1973, I started working. I never stopped working. Only now after retiring as a traffic enforcer.)

"Yung inaano ko talaga, yung ano, yung gusto ko magtinda. Para meron akong income araw-araw. Yan ang ano ko kaya wala pa naman akong regular na kita."

(What I really want to have a store for me to vend, so that I could have daily income. Besides, I do not have regular income.)

"Gusto ko na makaano, Gusto ko talaga na makapagtrabaho pa o tindahan. Kasi ang hirap ng wala kang trabaho. Maboboring ka sa buha.y"

(I have always wanted to have a job or to run a store. It is difficult to be jobless. It can maken you get bored in life.)

-EPONG

E. Fear of Dependency

The participants feared of dependency which refers to their worry of getting terrible illnesses and become a burden to the family for a long period of time. This comes from their thinking that their family and relatives had to suffer taking care of them. It could cause their relatives not just money, but their precious time. Five of the lesbian participants namely: Dory, Eli, Jane, Lily and Epong shared the same sentiments. Inspite of their psychological and spiritual preparedness to die, they still fear of totally leaning on their family, to cite:

"Lahat naman tayo mamamatay eh pinaghahandaan kong na hanggat maari. Kung mawala ako hindi na sila mabigatan pa na kumbaga kahit papaano may SSS, meron kang memo..ay yung ang tawag dun burial..."

(All of us will die anyway and I am preparing myself for it, as much as possible. When I pass away, they will no longer have problem, since I have my SSS and something to use for my burial.)

"Eh kahit papaano me, di na maging pabigat ako sa kanila. Na iyon naman, wish ko na wag na, kung ako kukunin kako ni Lord wag na magpabigat…huwag nang mahirapan mga kapatid ko or kung sino man makakapag alaga sa akin, kung meron.."

(At least, I will not be a burden to them. I wished that if the Lord will will finally take my soul, I would not be a burden to my siblings or whoever that will take care of me, if there is.)

-DORY

"Ang fear ko eh yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailanganin pa nila akong gastusan.Yun yung wag naman sanang mangyari .."

(My fear is that, if I will get sick and I would be a burden to my family. That I may get terminal illness or what and they would have to spend for me. I hope that would not happen.)

-ELI

"Pero hanggat kaya ko pa. Hanggang kaya dasal lang muna. Sasarilinin ko muna. Kapag hindi ko na kaya, saka ako humihingi ng tulong sa mga kapatid ko."

(But as long as I can, I resorted to praying. I would still keep it within myself. If I can no longer bear it, that is the time I would ask help from my siblings.)

-JANE

"Nag-iisa ako dito. Di ako natatakot. Si Lord lang ang kasama ko lagi."

(I am alone here. I am not afraid. The Lord is always with me.)

-LILY

"Okay naman kahit walang kasama sa buhay. Parang ano lang ako. Happy lang sa buhay. Kasi mahirap nman yung kukuha ka na ano sa kalooban mo. Mas magandang ikaw na mag-isa, magsolo."

(It is ok even if I don't have companion in life. It's just like being happy in life, because it is difficult getting something against your will. It is better to be alone, being solo.)

-EPONG

F. Support from the Government

This section reflected the concerns of the participants and their appeal to the local and national government for additional benefits and policies that would be of greater benefit to them. They stated that their perceived solutions as to how the government can better serve the elders in general. They were coming from their present experiences of having tight budget when it comes to their monthly pention. They said that it was not enough even just for their daily maintenance of medicines. Others even bursted out their feelings on inequality when it comes to the issuance of social pension.

Luring questioned the process of the social pention awarded by the municipality. He questioned why it is not given automatically to all senior citizens regardless of their varied financial situations. He narrated:

> *"Kasi po ang sabi ko nga sa inyo ang iniisip ko lang ngayon eh yung mga kung bakit sa senior citizen na isang libo isang buwan eh maibibigay naman ng automatic na ano eh kailangan pang mag file ka ng ganun. Eh pag nag file ka naman, o ano ika ang hanapbuhay mo? Eh di sasabihin mo siyempre lahat. Ah…eh kumikita ka naman pala ika eh! Ganun po ba yun? Bakit di nila ibigay? Akin yun."*
>
> ("Besides, just like what I told you, I am thinking of the rationale behind the filing of application for P1,000/month incentive which is suopposed to be given autonmatically to every Senior Citizen? When you file, they would ask you what your job is. Of course, you would openly say, yes,. Then, in turn, they'll tell you, you are still earning anyway. Is that how it is? Why don't they just give it? I deserve it.)
>
> -LURING

The same holds true with the case of Alda. Inspite of her disability, she was still not receiving social pension. She said:

> *"Sa gobyerno na may social pension hindi naman lahat dito pa pala, sa ibang lugar meron."*
>
> (In our government there is social pension and it is not given to everyone here. In other places there is.)
>
> *"Eh ang masasabi ko lang, kung ano man ang mabibigay sa akin na tulong. Kahit sa gobyerno e akin naming tatanggapin, masasabi ko lang na God's will."*
>
> (What I can say is that, whatever help comes my way, even if it's from the government, I will still accept it and would say it is God's will.)
>
> -ALDA

Meanwhile, Kurne pointed out that there was no non-government organization that supported for sudden needs of the senior citizens. He pointed out:

> *"Walang sumusuportang non-government organization na pwedeng ah.. sumuporta, tumulong pagdating nang bigla silang nangangailangan."*
>
> (There is no support from non-government organization that could help when it comes to sudden needs.)
>
> -KURNE

Renee applied for the social pension only this year. He explained that only those who are 65 years old are qualified and that the amount to receive is only P500 per month:

> *"Unang-una ang kailangan natin ay pera. Bale ngayon lang ako nag apply na nga ako ng senior sa munisipyo. Member na ako ng senior. Kapag ikaw daw ay 65 na saka ka makakareceive ng pension. Every three months pa yun. 500 pesos monthly. So every three months ay 1,500 pesos."*

(First of all, everyone needs money. It is only now that I applied for my senior benefits from the municipality. I am a member of th. senior citizenry. They said that if you reach 65 years old, it is only then that you can receive the pension. In three months you get 500 pesos monthly, so you get 1,500 pesos three months time.)

-RENEE

Meanwhile, Eli hoped for an increase in the pension amount. She stressed out that it does not suffice even just for her medical needs of a senior citizen. She was praying that someone from the government would propose that the maintenance medicine be given for free for the senior citizens. She was hoping that a livelihood project for the seniors be created. She also said that no specific group for LGBT elders were formed. She was hoping that an organization for the senior be created for their socialization. Her exact words were:

"Sana din may pagbabagong maganap pagdating sa pension naming mga senior. Sana lakihan naman kahit konti. Kasi sobrang di sapat sa pang maintenance pa lang ng mga gamot. O kaya sana dumaing yung panahon na may makaisip na awing libre ang gamut ng mga senior citizen. Kahit yung mga pang maintenance medicine man lang ."

(I hope there would be a change in the pension system of the seniors. I hope they would increase it even just a little. It is really not enough for the maintenance medicine alone. I also pray that a time will come when someone would think that all the medicines of the seniors would be given free, even just for the maintenance medicine.)

"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga senior. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun."

(I hope someone would think of providing livelihood projects for the seniors. They may be able to exercise at the same time their capacity to earn money for their daily needs. I hope an organization would propose that.)

"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga seniors. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun. Tapos yung sana eh meron ding mga association na mabuo para sa amin. Yung di lang puro daing ang mapag-uusapan. Yung meron ding socialization para sa mga senior."

(I hope they would think of providing livelihood projects for us seniors. So that, we could exercise our capacity, at the same time, to earn daily. I hope an organization would think of that. And also, they would create an organization for us, an organization that would not only talk of problems, an organization that also has socialization for senior.)

"Sa ngayon eh yung sa senior citizen lang ang alam ko. Yung sa balita sa TV na LGBT group eh parang puro sa mga bata nanduduon. Wala kaming para sa mga matatanda na gaya ko. Eh paano naman kaming sasabay sa mga bat sa LGBT?."

("As of the moment, it is only the senior citizen that I know of. In the television, the LGBT group seemed to be for the younger ones only. There was no group for the elders like me. How would I join the young LGBT member?.")

-ELI

Teng stressed out that not all senior citizens were given the social pension. She even proposed that there should be equality in the issuance of the social pension. She said further that the amount given is not enough to suffice for her medicine. She mentioned:

"Pero sana iniisip ko rin na yung mga senior citizen sana na magkaroon ng talagang suportang makukuha sa gobyerno. Kasi ang ano ko, bakit di lahat ng senior nagkakaroon ng pension? Sabihin ninyo yung mga pension na di pwede. Bakit yung iba may pension na meron pa rin. Pero sa totoo lang ang pension na natatanggap ng mga pensyonado ay hindi sapat. Lalo na kung ikaw ay maysakit. Kung ikaw ay may maintenance. Yung makukuha mo ay kulang pa dun sa nakukuha mo. Ang ano ko lang sana ay pantay pantay. Di yung isa meron, yung isa wala. Sana pantay pantay."

(I think and prayed that the seniors should have direct support from the government. Why don't all seniors have pension? The truth is that the pension given is not enough especially if you are sick. If you have maintenance medicine, what you get is not enough. What I hope for is equality.)

"Dapat pag senior eh bigyan nila ng pagpapahalaga."

(Senior citizen should be valued.)

-TENG

Table 3. Cross sectional analysis of the participants' challenges of aging

Participants	Health Issue	Basic Need	Need for Companionship	Financial Sustainability	Fear of dependency	Support for the Government
Luring	x		x			x
Alda	x	x		x		x
James	x			x		
Kurne		x		x		x
Doc	x	x				
Renee	x			x		x
Dory	x		x	x	x	
Eli	x	x	x	x	x	x
Jane	x	x	x		x	
Lily	x		x		x	
Epong	x	x		x	x	
Teng		x				x

As the table shows, ten participants expressed their health issues. Luring, Alda, James, Doc, Renee, Dory, Eli, Jane, Lily and Epong expressed their concern in health which include their fear of getting sick because it would incur financial expenses to the family or relatives that they are living with. No one would take care of them and they needed to sustain their maintenance and others.

Basic needs/issues were revealed by six participants: Alda, Kurne, Doc, Eli, Jane, Epong and Teng. They voiced out their needs to still sustain their daily necessities that included food, shelter, clothing and medicine. Alda, for one, admitted that everyday he does not know where to look for food. He asked for food from his neighborhood and from the church organization he belonged. He said that he was lucky enough that the church organization gave him money amounting to 300-400 pesos to spend for the rest of his week. He was also worried that their community might be abolished by a private organization.

Five participants confessed that there was a need for them to have a companion. Luring, Dory, Eli, Jane and Lily admittedly pronounced that they longed for someone aside from their family and relatives to take care of them in their aging years. Luring laughingly said that: *"Kung nalaman ko lang ganito kahirap ang mag-isa, kahit po Chongo eh pinakasalan ko nuon."* (Have I known that being alone would be this difficult, I could have married even a Chongo.)

On financial sustainability, seven participants admitted that they still wanted to have a job whether part time or full time to sustain their basic needs. Alda, James, Kurne, Renee, Dory, Eli and Epong mentioned that having an income was a big help for them to sufficed their daily necessities. James disclosed that he wanted to work as long as he could and as long as his mind is active. He still wanted to provide for his adopted daughter until she becomes stable.

Fearing of dependency, five participants comprised of Dory, Eli, Jane, Lily and Epong, revealed that they did not want to get terrible illness and become burden to their respective families for a long period of time. This is manifested in their statements, to cite:

"Ang fear ko eh yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailanganin pa nila akong gastusan. Yun yung wag naman sanang mangyari "

(My fear is that I might get sick and become a burden to my family. That I may get terminal illness or what and they have to spend for me. I hope that will not happen.)

and

"Eh kahit papaano me, di na maging pabigat ako sa kanila. Na iyon naman, wish ko na wag na, kung ako kukunin kako ni Lord wag na magpabigat…huwag nang mahirapan mga kapatid ko or kung sino man makakapag alaga sa akin, kung meron"
(At the very least, I will no longer be a burden to them. I wish that when the Lord already takes me, I will no longer be a a burden to my siblings or whoever who will take care of me, if there is.)

When it comes to support from the government, six participants namely; Luring, Alda, Kurne, Renee, Eli and Teng appealed to the government for additional benefits that would help them sustain their daily necessities. It was exhibited on the following narratives:

"Sana din may pagbabagong maganap pagdating sa pension naming mga senior. Sana lakihan naman kahit konti. Kasi sobrang di sapat sa pang maintenance pa lang ng mga gamot. O kaya sana dumaing yung panahon na may makaisip nag awing libre ang gamut ng mga senior citizen. Kahit yung mga pang maintenance medicine man lang ."

(I hope there would be a change in the pension system of the seniors. I hope they would increase it even for just a little. Because it was really not enough for the maintenance medicine alone. I prayed the time would come that someone would think that all the medicines of the senior will be given free. Even if the maintenance medicine only.")

"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga senior. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun."

("I hope they would think of providing livelihood projects for us seniors. That we can exercise and at the same time earn daily. I hope an organization would think of that. And also, they would create an organization for us. An organization that would not only talk of problems. An organization that has socialization for senior.")

Also,

"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga senior. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun. Tapos yung sana eh meron ding mga association na mabuo para sa amin. Yung di lang puro daing ang mapag-uusapan. Yung meron ding socialization para sa mga senior."

(I hope they would think of providing livelihood projects for us seniors. That we can exercise and at the same time earn daily. I hope an organization would think of that. And also, they would create an organization for us. An organization that will not only talk of problems. An organization that also has socialization for senior.)

"Sa ngayon eh yung sa senior citizen lang ang alam ko. Yung sa balita sa TV na LGBT group eh parang puro sa mga bata nanduduon. Wala kaming para sa mga matatanda na gaya ko. Eh paano naman kaming sasabay sa mga bat sa LGBT?."

("As of the moment it is only the senior citizen that I know of. In the television LGBT group seems to be for the young ones only. There is no group for the elders like me. How would I join the young LGBT member?")

Based on Table 3, among the twelve participants it was only Eli who had indicated to have all the six themes for the challenges for gay and lesbian elders.

Section 2. Gay and lesbian life stories as reflected on Erik Erikson's Psychosocial Developmental Stage Integrity vs. Despair

The second section comprised the data that addressed the second research problem: 2. *How is Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair, shown or reflected on the life stories of the Lesbian ang Gay elders?* The themes generated through thematic content analysis under integrity were family acceptance, affirmative

childhood, established self, self-worth and being positive and prayerful. While on despair, the theme emerged was regrets for what could have been.

Table 4. Summary of Gay and Lesbian Life Stories as reflected in Erik Erikson's Psychosocial Development Integrity vs. Despair

Themes	Theme definition
Family Acceptance	Refers to the support given to the participants regardless of their sexual orientation
Affirmative Childhood	Refers to a childhood which contains good memories and experiences
Established Self	Refers to the achievements and accomplishments of the participants in their chosen profession and chosen field
Self-Worth	Refers to the opportunity that the participants to give a part of themselves by giving either material, financial or their time towards their family and others not related by blood
Being Positive and Prayerful	Refers to participants' way of dealing with challenges in life and having faith to the omnipotent
Regrets for what could have been	Refers to participants' remorse over the things they can no longer change

The participants narrated how they discovered of their sexual preferences. Some came in early stage of their childhood and others during teenage years or only after they were able to experience feelings of admiration or falling in love towards the same gender. It was at that time when they realized that they were different from a regular boy or girl. Participants shared how close they were to their family members especially their mother

who accepted them for who they were. They epressed their greatfulness for not having experienced getting through tough times because of their sexual preference.

In the realization stage, family acceptance played a vital role in the growing up years of the participants. It was a point in their lives when they needed acceptance so they could fully show their true being. Without any hesitation or limitation because they have in mind that the very person that they looked up to was on their side. Most of them experienced to receive the same amount of love, support and respect from their family members. The acceptance of their parents and siblings had become their go signal to free themselves from any hesitations and restrictions. They expressed not having experienced humiliation, being bitten by their family members and discriminated. Participants narrated situations when their family members showed their acceptance by being supportive of them in their activities, passions, chosen sports and goals in life. They shared how their family never commented or reacted knowing of their sexual preference. They simply let them be themselves and supported them with their endeavors.

Family acceptance leads to affirmative childhood experience and it is very important to one's psychological growth. A positive childhood experience gives higher possibility of having a good self image and better perception towards situations and experiences.

The narratives of the participants demonstrated having an affirmative childhood. They narrated how they experienced being happy while they were freely playing games and sports that they prefered, remembered lingering happy memories with their family members, joining in singing contests, learning skills like manicure, pedicure and

cosmetology. They recalled having played games that is intended for the opposite sex. Like in the case of lesbians who were allowed to play physical games with boys and even allowed by their parents to wear boy's clothes. On the other hand, gay participants experienced freely joining beauty contests intended for girls.

Their experiences made a tremendous impact on their self image and was a great factor on their perceptions in life. It made them grow as an individual with good self-esteem. Their positive childhood experiences eventually lead them to establish themselves.

The establish self pertains to the achievements and accomplishments of the participants in their chosen professions and chosen fields. These are the things that they were proud of and how they had become as an individual. It also refers to their triumphs in life. Participants recounted how they finished their studies with the help of their family and securing a stabled job. Some recalled how they put up their own businesses, how they invested their hard earned money on properties like apartment and commercials spaces, piggery, and buying their own houses. Others said that they saved their earnings for today's use. Others took pride on their achievemenst on being a purok leader, awarded for commendable service rendered in their chosen profession, having survived many bosses until retirement and still practicing their craft to generate income for daily expenses.

Self-worth in this study refered to the opportunity of participants to give a part of themselves by giving either material, financial or their time towards their family and others not related by blood. It was a feeling that they had made something good out of themselves.

Participants recalled how they had been of help to their family members either by spending their time taking care of their relatives or giving financial help and sending their

niece and nephew to school. One participant shared how he provided shelter and took care of children not related to him by blood, send them to school and provided their basic needs. A gay participant expressed how he once had the opportunity to have a family of his own. He had a son and had the opportunity on sending him to school and providing for their needs. One lesbian participant shared how she endured being a rape victim and raising the child out of that incident. She single-handedly faced all the responsibilities on raising her son. She also helped in their family obligations when her mother battled cancer. One participant took care of her bed ridden mother for several years. They had given a part of themselves voluntarily and without hesitation by helping their family members or their chosen beneficiary of their goodwill.

Being positive and prayerful in this study refered to participant's way of dealing with challenges in life and having faith to the omnipotent. It is their manifestation of great faith to the Lord and leaving their fate into his hands. Their faith gave them positive outlooks and hope of what they would get to experience as they go along with life.

