The Amsterdam Master's in Medical Anthropology

How and Why Older People Live in Institutions: A Case Study from the Philippines

A Master's Thesis

By

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The Philippines

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This study is conducted primarily to describe how and explore why older people in the Philippines live in institutions. Specifically, it describes the institutionalized system of care for the elderly in the country by reviewing available documents and literature and interprets the ideas and experiences of the elderly living in Golden Acres (Home for the Aged) focusing on the reasons why they are institutionalized. The study also shares the views of some of the relatives of the elderly.

All the way, my Supervisor Prof. Dr. Sjaak van der Geest guided me from the conceptualization up to the writing of the final report. He was just like a father, a Lolo at that sharing his wisdom and expertise all throughout. I felt brave enough during the fieldwork because of his compassionate words from his e-mail message as he said, "you may have left by now but when you arrive in the Philippines you know that I am with you...!", It worked! I am also grateful to the patience, valuable comments and ideological insights of Prof. Dr. Els van Dongen, my second reader.

The fieldwork was more than a journey. I was able to understand the plight of the elderly living in an institution. I shared wonderful memories with them, exchanging jokes, laughing together, and singing together. I did some extraordinary acts too like buying a Lolo a cigarette even if I knew that it was wrong. I acted as if I am their "grandson". At times, I cried with them and afterwards share a comic story or a liner like "crying helps in easing the painful memories, so let us cry all the time", and then they will start to smile and say maloko ka rin pala (you are mischievous, too). It helped being (relatively) "young" after all.

I never realized that I would become their object of transference. Many of them saw me as if I was their son or their grandson. They cry upon seeing me because they remember their family saying, "my son will be probably like you already." I cannot help it but to talk and lend my ears. Celebrating "Father's Day" with them (instead of going back to the Province to be with my father) was worth the sacrifice and I thank my family for their understanding.

I gained a lot from Lolos andolas during my fieldwork and they will always be my inspiration. To hear from them that "God will always love you because you visit us, you care for us, the elderly", or "we will just pray for your success because that is the only thing that we can do", are more than enough to convince me that my experience with them is worth my time.

I am so thankful to Ford Foundation for funding my entire study and fieldwork. Rest assured that I would try to uphold the values Ford Foundation wants to inculcate to its fellows. To my Professors at AMMA, the Staff and participants of AMMA 6, I thank your for the friendship and memories.

To my paternal and maternal Lolos and Lolas, I thank you for giving life to my parents and to my tatay and nanay (father and mother) who are Lolo and Lola themselves, my family members/relatives, my heart will always be with you.
To the Filipino community here in Amsterdam, above all, to ate (older sister) Marilyn and kuya (older brother) Nilo Blancaflor, you may not have blessed the gift of having any children but I am sure that with your continuous love and support to your parents and relatives back home, you will always be remembered. Also to tita (aunt) Anita Felipe Agustin and family, Sir Fernando Rubio, Sonny and Leah Dimaculangan and to the rest of the members of Blessed Trinity Parish Filipino Choir in Amsterdam, thank you for the magnificent friendship and spiritual guidance. Special thanks to ate Alicia Manlagnit, my classmate-teacher for the insights and support she has given me and to ate Ellen, you all become my family now.

I also would like to express my sincerest gratitude to the Office of Senator Ralph G. Recto especially to the members of the Legislative Group and to Madam Julie Fontiveros, officers of the DSWD-NCR, to the Head and staff of Golden Acres and to Ms. Belen D. Nicasio, Mr. Garie G. Briones and Ms. Nerlyne Conception for their important suggestions during my fieldwork.

With my detractors-friends, who constantly asked me “What I am doing in my life? What I am doing in Golden Acres for almost two months? I proved you wrong, I gained a lot of Lolos and Lolas and I would like to share with you the excitement and pleasure I experienced with them.

Lastly, to all those who are in one-way or another involved in the completion of this study, I would like to extend my deepest appreciation.
Abstract

In a society where tradition and culture dictate that the care for the elderly should be in the hands of the family, seeing elderly living in institutions is extraordinary. Changes in the society adversely affect the care given to the older members of the family. Researches conducted mostly on the socio-demographic profile of the elderly under the family care system highlights that most of the aged segment of the population still live with their respective families or kin. These studies also question the family’s ability to survive the onslaught of these social changes. Studies have also shown that Filipino elderly themselves revealed that given the choice, they prefer to live independently, earning their own money, looking after themselves and living near but not necessarily with their children or other relatives. They deeply care about not being a burden or source of hardship for their children. Some adult children, though, might find the constant worry about their distant parents’ equally stressful. In this case, would institutional care be appropriate for these older people?

There are 21 institutional homes for the aged in the Philippines at present, 18 are managed by NGOs, the rest by the government. These institutions usually cater to the poor and abandoned old persons. At present, it is estimated that there are 2,000 elderly living in these institutions, just less than one percent of the 4.6 million older people in the country in year 2000.

The main objective of this study is to describe how and explore why older people live under the institutional care system in the Philippines. This was done by reviewing relevant materials and literatures, and by conducting a case study in one of the institutions for the elderly in Manila. The said objective was inspired by my desire to answer whether or not an institutional care for the elderly is now culturally and socially accepted in the country.

The Golden Acres, established in 1969 and managed by the Department of Social Welfare and Development (DSWD), was my fieldwork site. Six elderly residents and some of their relatives were interviewed and observed being the focus of the study. Other knowledgeable informants and selected workers of the institution were also interviewed to shed light on the transformation of the family care system to an institutionalized-based care system.

I found out from this study that the older people living in Golden Acres come from families which are usually dysfunctional, characterized by the absence of respect and reciprocity. Themes like family conflicts, singleness and being widow, bedridden, migration, poverty and (lack of) reciprocity were the justifications derived from the study and they were helpful to shed light on the “why” question. But it was the absence of reciprocity, which was the deciding factor why they end up living in a “home” totally different from that of the family care. The bottom line is that to live in an institution has something to do with one’s performance in the past as a member of one’s own family coupled with various changes in the society.
It is expected that this undertaking would shed light on the biases usually attributed to the relatives of the institutionalized elderly—that they are unchristian and unFilipino. Simply, this will be a contribution to the very limited knowledge of elderly living in institutions, the elderly’s views of their situation, as well as their life experiences and reasons for opting to stay in the institution.
CHAPTER I
THE PROBLEM

The Filipino family, the traditional “safety net”, is always the fallback in times of economic difficulties; this institution of last resort may no longer adequately provide the needed security and protection for the vulnerable elderly population (Mata, 2001). Filipino culture, tradition and religion dictate that older people especially the sick or the ailing and frail should be cared by family; the government feels only minimal obligation to provide their needs (David, 2002). But the reality is that Filipino families are now having less and less resources and are even unwilling to take care of their elderly.

A visit to a home for the aged in the country would help establish my point. In the home for the aged you could find the most neglected, marginalized and discriminated group of older people. I refer to those who have been abandoned by their families perhaps an indication that the very traditional Filipino social institution for the care of the elderly is facing tremendous pressure. Institutionalization becomes only the last resort for financially disadvantaged families who, by reason of circumstances beyond their control, have to commit their elderly members to institutions (DSWD, 1999b).

This study was initially designed to explore the possibility of whether or not an institutionalized care system for elderly is an option given that there is a breakdown in the traditional, familial system of care for the elderly. The breakdown is an offshoot of rapid urbanization together with poverty, migration and demographic changes. It was realized that said goal was too ambitious to pursue, hence, I just settled in describing how and exploring why older people live in institutions. With that, the intention of this study is twofold, namely: to describe the institutionalized system of care for the elderly in the Philippines by reviewing available documents and literature and to interpret the views and experiences of the elderly living in an institution.

BACKGROUND INFORMATION

Changes in the society adversely affect the care given to the older members of the family. Researches conducted mostly on the socio-demographic profile of the elderly under the family care system highlight that most of the aged segment of the population still live with their respective families or kin (UST SRC, 1989; Casterline & Domingo, 1992; Esterman & Andrews, 1993; Natividad and Cruz, 1997). The
said researches question the family’s ability to survive the onslaught of the mentioned remarkable social changes.

The Filipino Family

The family as the basic unit of Philippine society is the source of one’s strength, inspiration, sympathy and love. The concept of self is identified with the family: a family-oriented person is made to believe that she/he belongs to her/his family and is encouraged to respect her/his parents. A family member represents her/his entire family’s name so any appalling act that she/he commits will surely be a humiliation to the entire clan. One example of such act may be the neglect and abandonment of its elderly members—which remain a taboo to date.

The Filipino family is vital in maintaining Filipino values. Characterized as being elementary (that includes the father, mother and children) and as being bilateral extended family (that embraces all the relatives of the father and the mother), the power of affinity within the family is influential, important and in-depth. One of the most cherished traditions of the Filipino family is the care it gives to its elderly. It is deeply rooted in the Filipinos’ tradition that taking care of the elderly is the family’s responsibility come what may.

The Filipino language and conduct display how Filipinos regard their elderly with honor and respect. Lolo and Lola for instance are local terms that mean grandfather and grandmother respectively. Lolo and Lola are terms of endearment that connote affection, love and respect for the older people. Being old in the Philippines symbolizes wisdom. Pagmamano or kissing the hand of the elderly as a sign of respect is one of the unique Filipino practices. Talking to the elderly with po, opo and oho is another way of treating them with respect and honor. These were just few on how we, Filipino’s, regard our older people.

STATEMENT OF THE PROBLEM

Traditionally and ideally, elderly care is a function and responsibility mainly of Filipino families. "By tradition, the aged in the Philippines and in most Asian countries enjoy a special place of honor" (Mata, 2002). But as the proportion of Filipino population of older people increases, the number of available caregivers seems to be shrinking. The family is considered to be the traditional refuge for social crises in the Philippines. Since it is being put under increasing economic, social and cultural pressures, family members now have less and less time, money, and energy, and are less willing to take on social and familial
obligations, which includes looking after members of previous generations (David, 2002).

Modernization related factors (Choi, 1996) would be discussed in order to situate ageing within the context of its being a social problem of the country.

Demographic changes

At present, the Philippines ranks as the 13th most populous country in the world.¹ In 2000, its actual population based on the census of population conducted by the National Statistics Office (NSO) was 76.5 million, an 11 percent increase or 7.88 million people over the 1995 Census count of 68.7 million. The annual population growth rate slightly increased from 2.32 percent in 1990-1995 to 2.36 percent in 1995-2000.² As presented in Table 1, the total number of elderly people in the country—those aged 60 years and above—is 4.6 million or 6 percent of total population of 76,504,077. It can be seen that there is an increasing pattern of the share of this group in relation to the entire populace since 1960. This is because of the improving health condition is indicated by life expectancy. In 2000, the life expectancy at birth of males and females are 66.93 and 72.18 years respectively. It is still expected to increase in the future.³ A Filipino born between 1985 and 1990 could only expect to live 63.5 years on the average (Biddlecom & Domingo, 1996:110).

<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total (millions)</td>
<td>27.1</td>
<td>36.7</td>
<td>48.1</td>
<td>60.7</td>
<td>68.6</td>
<td>76.5</td>
</tr>
<tr>
<td>0-14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15-59</td>
<td>50</td>
<td>49.7</td>
<td>52.7</td>
<td>55.1</td>
<td>56.2</td>
<td>57.0</td>
</tr>
<tr>
<td>60 and over</td>
<td>4.3</td>
<td>4.6</td>
<td>5.3</td>
<td>5.3</td>
<td>5.4</td>
<td>6.0</td>
</tr>
</tbody>
</table>

Source: NSO, Census taken from 1960 to 2000⁴

Young dependents belonging to age group 0 to 14 years comprised 37 percent of the entire population in 2000. In Table 2, the 2000 dependency ratio was 75, which means that every 100 persons in the working age group (15-64 years) will have to support about 65 young dependents and about 10 old dependents. In 1995, the dependency ratio was at 77.76. The median age, which is the age at which exactly

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⁴ [www.census.gov.ph](http://www.census.gov.ph)
half of the population is young and half is old, is increasing, from 15.8 in 1970 to 17.6 in 1980, 20.4 in 1990, 21 in 1995 and 2000. Another indicator to describe the aging trends of the Philippine population is the index of ageing which is the ratio of old people to young people (UST SRC, 1989: 33). From Table 1, we can compute these indices to show the trend of increasing ageing dependency ratios and index of ageing (Table 2).

<table>
<thead>
<tr>
<th>Year</th>
<th>Young Dependency Ratio</th>
<th>Ageing Dependency Ratio</th>
<th>Total Dependency Ratio</th>
<th>Index of Ageing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1960</td>
<td>91.4</td>
<td>8.6</td>
<td>100</td>
<td>9.41</td>
</tr>
<tr>
<td>1970</td>
<td>91.95</td>
<td>9.26</td>
<td>101.21</td>
<td>10.07</td>
</tr>
<tr>
<td>1980</td>
<td>79.7</td>
<td>10.06</td>
<td>89.75</td>
<td>12.62</td>
</tr>
<tr>
<td>1990</td>
<td>71.87</td>
<td>9.62</td>
<td>81.49</td>
<td>13.38</td>
</tr>
<tr>
<td>1995</td>
<td>68.15</td>
<td>9.61</td>
<td>77.76</td>
<td>14.1</td>
</tr>
<tr>
<td>2000</td>
<td>64.91</td>
<td>10.53</td>
<td>75.44</td>
<td>16.22</td>
</tr>
</tbody>
</table>

Note: Computed based on Table 1.

Decrease in family size

There was a 13 percent increase in the number of households in the country, from 13,508,775 in 1995 to 15,271,290 in 2000. The average Filipino household has grown smaller, its membership declined from 6 in 1970 to 5.1 in 1995 and finally to 5.0 in 2000. The Philippines' total fertility rate dropped from 4.4 births per woman to 3.4 births per woman between 1990 and 2000.

Increasing trend in separate residences for elderly people

It is also interesting to find that in Southeast Asian countries, the percentage of the ageing population living alone is increasing. As presented by Knodel and Debavalya (1997:4), there was an increasing trend of Filipino elderly living alone from 3 percent in 1986 to 4 percent in 1988 and finally to 6 percent in 1996. This trend speaks of something else because of the fact that care for the elderly is inherent in every family. More and more, one can see that the elderly are being left alone in the rural areas as members of the family move to urban places to seek greener pastures.

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5 http://www.census.gov.ph/data/pressrelease/2003/pr0323tx.html
6 University of Santo Thomas Social Research Center (UST SRC).

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Records show that in 1989, there were 17 elderly institutions registered under the Department of Social Welfare and Development (DSWD), two were managed by the national government, while the rest were administered by religious organizations, local governments and civic organizations (UST SRC, 1989:39). The services rendered range from custodial care to counseling, rehabilitation and vocational training and livelihood programs. In February 1997, there were 21 documented existing homes (residential care facilities) in the country, 18 are mostly run by private organizations or by religious congregations. It is estimated that around 1,000 to 2000 elderly Filipinos live in these facilities, which cater mostly to the very poor segment of the population. Another report said that each 21 homes for the elderly could accommodate only about 900-1,000 people (DOH, 1999). Interestingly, a possible indicator that institutional care for elderly is becoming more “acceptable” is the presence of facilities that also cater to the middle class population—the RVM Home and Golden Haven. These two institutions cater to the upper class elderly clientele who have to pay their way in exchange for the services they need in their twilight years (Somera, 1997:24-25).

Women’s participation in the labor force

The total labor force of the Philippines in 2002 is 33.7 million, 51.7 percent of which (13.2 million) are women. The proportion of women in the labor force is enormous, which means that the care for the elderly, which is usually the function of a female member of the household, is being threatened. Women have been joining the labor force of the country because of economic necessity.

Changes in values in family life

There is a marked change in the values existing in Filipino homes serving as possible indicators that there is something wrong in the very Filipino way of taking care of their elderly. For instance, the value of utang na loob or debt of gratitude is no longer taken seriously, especially among the youth. Incidents such as teenage daughters yelling at their mothers in public places, youth cursing their parents, children not longer using Filipino words that connote respect (po, opo and oho) in talking with older people, etc. are not uncommon. Migration is also becoming an issue. The absence of children at home is often the result of their emigration (either to nearby localities or

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http://www.bles.dole.gov.ph/

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abroad) in search of greater economic opportunities (Domingo and Casterline, 1992).

