

## Lived Experiences of Rural Elderly Individuals in Nueva Ecija

Jeniffer May H. Gamilla<sup>1</sup>, Mary Ann E. Lopez<sup>2</sup>

<https://orcid.org/0009-0000-5165-9882><sup>1</sup>, <https://orcid.org/0000-0001-7566-5152><sup>2</sup>

St. Bernadette of Lourdes College, Inc.<sup>1,2</sup>

[jmgamilla@sbic.edu.ph](mailto:jmgamilla@sbic.edu.ph)<sup>1</sup>, [malopez@sbic.edu.ph](mailto:malopez@sbic.edu.ph)<sup>2</sup>

### ABSTRACT

*The lived experience of the elderly individuals in Barangay San Miguel, Quezon, Nueva Ecija was examined in this multi-layered perspective through the use of a qualitative descriptive phenomenological study. Ten people were interviewed who were selected using purposive sampling, and all were aged 60 years and above. The methodology for the thematic analysis of the responses followed Colaizzi's 7-step data analysis method, which enables the study to develop relevant themes that mirror the actual lived experiences of the participants. The results of this method are four major themes, which include: Daily Life and the Aging Experience in Rural Communities, Health, Financial, and Environmental Challenges, Ways of Coping and Cognitive Adaptations, and Sources of Support and Livelihood Recommendations. The results showed resiliency in cognitive and behavioral pacing. But physical decline, structural, geographical, and economic obstacles make it difficult for the elderly to access health services that are crucial to their health. Furthermore, it was also found that the Filipino customs of caring for one another and supporting each other (bayanihan) are important informal social safety networks for the elderly. The study also emphasizes the need for a decentralized health system and the establishment of home-life backyard livelihood programs in the villages to ensure economic independence in the long run. The findings are only immediately generalizable to the specific municipality in which the event takes place. This study, however, offers rich, contextualized, and multidimensional views and insights that bring the academic and the rural public health practice closer together in the Philippines.*

**Keywords:** - Lived experiences, rural elderly, coping mechanisms, social safety nets, descriptive phenomenology, Nueva Ecija

### INTRODUCTION

Aging is an inevitable and natural phenomenon which brings about extensive physical, psychological and social changes. Worldwide, we expect the number of people over 60 years old to grow from 1.1–1.2 billion to more than 10% of the population (WHO, 2025). Elderly population is increasing in the Philippines at 5.7% to 6.7% rate and majority of them are in the resource-poor rural sectors. Elderly people in rural areas experience systemic disadvantages, such as restricted access to health care, physical isolation and insufficient social protection. While the Filipino culture is family-centric and emphasizes respect and care for the elderly, the modernization of the society, economic strain and internal migration has affected the informal support systems in the family.

Although the general information is available from international literatures on the late life vulnerabilities, local geriatric studies in agricultural provinces are still limited. As the main agrarian region of Central Luzon, Nueva Ecija is a very critical site that needs to be explored in relation to the intersection of agricultural livelihoods, poverty and geographical isolation of the senior citizen population. This study aims to fill this gap by looking at the multidimensional lived experiences of the elderly people in Barangay San Miguel, Nueva Ecija in the rural areas.

## PURPOSE OF STATEMENT

This research study explored the lived experiences of the rural elderly people in Barangay San Miguel, Quezon, Nueva Ecija. In particular, it aimed to respond to the question:

1. What are the lived experiences of rural elderly individuals in Barangay San Miguel, Quezon, Nueva Ecija?

## SCOPE AND DELIMITATIONS

The study was conducted only in Barangay San Miguel, Quezon, Nueva Ecija, an agricultural area in Central Luzon. It aimed to only sample ten (10) purposively selected older persons aged 60 and above, who were mentally competent to express their experiences and agreed to join the study. The results therefore reflect the specific agrarian context and cannot be easily extrapolated to the urban and to other provinces.

## REVIEW OF RELATED LITERATURE

Older adults in rural areas are consistently found to be at a higher risk of having multiple chronic diseases, lower physical functioning, less access to health care, and lower socioeconomic status, which all contribute to the health and wellbeing of older people in this group. Poor health outcomes and lower quality of life are caused by geographic isolation, sub-optimal health care, financial insecurity and insufficient preventive health care. Similarly, low income, insufficient pension, and economic dependence limit their access to health care, nutrition, and other basic resources, which makes older people residing in rural areas vulnerable (Khan et al., 2024; Wang et al., 2024).