Their prayers were: more time to help others and support his daughter to earn degree in college; thanking God for having a good life and health; to be treated right; and leaving the rest of their life in God's hand and devoted time going to church and attending church activities. As they go on with life, they found it in themselves to trust fully on God. Two lesbian participants infact were living alone by themselves. They fear not of anything because they say that the Lord is with them everyday and that there is nothing to afraid of. They focus their minds with positive thought that usually evolved on their great faith to God.

Despair in this study refered to regrets for what could have been. This encompassed reflecting one's life and moving into feeling of profound sense of regrets and despair over misspent life. It is the participant's regrets for what could have been done to improve their quality of life in the present.

Participants expressed their deep regrets of not having saved money for their future, being alone and did not marry to have a companion, never paid any contribution to Social Security System (SSS) when they were still working, did not finish college, did not adopt a child or baby, also Eli mentioned that time was no longer on her side and that she can no longer do anything to change her situation for the better. These are the things that they lack as of the time.

Their present situation of being alone in the house that they provided for themselves, their yearning for a partner or companion to stay by their side aside from their relatives and their desire to still earn money for their daily expenses were the things that they could have done something about on their younger years. These are the things that they would like to cope up with. They intend to still get it done or achieved so long that they can still be able to accomplish it. Especially to able participants who still has the will to earn or provide for their daily living.

Section 3. Community Support Program for LGBT elders

The third section contains the data that address the research problem: *What community support program could be provided to the LGBT elders?* In answering this research problem, the researcher considered the results of the two previous questions on the challenges of the aging gay and lesbian and how do their life stories reflect Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair in coming up with a support program for gay and lesbian elders.

SENIOR LGBT GROUP

Introduction

LGBT elders are confronted with the challenges of aging. They are facing array of unique barriers and disparities that can stand in the way of a healthy and rewarding later life. The additional challenges to successful aging faced by LGBT elders are gaining visibility with the aging of LGBT Baby Boomers, who are the first generation of LGBT people to have lived openly gay or lesbian. These groups were the participants of the study.

After carefully looking at the results and in response to the challenge of helping the aging gay and lesbian elders, it is necessary to provide a community support program that will deliver activities and services to them. This includes a possible creation of an organization in coordination with the different community such as municipalities, barangays and other support group for LGBT. Also, some responsive psychoeducation activities, and/or programs that designed to meet the needs of the aging gays and lesbians.

Mental health and health professionals and counseling services specially tailored or especially friendly towards the LGBT community should be at least available in the community. Sullivan suggested creating a "safe space" for LGBT clients. This is also echoed by the American Psychiatric Association: which says "Psychological service providers and care givers for older adults need to be sensitive to the histories and concerns of LGBT people and to be open-minded, affirming and supportive towards LGBT older adults to ensure accessible, competent, quality care. Care givers for LGBT people may themselves face unique challenges including accessing in formation and isolation." ("Lesbian, Gay…" 2014)

Fredriksen-Goldsen et al (2013) and Harley – Gassaway – Dunkley (2016) cited in their studies that the feeling of being supported helps to tackle loneliness and has positive effects on overall psychological health of older LGBT adults. Clearly social support plays a central role for their welfare, and therefore endorsing opportunities for acquiring that support is essential. It has been established that the size of social networks and the amount of support it enables can help to protect LGBT older adults from poor health, disability, and even depression.

Moreover, Bradford et al., (2016); Lottmann – Castro Varela (2016) & Westwood (2015); also mentioned that facilitating network building and providing opportunities for meeting new people by organizing social activities is a common approach and it is an important factor in the proximity to social support and assistance from friends. These approaches allow building on the strength of existing networks and communities.

In their example, older lesbians are keen on living in a manner that allows them to take part in an LGBT-friendly social network. This network can often be their main source of friendship, emotional support, and strength. Additionally, it can provide resilience, help to battle loneliness and feelings of isolation, which are common not only for older lesbians, but for older people in general. Therefore, the wish to age in their current community is only understandable. This is according to Bradford et al (2016). One way to support this embeddedness is of course to initiate different projects, which build on the resources that activist, volunteers, or organizations have to give to their aging LGBT neighbours or community members.

A creation of senior LGBT community support group for aging LGBT will assist in facing challenges along with aging. It can provide resilience, source of strength, develop social network, friendship and emotional support aside from their family. As frequently mentioned theme among the gay and lesbian participants, they are not aware of any support group who will cater their needs. This inferred the importance of community for them. As all of them are unmarried, most of them live alone and having fear on health and become a burden to their family. For gay and lesbian participants, having a strong sense of community were important. The support group makes coping with difficult situations less stressful and more social opportunities for them.

Community support program on livelihood, financial sustainability and psychoeducational programs/activity will address the results derived concerning the areas of despair among participants. On the contrary, community support program for those who

had shown integrity will focus on enhancement activities such as socialization for the purpose of sustaining if not increasing the current satisfactory status that they are enjoying.

Program Structure

A. Program Objectives

The Senior LGBT Group objective is to maintain the sense of community the LGBT seniors need, the facility can also act as a preventive measure by having livelihood programs for financial suatainability and social events scheduled regularly for abled senior LGBT which may encourage a sense of communal togetherness. Specifically, they will be able to:

1. understand themselves and the processes they are going through;
2. learn adoptive coping mechanism in dealing with stress along with their aging process;
3. appreciate their sense of worth as individual persons with unique capabilities
4. develop social network, friendship and emotional support from the group or community they belong and;
5. to provide livelihood programs which can generate income for financial sustainability

B. Program Domains

The Senior LGBT Group will give direction by helping the LGBT elders to acquire knowledge, attitudes, strategies, income and skills in the following program domains:

- Personal – to understand and appreciate their self-worth as a unique individual
- Social – to strengthen and affirm social network, develop friendship and social support from the group
- Emotional – to learn adoptive coping mechanism and manage unwanted feelings in dealing with stress along with their aging process
- Physical – to provide physical fitness activities to enhance physical well-being
- Financial – to provide livelihood programs/projects that will be beneficial to LGBT elders for financial sustainability

C. Program Characteristics

The following were the essential characteristics of the program:

1. It is a psychoeducational in nature wherein it provides therapeutic activities for LGBT seniors. This offers information and support to better understand their aging experiences and/or processes they are going through
2. It includes attainable and measurable outcomes in line with the different domains: personal, social, emotional domain, physical and financial.

3. It is designed and developed as a program for LGBT elders which involves responsive activities for achieving quality of life inspite of their age. Designed activity such as cultural gatherings, physical fitness activities, livelihood programs and spiritual meetings in an open and accepting setting or venue. Social activities are not limited to any one type only but the focus is on the openness and acceptance of the group in a social setting.
4. In the absence of a full time registered guidance counselor in the community and/or barangay, implementation of the program could be done by other mental health professionals such as: psychometrician, social worker and health volunteers from the community. Barangay volunteers from the community can also be trained by health professional and social workers to equip them with knowledge and skills needed to implement program in the barangay or purok level. Trained barangay volunteers are expected to be proactive and in constant communication/contact to the senior LGBT group.

Program Design and Implementation

Developing a program is a dynamic and on going process. The goal of the program is to make sure that it is appropriate, efficient and effective based on the needs of the group. Planning, assessment, implementation and evaluation were part of the program development.

In Senior LGBT Group, program initiation, needs assessment, identification of resources and/or funds, creation of program activities, implementation of the program

activities and evaluation of the program are necessary in the success of the program. The steps are shown in Figure 2.

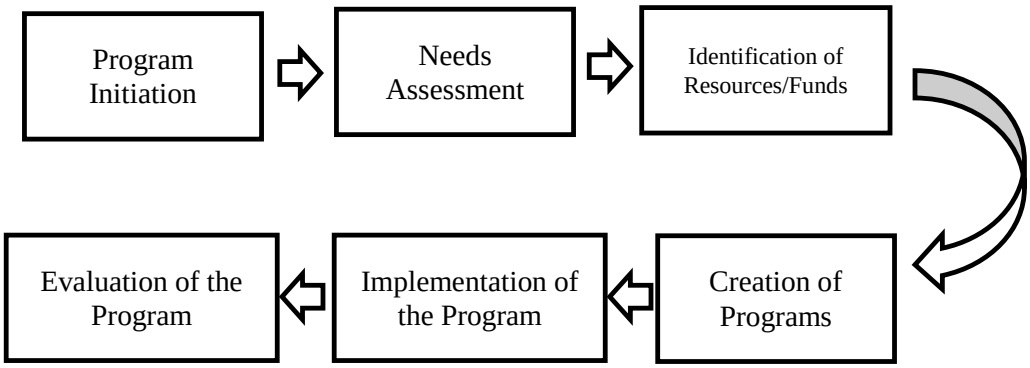

Figure 2. Steps in the development and implementation of Senior LGBT Group

In *Program Initiation Stage*, it is important that the program developer initiates to meet the agency, community or barangay officials to coordinate and discuss the proposal on the program activities for senior LGBT. It is important that the agency be aware of the program preliminaries, flow and the objectives of the program. *Needs Assessment* is the major source of information as to what activities will be included in the program. The results of the study of the researcher served as the needs assessment to come up with a senior LGBT support program. All program activities to be implemented was based on the theme mentioned by the participants which included: health issues, basic and financial sustainability concern, need for companionship, fear of dependency and support from the local and national government. Moreover, results from the research problem 2 generated family acceptance, affirmative childhood, established self, self-worth and being positive and prayerful. This served as the basis for creation of program to be implemented.

Meanwhile, in *identification of resources and funds*, for the program to be implemented, budgetary and support services are needed. This is very important, senior LGBT support program cannot be delivered without sufficient funds for the activities and materials. Budget will come from the local municipalities and barangays therefore identification of available or allocated budget from the specific activities must be determined. Also, support services includes were mental health professionals such as psychologist, social workers, guidance counselors and volunteers from the community health workers and barangay volunteers.

Creation of Program pertains to different activities and or programs beneficial for the group. It comprised objectives, target goals, target population and venue, materials, supplies and human resources needed, activities to be implemented or the delivery process, expected outcomes, and evaluation to distinguish if the target outcomes/goals were achieved. *Implementation of the program* is the phase in which the program is carried out. Whatever has been planned, after having been communicated to the parties and/or persons concerned, it must be acted upon. Monitoring will help to determine whether the program is contextually suited and effective (Villar, 2009).

To reach accountability, *program evaluation* is needed concerning the nature, structure, organization and implementation of program activities, the individuals who are executing and or implementing the programs; and the impact of the program are having on the participants of the program. Thus, the programs need to be come up from three perspectives: program evaluation, personnel evaluation and results evaluation. It is very

important that the program developer know how to design, create or plan implement and evaluate the program activity.

To determine the benefits of the program to senior LGBT elders the following were deemed necessary to consider:

1. determine the positive impact of the activities on senior LGBT;
2. identify the needs and concerns which are not fully addressed by the program;
3. gather additional information in designing new programs and activities that would catered their emerging needs; and
4. enhance the activities to further addressed the senior LGBT needs.

CHAPTER IV

DISCUSSION

This chapter presents the discussion of the significant results of the study. The first part discusses challenges of aging gays and lesbians. Also, the generated themes through thematic analysis pertaining to challenges with regards to health issues, basic needs, need for companionship, financial sustainability, fear of dependency, and governmental support for aging LGBT. The second part discusses the life stories of the gays and lesbian participants reflecting Erik Eriksons's Psychosocial Developmental Stage, i.e. Integrity vs. Despair. The last and third part discusses about the impact of the study on the community which may be provided to the gay and lesbian elders. Discussion in this part includes program structure, program design, implementation and evaluation. This program may be provided in a timely manner to the aging LGBT community which may help them in overcoming the challenges that they have cited.

What life challenges were faced by the aging lesbian and gay elders?

Many studies have investigated the challenges the LGBT community has faced over the years. Furthermore, homosexuality was categorized as a mental illness not until 1992.This has lead to further challenges on the part of the LGBT community. Thankfully, it was removed from the International Classification of Diseases (World Health Organization 1992). However, the LGBT community continued to face challenges especially that of the LGBT elderly.

Aging LGBT elders are confronting different challenges. This study has generated themes through thematic analysis the challenges of aging gays and lesbians and it is presented reflecting the following contexts: health issues pertains to participants' current state of mind of not wanting to be sick and be taken care of by their relatives; basic needs refers to their daily needs which includes food, shelter, clothing and medicine; need for companionship is their longing for someone who will take care of them and be with them in their aging aside from their family and relatives; financial sustainability refers to the participants financial status and need for income to sustain their daily living; fear of dependency refers to their fear of getting terrible illness and be a burden to the family for a certain span of time; and support from government refers to the concerns of participants and their appeal to the government for additional benefits that will help them sustain their daily needs.

In the context of ***health issues***, the participants of this study have enumerated concerns with regards to the present situation that they are in. Looking over the results, it could be gleaned that the experience of aging brought impact on the health issue of gays and lesbians, that is, they are afraid of getting sick. Some are thankful of their current health status and wished they could remain the same, while others have suffered from various kinds of illnesses which made them think of health issues as a challenge. The participants of the study tend to be cautious of their health and had worries of who will take care of them while they are sick or if they get sick. Some participants even tried to endure physical manifestations of illnesses for fear of not having enough money to spend for health related needs, and not having someone who would take care of them.

In the narratives of Luring, Alda, James, Doc, Renee, Dory, Eli, Jane, Lily and Epong, for example, they expressed their concern in health which included their fear of getting sick as it will incur financial expenses to the family or relatives that they are living with. No one will take care of them and they need to sustain their maintenance medicines and others.

Findings in relation to health of the gay and lesbian elders reflects a similar study by Wallace et.al. (2001) who stated that among LGBT elder findings proper access to healthcare is very hard. That is why some gay and lesbian in this study are afraid of getting sick and they fear of not having enough money to sustain for their health related issues. On the other hand, Fredriksen-Goldsen et al. (2013) noted that LGBT elders have equal access to healthcare as compared to heterosexual however they are facing financial difficulties as to heterosexual group when it comes to securing health insurance.

Consequently, based on the narratives of the four participants of the study they tend to be cautious and doing all means possible to take care of their health and had worries of who will take care of them while they are sick or if they get sick. In the similar study by Brotman et al. (2003) Beckerman, Sherman and Stein, (2010) they assumed that health services for LGBT older adults can be challenging as access and utilization of health services is complicated by fear of discrimination and poor treatment. Also, fear and anxiety that LGBT older adults feel toward health care is further aggravated in situations in which long-term care or advanced care is needed

In this study, ***basic needs*** refer to the daily needs of the participants to survive which include food, shelter, clothing and medicine. The gathered data showed that majority of the

gay and lesbian elders still hoped that they can still provide for themselves. It bothers them that their needs would be provided or shouldered by their family. Some participants thought that if they were given a chance, they still wanted to earn for themselves to provide for their personal needs. Some of the participants have shared that they have been dependent on the people around them for their basic needs. For some, although they receive funds from their pension / retirement, they still have fears because of the situation of their house and not having enough for their daily needs. For some, they have continued to work various jobs to make ends meet and to be able to somehow help their families despite their age.

Basic needs issues were revealed by six participants: Alda, Kurne, Doc, Eli, Jane, Epong and Teng. They voiced out their needs to still sustain their daily necessities that includes food, shelter, clothing and medicine. Alda admitted that everyday he did not know where to find his food. He asked for food at times from his neighborhood and to the church organization he belonged. He said that he was lucky enough that the church organization was giving him money amounting to Php300-Php400 pesos to spend for the rest of his week. He was also worried that their community would be abolished by a private organization.

Based on the cases of participants Alda, Renee, Miles and Ely, who were all relying mainly to their relatives when it comes to their shelter, the findings of Equal Rights Center (2014) and MAP AND SAGE, (2010) that housing is the primary concern of the LGBT elders because of their limited income opportunities and the continuity to the social support they need is factual. As narrated by participant Renee, he was feeling sense of security and hopefulness as he was staying in the house of his nephews/nieces. For him, having taken

care of them since they were young was an assurance that they would never turn their backs on him should the time come that he would be needing their help. Staying in the house of his relatives was the safest place for him to live.

Though some, if not all of the participants had their families on their side in their aging process, some of them still yearned for a companion other than their relative/s to stay by their side. It was their desire to have someone who would closely stay with them through thick and thin. This study has gathered narratives reflecting the participants' ***need for companionship***. Some of the participants in this study had shared that one of their fears or regrets is not having someone by their side who would take care of them. Some, regardless of how successful they were, still yearned for a partner and feels sadness in their hearts because they long for someone other than their family to be with. For others, they had thought of regrets for not adopting a child. Although some of the participants had their family and/or relatives with them, they still had the longing for a companion at their old age.

Five participants confessed that there was a need for them to have a companion. Luring, Dory, Eli, Jane and Lily admwould will take care of them in the process of their aging. Luring laughingly said that: *"Kung alam ko lang na ganito kahirap ang mag-isa, kahit po Chongo eh pinakasalan ko nuon."* (Had I known that being alone like this will be this difficult, I would have married even a Chongo.)

In the survey conducted by Fredriksen - Goldsen, K. et al., they mentioned that 60% of LGBT elders with feeling of lack of companionship and over 50% with isolation feeling with others. These findings hold true to the narratives of Ely, Kurne, Luring and Miles

who openly expressed their longing for someone to be with them in their process of aging. It contradicted the findings of MAP and Sage (2010) and Wallace, et al. (2011), where they found that a higher proportion of LGBT older adults are single or tend to live alone compared to heterosexual elders.

Moreover, the aging gays and lesbians in this study still hoped for a way of having their own income to sustain their daily living. For them, it is still important that they can provide for their daily needs through a part-time or a full-time job. They tend to pity themselves thinking that they will become totally dependent to their family. For some, because of their disabilities / illnesses, they depend on others for their basic needs. For others, despite their age, they continued working part time to earn money for ***financial sustainability*** and feels a sense of accomplishment when they can still provide or help their families. Some of the participants had prepared for retirement by buying investments or putting up a small business to continue earning money for themselves and their families.

Based on the narratives of the seven participants in the study, it is apparent that they still want to have a job whether part time or full time to sustain their basic needs. Alda, James, Kurne, Renee, Dory, Eli and Epong mentioned that having an income would be of big help for them to suffice for their daily necessities. James disclosed that he would still intend to work until he was able. He was determined to provide for his adopted daughter until gets stable. The above narratives echoed the study of de Vries (2009) as cited in MAP AND SAGE (2010) that LGBT older adult worry about financial stability as they age.

