Death of a Spouse: A Phenomenological Inquiry on the Experiences of Senior Citizens

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Abstract

The rising numbers of bereaved senior citizens and their lives concerning how they face and survive spousal death have not been further studied. Hence, through a qualitative-phenomenological approach, the challenges, coping mechanisms, and insights were unraveled through the lens of the widowed senior citizens. The stories were from purposely selected ten participants, five for in-depth interviews and five for focus group discussion. Subsequently, using Colaizzi's method of data analysis, six significant themes emerged, each supported by three subthemes. It was found that the experiences of widowed senior citizens cycled about their bereavement process and struggles in adjusting to widowhood. In order to cope with the death of their spouses, they practiced emotion-based coping and allotted time to regular activities. The derived insights were having an optimistic approach and devoting themselves to their family. It was revealed that even though their deceased partners left them behind, there are good reasons to live by remaining upbeat after painful life events, accepting the situation, and seeking refuge from the support system. Hence, future researchers may conduct studies about how culture and marital satisfaction influence the coping style and spousal bereavement of older people.

Keywords: Spousal death, senior citizens, experiences, coping mechanisms, insights

Introduction

It was human nature to fear our deaths, but what frightened us more was the possibility that our loved ones might depart first and would leave us alone with all the memories and responsibilities. When losing a marital relationship, people may mourn due to a sudden change of daily routine, a shared past, and a loss of life plotted together. The vulnerability might be observed during the grieving process that may scar the senior citizens’ emotional, mental, physical, and psychological well-being. All these things made bereavement difficult and different, especially for senior citizens who spent almost all their lives with their spouses. For these reasons, the researchers conducted this study as a local pioneer focusing on the widows and widowers in Angeles City, which was valuable for developing programs, and information to improve coping strategies suitable in the Philippine context of culture. Given those mentioned above, losing a loved one for older people added to their feeling of lacking a sense of purpose. Generally, the people who mourn during and after the death of their spouse cause them to have trouble sleeping, have little interest in food, disturbed concentration, and are indisposed in making decisions (Zoler, 2006). In emphasis, Seiler (2020), in regards to linkages between marital death and overall health, discovered that interpersonal loss was associated with altered immune function and depression, as spousal death could result in health problems, psychological morbidity, and an increased risk of death (Bereavement: MedlinePlus, 2017). In support, Ogweno (2010), revealed in his findings that widowed people in deprived areas faced financial, psychological, and social problems that were impacted by their widowhood status and their lives in slums.

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Another study conducted by Abbas et al. (2020) found that loneliness in elderly widows had a poor effect on their social and mental well-being. However, skills and educational level attainment mediated these poor effects. Further, based on Yang and Gu (2021), loneliness was twice as hard during the first two years of widowhood and was long-lasting.

In fact, a married person who lost a partner by death in later life had many consequences due to widowhood (Holmes, 2021). In the context of being a senior citizen, these effects were magnified because of vulnerability to health conditions and natural physical aging processes (Kowalchuk, 2021). Thus, these are the reasons why senior people experienced a severe, rapid decline in their health and, worst, a sudden death that may occur after some time. While in Ga-Rankuwa, South Africa, Lekalakala-Mokgele’s (2018) tackled how older women, aged sixty years old and above deal with the death of family members. Three themes were derived proving that accumulated death could not guarantee the development of resiliency over time, the sorrow of witnessing the death, and impending death anxiety. This research highlighted that seniors needed the same kind of care and aid during this challenging period as younger people. Although based on the study of Hendrickson et al. (2020), Forgetting, acceptance, and moving forward complemented by confidence and strength plus social support and participation were keys to the widows’ resilient outcomes.

Further, grief was the natural response to a loss of life and drastic changes to daily routines; its impact was critical for older people as they faced spousal death. One research revealed that older adults with a prevalence of prolonged grief disorder (PGD) showed linked depressive symptoms like sleep difficulties, reduced life satisfaction, and poor quality of life (Treml et al., 2020). In addition, grief’s impact was not limited to physical health conditions. The study of Zhou et al. (2021) addressed the causal link between spousal bereavement and cognitive health in older widows and widowers in a longitudinal setting. The conclusion was that older adults faced unique cognitive issues they had to confront because of their spouse’s death. For example, Benette (2018) discovered that complicated grief and bereavement distort memory as widowed senior citizens only remember memories in a detailed manner about their deceased partner due to emotional morbidity drained their energy to store and process new information. Also, Haley (2022) stated that nostalgia and yearning occur in grief, stretching the idea that grief is not entirely about sadness but the heartache of yearning. Also, bereaved elderlies felt guilt as one of the mechanisms of their grieving process. This caused them to redirect the blame for their spouse’s death to themselves (Farinasso & Labate, 2015). Consequently, self-blame and regret, when coping, played a causal role in determining the presence of grief symptoms over time. In comparison, high levels of self-blame were associated with high initial levels of grief that subsided slower over time. (Stroebe, 2014).

Aside from those mentioned above, besides grieving, most widows experienced discrimination in India (Gupta & Sekher, 2017). Moreover, Ogwena (2010) discovered a development of low perception about themselves and was not very appealing to others because the title “widow” carried a stigma many did not want to be associated with. Finally, the financial aspect was one of the concerns of widowed senior citizens since it was a given that they needed to sustain medications, clothing, and other daily primary needs. As income significantly affects their access to numerous activities and the availability of resources for coping, it may alter their experiences and insights (Zoleta, 2022). Gender also plays a crucial role for the bereaved elderlies. A further study by Li and Lin (2019) found that the significant effect of widowhood on women was on their physical condition, whereas in men, it was on their psychological condition.
It implied that gender roles and cultural background altered the widowhood effect. Another study by Jadhav and Weir (2017) showed that men were higher in mood depression than women, while women were higher in somatic depression than men. Problems with cultural expectations of how men and women should behave influenced widows' and widowers' struggles, which were magnified in Asian countries. In addition, in the Philippines, Jones (2016) stated that in alignment with the Life Course Theory (LCT), men were more likely to hide their emotional pain over losing a spouse. In contrast, women were expected to express their grief more openly. It was unclear whether variances in emotional well-being following mourning were related to the surviving spouse's gender (Streeter, 2020).

As a result of these several challenges and adjustments, some relied on emotion-focused coping, managing the emotional response to the problem rather than solving the problem itself (Kubala & Marais, 2022). One study stretched the importance of encouraging widows to use loss and grief counseling as a coping mechanism (Beatrice, 2020). Similarly, a reliable predictor of the elderly widows and widows having favorable attitudes was having access to social assistance from friends, family, and the community (Valdez et al., 2013). Another way of coping was by looking back on memories of the bereaved elderly of their deceased spouse as Ransier (2017) stated that this was an excellent contributor to making the grieving process lighter.

