

# LIFE CHALLENGES AND COPING: THE CONSTRUCTION OF MEANING WITHIN THE FILIPINO CULTURAL CONTEXT

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*In this narrative, the author describes her family's experience with ill health, caregiving, death and dying, and loss. She addresses these issues given the family and cultural backdrop. The author frames the issues of interest within their enabling and constraining contexts, and then discusses the implications of this experience in social work.*

Little is known about Filipinos residing in the United States and not much is said about them in the existing literature. This paper serves to depict only a minute piece of a multiplicity of constraining and enabling elements that comprise the lived realities of Filipinos. My personal narrative should be read and understood as a story of one immigrant family's experience with ill health, caregiving, death and dying, and loss situated within the familial and cultural contexts. The overriding theme that binds these issues is having control or the lack thereof. The contents cannot be generalized to other Filipino families as experiences are different for every family, but certain cultural tendencies do apply.

There is a culturally distinctive pattern that predates the Filipino colonial identity. This primarily deals with the mental construct of the world around them that greatly influences behaviors, attitudes, and thinking. Traditionalism has inspired such notions as being ruled by forces beyond one's control (Andres, 1989), the western influence brought about by the Spanish colonization and the American imperialism has introduced the concept of free will (Perez, 2002). In the former orientation, locus of control tends to be externalized; while in the latter, personal control takes on an internalized form. There is an interesting fusion of both traditional and contemporary belief systems in the modern Filipino psyche. In my opinion, life

circumstances are viewed traditionally by Filipinos as predestined events, but a modern mentality that allows for individual and cultural transformation has increasingly become pervasive.

I realize how difficult it is to recount my experience without taking into account the role that my family and culture played in it. It hardly makes sense to separate these two domains as both are clearly interwoven into the fabric of my existence. My family has shaped my worldviews and my knowledge about the nature of life. In the same manner, culture has influenced my grounding in tradition and social customs. Both dimensions have demonstrably contributed to the person that I was, am now, and will be.

Not long after our immigration to the United States in the late 80s, my father was diagnosed with diabetes and gradually deteriorated as a consequence of it. Ill health in the traditional sense implies an unfortunate fate brought about by bad karma. At first, diabetes seemed like a harmless disease to all of us. My father would explain that this illness was something he could not control, it was God's will. Nothing was ever said about lifestyle or eating habits. I say this because Filipino food can be quite rich. In particular, the food that my father and all of us have been accustomed to is high in fat and cholesterol. Contrarily, Western medicine conceives diabetes as a lifestyle or dietary intake

problem. With this mindset, diabetes can be controlled and extinguished through regular exercise and moderation in food intake.

Little did I know then that my father's ill health would end up turning our lives around as my family and I battled the disease with him. It is still unbelievable to grasp that this seemingly "non-lethal" disease can progress as it did in my father's case. I witnessed my father's progressive decline and his non-winning battle with diabetes. I felt overpowered by a sense that events were developing beyond my control. For the next decade, my family and I saw him struggle daily with the consequences of this debilitating disease.

There were challenging times marked by enabling forces that gave added richness and meaning to the situation. I remember that my father was hospitalized often. At first, these hospitalizations terrified me. I was scared of losing my father, whom I loved so much. The hospitalizations were traumatizing moments and all occurrences were retraumatizing events for me. There were also periods when my reactions were numbness and resignation. I felt resigned to the unpredictability of life. Looking back, these reactions were survival mechanisms in order for me to continue to live my day-to-day reality.

The hospitalizations were made easier by the frequent visitors we had. We are lucky to have the loyal and dedicated support of family, both immediate and extended, family friends, and other social networks. It was almost always the case that if one family unit or a family friend was called regarding my father's hospitalization, there would be a ripple effect. This one person or that one family member called another and then news began to spread. Soon after, visitors would start trickling in and filling up my father's hospital room. There was neither a day that he was left alone nor a dull moment during these times. Guests and food were inexhaustible. In a strange way, the

hospitalizations became a sort of reunion or get-together.

Most of the nurses in the hospital were Filipinos so they understood my family's needs given the cultural backdrop. The nurses allowed us to have visitors past the visiting hours. They also permitted our immediate family to stay and sleep in my father's hospital room. Special lounge chairs were made available if any one of us (immediate family) was interested in staying over. Many times, my family gave food to the hospital staff as a way of reciprocating the kindness we were shown.

My father's illness became an all-consuming experience, not only to him, but also to everyone in the family. There were countless surgical operations and bypasses. At one point, he was on a ventilator for a while and several times was at death's door. It seemed as if there was no end in sight as his body surrendered to the firm grasp of the illness. The apogee of it all came rushing to us in my early college years. This was the time when his right leg was amputated, and he was plagued with serious complications that required a lengthy hospitalization, intense physical rehabilitation, considerable medical care and attention, as well as substantial caregiving.