Participants ***fear of dependency*** refers to their worry of getting terrible illness and be a burden to the family for a long period of time. This comes from their thinking that

their family and relatives had to suffer taking care of them. Thus, it will cause their relatives not just money but their precious time. Five of the lesbian participants comprising Dory, Eli, Jane, Lily and Epong shared the same sentiments regarding this stating that despite their psychological and spiritual preparedness to die, they have fears on totally depending on their family if they ever get sick or during old age. It was manifested on their statements: *"Ang fear ko eh yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailanganin pa nila akong gastusan. Yun yung wag naman sanang mangyari .."* (My fear is that I will get sick and I will be a burden to my family. That I may get terminal illness or what and they will have to spend for me. I hope that will not happen) *and "Eh kahit papaano me, di na maging pabigat ako sa kanila. Na iyon naman, wish ko na wag na, kung ako kukunin kako ni Lord wag na magpabigat…huwag nang mahirapan mga kapatid ko or kung sino man makakapag alaga sa akin, kung meron"* (I at least have, I will not be a burden to them. I wish that if Lord will get me, I will not be a burden to my siblings or whoever it is that will take care of me, if there is.)

Culturally, in the Philippines, families are often extended, and members tend to stay together in a shared household unit (UN DESA, 2011). In the study of Jocano (1995) an individual is trained at a very young age to be loyal to his or her family and to respect the authority of parents who are entitled to influence decisions a person makes especially in terms of choosing a career and finding a spouse. "A person may either bring pride or shame to a family when she or he does not live up to family values (Shapiro, 2007). Jocano (1995) mentioned that family support each other and if members of the family failed, they will

support and assisted each member to get back on track and build resiliency. Filipino family tends to support and help each other but some scholars like in the findings of Camic and McParland (2016) have argued on whether or not older sexual minorities find the same sense of security and approval that hetero norm-conforming persons get from familial support as they face the challenges of aging. More so, there have been conflicting studies whether sexual minority received the same quality of support from their friends and other social network as cited by Brotman et. al (2006).

In addition, based on the statements of Alda and Epong, who were both not living with their biological family, they found inner peace as they relied from the support being provided by their friends and the community they were acquainted with. It reflected on the study of Masini & Barrett (2008) where he found out that LGBT adults who got support from friends rather than family reported better mental health and lower levels of depression.

In this study ***support from the government*** reflected on the narratives of gay and lesbian elders' participants, the concerns of participants and their appeal to the local and national government for additional benefits and policies that will be of greater benefit to them. They stated their perceived solutions as to how the government can better serve the elders in general. Coming from their current situation of trying to make both ends meet, they had stated that their monthly pension is not enough. The participants stated that their pension was insufficient even for their maintenance medicines. Others have felt that there was even inequality in the issuance of social pension. For some of the participants, they also tried to look for non-governmental organizations that could support them or help them

in their needs. For others, they had hopes of having an increase in their pension since it was not enough for their daily expenses plus the maintenance medicines. They even hoped that there will be access to free medical supplies for the elderly or for livelihood programs for the elderly so they can continue to earn money for their needs. Also, some of the participants mentioned that there is currently no organization for LGBT elders which may develop programs or activities for them. For some who do not receive their monthly pension, they hope that the government could provide help for them.

Six participants namely; Luring, Alda, Kurne, Renee, Eli and Teng appealed on the government for additional benefits that will help them sustained their daily necessities. It was exhibited on the following narratives *"Sana din may pagbabagong maganap pagdating sa pension naming mga senior. Sana lakihan naman kahit konti. Kasi sobrang di sapat sa pang maintenance pa lang ng mga gamot. O kaya sana dumaing yung panahon na may makaisip nag awing libre ang gamut ng mga senior citizen. Kahit yung mga pang maintenance medicine man lang."* ("I hope there will be a change in the pension system of the seniors. I hope they will increase it even for just a little. Because it is not really not enough for the maintenance medicine alone. Or I pray the time will come that someone will think that all the medicines of the senior will be given free. Even if the maintenance medicine only.") and

"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga senior. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun." ("I hope they will think of providing livelihood projects for us seniors. That we can exercise and at the same time earn daily. I hope an

organization will think of that. And also, they will create an organization for us. An organization that will not only talk of problems. An organization that also has socialization for senior.") Also, *"Yun bang sana may makaisip man lang ng livelihood project para sa aming mga senior. Yung makaka exercise na kami eh kikita din ng kahit papaano sa araw-araw. Sana may organisasyon na makaisip nun. Tapos yung sana eh meron ding mga association na mabuo para sa amin. Yung di lang puro daing ang mapag-uusapan. Yung meron ding socialization para sa mga senior."* ("I hope they will think of providing livelihood projects for us seniors. That we can exercise and at the same time earn daily. I hope an organization would think of that. And also, they could create an organization for us. An organization that will not only talk of problems. An organization that also has socialization for senior.")

"Sa ngayon eh yung sa senior citizen lang ang alam ko. Yung sa balita sa TV na LGBT group eh parang puro sa mga bata nanduduon. Wala kaming para sa mga matatanda na gaya ko. Eh paano naman kaming sasabay sa mga bat sa LGBT?" ("As of the moment it is only the senior citizen that I know of. In the television LGBT group seems to be for the young ones only. There is no group for the elders like me. How would I join the young LGBT member?")

Echoing the results of this study, MAP AND SAGE (2010) as cited by Czaja et.al (2015) that LGBT elders are less likely to have access on government services like meal programs and healthcare. More so, they also found that social support has a positive effect on the LGBT elders. Better health outcomes that would help the aging LGBT in dealing with their aging process, better over-all health and for enjoying their quality of life. Thus,

the need for LGBT groups / organization may be beneficial to the aging LGBT for them to have better general health and for their needs to be addressed. Furthermore, these results were consistent with the findings of Cullinane (2006) that other factor that improve the resiliency of LGBT elders is the community involvement. It is through their participation in the activities that involves personal and public concern that will be beneficial for them and for the enrichment of their life.

Overall, in the data analysis, ten participants expressed challenges in terms of their health which includes their fear of getting sick because that will incur financial expenses to the family or relatives that they are living with, fear of not having someone who will take care of them and the need to sustain their maintenance and other needs. Further, challenges in terms of the basic needs were revealed by six participants. The participants voiced out their needs to still sustain their daily necessities that includes food, shelter, clothing and medicine. For some, they even had to ask for food from their neighbors and/or the church. Also, five participants confessed that there was a need for them to have a companion. These participants admitted that they long for someone aside from their family and relatives who will take care of them and be with them in their aging years. On financial sustainability, seven participants admitted that they still wanted to have a job whether part time or full time to sustain their basic needs. These participants mentioned that having an income was a big help for them to sustain their daily necessities. For others, they wanted to continuously earn money to provide not only for their needs but also for their family. Consequently, on the item fear of dependency, five participants revealed that they do not want to get terrible illness and be a burden to the family for a span period of time. Lastly,

on the item support from the government, six participants appealed on the government for additional benefits that will help them sustain their daily necessities. Some of the participants even hoped for an organization for LGBT community who will listen to them and provide activities or projects for them and would assist them in their needs or in helping them bridge the gap between the LGBT community and the government.

How is Erik Erikson's last stage of Psychosocial Development, Integrity vs. Despair, shown or reflected on the life stories of the Lesbian and Gay elders?

The second section comprised the data that addressed the second research problem i.e. *How do their life stories reflect Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair?* The themes produced under integrity were family acceptance, affirmative childhood, established self, self-worth and being positive and prayerful. While for despair, the theme that emerged was regrets for what could have been.

The Erikson's stages of psychosocial development are based on (or expand from) Freud's psychosexual theory. Erikson posited that individual or person were motivated by the need to achieve competence in certain areas of their lives. According to psychosocial theory, over our lifespan individual experienced eight stages of development i.e. from infancy through late adulthood. And that in each stage, there was a crisis or task that were essential to be resolved by the individual. Positive completion or accomplishment of each developmental task resulted in a sense of competence and a healthy personality and failure to master these tasks leaded to feelings of inadequacy. At the integrity versus despair stage (aged 65 and above), the key conflict centers on searching whether the individual has led a meaningful and satisfying life or vice versa.

In a study done by Giblin, (2011), he mentioned that the integrity vs. despair stage begun at approximately age 65 and ends at death. Psychologists, counselors, and nurses today used the concepts of Erikson's stages when providing care for aging patients. He assumed that people in late adulthood reflected on their lives and felt either a sense of satisfaction or a sense of disappointment. Persons who were satisfied of their accomplishments felt a sense of integrity, and they could look back on their lives with few regrets. However, persons who were unsuccessful or unsatisfied at this stage may feel as if their life has been wasted. They focused on what "would have," "should have," and "could have" been. They faced the end of their lives with feelings of resentment, misery, and despair.

According to Perry et.al (2015) integrity versus despair stage begins as the aging adult begins to tackle the problem of his or her mortality. The onset of this stage is often triggered by life events such as retirement, the loss of a spouse, the loss of friends and acquaintances, facing a terminal illness, and other changes to major roles in life. He further stressed that during the integrity versus despair stage, people tend to reflect back on the life they have lived and come away with either a sense of contentment from a life well lived or a sense of remorse and despair over a life wasted. Erikson defined as cited by Perry et. al. (2015) that wisdom as an "informed and detached concern with life itself even in the face of death itself". Thus, success in dealing with the different crisis at this stage leads to the development of what Erik Eriksons' denoted to as ego integrity. Individuals be able to look back at their life with a sense of wisdom and contentment with less remorse or regrets.

ON INTEGRITY: Family Acceptance

Family acceptance played a vital role during the growing up years of the aging gays and lesbians as narrated by the participants. It was a point in their lives when they needed acceptance so they can fully show their true being without any hesitation or limitations. That was because they thought that the people they look up to are on their side. Some of the participants shared that their parents loved them so much. They have never experienced abuse from their family and accepted their sexuality. Their family accepted their choice and gives them respect.

Seven out of twelve participants received acceptance from their family, this implied that their family supported them regardless of their sexual orientation. Narratives from Renee like: *"Wala akong naging problema. Nung nalaman ko na bading ako suportado ako ng magulang ko"* (I did not have any problem. When I discovered that I am gay, my parents supported me).

Jackson (2008) have shown that homosexuals in the past were forced to lead "secret lives" and only were to be shared in extremely private settings, as not only the culture of the time was not permissive, but also that the American Psychiatric Association classified homosexuality as a mental illness until 1973. In spite of the fact that the awareness and reception of the LGBT community is rapidly growing, those who have lived the majority of their lives in hiding, fear, and humiliation cannot so easily let go. Kimmel (2014) also considered that lesbian, gay, and bisexual (LGB) older adults showed that seniors who have been "out of the closet" for a longer period of time experienced more victimization than those who were secretive of their sexual orientations for a longer period of time.

Different results from SAGE & Hunter College Brookdale Center, (1999) as cited by de Vries (2009) found out that LGBT older adults continued to conceal their sexual orientation from their biological families for fear of lack of acceptance. As a result, LGBT older adults tend to rely more on friends or "families of choice"—families composed of close friends (D'Augelli, Grossman & Hershberger, 2000).

ON INTEGRITY: Affirmative Childhood

Seven of the participants of this study had happy childhood which means that their childhood contained good memories and experiences. Positive childhood experience was very important to ones' psychological growth. A positive childhood experience would give higher possibility of having good self-image and better perception towards situations and experiences. Some of the participants in this study narrated that they discovered about their sexuality at a young age. During those times, they tend to get easily affected by those who would tease them and felt that they were easily swayed by their jokes. Growing up, they discovered their interests such as joining contests and doing arts. Looking back at their childhood years, they described it as a positive experience. Their parents would always remind them of the importance of education, and this made some of the participants excel in school. Being close with their siblings and being open to them also provided positive impact on their growing up years.

ON INTEGRITY: Established Self

The theme established self in this study referes to the achievements and accomplishments of the participants in their chosen profession and chosen field. It also included how they have been in their growing up years, the things that they are proud of, and how successful they have become.

For some of the participants, they were blessed to be able to invest for their current businesses which provided for their needs. For some, although they do not have much resources, they felt blessed for having a loving and caring family who provided and supported them so they could finish their studies and get a stable job in the past. With this, they were even able to help their nieces and/or nephews to study and even helped other members of the family. These made the gay and lesbian participants of this study feel a sense of accomplishment and was able to establish themselves despite their sexuality. One of the participants also became a leader in the community. This experience contributed to this participant's sense of accomplishment. Lastly, one of the participant singled-handedly took the responsibility of raising her child inspite of all the obstacle she had been through. It had become her greatest achievement as she is now enjoying the affection and love from her son and her grandchildren. It was the product of the major decision she made in her past.

In similar findings by Johnson et. al (2005) he attested that many factors influenced aging in LGBT populations similar to those experienced by heterosexual people such as self-acceptance, having a purpose in life, the presence of a life partner, and financial security are all predictors of good quality of life for LGBT people.

ON INTEGRITY: Self-Worth

Self-worth as a theme in this study refers to the opportunity offering oneself by providing material, financial or time to their family and others not related to them by blood. It is a feeling of being worthy for doing something good out of themselves. According to inclusive fitness theory also known as kin selection theory, related individuals tend to take care of each other, often altruistically, and generally work to ensure each others' successes. Our innate desires to protect those in our families, especially our offspring, can ultimately be attributed to our genes, 'motivating' us to protect those same genes in others. Same is true with the elder gays and lesbians of this study who had chosen to devote their time and effort on providing for their chosen relative be it financially or emotional support. In the process of their selection of the beneficiary of their goodwill they ended up prioritizing their relatives before they resorted on helping others.

Seven participants decided to extend their support on their parents, siblings and niece/nephew. The support they had given came either in financial form or physical presence. For financial form, participants had shelled out money to support for the studies of their nephew/nieces and providing for the needs of the family in general. For the physical presence, participants extended their effort on either raising up a member of their family be it their sibling or nephew or niece and taking of their sick or aging parents.

One participant shared that he spent his younger years studying and focusing on learning different skills. Through this, he was able to earn extra to help his parents and family. Another shared that finishing his studies and eventually securing himself a stable job was his accomplishment for he was able to share the fruit of all those to his family by

helping them financially and by sending his nephews/niece to school. Also, another shared that he was able to help his parents and provided them a good life before they passed away. He also shared being the bread winner of their family. More so, another participant takes pride of the special blessing given to him by God, that was to experience having a woman by his side and eventually having a son of his own. He experienced having a wife with whom she lived with for thirteen years. Though not married, they were blessed with a son. Being able to provide for his family and sending his son to school was his greatest achievement. Having a child of his own was the most wonderful blessing for him. Other participants shared that they had to work hard to provide for their family and later was able to invest for their future. Moreso, one of the participants in this study shared that he took care of seven children in the past even if they were not his relatives. He provided for their basic needs and sent them to school. They were able to finish their studies and they were now living abroad. He also recalled being there for his siblings during his younger years. He reminisced how he sacrificed his job just to take care of a sister who had just given birth. Further, one participant courageously made a major decision of not aborting the child which was the product of her being a rape victim.

The findings in this study contradicted what de Vries (2009) found out that LGBT elders are estranged and continued to conceal their sexual orientation from their families because of fear of acceptance and depended on their family of choice which composed of friends and social networks. LGBT participants in this study were mostly accepted by their family and that was the reason that they were able to develop positive self-worth. Of all the participants in the study, only two were not accepted by their parents. They narrated

how difficult their situations had become when it comes to hiding their true self and emotions as to keep their true identities. But as the two of them aged and eventually proven their worth, they were eventually accepted by their parents. The unacceptance that they experienced were never a factor for them to establish their self-worth.

ON INTEGRITY: Being Positive and Prayerful

Being positive and prayerful theme in this study refers to the participants' way of dealing with challenges in life and having faith to the omnipotent. It was their manifestation of great faith to the Lord and leaving their fate into his hands. Their faith gave them positive outlooks and hope that they may be able to overcome challenges that may come in their lives.

Although the participants have different religious beliefs, most of them manifested great faith in God and narrated stories of how happy they were to be a part of a religious group and how they draw strength from their faith to face daily struggles. One of the participants shared that he had experienced the worst in life. He said that fears were part of everyday living and it was a challenge to see things in different point of views. He expressed his preparedness to whatever it is that will come his way. Another praised God for his good health. He said that God blessed him with a healthy body and was thankful that he was not sickly. He is open to whatever it is that God will give him. He is living his life one day at a time. He is thanking God for everything. On the other hand, one participant shared that she is not hoping for so much. She just wanted to be treated right and with respect. That was the only prayer she has. She was just observing the people around her.

She expressed her fear of being maltreated. Also, another shared that she does not feel any fear of being alone. She said that God was her companion. She devoted her time going to church and joining church activities. She no longer wanted activities that was not church related. She expressed deep faith to God and she was leaving her fate to him.

Some studies suggested that LGBT as they aged, they became more successful in dealing with their crisis and they developed variety of coping strategies to deal with life's adversities and changes. It was mirrored in the results of findings by Jones and Nystrom's (2002) and Gabbay and Wahler (2002) that LGBT elders experienced adversity and hardship made them stronger and helped them develop adaptive coping mechanism to deal with the challenges of aging process.

ON DESPAIR: Regrets for what could have been

This theme involves reflecting on one's life and moving into a feeling of a deep sense of regret and despair over a life misspent. In this study, it pertains to the participants' regrets for what could have been done to develop and improve their quality of life in the present.

Some of the participants in this study had regrets for their decisions in the past such as not being there for their family or loved ones, not saving up for the future, and not continuing their education. Another enjoyed during his younger years and did not think of saving up for the future leading to lack of pension in the present for he had not paid any contribution to the social security. Also, another participant shared that while he was earning, he regreted not saving part of it and had regreted for not being able to give his

parents a good life before they passed away. He also thought that if he had saved before, he might have had money for the repair of their house which is now dilapidated. He regretted that he was not able to value the time and the earnings he could have saved for today's use. Further, another participant mentioned that he did not finish his college education. He thought that it was the reason why he stayed as just being a loteng agent. On the other hand, one participant regreted not being able to adopt a baby. She said that she was afraid of dying. For some, they had regretted for not being able to work towards success of making their lives better for themselves and for their family.

What Community Support Program could be provided to the LGBT elders?

The third section contained the data that addressed the research problem: *What community support program could be provided to the LGBT elders?* In answering this research problem, the researcher considered the results of the two previous questions on the challenges of the aging gay and lesbian and how do their life stories reflected Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair in coming up with a support program for gay and lesbian elders.

According to Statistics of National Gay and Lesbian Task Force (2011) that by 2030 there will be an increase in population to LGBT Americans between 3.6 to 7.2 million. In the Philippines, there is no measure to determine the exact or definite number of elders who belong to LBGT individuals. Only data from census as to how many comprising the older adults but identified LGBT senior was not part of the inclusion in the data presented by the national or local population.

The previous chapters determined and discussed the needs of the aging LGBT which included health issues, basic needs, need for companionship, financial sustainability, fear of dependency and support from the government. All of the identified needs are the challenges being confronted by the population being studied. Prior to the determination of these specific needs, it was designed to address the process on how it could determine or formulate a support program and awareness to further benefit the LGBT elders. Professionals such as counselors, mental health and health practitioners, and policy makers are being challenged to raise awareness and increase advocacy on the LGBT elder's issues and concerns. These study can be used as a tools to design, create and implement programs that would cater the issues of the LGBT elders.