In connection to the statements above, the death of a family member in the Philippines was expected to hurt more than the other culture because of the family values and views that were part of the country's culture. The Filipinos were family-centered and child-centric and were known for keeping close ties even with extended family (Morillo et al., 2013). In addition, Filipinos still upheld values in marriage which were significant factors in maintaining a close kinship. Most of all, the Philippines was South-East Asia's number one Christian country (Norman, n.d.). Hence, the Philippines' culture includes family and cultural values such as marriage and different funeral traditions that contribute to how a Filipino widow or widower experiences bereavement.

Presently, in Pampanga, there was little to no literature about the phenomenological inquiry of spousal death from the viewpoint of senior citizens. Hence, the researchers delved into their experiences, coping mechanisms, and insights to shed light on the narratives of losing a spouse from the perspective of senior citizens, given that the researchers discovered that familial losses significantly influenced older people's life satisfaction. Most studies today focused more on widows than widowers, and the setting was in Western countries. Also, there were still gender stereotypes and the Philippines had a different culture and family dimensionality, the researchers were prompted to cover both genders as participants in executing this research. This study was primarily framed by The Transactional Theory of Stress and Coping (TTSC), developed by Lazarus and Folkman (1966). Their theory demonstrated how significant life experiences influenced human emotions. Meanwhile, the Theory of Bereavement by Freud (1923) also supported the leading theory, emphasizing that grieving people were looking for an attachment that had been lost and the Attachment Theory of Parkes and Bowlby (1970) indicated that attachments developed early in life and offered security and survival for individuals. These theories were utilized in analyzing and drawing conclusions on spousal death in view of senior citizens. The current study collected necessary data through interviews and focus group discussions. The data gathered were valuable in narrating the experiences of senior citizens in the context of widowhood.
**Methods**

According to Tenny et al. (2021), a qualitative research design is useful in taking account of people's experiences, behaviors, and perceptions of real-life problems. Meanwhile, the phenomenological approach is being used to look for the meaning and essence of a specific phenomenon (Ho, 2022). Thus, this study employed a qualitative research design, mainly a phenomenological approach.

From the densely populated City of Angeles, Pampanga, a subset of 10 qualified Senior Citizens who were five widows and five widowers were purposively selected to participate in the study. Five of the ten (10) participants underwent in-depth interviews, while the remaining five were designated for focus group discussions. In-depth interviews converging with focus group discussion were dependent on the inclusion of the following selection criterion:

1. Senior citizens (60 years old & above)
2. Had lived with their spouse until the time of their death
3. Had at least three years' time interval from the date of spousal death
4. Had not experienced any recent death from other family members for one year
5. Had lived with their spouse for at least 30 years

For a phenomenological approach, 10 participants are already a good number, and anything more would lead to data redundancy. The ten respondents were, therefore, sufficient to acquire relevant data for this study because each of them would have diverse opinions and responses regarding the death of their spouse. In this case, Lavrakas, 2002 suggested that using a non-probability sampling method called "purposive sampling" will produce a sample that could be taken as representative of the population.

This study utilized all platforms in the conduct of the two interviews. An online meeting assisted by their family members and some of the researchers took place for the FGD. Meanwhile, in-depth interviews were done in person in order to acquire pertinent information. Two or more participants would converse during an interview. In order to gather information, the interviewer asked the interviewee(s) questions (George, 2022). The participants were questioned specifically using semi-structured interviews in accordance with the validated guiding questions. This kind of interview was flexible in making follow-ups for How-and-why inquiries. A debriefing followed after the interviews that provided a socially acceptable means for them to reflect on the past while allowing them to benefit from their experience.

Transcript of their narratives, recorded with their permission, was transcribed by the researchers to spearhead Colaizzi's Phenomenological Data Analysis. Significant statements relevant to the investigated phenomenon were then grouped according to their meaning. After taking into account the repeated responses of the participants, the researchers came up with themes. In order to create meaningful descriptions from the carefully developed sub-themes, the produced related topics were organized into general themes. These were defined by the researchers and produced a report. The researchers closely adhered to the criteria in selecting samples from the targeted populations to ensure the gathered data were generalizable.

In addition, data triangulation was also employed using several sources. It was used to combine data from numerous sources and evaluate the quality and dependability of the results. Given that this study focused on the experiences of senior citizens after the death of their spouse, it also determined whether the findings were pertinent to the intended purpose of this research and whether the statements of the participants replicated similar scenarios that allowed the researchers to generalize findings.
The main topics include the widowed senior citizens’ themes about their lives, themes for their coping mechanisms, and their insights about their situation. The text that follows in this article provides an overview of the participants’ demographic profiles. Lastly, the results and discussions of the emerged themes where appropriate quotes and paraphrases for illustration were supplemented as needed.

Results

As shown in Table 1, the researchers included the necessary profiling categories to ensure the samples accurately represented the targeted population. In addition, income class and categorizing them as with or without children were included as these may affect the type of experiences, coping mechanisms, and insights of the widowed senior citizens. It was crucial to take notes of this information.

Table 1. Presentation of Gender, Age, Family Income, and Children of the Participants

<table>
<thead>
<tr>
<th>Participants</th>
<th>Gender</th>
<th>Age</th>
<th>Family Income</th>
<th>With children</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1</td>
<td>Female</td>
<td>65</td>
<td>Middle</td>
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</tr>
<tr>
<td>P2</td>
<td>Male</td>
<td>64</td>
<td>Middle</td>
<td>Yes</td>
</tr>
<tr>
<td>P3</td>
<td>Male</td>
<td>62</td>
<td>Middle</td>
<td>Yes</td>
</tr>
<tr>
<td>P4</td>
<td>Female</td>
<td>75</td>
<td>Middle</td>
<td>Yes</td>
</tr>
<tr>
<td>P5</td>
<td>Male</td>
<td>68</td>
<td>Middle</td>
<td>Yes</td>
</tr>
<tr>
<td>P6</td>
<td>Female</td>
<td>73</td>
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<td>P7</td>
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<td>79</td>
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<td>Yes</td>
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<td>P8</td>
<td>Female</td>
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<td>Yes</td>
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<tr>
<td>P9</td>
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<td>64</td>
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<tr>
<td>P10</td>
<td>Male</td>
<td>65</td>
<td>Middle</td>
<td>Yes</td>
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</table>

There was an equal number of participants regarding gender, five males and five females, for the balanced source of covering information for both genders. Next, each one of them was under the age of sixty years old and above, in which they were identified as senior citizens, a part of the criteria set in this study. Furthermore, all participants were in the middle-income class having income between twenty-four thousand to one hundred forty-four thousand pesos, which the researchers based the income classes on the Philippine Statistics Authority (Venus, 2022).