Hospitalizations were one aspect of the disease process and in-home care was another. Caregiving duties to a sick loved one provided the greatest impact in my life and proved to be a valuable learning experience. From this experience, I learned early on the true meaning of the cliché, "the hills and valleys" of life. My parents did their best to shield and protect us from the vicissitudes of life. But this time around, life came rushing with tremendous force. Nothing and no one could have prevented life from happening. From an innocent and impressionable teenager to an enlightened young adult, I was in the midst of a life-changing event.

Typically, after the hospitalizations, in-home care was arranged for him, but we primarily provided the care at home alongside brief home health services. My family and I managed my father's in-home care by taking turns. We arranged who was going to do what, when and how. I was just thankful that the wound management did not fall into my hands because I do not do well once I see blood. This responsibility went to my mother and eldest sister instead, but I took on responsibilities after being trained by my mother, older sister, home health nurses, physical therapists, and dieticians. I learned quickly; sometimes I did my duties with fervor and at other times with reluctance. There were moments when I questioned why I had stay home doing these tasks when I could have a good time just like other people my age. There were rare occasions when I could get out of the home responsibilities. This made me feel resentful and for feeling this way, I felt guilty and shameful. The mixed feelings I had with my caregiving responsibilities became a constant battle that I waged with myself. I knew in my heart that the caregiving challenge was a personal, spiritual, emotional, psychological, and moral test for me. In the end, my filial duties and moral responsibilities to my family overpowered hedonism and self-indulgence.

As my father's health gradually declined, our lives revolved around his care. My mom not only worked hard to support the family; she went home to take care of her family's and ill husband's needs. In this set up, one person's efforts would have been self-defeating. As a family unit, our collective efforts were channeled into my father's caregiving. Everyone's sacrifices proved beneficial for the entire family. A couple of us who were in local colleges at that time had to tender a semester leave from school as each fulfilled a semester-long promise to help out with my father's care. Around this time, his ever-growing physical needs required

someone to be there for him almost around the clock.

The caregiving tasks took their toll on the family. There were moments when I or other family members wanted to take a break but could not because we felt obligated to stay. There was guilt attached to taking a break, going somewhere to relax and taking a deep breath from it all. I had no outlet. I felt I was alone. No one in my age group could relate to the caregiving experience.

I wish now that we had asked for the help that we sorely needed. We had the support of extended family and friends, but we never asked them to help relieve us from the demands of caregiving. We were staunchly determined that we could handle the caregiving responsibilities without imposing on anyone. We also thought we were self-sufficient and could control the challenges inherent in caregiving as well as living our personal lives. There were times when we found it hard to balance our hectic work and school schedules with the demands of caregiving, managing the medical and physical care, and keeping numerous doctors' appointments. Respite services from time to time would have provided my family and me tremendous help. At that time, caregiving and respite support to families was not widely available—you were basically left to your own devices to surmount the challenges.

Through it all, my family was resolutely determined to overcome the daily struggles. Culturally, caregiving is a filial responsibility and an obligation. Caregiving for us was non-negotiable because there was no other option, or at least we were not provided with any other alternative. With the Western mentality, there are always options. In the end, we had to make do with what we had. For one, we had each other for emotional and psychological reassurance as well as for social support. We also had the consistent moral support of extended family and family friends. In a similar fashion to the visitors we had

during my father's hospitalizations, my father's recovery at home was equally supported by family and many friends.

My father was beloved by friends, many of whom had known him for years. Thus, he was always surrounded by people eager to listen to his stories and his vast reservoir of knowledge. At other times, friends dropped by during their off hours or spare time to say hello. I remember several loyal friends who were regular visitors. Other friends dropped by and delivered food, fruits, or the latest Filipino newspaper. There was a time when a kindred soul, a friend of a close family friend, came to extend his help during times my father had doctor's appointments and helped transport and drive him to the medical offices of physicians. Acts of kindness like these boosted my father's morale. We did not necessarily ask for direct help from anyone, but it was amazing that people just considered our needs and helped us any way they could.

Not only was my father's illness physically debilitating, but it was mentally and emotionally taxing. He tried to be in good spirits, but at other times he was dejected. I became a daily witness to his gradual demoralization, helplessness, and resignation. His disease consumed him and ate away his sense of self and dignity. I saw his life conquered by this cruel disease that left him dependent on us for his every need. At this point, he was already in a wheelchair and had lost one leg. His other leg was in danger of being amputated. It was hard for a man of my father's will and character to handle this severe blow.