Studies have also shown that family support, community relations, and adaptive coping strategies play a major role in successful aging, in addition to physical health. Older adults remain resilient and life satisfied despite the challenges of aging through meaningful social connections, active community involvement, spirituality and positive psychological adjustment. Taken together, these findings indicate that the process of healthy ageing will rely on personal adaptation and support networks within the community and the family, both of which are stronger in rural areas (Joseph, 2025; Hossen & Salleh, 2025).

## THEORETICAL FRAMEWORK

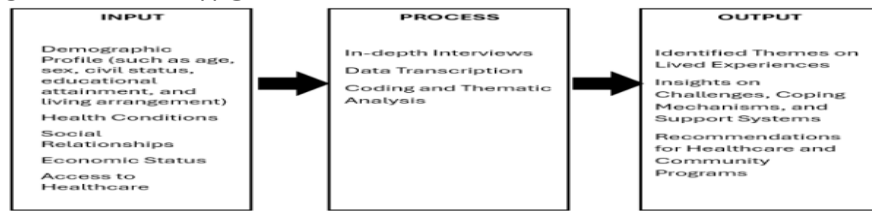
**Phenomenological Theory** stresses describing phenomena without preconceived notions, as individuals perceive them. This theory applies to the study since it provides the background to investigate how rural aging adults perceive and understand the concept of aging in their everyday lives.

**The Adaptation Model supports the study by** emphasizing people's ability to adapt to changes in the environment.

**Self-Care Deficit Nursing Theory** highlights individuals' ability to participate in self-care to maintain life, health, and well-being.

**The Theory of Health Promotion focuses on an individual's behavior in seeking optimal wellness and on the nurse's provision of educational programs that aim to enhance knowledge and increase the individual's engagement in their own health care.**

## CONCEPTUAL FRAMEWORK



## METHODOLOGY

This qualitative research study explored the lived experiences of the rural elderly people in Barangay San Miguel, Quezon, Nueva Ecija.

## RESEARCH DESIGN

A qualitative research methodology was applied in this study, as this approach focuses on human experiences, meanings, and perspectives from the participants' point of view.

## RESEARCH STEPS

The study was conducted in a systematic process, starting with identifying the research problem, reviewing relevant literature, securing ethical approval, and carrying out purposively selected semi-structured interviews. The data were then examined via Colaizzi's phenomenological method. The findings were validated using member checking.

## DATA COLLECTION AND SAMPLE SELECTION

The study collected data through semi-structured, face-to-face interviews with 10 purposively selected rural older adults in Barangay San Miguel, Quezon, Nueva Ecija. Each interview lasted about 45–60 minutes.

## DATA ANALYSIS METHODS

Colaizzi's method was utilized in analyzing data gathered in this study because it is most suited to qualitative phenomenological research since it involves the identification of patterns, meanings, and themes based on the stories of the participants.

## STUDY LIMITATIONS AND ETHICAL CONSIDERATIONS

This study was limited to only 10 rural elderly participants from Barangay San Miguel, Quezon, Nueva Ecija. The ethical standards were still followed through informed consent, voluntary participation, confidentiality, anonymity, and secure handling of all research data.

## RESULTS AND DISCUSSION

### ***What are the lived experiences of rural elderly individuals in Barangay San Miguel, Quezon, Nueva Ecija?***

The results give a thorough picture of elderly people's experience of aging, everyday life, health and socio-economic problems, coping strategies and sources of support in their rural communities.

***Daily Life and the Aging Experience in Rural Communities.*** Participants did not see old age as a time of loss, but as a time of transition that they had to adapt to and go through as they lost some of their physical abilities.

**Sub-theme 1: Adjusting to Physical Decline and Slower Mobility.** The participants all had a similar experience, which was a gradual decrease in physical strength, endurance and mobility.

**Sub-theme 2: Acceptance, Dignity, and Joy in Growing Old.** There was a consistent discussion by participants of a sense of acceptance of aging. Many slowly accepted the aging process, rather than fighting it, and took pride and dignity in it, rather than fear.

**Sub-theme 3: Continued Domestic and Family Roles.** There was always a great desire expressed by the participants to stay useful within their households after reaching old age.