Based on the result of the findings in this study, the researcher had created a proposed support group program LGBT Senior Group. It aimed to deliver activities for their social and emotional well-being. The proposed organization would be in coordination with the different community such as municipalities, barangays and other support group for LGBT, also, some responsive psychoeducation activity. Moreover, the support group program could provide resilience, source of strength, develop social network, friendship and emotional support aside from their family.

The program structure of the proposed support group comprises of program objectives under which was to understand themselves and the process they were going through; to learn adaptive coping mechanism in dealing with stress along with their aging process; appreciate their sense of worth as individuals' persons with unique capabilities;

develop social network, friendship and emotional support from the group or community they belong.

Another part of the structure comprised of personal, social and emotional domains. The last program structure was the program characteristic, these included psychoeducational therapeutic activities, attainable and measurable outcomes in line with the three domains.

The researcher came up with steps in the development and implementation of the proposed senior LGBT support group which composed of program initiation, needs assessment, identification of resources and funds, creation of program activities, implementation of the program and evaluation of the program.

As counselors and mental health professionals we need to continue to become a scholar-practitioner, do research in different special or minority population to improve and innovate counseling profession. It would serve to deepen the lives of the LGBT elders and the heterosexual elders. In different times, the counseling profession flourisehed as a ground for different researches. LGBT elderly group was considered to be an understudied group that could give and result to innovations for them. It could bring about discovery and opportunity.

CHAPTER V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter presents the highlights of the entire investigation which are divided into two sections. The first section dealt with the summary of the study which included the background, the objectives, the methods and findings of the study. The second section focuses on the conclusions to answer the objectives of the study and the researcher's recommendations.

Summary of the Study

The study is the product of the researcher's personal and academic interests on the lives of LGBTs specifically the elders in this minority group. In her growing up years, she had been exposed to friends, relatives and acquaintances that belonged to the LGBT group. In her practice of her profession as Guidance Counselor in elementary, secondary and tertiary levels, she encountered different cases from these group. The researcher had been exposed to cases such as bullying, self-identity crisis, self-acceptance and others. It made her think of the experiences that the students are getting into and how these would affect them later on once they reach their aging period. It was in this context that the researcher came up with a desire of doing an in-depth study so as to better understand the lives of the LGBT group specifically the elderly. She was challenged to know the different stages that the LGBT group had been through and to have a better understanding of their different needs as part of the minority and understudied individuals, which include possible programs / interventions for them.

In this study, the three research problems posed are: What life challenges were faced by aging lesbian and gay elders? How is Erik Erikson's last stage of Psychosocial Development Integrity vs. Despair, shown or reflected on the life stories of the Lesbian and Gay elders? and What Community Support Program could be provided to the LGBT elders?

In answering the research problems, the qualitative research approach particularly the narrative methodology was undertaken. The use of in-depth interview facilitated the generation of qualitative data and rich narratives from the twelve participants. The analysis of the data was carried out using thematic content analysis by looking for patterns and themes as well as ruptures in the experiences of gay and lesbian elders. More so, the semi-structured interview guide which was the main instrument of the study was pilot tested with a lesbian to determine its appropriateness of the instrument, the approximate time of the interviews, and whether the questions would elicit a conversation and look at the richness of data gathered in the instrument. Also, it gave the researcher an opportunity to practice the pacing of the questions. The participant in the pilot interview who is qualified in the inclusion and exclusion criteria was willing to participate in the study, but she was not included in the actual study. Furthermore, to ensure the quality and rightfulness of the questions, the said instrument was validated by four experts and professionals in the field of research and guidance and counseling.

Twelve (12) participants participated in the study. They were selected based on the following criteria: 1. self-identified gay and lesbian; 2. must be 65 years of age or older; 3. single or without partner during the interview; 4. professionals and/or non-professionals; 5. with part-time, full time and/or unemployed status during the interview while the exclusion criteria of the participants composed of aging lesbian and gays who cannot articulate and/or verbalize their answers, feelings and emotions, inability to recall or remember some events and stories of their lives and with mental condition (e.g. Dementia/Alzheimer's Disease). The participant/s of the research are not relative, friend/s of the researcher and the researcher. Participants of the study were referred by colleagues in the field of counseling profession, former and present classmates, friends, and relatives of the researcher.

The eldest participant of the study was 77 years old while the youngest was 65. They were from Northern, Southern Luzon and National Capital Region (NCR). With regards to educational attainment, two participants were doctoral graduate; one graduated from college; one participant was college undergraduate; two participants finished their vocational course; four participants graduated from high school/secondary level and two finished their elementary level. As regards to their current occupations at the time of the interview, three managed their business; two were loteng agents; three participants were unemployed; one practicing doctor, a professor, and a massage therapist and flower arranger. Out of the twelve participants, five had part-time employment status; four still had full time jobs; and three were unemployed/no work. The source of their finances came

from their business, pension and their part time/full time jobs. Only one received financial assistance from a church organization.

Summary of Findings

Based on the findings of the study, it could be perceived that the experiences of aging brought impact on the health issues of gays and lesbians considering the varied situations they were in. They were afraid of getting sick. Some of the participants expressed their fear of acquiring illness in which they would require additional attention from their family members. They were thinking that it would take so much time of their relatives who had their personal lives on their own. Also, some of them were afraid that nobody would look after them when that time would come. Meanwhile, two participants were experiencing health weakening due to sudden stroke and loss of vision. They were living in fear limiting their movements in their day to day activities to function normally. Further, one participant was afraid of acquiring an illness and being bedridden. She witnessed the agony of her mother who died due to old age, she witnessed how her mother lost her memory and her physical strength. Contrastingly, some were thankful of the current health status they were enjoying and wished they could remain the same. Their medical situation was very important for them because it is their bases on how they could still enjoy life inspite of their age.

Participants also gave importance to their basic needs, the need to survive in their daily existence which included food, shelter, clothing and medicine. Most of them found happiness and joy knowing that they could still provide for their own and that they could still rely on their own capability and strengths to provide for their needs. Some are thinking

of how to survive on a daily basis, relied on the community that they belong to and to their current part time job to sustain their daily necessities.

Though some if not all, the participants have their families on their side in their aging process, some of them were still yearned for a companion other than their relative/s to stay by their side. They long for a romantic and/or platonic love to keep them going and inspired in facing day to day living. It was their desire to have someone who would closely stay with them through thick and thin and in the years to come.

The participants realized how important it was to sustain their financial needs especially on their everyday necessities. For them, providing for their daily needs through part time or full time jobs could be considered attainment of being a productive individual. They still hoped for a way to have their own income to sustain their own daily living.

As discussed earlier, participants feared of being totally dependent to their families, due to financial reason or physical concern such as illness, total disabilities and others. These worries hinder them from experiencing the fullness of their aging process.

While most of the participants were receiving social security pension, others were not enjoying the same due to non-contribution. Some of them focused on providing and helping their families that they even forgot to plan for their own retirements. Others spent their earnings unwisely as they splurge on haapenings, travellings, night life with friends and partners. They expressed their dismay over the government's/respective municipality's process on giving the social pension intended for senior citizens. Inequality on its insuance was observed, they complained of the process they needed to go through before they could avail the said pension. It involved asking of their financial source of income and even

involved political inclination. Complaint on the amount they were receiving was raised. The participants said that it did not suffice their medical maintenance. They would like to plea that the pension amount be increased and be given to all seniors. regardless of their financial status. These results and summary affirmed the first problem posed in the study: *What are the challenges of aging gays and lesbians?*

In section 2 of the study which is in relation to the life narratives of aging gays and lesbians anchored on Erik Erikson's last stage of Psychosocial Development Integrity and Despair, a dominant result reflected on integrity. According to Erik Erikson, this phase which occurs during old age is focused on reflecting back on life. Those who were unsuccessful during this phase would feel that their life had been wasted and would experience many regrets. The individual would be left with feelings of bitterness and despair. Those who feel proud of their accomplishments would have a sense of integrity. Successfully completing this phase means looking back with few regrets and a general feeling of satisfaction. These individuals would attain wisdom, even when confronting death. The study revealed a sense of integrity over the majority of the participants indicating few regrets over their respective past life experiences. They recalled having spent it the way they wanted it to be. They were satisfied with their past lives that up to the present they could not see anything wrong with it. They stood by their decision that they made in their respective lives.

After carefully looking at the results and in response to the challenge of helping the aging gays and lesbians, it was necessary to provide a support group to come up with a program that would deliver activities and services to them. In this study, it could be

observed that all were living without a partner or romantic and/or platonic relationship which made them different from a senior citizens living with their own family who they could depend on in terms of financial and emotional support. With this, it would be very beneficial for the aging gays and lesbian to have a group that would support them so they could still enjoy while they were passing through their aging process. This includes a possible creation of an organization in coordination with the different communities such as municipalities, barangays and other support groups for LGBTs. Also, some responsive psychoeducation activities, and/or programs are designed to meet the needs of the aging gays and lesbians. The Senior LGBT group's goal was to maintain the sense of community the LGBT seniors need and thrive on. The facility could also act preventatively by having social events scheduled regularly which encourage a sense of communal togetherness. The objectives of the program such as: to understand themselves and the processes they were going through; learn adoptive coping mechanism in dealing with stress along with their aging process; appreciate their sense of worth as individual persons with unique capabilities; and develop social network, friendship and emotional support from the group or community they belong. The implementation of the program could be done by mental health professionals, such as registered guidance counselors, psychologists, psychometricians, social workers and health volunteers from the communities and barangays.

Conclusions

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

1. Aging gays and lesbians in this study were facing challenges as they went through the process of aging. Their challenges vary from different situations that they were into. Issues on health arise in the course of conversation with them. They realized that health was the most significant factor in the process that they were going through. It was the basic underpinning for their routinary activities. Their health placed a significant role in sustaining their well-being knowing that they were still capable of performing tasks and activities that they used to do. It was apparent that the participants' eagerness to still provide for their basic needs and wanting to earned for their living was correlated to their fear of being totally dependent to their families. The thought that they would be taken away from their family would not just seize their valuable time, but their hard earned savings which made them so uneasy and restless. It is from it that reason that they were longed for a companion to be by their side. It may mean that their family members who stayed with them could only give their presence and that they lack the affection much needed by the aging gays and lesbians. In addition, it was very apparent that there was a need for additional support from the government in terms of additional amount for their monthly pension as it did not suffice even for their medicines. Equality on the process of issuance of the social pension was implemented and clear criterion on the beneficiaries' qualification was created. The need for social support group

specifically designed for these minority group could be created to meet their unique needs.

2. Erik Eriksons' last stage of psychosocial development theory on integrity and despair was validated in the study. The theory posited that late adulthood reflect on their lives and feel either a sense of satisfaction or a sense of failure. People who feel proud of their accomplishments feel a sense of integrity, and they can look back on their lives with few regrets while people who are not successful at this stage may feel as if their life has been wasted. They focus on what "would have," "should have," and "could have" been. They face the end of their lives with feelings of despair. The result showed a dominant result of integrity vs despair in the lives of aging gays and lesbians in the study. Based on the results gathered from the research problem number two, it was concluded that the aging gays and lesbians who had their family acceptance had a positive childhood. Their positive childhood had become a key factor towards building their self esteem that led to the fulfillment and achievements of their goals in life. It made them successful in the specific field they had chosen. It made them reach their aspirations and contentment in their life. It was also concluded that they had devoted their time and efforts on helping their immediate family with their finances, be it for daily needs or educational purposes. It was by helping and giving to their family that they found their self worth. It made them feel needed and important. It made them feel their function in their family considering their sexual orientation. It boosted their pride and self worth. It was determined that beyond the easy and happy social life of the aging gays and

lesbians, their heart was filled of so much love and intention to give and share their innate self to their family members. In the course of giving a part of themselves to their family, some of them had forgotten that they also had a future to face. They had forgotten to save for themselves. In fact, some had few regrets of not having saved their hard earned money for their own future. As a result, they entrusted their fate to our creator. They were enriching and strengthening their faith to God knowing that God would not forsake them. They were drawing strength of facing their day to day life from their faith in God. It keeps the optimism to look at the brighter side of life inspite of their difficulties and challenges. Overall, the participant's narratives showed that they experienced and enjoyed meaningful and satisfying life and it showed that they developed sense of integrity.

3. *Creation, coordination* with the Department of Social Worker and Development (DSWD), other mental health professionals such as guidance counselors, psychologist, social workers and other health volunteers from municipalities and barangays and *implementation* of senior LGBT support group to provide resilience, source of strength, develop social network, friendship and emotional support for them aside from their family. This support group would be the safe space for aging gays and lesbians and would also provide programs and activities that makes coping with difficult situations less stressful and more social opportunities for them. Consequently, they can enjoy a healthy and rewarding later life.

Recommendations

In view of the conclusions drawn in the study, the researcher would like to propose the following recommendations:

1. To create a support group that would design programs and activities, to coordinate with municipalities/barangays, mental health professionals and health volunteers and implement to the LGBT seniors that will help them achieve happy and rewarding life in the process of their aging;
2. To establish livelihood programs for able senior citizens and/or senior LGBTs that can help them generate income for themselves and make them feel that they can still be productive at the same time;
3. To provide a safe space for the LGBT elders wherein they can avail counseling, the possibility of conducting community counseling and counselor educations training.
4. To include the gender status/preference of senior citizens/senior LGBTs in the data gathering organizations such as the census for concrete population data to be used in possible studies that will be conducted, particularly identifying and addressing the needs and concerns of this minority group;
5. For the government/municipalities to look into the criterion and implementation of policy on giving of social pension among senior citizens so as to promote equality regardless of their political or economic status; and
6. For future interested researchers to work/focus on other topics on Gender and Development concerns that will look into other issues of the LGBT group, such as

emotional stability and/or mental health of senior LGBTs, possible exploration on the healthcare programs and facilities for elderly.

MY PERSONAL JOURNEY WITH THE RAINBOW ELDERLY

When I earned my masters' degree in Guidance and Counseling at Bulacan State University and planned to pursue my Doctor of Philosophy degree in the same field, I already had a topic for a research study in mind. At that time, the gender and development policy issues were not yet in the limelight but I was definite that I was going to pursue this topic whatsoever. I had chosen the topic because of the years I spent facing clients of different ages, colleagues, friends who belong in the said group. All along, I had started my journey with them through my professional services and advocacies. It was through my constant encounters with them that motivated me to dig deeper on knowing what challenges they were facing.

When my classmates and I passed the comprehensive examination, we had a chance to ask each other about the possible topics we intended to propose. I told them that I only had one topic in mind which was to explore the lives of the LGBTs, especially the rainbow elders. I was interested and fascinated on knowing what kind of life they had experienced during those times that they were not literally accepted by the society as compared to the present time. The memorable life experiences and challenges they went through and stories of their survival. And now that they are facing the aging stage of their life.

It was on November 2018, that I finally got the approval to work on the study that I proposed. Consquently on March 2019, I started interviewing the participants of the

study. Initially, seven lesbians aging gays and were referred to me by my friends, colleagues and relatives coming from Northern to Souther Luzon and within Metro Manila. The process of data gathering was not easy considering the different locations of the participants. Also, I had my own difficulties on jiving with the interview schedules of the participants as I needed to go on my usual work routine. Additional supervisorial responsibilities were given at times when my superior had to go on leave. And being a single mother. I had to undergo malleable time management so as to go on with the schedules set.

In the course of the data gathering, two partcicipants did not push through with the interview. During the initial interview, one participant manifested signs of forgetfulness as she was not able to recall her life events and kept on repeating what she had said. This made me decide to exclude her from the study as stipulated one of the criteria set. One participant even backed out due to her busy schedule and personal reason. Another setback was due to the manually transcripted interview which was unintentionally lost that led me to feel devastated. Thanks God I was able to process myself and regain my motivation to continue what I had started.

Dialogue with the rainbow elders

My interview with Alda, a person with disability due to blindness at his right eye and partial impairment on his left eye struck me the most. I felt extremely sad looking at him. I suddenly knew how difficult life was for him. As the interview went along, what I had in mind was validated. Stories of him revealed the different hardships he had

experienced. But his strong faith in God and the kindheartedness of their community made him remain positive in life.

More so, when I met Kurne from Lumban, Laguna, at first glance I looked at him as a jolly person. But as we talked about his childhood experiences, I could not imagine how he survived the cruelty of his father knowing his sexual orientation. But I admired him for his audacity on facing that stage of his life and his forgiving heart. I was also astonished when he revealed that he once had a family of his own, was able to raise a son and look at it as his greatest achievements. I admired him more as he said that he let go of them and never bothered them again so they could enjoy a normal life without any tint of his past.

Moreover, I respected Jane so much when she revealed that she had to give up her ten- year long relationship with her partner to keep the child on her womb. She was a rape victim. She single- handedly did everything she could to raised his son.

Meanwhile, I felt the joy and pride of other participants as they shared their achievements in terms of excelling in their chosen professions and how they shared their blessings to their family members and others. I also appreciated them for being smart enough to save their hard earned money for their future. Some of them had invested properties and businesses that they can now depend on for their daily necessities.

My conversations with them made me be with them in their pains and sufferings. I felt for them as they narrated their hardships and helplessness. There were times when I felt so lonely and sad after an interview. I needed to be alone and process myself so I could go back where I was. Contrastingly, I also got to feel their joy and pride as they shared their achievements in life. I celebrated with them as they wholeheartedly shared their own

stories of selflessness, as if I was one of their relatives and loved ones celebrating the joy of being taken care of and feeling important.

The life experiences of the rainbow elderly educated me on selflessness; that they live in our world with the role of helping their family members despite their own difficulties; that their existence is essential not only to their family but for the community as well.

My personal learning experiences

Since my college days up to now that I am in my doctoral degree, the theory of Erik Eriksons' Psychosocial Development had become a major part of my educational and professional processes. The theory that was only a part of a particular subject and of several discussions is now subjected to my own probing. My study immersed me to a personal encounter with the theory. Listening to the life stories of the rainbow elderly brought me to Erik Ericksons' theory on Integrity vs. Despair. Having personal encounters with them leads me to a conclusion that the theory itself was relevant for the aging gays and lesbians as they facied the last stage of their respective lives.

It made me value Erick Erikson and his great ability to associate his theory even more up to the present time.

After having finished interviewing the twelve aging gays and lesbians and carefully listening to their stories, I also felt what they went through. I emphatized with them. Through this, I was able to understand in the deeper sense of their respective stories. And being a Guidance Counselor and as a part of my professional calling, I appreciated more

the skills of listening not only verbally but also heeding to nonverbal and/or what they wanted to impart or relay.

I learned that what they went through was beyond what a typical individual had been through. Some were subjected to non family acceptance, unpleasant childhood, judgement from some members of the community, bullying, prejudice and discrimation. It made me realize that members of the rainbow elderly were very resilient having gone through all of it. Inspite all of life adversities I still need to look at life with a positive outlook and have constant communication and faith in God.