The following figures show that the researchers were able to extract six major themes from the obtained data, and each was supported by three sub-themes evident from the ten participants. The data acquired in the succeeding sections recounted the experiences of widows and widowers' senior citizens in Angeles City, Pampanga, regarding the death of their spouses. The stories encompassed changes, adjustments, and newfound challenges from transitioning to widowhood. The emerging sub-themes from the general theme further amplified the discussions.
Figure 3. Themes for the Insights of Widows and Widowers Senior Citizens

The Bereavement Experience
This first major theme encompassed the experiences of senior widows and widowers regarding their spouses’ death which included the process of grieving the death of their loved one. Moreover, in this unique phenomenon, sub-themes were also included in how they felt the pain and loss of their other halves, similarly, how they yearned for the loss of attachment and ended up reminiscing their spouses’ memories which brought them joy and tears.

Feeling the Pain and Loss
The stories derived from the participants’ experiences described how they felt the pain and loss from the death of their spouse. Variations of how evident the degree of agony they felt was thoroughly described by them. One senior citizen shared, “Yes, for the longest time it hurts more. Indeed, it’s true.” Following it up with statements, “You will feel more that he is gone. You will miss him more. It’s terrible.”

Additionally, several passages narrate how they reacted to their spouse’s death such as being shocked and overwhelmed with emotions. Whereas, they thought life is meaningless without their spouses due to being shocked and overwhelmed with emotions. One participant even attempted suicide, “I told to myself, “Perhaps if the driver was drunk, then it would be good if I’d be hit by it.” I was crying hard. I don’t know where I should go, “. In the same manner, because of the sorrow and pain, many of them arrived with thoughts such as they could be the one who died and not their spouse, “You have done everything and yet nothing happened. All I could say was “Why her?” That’s all that you will think about. Why not me? I’m strong.” Aside from the pain and loss, there’s also a presence of being guilty of being the one who was able to live.

The pain and loss combined were torturing and arriving with thoughts such as not wanting to live anymore lingers, “What I felt was like losing the will to live because it hurts that my husband was gone. I definitely felt gloomy because it’s different if my husband was there”. Moreover, the treatment of the deceased spouse affected the widowed senior citizens in dealing with pain, “I don’t know anymore because it’s painful for me that my husband was gone because he was so kind”. Similarly, taking care of their spouse before their death or during their struggles made them happy being the least thing, they could do for them. One widowed senior citizen described her feelings as “He’s sick then. He had a heart disease. I was happy being with him and taking care of him”. However, sadness flaunted them “When he died and was gone, I became sad”.

Yearning for the Lost Attachment
One of the possible feelings a bereaved widow or widower may have after the death of a marital partner is missing their spouse. They ended up yearning for the lost attachment they once had. Thus, it was natural for the participants to long for their deceased spouse that came after. Thankfully, the loneliness that caused the bereaved participants to yearn for the lost attachment could be lessened with proper interventions.

To start with, a death of a spouse left the widowed participants alone with their minds being occupied by the shared memories with
their married partner from time to time. Statements such as, “It was harder than you could ever think about. Of course, when you come home, you will still think about it”. This testified how still thinking of your partner was difficult and inevitable. These memories often triggered the yearning accompanied by loneliness, as one participant shared, “My children asked me why I was sad. I responded naturally by saying I felt sad because your mother still had a special place in my heart.” On the other hand, this longing described by another participant admitted that there were things she missed like the closeness, presence, and care, and that thought that it was difficult to be alone You will long for his care, especially if you have a fever. He will cry if you did not let a doctor check you. He will tell his child to “Start the motorcycle, carry your mother whether she likes it or not”. It is harder at night when you are alone; that’s why I have four pillows clasped on me.”

In another case, a participant knew he couldn’t recover immediately, he described his experience as “I struggled. My mind was in turmoil” and clarified that, “There’s no suffering in my job, it is all on my mind like for instance, the feeling of longing”. Based on the responses of the widowed senior citizens, the huge impact of sadness and having core memories relating to the type of marital status they had with their spouse intensifies the longing they feel, giving statements such as “I saw the kindness in him. I remembered his kindness towards me. He didn’t want me to work back when he was still alive”. Additionally, because of some daily changes that took place after the spousal death, the adjustment became difficult, and the extent of longing for the deceased partner’s intensified and further affected health, “I missed all the things he did for me. That time, I lost some weight, I grew thin”.

**Reminiscing Memories**

A bereaved person might find themselves reminiscing about the life partner they once had, such as the last moments with them and the positive memories. Most of the narratives derived from the widowed senior citizens conversed about the memories of their deceased spouse. As part of being bereaved, remembering memories brought comfort in the grieving process when shared with others. However, these memories triggered them for too long, and they missed their spouse more.

The memories stated by the participants were associated with the things they miss, such as being taken care of, “Back when he was still alive, he would go shopping, do the cooking, and laundry.” Moreover, having the last moment of saying goodbye was also hard. The fact that there was the awareness that death would eventually take your spouse and witnessing it, feeling helpless as one senior citizen shared, “The day she died, I was there with her. We were in the hospital because I was the one who was watching over her”. Subsequently, another participant ended up reminiscing about the events the day before her husband died: "You know, before he died, it was like we relived our experiences together. We talked the whole night. On the second day, he died”.

Such memories were engraved deeply within the participants’ minds. It showcased how these memories affected their grieving process because it signified a healthy and satisfying relationship with their spouse. One notable topic they most delved into was about it, “About my husband? I remember his kindness. However, I got sad because of how kind he was until he left us”, “I remembered what he did to me, and he took care of our children. In school, he accompanied our children because I couldn’t because I went to the market early in the morning. I remember all of that” such passages described how reminiscing and preserving these memories made the participants feel mixed emotions of being grateful and gloomy at the same time.
**Struggles Adjusting to Widowhood**

Following the bereavement experiences were the challenges senior widows and widowers encountered during adjusting to widowhood. Further, this second major theme encompassed stories that, without their spouse, they faced the world alone. Not only that, but it also included how they dealt with shoulderling alone the responsibilities and roles of being a mother and a father at one time, or what we call double-parenting, and came across financial adjustments.

**Facing the World Alone**

Spousal-bereaved individuals were left alone by their deceased spouses in a world of challenges and conflicts. Amongst the components that they struggled with was adjusting to a new lifestyle because of the absence of their spouse, “It’s hard to adjust because you know you have a husband who’s coming home every Saturday, you have a husband to wait and to give you money and you expected that he’ll be your lifetime partner until death”. What’s more, in an event of a sudden death where one participant experienced recalled a memory saying that, “Naturally it’s hard because it was a sudden death”.