OBJECTIVES OF THE STUDY

The general objective of the study is to describe how and explore why older people live in institutions.

Three specific objectives shall expound on the general objective of the study. These are:

1. To present the reviewed documents and literature on elderly care and institutionalization in the Philippines;
2. To explore institutionalized care for the elderly in the country through a case study in one institution, and
3. To interpret the ideas and experiences of the selected elderly residents of Golden Acres (Home for the Aged) focusing on the reasons why they are institutionalized, and to share the views of some of their relatives as well.

The main theme of this research therefore, is to explore institutionalized care for the elderly in the Philippines. The focus would give a broader picture on the institutional care for the elderly in the Philippines and a better understanding of the plight of the elderly living in institutions. Hopefully this research will be able to enlighten the readers on the reasons why some of our elderly live in the home for the aged and lessen the rhetorical blame usually tagged on their relatives and family.

SCOPE AND LIMITATIONS OF THE STUDY

With the limited time and resources, the study was confined only in the Philippines’ case of institutionalization of its elderly population. The main characters interviewed were residents of Golden Acres (Home for the Aged), an institutional facility managed by the government. Relatives of the selected elderly residents were also asked about their views on their elderly’s situation.

This implies that I cannot derive conclusive remarks on the changing elderly care pattern in the Philippines in general and institutionalization in particular. It is always worthy to know that this study is an exploration on the reasons why some of the Filipino older people live in institutions.
CHAPTER II
THE REVIEW

In the statement of the problem, it was mentioned that various demographic as well as social changes add to the issue of ageing becoming a problem. This part of the study shall review past studies that strengthen the argument that the traditional system of family care for the elderly in the Philippines is being threatened.

Studies in changing living arrangements and conditions of the elderly are always put within the context of socio-economic changes. These changes, like poverty, migration and urbanization are usually considered reasons why there seem to be a breakdown in the traditional system of care for the elderly (Biddlecom and Domingo, 1996; Domingo and Asis, 1995). The effects of these forces can be summed up in the dwindling of family resources that in turn affect the care given to the older members of the family. The review focuses on two things, namely: studies that point to the problematic familial system of care and studies that partially touch on the issue of institutionalization.

Family Care as the Dominant System

Through the years, it is undeniable that family care remains to be the most dominant system of care for the elderly in the Philippines. But then again, different factors as mentioned previously continue to challenge the system.

Shrinking Reliance on the Family

It is a general belief among Filipinos that care for the elderly is basically a function of family. It is very unusual, indeed, to see old people living in their houses alone especially in rural areas. As pointed out by Esterman and Andrews (1993), “care for the elderly in the countries of Fiji, Republic of Korea, Malaysia and the Philippines are still substantially integrated into their families.” The authors argue that effects of social forces may have influenced this traditional system because of the use of the words "still substantial." How substantial the care given by the family member is not, however, clear in the literature. Families continue to be important providers of emotional, instrumental and financial support. The study was based on the WHO sponsored 1984-1985 survey of elderly people in the region. The same study indicates that sources of income for elderly were: families (54

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percent), work (22 percent), pensions (13 percent), and others (11 percent). Regarding the perceptions of the adequacy of income of the elderly, 43 percent of the respondents felt that their income was inadequate (Ogawa, 1993). It was shown that care within the family system is the most dominant form but, as often the case, there are also things that the family cannot provide.

In the 1975-76 survey research by Bulatao (1979) on the value of children, 44 percent of the respondents in the Philippines believed that children's role as old age security is an important reason for having large families (Ogawa, 1993). But looking at the rural-urban differences using the same survey, financial support in old age was substantial but was less prevalent among respondents in higher socioeconomic strata and those with modern attitudes than among others of the country (de Vos, 1984). A study has been conducted in a rural (58) community from July to August of 1983 and from July to August 1984 in the urban area (83) by UST SRC (1989; 56), where 141 subjects were chosen. These subjects were aged 60 and above. More than one-third (39 percent) of them were not living with their married children, slightly lower for the urban elderly, the reasons were:

1. children married have separate families and household (16 percent);
2. they own the house and nobody will stay in and maintain it (6 percent);
3. difficulty in getting along with the children and grandchildren (4 percent);
4. they can still survive and live on their own (2 percent).

Reasons cited for living with married children were:

1. children cannot live and maintain separate household, married children merely stayed on, while widowed children transferred and lived with them (24 percent);
2. nobody to rely on for their needs (11 percent);
3. house can accommodate all of the family including children and besides rentals are high (8 percent).

With regard to the adequacy of financial support they receive, 83 percent of the rural elderly says that it is not enough while only 35 percent of the urban respondents validated such claim.
Unfavorable Living Arrangements and Conditions

Domingo and Casterline (1992) conducted the first comprehensive study on the living arrangements of elderly in the Philippines. The study was based on nationally represented data of the NDS of 1988 as a primary source (5,970 elders from 4,445 households), the 1984 Association of Southeast Asian Nations (ASEAN) Survey for the Elderly as secondary data source, and 18 FGD sessions conducted with elderly and younger adults in 1990 and 1991. The said literature pointed out many useful insights on the study of ageing in the country as it combines both qualitative and quantitative measures. They found out that only four (4) percent of the Filipino elderly live alone and a large proportion live with kin, a spouse and/or children. Specifically, 51 percent live with persons aged 60 and over, 82 percent live with persons aged 15-59 years old and 56 percent live with persons aged 0-14. From the results, it is surprising to note that there were elders who live alone and majority live with their relatives. This reflects the degree of dependency of older persons on their immediate families and a manifestation on the importance of family members as support for them. But, the most captivating part of the report is the response of participants in the FGDs conducted. I quote some of the responses here to bring out the elderly’s voices to help possibly interpret the quantitative data.

My pension helps but we are still financially short, especially now that the children of my own children are often entrusted to us.  
(Fidel-M, Las Pinas-UM)

Fidel remains to be the “breadwinner” of their family supporting his grandchildren. To be part of the daily routine of the household means being a witness to the day-to-day activities of the entire family. Some of the emotional pains experienced by our elders can be simplified in the statement of Jim:

My problem is feeling bad seeing my children having difficulties with their work ... (their earnings are) not even enough to meet their needs .... I can no longer help them. That is what I consider as my frustration, my failure. I pity my grandchildren. I was not able to prepare well. I feel guilty, I was neglectful.  
(Jim-M, Las Pinas-UM)

Another interesting fact that can be observed in a Filipino family is the rivalry of attention of the elders and the spouse of the child where the parents are living:

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With married children who already have their own children, we must realize that we have a different sort of 'law' now - the 'law of the spouse', even if your child is male or female, more so for females. The spouse gets angry if your child gives you much attention.

(Alu-F, Quezon City-UL)

Natividad and Cruz (1997) presented more recent data on the patterns of living arrangement and familial support for the elderly in the Philippines. Their study examined the patterns of living arrangements and sources of social support for the Filipino elderly (aged 60 years and older) using data from the 1996 Philippine Survey on the Near Elderly and Elderly (1996 PSNEE). It covered the population aged 50 years and older. The sample consisted of 2,285 respondents aged 50 years and older, 1,131 of whom were aged 60 years and above. In general, the results echoed the findings of the 1988 NDS as reported by Domingo and Casterline (1992), which showed co-residence with a child as the most common living arrangement for the elderly. The likelihood of co-residence with an unmarried child rather than a married child was higher and the percentage of the aged living alone among the unmarried and the formerly married (separated/widowed) was also higher. What was interesting in the paper was that it presented both the negative and positive (support exchanges) pictures of caring for the elderly in the Philippines. Natividad and Cruz’s study is more in-depth than that of Domingo and Casterline’s (1992) because the former authors made valuable remarks on the role of elderly not only as passive recipients of support but more importantly, recognizing them as active participants of the support system existing in the household, both as a supporter of financial needs of the family as well as caretakers of their grandchildren. Natividad and Cruz’s study also found out that the perception of living alone with the spouse compared with living with a child was a better ideal pattern of living arrangement. This finding confirms the result of the FGDs conducted by Domingo and Casterline (1992). The finding seems to indicate that the family as the basic provider of care is changing. This in turn impacts on the perceptions of the elderly as to how they should live the remaining days of their lives. This pattern will probably continue until it breaks the chain of intergenerational support for the elderly.

**Institution Based System as an Option**

This part of the review considers the various studies that present the views of different stakeholders on the issue of care for the elderly, specifically the “trend” of institutionalizing the care given to them.
Discouraging Images and Perceptions

My starting point is a study by UST SRC in 1986 on the varying images, perceptions and relationships with the elderly. In their survey of 1,013 respondents grouped according to broad age categories for comparison, it was found out that there were negative reactions such as “I do not like to be ugly, weak...,” “I do not like to die,” “I do not like to have problems,” “It is difficult to live old.” Problems over failing health and coping with living standards due to old age were the worry of more rural females. Despondency seemed evident in the responses of those in the female and urban categories that answered, “I am tired of living,” and “nobody will take care of me,” “I do not like my children to be burdened in taking care of me.” This study was done 18 years ago and I wonder what the current images are especially so that quality of life for most is now becoming worse.

The same literature points out that though there seems to be a general disagreement on the statement that “people too old to work should be brought to homes and institutions for the aged”, 12 percent also agreed. Urban respondents compared to only 8 percent of those in rural setting showed greater agreement (15 percent). Responses according to gender showed almost the same degree of agreement with 15 percent of the males agreeing compared to 8.6 percent of the females. By age group, it is interesting to note that those above 60 years showed the highest rate of agreement (21 percent) with the lowest rate (10 percent) exhibited by young adults. The youth (16-25) followed with 13 percent. A larger portion of those who agreed is in the elderly male group in the urban area. It is also clear nowadays that the values of children are perceived as deteriorating. 77 percent of all respondents agreed that the youth are not as respectful as their elders. Yet the children did not admit that they are less respectful with 42 percent disagreeing with the statement while 92 percent of the elderly agreed with the statement. Differences increase with age. One would take this as a reason why elders would just prefer to stay in an institution rather than to be humiliated by their own children.

This short glimpse of the study indicates that individuals in various age categories are open to the idea that care can also be a function of institutions because of practicality vs. tradition, elder’s choice vs. the feeling of being a burden of the family, changing values of children that are detrimental to the care for the elderly.
A New Living Arrangement

Reinforcing the (seemingly acceptable) notion that to stay in an institution is a "trend", Table 3 presents an intriguing response from the elders themselves in a study by Natividad and Cruz (1997). Would this be the elderly's favored (vs. the actual which is co-residence) living arrangement?

The seeming acceptability of institutions for the aged in the Philippines is a finding that is worth noting. Coupled with data which point towards a perception of living alone with a spouse as a better ideal arrangement compared with living with a child, there may be reason to suspect that living arrangements for the elderly of the future will not necessarily continue to be predominantly with a child as co-resident as compared to staying in an institution.

| Table 3: Attitude Towards Home For The Aged Among Filipino Elderly (Aged 60+) |
|---------------------------------|---------------------------------|
| Percentage who think it is a good idea to have a "home for the aged" | Percentage who want to live in a "home for the aged" |
| Total | 73.70 | 29.60 |
| Age  |  |  |
| 60-69 | 76.10 | 31.70 |
| 70+ | 70.60 | 26.90 |
| Sex |  |  |
| Male | 76.70 | 35.20 |
| Female | 71.70 | 25.50 |
| Marital Status |  |  |
| Currently Married | 75.90 | 30.20 |
| Widowed | 71.00 | 28.40 |
| Others | 72.60 | 33.30 |
| Residence |  |  |
| Urban | 73.10 | 29.10 |
| Rural | 74.00 | 29.90 |

Source: Patterns in Living Arrangements and Familial Support for the Elderly in the Philippines (Natividad & Cruz, 1997).

Life Inside the Institution

Life of elders inside a private institution is less worrying as well as less tiring compared to public institutions or worse, when one is living in a family (de Guzman et. al., n.d). This undertaking is crucial in correcting the very bad impression or image towards institutions as grim and negative and catering only to the poor and the abandoned (Somera, 1997:26). This sweeping categorization, having no basis in fact, does not take into account individual experiences of elderly

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people as pointed out by Somera (1997) which poses further questions as to what really is happening to everyday lives of our elders under this system of care.

A 1979 report covering the period 1977-1979 of Stairless Home for the Aged (an institution) cited in Domingo and Feranil study (1987) indicates that although many of the elderly were never married, the reasons for being rejected to live with their family includes: economic constraints on the part of the dependents, rather distant familial relations, client’s negative behavior, and the client’s disease or disability (Somera, 1997:28). This gives the impression that it is not the elderly’s choice to leave their family even though they would prefer to live apart; they are also being abandoned or rejected.

**Social Status of Elderly**

The social status of the elderly in developing countries is generally thought to be relatively high (Williams & Domingo, 1993). The study of Williams and Domingo (1993) is an attempt to assess the position of Filipino elderly in the family in times of social change using FGDs. Let’s look at these statements from the study:

*It is really better if you have your own house. You might not know that you are already the object of a fight... and you are old already yet you still have to do chores at the house. You will be pitiful, you still have to do the adjusting. They should adjust to the parents. Nowadays, the parents are the ones adjusting to the children.*

(Celing, F, UL-Pasig)

This clearly shows the unheard voices of most elderly in the country. It can be learned that in cases like this, they are hopeless, losing their self-dignity and esteem. Would the ideal family care still be the best option for them? The FGDs also suggest that parents who received money from children may be considered burdensome, as the literature and quantitative evidence would indicate.

*Those who are in ill health are more likely to be ignored, and their children tend to assume responsibility as the primary decision-makers. This is said to be true, especially [among] those who can no longer walk and who are very old.*

(Kiko, M, AC, UL-Pasig)

*Usually the bedridden old parent is taken for granted while more attention is given to the kids.*

(Doro, M, UL-Pasig)
The previous findings pointed out the seeming discrepancy between what the elderly preferred living arrangement and the actual arrangement where they are in now.
CHAPTER III
THE PROCESS

This is an exploratory and a descriptive case study on the institutionalization of elderly in the Philippines. The entire process coming up with this case study provides valuable information for a more comprehensive study in characterizing the entire institutional system of care. Listening to the stories of the elderly and their relatives is the highlight of this study.

The study is basically composed of two parts, namely: (1) a review of studies on family and institutional care for the elderly in the Philippines and (2) a case study of Golden Acres, an institution for the elderly in Manila.

GATHERING SECONDARY DATA

Since most of the literatures used for the study were already gathered prior to the conduct of the fieldwork, I made it a point to find more relevant materials by Filipino authors that are locally published. I visited the various libraries at the University of the Philippines (UP), the leading academic institution in the study of population and elderly in the country. I was able to come across with materials from various government offices particularly at the Department of Social Welfare and Developments' National Capital Region (DSWD-NCR) and the Senate of the Philippines' Committee on Family and Social Services. I was also privileged to gather valuable information from the Coalition of Organization for Services for the Elderly (COSE), a non-government organization (NGO) catering mainly for the needs of the elderly in the Philippines. In the process of my literature search, I also made it sure to interview various individuals who are experts on the topic of ageing.

The materials I gathered were either quantitative or qualitative studies; some were published while others were not. I was dissatisfied to discover that studies on the institutionalization of elderly are scant particularly on the experiences of elderly living in facilities for the aged.

From the government side, I was interested to know the socio-characteristics of elderly living in government institutions but records are not being kept, except for the addresses of institutions that are issued the permit to operate. The government is not keen on advocating institutionalization of elderly as it is seen as a political suicide on the part of politicians to introduce something that is unpopular and goes against the Filipino's tradition of family care for the elderly. The financial burden to the government itself is
remarkable once it takes the overall responsibility of taking care of all the abandoned or neglected elderly. The government is therefore financially unable to support such kinds of initiatives.

THE IMMERSION

The most significant part of my research were the daily encounters with the elderly living in Golden Acres, my fieldwork site.

The Permit

At the start of my fieldwork, getting the permission to conduct my study seemed a formidable task. I followed the research plan in my proposal but things didn't turn out well as I planned them a week before the supposed commencement of my fieldwork. I expected that everything would go smoothly but the official of DSWD whom I have been communicating with, Undersecretary Lourdes Balanon went abroad. I was told instead to re-submit the documents I already submitted to her. I followed what was requested from me. I sent emails to the e-mail address given. Unfortunately, my messages kept bouncing. In other words, when I arrived in the country for the six weeks research I started from scratch. Having corresponded with Undersecretary Balanon two months prior to my arrival helped a bit though. I mentioned that I have been keeping in touch with her. I presented the letter exchanges that I filed as proofs.