Also, I learned from my encounters with them to appreciate life, to value my family and share what I have but most specially to save for my future. That in giving, I also have to consider saving for myself and for what I have to face in the future.

My expression of gratitude and appreciation

I am forever grateful to the twelve aging gay and lesbian participants in my study, I found the dialogues/encounters meaningful and through them I know I could get the degree that I scrupulously pursued. I had learned so much about your life experiences. I appreciate many things from your remarkable accounts as a way of reflecting on my own family, my friends, my work, my small and big achievements in life, even to the extent of appreciating a total stranger; also, the importance to live one day at a time.

I am thankful and cannot pay back the time you shared with me, for your willingness and trust to share your life experiences and the challenges you haved faced. How to express my gratitude to you might also be through paying them forward for continuously being an advocate for LGBTs and, hopefully, that the support group/program

designed for you be coordinated and implemented in the different barangays and municipalities.

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APPENDICES

Appendix A

SEMI-STRUCTURED INTERVIEW GUIDE

Briefing

Maraming salamat sa iyong pagpayag na makibahagi sap ag-aaral na ito. Pag-uusapan natin ngayon ang tungkol sa iyong sarili, ang iyong mga karanasan at napagdaanan sa buhay, at ang iyong kasalukuyang nararanasan o sitwasyon na ikaw ay nasa yugto ng pagtanda. Ang ating pag-uusap ay ire-rekord ko sa pamamagitan ng voice recorder at ito ay aking buburahin pagkatapos kong maisulat ang panayam na ito. *("Thank you for participating in this research interview. We will talk about yourself, your experiences and challenges in life and your current situation that you are now in your aging years. Our conversation will be recorded and it will be deleted once I complete the transcription").*

1. What are the factors that make you happy at this moment of your life?
   (Anu-ano ang mga bagay o salik na nagpapasaya sa iyo sa kasalukuyan?)

2. What are the factors that make you sad at this moment of your life?
   (Anu-ano ang mga bagay o salik na nagpapalungkot sa iyo sa kasalukuyan?)

3. How will you describe your relationship with your mother and father when you were still a child? *
   (Paano mo mailalarawan ang iyong relasyon sa iyong mga magulang noong ikaw ay bata pa?)

a. How do you describe your growing up years? *
   (Paano mo mailalarawan ang iyong buhay habang ikaw ay lumalaki at nagkakaisip?)

b. What do you consider as the point/event in your life in which made great influences in your growing up years as a lesbian or gay?
   (Ano ang itinuturing mo na punto / kaganapan sa iyong buhay na malaki ang naging impluwensya habang ikaw ay lumalaki at nagkakaisip bilang isang tomboy o bakla?)

4. How do you describe your aging experience? *
   (Paano mo ilalarawan ang kabuuan ng iyong pagtanda?)

a. What are the things you consider when you think about this stage of your life?
   (Anu-anu ang mga bagay na sa tingin mo ay iyong kailangan sa ngayon?)

b. What are the fears and/or challenges do you anticipate at the moment?
(Anu-ano ang mga pagsubok o hamon na iyong inaasahang haharapin?)

c. How do you cope with these challenges? *
(Paano mo hinaharap ang mga hamon na ito?)

d. What rewards or good things do you anticipate at the moment? *
(Anong mga gantimpala o mabubuting bagay ang iyong inaasahan sa puntong ito ng iyong buhay?)

e. What do you hope for at this stage of your life? *
(Ano ang inaasahan mo sa yugtong ito sa iyong buhay?)

f. What kind of unique needs do you have as a gay and lesbian?
(Anong uri ng mga natatanging pangangailangan ang mayroon ka bilang isang bakla o tomboy?)

5. What support group are you aware of for LGBT elders? *
(Anong mga mapagkukunan ang alam mo para sa mga matatandang LGBT?)

6. Is there anything else you would like to share?
(Mayroon bang anumang bagay na nais mo pang ibahagi?)

Debriefing

Pinapahalagahan ko at nagpapasalamat ako sa iyong pagiging bukas at pagbabahagi ng mga bagay tungkol sa iyong sarili at iyong mga karanasan. Kamusta ka ngayon pagkatapos ng ating pag-uusap? *("I appreciate your efforts in telling me about yourself and your experiences. Thank you for being open and sharing so much for my study. How are you now after talking about your experiences?")*

Appendix B

VALIDATION OF THE RESEARCH INSTRUMENT

College of Graduate Studies and Teacher Education Research

LIEZEL VILLANUEVA, PhD
Head, Personal Development Office
Manila Tytana Colleges
Pasay, City

Greetings!

I am a graduate doctoral student from Philippine Normal University, Taft Manila and at present, I am having my dissertation writing, the last requirement for the degree of Doctor of Philosophy in Guidance and Counseling. My study is entitled ***"Facing the Sunset of the Rainbow Elderly".***

In this regard, may I request your expertise and assistance to validate the unstructured questionnaire for the participants who are aging lesbians and gays. Your expertise in this undertaking is essential in finalizing the set of questions for the said research.

Attached herewith is a copy of my interview protocol and research questions.

Should you have any questions please reach me at mnhari@plm.edu.ph or at +923 473 6136.

I am hoping that this request will merit your most favorable response

Thank you very much

Sincerely yours,

Marilyn N. Hari
Ph.D Guidance and Counseling student

Noted by:

Dr. Peter Howard R. Obias, PhD, RPsy
Adviser

PART I:

SOCIO-DEMOGRAPHIC PROFILE

Directions: Kindly fill-in the necessary data. Place your responses on the spaces provided. Rest assured that all information will be taken with utmost confidentiality

Name (Optional):	Age: data privacy part choices
Address:	
Highest Educational Attainment:	Occupation: _____ ____ Part-time ____ Full-time ____ others (pls. specify) _____
Source/s of income:	

_____ Accepted _____ Reject _____ For Revision

Suggestions:
pls. provide a question which will give chance. to your co-researchers to reflect "Do you live a meaningful life".
most questions are about challenges, exp...

PART II:

UNSTRUCTURED INTERVIEW

Questions	Accept	Reject	For Revision	Comments/Suggestions
1. What are the factors that makes you happy at this moment of your life? * *(Anu-ano ang mga bagay o salik na nagpapasaya sa iyo sa kasalukuyan?)*				
2. What are the factors that makes you sad at this moment of your life? * *(Anu-ano ang mga bagay o salik na nagpapalungkot sa iyo sa kasalukuyan?)*				

Questions	Accept	Reject	For Revision	Comments/Suggestions
3. How will you describe your relationship with your mother and father when you are still a child? * *(Paano mo mailalarawan ang iyong relasyon sa iyong mga magulang noong ikaw ay bata pa?)*				
4. How do you describe your growing up years? * *(Paano mo mailalarawan ang iyong buhay habang ikaw ay lumalaki at nagkakaisip?)*				
5. What do you consider the point/event in your life which made great influences in your growing up years? *(Ano ang itinuturing mo na punto / kaganapan sa iyong buhay na malaki ang naging impluwensya habang ikaw ay lumalaki at nagkakaisip?)*				
6. How will you describe your aging experience? * *(Paano mo ilalarawan ang kabuuan ng iyong pagtanda?)*				
7. What are the things you consider when you think about this stage of your life? *(Anu-anu ang mga bagay na sa tingin mo ay iyong kailangan sa ngayon?)*				
8. What are the fears and/or challenges do you anticipate at the moment? *(Anu-ano ang mga pagsubok o hamon na iyong inaasahang haharapin?)*				S.O.P 7
9. How will you cope with these challenges? * *(Paano mo haharapin ang mga hamon na ito?)*				

Questions	Accept	Reject	For Revision	Comments/Suggestions
10. What rewards or good things do you anticipate at the moment? * *(Anong mga gantimpala o mabubuting bagay ang iyong inaasahan sa puntong ito ng iyong buhay?)*	✓			
11. What do you hope for at this stage your life? **(Ano ang inaasahan mo sa yugtong ito sa iyong buhay?)* special	✓			
12. What kind of unique needs do you have? *(Anong uri ng mga natatanging pangangailangan ang mayroon ka?)*			✓	Maybe "special" is better
13. What other resources are you aware of for LGBT elders? * *(Anong mga mapagkukunan ang alam mo para sa mga matatandang LGBT?)*			✓	add "other". Maybe add examples of resources - media forums & platforms
14. Is there anything else you would like to share? *(Mayroon bang anumang bagay na nais mo pang ibahagi?)*	✓			

**Probing Questions if needed*

Evaluator:

03/20/19

LIEZEL E. VILLANUEVA, Ph.D.
Assistant Vice President and Director
External Relations and Professional Services Directorate
Manila Tytana Colleges
Pasay, City

Signature: _____
Licensed Number: _____
Date Accomplished: _____

Appendix C

SUMMARY OF COMMENTS AND SUGGESTIONS FROM THE VALIDATORS

Research Questions	**Validators**			
	Validator 1	**Validator 2**	**Validator 3**	**Validator 4**
1. What are the factors that make you happy at this moment of your life? * *(Anu-ano ang mga bagay o salik na nagpapasaya sa iyo sa kasalukuyan?)*			Acceptable	
2. What are the factors that make you sad at this moment of your life? * *(Anu-ano ang mga bagay o salik na nagpapalungkot sa iyo sa kasalukuyan?)*			Acceptable	
3. How do you describe your relationship with your mother and father when you are still a child? * *(Paano mo mailalarawan ang iyong relasyon sa iyong mga magulang noong ikaw ay bata pa?)*			Acceptable	
4. How do you describe your growing up years? * *(Paano mo mailalarawan ang iyong buhay habang*	From what years when you say growing up years		Acceptable	

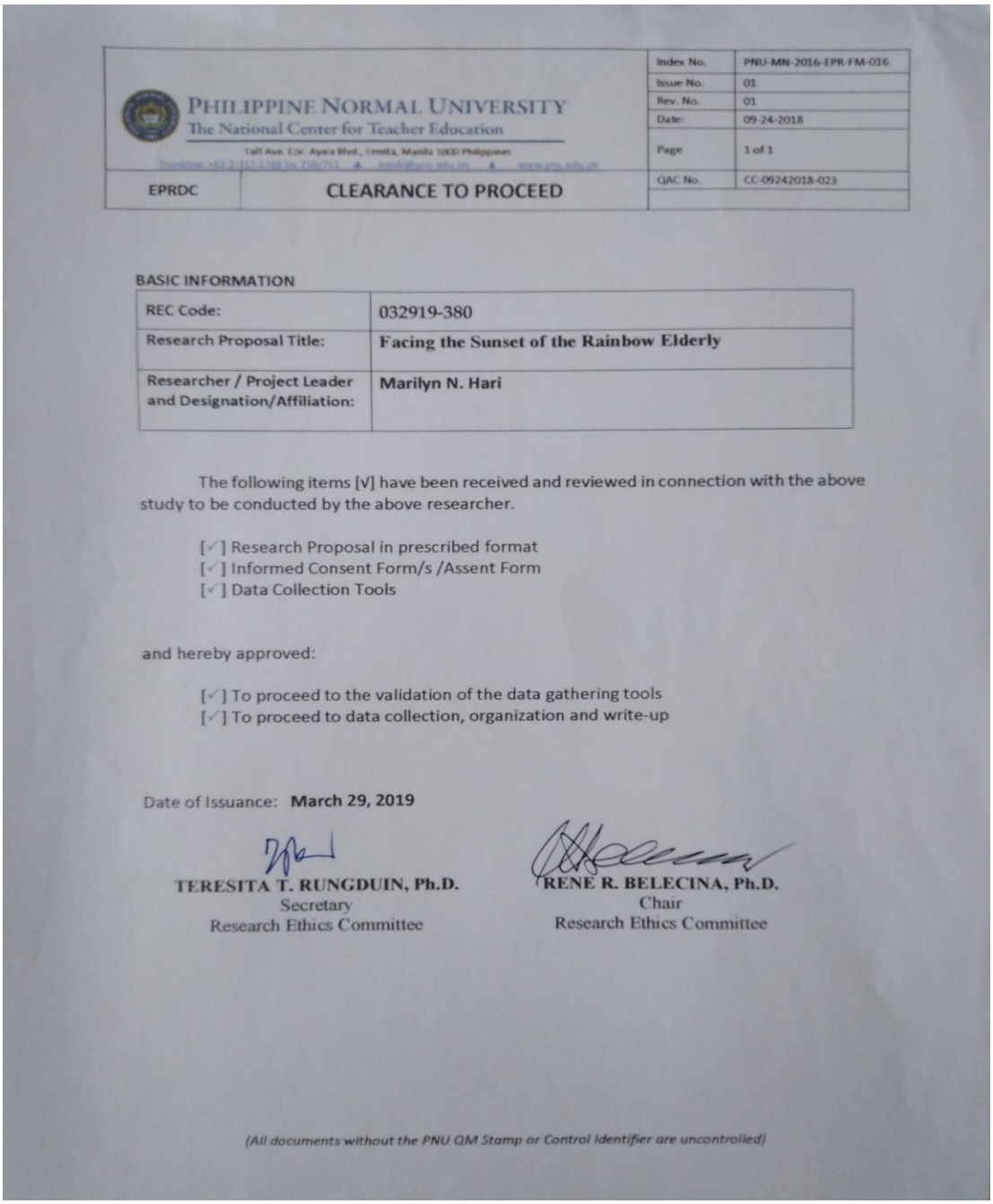
ikaw ay lumalaki at nagkakaisip?)				
5. What do you consider the point/event in your life which made great influences in your growing up years? *(Ano ang itinuturing mo na punto / kaganapan sa iyong buhay na malaki ang naging impluwensya habang ikaw ay lumalaki at nagkakaisip?)*	Be specific as a lesbian or gay		Acceptable	
6. How will you describe your aging experience? * *(Paano mo ilalarawan ang kabuuan ng iyong pagtanda?)*			Acceptable	
7. What are the things you consider when you think about this stage of your life? *(Anu-anu ang mga bagay na sa tingin mo ay iyong kailangan sa ngayon?)*			Acceptable	
8. What are the fears and/or challenges do you anticipate at the moment? *(Anu-ano ang mga pagsubok o hamon na iyong*		What is your definition of fear and challenges are they the same in your study, if not ten suggestion	Acceptable	

inaasahang haharapin?)		”Anu-ano ang pinangangambahan mon a iyong inaasahan na haharapin?”		
9. How will you cope with these challenges? * *(Paano mo haharapin ang mga hamon na ito?)*			Acceptable	
10. What rewards or good things do you anticipate at the moment? * *(Anong mga gantimpala o mabubuting bagay ang iyong inaasahan sa puntong ito ng iyong buhay?)*			Acceptable	
11. What do you hope for at this stage your life? **(Ano ang inaasahan mo sa yugtong ito sa iyong buhay?)*			Acceptable	
12. What kind of unique needs do you have? *(Anong uri ng mga natatanging pangangailangan ang mayroon ka?)*	Can you tell me your unique needs as elderly gays and lesbian?		Acceptable	Maybe special is better
13. What resources are you aware of for LGBT elders? * *(Anong mga mapagkukunan ang alam mo para sa mga matatandang LGBT?)*	Replace resources to a support group		Acceptable	Maybe mention example of resources like media forms or platforms

14. Is there anything else you would like to share? *(Mayroon bang anumang bagay na nais mo pang ibahagi?)*			Acceptable	

Appendix D

CLEARANCE TO PROCEED



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BASIC INFORMATION

REC Code:	032919-380
Research Proposal Title:	**Facing the Sunset of the Rainbow Elderly**
Researcher / Project Leader and Designation/Affiliation:	**Marilyn N. Hari**

The following items [V] have been received and reviewed in connection with the above study to be conducted by the above researcher.

[✓] Research Proposal in prescribed format
[✓] Informed Consent Form/s /Assent Form
[✓] Data Collection Tools

and hereby approved:

[✓] To proceed to the validation of the data gathering tools
[✓] To proceed to data collection, organization and write-up

Date of Issuance: **March 29, 2019**

TERESITA T. RUNGDUIN, Ph.D.
Secretary
Research Ethics Committee

RENE R. BELECINA, Ph.D.
Chair
Research Ethics Committee

(All documents without the PNU QM Stamp or Control Identifier are uncontrolled)

Appendix E

INFORMED CONSENT FORM

PAGPAPAHAYAG SA PAKIKILAHOK SA ISANG PAG-AARAL TUNGKOL SA KARANASAN SA PAGHARAP SA TAKIPSILIM NG ISANG RAINBOW ELDERLY

PANIMULA:

Ikaw ay inaanyayahang makilahok sa isang pag-aaral na tumatalakay sa iyong karanasan sa pagharap sa iyong pagtanda. Ang desisyong makilahok ay nasasa-iyo. Kung mamarapatin mong makilahok, ang iyong lagda ay hinihiling na ilagay sa huling bahagi ng dokumentong ito.

PLANO NG PAG-AARAL:

Sa pag-aaral na ito, magkakaroon ng pakikipanayam sa mga "rainbow elderly" particular na ng mga bakla at tomboy na may edad 65 at pataas. Propesyonal o hindi propesyonal, may permanenteng hanap-buhay, "part-time na pinagkakakitaan o walang hanapbuhay. Ang pakikipanayam ay tatagal ng higit kumulang na isang oras o isang oras at kalahati. Ang pakikipanayam ay gagawin sa isang lugar na maayos na maisasagawa ang pakikipanayam katulad ng iyong tahanan o malapit na kapihan sa iyong lugar. Sa panayam na gagawin, maaaring maitanong sa iyo ang ilang mga bagay-bagay tungkol sa iyong kasalukuyang karanasang hinaharap. Kung sakaling makadama ka ng kalungkutan at pagkabagabag, o gusto mo pang pag-usapan ang mga nailahad na sa panayam, ang tagapanayam ay boluntaryong makikinig sa iyo. Ang iyong maibabahagi ay makatutulong ng malaki sa pagkakaroon ng malalim na pag-unawa ukol sa konsepto at karanasan ng isang "rainbow elderly" sa bansa.

POSIBLENG BENEPISYO SA IYO:

Ang pag-aaral na ito ay isang paraan na magkakaroon ka ng pagkakataon na maibahagi ang mga bagay-bagay at iyong karanasan bilang isang indibidwal. Wala itong direktang benepisyo sa iyo ngunit ang iyong maibabahagi ay makatutulong ng malaki sa pagkakaroon ng malalim na pag-unawa ukol sa konsepto at karanasan ng isang "rainbow elderly" sa bansa.

POSIBLENG "RISK" SA PAKIKILAHOK:

Maaari kang maging hindi komportable o makadama ka ng kalungkutan sa iyong paglalahad ng mga kwento at karanasan. Subalit sa ganitong paraan ay matutuklasan mo

na mainam ang paglalahad ng mga saloobin dahil ito ay makaluluwag ng iyong pakiramdam. Ang pakikilahok na ito ay hindi itinuturing na "counseling" o anu mang uri ng "therapeutic" na serbisyo.