Facing the world alone does not only revolve around feeling lonely but as well as been narrated, “The hardest thing is that you have your children with you. You have to attend to them, everything they need you to have to provide. That’s the challenge”. Thus, being alone means taking all the responsibilities and roles left by your partner. Some descriptions depicted how terrible it was to witness the death of someone you loved, “It hurts more that I was there, I was there beside my wife when she died” and reasoning out that, “Because it’s too painful to be with her than not to be with her”. The last statement showed that even at the last moment, it would be hard not to take the chance to be with your partner. Further, some of the participants felt the devastation of expecting that until death their partner would be with them, “I almost didn’t accept it because of how we were together. It was a great relationship but, in the end, you’ll both part ways. It hurts”, and “We’re going to grow old together. That’s what he always says. However, he wasn’t able to keep it”. The participants were afraid of going on by themselves and with the broken anticipated future with their spouse. The children also played a great role in why the widowed senior citizen feared being alone, “At first it’s painful because he left me with six children and I was the only one who was working”. Similarly, being dependent on their deceased spouse in the past made the adjustment harder as narrated, “My husband knows all sorts of job. He’s kind, and doesn’t budge on anything you want him to do. He’ll do it. That’s why when he died, for me it hurts”.

**Double-Parenting**

In the absence of their deceased partner, the bereaved widows' and widowers' responsibilities as a parent were continuous. Having dependent children in their care was challenging because it became their sole responsibility. However, the good thing about it was that the children's dependency conclusively gave the widowed parent a purpose in life. The immediate thought of most participants was linked with the concern for the welfare of their children, "What I felt was truly agonizing. I am thinking of how I could take care of my children. That is the first thought I had".

Likewise, as a double-parent, the participants were inclined to perform duties as a provider simultaneously and homemakers, "I will be working and would be home at five o'clock. I will cook again for our dinner. Every day it is like that, bringing and picking up my children in school". Carrying on without thinking of performing the responsibilities left by the deceased spouse, one widowed senior citizen shared, "When my wife was still alive, I did not care about the management. My wife does it all". Hence, the life of an unexpected double
parenting was indeed hard. Nevertheless, taking care of their children and grandchildren paved the way for them to realize that they still have a purpose. Therefore, this pushed them to be a double-parent despite the hardships that came along with it, "Taking care of your children and grandchildren," "It occurs to me that I have children and grandchildren who need me," and contributed a positive emotion for them as this statement tells, "You will feel happy watching over them."

**Financial Adjustment**

A widowed parent experienced several struggles during the widowhood transition. A financial adjustment was one of the struggles of widowed senior citizens towards widowhood. The financial status of the participants even though they were originally the provider of their families shared that, “In my experience, I told them that we need to endure this crisis since they need money for school”. The struggle of being the sole provider was working and earning insufficient money for the family.

From a different perspective, the financial crisis did not start after the death of their loved ones but during the time when money was needed for medicines and hospitalization, “The hardest part is selling the house, including pawning my wife’s owned pieces of jewelry for her hospital expenses”. Further adding, “I sold my house here, including my huge land where even eight houses could be built”. Being a provider did not end with children, financial assistance was extended to the participants’ grandchildren. Still looking after the grown-up children and helping them out with financial aspects when they needed it. Being a parent for widowed senior citizens, indeed, was a lifetime duty, “At present, life is hard now. Right? My children have their own families too. However, sometimes they fall short of their needs”. As a result, one participant stated that “So I still provide for them until now. I still help and supervise them”.

Fortunately, people surrounding the participants and having another source of income helped them survive and adjust a little better when it comes to the financial aspect, “With regards to food, my brother-in-law helped me with it for his niece and nephews”. Another response “I’ll be selling the goods” as having an established source of income way before was helpful.

**Emotion-Based Coping**

Senior Citizens who had lost their spouses were emotionally affected for the time being. This section discussed how they learned to live with the pain and helped them accept the situation. It also showed how their family and social networks supported them, as well as how they gradually developed resilience.

**Living with the Pain**

One of the most difficult situations for an old person to go through is losing their spouse so some of them chose to preserve their loved ones and their memories in their hearts for the time being. The narratives in this section recounted senior citizens’ experiences in dealing with their losses.

The vast majority of perceptual descriptions revealed that they do not actually forget their loss but they just learned how to live with the pain. According to their accounts, participants carried the memories of their deceased partners with them as they moved on with their lives. Even though they knew it would never happen, they waited for them to come back to life, “I keep on peeking at the door hoping that I would see him coming home”.

Two of them interacted with some souvenirs and they visited the graves of their spouses, “actually, I talk to his picture” and “I was not okay until I visited my wife in the cemetery”. Meanwhile, one participant said that “when he got sick in October, I was still tailoring” so she lived in the fact that she remembered her husband at work. They constantly mentioned their departed
companions with a tinge of grief when one was asked how he knew that his wife was dying at that time, “if you are feeling something in your body, go and have it checked before it is too late”.

The recollections of whom their spouses used to be and how they treated them were astonishingly intact in their minds. Accordingly, it could be argued that older widows and widowers took their time healing from their losses. They were merely adjusting to it and putting up with it. Because they were still living with the heartbreak, much like this sub-theme was about, there was always a note of pain in their stories when someone questioned them about their deceased spouses.

**Seeking Familial and Social Support**

"Family" was revealed to be the most immediate assistance someone could have in times of bereavement. It was also revealed that the flow of social support between the bereaved and the provider impacted the bereavement status of older people who had just lost a loved one.

During bereavement, participants looked to their family or social networks for help. They all discussed getting assistance from their families and peers as they moved on. They were able to communicate with them openly and share their sorrows. "My neighbors, most of them are my cousins and my siblings," "Even to other people, when I go outside of our house, especially at work, I socialize with many people whom I can talk to", "Every Friday we do Bible Study. When Sunday comes, we go to church together".

Two among them also recalled receiving support from their children and grandchildren. At the same time, they cope with the death of their spouse, "and my kids, they took care of me. I have seven children, four girls, and three boys", "whenever my children are here, for example, New Year, they entertain me."

Senior widows and widowers relied on their families and social networks during their bereavement, according to the accounts of their records. Because of their sensitivity at this time, they sought emotional assistance. The loss of a spouse could be managed by widows and widowers because they had others with whom to share their suffering.

**Learning Resiliency**

After losing their spouse, a widow or widower develops resilience because they have to confront problems in life by themselves. This section shed light on the fact that elderlies who had lost their spouses developed resilience was the only way to improve their quality of life.