I was very excited to visit Golden Acres even before I applied for the permit to conduct my study. Eager as I was, I visited the institution without securing the permit first. The reception I got was a bit cold because of the absence of the right papers. Incidentally Mrs. Erlinda Salud, the monitoring chief of DSWD-NCR was in Golden Acres at the time. She suggested that I go to their main office first before setting foot in the facility.

The very next day, I went through the tedious process of securing my permit. At the end of that day, I got a permit but it was too restrictive both in the days and the time that I was allowed to conduct my study. I was only allowed to enter the facility from May 22 to June 27, 2003 on Tuesdays and Thursdays, from 9:00 to 11:00 am. The rationale behind the restriction was that it was Golden Acres' policy and it was the best option they can offer me. I immediately went to meet the Head of Golden Acres. I haggled for the possible extension of allowed time and days but she said, "The permit is the permit". If I want to bargain for time, I should request it from the Director's office. I asked for reasons why she was so strict with the permit and she explained that the permit was limited since based on
the purpose of my study, it was a simple research that only involves interviewing a few respondents. Besides, according to her, I would be disrupting the daily activities of the residents. I felt so bad and frustrated upon knowing her justifications. I had questions in my mind why they wanted me to visit the facility for so short a span of time. Are they hiding something from me? That question I asked myself with was the very first thing I thought of. What I immediately did was to go back to the Director’s office the same day and I insisted to talk with her. She was not around. I talked instead to Mr. Gabriel, the person-in-charge who drafted the permit. I exhausted all possible reasons to convince him that I really need more time than what was stated in the permit. I told myself then that if push comes to shove, I will ask the help of the office where I used to work (a political office), to assist me in getting the much-needed permit for my study. I was frustrated during that time though and I really would have wanted to spare my former Superior’s office the hassles that I was going through. Instead of the Director, I talked to the Assistant Director of DSWD-NCR. I was interviewed and I explained the reason why I was asking for more time, and she understood me well. She called Golden Acres and she was able to talk to the Supervising Head of Social Services. She told her to accommodate my request for more time and days as regards my visit.

Anyhow, I was asked to prepare my schedule of activities at Golden Acres bearing in mind the allowed days and time. I complied with their requirement showing that I needed more time than scheduled. On my first formal day, I was oriented and had an ocular inspection of the facility. Immediately after, since I did not want to waste time, I interviewed my first two respondents. But then again, another problem arose: I was asked to conduct the interview in the office of Social Services, meaning, it will be a supervised interview. I cried foul once more. The thing is, I was not allowed to tape record the interview as well because it was not in the permit, and also taking of pictures was prohibited. I felt exasperated but I proceeded with my interview. I was able to convince them that I will conduct the interview in the room of the resident or somewhere inside the facility.

The next day, I went to the Director’s office and negotiated for the use of tape recorder and camera, I talked and interviewed her. She was so polite to accommodate me and was even so happy to know that I am doing a research in ageing considering that the elderly is one of the neglected sectors in the society. She approved my request saying it was not a problem for her at all. She gave me tips and warned me too that I might be able to witness “things” in the facility and told me to be understandable and mature about the situation.

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inside the facility. That ended my trip to secure the much-needed permit for my fieldwork.

To experience such administrative challenges (which sometimes unavoidable) was a humbling lesson for me as a beginner in the field. I also acknowledged my shortcomings of not making it clear what areas were covered (and not) by the permit.

The Schedule

I submitted my itinerary to the Head of Golden Acres and I was told to follow it. I was assigned to the Social Services Division where the Social Workers are in-charge of the cases of the residents. I was oriented by one of the Social Workers and was allowed, finally, to visit the cottages and was introduced to the residents.

The DSWD-NCR Staff were helpful and courteous, especially the Director and her Assistant. The person in-charge of the permit, Mr. Gabriel was very patient to assist me all the way. They were so receptive and wished me the best luck. With the Golden Acres Staff, I had dissimilar experience. I was treated indifferently at first but as the days went by, they started to treat me nicely. I understand why they were so cold to me in the beginning, and they are asking for my understanding. I was told by their experiences with researches especially that of the work of an expert on ageing where he had his ethnography of daily lives of elderly for almost a year in the facility, allowed to stay inside throughout the duration of his research and in the end made criticisms on them. That was already more than 10 years ago but in his final book, he exposed some things to the detrimental of the entire institution and that they are thinking of the same about my work. I later found out that they became stricter to researchers from then on. With the residents, they were amazed and glad to see me. I felt like a politician being greeted by them. They wanted to sit down and talk with me. They are longing for someone to talk to—this was my initial impression. As I interacted with them, my initial impression was confirmed; it was true after all.

THE MAIN CHARACTERS AND THEIR RELATIVES

I had in-depth interviews with six elderly (3 females and 3 males). That meant, I had to interview six relatives of theirs too. The process of choosing the six was done by small discussion with the Social Workers. I had to listen to them because the elderly are their clients, “they know best”, especially those with relatives. They were sure that I could find their relatives of the six but unsure of their addresses, I took the challenge and I was able to visit some of their relatives.
Basically the following characteristics of the elderly chosen for the in-depth interview were as follows:

1. ability to communicate and share their experiences;
2. with relatives and
3. recommended by the institution as a typical resident.

Four (a female and 3 males) were able-bodied residents while one was "senile" and another one was bedridden. I got assurances that the last two were still able to talk and capable of a lengthy discussion.

Talking to the main characters was the main attraction of this research. The process of eliciting information from them was rather difficult in the beginning but became comfortably trouble-free in the end. Instances like not allowing me to tape record the interview and intervening in the actual conversation, as they want it to be supervised were some of the problems I encountered. It takes patience and understanding to comprehend the reasons why they wanted the interview to happen that way and I was glad the we were able to resolve the matter as quickly as we could and that leads to a better working environment for me as a researcher and for my informants as well. Interviews were held in various areas of the institution like in the social hall, in the cottages of my informants and in their bedrooms.

The Relatives

I thought all the while that residents in Golden Acres were being visited by their relatives. One of the salient points of my study was to interview the resident's relatives as well. I was told that Golden Acres adheres to a "no relative policy". This was one of the hardest things in the research because I failed to anticipate this in the proposal. To be able to reach and interview the relatives, I had to ask for their addresses from the Social Workers and the key informants if they still knew them. It was hard to ask from them the whereabouts of their relatives but I succeeded.

The Travel

I needed time to travel and look for the relatives of my informants to hear their side of the story. I was able to visit places in Metro Manila where I had never been to; I also went to areas outside Metro Manila. I cannot generalize the kind of reception I received from the families of the residents. It was mixed reactions. Some were ashamed to the point that I was not allowed to enter their home. Some were happy to hear news from their elderly. As a researcher, it was a challenged to
act as a mediator between the elderly and their relatives especially when the reason of institutionalization was rooted within family conflict. I faced this dilemma in four of the six relatives of the elderly I visited. If the reason was poverty or inability of the relatives to take care of their elderly, the relatives were more open and willing to accommodate me.

Aside from the main characters which are the elderly and their relatives, I was able to talk to the staff of Golden Acres and to various knowledgeable informants from the academe, NGO, government and religious sectors. They provided me with better knowledge and appreciation in the field of elderly care in general and institutionalization in particular.

THE INSTRUMENTS

The use of interview, observation, participant observation and survey were important in the overall study. These ethnographic research instruments used were the lifeblood of the study. Without them, I would not be able to communicate with my respondents, in their absence, I would not been more vigilant with the things happening in the field. Most of all, these instruments helped me in understanding their stories and experiences.

As a beginner in the field, I prepared outlines for my interview and planned to tape record them. But due to administrative problems, I was not able to record every interview I conducted in Golden Acres. For those unrecorded interviews, I was apologetic with my informants because I was taking notes as I wanted to capture their answers, word by word, as this is mainly an “emic” study. With the relatives, I realized the sensitivity of the issue so I opted not to make use of recorder and the guide questions. I made it just like an informal talk and my role was mainly a listener because most of the time, they wanted to explain and tell me their version of the story, which I was grateful enough. In the end, I was made to believe that I achieved my goal. Telephone interview was used in one of the relatives because of the latter’s choice. It was hard to talk to someone over the telephone because I would not be able to observe her gestures, to look at her eyes, to feel the sincerity of her words.

As a researcher-outsider, I was not in command on the location of the interview but I bargained for the privacy of my informant. It was all my informants’ choice. In doing so, I was able to ask more questions other than the planned. Most important of all is my casual interview or brief exchanges with the residents and staff. I gathered a lot of information during those moments of non-pretensions, no
inhibitions and no fear. What happened was more of a sharing than an inflexible type of interview.

Doing participant observation was as lively as it could because I felt the feeling of being part of the program not only as an observer. I was privileged for instance to take their pictures and to sing with them. This instrument is more effective than just being an observer. Doing the first gave me the feeling of easiness as I do not look like as a “spy” to their activities. Through the use of participant-observation and observation as methods, I was able to examine closely how the residents of Golden Acres spent their day individually and collectively. Such volunteering works include:

a. assisting semi-able residents to walk from their cottage or bed to the place they want to go;
b. helping residents to carry their daily rations from the kitchen;
c. aiding semi-paralyzed residents to move from their bed to the faucet where they have to get some water to drink;
d. assisting resident-patient to walk as he suffered stroke and under rehabilitation;
e. singing community song with the relatives in the morning;
f. as a client of a fortune-teller residents;
g. as a player of table tennis with the residents and some other volunteers as well;
h. as their son who is willing to listen to their stories;
i. as a guide in bringing some of them to parks, fast-food chains and shopping center;
j. volunteered to assist the residents in the processing of their claims for pension at the Social Security System (SSS);
k. secretly bought medicine for a Lola as she appealed for me to buy her monthly supply of tablet;
l. a messenger of messages from the relatives to the elderly and vice-versa, and
m. a confidant of their secrets.

Surprisingly—and unintentionally—I witnessed some administrative activities that were beyond the scope of my interest. For instance, I observed how the center manages donations and what the internal conflicts among and between the staff are. How the staff interfere in the love affairs and “love stories” of the residents.

The survey gave me the chance to talk to the residents individually and at length. With the survey I had conducted, I was introduced to—and consequently, understood—the experiences and characteristics of the residents. The survey form was designed in the
latter part of the fieldwork and in this way, relevant questions were asked.

![Playing table tennis with Lola Agustina.](image)

**THE THEMES**

This refers to the processing of data gathered. Interviews that were tape-recorded were transcribed and textually analyzed to bring out various themes or justifications why institutionalization is an option. Unrecorded interviews were processed right away. This is a combination of qualitative and quantitative research but emphasis was put on the former while the quantitative aspects of the study help out in describing the center and characterizing the residents. The setting of themes was the product of my literature review, interview with the informants, survey and my observations in Golden Acres.

I kept a journal during my fieldwork which found very useful as a reference in writing the report. It is where I jotted down the main events of the day, the observations I witnessed, and my reactions. Processing immediately the data gathered was done in order to integrate the results of the various methods.

**ETHICAL CONSIDERATIONS**

Confidentiality of the key informants as well as the elderly themselves was the utmost consideration. As I was successful in bargaining with the center regarding my right to interview in private the main characters, it was a trade-off actually. I agreed to the compromise that I would be revealing the important information from my respondents to the Social Workers without the former’s knowledge like for instance the whereabouts of their relatives. Such information though was useful on both parties to hasten the process of re-uniting.
the residents with their families which is the end goal of the center. But the feeling that I somehow let down my respondents made me feel guilty, as I was able to develop a relationship of trust with them.

The same feeling with my closed door meeting with the Head of Golden Acres as I submitted a summary report of my visits to the resident’s relatives. Somehow dishonorable as I acknowledged it to be but I chose the lesser evil I may say. Choosing not to tell this vital information would mean a longer process of tracing at them.

Some messages from the relatives to their elderly never reached the latter because I decided not to. I know it would be painful for the elderly to know those messages. I decided not to add more to their very sad feeling.

In the survey forms, I had a short introductory note indicating the purpose of the study, which was academic and ensures confidentiality of the respondents. Verbally and in writing, this was also made to the key informants participating in the study. Pseudo names of the characters were used to protect their privacy even if they allowed me to use their real names.

In the field, I developed a special relationship with the residents. They entrusted in me their stories seldom (or none at all) they share to other people. I opened their past but in the end I was unable to help them close that chapter of their lives. To re-unite them with their families was my dream. Was I an intruder? Did they benefit from my presence or was just me who benefited for academic reasons? The consolation I felt was that I was there more of a listener than a researcher, willing to lend my ears for their heartaches and painful memories. Some of them I failed, I mean I was not able for instance to locate a relative of Lolo Claudio even if he gave me his relative’s name to look at the local directory. I also was not able to call the friend of Lolo Leo telling him that Lolo Leo wanted to see him and asked him to buy a coffee and sugar, to play more table tennis games with Lola Agustina, to call an overseas sister of Lolo Menardo, to give them a copy of all their pictures and candies, as they wanted to taste the newest candy in town they have seen on television. Two Lolas were even asking me to bring them a Tanduay rhum (a brand of a local alcohol drink) with lechon kawali or roasted pork as pulutan (appetizer). Listening to two residents as they say ikaw na lamang ang pag-aso ko para makaalis dito (you are the only hope I have to get out of here) is striking statement coming from them. Do I have to dwell on these issues? That was the question I often asked myself when I was there. To be emotionally strong all the time as I experience their lives inside the institution was my motto to move on with my research.
CHAPTER IV
THE CENTER

Ang buhay,
ay parang isang awit lamang,
mayroong simula, at may kalatupusan,
ang araw at gabî nalulungkot hirang;
sa mga suliranin na pinaglalaban.

Ang aking pagkukunwari sa buhay,
nagbabalatkayo sa katotohanan,
ano man ang aking maging kapalarawan;
tanging Diwos lamang ang nakakalam. 10

This was the favorite song of Lola Josie, a semi-able resident staying in a cottage for the senile. Every time I passed by the cottage where she stayed, I would ask her 'Kumusta po Lola?' (How are you Lola?) and talk to her for a while and when said goodbye to her after the brief talk, she would ask me, “Why are you always in a hurry?” “When are you going to interview me?” If she saw me passing by without acknowledging her, she felt hurt.

The first stanza of the song depicts her life, which is compared to music with a beginning and an end. Everyday in Lola’s life, she experiences obstacles which she tries to overcome. But sometimes, she masquerades the real events in her life, afraid to face the truth. Nevertheless, she leaves everything to God who is in charge of her life.

Lola’s brief image presented was just one of the hundreds unique life experiences of residents in Golden Acres. For Lola, Golden Acres is a place for forgiveness as she was able to forgive the people who were responsible for her stay there. I am referring to her own husband and own sister, who are now staying together abroad leaving her behind.

10 English translation:
Life is a song,
With a beginning and end,
Everyday and night, I feel down,
Because of obstacles or difficulties hard to overcome.

Sometimes I tend to disguise,
Masquerading the truth,
But whatever happens in my life,
I owe it to God for He knows everything.
My day-to-day interaction with the residents as well as the staff and the visitors made me more aware of the dynamics in Golden Acres as an institution for the abandoned, neglected and unattached older Filipino who are in need of care and attention. The center or the Golden Acres is a “house” that could accommodate at least 285 clients. It has 15 cottages composed of nine (9) residential facilities or “cottages” for older persons, one infirmary, a common kitchen, a social hall, an administrative building, a livelihood center and a recreation hall.

Located at the back of a huge shopping mall occupying a vast 1.6 acres, it is still basically unnoticed by many except those who are living within the vicinity. It is located in a dead end corner with a three story public high school and an institution for special children next to it. In other words, it is virtually hidden from the public. What does this mean?