**Sub-theme 4: The Appeal and Simplicity of Rural Living.** Participants often spoke of rural life as a factor which positively influenced their quality of life, despite its constraints.

**Health, Financial, and Environmental Challenges.** Their stories showed that aging does not mean just getting older, but also having to tackle the different challenges of health, money, environment, and family.

**Sub-theme 1: Chronic Health Conditions and Physical Pain.** Chronic diseases and ongoing physical ailments were often mentioned as one of the most important truths of growing older.

**Sub-theme 2: Geographical and Economic Barriers to Healthcare.** Multiple participants highlighted the difficulties of accessing health care.

**Sub-theme 3: Emotional Toll of Loneliness, Widowhood, and Separation.** Participants spoke of many physical and financial issues; however, many also highlighted their emotional experiences of aging relating to feelings of loneliness, bereavement, widowhood, and the distance from family members.

**Sub-theme 4: Financial Scarcity, Debt, and Inadequate Social Safety Nets.** Financial insecurity was one of the most common issues cited as a concern in participants' lives.

**Ways of Coping and Cognitive Adaptations.** Their stories indicated that coping was not limited to a single strategy, but was a constant psychological, behavioral, spiritual, and interpersonal adaptation that allowed them to stay emotionally stable.

**Sub-theme 1: Resilient Pacing, Energy Management, and Cognitive Acceptance.** They were able to perform adaptive behaviors that enabled them to maintain functioning while experiencing reduced physical abilities.

**Sub-theme 2: Spiritual Faith and Devotion.** One of the most important sources of psychological strength for participants was faith.

**Sub-theme 3: Relational and Intergenerational Comfort.** Participants continually spoke of the role that positive friendships and connections with their families, relatives, neighbors, and younger generations played in their lives as a source of emotional strength.

**Sources of Support and Livelihood Recommendations.** They shared that while individual resilience is key to successful aging, it is equally important that there are family relationships that support them, cooperative communities, and responsive government programs.

**Sub-theme 1: Family Interdependence and Filial Duty.** Families were always cited as the main source of emotional, physical, and financial support for participants.

**Sub-theme 2: Community Cooperation and Neighbors as Social Safety Nets.** In addition to family support, the participants repeatedly stated that neighbors, friends, barangay officials, religious groups, and community members had a significant role in their daily lives.

**Sub-theme 3: Policy Advocacy and Decentralized Livelihood Recommendations.** A need for more government support to address the challenges of rural aging was consistently raised.

## SUMMARY

This phenomenological study explored the lived experiences of rural elderly individuals in Nueva Ecija, using Colaizzi's method of analysis. From the results, four major themes emerged, along with fourteen sub-themes, showing that aging in rural places is about continuous adjustment. It involves physical concerns, emotional shifts, financial strain, and environmental pressures. Even with all those hardships, the participants still showed resilience through positive coping strategies, spirituality that guided them, meaningful family ties, and community support. They also showed a clear wish for better healthcare access and livelihood chances.

## CONCLUSIONS

- The aging process among the rural elderly is a process of adaptation, which includes health, emotional health, family health, financial security, and the environment.
- Chronic diseases, financial constraints, lack of access to health care services, and social factors are also interwoven challenges that are particularly important to the overall experience of older adults in rural areas.
- The rural elderly coped well, with adaptive coping strategies, enhancing their spiritual faith and dependence on meaningful relationships.
- The process of healthy aging by an individual within rural communities needs the help of collaboration between families, communities, healthcare providers, and government institutions.

## RECOMMENDATIONS

Based on the findings and conclusions of the study, the following recommendations are suggested:

1. Enhancement of community-based geriatric healthcare services.
2. Strengthening current social protection programs; increasing financial support; expanding livelihood opportunities and access to essential medicines, transportation, and nutrition support for senior citizens.
3. Sustaining holistic, family-focused, culturally responsive nursing practices.
4. Promoting the ongoing involvement of older people in domestic duties, social events, worship, and intergenerational engagement.
5. Replicating the study in the future with larger samples, other rural provinces and/or other qualitative research methods.

## ACKNOWLEDGMENTS

The researcher sincerely expresses his/her gratitude to all individuals who provided assistance in completing this research.

## AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data.

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