Accounts from this section showed how senior widowed and widowers acquired roles and responsibilities of being both the mother and the father figure in their homes. They had to develop resilience and cope with the agony of losing a spouse since they still had children. One narrative from a widowed participant claimed that she did everything she did not do when her husband was still alive. She had to fill in for his husband, “I am doing everything I did not do before.”

Similarly, three accounts from the participants described that they needed to be resilient in order to regain their direction in life, “yes, I decided to focus. Like on our obligations, and in life”, “I do not bring with me our problems at home,” “My life is happy. I also stopped all my vices such as drinking alcohol and smoking”.

On the other hand, one account explained that he took care of himself in order to take care of his family and acquire all the responsibilities his wife left him, “I take care of myself since I only have myself to live”. It was already challenging to live life alone but it is more challenging to live life alone with all the responsibilities abandoned on your shoulders. This is how the participants described their experience.
experience in learning resiliency. It was not easy but they had to because they had families.

**Allotting Time to Regular Activities**

Another coping mechanism employed by elderly widows and widowers who had lost their spouses was described in this section. These seniors found a way to participate more in their regular activities after learning that their life did not have to end with losing their partners. Setting job priorities, rearing their children and grandchildren, and participating in social activities were among these frequent activities.

**Setting Work Priorities**

The grieving process was challenging for older people who had lost their spouses to death. This section revealed that even though they longed for their departed partners, they had allotted their spare time to set their work priorities. Most participants saw their circumstances as a chance to work harder and provide for their families since they needed to make a living. One participant's account explained that instead of coming back and forth to his wife's grave, he just allotted his spare time to work more to earn more for his family, "I sometimes wander around our neighborhood. And yes, I also focused on work". Numerous narratives described helpfully it was for them to have their work during their time of bereavement, "you see, driving my jeepney entertains me because I get to meet different people," "I engaged myself in selling business. My barbeque business pays well, especially when there is no more food available in the nearby canteen", "I did not focus on the thought that I lost my wife but continued with my obligation to work."

On the other hand, one account described how her spare time allowed her to return to work after resigning to take care of her then-sick husband, "I used to work as a sewer, even on my maiden days. When he got sick in October, I was still working."

After learning about all of these circumstances, it is possible to draw the conclusion that some elderly widows and widowers did not grieve their loved ones for very long. Instead, they perceived it as having more time for their jobs, themselves, and others. Even if they found it difficult to adjust, they knew the loss was not the end. They still had to support their families.

**Putting Emphasis on Rearing Children and Grandchildren**

Senior widows and widowers discussed their coping mechanisms in this section by describing how raising their children and grandchildren helped them comprehend their predicament. In addition, tackled that the Filipino culture put a high emphasis on family and trained its members to be devoted and protective of their loved ones.

After losing their spouses, they had more time to spare, and most took advantage of the chance to raise their kids and grandkids. Three accounts from the narratives were all about them taking care of their loved ones, “since my children are all grownups, I am instead taking care of my grandchildren”, “No, my children and grandchildren are here. I am the one who cooks and after that, every Friday, I join them on their bible study and accompany them to church during Sundays”, "after that I play with my grandchildren so that I will not think about it”.

Another story from a widowed participant revealed that after the passing of his husband, she spent her time rearing her children since all of them are still under her roof, “It is because of my children. They give me strength, especially now that both of them are employed”. Meanwhile, a widower described himself as someone who did not invest in his wife’s death too much as he still must rear his children and grandchildren, “I did not become emotionally invested in my wife’s death. Yes, I just focused. To my responsibilities and obligations in life”.
Due to the loss of their spouses, they had gained spare time which they spent in rearing their children and grandchildren. Senior widows and widowers apparently know how to escape the pit of loneliness by developing this coping method. Even in the face of adversity, they were able to find the positive.

**Interaction with Social Groups**

This section explained that a widow or widower who had adequate social support was able to handle the phenomenon of losing their life partners to death. They came to see that there was still more to life than spending time with social groups.

The participants could adapt quickly since they occupied extra time with other social pursuits. They were able to deal with their loss because of the ability to express their emotions to others, assistance from social groups, and neighborhood protection, “it eases me, and all of them, even the people I see outside, especially the people in my workplace. I socialize with them and tell them my story”, “I tell stories to the people around me. Sharing stories and after that, we will go for a walk, but it never crossed my mind to go for something else”, “After attending to my grandchildren, I go wandering around our neighborhood,” “they ask if I am okay, and I also talk to my neighbors here. Most of them are my relatives though, my niece, sister, they visit me to ask if I am doing fine”.

One unique account described her support to be her pet cat who was with her from the beginning of her sorrows, “it was my cat, and she helped me cope because she is very affectionate”. Evidently, the majority of senior widows and widowers participated in a variety of social organizations because they believed it to be beneficial for coping. They spent time with those who were still there rather than lamenting what had passed. This merely indicated that older widows and widowers were not bound by their feelings. Despite their ages, they were constantly adaptable to whatever life threw at them.

**Devote Oneself to Family**

This major theme highlighted the participants' perspectives and insights about their lives as widows and widowers, including moving on and continuing a new life after the extraordinary occurrence. Furthermore, how their lives altered after losing their spouse was highlighted. Similarly, it explained how the occurrence provided them with realizations and knowledge.

**Prioritize Family**

The participants assessed their understanding and realizations about prioritizing their families. As they assumed the roles and responsibilities of their deceased spouses, they conveyed their thoughts by sharing their various tales about how they prioritized their families following the extraordinary event that occurred to them. Furthermore, they all gave their all to commit themselves to their families.

According to them, the participants focused on caring for their family after their spouse passed away. Two of them were asked by their spouse to take care of their family “Before my wife passed away, she asked me not to leave our sons” and “I guess these were his responsibilities lie?” As they say, “learn to stand on your own feet” You will stand on your own feet you were the mom and dad. Another two participants worked hard for their family “That is how I care for my mother. I care for my children, even boys,” and “I learned to work hard for my son.” One of the participants said that she also worked hard for their family, “I learned that my children inherited my husband's kindness. My children are kind to me now.” It was determined from this that the individuals were devoting themselves to their families. They were being responsible parents, prioritizing their family, caring for them, and supporting their
family despite their spouse dying, leaving their tasks and obligations to their partners. They had not expected their everyday lives and routines to change for the longest time.

Get Strength from Children
The participants' life experiences and their realizations about making their children their source of strength assisted them in becoming responsible parents. Despite the extraordinary event that occurred to them, they chose to continue living for the sake of their family and children. Their children were a source of strength for overcoming challenges like loneliness, hopelessness, anxiety, and stress. Most of the participants' children become their strength to continue their lives and move on. One of the participants' wives had a final will to her husband, which was the husband holding on. "Our children, do not leave them alone. Do not hurt them or do anything that hurts you." "If I am gone, do not let them go."