PANANATILING "CONFIDENTIAL" NG DATOS:

Anu mang sagot mo sa panayam ay mananatiling "confidential" at hindi mailalabas ang iyong pagkakakilanlan. Walang pangalan o anu mang datos ukol sa iyong personal na buhay ang ilalathala sa ulat ng pag-aaral na ito. Lahat ng panayam ay naka "record" gamit ang audio tape recorder at isusulat kung ano ang iyong nasabi.

ANG IYONG KARAPATAN SA PAKIKILAHOK:

Ang interview o pakikilahok sa pag-aaral na ito ay boluntaryo lamang. May karapatan kang magsabi ng iyong pagtigil. Hindi mo kailangang sagutin ang anu mang katanungan kung sa palagay mo ito ay makakapaglagay sa iyo sa isang alanganing sitwasyon o magkakaroon ng pagtatangka o "risk" sa buhay. Kung may desisyon kang umalis sa pag-aaral na ito, sabihin mo lamang na hindi mo gustong makilahok.

PAGLALAHAD NG TAONG GUMAWA NG PANAYAM:

Naipaliwanag ko ang proseso, ang posibleng benepisyo at "risk" ng pag-aaral na ito. Sa pagkakataong ito, mayroon ka bang katanungan? Kung wala ay maaari kang pumirma sa consent form na ito upang katibayan na ikaw ay boluntaryong sumasali sa pakikilahok o "interview" sa pag-aaral na ito. Maraming salamat.

Lagda/Signature

PAGPAYAG NG NAKILAHOK:

Nabasa at naunawaan ko ang mga nakasaad sa dokumentong ito o ito ay binasa sa akin ng gumawa ng panayam. Lahat ng aking mga tanong ay nasagot ng maayos. Ako ay boluntaryong sumasang-ayon sa pakikilahok sa pag-aaral na ito.

Lagda/Signature

JANE
Alyas or Pseudonym

5/20/2019
Petsa/Date

Appendix F

CONFIDENTIALITY STATEMENT

Persons assisting the researcher should complete this document. Due to the sensitive nature and protection of the participants of this study, the researcher also must sign this form.

As a peer/auditor working on the above research study at the Philippine Normal University, I understand that I must maintain the confidentiality of all information concerning the research participants. This information includes, but not limited to, all identifying information and research data of the participants and all information accruing from any direct or indirect contact I may have with said participants. In order to maintain confidentiality, I hereby agree to refrain from discussing or disclosing any information regarding the research participants to any individual who is not part of the above research study.

ELIZABETH BARNUEVO — 4/03/2019
Signature over Printed Name of Peer — Date

MARILYN NI HARI — 4/03/2019
Signature over Printed Name of Researcher — Date

Appendix G

COMMUNICATION LETTER TO THE PARTICIPANT

_____
_____
_____

Dear Sir/Madam:

Good Day!

I am a graduate student of Philippine Normal University taking up Doctor of Philosophy in Guidance and Counseling. As a requirement for the completion of my degree, I am currently conducting a study entitled **"FACING THE SUNSET OF THE RAINBOW ELDERLY"**, the said study focus on lesbians and gays aging experiences. The participants for this study are lesbians and gays aged 65 and above, single, working full-time, part-time and unemployed. Professionals and non-professionals.

In line with this, I have chosen you to be one of my participants and I hope that you will take time to accommodate my request. Rest assured that all data gathered will be treated with utmost confidentiality and will be used for academic purposed only.

I look forward for your kind response,

Thank you

Respectfully yours,

Marilyn N. Hari
Ph.D. Guidance and Counseling student

Noted by:
Dr. Peter Howard R. Obias, PhD, RPsy
Adviser

Appendix H

CORE STORIES OF THE PARTICIPANTS

LURING

"Mahal po ako ng aming magulang" he proudly said as he sobbed. He remembered how his father would even kill chicken for him and his companion whenever he pays him a visit. He never experienced the rage of his father. His father and his siblings accepted him for who he was. He had a happy childhood.

Luring is the youngest in their family. He has three siblings. His mother passed away when he was a year old. His father raised all of them. When he finished his elementary, his father married another woman. He and his sibling did not contest of their fathers' decision. Luring felt that his father already sacrificed years of being lonely because of them. His father had another four children with his new wife.

He never entered high school level even if he likes to. He devoted his time helping out his siblings. He was doing the house hold chores and laundry in their house There were even times when he had given up his job just to be with her sister who had just given birth. He never had any doubts of his sexual orientation. He just suddenly felt that he is a gay. That he likes men.

He spent his growing up years putting up small businesses. Knowing that he is a gay and that life is not going to be easy for someone like him, he vowed to earn lots of money. He focused himself earning for his future. He started putting up his own carinderia

and then followed by a store, bakery and billiard station. He invested in different ways where he could earn money. He saved all of his earnings and bought property for himself. He also helped his family. Traveling or partying was never his thing. He just stayed in his place and enjoys with his friends during their free time.

When ask of his achievements in life, Luring once again cried while telling his story. His greatest achievement was sending a total of seven children to school. They were not his relative. There was no adoption or legal process also. They are homeless children who had the courage to approach him and asked for his help. Send us to school they told Luring. Luring at that time was earning so much. He accepted them and let them live in his house. He sent them to school and gave them a comfortable life. He recalled giving them more than enough by providing them with sumptuous food and jewelry. Four of the seven children are now residing in United States. Two male had become an engineer and two females had become nurses. They had constant communication. They visit him when they come home to the Philippines. He still recalls that there was a time that one of them sent a messenger to give a plastic wrapped parcel to him. When he opened it, he was surprised to see bundles of money. He also recalled that they send him 75,000 US dollars one time. He felt so blessed that he had shared the money to the mother of the child. The child got mad at him saying that the money is solely for him. He then explained that if they will give him money, they also have to give to their mother. You will not be in this world if not for her he said. When he calls them, he is persuading them to get married and have their own family. He said he would like to see them have their family before he dies. They got mad at him saying he is not going to die anytime soon.

According to him, his loyal and loving friends is what he values the most. He remembered his friend Ricky as his most favored and trusted one. When Ricky left for Bohol, he summoned him to come back. It was his request so Ricky could sign in an acceptance document. Luring was giving Ricky his piece of land, a 98 square meter vacant lot. Ricky did not accept what he was giving. His attorney was amazed and said that his friend is really a true friend. Only a few would reject such fortune. Luring then insisted on giving Ricky's father an amount for the payment of their unsettled electric bill in Bohol that amounted to 28,000 pesos. The last time he saw his friend was when her grandmother died. Luring still has friends by his side nowadays. They visit him and would come whenever he called for them. He values his friends so much.

Luring has nothing to ask for. He is now living in a house he bought from his hard work. He has four door apartment earning 8,000 pesos per month, billiard renting business and a piggery. He does not have to struggle for his daily expenses. He has more than enough.

His greatest regret is not having married someone. He admits that he finds it so hard to live alone. He lamented that had he known that it was going to be this difficult to live alone; he could have married even a monkey like animal (chongo). He has to do things on his own. He is now living with his 17 years old niece. He can't rely on him. His house is in chaos because no one is around to clean and maintain it. He had stroke attacks three times already. He had experienced falling down the floor twice. That is why he never

cooked since then. He is afraid to fall again. He is thankful that his friend Junior is always around to look after him.

His fear is all about his properties. He is afraid that it will become the source of conflict among members of his family should he pass away. He is afraid that they will fight over his properties. He already talked to his lawyer. He just felt that it will cause trouble no matter what decision he has to make over his properties.

He voiced out his concern over our government procedure on giving pension among senior citizens. He said that it should be given automatically to all regardless of financial status. He questioned the process on which the seniors still had to go through an interview asking them of their source of income. There should be equality he said. He does not know of any organization for LGBT group in their area. He knew that there are organizations of that sort in Metro Manila only.

Appendix H

CORE STORIES OF THE PARTICIPANTS

ALDA

Alda mentioned that he loves to travel during her younger years. He never stayed in a place for a long time. He remembered being in different places as he desired. He is now a person with disability due to blindness of the right side of his eyes and the left side is also affected. He can hardly see. He is now 72 years old and is residing in Guiguinto, Bulacan. He had been in the place since 2005. He knew of the place because of his friend. He felt that God touched his life so he will stop wandering.

He is the sixth among nine male children in their family. His father died in early years of his childhood. He did not have good relationship with his brothers. There had been chaos among them. They never had harmonious relationship in their house. That leads him to finding happiness outside their home. He recalled having been of help to her mother. He gave her some of her earnings. He started finding his luck in other places. Way back year 2004, one of his brothers called him to inform that her mother passed away. His brother told him to stay where he is happy.

He learned that he was gay when he was in grade 2. He felt that he is not like any regular boy when he would easily cry whenever his classmates tease him or touch him. He acted like a girl. He joined in different singing contests. When he was in high school, he was busy being with friends learning how to manicure. He joined them to learn. He also learned cosmetology. He often stayed in different beauty parlor to observe what gays like

him are doing. When he started to practice her acquired skills, he had the chance to share some of his earning to her mother. Until such time that he felt their home is not the place where he could be happy. He went away from his family. Living his life to the fullest, he traveled from one place to another. He found belongingness in the presence of his friends. He forgot to think that he is not getting any younger. He did not save or think of the future.

He found happiness when he became Born Again Christian. He joined their congregation since 2013. He is drawing his strength from the Lord. He is afraid that their place will soon be abolished. He is praying that the Lord will open up a door where he could stay. There is a great hesitation in him to ask help from his family despite of his present condition. He never felt acceptance whenever he stayed in their houses. That is the reason why he decided to stay away from them.

What saddens him is the fact that he had not been receiving any support or pension from the government. But he is fully aware that it is because he never contributed even in Social Security System. It is all because of the lifestyle he enjoyed during his younger years. Nowadays, he is relying from their church for his daily needs. Their church is giving him weekly allowance of 300 to 400 pesos. It is his reward for his perfect attendance in their church activities. He is making sure to watch over his expenses so it would last for a week. That amount should cover his maintenance medicine. He also renders massage service to neighbors and in return, they will give him anything that they can give, be it in cash or in kind. There are days when he had problems on where to get food. He is relying

on the kindheartedness of their neighborhood. Luckily, he still has friends who would offer him food when he has nothing to eat.

At 72, Alda is still hoping for the cornea donor that he had been waiting for. He had been in the list of cornea recipient in Eyes Bank for two years now. If lucky enough, his operation will be on East Avenue Hospital. He also got tired of waiting but it is his only hope. It is his hope of regaining his normal life. At his age, he still hopes that he can regain his eyesight and that it will eventually lead him to being productive again. He is also hoping that he can eventually receive social pension from their municipality.

He is hanging on to his faith to the Lord. That he will provide for his daily needs. He is praying for his good health and he is afraid of getting sick for obvious reason, no one will take care of him.

Appendix H

CORE STORIES OF THE PARTICIPANTS

JAMES

James is now 67 years old, he said that still energetic and cheerful. He recounted how happy his childhood had been. He belongs to a big family. He has six siblings. Only two of them finished their college degree. They are helping their family with their finances and are trying hard to uplift their family situation. They combined their efforts by sending their nephews and nieces to earn their degree in college. Education is important to them.

His mother had the greatest influence on what he had become. He looked up to his mother as a strong and hardworking woman. It is to her that he dedicated his achievement the most. His father was so authoritative and strict during his younger years. His mother is now 84 years old and his father is 87 years old. Some of his siblings already passed away. His parents are living in their ancestral house with other family members.

He made a major decision in his life. He legally adopted a child. He has a daughter under his name. Her daughter is also his relative. She is the daughter of her niece who got pregnant out of wedlock in an early age. He took care of the baby since she was still an infant. He had been providing for his needs and her daughter is now about to enter college.

He is a retired faculty from one of the prestigious university in Metro Manila. But he is still working as a part-time professor in different schools. He still has to provide for his daughter's need and his need as well. He is receiving his pension but it is not enough

for them. He also has to help for their parents needs. But that responsibility is not solely on him. The family is giving their share.

James said that he sees himself as an established man. He had achieved his goals and dreams. He cannot ask for more. He is satisfied with the life he is enjoying with her daughter. Financial matter is not an issue for him. For as long as he can work, he can still provide for her daughter. He also has his nephews and nieces on his side to help him. They helped them finished their education and are now professionals. He sometimes gets lonely whenever he remembers his past love stories. It is a part of his past he cannot erase. But he is recalling it with joy in his heart. He stays positive as always.

His constant prayer is for God to give him more time to be with his daughter. So he could still see her finish her college and become a professional. It is his ardent prayer. He is exerting so much effort on keeping himself healthy. And he plans to go on practicing his profession for so long that his mind is still sharp and he is still physically able.

Though he is finding comfort and love in the presence of his family members, he is thankful for the present situation of the LGBT community. He is glad that there had been major changes toward the acceptance of the LGBT group as compared before.

Appendix H

CORE STORIES OF THE PARTICIPANTS

KURNE

Kurne, a native of Lumban, Laguna. He is 67 years old. He is a beautician, flower arranger and he creates wardrobes for different saints and patrons. At his age, it is spectacular to say that he still has 20/20 vision. He does not have medication for any illness. He is thanking the Lord for his good health.

When asked about his childhood days, he can't stop tears from flowing into his face. As if it is a magical word that brings him into reminiscing his cruel past. It is the soft spot of his heart. He sobbed and cried silently while still trying to compose himself. He cannot recall having joyful memory. He was subjected to physical abuse by his father during his teenage years. He was always bitten by his father by whatever it is that he holds into. He never had a scratch mark on his body. All the marks were lateral, marks that came from the beating of woods and bamboos being stricken on him. He never experienced going to other places or playing with anyone. He vividly recalls the brutality of his father. He swears being through hell.

He also recalled the cruelty of their neighborhood. Gay like him was never accepted and treated fairly. He experienced being stricken by stones and even in other places. He was twelve years old at that time. When he reached sixteen, before he reached eighteen, he started fighting back. He learned self defense so he can defend himself to whomever that

impose threat on him. He envied the gays of this generation. They are accepted by their community and the society. There were no laws protecting gay's way back then.

He fully learned of his sexual preference when he was seventeen. It was only during the time that he started falling in love with a man that he knew of his sexual orientation. Only then that he recalled being happy. He can't describe the exact feeling of being in ecstasy falling for the man his heart so desired. He had an affair with a man for eight years.

He then started his career of being a beautician, flower arranger and making wardrobe for different images of saints. He started earning money. He recalled having earned a lot whenever he accepts wedding entourage. It was an easy source of income. His focus at that time was to work and earn for a living. He was able to help his family with the fruit of his labor.

Kurne shared what he considered as his greatest blessing. He was given the opportunity to have a wife by his side. They lived together for thirteen years. They were never married. They were blessed with a son. They lived as a regular happy family. Providing for his wife and son was his greatest achievement. Sending his son to school and working for them had been his pride. But when his son was about to enter college, their relationship suddenly fell apart. He can't explain why suddenly it seems that there is a distance between him and his wife. Happy days of peaceful relationship were gone. They parted ways. His wife took the child with her and he did not contest. He understood that his wife might have longed for the love of a true man that he can never give. He accepted the separation thinking that it would be for the best. He does not want his son to hear their

unreasonable arguments that is why he agreed for the separation. His son now has children of his own. He has a good life. He is now a grandfather. He never visited them. It was a sacrifice he has to make so that he will not bring any inconvenience to the family he so loved.

At this point of his life, he said that life is difficult for gays like him. He used to have a cheerful life during the peak of his career but it ended as he aged. Slowly, people who used to trust him hesitated. They are thinking he is weak and can no longer give the same service as before. They even mentioned the term memory gap. They opted for the younger ones to do the job for them. All the big opportunities to earn slipped away. Big earnings had turn to just enough. Aging affected his source of income. Thanks to his loyal customers who still believes in him.

What he values most nowadays is the fact that he could still practice his craft and still earn for his daily needs. Nothing changed except for the tremendous decrease of customers and the opportunity to earn more. He is still productive as before. He can still provide for himself and his nephew who had been with him for a long time.

Just like anybody else, he also has fears in his heart. Fears like he can no longer provide for his own, for his nephew who is in grade 9 and the physical condition of their dilapidated house. He expressed that he can no longer take serious problems as before. He observed that as he aged, his views towards facing challenges had become weaker. He tends to ignore it. What he is hoping for is to have their house fixed because he is afraid that they will end up living in the streets soon. He is leaving his fate to our Almighty God.

His greatest regret is not having saved his earnings before. He could have given his parents the chance to experience a better life than what they had. Though he had helped them, he felt that it was not enough knowing the amount he used to have in his pockets. He regrets not having valued the opportunity given to him. He thought that he could have used that chance to uplift the situation of their family before. He is blaming himself for not being able to save it for today's use.

He admired the acceptance of our society towards the LGBT group. He said that "gone are those difficult days for gays and lesbians". He can only hope for the best to them. He would like to warn them though. To appreciate and value their earnings. To spend it wisely and save some for their future. That they should not rely on what the government can provide but rely on their power over themselves.

Appendix H

CORE STORIES OF THE PARTICIPANTS

DOC

Doc as he is commonly called by his family, friends and patient is a practicing doctor by profession. He is a pediatrician. He has numerous clinics in different hospitals and establishments. He travels from one place to the other to attend to his patients. He is now 66 years old and is living in Makati City.

He is the only boy among three children in their family. He had happy memories of his childhood. Her mother knew of his sexual preference when he was still young. He also has a sister who is a lesbian. He recalled having spent his growing up years with his siblings and cousins. They live in a compound and he was surrounded by relatives. Life for him was school – house and vice versa.

His father was a tombstone maker and his mother was a seamstress. He saw the initiative and eagerness of his parents to provide them with all their needs and send them all to school. They would always tell them that education is the only precious gift that they can give. They inculcated in their minds how valuable education is. That had become his motivation and influence in life. He vowed to finish his studies so he could help his parents and let them experience how to eat in famous restaurants and the opportunity to travel in different places. He pushed himself to the limit and eventually finished his studies. His dream had become a reality.

His father does not have inkling on his sexual orientation. One time, his father asked his mother as to why he does not have a girlfriend. His mother knowing his true identity talked to his father. His father never asked question about it since then. He made it clear that he never had any bad experience with regards to his sexuality. He was accepted by his family for who he really is.

He is contented with his life at present time. He cannot ask for anything but good health for him and the rest of his family. He has lots of things to be thankful for. He was able to achieve his goals and aspirations in his life. He had become the bread winner of their family and he accepted it with joy in his heart. He has nothing but deep sense of appreciation to our God. He felt that he already served his purpose in life. He was able to help his family and become of service to his patients and to our country.