As written on the wall of the administrative building, the center was part of the Integrated Social Welfare Program of the former First Lady Imelda R. Marcos. The programs and services were designed in line with the vision of the center which is to empower older residents to improve their quality of life, believing that all needy older persons have inherent worth and dignity and shall not be deprived of a wholesome and satisfying life.
THE PLACE

The center calls the quarters of the residents “cottages”. It is something synonymous to a “rest-house or a town house” of a rich family in a popular place. Would it be the same thing for the residents in the center? As one of the staff puts it, the residents are like living in a “five-star hotel”, free board and lodging, what else can they ask for? I have been to each cottage. I noticed that each cottage has a living room with sofa and TV (some cottages even have music components). I recall one incident when I stayed and watched a program celebrating the Philippine Independence Day (June 11) with the Lolos of St. Vincent cottage. I asked them what the significance of the event to their lives and they answered wala (nothing) because they themselves do not feel “free” in their present situation.

In each cottage, residents have their own kitchen (except for St. Anne where the bedridden residents are staying) with a big rice cooker and other kitchen utensils. They have communal bathrooms and a laundry area. Some cottages are lucky to have a garden in the backyard. Every cottage has an “intercom” connected to every building. Most importantly, there is an assigned caretaker called houseparent who makes sure that the cottage is clean and the residents are all in good condition.

A Government Facility

Golden Acres is under the jurisdiction of DSWD-NCR. The center is being manned by government workers taking-charge of the day-to-day activities of the residents. Residents are under the supervision of the people that run the facility. During my stay, I witnessed how the
bureaucratic process affects the lives of the elderly, but do they have a choice? Yes they have if they want to go back to their past lives, that is, as scavengers, beggars and vagabonds, etc. Nobody would dare, however, because they are now living inside a quite comfortable life in the institution—a place never in their dreams they have imagined living in. As the bureaucrats are in-charge with the welfare of the residents, I noticed some of their activities as they carry on their responsibilities. A Social Worker for example would try to process the feelings of a resident reported to have suffered depression or is suffering depression. I observed how an executive-on-duty (ED) would make rounds at night to check if all the residents are in good condition and do an actual counting of residents to see if everybody is accounted for. For the medical staff, I was able to see how they manage and take care of their patient-residents. Patients would react and humbly say salamat, Ma’am (thank you, Ma’am) to them. It was a relationship which I may say characterized by respect with a degree of power relation.

Financially, as mentioned in the study by Canete, et.al, (2001), for the fiscal year 1999, 200.7 billion pesos was allocated to social services programs of the government that comprise 33.81 percent of the 1999 national budget. Only 1.51 billion pesos go to DSWD as reported by the Department of Budget and Management (DBM). From the said appropriation, 530 million pesos were internally appropriated to locally funded projects where 74 centers compete for the funding. One of the centers that would compete for the budget is Golden Acres and it was not mentioned in the study how much exactly was allocated to the center. For 2003, only a measly 6.7 million pesos from the national budget of 804 million pesos was allocated to the center. This implies that still the center is not a priority of the government. The center budget represents .31 percent of the department’s (DSWD) 2.2 billion pesos budget.

A Place to Celebrate

To enable older persons to effectively participate in programs and services geared to provide quality life, special occasions are being celebrated in the center. I participated in some of them and I was happy to see residents enjoying the events. But being aware that most residents are not participating because of the difficulty in going into the social hall and unenthusiastic with the programs, it is difficult for one to say that the event is for everyone’s enjoyment.
The Santacruzan

This is basically an event celebrated in the country annually, i.e., every last week of May. This is usually referred to as 'the mother of all fiestas.' I was privileged to join the center’s Santacruzan as an observer. I also volunteered to take pictures and document the occasion. With the activities being held, the organizers usually could not please everyone. A resident named Lolo Pepe commented that the center was just making fool of them. He did not like the idea of Lolos and Lolas being paraded with colorful gowns and fully made-up.

The Santacruzan is an annual event being participated in by journalists and reporters who cover the occasion. Due to the bad weather, it was postponed twice. When it was to be held finally, the journalists and reporters were nowhere in sight. Since May is the month of the festival, the center decided that “rain or shine”, the Santacruzan will take place on the last day of May.

The staff and their relatives, chosen residents, barangay officials and volunteers in the center took part in the event. It was a colorful day with lots of flowers and music being played with a loud speaker in the social hall where everybody waited to witness the parade.

*Lolas and Lolos parading for the Santacruzan.*
I stayed at the social hall before the event began and I witnessed a "drama" among the Lolas. A Lola was approaching her cottage with kaldero of ulam (pot of food) for the residents of the cottage. It was difficult for Lola to carry the pot, so I helped her. Another Lola tried to get it from me but the first Lola was mad at her and told me not to give it to her and so they had "word-war". I have learned later from a third Lola that the second Lola was in-charge of the function being carried by the first Lola. Hence, the latter accused the former of being pakialamera (meddling with another person's business).

The event was participated in by chosen few residents to perform given roles for the event. Most of the participants were staff of the center and their family members. The staff were more excited than the residents because they even brought with them their personal make-up artists unlike the residents who were simply "fixed" by the volunteers and staff themselves. Some of the gowns worn by the staff were rented. The gowns worn by the residents were either their own or were prepared by the staff.

Many of the residents were audience in the Hall. They stayed in the Hall before and after the parade. The event began with a processional march from the Hall to the gate of the center. It then proceeded to the Barangays Hall with the barangay officials as "escorts".

People around the place were curiously watching them. But everyone was thankful because during the parade, the rain stopped. It rained again when the parade was about to end.

As a photographer, I spent sometime with Lola Mercedes, the oldest Lola in a wheel chair and we (with the volunteers) asked her to waive her hands to the crowd. She could not do it longer because she felt tired, she opted to smile with them instead as they cheered shouting: "Lola is still beautiful, she can still join Ms. Universe."

I helped in the distribution of the snacks for the residents after the parade and I have noticed that not everyone was given their share; it was understandable though because the snacks were limited. As I volunteered in fixing the Hall afterwards, I spent time talking to Lolo Celedonio who was in-charge of the Hall every time an activity ends.

Father’s Day Celebration

I remember one Lolo saying: Why do we have to celebrate Father's Day? Have we been good fathers? If we are, why are we here?

For some of the Lolas, it was an event that should not be celebrated because it would only make them cry. Who would celebrate with them? The Lolas were there with the Lolas giving tributes to their
respective fathers. It was a very dramatic event especially when one of the Social Workers who is being treated as the center’s daughter sang a song very meaningful for them. The song was sung in its local dialect:

Si nanay si tatay, diko pabayaan,
Balakid na baot ang sa kuyang utang...

Literally translated in English, the song means: My parents I will never forget, I owe them my life therefore I will serve them....

The event was participated in by 57 Lolas and 43 Lolos with 4 female and 2 male staff. Eighteen of the residents shared their memories with their fathers and sang songs to everyone present. Messages were all about remembrance, importance and honoring their fathers.

Such programs and activities satisfy one of the center’s objectives, i.e., to restore the physiological, social, psychological, intellectual and spiritual well being of older persons.

A Place for Donations

Donations come in almost everyday. These may be in the form of goods, clothing, appliances and cash from various organizations. As I spent considerable time at the receiving section of the administrative office, I saw the delivery of donations and how they are being managed and kept for the residents and staff.
A Place of Reflection

For the workers, the center taught them a lot of valuable lessons that could not be learned outside. As individuals, they also reflect to the situations of the residents of the center. They also contemplate on the reasons why the elderly are living there, majority believe that they also did something wrong with their families that is why they are there. A share of the blame should be put unto them not only on their relatives.

For the permanent workers who have been with the center for many years now, they believed that to work with the elderly is a ‘formidable task that requires extra patience and dedication’ as said by one of the staff. They claimed that it is fulfilling to serve and work for the elderly.

For the young and relatively new workers, they realized that they must understand their parents more as they grow older. It is difficult to take care of them but still wanted to because of the fear of condemnation from the public believing too that in the future, the same treatment would be given to them.

THE PEOPLE

In this part of the paper, I will introduce the great “people behind the scene” of Golden Acres. They were the ones the residents are so thankful for because they execute duties which are supposed to be done by their relatives. A separate chapter for the “residents” of the center will be allotted in this study.
The Staff

There are 68 staff serving 244 residents. In their organizational chart (Appendix 1), the staff are grouped according to different services. Most of them belong to the Homelife Service directly in-charge of the day-to-day needs of the residents. Their employment status though are different from one another. The members of the rehabilitation team are not included in the chart maybe because the three Physical Therapists are just holding a Special Order (SO) status from the government. There are 41 permanent staff, 21 are under a Memorandum of Agreement (MOA), two (2) are volunteers and two (2) are sponsored staff.

The Visitors

Acceptability of the presence of an institution like Golden Acres can be seen with the weekly visitors coming in the center. These visitors are usually volunteers and trainees and their presence put in more color to the lives of the elderly living there. They are very happy to receive them. They bring hope and transference, showing that somebody cares for them too no matter what. I have seen individuals talking to the elderly, giving them food, and assisting in their daily activities. These are people who would like to devote their free time with the residents. Some fortunate elderly does have donors giving them weekly grocery and sometimes money, which is the source of jealousy for those who do not have one.

A Tribute to the Visitors

The Politicians

Golden Acres is also a place where politicians and their family celebrate important events in their lives. As an effective political campaign strategy, most of them would go there knowing that it pleases a lot of people, especially for politicians who are running for national positions. In the center, I have seen t-shirts, for example, worn by residents with the Senator’s name printed on it; the table of the table tennis used for recreational purposes has a name of politician painted on it, along the corridors were pictures of residents and politicians visiting them.

When I was there, a daughter of a known city councilor celebrated her birthday with the residents, bringing with her entertainers, food and prizes for those who would participate in their
games. It was a well-documented event with video cameras and photographers.

Religious Organizations

Many religious organizations come and offer their help to the elderly. Some are students who are being trained to become nuns. Most of the residents welcome them because they listen to their stories, stay with them and try to share their experiences with them.

Caregiver Trainees

I have talked to many of the caregivers and all of them are doing their training for three days, such a short time to learn the dynamics of an institution caring for the aged. I asked the staff about this and they said that usually, these trainees come in large number and all at the same time. Most of the time, they are a disturbance to the elderly. They are enrolled formally in caregiving schools and plan to go abroad to work as caregivers. Some of them were just completing the required number of hours before flying in to Canada, New Zealand and Sweden.

Internship Training Ground

Most of them are Physical Therapy (PT) students and some from other medical courses. The institution is allowed to accept three PT interns per month. The students during my fieldwork were from Don Mariano Marcos State University in Batac, Ilocos Norte (a government school in the north of the country). Residents who are in need of therapy especially those who suffered from stroke are assigned to them.
Movie Stars and Media People

I have seen many pictures of movie personalities visiting the institution. Many of them are famous ones trying to share their fortunes in life but most importantly, coming there to entertain the residents. Given the unique situation of the elderly, they are the perfect subjects of dramatic TV programs; the events were highlighted for example, two elderly getting married or being re-united with their family. It is also a way for the elderly to be seen on screen for probable identification by their relatives watching.

"I have seen Lolo Ticoy one time on TV, he looks so happy, and I am happy for him."

Ruby, niece of Lolo Ticoy

"Every time there are reporters coming in, I always stay at the back of the reporter in order for me to be seen by my children hoping that they will get me out of here."

Lolo Andro

Researchers and Promoters

A place for academic purposes, being the focus of students who are interested with the lives of elderly living in an institution. It is not actually interested alone but more than that, it is a passion, a desire for someone to be a listener for those who are in need of ears. It is also a place to promote products for the elderly which include medicines being advocated by specialized practitioners in ageing, selling drugs for the prevention of dementia for example. I attended a lecture forum on Alzheimer’s disease given by the Alzheimer’s Disease Association of the Philippines in association with St. Luke’s Hospital. Beauty pageant organizers also promote the causes of their organizations by going to the center with media covering the event.

THE SERVICES

As a future model social laboratory for the development of residential care program for the older persons, the following programs and services are being implemented.

Social Service

There were five (5) Social Workers who were in-charge of the services being provided in this Division. Actually the Social Service is the
umbrella organization of the institution. They provide opportunities for the older persons to enable them cope with their condition and to develop their potentials to contribute to community development. Through casework, group work and other case management activities, they helped residents accept their own worth and dignity with potentials to share their rich human experiences to the young. The end goal of the service is to re-unite the residents with their own families or find alternative placement. For the duration of my fieldwork, I was not able to gather information on the frequency of residents being re-united with their families. I am sure that no reunion happened during my stay there. The Social Workers are trying their best to communicate with local authorities regarding the presence of relatives of residents living in the various regions as an initial step for possible re-union. The Social Workers too are in-charge in the burial of residents who passed away. Usually, a Social Worker and a representative of the funeral home were the only ones witnessing the burial ceremony. There were two residents who died when I was there.

Health Service

The team is composed of five (5) nurses and a doctor who comes once a week (every Wednesday) to check the health condition of the residents. The nurses carry out orders from the doctor like assisting in the maintenance of medicines of clients, refer to hospitals elderly who needs more and sophisticated attention and when there are emergency cases. Specific duties include daily dressing of wounds, health monitoring like blood pressure monitoring and giving medicines to the patients, daily wound dressing and treatment, applying scabicides.

According to one of the nurses, most of the residents are "attention seekers", also they have the tendency to "maligner" i.e., trying to create an illness. But as a nurse, 'I am setting a boundary between my relationship with them', she said. I got the impression that they must always be firm and be followed even the residents are demanding. The nice thing was that they always try to explain everything they do to each of the patients (residents) they are treating to restore a harmonious relationship.

Accordingly, most of the medical problems of the residents they encounter are hypertension and the presence of skin diseases. As reported and observed, many residents are suffering from scabies because they share clothes and blankets. Sometimes it is because of the drying of the skin especially for the ageing people. I also learned the presence of surot or bedbugs, which usually come from newly, admitted residents or from wastes because some residents are fond of
hoarding foods and old things and they resist whenever these are confiscated or removed. At present, the center lacks medicines and experiences inadequate supply of medicines for hypertension. As they provide medical service to the residents, a different group is in-charge with the physical and occupational care of the residents.

I also talked to one of the three-team leaders of Physical Therapy (PT) Services. She explained to me the structure of the Service which does not have a regular staff. As a matter of fact, they are not included in the organizational chart (see Appendix 1). As the rehabilitation team of the center, they teach the residents with disabilities how to: walk/ambulate; transfer from bed to chair; properly execute bed positioning, and turn patients with bed sores every two hours. If the above functions are fulfilled, they help residents how to shift their weight and balance. In March of 2003, there were 79 residents treated because they were suffering arthritis. Arthritis according to Ria is the most common problem among the residents. She estimated that almost 200 of the 242 residents are suffering with arthritis. She also estimated that around 40-50 residents are suffering with stroke.

Homelife Service

Most of the staff (40) belongs to this Division of the center. They are tasked to provide a wholesome and therapeutic community stimulating a home atmosphere where the basic necessities like food, clothing and comfortable quarters are given to the residents. They are the direct providers of care to the residents. Some of them are nursing attendants, midwives and Social Workers.

Specific duties of the staff include: helping residents take a bath, feeding them, washing beddings, cleaning the entire cottage. They also share stories with the residents, make them beautiful (grooming), make them laugh, help them drink water. Their day-to-day interaction with the residents is not so deep though compared to the Social Workers because they are doing all the household chores of the cottage. Sometimes they assigned team leaders in the cottage to make them at least aware that they are still active and contribute to the household activities. With special invitations from TV stations, they also serve as escorts of the residents. With those who are bedridden, they regularly change their diapers, while those who are admitted in hospitals, they attend them until they are discharged. Accordingly, even if they have the technical know-how and very equipped, still, they needed training to enhance their skills, according to their Head.
**Dietary Service**

A Nutritionist/Dietician heads the Service with two (2) cooks and a volunteer. They are tasked to provide proper and appropriate menu for the older persons in accordance with their physiological needs. The meals of the residents are decided by considering the budget, resident’s needs and food preferences, their physiological needs and applicability and also what the physician has prescribed. Usually, regular diet or normal diet foods are prepared except with some diet prescriptions from the physician, but the dietician can always modify it. The meals should not be salty, with very low sugar, low fat and more fruits and vegetables. Alternately, beef, chicken, meat/pork, fish and vegetables are being cooked or prepared. The budget is only 40 pesos per day per resident (less than one Euro per day as 1 peso = 60 euro as of August 2003).