Furthermore, most of the participants can draw strength from their children "My children are kind to me now." And "I learned to strive hard for my son. Then work for them." This meant the participants had successfully turned to their families and children for support. It was challenging to cover the tasks of the deceased spouse without a partner, especially when the participants were dealing with significant life experiences, such as grief. Making children a source of strength was one thing an individual might optimize to become a competent parent and perform their duties and obligations to fill the roles and responsibilities of the participants' spouses.

Committed to Deceased Partner
In this section, all of the participants remained faithful to their partners in this section about being faithful. The majority of participants remembered their spouses when they were still living. The majority of them appeared to be content with their marriages. Their memories of their spouse caused them to be overly loyal to their partners. Three of the participants have stated that they don’t want to have other partners other than their spouses. “Until then I did not re-marry again.”, “Of course, you will look for the personality of your husband before. If that’s not the case, he’ll just fool me and my patience might run out of him.” The other participants stated that “As long as my vehicle is with me, I can go wherever I want but if I don’t have this vehicle, it might be a problem.” Two of the participants reminisced the happy memories with their spouses. “What I learned from taking care of my wife is that it's fun, especially when you get along.” And “I always cook his favorite particularly what he likes to eat. I put him to bed early.” This revealed that the individuals were devoted to their wives or partners. It was extremely difficult to be abandoned by their spouse. Despite the terrible circumstances, they chose to remain alone and did not replace their spouse. They recalled memories from when they were with their spouse. Those memories satisfied them enough that they did not want to replace their wives.

Optimistic Life Approach
This second major theme discussed the experiences of senior widows and widowers who had lost their spouses, as well as the process of remaining optimistic in the face of their spouse's death. Furthermore, many sought solace in reliving joyful and terrible memories of their marriages due to their need for the end of the attachment.

Stay Positive
This section discussed the experiences of senior widows and widowers who had lost their spouses and the process of keeping a positive outlook following the loss of their spouse. The senior citizens' narratives explained how they learned to be optimistic about their lives after losing their spouses. The two participants' attention was on their work, which caused them to be positive and have fun. "Yes, I'm sad. I'm just diverting it by
working. You know, when you do your job in providing transport services for the people, you will enjoy your passenger's company. "So, in order not to be sad, I pay attention to other things like selling. I sell barbecue, and I feel encouraged to work harder when the sales get higher daily." The other participants are optimistic because their families are nearby, influencing their outlook on life. "That gives and strengthens my heart because of my children." "My children are the only ones who are taking care of me. I do not think about sadness anymore because my children are grown up. My grandchildren are the ones I look after and take care of." "I take all forms of entertainment. Then I play with my grandchildren, so I do not remember much of the past. So, I am always lying down, watching TV, and playing with my grandchildren. That is the way I work because I'm old. I'm still entertaining my grandchildren." In light of their narratives, the participants then addressed the significance of stressing life's positivity with the support of their loved ones. They expressed their feelings by telling various stories of how they dealt with the unforgettable event that happened to them while remaining positive for their family and themselves.

**Accept Reality**

In this section, the senior citizens discussed the other coping strategy they use after the death of their spouse, and it is to develop acceptance because they would soon be on their own to face problems in life. Building acceptance was the only way for the participants to improve their quality of life.

The participants narrated their experiences on how they accepted reality after the traumatic event happened. Some participants accepted the reality that they would also carry the duties and responsibilities of their spouse that were left to them. "I'll pick up the children. Then I will cook and wash our things. I became the mother and father." "Yes, work hard and work hard again— that is life." The other participants accept that their spouse is gone "First, you should take care of yourself. If you let do not take good care of your well-being, you will be severely affected and might suffer in the end." "Of course, I am well aware she has gone, but I can still control myself. I do not really think about it anymore because she has gone, right? That is just things are right now. The death of my wife does not affect me anymore." "I did not think about anything when my wife died because she is resting now. Think about yourself now, and get in touch with the Lord".

In the same manner, the other participant started living a decent, healthy lifestyle to maintain good posture and wanted everything to be as pleasant as possible. “This is just for fun to forget what you are doing and improve your posture. My grandchildren, I just take care of them, after you take care of them, you can have fun wherever like for example you can go for a walk.” The similarities between the senior citizens were centered on the love they once had and the coping mechanisms they employed to remain alive through their most trying moments. Even if they believed that life was unfair, they accepted that this was how it was and believed it was normal because this was how life was.

**Strong Faith in God**

"GOD" was the most available source of assistance. In this section, the senior widows and widowers had similar coping mechanisms for having a strong faith in God. Despite the traumatic event that happened the only thing that they relied on was God.

To start with, the senior citizens shared that “Financially, no one supported me, because I believe I am a child of God. You help and you are not neglected. Even if we suffer, the Lord will not abandon us. One must not lose hope. I was patient until now and I didn't get married.” The other participants have positive thoughts and strong faith in God during their hard times “You can do it; you can do it. Please help me Lord"
“Don't let me go because I'm your child. I can handle the test you gave me”. “Without the right strategy, I will lose. Most of all, you know, take your faith with you, and no matter how many hours or days will pass, I can overcome all of them” “Nothing has changed in my prayer or belief in God. My faith is still strong.”

Most of the widowed senior citizens took the traumatic event positively and they think that they will able to handle it with the help of God “I told myself, "I can't do it." I was able to manage. God helped me. I was able to cope with my problem.” Believing and having faith in God was the senior citizens' number one shield that they can wear when things get complicated. Having faith in God helped them overcome the traumatic event that senior citizens faced when they lost their spouses.

Discussion
This study aimed to know how senior citizens’ conditions after the death of their spouses. Specifically, to discover widow and widower senior citizens' lived experiences, coping mechanisms, and insights. The objectives were accomplished by taking qualitative research design with a phenomenological approach.

The participants were screened based on the criteria set in this study using purposive sampling. With that, ten (10) participants were selected particularly five female widows and five male widowers. Five for in-depth interviews and five for focus group discussions both shared the same criteria. The data gathered were managed ethically and analyzed with thematic analysis patterned with Colaizzi’s Phenomenological Data Analysis.

Consequently, through in-depth data analysis, the experiences of the elderly widows and widowers encompassed two major themes, encompassed two major themes, each supported by three sub-themes that emerged from the transcript interview data. The widowed senior citizens experienced bereavement and struggles in adjusting to widowhood. Moreover, experiencing bereavement made them feel the pain and the loss and expressed it differently. As pain and loss were the two precursor elements of grief as stated by Brody and Hall (2008). This caused them to yearn for the lost attachment as loneliness was inevitable in widowhood (Chow et al., 2018). Since Filipinos had a collectivist culture, the bereaved needed and desired social connection to fill this yearning (Gamad et al., 2022). Thus, it can be said that senior widows and widowers were in the second phase of grief called "Yearning and Searching," based on the theory of Parkes and Bowlby (1970) where emotions such as despair and sorrow brought them into a state of longing and finding meaning in their loss.