He is ready to face our master anytime. He could not ask for me. He is still keeping himself busy with his profession and being with his friends sometimes. He admitted that he can no longer do the things he used to do in the past due to his aging. Like smoking, drinking and partying. He is now paying so much attention on how he could remain healthy. He said that challenges and fears are part of our lives. We make our own decisions and own choices. He always expects for the unexpected and is always prepared to face it.

What he values most is his good relationship with his family and friends, his health and his profession. He wanted to impart wisdom to the LGBT community, that is, to be a good example to others and strive hard to earn for their future and value their self integrity. Live one day at a time to avoid pressures and anxieties.

Appendix H

CORE STORIES OF THE PARTICIPANTS

RENEE

Renee is a native of Lumban, Laguna. He is now 65 years old and is living in the house owned by the family of his sister who already passed away. He is roaming around their neighborhood and nearby establishments as he is a small time lottery agent. “Loteng as it is commonly called along rural areas. He is getting his daily needs from the commission he is earning as a loteng agent. It is just enough for himself. It cannot feed a family he said.

He regrets not having finished his collegiate degree. It is due to financial struggle of their family that he had to stop studying way back then. He was a Bachelor of Elementary Education in Union College at Sta. Cruz. He was in his second year in that course. His non-continuance of his studies resulted to his being just a loteng agent he narrated.

He was on his first year high school when he learned of his sexual orientation. He was accepted by his family for who he was. He never had any issue on acceptance of his parents. He never experienced having to go through hard time because of being a gay. He was once popular in their school because of his academic excellence. He usually represented their school during scholastic competitions. He was accepted in their school and neighborhood and never mentioned of any experience on bullying.

He is comfortably living with his remaining family members. His sister passed away early leaving four of her children. He was with them since they were young. He dedicated his life to them. They finished their studies and are now professionals. He is still providing for his own needs and he is receiving the social pension from their municipality amounting to P1,500 pesos every three months or P500 per month.

The presence of his immediate relatives is making him feel secured. He feels that they will not abandon him should he need their help in the future. He is confident that because he was with them when they were still young, they will not let him be alone and they will take care of him in the years to come.

He often prays for the continuity of the good health that he is enjoying. He prays that his relatives remain healthy also. They are his refuge. He would not want them to get sick. He jokingly said that he would rather pass away earlier than them. He could not help them in any way because he does not have family of his own.

Appendix H

CORE STORIES OF THE PARTICIPANTS

DORY

Dory used to work as a domestic helper in Hongkong for more than 26 years. Prior to that, she also worked in various factories in Bulacan. She finished her secondary level in her home town. She is now 67 years and is living alone in her own house along with her dogs. They are her companion and security.

She was the youngest in their family. At an early age, her family knew of her sexual orientation and they were supportive of her. She recalled having happy times playing with her siblings and friends. She was called “Doro” by her sibling and friends. Her parents and the rest of their family members treated and accepted her as if she was really a male member of their family. She was allowed to do activities and play toys that are meant for boys. She was allowed to wear outfit that her brother wore at that time. She did not have bad memories of her childhood.

In her adolescent years, she was an observant of what was going on in their family and neighborhood. She observed that a lot of married couples are not living harmoniously. They always have fights over petty things and financial issues as well. She recalled having pitied the wives at that time as they had to take care of the household chores, take care of their husband and kids and still ended up being verbally or physically abused. No matter how tired and restless they are, they still end up being unrecognized. She felt that what was happening to the wife inside their marriage life is not fair. That woman is always in the

losing end and that the husband is always in the winning streak. It was a situation that made a great influence in her growing up years.

Doro decided to retire from being a domestic helper since 2016. What made her decide to finally go home to our country is her minor health issues. She is now complaining of her knees. It impeded her from performing her duties in her work. But she did not go home empty handed. She had saved her earnings and had preparations for her retirement. She was able to contribute to Social Security System so she can have pension later on in her life. She also invested in life insurance policies. But she was dismayed that after years of contributing, the company collapsed and had to return just a portion of her investments. She also bought a piece of land and later on constructed a four door apartment and a commercial space in it.

Dory said that she is now living peacefully in the house she provided for herself. She is also receiving her pension from Social Security System. Earnings of her apartment and commercial space are being used for her daily needs and paying to the loan she made in the bank for the construction of her apartment. It will soon be over she said. At her age, she is still helping her siblings and their children financially just like when she was still working abroad.

Her achievement list includes helping her family members financially. She helped her nephews and nieces with their educational expenses. The property that she earned for herself is her greatest achievement. As compared to others, what I did from my hard earnings is not bad at all she shared. Doro literally prepared for her future.

She has only one regret in her life. That she did not push through with her plan of adopting a baby in her younger years. Her siblings wanted her to do the same so she could have someone by her side when time comes. But due to the nature of her work, she had no chance to fulfill that dream. She wanted to be a hands on mother and father to the baby she planned to adopt. It is now too late to accomplish her dream. She can no longer take care of a baby as she is now in her aging years. It was her greatest regret in her life. She now envies her cousin who is also a lesbian like her. Her cousin married and tried to have a family of her own. She was blessed to have two children. Her cousin and her husband parted ways. Her cousins' children are both grown up and they accepted the sexual orientation of their mother. She is envy of her cousin and how she wished she had adopted even just one.

Nowadays, Dory narrated that she is simply enjoying life in its simplest form. She is contented with her present situation. That she got to eat times a day and that she still enjoys good health condition. Though she had knee problem, she still feels blessed. Her only prayer is that God will let her continue to enjoy good health condition. She is afraid of getting illness that would make her be dependent to his siblings. She is afraid of being in a bed ridden state because she had no children or partner to take care of her. She is in constant communication with our creator.

Her motivation and priority nowadays is to stay physically fit. She is watchful of her movements and of what she is eating. She is maintaining her healthy life style so she could enjoy good health. She seldom goes out from her house. She only goes out when she

had to go to church and attend the mass. She sometimes has chats with her childhood friends and classmates and she is offering that they can use her place as a venue for different occasions. Doro is still a businessman after all.

She mentioned that still she had some unfulfilled dreams in mind. That is to travel and enjoy different places even just here in our country. Even just a simple out of town would make her happy. Her years of stay in different country due to her work had stopped her from exploring her own country.

Appendix H

CORE STORIES OF THE PARTICIPANTS

Eli

Eli described herself as a survivor. She jokingly said she survived a total of twelve bosses from different companies where she worked as an administrative staff. She worked directly to her previous bosses. She has to transfer from one company to another when attitudes are no longer bearable.

Eli is the youngest in their family. She has two siblings. Her mother was a single parent. Her mother had a difficult time earning for their daily needs. She renders laundrying services to different families. Their life has never been easy. Her sister is also a lesbian. Her sister suffered so much beating from their mother. Her mother did not accept of her sister's sexual orientation. Her sister had to hide her activities from their mother until she reached college and she seldom went home to their house. Their mother had to seek help from barangay officers to summon all those families who would accept her sister so she will not have a place to stay. That happened several times in different places. Until their mother got tired and finally accepted the situation.

Eli's mother talked to her one day, she was 10 years old at that time. She said that she can no longer bear if Eli will also become like her sister. She noticed that Eli is somewhat similar to the manners of her eldest daughter. It was a stern warning for Eli. Their mother did not allow Eli to have a short hair. It was for strict compliance. She would also make comments whenever Eli would have female close friends, comments like "why

are you two so close?". She would always ask questions and suspects whenever Eli have friends visiting their house. Eli lamented how sad her childhood life had been. She also experienced the beating. Her mother, who had an inkling of her orientation, would force her to wear dresses that she hated to wear. There was also a time when her mother connived with her grade five adviser. Eli was surprised when her mother bought her a new shoes, short and t-shirt. Her mother forced her to wear all of those during their intramurals day and she got her hair fixed. Eli only learned that her mother and her adviser had chosen her to be the muse of their grade level upon arriving in their school. She was forced to do the modeling on stage. Her friends who knew of her orientation laughed at her and made funny comments. Eli cried. She was subjected to so much humiliation. She was so ashamed of herself and she felt so much sadness.

Eli narrated that she knew of her sexual orientation when she was nine years old. It was at that time when she started getting attracted with her female classmates or friends. She was suppressed to reveal her true self. Her mother forbids her from doing it. She had learned to be so secretive. It had become her craft. She was afraid that her mother will know of her activities and hurt her more. Eli said that it was the saddest part of her life. She can not reveal her true self. She started having relationship with girls when she was thirteen years old. She used all of her unpleasant childhood experiences as her motivation. It has become an eye opener for her. That life for someone like her will never be easy. She thought that if her mother cannot accept of her orientation, the same will apply to other people around her. She mentioned that education is a tool to somewhat have an edge from others. She vowed to finish her college degree so she can eventually be free somehow.

True to her words, she graduated and earned a degree. Thanks to the scholarship grant given to her. The freedom that she so longed for came with bitterness as her mother passed away when she was 24 years old.

Eli is now 70 years old and she is living with her brother's family. Their simple style of living had been her source of joy. They are all healthy, they get to eat three times a day and she is seeing her grand children grow. She is not hoping for so much except for the acceptance of her family when it comes to her aging. Her family is her only hope because she does not have a family of her own. She is praying that she be treated with respect though she can no longer help them like before. She is not telling them of her fears. She is lifting it all up to the Lord.

What saddens her nowadays is the fact that she can no longer change her story. That time is no longer on her side. That she can't do anything even if she wants to make changes to uplift her present situation. The chances are all gone she said.

Eli cannot describe the sadness in her heart. She is feeling extreme loneliness even if her family is around. There is still sadness in her heart. She does not know where it is coming from. She cannot tell if it is coming from the fact that she has no partner by her side in her aging years. She is thinking that situation may be a lot different if she has someone aside from her relatives, who will take care and love her as she age. She had several partners in the past. Each relationship lasted for at least five years or more. Different lover, different story and different situation.

Eli said that she is afraid of getting sick and be taken care of by her relatives later on. She is afraid that she will get terminal illness that would require her family to spend for her. She is praying that the Lord will forbid it to happen. It will be very unfair for her family she said. That she spent her younger years and opportunities with her partners and her family had to take all of the sufferings now that she is old. She is also afraid that they will get tired of taking care of her. She is praying that what she saw in television shows, about senior citizens being maltreated, will not happen to her.

She is helping her relatives by taking good care of her health. She is cautious with what she is eating and even with her movements. She gets away with activities that will make her fall or slip. She jokingly said that she feels paranoid at times. That is the only way she thought she can help her family.

Though Eli is receiving her monthly pension, she still wants to find ways on how to earn an income for her daily expenses so she will not be totally dependent to her family. She would like to have a source of income so she can tell herself that she can still provide for her own needs.

She is praying for an increase of the amount of the monthly pension of the senior citizen. The pension amount is not enough even for her monthly medicine maintenance. It is not even enough for the medicines of the senior citizens. She said that the government should find ways on how to give the maintenance medicines for the senior citizens for free. And if possible, the government or any organization should provide a livelihood projects solely intended for the senior citizens. It is needed so they can somewhat provide for

themselves and they can still be productive. She also said that there should be an association solely for their age bracket that will provide socialization activities for them.

She would like to warn all those whose sexual orientation is similar to her. That they better prepare themselves for whatever it is that they will go through. Life for us is never and will never be easy especially in aging years. Because when we reached this age, we will be alone and our family is our only hope. So be kind to them.

Appendix H

CORE STORIES OF THE PARTICIPANTS

JANE

Jane vividly recalls how she was attracted to the daughter of their landlord when she was five years old. She remembered accidentally kissing her. She found the girl really beautiful. At that time on she realized that she was different from an ordinary girl. She is proud to say that boys and girls fall for her because of her good looks. “Gwapo kasi ako nung araw eh” she said.

Jane has two siblings and she was the eldest. Her mother who was a single parent was diagnosed with cancer when she was a teenager. The situation prompted her to work in an early age. She had to help their mother providing for daily needs and the medicines as well. She was forced to work in a karaoke bar visited by Japanese nationals. She had to sit by them while they are drinking and singing. Part of her job was to drink liquor and alcoholic beverages. It was the easiest way to earn money. She had her commission and monthly salary as well. She eventually went abroad for higher income. There she started having relationship with girls. She recalled having been in a serious relationship seven times with twelve years as the longest one. Her mother died and she had to support for the needs of her siblings. Her world changed when their mother passed away. She started to spend lots of her money for good times. All of her income and all that is being sent to her from abroad are being spent unreasonably.

When she came from abroad, she worked as a masseur attendant in one of the five star hotels in Subic. She was in a relationship with her girlfriend at that time. They were living in together. Bad luck came her way. Her boss invited her to drink in his place and she ended up being raped. She remembered waking up in bed with just the blanket covering her body. Her boss was no longer around. He just left a note saying that he can eat all the food she likes and left money for her. She then realized that he raped her. She did not know what happened and she suspected that her boss poured drugs in her drinks. She felt that her boss treated her like a prostitute. She hurriedly looked for her boss and confronted him. She created a scene in their work place. He was a respected businessman and is managing lots of people. She embarrassed him in front of many people.

Days passed by and Jane noticed changes in her body. Her bust started to be bigger, her waist line is increasing its measurement and she started craving for food. She started vomiting. Her live in partner who was aware of what happened to her told her that she might be pregnant. They hurriedly bought pregnancy test kit and tried several times and the result was positive. They also proceeded to the hospital for check up to confirm their suspicion. She was really pregnant.

She then faced another hardship. She had to choose between her live in partner and the baby in her womb. It was the hardest decision she has to make. She had been with her girlfriend for several years. They lived as husband and wife. They loved each other so much. She decided to keep the baby. She believed that the baby do not have to sacrifice.

The baby need not be aborted. What happened was not the baby's fault. It was her fault she said. That is why she needs to keep the baby alive. It was a sacrifice she has to make.

No physical contact happened between them since then. He let her stay in the hotel that he owns. He took care of all her and the baby's needs in the hospital. But the situation reached the ears of the wife of her boss. The wife got so angry not knowing of the true situation. She threatened to kill Jane and the baby. She was the victim she said. But the wife and the kids of her boss were so furious of her. Jane out of fear decided to leave and stay away from them. She never wanted any trouble. Knowing how influential their family was, she was afraid of what they can do to her and her baby. She never set foot in Subic since then. She doesn't want anything to do with them anymore. It was the decision she made. Jane raised her child alone. She single handedly took care of all that has to be provided for his son. They faced life together. His son now has children of his own. Jane is now a grandmother.

Jane is now 67 years old. She is living in a room rented by his son. He is taking care of all her needs even though she has a part time job, that of being an on call massage attendant. They do not live together in one house because of space and privacy issue. House rental in Makati is so expensive. But their rooms are only few blocks away. She got to see her grand children and son every day. Her brother also lives nearby and she also sees them whenever she likes.

Jane confessed that she still longs for sex and a partner. The thought that his son will be embarrassed in their neighborhood is stopping her from doing anything. She still

has to sacrifice for his son over her own happiness up to this time. She admitted that getting lonely at times. She only feels happy when she is with her family and grand children.

She vented out that it is really difficult to be alone. Though his son and brother is just around, she finds it shameful to ask help from them. She only asks help only when emergency cases occurred. She said that her son and brother have family of their own to attend to also. She finds it hard to call for her son at times because of the thought that he has to leave his family to attend to her. But his son never abandoned him. He is just a phone call away whenever she needs him. It is her personal decision not to call him at times. She feels so afraid whenever she is not feeling well. She is just helping herself fight against all her fears. She is always praying.

She prays that all her family members be given the chance to all live in one roof together. She would like them all to live in one house. It is her dream. That they will all live helping each other even if they will not have luxurious life. She also hopes for a partner in life who can be with her in her aging years. She regrets not having saved all of her earning during her younger years. She could have saved a part of it had she known that she will have a son of his own.

Nowadays, Jane narrated that she lives with intense fear in her heart. She stated that it is so difficult to be alone. It is so scary. All of us will go through the process of aging. It is hard when you are getting sick and the time when you are totally worthless. It is so scary, she said.

Appendix H

CORE STORIES OF THE PARTICIPANTS

LILY

Lily is a native of Guiguinto, Bulacan. He is the eldest among seven children of their parents. Her childhood memories evolved in only one situation, which is the hardship she went through helping her mother earn for their living. Life was tough then, she said. She and her mother had to walk through different streets to buy bottles and metals from people. They had to bring with them their wooden push cart. It served as the compartment for the bottles and metals they bought from people. The more bottles and more metals they bought, the heavier it becomes. She also recalled selling banana cue, camote cue, rice cake and she also become a small time lottery agent in the streets. She had to walk a lot to look for buyers and betters. Street had become her friend. She remembered having been through lots of hardships working jobs that are intended for males.

Lily and her mother raised one of her nephew. She was the daughter of one of her sibling. They raised her together. They send her to school. Her nephew in an early age also helped them with their business. They all had to wash the bottles they bought from the streets and later on sells it to their buyers. Bottles are being used as containers for fish sauce.

Lily is now 65 years old. She is still walking and roaming around their neighborhood to earn for her needs. She is a small lottery agent. She roams around their neighborhood to look for those who would like to place their bets. “Huweteng as she calls

it, is her source of daily income. She is earning at least P200.00 pesos a day. It will even rise up to P300.00 if there are lucky winners from those who placed their bets from her. It is her commission for being their agent. There are times that she ended empty handed. It happens when there are no winners from her betters. She is using said amount to buy her food and medicine as well.

Her nephew is sending her money from abroad. She sends her at least P2,000.00 to P2,500.00 per month. She only asks money from her if it is really needed. She is ashamed to ask money all the time. Her nephew is still paying for the memorial expenses of her mother. She does not want to be a burden to her. But when she runs out of her medicine, her nephew would send her extra money for that purpose.

Lily is living alone in her house. She purchased the lot from her hard labor, from buying and selling bottles and metals and being a huweteng agent. She bought it on an installment plan. Her nephew provided for the construction of their house. She considered it as her achievement. She is not afraid being alone because the Lord is with her all the time. She is relying on her strong faith to God for security and good health.

She also narrated the time when she also experienced being in a relationship with another woman. They lived together but parted ways due to some reason. The woman had to go back to her hometown. It was long time ago, she said.

Lily said that she is contented with her present life. She cannot ask for more. She is ready to face death anytime. She has no regrets in her life. Her only prayer is for God to forbid that she be ill and be bed ridden. She fears that she will be miserable if that will

happen. She recalled taking care of her mother for five long years. It was hard to take care of a bed ridden patient she said. Her mother died due to old age. She is afraid to go through that same situation. She is praying that out of her six siblings, at least one of them would have pity to take care of her should that happen. She is still working hard nowadays to save so she would have money to compensate for whoever will take care of her as she grow older. Her siblings visit her on a monthly basis and they are reaching to her through phone calls to check on her. Except for those fears, she feels satisfied with her current situation.