I can only imagine what he was feeling then. I, for one, felt sad at the loss of his health and vitality and hopeless that there was no remedy for my father's condition. The nurses and doctors at the hospital every now and then commented about my father's strength to overcome his physical difficulties and his will to live. I thought this was true for the most part; however, at other times, I also thought

that other forces beyond our control were gaining the upper hand despite my father's personal strength. He also believed in this kind of mental construct that views the workings of the world as one characterized by both predestination and human agency. In this sense, his inner strength allowed him to live through the daily minutiae given his ill health and his very real confrontation with death and dying.

Filipinos tend to have more accepting views of death and dying (Weber, 1995); and for the most part, view it as a natural part of life (Perez, 2002). In the midst of his illness, I recall my father often saying in a resigned tone: "My candle will only burn for so long." He thought that his gradual decline was part of God's bigger plan. My father went through different non-linear phases of the death and dying process. There was definitely sadness, resignation, defeat, and acceptance. I know he wrestled with these issues, many times on his own, because I often saw him engage in deep thought. The last time I saw him alive, he was silent — I believe he knew then, through his good sense and intuition, that it was his last moment here. I knew something was wrong because my father was never the quiet type. He was loud with a commanding voice, authoritative, loquacious, and lively. As soon as I saw him, deep in my heart I knew that it was the last time I would ever see him.

There were a lot of losses involved in the experience and the ensuing powerlessness that was associated with it. My family and I were confronted daily with the thought of ill health as well as death and dying. This involved the loss of control of things that matter (i.e., life, health, normalcy). My father dealt with the loss of control over his health and his life. My mother dealt with the loss of control over the situation. My siblings and I dealt with the loss of a sense of normalcy in life. For me, this experience involved the loss of youthful experiences that typify the trajectory of life experiences for 15-25 year olds. There were

definitely feelings of pain and sadness over these losses.

Through these perceived losses, I learned to hold dear many things. For one, I learned to value health and life. I gained depth in my general understanding of life and how it needs to be lived. The experience enabled me to appreciate family and friends during times when they really matter. It taught me that life does not give us normalcy. We make the best of our lives and make the less normal as normal as we can possibly make it and live it the way we need to—with meaning, direction, and a sense of purpose. My caregiving responsibility was, after all, a character-building experience. It gave me a sense of purpose and fulfillment. It increased my sense of mastery over life. It became clearer to me as time went on that the gains from the experience outweighed the losses.

Having grown up in the Filipino culture, I have observed that religion is a source of coping for Filipinos in that it provides a space for emotional and psychological catharsis. Houses of worship often become a haven for many Filipinos, most especially, when life challenges arise. There were times during my father's illness when I sought refuge in church. The experience allowed me to nurture my sense of spirituality. This enabled me to maintain hope that things will work out in the best possible way and to trust my inner strength. I prayed a lot on my own. It was healing to have poured out my heart to a God that I perceived as loving and accepting. In this sense, spirituality became a therapeutic tool for me. It provided me with an anchor and grounding during tough times.

The role of family and friendship networks was important in coping with challenges. Family and friends were instrumental in my family's handling of various problems (i.e., one health crises to another) that arose throughout the course of my father's illness. They were available as our sounding board. Food, laughter, and friendship were abundantly

shared. Support through prayers and positive thoughts were always given. Countless visits from loyal friends and dedicated supporters of the family occurred through the years. I truly doubt that my family and I would have made it through the difficult times if it were not for the kindness, the warmth, the love, and the genuine support of family and friends that made life a little easier. Indeed, the role of family, friends, and support networks increases in significance as we maneuver through various life phases. It is certainly true, in our case, that the meaning of family and friendships became more pronounced during difficult life events and challenging life transitions.

Coping for my family is not only embedded in the personal, but also in the collective (family, friendship circles, other social networks) and in the spiritual or religious. Within some of these coping strategies are inherently traditional orientations. The traditional ways of helping, that relating to the *bayanihan* (community) spirit, were evident in the action of family and friends since the traditional culture is rooted in reciprocal relationships. In the religious and spiritual dimensions, ritual practices became a source of comfort in times of distress. Burial and funeral practices as well as the prayer offerings (from day one to the first year memorial mass) played a significant part in dealing with death. These coping mechanisms are intertwined with cultural inclinations and act as enabling forces within the context of constraint.

Caregiving has been a humbling experience and constantly reminds me, as a social worker, to keep an open mind about individual, familial, and cultural ways of navigating through life and of handling various life exigencies. It has given me the inclination to better understand the individual and cultural basis of certain ways of doing, being, and thinking. In the end, clients need to be supported in clarifying their views (being able

to control or not control their circumstances) and in helping them arrive at decisions they can live with. I am better able to appreciate and respect clients' rights to determine their lives in the manner they deem fit. In addition, I am able to applaud clients in their use of natural support systems that aid in sustaining them as well as to capitalize on clients' ability to tap into built-in coping strategies.

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