On top of that, it was reasonable to note that bereavement due to losing a spouse was one of life's most significant stressors (MedlinePlus, 2017). According to Freud's Theory of Bereavement (1923), the occurrence of the participants' pain was a feature shared with grief and depression, and they were in a state of "melancholia". This pain and loss, accompanied by yearning, led the participants to reminisce memories about their deceased spouses. Further, this was natural as these preserved memories kept the spirit of the widowed elders believed in their heart though it may trigger missing their spouse (Ransier, 2017). Furthermore, recalling memories for the participants was natural since Filipinos had outstanding cultural value in having close family ties (Jimenez, 2019). Therefore, it was understandable that there was no forgetting and moving on, but there was acceptance and moving forward. To support this claim, based on Freud's Theory of Bereavement (1923), in mourning, the person had to detach themselves from their dead loved one to rebuild their broken inner world. In view of the participants, this occurred whenever they reminisced memories.
On the other hand, struggles in adapting to widowhood included facing the world alone resulting in participants’ having unpleasant feelings of emptiness and depressive symptoms deteriorating one’s well-being, and affecting social connections (Abbas et al., 2020). Moreover, their loneliness could trigger depression as another reaction to their loss (Farinasso & Labate, 2015). The phenomenon of facing the world alone caused loneliness and emptiness for the elderly spousal-bereaved individuals was explained in the second stage, "Disorganization and Despair" of Bowlby and Parke’s Attachment Theory (1970). Where the participants underwent a painful process of accepting the death of their spouse. In line with this, double-parenting was also part of their struggles as widows and widowers. As having dependent children in their care was challenging because it became their sole responsibility (Anderson et al., 2022). One thing to note was that these widows and widowers’ senior citizens worried about their children. Additionally, how the widowed parents first thought about their children was expected because, as Gerona (2021) stated, the leading cause of the distress of the widowed parents was essentially the concern for their children's well-being.

From a different perspective, the child became the informal social support of the bereaved widowed parents (Isherwood et al., 2015). Hence, double parenting may positively impact the parent-child relationship of the bereaved widowed parents with their children. To better explain this phenomenon, Freud's Theory of Bereavement (1923) explained that grieving people seek lost attachment. Meaning to say, when they looked for the lost attachment from their deceased spouse, this yearning or attachment was replaced with devotion to their child. Subsequently, based on the participants’ experiences concerning financial adjustment, it could be derived that they had a crucial transition into widowhood. To make it clear, they set aside their wounded psychological well-being for the sake of tending to provide for the needs of their children. Despite that, their work and duties paved the way for resiliency outcomes as it was part of social participation that made them feel they were still needed (Hendrickson et al., 2017). This was viewed in the "Disorganization and Despair" stage from Bowlby and Parke's Attachment Theory (1972), where there was a necessary disentangling of former behaviors and patterns of activities, such as fulfilling only the duties as a wife or husband. In the situation of the participants, these included performing duties alone and creating a more resilient version of themselves.

Moving forward, the coping mechanisms of senior citizen widows and widowers gave rise to two major critical themes: emotion-based coping and allotting time to regular activities. Easley-Young (as cited in Kruschwitz, 2013) argued that some of them decided to keep their loved ones and their memories in their hearts because they do not want to forget them entirely – the main reason the recollections of whom they used to be and how they treated them were astonishingly intact in their brains even though they were trying to live without them. This Emotion-Based Coping Strategy falls under Freud's Theory of Attachment (1963) which explained that understanding and identifying the emotions we experience in response to loss and grief is one of the best and quickest ways to avoid our feelings from becoming buried and going unprocessed, while others actively strive to forget their traumatic experiences. Living through the agony was perfectly acceptable because it merely showed that they were aware of their frailties and valued the time they had left with the deceased.

Meanwhile, Seeking Familial and Social Support lies under the Secondary Appraisal of the Transactional Theory of Stress and Coping developed by Lazarus and Folkman (1966). In Seeking Familial and Social Support, the participants found investing time with them was helpful, they immersed themselves in raising
their children and grandchildren, resulting in a tighter family bond, which served as resources to signal whether they could not cope with their loss. Additionally, Fuller-Thomson et al. (2014) found that most grandmothers cited that their grandchildren provided them with youthfulness and fun. Despite unlucky events, they found fulfillment in raising their grandchildren.

Similarly, learning resiliency belongs to the secondary appraisal of the Transactional Theory of Stress and Coping by Lazarus and Folkman (1966) throughout this process, these elderlies determined which coping mechanisms were appropriate and were able to realize how to spend their time doing rather worthy things, thus, learning resiliency became one of their choices because they are parents with children to earn and care for. Their hearts may have gone away with their spouses but they did not die with them so they had to endure life and be resilient for their families.

After realizing that their lives did not have to end along with the death of their partners, these widows and widowers found an opportunity to engage more in their regular activities such as in setting work priorities. Lazarus and Folkman's (1966) Transactional Theory of Stress and Coping (TTSC) encapsulated this subtheme. According to this assessment, people judged their ability to handle the crisis based on their available resources. These widows and widowers, having their spare time as their resource, spent it on their regular activities. Aside from work, they also put emphasis on rearing their children and grandchildren. Their immediate families are also resources for them to be reminded that there was still more to life than becoming a lonely widowed or widower.

On a side note, according to Palmes et al. (2021), in the case of losing a spouse, older people had strategies to improve the status of their lives, and this included their ability to participate in social activities. These elderlies came back to interacting with their social groups because they found them helpful in their healing process. Having the time to interact more with their social groups mended their sorrows and aided their pained heart at most. This also was discussed in view of Lazarus and Folkman's (1966) Transactional Theory of Stress and Coping (TTSC). They became aware that their social groups can be tapped to help them cope with their situation so they started interacting with them again. They were able to share their thoughts and sorrows and did not cage them in their hearts and minds.

Moving on, the insights of senior citizen widows and widowers came up with two major themes: devoting oneself to the family and having an optimistic life approach. According to (Jamadar et al., 2015) in cultures where the husband was the sole breadwinner, his death could leave his family penniless. This meant that the husband or wife who was left behind by his or her spouse would take on all roles and responsibilities for their family. According to Parkes and Bowlby's (1970) Attachment Theory, attachments form early in life and provide individuals with security and survival. One of the participants' realizations after losing their marriage was to prioritize their family first. Furthermore, Attachment Theory's fourth phase was Reorganization and Recovery, during which the mourner realized that their previous lives had been completely changed. However, they begin to accept the truth of their new life. (Hendrickson et al., 2017) stated this. Social support and participation were important factors in widows' resilience. The participant's resiliency manifested in this scenario when they prioritized their loved ones. It meant that they may also help themselves by taking care of their family in the face of adversity produced by an exceptional occurrence.