Within a day meal: a quick look

- **Breakfast:** smoked fish, *itog maalat* (red egg) mixed with tomatoes, sardines, soup, bread with cheese.
- **Lunch:** usually applying “one-dish meal” where they can find vegetables, soup and meat in just one viand. So foods like *sinigang na baboy* or *isda* (pork or fish), *nilagang baka* (beef) and *tinolang manok* (chicken) are prepared.
- **Dinner:** usually light meals like vegetables with mixed meat.
- **Dessert:** always given to the residents, a choice of banana, apple or oranges.

**Productivity Service**

There is only one staff of Productivity Services of the institution. She’s holding the position of Manpower Development Officer (MDO). The Service’s main function is to develop products to sell as a source of income for the center. A certain percentage of the income goes the residents’ themselves. The goal is to engage the able bodied older persons in productive and income-generating activities such as arts and crafts, vegetables gardening, ornamental plant propagation, etc.

The training office occupies the newest building built in 2001 at the center donated by a philanthropist. They name the building after him, “Dupont”. 15 residents are on their training to do “origami” basket and duck making (7 *Lolas* and 8 *Lolos*) during my stay in the center and some *Lolos* are into gardening.

*How and Why Older People Live in Institutions:*
*A Case Study from the Philippines*
Other Services

The brochure of the center that I obtained in digital file includes other services like adult literacy which provides training to develop the resident’s talents like singing, dancing and others. Every Sunday afternoon, a Catholic priest usually holds a mass for the residents and every Wednesday afternoon, a separate group of born again Christians celebrate the same. These are all part of the value formation and spiritual service designed for the spiritual development of every resident. Some religious organizations conduct bible studies, spiritual counseling and other spiritual activities.

The center is also into the promotion of physical vigor of its residents. They provide sports equipment like table tennis, billiards table, basketball court, chess and scrabble boards for the residents. They
also maintain a mini gym for those Lolos who are into bodybuilding. The staff believes that these facilities are very helpful in maintaining the residents’ vigor and strength. They organize an annual sports fest for the residents and staff and perform sports activities like volleyball, ping-pong, other table games, ballroom dancing and others. As the name of the service implies, the Administrative Office, which is composed of nine (9) staff, is in-charge with logistics and other bureaucratic functions.
CHAPTER V
THE RESIDENTS

My Dream
I dreamed I walked a narrow bridge
That rimmed an angry sea
But I was not afraid
Because you walked ahead of me.

The water swiftly seemed to rise
And banned us from the land
But I was not afraid dear
Because you tightly held my hand.

Dreams are strange, and yet I feel
Deep in my heart today
I won't be afraid of life
With you to lead the way.

This was a poem composed by one of the Lolas when she was in her youthful years. This illustrates how emotionally rich the residents of the center are. Many of them are talented individuals given their disabilities. The lead singer of the Sunday choir is Lola Juling, who is totally blind. Lolo Julio is a total performer and with a guitar donated by a movie actor; he can play various melodies of music.

There are at present 244 residing Lolos and Lolas in the center (see Appendix 2). Most of them are females, coming from different parts of the Philippines. The center provides services to the older persons who are Filipino citizens, 60 years old and above (but I have spoken to two residents who are in their 50’s), dependent but have no immediate relatives responsible or duty-bound for their support and free from contagious or communicable disease.

With my day-to-day interaction with the residents, they would rather say that they do not have relatives anymore (no matter how untrue) because of their desire to stay in the center. According to the staff, a lot are suffering with tuberculosis (TB) that is why they warned me to be extra careful although continuous medication is being rendered.

Socially oriented groups can make referrals and individuals, media and public service programs, civil organizations, concerned citizens, hospitals, policemen and local DSWD offices in various regions of the country. Experience dictates that they couldn't say “no” to known referees. As part of the requirement for admission, a social case study report/abstract, medical certificate/chest x-ray result and
psychological evaluation report shall be submitted. But according to the staff, referrals without requirements are increasingly occurring which ignores the procedure for admission set by the office.

The residents at the social hall of the center.

**CATEGORIES OF RESIDENTS**

Once accepted, whether strong or weak, it is procedural to put the resident in the bedridden cottage, a section for the physically unable to perform tasks but are not necessarily ill-equipped. This serves as an orientation-try-out-initiation to them, showing the typical life they should expect in the center. The center believes it is effective to discourage residents and later realize that want to go back to their own relatives. Once they passed the initiation they are transferred if there is vacant bed in the senile section or the ward for the inconsistent resident in terms of his/her words and tasks and those having the symptoms of dementia. If they passed and have a good record, the resident will be moved to the semi-able cottages, categorized as one that is productive by with physical defects. The favorite cottage is the one for the able residents; they are basically productive and still have good orientation in terms of time, place and person. Usually, they are the so-called "institutionalized" elderly who does not want to go back to their relatives anymore and have accepted their fate to live in a home for the aged.
Table 4: Overview of the Cottages’ Categories

<table>
<thead>
<tr>
<th>COTTAGE</th>
<th>CATEGORY</th>
<th>RESIDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sta. Rita</td>
<td>Able to semi-able</td>
<td>Women</td>
</tr>
<tr>
<td>ST. Martin-Annex</td>
<td>Able to semi-able</td>
<td>Women</td>
</tr>
<tr>
<td>ICC</td>
<td>Able to semi-able</td>
<td>Women</td>
</tr>
<tr>
<td>Tamondong</td>
<td>Semi-able to senile</td>
<td>Women</td>
</tr>
<tr>
<td>Sta. Lucia</td>
<td>Bedridden</td>
<td>Women</td>
</tr>
<tr>
<td>St. Anne</td>
<td>Semi-able to senile</td>
<td>Women</td>
</tr>
<tr>
<td>St. Vincent</td>
<td>Able</td>
<td>Men</td>
</tr>
<tr>
<td>St. Joseph</td>
<td>Able to semi-able</td>
<td>Men</td>
</tr>
<tr>
<td>St. Martin</td>
<td>Semi-able to bedridden</td>
<td>Men</td>
</tr>
</tbody>
</table>

As illustrated in Table 4, the residents are separated by sex for privacy reasons. Furthermore, they are classified into two main categories, ambulatory and bedridden. The former is then subdivided as able, semi-able and “senile”. Being categorized as “senile” is something off-putting compared to other categories. “Senile” is the closest term for the Filipino ulyanin or “being forgetful”, a common characteristic among old age people, someone who is exhibiting memory loss or mental impairment associated with aging.

With regard to the flow and number of residents, I monitored a tallying board in the center (Table 5). The center also maintains a report on quarterly basis with regard to the status of the residents (Table 6).

Table 5: Case Load Inventory
(As of May 29, June 5 and June 26, 2003)

<table>
<thead>
<tr>
<th>Cottage</th>
<th>May 29</th>
<th>June 5</th>
<th>July 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sta. Lucia</td>
<td>58</td>
<td>57</td>
<td>58</td>
</tr>
<tr>
<td>St. Anne</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>Tamondong</td>
<td>16</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Infirmary</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sta. Rita</td>
<td>30</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>St. Vincent</td>
<td>29</td>
<td>29</td>
<td>29</td>
</tr>
<tr>
<td>St. Joseph</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>St. Martin</td>
<td>34</td>
<td>33</td>
<td>34</td>
</tr>
<tr>
<td>ICC</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>St. Martin Annex</td>
<td>17</td>
<td>17</td>
<td>17</td>
</tr>
<tr>
<td>TOTAL</td>
<td>244</td>
<td>242</td>
<td>244</td>
</tr>
<tr>
<td>Male</td>
<td>83</td>
<td>82</td>
<td>83</td>
</tr>
<tr>
<td>Female</td>
<td>161</td>
<td>160</td>
<td>161</td>
</tr>
</tbody>
</table>
Table 6: Quarterly Statistical Accomplishment Report  
(As of March 25, 2003)

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>OLD</th>
<th>NEW</th>
<th>GRAND TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Ambulatory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1 Senile</td>
<td>88</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2 Able</td>
<td>86</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3 Disabled</td>
<td>89</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Bedridden</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>274</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Categories for the movement of cases or closed cases (Table 7) are also being monitored. During my fieldwork, however, the board was kept empty. I remember one Lolo who escaped; his escape created a fuss among the staff.

Table 7: Movement of Cases (Closed Cases)  
(As of July 2, 2003)

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>OLD</th>
<th>NEW</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. DISCHARGE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1 Family</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1.2 Ins/t./com.</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2. Run-away/ Voluntary discharge</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>3. Death</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>

GETTING TO KNOW THE RESIDENTS

The survey was participated in by 58 residents chosen at random. They are usually able to semi-able. A summary of the respondents is presented in the Table 8. I reported the findings of the survey knowing that this instrument may not give a reliable response to the questions by my respondents. To admit that I am aware of the shortcomings and the obvious covering of some respondents of their real “persona”, would at least warn the readers of the reliability of the results. In other words, do they have reasons to conceal? Bleek (1997) realized that “lying is a strategy for survival, a code to preserve one’s own and other people’s self respect.” Based on my fieldwork experience, I knew the sensitivity of the issue I am dwelling with that is why I decided to listen to both the stories of the elderly and some of their relatives to somehow find the “truth”. Elderly respondents who are still on the denying stage of their stay in the institution would answer the questions asked the other way around to cover the embarrassing aspect of their life and their family’s rejection on them. Relatives of elderly themselves would really justify why they had let their elderly live in a home for the aged.
Table 8: Respondents to the Survey

<table>
<thead>
<tr>
<th>COTTAGE</th>
<th>NUMBER OF RESPONDENTS</th>
<th>DATE OF INTERVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Joseph</td>
<td>4</td>
<td>June 24, 2003</td>
</tr>
<tr>
<td>St. Martin</td>
<td>8</td>
<td>June 21, 2003</td>
</tr>
<tr>
<td>St. Vincent</td>
<td>8</td>
<td>June 20, 2003</td>
</tr>
<tr>
<td>Sub-total male</td>
<td>20</td>
<td>34 percent</td>
</tr>
<tr>
<td>Sta. Rita</td>
<td>14</td>
<td>June 19-20, 2003</td>
</tr>
<tr>
<td>St. Martin Annex</td>
<td>8</td>
<td>June 20, 2003</td>
</tr>
<tr>
<td>ICC</td>
<td>4</td>
<td>June 19, 2003</td>
</tr>
<tr>
<td>Tamondong</td>
<td>6</td>
<td>June 19, 2003</td>
</tr>
<tr>
<td>St. Anne</td>
<td>6</td>
<td>June 20, 2003</td>
</tr>
<tr>
<td>Sub-total female</td>
<td>38</td>
<td>66 percent</td>
</tr>
<tr>
<td>TOTAL</td>
<td>58</td>
<td>24 percent of the residents</td>
</tr>
</tbody>
</table>

The 58 respondents represent 24 percent of the total residents of the center which is 244 (see Appendix 2). There were 161 women and 83 men among the residents. Thus women constituted about 66 percent of the total residents. In the survey conducted, the same percentage share of the respondents was coincidentally followed, that is, 34 percent were men and 66 percent were women.

Marital status

Table 9 shows that 55 percent of the residents were single and 28 percent were widowed. This reflects that most possible residents are single individuals assuming that everything remains constant. It also shows how important family members are as future source of elderly care. Particularly, 72 percent of the single were women and 69 percent were widowed. It is interesting that the four (4) married residents were all males and are separated from their respective spouses. Their spouses are not staying in the Golden Acres.

Table 9: Marital Status of Residents

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>32</td>
<td>55</td>
</tr>
<tr>
<td>Widow</td>
<td>16</td>
<td>28</td>
</tr>
<tr>
<td>Married</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Separated</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>Live-in</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>TOTAL</td>
<td>58</td>
<td>100</td>
</tr>
</tbody>
</table>

Place of origin

About 74 percent of the respondents came from Areas Outside Metro Manila (AOMM). Most of which were from Luzon Island (33 percent), Visayas (31 percent) and Mindanao (10 percent) all migrated to Manila.
As the center is a national institution for the elderly, it was also found out that 26 percent of the residents surveyed were from National Capital Region.

<table>
<thead>
<tr>
<th>Place of Origin</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luzon</td>
<td>8</td>
<td>11</td>
<td>19</td>
<td>33</td>
</tr>
<tr>
<td>Visayas</td>
<td>4</td>
<td>14</td>
<td>18</td>
<td>31</td>
</tr>
<tr>
<td>Mindanao</td>
<td>2</td>
<td>4</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Manila</td>
<td>6</td>
<td>9</td>
<td>15</td>
<td>26</td>
</tr>
</tbody>
</table>

Total 20 38 58 100

Educational attainment

Most of residents reached elementary level in their education (57 percent) whereas 21 percent reached their secondary school and 15 percent have reached their tertiary level of education. Seven (7) percent of the respondents were illiterate and all of them were women. The breakdown of the level of education they have achieved is presented in the Table 11.

<table>
<thead>
<tr>
<th>Educational Attainment</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Raw</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No read, no write</td>
<td>4</td>
<td>4</td>
<td>6</td>
<td>6.9</td>
<td></td>
</tr>
<tr>
<td>Elementary</td>
<td></td>
<td></td>
<td>33</td>
<td>56.9</td>
<td></td>
</tr>
<tr>
<td>Grade 1</td>
<td>2</td>
<td>4</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 2</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 3</td>
<td>0</td>
<td>4</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 4</td>
<td>0</td>
<td>6</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 5</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 6</td>
<td>4</td>
<td>4</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 7</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary</td>
<td></td>
<td></td>
<td>12</td>
<td>20.7</td>
<td></td>
</tr>
<tr>
<td>1st Year</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Year</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd Year</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Year</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tertiary</td>
<td></td>
<td></td>
<td>9</td>
<td>15.5</td>
<td></td>
</tr>
<tr>
<td>2nd Year</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Year</td>
<td>3</td>
<td>5</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>38</td>
<td>58</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>
It is surprising to find out that of the nine (9) residents who reached college, eight (8) were graduates and have been working professionally prior their stay at the center. With regards to their living status, I presumed that they became accustomed to their lives in the center as they have been living there for years. Two of these professionals are receiving their monthly pension from the government and they are not being treated with special favors from the staff.

**Previous occupation**

Most of the residents before coming to the center were employed in the service sector (52 percent) of which majority were housemaids (22/30). The summary of those employed in different sectors is presented in Table 12.

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Service Sector</td>
<td>30</td>
<td>52</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Self employed</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>Housewife</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Agricultural</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Unemployed</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>58</td>
<td>100</td>
</tr>
</tbody>
</table>

**Who brought them to the center?**

A material 31 percent of the residents were referred by civic organizations confirming the earlier statement of the staff of the center that more and more, referrals were being received. Referrals from the local Social Worker comes next with 17 percent followed by friends or neighbors, which is 16 percent. Surprisingly 14 percent of the inmates came to the Center on their own (Table 13).

<table>
<thead>
<tr>
<th>Who brought you to institution</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>self</td>
<td>4</td>
<td>4</td>
<td>8</td>
<td>14</td>
</tr>
<tr>
<td>local social worker</td>
<td>6</td>
<td>4</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td>niece</td>
<td></td>
<td></td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>neighbor/friends</td>
<td>2</td>
<td>7</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>other relatives</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Unrelated</td>
<td></td>
<td>4</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>civic organization</td>
<td>7</td>
<td>11</td>
<td>18</td>
<td>31</td>
</tr>
<tr>
<td>Barangay</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>38</td>
<td>58</td>
<td>100</td>
</tr>
</tbody>
</table>
Reasons of moving

Most of the residents said that the main reason why they are living in the center was that nobody takes care of them (55 percent). This reason maybe attributed to poverty and their marital status where most of them are single and are unable to have the right education. The housing problem comes next with 24 percent that can also be attributed to the fact that they came mostly from AOMM. 16 percent of the residents also said that they do not want to be a burden to their family that is why the prefer living in the center. A resident from Mindanao, the southernmost part of the country was moved by their local authorities in the center because of peace and order situation and the family members were separated because of the ongoing domestic war. Other reasons are summarized in the Table 14.

### Table 14: Reasons of Moving to Golden Acres

<table>
<thead>
<tr>
<th>Reasons of Moving into the institution</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nobody to take care of me</td>
<td>15</td>
<td>27</td>
<td>42</td>
<td>55</td>
</tr>
<tr>
<td>not On good terms with daughter</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>no work</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>insurgency</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>housing problem</td>
<td>3</td>
<td>15</td>
<td>18</td>
<td>24</td>
</tr>
<tr>
<td>Does not want to be a burden</td>
<td>5</td>
<td>7</td>
<td>12</td>
<td>16</td>
</tr>
<tr>
<td>Total</td>
<td>76</td>
<td></td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Good things about elderly

When asked about the good things about old age, 64 percent of the residents became closer to God and 26 percent believe that having no responsibility is also a good thing while ageing (Table 15).