Nowadays, Lily is devoting her time serving the Lord through various church activities. It is her only source of socialization. She only joins activities that will glorify the Lord. She knows in her heart that God is with him and will be with him until the end of her life.

Appendix H

CORE STORIES OF THE PARTICIPANTS

EPONG

Epong is a native of Negros Oriental. She is 69 years old and is living alone in a rented room in Makati City. She has no relative around her. She only has friends to rely on. Few years ago, she retired from being a MAPSA traffic enforcer due to age limit. She was able to get a lump sum amount from her GSIS retirement plan. She invested the money in a small sari-sari store business. Her business went well only for a year. She had to close it due to bankruptcy. With no job and pension to receive, she asked help from her friend who is also a MAPSA enforcer. Her friend owns a store and she was allowed to be a helper. She pays her on a daily basis. It is Epong's only source of income to sustain her daily needs. Epong still has to wait for another two years before she could receive her monthly GSIS pension.

She learned of her sexual orientation when she was eight years old. Her father does not accept of it. The word "galit na galit ang tatay ko sa akin, bakit daw ako nagka ganito" was repeated several times. But her mother treated her well. It runs in their family. It runs in their blood, Epong stated. Her uncle and her nephew on her mother side is a gay. Her aunt on his father side is a lesbian. She remembered having entered into serious relationships with woman. One lasted for ten years. They parted ways because her live in partner would like to have a change of life. She did not stop her. Her girlfriend got married and ended up having three children. Countless relationships followed. But she was open

minded as they left her side. She admitted that she knew it will not last a lifetime because her partners eventually wanted to have family and children of their own.

Except from the rejection of her father, her childhood are filled with good memories. She was an athlete. She enjoyed playing track and field, volleyball and softball. She was a full time athletic scholar. She had so many friends inside and outside the school. She did not recall having experienced bullying or anything of that sort. She was accepted for who she was.

Epong do not like to go home in her hometown. It is not an option for her. She admitted that her hometown is a really nice place to stay but the setback is the lack of opportunity. She said that there is no possible source of income in their place. You may have a good life but you will not have money she said. She opted to stay in Makati knowing that there is still a great possibility that she could still have a decent job or a business and she can still provide for her own. She prefers to be alone. She is having a happy life she said. She is the type of person who stays at home most of the time. She does not want to travel or roam around. Her room is her haven.

Epong landed in Makati in 1973 when she started out as a housekeeper until 1987. She then became a traffic enforcer for thirty long years. She was always commended for her hard work and great performance. She recalled how she can manage to stand alone in the middle of the streets and lead everyone into smooth traffic situation. She takes pride reliving all of the memories in her mind. She really had no intention of retiring except that it was a mandatory age retirement. She valued her work so much. “Ang ganda ng trabaho

ko, ang sarap ng buhay ko" she said. At her age, her body and mind is still looking for those previous daily routine she had. If they would only allow her to render her service. She still has the desire to work again. It bores her to stay at home the whole day. It is killing her and making her weak.

She now has a peaceful life living alone. She does not have any regret of her past. She is just praying that she can stay healthy. It is her ardent prayer that she can soon have a job or a small store to manage so she can still provide for her needs. She is leaving his fate to the Lord. She is in constant communication with the omnipotent. At her present age, Epong still has the great desire of being productive. Being jobless and staying inside her home is boring her.

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CORE STORIES OF THE PARTICIPANTS

TENG

Teng used to be a well known faith healer when she was 17 years old. She was helping others by healing them through strong faith in God. It lasted for 16 long years. She stopped when her own faith was tested. Her grandfather who was sick at that time and she cannot do anything about it. She was not able to heal or help her grandfather recover from his illness. The passing away of her grandfather was followed by the death of his own father. She began to question her own capability. She was able to help others yet she could not help her own relative. Her world suddenly falls apart. Since then, she rejected people who are coming to their house asking for her help.

She was so close to her mother since she was young. Her life during her childhood evolved on house and school. She did not disclose of any bad experience during those times. She recalled working in a garment factory for a long time. She was entrusted to work as a point person in the stock room. Her abilities on estimating and cutting materials were tested. She also experienced making rubber slippers from scrap materials. She was making and selling them without capital. It was at that time when she began to know of her sexual orientation. Her colleagues from her worksite would often tease her to court one of their co-worker. She was shy at first but eventually gave in. It was the start when she accepted who she really was.

She recalled how dedicated she was with her job. How she would still manage to report for duty even though she came from a night long outing. She recalled having been into different outings with friends. She was a generous kind of person. She was spending for friends during their happy get together. But despite the outings and enjoyment, she was still determined to prioritize her job. She was commended many times for her punctuality and great performance. Her co-workers envied her for that.

She is now 66 years old. She is living in the house owned by their family with her 86 years old mother. She is taking care of her bed ridden mother. All of her surviving five siblings have family of their own. She is the only one available to take care of their mother despite her age. She has a small sari-sari store which is the source of her income. She is getting their daily needs from its income.

At her age, Teng still wants to earn money to buy her own house. She does not like to be included in the dispute over their property. She do not want to be included in inheritance issues. She is complaining of how hard it is to grow older. There are still things that she likes to do but can no longer do it. She is afraid that her mother would pass away anytime soon. She is praying that God will forbid it from happening. She still has plans of fulfilling the dream of her mother of seeing her brother again. But she is feeling hopeless as news reached her that her uncle is in the United States and is in coma stage.

She takes pride narrating her story on how she leaded their Purok on achieving various citations in different barangays and municipalities because of the commendable cleanliness of their place. She was once a Purok leader in their area. She leaded their

neighborhood on keeping their place clean at all times. She is now again a member of an organization in their purok despite her age. They are in the stage of organizing and discussing projects that will be beneficial to their fellow senior citizens.

She is not asking for anything for herself anymore. It is always for her family and nieces/nephews. She is hoping that she could receive the social pension from their municipality anytime soon. She stressed her dismay over the process of giving it. Others are recipient and others are not. There should be equality regardless of situation and political inclination of the family. She stated that a particular senior citizen is barred from receiving the social pension because her sibling is not on the side of the incumbent officials. Teng mentioned that “equality among all senior citizens should be observed”. They should be treated with utmost respect She also stressed her concern about the amount of the social pension. It is not enough she said.

Appendix I

SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Themes		Statement of Gay and Lesbian elders											
		Luring	**Alda**	**James**	**Doc**	**Kurne**	**Renee**	**Dory**	**Eli**	**Jane**	**Lily**	**Epong**	**Teng**
On Challenges of Aging gays and Lesbian	**On Health Issues**	*"Kaya nga po eh, ako nga na stroke na po ng tatlong beses katunayan di na ako nakakapagluto na dahil nga natatakot ako. Dalawang beses na po ako natumba dito. Ayaw ko po mag ano nang, baka mabuwal na naman ako."*	*"Well, ang gusto kong mangyari sa akin ay dumating sana sa punto yung inaano kong cornea, kasi ano, kasi nakalinya na ako sa eyebank, tapos sa operation ko sa East Avenue. Magtwo two years na nga wala pa talaga yung ano, yung ano, yung donor. Kasi sabi sa East Avenue ay sa eyesbank, hindi lahat ng namamatay nagdodonate ng cornea, makakapag trabaho na ako sa ibang pamamaraan."*	"*Ang hiling ko lang a y bigyan pa ako ng panahon nasana ay makapagpatapos pa ako ng aking unica hija. She is my adopted child pero anak din sya ng pamangkin ko, ako na ang nagpalaki sa kanya simula pa lamang noong sanggol pa sya nasa akin na sya. Patuloy pa rin sana sa pagtuturo at paghahanap buhay hanggang able pa at matalas pa ang isip"*	"*Sa ngayon, masaya naman ang buhay. Yun nga lang at matanda na pero hija kalabaw lang ang tumatanda, tama ba ako?.Salam at sa Diyos, sinikap ko talagang maging healthy living na simula noong ako ay nag edad kwarenta, kung dati or noong ako ay bata pa bata pa maraming bisyo tulad ng alak, sigarilyo at pagkain ng masasarap … sa ngayon talagang strict na diet."*		"*Sana maging healthy pa ako, kinatatakutan ko e, sana mga pamangkin ko ay wag magkasakit. Sana kapag ka ano ay mauna na ako sa kanila. (tawang impit). Ayaw kong maunang ano. Basta gusto ko mauna ako sa kanila. Wala naman akong pamilya, kasi nga kapag sila ay maysakit, wala naman akong maitutulong. Wala akong trabaho. Kaya ayaw kong sila ay magkasakit. Basta mauna ako sa kanila"*	"*Yung magkasakit ako. Na kayang wini wish ko nga pag nagkasakit sana kako't kung ako ay kukunin na ni Lord, sana wag na akong magpabigat pa sa pamilya ko Mostly mga sakit yung mga alagain. Na stroke. Yun ang ayaw ko. Dahil ayaw kong maranasan ng mga kapatid ko. Na alagaan pa nila ako. Kasi alam o yung hirap nga ng buhay. Yun ang takot ako na ganun ang mangyari sa akin din na magkasakit ako o wag naming mangyarin g ganun.*	"*Ang fear ko ay yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailanganin pa nila akong gastusan.*	"*Yung minsan maysakit, may nararamdaman ako na masakit na masakit sa kanang tagiliran ng stomach ko. Natakot ako kasi, unang una pamilyado yung anak ko. E dahil nga sa pamilyado na, kailangan ko matutong mag isa. Natatakot. Nanduduon yung takot. Syempre nag iisa ka lang. Yung mga ganung insidente na emergeny. Pero tumatawag pa din ako. Nagbabaka sakali. Pero naghahati yung puso at isipan ko kasi iiwan nya mag iina nya. Paano kung ma admit ako, kawawa nman yung mag iina, kaya, yun ang kinatatakutan ko.Yung wala akong kasama"*	*"Magkasakit ako. Kunin ako ni Lord, pwede. Huwag lang patatagalin dahil kawawa ako kapag ako ay nahiga. Sa nag alaga ako sa nanay ko, ako nagdusa. Isipin mo limang taon nakahiga. Ako ang nag alaga. Inalagaan ko hanggang sa namatay"*	*"Dasal lang ng dasal sa Panginoon na huwag sana akong magkasakit. Kakapit na lang kay Lord."*	

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SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Themes		Statement of Gay and Lesbian elders											
		Luring	**Alda**	**James**	**Doc**	**Kurne**	**Renee**	**Dory**	**Eli**	**Jane**	**Lily**	**Epong**	**Teng**
On Challenges of Aging gays and Lesbian	**On Basic Needs**		*"Pagdating sa umaga kung saan ako kakain, kung saan ako kukuha ng pagkain, saan ako hahanap ng pagkain. Lalabas ako araw-araw. Sa umaga paggising ko, minsan doon ako nag aalmusal, sa mga close friends ko. Minsan doon ako kumakain o kaya kung may pera ako bibili ako."*			*"Yung mga pang araw-araw na buhay. Iyang when it comes sa pagkain, when it comes sa mga pansariling pangangailangan. Ang pangangailangan ko ay yung stable pa rin na pagkakakitaan"*			*"Yung gusto ko na meron man lang akong source of income ko na masasabi ko sa sarili ko, na eto meron pa din naman akong pang sustain sa needs ko."*	*"Yung makakasama sa buhay kapag tanda at yung pang araw-araw na gastusin."*		*"Pumupunta ako doon sa kaibigan ko kasi may tindahan sya. Yun nanghihingi sya ng tulong sa akin. Pumupunta ako sa kanya tinutulungan ko sya. Happy naman ako kasi ang daming kostomer. Ako taga abot. Tol, pakitinda ng ice. Ganun. Pang araw-araw na pangtawid sa pangangailangan."*	*"Ang iniisip ko lang talaga magkaroon ng sarili kong bahay."*

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SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Themes		Statement of Gay and Lesbian elders											
		Luring	**Alda**	**James**	**Doc**	**Kurne**	**Renee**	**Dory**	**Eli**	**Jane**	**Lily**	**Epong**	**Teng**
On Challenges of Aging gays and Lesbian	**Ned for companionship**	*"Kung alam ko lang na ganito kahirap ang mag-isa, kahit po Chongo eh pinakasalan ko nuon."*			*"Baby hanggat maari. So parang alangan na sa ngayon na kung mag adopt. Iyan yung baby. Yung miski isa man lang. Yun nga ang pinaka regret ko n asana nag adopt ako. Na, para may nakasama ako dito sa bahay."*				*"May sadness sa heart ko. Di ko alam kung saan nagmumula. Di ko alam kung dahil ba ito sa wala akong partner na kasama sa pagtanda ko. Isip ko kasi na mas mainam siguro kung meron man lang ako na kasama na nag-aalaga at nag mamahal sa akin maliban sa kadugo ko."*	*"Pag nag-iisa naman, anduon pa rin yung pumapasok sa isipan ko yung, ano kaya kung mag-asawa na lang ulit ako. Pero umiiral pa rin yung nahihiya ako sa anak ko."*	*"Ah ayun! Ang problema yung mag aalaga. Yun ang problema ko. Hinahanap ko kung sino mag aalaga. Kaya kailangan ngayon pa makaipon na para kung makaipon ka may mag-aalaga sa yo."*		

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SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Themes		Statement of Gay and Lesbian elders											
		Luring	**Alda**	**James**	**Doc**	**Kurne**	**Renee**	**Dory**	**Eli**	**Jane**	**Lily**	**Epong**	**Teng**
On Challenges of Aging gays and Lesbian	**On Financial Sustainability**		*"Binibigyan akong 400, 300 pesos, yun pinagkakasya ko yun sa isang lingo…nanghihilot ako. Ung anong uso. Tas may magbibigay meryenda sa akin, kung anung pwede nilang ibigay sa akin"*	*"Patuloy pa rin sa pagtuturo at paghahanap buhay hanggang able pa at matalas pa ang isip. Make the most of our lives and live life to the fullest"*		*"Ang pinahahalagahan ko siyempre, yung mga pinagkakakitaan ko pa rin. Katulad ng nasabi ko na. Yaang pag gugupit, paggawang damit ng Poon. Yung mairaos ang mga pangangailangan sa araw-araw katulad ng pagkain"*	*"Unang-una ang kailngan natin ay pera."*	*"Hindi ko wish na magkaroong, buti pa yung sasakyang pakikinabangan pang hanapbuhay. Hindi ika yung may kotse lang pang lakad lakad. Yun ang ano ko na pakikinabangan o maging hanapbuhay pa rin."*	*"Ang kailangan ko sa ngayon eh magkaroon ako ng income para sa sarili ko. Para di naman ako magiging pabigat sa mga kapatid ko at pamangkin. Yung gusto ko meron man lang akong source of income ko na masabi ko sa sarili na eto meron pa din naman akong makakapag sustain ng needs ko."*			*"Yung inaano ko talaga, yung ano, yung gusto ko magtinda. Para meron akong income araw-araw. Yan ang ano ko kaya wala pa naman akong regular na kita"*	

Appendix I

SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Themes		Statement of Gay and Lesbian elders											
		Luring	**Alda**	**James**	**Doc**	**Kurne**	**Renee**	**Dory**	**Eli**	**Jane**	**Lily**	**Epong**	**Teng**
On Challenges of Aging gays and Lesbian	**Fear of Dependency**							*"Eh kahit papaano me, di na maging pabigat ako sa kanila. Na iyon naman, wish ko na wag na, kung ako kukunin kako ni Lord wag na magpabigat …huwag nang mahirapan mga kapatid ko or kung sino man makakapag alaga sa akin, kung meron.."*	*"Ang fear ko eh yung baka magkasakit ako at maging pasanin pa ako sa pamilya ko. Yung baka magkaroon ako ng sakit na malubha or what na kakailangan pa nila akong gastusan.Yun yung wag naman sanang mangyari .."*	*"Pero hanggat kaya ko pa. Hanggang kaya dasal lang muna. Sasarilinin ko muna. Kapag hindi ko na kaya, saka ako humihingi ng tulong sa mga kapatid ko."*	*"Nag-iisa ako dito. Di ako natatakot. Si Lord lang ang kasama ko lagi."*	*"Okay naman kahit walang kasama sa buhay. Parang ano lang ako. Happy lang sa buhay. Kasi mahirap nman yung kukuha ka na ano sa kalooban mo. Mas magandang ikaw na mag-isa. Magsolo."*	

Appendix J

SAMPLE MATRIX FOR THE CONTENT ANALYSIS

Significant Statement/s considering the following components

	On Integrity					On Despair
Participant	**Family Aceptance**	**Affirmative Childhood**	**Established Self**	**Self-Worth**	**Being Positive and Prayerful**	**Regrets for what could have been**
James	*"Malapit ako sa magulang ko kahit nung maliit pa lang ako. Pero mas close ako sa mother ko kasi ang father ko mahigpit at istrikto sa aming magkakapatid."*	*"We had a happy childhood, maraming masasayang memories. Masaya kami hangang ngayon. Ganun pa din ang relasyon namin sa isa't isa."*	*"Sa ngayon I am blessed with so many things. Loving and caring family. Na achieved ko ang goal ko na makatapos ng pag-aaral, magkaroon ng maayos na trabaho at matulungan ko ang aking pamilya at kasama na rin na mapaaral ang aking mga pamangkin."*	*"Pito kaming magkakapatid, dalawa kaming nakatapos ng college at medyo nakaluwag sa buhay. Kami ang tumulong sa family naming na makaahon sa hirap kahit papano. "*	*"Prayers and stay positive sa buhay."*	
Dory	*"Alam ko sa sarili ko at alam ng mother ko, ng mga kapatid ko, kasi since bata ako, elementary, ang mga laruan ko turumpo, tirador, mga ganyan. Lahat sila supportive sa akin."*	*"Alam ko sa sarili ko at alam ng mother ko, ng mga kapatid ko, kasi since bata ako, elementary, ang mga laruan ko turumpo, tirador, mga ganyan. Lahat sila supportive sa akin."*	*Actually compare sa iba, lalo na yung ibang say kagaya ko na din eh. Hindi ko ma ano na, hindi na din masama ito na na accomplish ko eh. Nakapag trabaho ako sa Hong Kong, kasi nga single ako nakakatulong pa din nanan ako kahit papaano sa mga pamangkin ko, kapatid ko, when it comes financially. Heto malaking achievement na ito sa akin..Limang apartment at saka isang yun ngang commercial, Yan bale anim na pinto yan. Eh yung isa kasi for commercial purpose yan."*	*"Nakakatulong pa din naman ako kahit papaano sa mga pamangkin ko, kapatid ko, when it comes financially "*		*"Ang pinaka ano ko..Mahirap din pala kasi nga eto, Tayo nakakatakot, mamatay, nakakatakot sa nao..Sana nga pala or else nag adopt ako ng, nung bata bata pa ako. So parang alangan na sa ngayon na kung mag adopt. Iyan yung baby. Yung miski isa man lang.."*