Meanwhile, getting strength from children is under the Attachment theory of Parkes and Bowlby (1970). It examined numerous types of relationships, including those between people, objects, and people and situations. It also
examined the varied emotional reactions that people had when their attachments collapsed. In getting strength from children, the participants found that making their children their source of strength is helpful in not giving up on their life.

Similarly, committed to a deceased partner lies under the Attachment theory of Parkes and Bowlby (1970). This theory's second phase was yearning and searching. The bereaved began to desire for their loved one's return and sought meaning in their loss. As a result, the participants sought the support of their husbands but did not seek to replace them with another man or woman in order to remain faithful to their marriage or a companion.

Moreover, the Optimistic life approach is the process of maintaining optimism in the face of their spouse's death. Furthermore, due to their need for the end of attachment, they found solace in recalling happy and painful memories of their marriages. This fell under the Secondary Appraisal of Lazarus and Folkman's Transactional Theory of Stress and Coping (TTSC) (1966). When deciding how to respond to a challenging situation, a person used their cognitive process.

Stay positive. Finding what is meaningful to an individual is the first step towards finding purpose and meaning in their life after the loss of their spouse. In this process, a bereaved individual must over-identify their emotions, cherish their loved one's memories and keep their presence in their hearts (Kruschwitz, 2013). The participants shared their emotions by expressing their various stories of how they remained upbeat to their family and themselves after the unforgettable event that occurred to them as they filled the roles and obligations of their spouse. Additionally, each of them had done their best to overcome the loss of their spouse by becoming optimistic. This allowed the researchers to conclude that senior citizens' ability to remain upbeat after their spouse's passing was critical to coping with loss. Most individuals demonstrated secondary evaluations of the Transactional Theory of Stress and Coping (1966).

Accept Reality. A widow or widower who lost their spouse must, among other things, develop acceptance because they would soon be on their own to face problems in life. Building acceptance was the only way for older individuals to improve their quality of life after losing a partner, according to (Palmes et al., 2021); even if the widowed senior citizens believed that life was unfair, they accepted that this was how it was and believed it was normal because this was how life was. Ultimately, after experiencing and acknowledging the pain of losing a partner, participants' despair and grief turned into a need to replace or move away from what they admitted was no longer there. While others sincerely and deliberately tried to forget their painful experiences, Freud's attachment theory (1963) was the best and most immediate way to prevent the participant's emotions from becoming buried and unprocessed. The theory suggested that the participants must identify their emotions and understand that they experienced heartache and loss. Further, this emphasized that there was nothing wrong with living with the pain. It just meant that the participants acknowledged their vulnerability and cherished the memories they could share with the deceased.

Strong Faith in God. "GOD" was the most available source of assistance. The researchers discovered that one of their coping techniques was based on their cultural background (Ng et al., 2016). Additionally, as widowhood was a frequent life event for elderly individuals, various coping techniques could be recognized from personal experience—the four kinds of pragmatic and culturally dependent coping strategies. It lies in Freud's Theory of Bereavement (1923); if these people allowed them to experience and process this shift; they could transform their feelings of loss.
The study's implication revolved around how the practical information derived from the study's result would help geriatric workers who focused on senior citizens to develop more proper counseling programs and approaches towards developing coping strategies suitable for the bereaved senior citizens. This would be possible by explicitly considering the concerned individual cultural background, given that senior citizens in the Philippines were scarcely studied. Also, the existing studies about bereaved widows and widowers were from other Asian and Western countries. Thus, having empirical data locally, in the Philippines encapsulated information about their experiences, coping mechanisms, and insights, including how culture influenced them. Although bereaved senior citizens in retirement had little participation in the community, their values and knowledge were essential. Thus, making them feel like a part of the community was crucial to recover from spousal death. Thus, this age group's mental and psychological health must be given attention.

Conclusion
Based on the analyzed findings of the researchers, the study revealed that widows and widowers' senior citizens faced bereavement and struggles during widowhood. Men struggled to express themselves emotionally, and women showed little difficulty in physical labor for the family. Based on their statements, most participants were codependent with their deceased spouses. The emphasis on Filipinos being family-oriented and valuing marriage made bereavement harder because of the developed codependency between married couples, including struggles because of dependent children. Therefore, it could be concluded that the type of marital relationship, degree of spouse codependency, and child dependency significantly contributed to their struggles in adapting to widowhood and the degree of bereavement.

Results of interviews concerning the coping mechanisms of senior citizen widows and widowers revealed many similarities in their coping styles in moving on from the death of a spouse, especially in terms of emotional coping and allotting time to regular activities. The results showed that senior widows and widowers did not forget their loss entirely but only learned how to live with the pain, and if a trigger was fired one day, it might result in an emotional relapse. Moreover, having and receiving familial and social support were among the main factors in aiding the holes of losing a spouse. In addition, immediate family members and social groups somehow filled the longing of the widowed and widowers during bereavement and developed resiliency over time. Meanwhile, regarding gender differences, women could express more sorrow than men. Despite acknowledging the extensive loss of losing a spouse, these senior widows and widowers revealed that they could allot more time to their regular activities, including setting work priorities, rearing children/grandchildren, and interacting with social groups.

Over time, they could grasp the idea of becoming widows and widowers, mainly because they needed to take on the responsibilities left by their departed husbands and wives. Furthermore, senior widows and widowers often occupied themselves, particularly at work and home. They had friends and social groups to keep them engaged and helped them cope with their loss.

Based on the interview results about the insights of the widowed elderly, it was concluded that widows' and widowers' senior citizens were willing to continue their life after losing their partners. It was found that there were still reasons to live, such as family and children, even their deceased partner left their spouse. It was also found that senior widows or widowers were willing to continue with their lives after losing their partners because they maintained their optimistic outlook throughout a trying time in
their lives, accepted the situation, and maintained a strong faith in God no matter what happened. It was discovered that even if an individual was left alone by her deceased partner, there were still good reasons to live by remaining upbeat during painful life events, accepting the situation, and maintaining a firm faith in God in any circumstances. As to gender differences, women express their feelings of sadness and search for their deceased partner as they single-handedly fulfilled the roles and responsibilities left by their husbands. Men showed positivity in life and prioritized health as they manage the roles and responsibilities left by their wives.

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