### Table 15: Good Things about Old Age

<table>
<thead>
<tr>
<th>Good Things About elderly</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>closer to God</td>
<td>14</td>
<td>23</td>
<td>37</td>
<td>64</td>
</tr>
<tr>
<td>rest more</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>no responsibility</td>
<td>6</td>
<td>9</td>
<td>15</td>
<td>26</td>
</tr>
<tr>
<td>none</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>near death</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>more time for hobby</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>38</td>
<td>58</td>
<td>100</td>
</tr>
</tbody>
</table>
Unpleasant aspects of being old

Having deteriorating health condition is the most unpleasant aspect of being old as answered by 50 percent of the residents (Table 16). But surprisingly, 14 percent said that it is none at all, there is no unpleasant thing of being old because for most, it is a natural process. Could this a symptom of positive ageing?

To suffer dementia is also a not a good thing to happen when one is getting older said 10 percent of the residents while nine (9) percent feared that no one to take care of them, which is true since they are being taken cared of by the center. A surprisingly low five (5) percent of residents claims that being lonely is a bad thing about elderly while one resident said that being old in the Philippines is a bad thing, referring to the hardships of living once you are old in the country.

<table>
<thead>
<tr>
<th>Table 16: Unpleasant Aspects of Being Old</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bad Things About Elderly</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>deteriorating health</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>fear of death</td>
</tr>
<tr>
<td>loneliness</td>
</tr>
<tr>
<td>none</td>
</tr>
<tr>
<td>impatient/irritated</td>
</tr>
<tr>
<td>no one to take care</td>
</tr>
<tr>
<td>dementia</td>
</tr>
<tr>
<td>be in Philippines</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Old or not yet old?

When asked if they consider themselves old or not yet old, almost equally half of the respondents said that they are (47 percent) while 53 percent answered no, they are not yet old (Table 17).

<table>
<thead>
<tr>
<th>Table 17: Do they consider themselves as Old People?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OLD?</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Reasons

Most of them reasoned out that they are already old because they are jobless, sickly and weak (41 percent) while 26 percent attribute their being old with the natural process. While those saying that they are
not yet old believes so because they are still strong, able and active (81 percent) (Table 18).

Table 18: Reasons why they are (and not yet) Old

<table>
<thead>
<tr>
<th>Yes</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>no job/sickly/weak</td>
<td>5</td>
<td>6</td>
<td>11</td>
<td>41</td>
</tr>
<tr>
<td>disabled</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>physically look old</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>natural process</td>
<td>1</td>
<td>6</td>
<td>7</td>
<td>26</td>
</tr>
<tr>
<td>dementia</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>feeling not the same as before</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>white hair</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>matured</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>loneliness</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>19</td>
<td>27</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>still strong/able/active/run</td>
<td>7</td>
<td>18</td>
<td>25</td>
<td>81</td>
</tr>
<tr>
<td>Knows what he does</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>heart still beating</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>not thinking old</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>i have money</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>19</td>
<td>31</td>
<td>100</td>
</tr>
</tbody>
</table>

Daily Activities

To live inside the center is to follow certain rules and regulations. I was interested to find out from the residents themselves their daily activities.

Lola Esper
- **Morning**
  - 4:00-5:00: wake up time, drink coffee
  - 5:00-6:00: eat breakfast
  - 6:00-7:00: take a bath; grooming time
  - 7:00-11:00: walking around the center; sometimes sleep
  - 11:00-12:00: lunch time
- **Afternoon**
  - 12:00-1:00: talking with fellow residents
  - 1:00-2:00: sleep
  - 2:00-4:00: stay in balcony
  - 4:00-5:00: dinner
  - 5:00-9:00: watch TV
  - 9:00-4:00: sleep

Lola Esper is categorized as a “senile” resident. Other able female residents during their free would usually go to the livelihood office of
the center to engage in some entrepreneurial activities with some other able or semi able colleagues. Some Lolos would go to the hall and meet some residents to talk to while some prefer to watch TV all day long.

**Lolo Josel**

- **Morning**
  - 3:00 : taking a bath
  - 3:00-5:00 : listening to sweet music over the radio
  - 5:00-5:30 : breakfast
  - 5:30-8:00 : standby at the social hall, talking to colleagues, watching TV
  - 8:00-9:00 : listening to radio in bed
  - 9:00-11:00 : sitting in front of the cottage, waiting for lunch.
  - 11:00-12:00 : lunch time
- **Afternoon**
  - 12:00-1:00 : sleeping time
  - 1:00-4:00 : sitting there, sitting here, waiting for dinner
  - 4:00-5:00 : dinner
  - 5:00-7:00 : watching TV
  - 7:00-3:00 am : sleeping time

*Lolo Josel* is an able resident. With some Lolos like him, they spend some time in the livelihood center as well, play chess with other colleagues and do gardening.
CHAPTER VI
THE MAIN CHARACTERS
AND THEIR RELATIVES

The process of preparing this part of the study is challenging because I have to combine various sources of data to come up with a whole-integrative description of the main players of the research. Most of it came from the informants themselves and my interviews with their relatives, the staff especially the Social Workers and my observations since I spent some of my times with them all throughout my fieldwork.

This part of the study would prepare the reader in better understanding who the characters are and serve as initial background for the succeeding chapters that present various themes for the justifications why these characters are living in a place away from their families. The diagrams presented would illustrate the main characters of the research; they are in the shaded boxes. It would help us also characterize how big or small the family they come from.

LOLO TICOY: BEING SINGLE

Of the six key informants, Lolo Ticoy was the first one I interviewed. I will never forget this moment because as a first timer in the field of ageing, I was confronted too with administrative matters before I could begin. I was not allowed to tape record the conversation because it was not included in the permit issued. I negotiated for a place where I could interview Lolo because the Head of the center wanted it to be supervised. I asked for consideration and it was granted, and so the interview took place in the social hall of the center.

Lolo was one of the respected residents in the center because of his being kind to the staff and physically able to take care of himself and others. The volunteered “laundry man”, responsible of the dirty clothes of other bedridden residents. He is also in-charge in the preparation of the altar and keeping it every Sunday’s mass. I was impressed with Lolo’s ability to recall the most significant events that happened to his life. The death of his father, his mother, the date where he accompanied her sister suffering with leprosy in Manila which begun his journey in the city were some of the events that Lolo still vividly remembered. That was one of the traits her Social Worker was proud of Lolo. He was also the most religious of all my informants. He replied with such philosophical and biblical convictions in some of the questions I asked him. He described his family as being united even if
they were living in poverty. He said, “it’s better a meal of vegetable where there is love than a fattened calf where there is hatred.” As he said that passage in English, he still translated it to Filipino and its says: mas magandang kinakain n’yo ay gulay lamang kung mayroong pagmamahalan kaysa pinatabang baka kung mayroong namang alitan. The saying was taken from the King Solomon’s proverbs in the Bible Lolo said. I found out that aside from doing the laundry, he spent his free time reading his favorite book, the Bible. He honestly said, wala akong pinag-aralan kaya gutom ako sa karunungan (I was not able to study, that is why I crave for knowledge). He reads a lot and so while doing the laundry for example, he spends reading while waiting for the washing machine to finish.

Figure 1: The Family of Lolo Ticoy

The main reason why Lolo Ticoy is in the center was because he had no place to stay anymore (walang matirahan). He feels that he could no longer drive a car because of his cataract. No one would employ him because of his age. He said he is living a single life or solong buhay—the reason why he is now presently living in the home for the aged.

“We pity him but we cannot do anything…” Ruby, niece

Ruby was the most humble of all the relatives I have visited. She and her family are living in a very renowned place in Metro Manila because it is a place where leprosy patients are housed. Anyway, I can see in Ruby’s face how desperate she is to take Lolo out of the institution but she is hopeless. They are living a very difficult life too. They awarded her mother a lot in the place because her mother was a former patient. Her mother is the sister of Lolo Ticoy.
Lolo Ticoy is cherished by his family to the point that Ruby, his youngest niece to her sister, which Lolo believes to be alive (still), does not want Lolo to know that his sister passed away, a month after my visit to their place. She requested me not to mention to Lolo what happened to her mother because surely, Lolo Ticoy will be feeling sad and she does not want Lolo to feel that way. Lolo will be remembered because he was the one who helped her siblings when they were in Manila, sent his nieces and a nephew to school. Simply put, he is the breadwinner of the family. Lolo said that he was the one who fulfilled the responsibility of his father.

Through this adventure, I was able to at least update Lolo and Ruby what is happening to their lives. I showed to Ruby the current pictures of Lolo and she was so delighted, almost in tears to see Lolo in good condition. As I took pictures of Ruby and her family, Lolo on the other hand wondering why his sister was not in the family photo. I was speechless, I wanted to tell Lolo the truth but I was not prepared. Nevertheless, she was surprised to see three children of Ruby; the last time was just two. He could not recognize the place anymore because “it improved a lot”, Lolo said.

LOLO DOM: “BLACK SHEEP”

The same as with Lolo Ticoy, I was not allowed to tape record my conversation with Lolo Dom. Before going to see him, I was asked by the staff to leave my bag in the office. That afternoon of my scheduled interview with Lolo, I was looking for him in his room for three times but he was not there. Nevertheless, I stayed in the social hall of the facility to observe some of the residents who are also there. I chatted for a while and suddenly, Lolo came and apologized because he found out from other Lolos that I was waiting for him. I was happy that he came to see me instead. I found out that Lolo just came from a cottage of the female residents sharing stories with them. That is what he usually does during his free time. Lolo Dom said, wala akong naitulong sa nanay at tatay ko kaya’t parang nanay ko na din sila (I did not do anything to help my parents before that’s why I treated the Lolas here just like my mother), Lolo said.

Lolo was so expressive in the way he talks, his teary-eyed looks made it even more convincing for one to listen to his stories. Despite the good things that he said about the institution, the Social Workers were so skeptical to Lolo. Beware, one said, he is previously convicted with crime, and also afraid to be released knowing that we knew already that he had relatives, that was why he was saying good things to us.” One of the medical staff described Lolo Dom as having “OA” (overacting) character. Anyway, it was nice for Lolo to advice me
during the conversation that after my studies, I should get a nice job and marry three to four women. Of all the things that happened to his life, it was not marrying that he regretted most. I found him so dramatic and sensitive too. He felt so depressed and devastated with the fact that he is now living in Golden Acres while his siblings are enjoying their own respective lives differently from him. He is sensitive because he does not want residents to be called “abandoned” oftentimes used by the staff to describe them. He said, *mahirap at masakit pakinggan* (it is hard and hurtful to listen to that word), instead, *nawala o naligaw* (lost) perhaps but not abandoned.

The main reasons why he is now living in the center was that he can not go along with brothers and sisters, having a hard time walking and living under the bridge. Most importantly, he does not want to be a reason for a misunderstanding of his sibling’s family.

![Family Tree](image)

**Figure 2: The Family of Lolo Dom**

I have come to know more about *Lolo* by visiting his niece and sister in law. I confirmed the past behaviour of *Lolo*, which he honestly told me too. He was irresponsible, enjoying his life as if there was no tomorrow, not close to his brothers and sisters. Though there was a time that he lived in the house of his sister who was in United States and in the house of his brother, the husband of Herminia, his sister in law I interviewed.
I was not asked to come in their house but instead, allowed to stay and sit in their small garden. I talked to Leah (niece of Lolo) at first but suddenly came Herminia looking irate and in a high-pitched voice told me why I was talking to Leah and not her. I explained the reasons why I talked to Leah initially and I was apologetic too because I did not asked for an older person whom I can ask for my purpose. Then she calmed down and very openly said her piece. To find out that Herminia is an Ilokano was also of great help knowing that I am an Ilokano too; we have the same language. Ilokano is one of the regional languages in the Philippines being spoken by most inhabitants in the northern part of the country.

When Lolo found out that I had visited his relatives, he told me more about their family conflict. He asked me if I did it on purpose to visit them, and I said, it was part of my research. He understood and actually thankful because at least, he said, they knew that he was still alive. Though Lolo requested me to tell his assigned Social Worker that when he died, assuming that he dies at Golden Acres, he did not want his relatives to know. Lolo exactly said, "talaga, Philip, napagisip-isip ko na dito na magaganap ang RIP (rest in peace) ko (I realized that I will die here sooner or later). When his RIP comes, he asked me to say this to the Social Worker in-charge:

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huwag nang itawag,
gusto ko malibing nalang,
ganun ko si/a kamahal,
ayaw ko si/a maistorbo. 11
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I shared this to Herminia and Leah and the effect I guess was very touching, Herminia even cried upon hearing this. I also shared his sentiments on what is he still doing in the world where no one loves him? He said, I pray to God to take me (kuhanin na niya ako), it's difficult to say but ,...wala na akong sili (I am useless already), he meekly said. He also said, "alam mo Philip, dito ko lang Siya nakilala ng lubus-lubusan, dito ko siya nakilala (you know Philip, It's only here that I have known God to the fullest)."

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11 English translation:
Don’t inform my relatives,
I just wanted to be buried,
That’s how I love them
I don’t want them to be bothered.
LOLO JOSELL: BEING IRRESPONSIBLE

I encountered some difficulty interviewing Lolo Josell in the beginning. With the permit from the Director’s office allowing me to tape record the interview, I expected myself to be more confident, comfortable and spontaneous in the interview. I came to see Lolo in his room and said that it would be nice to do the interview in the social hall. I received a call from the Social Service office before I have started the interview. I was asked to come to the office and conduct the interview there. I told Lolo about it and he declined. I went to the office and asked their reasons why they wanted to have Lolo be interviewed in the office. They said that it was because I will be using a tape recorder. For my informants’ sake, I said, I would rather not use the recorder so long as they give me the freedom to talk with my informant (privately). I succeeded and even told me to be free to use a tape recorder for all of my remaining interviews without their ceremonial interference. What happened affected the quality of response given to me by Lolo. He said for example that they should not worry because he will not tell me anything that could damage “them”. My interview with Lolo was the shortest of all my interviews.

Lolo Josell said with self-satisfaction that he is not yet old because he could still win every woman’s heart whenever he wants to. He came to be admitted on the 1st day of the year 2001 knowing that people in Golden Acres would be more generous to accept him because of the event. He gave a reason totally different from his sons’ and daughter-in-laws’ so that he will be admitted. He said that he prayed very hard for him to be admitted.

He was responsible for the heartache experienced by one of the Lolas expecting that Lolo Josell felt the same feeling of love to her. I smelled that love is in the air during the first time I interviewed Lolo. He was wearing a red bracelet and I asked him why and who gave it. He said with tricky smile, dyan lang isa sa mga Lola dito (just one of the female residents here). Since it was my first encounter with Lolo I did not ask further but I was curious. One day, I noticed that he was not wearing the bracelet. I have learned from the staff that they made a moved to break his relationship with one of the Lolas, the one who gave her the bracelet. The Lola was terribly sad and crying each day whereas for Lolo, it was not a big deal for him, he claimed that they were just friends.

Now a widower, he is still strong and physically able to work and live independently. He was a former barber had his own shop in the place where he and his family lived.
He considered his marriage to his wife, as the most important thing that happened to his life that is why he felt so sad after her death. His wife suffered with comatose for eight months before she died. Though he said that he is now contented with his life because he found peace in Golden Acres, he pitied so much his only son who lives in a squatter area.

He said that the primary reason why he chose to stay at Golden Acres was because he had no one to live with anymore (walang makasama). He also tried living with his close friends, inside the jeepney before finally coming over to Golden Acres.

“He was never a good father…” Eduardo, son

Without Lolo’s knowledge, we visited his son Eduardo. He was very nice to entertain us in their house. They are living in a squatter area near a dumpsite in Malabon City. The smell is therefore discouraging but tolerable and there was many langaw (flies). I was with the assigned Social Worker of Lolo and introduced our purpose of seeing him. It was nice to talk to Eduardo’s wife as well and see their children. They are so hospitable and we are thankful in the end for their cooperation. Listening to their stories made a difference in better understanding of the case of Lolo.

I never told Lolo that I had visited his son and was able to gather information that contradicted his stories for obvious reasons. Eddie his son narrated his piece. For instance, the death of his mother. When his mother passed away, Eddie cried because of the fate of his mom in the hands of his father not because she died. His father deserved to stay in Golden Acres because he does not fit to the outside world, Eddie said. What Eddie knew was that his father spent all his money watching movies, drinking and smoking. His mother was
the breadwinner of their family before. Eddie being the only son was not able to finish his elementary education because he helped his mother in meeting their daily needs when he was still young.

_Lolo_ was fortunate enough to get a pass whenever he wanted to. He usually goes to church, watch movies and visit his friends whenever he is allowed to go out. He never said he was visiting all the time his son’s family. He usually gives his grandchildren and his son some presents. His presents usually from the donations he received from the visitors that he kept plus the ones given to him by his close “friend” _Lola_.

**LOLA ESPIE: FATE WITH HER GRANDDAUGHTER**

It was in the cottage of _Lola’s_ open living room that we had our talk. She preferred to have it there because she had difficulty walking. _Lola_ keeps on remembering her children. She had six (6) daughters all throughout and had been married twice and had a partner. But she lost four of her children: the first one because of heart failure, the second was because of diarrhea, the third—convulsion and the fourth—fell on stairs. She is now 78 and been longing to see her two daughters left. She knows where they are and even told me their addresses. _Lola_ was so open about the reason why she was staying at Golden Acres. Even if one her daughters wanted _Lola_ to stay with her family, she could not because of her love to her own teenage daughter who does not want _Lola_ to stay with them.

She has been living with her sixth daughter in a dumpsite turned residential area in Quezon City for sometime. During those times, she could not standstill rather, escape and goes back to her own way of life, that is, selling and collecting money from people who owes her in a popular market in Monumento, Manila. That was what she did in order to survive, until one day, the barangay officials in the said market took her at Golden Acres because she was seen loitering. She said, _naniningil ako sa Monumento, may pwesto ako sa palengke ng Balintawak tapos pink-up ako ng mga taga barangay tapos dinala ako sa Golden Acres ng madaling araw_ (one morning, I was picked-up by the barangay officials in Balintawak, the place I used to sell and they took me here). After she realized that she was taken at Golden Acres, _pagdating ko dito, sabi ko ampunan pala ito...Diyos ko, bakit napasama ako dito?...di na ako nakalabas_ (when I found out that I was taken in this home for the aged, I asked God why I am here? Then I was not allowed to go out already). But she really wanted to leave the home. Her reason was, _siyempre! E wala kang kitang pera dito...sanay kang may tindahan at kahit papaano kumikita ako sa Divisoria kasi sa bangketa ako nagtitinda...dito wala, maghapon wala,_

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nakakainip (of course, I wanted to leave the home because I am not earning here, I am used to my life in the market, at least there I am selling, here, nothing, I feel so bored).

_Lola_ was the most taxing informant among the six elderly I had interviewed in terms of eliciting vital information. This was not surprising because I was alarmed beforehand that she was _sumpungin_ or having an unpredictable behavior, characterized as “senile” though she still could walk and talk clearly. I got no answers from many of the questions I asked her. She would instead say, _ewan ko na_ or I don’t know anymore. She was proud of saying though that she is now better off than before because everything inside the institution is free. She is now contented and even prayed that this would happen until she dies.

Since she kept mentioning Susan, her fifth daughter, I asked her where she was now. She said that she was living with her father. It has been a long time that she never saw Susan and given the chance; she would try to find her. The barangay and the city where Susan is allegedly staying are familiar to me. My sister happened to live there and visited Susan. She confirmed what _Lola_ had shared about Susan’s special situation. Susan is mentally challenged that was why she never been to school.

![Family Tree of Lola Espie](image)

**Figure 4: The Family of Lola Espie**

A place where the former dumpsite of the entire NCR was located, I was able to founded the house of _Lola’s_ daughter there. It so happened that she was not around, instead, I talked to Maureen, her daughter. She was angry to her grandmother and so, she did not care where _Lola_ was living. She cares about her mother who always cries knowing that her own mother is living in the home for the aged. There are reasons why she does not want her grandmother to stay with them and that all
was the focus of our conversation. My visit to Maureen confirmed what Lola told me about her reason of staying in the center. Maureen was so open to talk about it too. Somehow, she also care about her Lola and we had some exchanges about how Filipino youth care on their elderly. When I told her that I am going to tell Lola about my visit and if she had a message to tell her, she hesitantly said, “do not worry about mama, she is fine.”

“I hate my grandmother...” Maureen, granddaughter

Upon knowing that I visited Maureen, Lola kept on asking how they were, how was Mila, her daughter, how were her grandchildren. She even wanted to walk with me (in the surrounding of the center) as I share with her my conversation with Maureen. I told Lola that they are all fine and there is nothing to worry about them. Lola was also delighted to know that Susan is in good hands. She was happy too to find out that her oldest granddaughter, Maureen, is now attending her 1st year in a University.

LOLA SOL: WRONGDOINGS

I interviewed Lola in her bedroom. She offered me to sit on her bed because it was her favorite area in the cottage, it was a peaceful setting for the interview. Lola must be the most intelligent of all the informants as well as the entire residents because of what she presented to be as she was. She is a lawyer, a criminal lawyer at that having handled a lot of cases successfully. She was oftentimes invited to deliver a speech every time there’s an occasion in the center. It is undeniable that she was from a wealthy clan in the place where she came from as she admitted that she never experienced poverty in her entire life. We talked in English most of the time.

Having many relatives in Baguio and La Union, she never thought of staying with them at all. Her relationship with her relatives was somewhat questionable because she mentioned that sometimes she could go along with them but many times not. So her primary reason of moving into the institution was that she was all-alone. Her daughter is in United States, her parents, brother and sisters were all gone.
Baguio City was the farthest of all my visits to the relatives of the elderly. It was almost six (6) hours away from Manila (one-way) by bus. The address given by Lola was correct. I looked for Arnulfo’s mother but she was not there anymore. It was Arnulfo, the only close relative of Lola that was in the house. He did not invite me to come inside the house and so we just talked outside their gate standing. He was rather surprised with the reason why I came over. He never knew that Lola was in Golden Acres. He was somehow ashamed but pretended not to be.

Arnulfo, the closest relative of Lola left in the country, was the grandson of her deceased brother. During the conversation, he said that Lola was never been a lawyer, never been close to her own brother and to her nieces and nephews. I also found out from Arnulfo that she was a “professional swindler” in the City to the displeasure of her family. Arnulfo in the end said that it is all up to me to believe him or not. Arnulfo was initially to talk to me and did not even know that

Figure 5: The Family of Lola Sol

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Lola was in Golden Acres. I already knew this because Lola told me one time that her relatives never knew at all that she was living there.

At first, it was difficult to balance both sides because of a limited time. I needed more time to verify the details of the stories in order to give my own piece. Nevertheless, I listened to both side and that is what I am presenting now.

Lola according to the staff was suffering great depression, having been left by her only daughter. She embodied a strong-willed character but I was able to let her tears fell when I gave her a birthday present. She did not want me to see her cry. I knew, so I pretended not to.

When I told her about my visit to Arnulfo, she said that I should have told her in advance so that she could have sent some pasalubong or gifts to Arnulfo and some of their neighbors. Nevertheless, she remembered Arnulfo as the son of Catherine, the daughter of her deceased brother. She was never bothered at all about my visit to Arnulfo. She was so thankful to know that somebody is still taking care of her “property”.

LOLA GUDING: BEING BEDRIDDEN

Lola was a bedridden resident so I interviewed her on her bed. It was difficult because she was staying with 28 more bedridden elderly. The smell was awful and disturbing. I witnessed some elderly defecating and urinating while on their respective beds. My interview with her, compared to the other key informants, required more patience. The houseparents though were trying their best to clean the cottage all the time. Despite the smell, it was one of the cleanest cottages in the center.

For almost 13 years, Lola Guding has been living in the home she never thought she would end up to. Yes, one of her reasons why she wanted to stay in an institution was because she was longing for someone to talk to, to be part of a community, to be accepted as part of the society, which was missing in the hands of her family.

She was born in Silay, Negros Oriental, an island miles away Metro Manila. She happened to be the wife of a man whose sister was married to famous politician in the country. Living a life filled with difficulty, she and her husband tried their best to send their five kids to school but could not especially after the death of her husband. Their children were taken by their aunt in Manila who sent them to college. They have now finished with their education and have their own families.
Everybody knew in the center that Lola had a very rich daughter, but why was she staying in a home for the aged? This puzzled a lot of the staff especially so when they attempted to re-unite her with her daughter, Olivia. She was not allowed to enter Olivia’s place, at the gate, the group who sent her there were not allowed to enter in the Subdivision (an exclusive residential area usually for the well-off) after the order of Olivia. From then on, she accepted her fate, but never hated her children, she wished them more happiness and satisfaction in life. She said in her own words repeatedly, "it’s acceptable for her to suffer not just her children."

After the death of her husband she married another guy to the displeasure of her children. She chose to live with her second husband even if her kids were against the relationship. She endured her children’s neglect and stood with the relationship she had with her second husband. After the death of her second husband, she was finally taken care of by Olivia, her richest daughter, married to a famous lawyer. Olivia lives in a palace like house.
The richest among the relatives I have visited, their house was located in first class subdivision and I was lucky enough not to be checked at the entrance gate. I knew beforehand that they are rich as told by the staff of Golden Acres. Indeed, they are very rich family as seen in their big house with a high gate and totally secured surroundings. But, I was not allowed to enter the house. Nobody opened the gate for me. I was happy though that a neighbor came and offered her help by letting me use their telephone and she even gave me the number of Olivia. I called but the woman who answered said that Olivia was out and could not entertain me. She suggested that I just call her a day after. I called as recommended but the telephone was not working anymore. I tried calling again the next day and there it was, I was finally able to talk and interview Olivia over the phone.

I found out from Olivia that the woman I have spoken to in my first call was she. She lied because she was hesitant to talk about her mother living in the institution. I understood her and we talked almost two hours about it. Embarrassment and being humiliated (in case the neighbors would know that Olivia’s mother was in the home for the aged) was the feeling conveyed to me. It was a natural reaction I guess because of the sensitivity of the issue.

It was Lola that I was become emotionally involved. After speaking to Olivia, I found out that Lola also stayed in her place sometime but it was Lola who was not comfortable not because she was not given proper care but actually, given everything. She had her own room and own nurse to take care of her. But for Lola, that was not enough, she felt so lonely not talking to anyone else in the house. I told Olivia that Lola wanted to go back now, but Olivia said, she is not yet ready to accept her mama. With much of my convincing, I even told her that Lola is in her critical stage now, having been bedridden and longing to see her and her other children. Olivia replied, “tell mama, we will just see each other in heaven.”
CHAPTER VII
THE THEMES

From the stories presented in the previous Chapter, I derived six themes that are important to understand in relation to the objectives of the study.

FAMILY CONFLICT

This justification, which may be due to various causes were at hand in the families of the characters I interviewed. These disputes ranged from living in a multigenerational household, to property clash, marrying the second time and a conflict due to the wrongdoings made by the elderly to their families.

Living in a multi-generational household

The case of Lola Espie illustrates this event. In as much as her daughter Mila wants her to stay in their place, her own daughter Maureen does not want her grandmother to live with them. She threatens her mother and father to leave the house in case Lola is allowed to live with them. In the case of the mother, she is faced with such a dilemma of choosing whom, her mother of her daughter? Maureen admitted that she was never close to her Lola Guding. She calls her tanda every time she is with them. [Tanda means old. When used to refer to an elderly, it connotes a sign of disrespect.] In the article of Tojos (2001), she said that gurang, tanda, and laos are some Filipino words meaning old. These terms she said were used in the context of “making fun of” and connote a loss of something like ability (makakalimutin or forgetfulness), speed (mabagal kumilos, kupad or slow foot), and attractiveness (laos or past ones’ prime, amoy lupa, mapanghi or having unpleasant odor). Maureen narrated why she hated her Lola very much. Accordingly, her Lola has been very violent towards her mother Mila: Lola would hurt her mother often, and worst, she would threaten to hurt her mother Mila with a knife. Whenever Lola was in their place, violent incidents—like what she narrated—happen. Maureen witnessed how difficult it was for her mother to be treated by her Lola in such manner. As a result, she developed a “trauma” out of the situation.

If Lola happened to stay with the family, she would often times leave the house without the family’s knowledge. Daring as she is, Lola would even climb over the gate just to leave the house. She told me that her father got fed up with her Lola too. It reached to a point
where he preferred *Lola* to stay away from them. Maureen is not spared from engaging in quarrels with her *Lola*. She recalls quarrelling with her often because she simply hates her. According to her, ‘*Pinipilosopo ko siya lagi*’ (I often answer her brusquely). Nevertheless, Maureen is also being bothered with the situation especially when she sees her mother cry and she knows that it is all because of *Lola*. I know *hirap si mama* (my mom is having a hard time). This compounded by the fact that, implicitly, I am letting her choose between *Lola* and I. If she would let *Lola* stay with us, I would rather leave this house and go somewhere else. When asked if *Lola* is in the right place now, Maureen said, *mali pa rin* (it is not right). Whatever happens, she is still the mother of my mother. *Kapamilya mo pa rin* (She is part of the family). However, there are reasons behind these things: she has the tendency to harm us and sometimes becomes violent. There are nights when she would get the knives, and that scares us a lot. For *Lola*, she already accepted her fate of living in a place away from her family. She understood Maureen and was so honest to tell me that her granddaughter never liked her. Her only wish is to see her daughters. Susan, her other daughter was visited by my sister in Pangasinan where she lives. I told *Lola* that Susan is fine and she is in good hands with her stepbrother. She was so eager to know a lot more about Susan and so thankful at least to be acquainted with what is happening to her own daughter.

Is there a possibility that Maureen would have a change of feelings towards her *Lola*? Will she eventually accept her back to live with them hence easing her mother’s dilemma of choosing between her and her grandma? I believe that since Maureen is still young and not yet mature enough, she needs continuous guidance to develop a good relationship with her maternal grandmother. Young as she is, I told her that *Lola* will always be the mother of her mother. There are circumstances that open up the possibility of Maureen’s family being re-united with *Lola* Guding. Maureen’s love for her mother is a decisive and crucial factor. Also, she understands with conviction that it is wrong to place one’s elderly in an institution like Golden Acres.

I told *Lola* my conversation with Maureen and she was very happy to learn that Mila is fine, as well as her grandchildren. She even remembered Maureen’s upcoming debut on October 19. She prays for them and wishes that someday she would be able to come back to the place she really calls “home”. I also told Maureen that my sister in Pangasinan was able to contact Susan (the sister of her mother, her aunt). She is oblivious to the fact that her mother does have a sister. Maureen is sure too that her mother does not know about Susan.
Conflict over property

Events just like this are sometimes beyond human comprehension. Why do people, siblings at that disagree because of properties? Would it serve a suffice reason for one to abandon or disown a member of family because of such row?

In the case Lolo Dom, he did not told me the real reason why he was now in the home for the aged. I found out the story after my visit to her sister-in-law’s house, Herminia, and was able to talk to his niece Leah. After which I told Lolo that I visited Herminia’s place and then shared the property disputes amongst them, his siblings and now the presence of his sister-in law and niece. These are all real estate properties left by their parents and also accumulated by his siblings who are now residing abroad. Lolo’s siblings who are left in the country have somehow “hidden” interest just like his sister-in-law and niece. The two were responsible why Lolo left the house of her sister in a subdivision where he stayed. The place where his brother’s family was staying was even the family’s property but would not want Lolo to stay with them.

Lola Sol’s self-centered trait of not sharing her blessings to her relatives is a point to be considered. She would rather keep them than being used by her relatives she said. She does not want to stay with them because she believes that they would just take advantage of her having dollar and peso account deposits. As regards property, she wanted to take custody of his late brother’s belongings to the displeasure of the immediate family members of her brother.

Second marriage

It is a painful decision to follow one’s heart if the world is against it. This was what happened to Lola Guding. She chose to marry a guy to the disapproval of her children. This resulted in her living in place she calls “home away from home.” She had been staying in the center for almost 13 years. Her condition is deteriorating, classified as bedridden, she could not walk, and all day long, she had to stay on her bed. What I appreciate about Lola was her ability to communicate candidly and her honesty. She never felt ashamed to tell me that her children disown her; they are all professionals living with their own respective families. The main reason she said was because she married for the second time after the death of her first husband, the father of her children.
Wrongdoings

The case of *Lola* Sol is a clear example of this. She was a swindler in their place of origin to the shame of her family as said by his nephew. His nephew even told me that *Lola’s* relationship with her daughter who was now residing in United States was characterized with rage as *Lola* created a story of some sort which almost made her daughter’s marriage collapse.

On the other hand, *Lolo* Josell put down hatred to his only son, Eddie. He was never at all a good father to his family until his wife passed away.

**MARITAL STATUS: SINGLENESNESS AND BEING WIDOW/ER**

Marital status is a factor in being in a home for the aged. Two of my informants were single. They are *Lolo* Ticoy and *Lolo* Dom, both illustrate different stories common in the society. *Lolo* Ticoy chose to serve his family while *Lolo* Dom enjoyed too much his youthful days and “forgot” to marry. Now, they both regret their being single. *Lolo* Josell on the other hand was a widower while the three *Lola’s* were all widows. These characters represented the majority of the residents as seen in the survey where most of residents were single followed by being widow/er.

But where are the children of the widows? Are they not supposed to take care of their parents? Here comes the issue of the Filipino reliance on their children for old age support. This was untrue in the cases of *Lola* Sol, Guding, Espie and *Lolo* Josel. They admitted having children but their children “turned their back on them” possibly because of a much deeper ground. In a sense, this is reminiscent of the result of the paper of Cruz (1999) which posits that there is a negative relationship between declining fertility and support system to the old folks. In her study using the 1996 PSNEE, “even in families where there were only one or two children, instead of the average of five—the percentage of old people co-residing with their children did not vary significantly with those who had more.” The quantitative result of the study did not capture the reason why such was the case. It is in this light that listening from the “insiders” themselves the reasons why they are institutionalized is important. This may help validate the quantitative study of Cruz.

A daughter of a *Lola* for example says that she could not take *Lola* back home because the family cannot afford financially, another one said that his father committed an act never he can forgive. In
other words, their reasons were deeply rooted and would take some
time to heal in case a severe wound was created.

(LACK OF) RECIPROCITY

For a Filipino, it is unthinkable that an elderly is neglected or
abandoned due to lack of respect and reciprocity. However, as the
survey shows, most of the residents in the center were women who
played a very important role in the household and bringing up of the
children. They are supposedly be “more” cared because they are seen
as more caring than men, making men more risky of not to be taken
cared of. The demographic facts would at least compensate a part of
the story knowing that women live longer then men. For a widower
Lolo, he can still court and re-marry another one since that is
acceptable to the society. A widower Lolo resident for example said
that he is not yet old because he can still win a woman’s heart. On the
contrary, the widows are always at the receiving end (Tojos, 2001).

So why are the Lolos and Lolas living in a place away from their
homes? As in any relationships, it should be based on a good and
strong foundation. The Golden Rule even says ‘do not do to others
what you do not want others do unto you’ is less painful to hear than
directly saying that someone did wrong in his/her past that is why
he/she was abandoned. Reciprocity is something that is earned (van
der Geest, 2002: 26). In the presence of poverty and other reasons
though, the good things invested and nurtured in the past are being
threatened or overshadowed. In the case of Lolo Ticoy, he surely did
everything in order for his family to survive. For him, he did nothing
wrong by supporting his family but he missed “something” in the
process. He was not able to marry and experience to have his own
family.

Reciprocity is truly absent in the case of Lola Josell who never
cared for his wife and only son. Instead, hatred was “invested” to his
son’s heart and mind and that would take some time to heal, if it will.
In the case again of Lola Guding, despite the fact that she loves her
children so much, but love was not enough to win the hearts of her
children. Her children also long for bonding and of course that should
have been developed when they were young and that was they
missed. Young as they were, their aunt took them in Manila because
their parents could not afford to send them to school. Their aunt was
responsible for everything. Now that they are professionals and have
their own families, no one wants to take care of Lola.

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HEALTH STATUS: BEING BEDRIDDEN

For one like Lola Guding, it would be too expensive, tiring and requires a lot of patience to take care of her. She suffered a stroke and half of her body was paralyzed. She couldn’t even move her right hand and couldn’t walk. Accordingly, her daughter couldn’t afford to hire a nurse anymore for her, another daughter of hers couldn’t take care another disable in their home as her husband is already in a wheel chair and her mother in law too (who lives with them). These are basically the reasons why they opted not to take Lola out of the institution. Justly, families who are financially inadequate or insufficient consider the care for their elderly as pabigat (burden) especially so if they are sakitin (sickly) and alagain (someone who needs care all the time) (Tojos, 2001). To make them feel that they are burden to their own family members hurts sometime, according to the participants of the FGD conducted in the study by Tojos.

Ruby’s desire to take Lolo Ticoy in their house was threatened with her inability to finance the medical needs of Lolo. She knew that Lolo was becoming sickly nowadays and that worried her.

POVERTY

Poverty is perceived as an obstacle to a secured old age (Carlos, 1999: 2). This may be the main reason of all reasons enumerated. If every family is financially able to take care of their elderly, is it sufficient or assurance to a more secure life of the elderly? Not at all, as this study tries to suggest. It may be true if such financial security is coupled with love and understanding. But such security may not be an assurance if no bonding is created or invested at all.

In the case of Lolo Ticoy, in as much as his nieces want him to stay with them, they could not afford to. For Lolo, he understands them; he knew their condition and never blamed them. For Lolo Dom, being single at the same time poor is too much. Though his siblings are financially able, they were not close to one another.

Lolo Josell on the other hand could demonstrate a different side of the story. His son’s family is living in a squatter area and congested, if they will take Lolo with them, they will surely not able to provide Lolo’s needs as being provided by his wife. Besides, they are not in good terms with his son.

But come to think of it, is poverty the real score or just a camouflage to make it more justifiable? I acknowledge that in the presence of extreme poverty, it will be a burden to have a non-income earning family member. But my general observation is that, it is not the poor who reject their elderly in our society. A visit to rural areas or
communities for example serves as proof that they are still being cared for, respected and highly regarded. What about the rich? From my in-depth interview with the four main characters and some of their relatives, it shows that they belong to middle class families if not to rich clan. One even said that she never experience poverty at all. This means that these groups of people from my understanding would be the one in need of institutional care for their elderly in the future or even now as there are private institutions present in the country catering for their needs.

**MIGRATION**

As I understand, migration is a strategic act of survival especially in times of socio-economic pressures. Poverty in the rural areas forces many to move to a more developed regions or cities just to cope up with the day-to-day needs of their family by working in these places.

In the survey conducted, it shows that most of the residents came from regions outside Metro Manila. They migrated when they are young to seek employment in the City and later on lives there until they become old. The problem is that they never got the chance to build a strong relationship with their relatives in the rural. They send money to support them but that was not enough.

Most of the supposed caregivers, who are mostly women go out to seek for greener pastures. Worst, they go out of the country and leave their elderly behind. This recognizes that women labor force participation is increasing paving the way in the change of the old age structure of caregiving.

In the case of Lola Sol, her daughter is in United States. Almost all of his brother’s families are living in overseas too. In the case of Lolo Dom, five of his seven siblings are now in abroad. They are the closest family that should be taking care of him; one could point out to because he is single.

In trying to make a straightforward illustration of the reasons why the elderly are living in the center, I found out that there was not a single answer to the question at hand. As a matter of fact, the reasons enumerated were interrelated and requires more attention to dig deeper on the uniqueness of the experiences of the residents. I suspect that there is accord among variety of reasons suggested. Trying to find which comes first is not the goal of the paper but simply justify the presence of the elderly in the institution where they now belong.
CHAPTER VIII
SUMMARY AND CONCLUSION

In the year 2000, six (6) percent of the total Philippine population of 76.5 million is aged 60 and above. As common knowledge in the field of ageing, a population is said to be aged or ageing if ten (10) percent of the total population is within the 60+ age bracket. Given the current trend, the Philippines will attain that status by 2020 as projected by the National Economic and Development Authority (NEDA). In that year, the elderly population would be 10.3 percent (10.1 million) of the total population. By 2030, it will increase to 13.5 percent (PPAOP, 1999).

Existing studies of elderly in the Philippines focus more on the quantitative aspects that rely on the census of the government as primary source. Academic institutions though are trying to catch up with the demand of the relevance of the subject matter. There are now efforts from the academe to make the issue of elderly more popular and national by conducting national surveys and studies on Filipino elderly. Such studies were geared towards the improvement of well-being of the elderly. But institutionalization of elderly care is something that caught less attention of many practitioners in the field of ageing. The government is also not interested on the issue because of its sensitivity as well as its unFilipino(ness). In addition, the government relies too much on the family as the traditional system of care for the elderly. Given the limited resources, too, the government is unable to finance such endeavor which is seen to be “unproductive”. In fact, the government does not advocate institutionalization of elderly care. The three (3) major homes for the aged in the country are specifically designed for specific groups of elderly and these are: the abandoned, neglected, unattached and very poor. There may be laws enacted that will benefit the so-called senior citizens of the Philippines but these initiatives are being questioned due to poor implementation and limited coverage. These laws include (DSWD, 199a):

1. Republic Act (RA) 7432 or an act maximizing the contribution of senior citizens to nation building, grant benefits and special privileges and for other purposes, and
2. RA 7876, which is an act establishing a senior citizen’s center in all cities and municipalities of the Philippines and appropriate funds therefore. It also called the Senior Citizen’s Center Act of the Philippines.
At the moment, the Congress of the Philippines is debating on the passage of a similar bill that will amend the existing laws on senior citizens. Considering the cultural and religious background of the country, it is indeed very difficult to rally any support for the establishment of more elderly institutions or homes for the aged. The 1986 Constitution of the Philippines (DSWD, 1999a) even states “the family has the duty to care for its elderly members, but the State may also do so through just programs of social security.” The government strongly believes that assistance in old age is one of the most important values provided by the Filipino family and as its rule, only the “misplaced” or the “disadvantaged” live in homes for the aged (DOH, 1999:143). Moreover, the DSWD does not keep records or profiles of the residents of institutions that cater to the elderly. The office only maintains addresses of organizations that were awarded with licenses to operate.

**RECIPROCITY: The Decisive Factor**

The themes discussed and presented seemed not enough in themselves to account for the presence of the elderly in the institution. I found out from this study that the “absence of reciprocity” was the crucial and decisive factor that could answer why some elderly now live in a home for the aged. It was mentioned that (lack of) reciprocity was present in some of the cases presented and I would like to depart on that by giving my own idea on reciprocity as gleaned from the experiences of the characters.

The Filipino saying ‘Kung ano ang itinanim ay siyang aanihin’ (what you sow is what you reap) is very relevant to this discussion. Using it in the context of care given to the elderly, it means that the actions of the elderly characters presented failed to lay a strong support to achieve respect and love from their children and relatives when they were young. The elderly may say that they did love and care for their children/relatives, doing everything they could. For their children/relatives, however, their elderly did not.

The poverty factor is somehow a vague reason on the institutionalization of the Filipino elderly knowing that most of them are impoverished but are still living with their families. Migration on the part of elderly who moved from their place of origin to another place to work is worth noting. The failure to support financially their respective families back home was crucial in garnering respect and love. Relatives or children moving out of the country leaving their elderly behind is a result from the latter’s failure to “invest” a deeply rooted physical and emotional attachment to their children. The health
status (being bedridden) as mentioned in one of the themes is, for me, just an excuse for a relative to leave an elderly behind because no matter what the condition of the elderly is, “love” (which I believe a strong component of “respect”) ought to be unconditional. The same thing is true with family conflicts that arose in a multigenerational household. Other conflicts include conflict over property and conflict resulting from second marriage. I would reiterate that it all boils down to reciprocity and the ability to “nurture” a relationship founded on mutual compromises.

I am not generalizing the case here as the experiences of the elderly in the institution are diverse and equally interesting to explore. Some might be able to “invest” what was needed but due to individual differences and the effect of rapid socio-economic changes in the society, such investment failed. Probably, it could have also been not enough as the misdeeds outweigh the good deeds. One thing is sure though, with the increasing number of older people living in institutions, reciprocity is not being felt with the same sense of necessity as before.

This is an exploratory study that initially tried to answer whether the institutionalization of elderly in the Philippines is now an option. The study, however, ended up exploring how and why older people live in a home for the aged. The sources of data in this study were from the elderly living in Golden Acres where interviews, observations and survey were conducted. The staff as well as other knowledgeable people in ageing were observed and interviewed. Another highlight of the research is the participation of the relatives of the chosen six elderly for a more in-depth conversation. Knowing both sides of the story is already good enough to having balanced views on the reasons why these elderly were institutionalized. Many have been said about Golden Acres. Being the largest and most popular among the institutions, it is located in the NCR being managed by the government. The center is responsible for rehabilitation of the elderly and provides temporary shelter for the poor ones. The center finds it difficult to discharge those who have recovered. This is the truth I have learned from my interactions with the staff. Many of the residents are classified as being re-admitted because their families refuse to take them back or in some cases, the elderly themselves would leave their house and continue their activities outside until law enforcement groups or individuals would bring them back to the center.

Learning from the experiences of the elderly in the center, the relatives of the chosen main characters of the research, the staff, and the knowledgeable key informants brought me to the position that institutionalized care is a must for the group of elderly mentioned. I fervently believe that as an option, it should be the last resort.

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same sentiment was mentioned by the Director of DSWD-NCR. I agree with the Director when she said that given the circumstances, to live in a "real" home is more conducive for the totality of an elderly.

Reasons have been said on the institutionalization of our elderly. These usually are the effects of transitional nature of modern life and the mobility of population. I would not underestimate here that there are families who are unable and unwilling to support their elderly as a result of modernization factors. Concomitantly, this adversely affects the well-being of the elderly themselves. These justifications would refute the claim of Knodel and DeBavalya (1992) for South-East Asian societies that whatever the future may bring, at least until recently, a pervasive familial system of support and care has persisted despite major social and economic changes. Coming closer to specific experiences of the elderly themselves, the rationale why they are now living in the center was outlined in this study. Some came from a big family and others were not. The bottom line is that to live there has something to do with one's performance in the past as a member of one's own family coupled with various changes in the society.

Institutionalization based on the literature reviewed would be more of a literary piece than an actual choice—simply words more than actions, if I may say. Elderly may agree in the presence of these facilities but they do not want to be institutionalized themselves because of the (probable) fear and stigma that they will be tagged as one coming from a dysfunctional family. Elderly who think that they are just burden in their family and source of conflict are potential residents of institutions. This criterion does not take into consideration whether the elderly are poor or rich. There is also a mismatch of what the elderly are saying and their preferred choice of independence.

Again, from this exploration, I found out that institutionalization of elderly is an option for small groups of elderly. As a matter of fact, because they are already abandoned and neglected by their respective families, to institutionalize them is necessary.

The presence of institutions that take charge for elderly care is a manifestation that the Filipino culture of care for these vulnerable members of the society is changing. It was found out that centers for the middle and upper class elderly are already present but operating discreetly in the country.
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UST Social Research Center (SRC)

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Appendices
Appendix 1

Figure 7
ORGANIZATIONAL CHART
GOLDEN ACRES, HOME FOR THE AGED

REGIONAL DIRECTOR
ASSISTANT REGIONAL DIRECTOR
CHIEF OPERATION DIVISION
HEAD SOCIAL WORKER

Clerk II (1)
Utility/Liaison Officer (1)
Houseparent I (1)
Property Custodian
Security Guards (5)
Driver II (1)

SWO III (1)
SWO II (1)
SWO I (1)

Nursing Attendant (Social Worker) 2
Houseparent IV (1)
Houseparent II (5)
Houseparent I (1)

Nursing Attendant Regular (7)
MOA (13)

Nursemaid I (2)
Utility Worker I Permanent (4)
MOA 94
Sponsored (2)
Volunteer (1)

Nutritionist/Dietician (1)
Cook I (2)
Volunteer (1)

MDO I

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## Table 19: GENERAL PROFILE OF RESIDENTS OF GOLDEN ACRES
(as of June 24, 2003)

<table>
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<th>STA. LUCIA</th>
<th>ST. ANNE</th>
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