

Kaninong Buhay ang Uunahin Ko?: The Lived Experiences of *Anakina* Providing Dual Caregiving for Their Children and Mothers with Dementia

Angel H. Embudo¹, Deinne Ann B. Lontoco¹, Alden Andrei N. Buesing¹

¹University of Perpetual Help System DALTA-Calamba Campus, Laguna, Philippines

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Email of Corresponding Author: angelembudo.perpetual@gmail.com

Abstract

This study explores the lived experiences of Filipina middle-aged solo parents (*Anakina*) who simultaneously provide care for their dependent children and mothers with dementia within the collectivistic Filipino context. Anchored in the Sandwich Generation concept and the Acceptance Theory of Family Caregiving, the research employs a qualitative hermeneutic phenomenological design to examine the challenges, coping mechanisms, perceived benefits, and culturally grounded caregiving practices of participants. Data were collected through semi-structured face-to-face interviews with three purposively selected participants from Cavite, Laguna, and Manila, and analyzed using Interpretative Phenomenological Analysis (IPA). Findings reveal that *Anakina* face significant challenges, including solo caregiving responsibility, physical exhaustion, and emotional strain intensified by financial pressures and limited support systems. Despite these burdens, participants demonstrated resilience through adaptive coping strategies such as seeking social support, engaging with digital resources, and practicing positive reframing, although maladaptive responses occurred during periods of extreme stress. The study also highlights positive outcomes, including strengthened relationships with children, shared caregiving responsibilities, and increased emotional acceptance and personal growth. Filipino cultural values, particularly *utang na loob* and spiritual faith, emerged as central influences that both sustain caregiving commitment and contribute to caregiver burden. The study concludes that while dual caregiving presents substantial physical and emotional challenges, culturally rooted values and adaptive coping mechanisms enable caregivers to sustain their roles. It recommends enhanced access to culturally sensitive mental health services, strengthened family and community support systems, and government interventions to alleviate caregiver burden. The study aligns with SDG 3 (Good Health and Well-Being), SDG 5 (Gender Equality), SDG 8 (Decent Work and Economic Growth), and SDG 10 (Reduced Inequalities), as it addresses caregiver health, gendered caregiving roles, economic strain, and disparities in support systems. Its sustainability impact lies in informing policies and community-based interventions that support caregiver welfare, promote inclusive health systems, and strengthen culturally responsive caregiving frameworks.

Keywords: Acceptance Theory of Family Caregiving; Dementia Caregiving; Filipina Solo Parents; Hermeneutic Phenomenology; Sandwich Generation; Social Support; Spiritual Faith; *Utang Na Loob*

1. Introduction

This study examines the lived experiences of Filipina middle-aged solo parents (*Anakina*) who simultaneously care for their dependent children and mothers with dementia. Situated within the collectivistic Filipino context, where family, filial obligation, and intergenerational support are deeply embedded, the research explores how dual caregiving roles shape challenges, coping mechanisms, perceived benefits, and culturally grounded practices. Drawing on phenomenological inquiry, the study contributes to understanding a largely underexplored caregiving experience in the Philippines.

1.1 Background of Filipina Solo Parent Dual Caregiving (*Anakina*) in Dementia Context

The Filipino family remains a central social unit shaped by collectivism and the concept of *kapwa*, where individuals prioritize collective well-being over individual needs. Family extends beyond biological or legal ties to include relationships formed through cultural expectations and social realities (Oxford Learner's Dictionary, 2025; Braithwaite, 2024). Globally, individuals in middle adulthood often belong to the sandwich generation, simultaneously supporting children and aging parents (Horowitz, 2022). In the Filipino context, strong filial obligations intensify this dual caregiving responsibility (InLife, 2025). The burden becomes more complex when caregiving involves dementia, a progressive condition affecting memory, cognition, and daily functioning, with 57 million cases worldwide and increasing incidence in low- and middle-income countries (World Health Organization, 2025). In the Philippines, dementia prevalence continues to rise, with 149,606 new cases recorded in 2020 and increasing projections, alongside gaps in healthcare capacity and caregiver support (Dominguez et al., 2021; Anlacan et al., 2024). Despite this, limited research has explored the lived experiences of Filipina solo parents who simultaneously fulfill caregiving roles for both children and mothers with

dementia. This study addresses this gap by examining the experiences of *Anakina* in Cavite, Laguna, and Manila, focusing on their challenges, coping strategies, perceived benefits, and the cultural values shaping their caregiving roles.

1.2 Literature Themes on Family, Solo Parenting, Sandwich Generation, and Dementia Caregiving

Literature highlights the evolving concept of family as a dynamic structure encompassing emotional connection, identity, and support systems across diverse forms, including nuclear, extended, and solo-parent families (Callaway, 2023; Arslan, 2023; Budinski & Gahan, 2023; Braithwaite, 2024). In the Philippines, family life is deeply rooted in solidarity, respect for elders, and intergenerational caregiving (Maria, 2021; Pineda, 2024). Filipino cultural values such as *utang na loob*, filial piety, and communal cooperation reinforce caregiving expectations, often making caregiving roles culturally internalized rather than optional (Pineda, 2024; Cultura Team, 2024). Solo parents face compounded challenges, including financial constraints, time limitations, and emotional strain, despite existing welfare policies (Leonard et al., 2023). Dual caregiving further intensifies these pressures, creating both burden and meaning through cultural obligation and family commitment (Tabogon et al., 2024). Middle adulthood is characterized by generativity, where individuals feel responsible for nurturing others, yet dual caregiving can lead to role overload and diminished well-being (Orenstein & Lewis, 2022; Silvestre, 2023). Members of the sandwich generation experience emotional and physical strain but cope through prioritization, delegation, and cultural values (Kenton, 2022; Angeli et al., 2025; Pashazade et al., 2023). Caregiving involves both burden and benefit, encompassing physical, emotional, and relational challenges alongside personal growth and strengthened relationships (Schulz et al., 2020; Bongelli et al., 2024). Filipino caregivers often rely on resilience, spirituality, and social support networks (Cordova, 2020; Cruz & Dominguez, 2020). Dementia caregiving introduces additional complexity due to its progressive nature, affecting both patients and family systems (World Health Organization, 2025; National Institute on Aging, 2022; Alzheimer's Society, 2024; Cleveland Clinic, 2024). It imposes emotional, financial, and psychological strain on caregivers (Hallstrom, 2022; Reed-Guy, 2025; Alzheimer's Society, 2025). Adult children caregivers experience evolving emotional journeys marked by adaptation, identity shifts, and reliance on social support (Falcão & Paulson, 2022; Tambunan and Simbolon, 2023; Hasmi Nizarl et al., 2022; Wood & Suizzo, 2025; Pascual, 2021; Dombestein et al., 2020). For the *Anakina*, these dimensions converge, resulting in heightened vulnerability to burnout while highlighting the importance of support systems and shared caregiving responsibilities (Fink, 2025; Roberto and Savla, 2022).

1.3 Local, National, and Global Context of Dual Caregiving and Dementia among Filipina Solo Parents

Globally, dementia is a growing public health concern, with millions affected and increasing incidence rates, particularly in low- and middle-income countries (World Health Organization, 2025). Studies across Asia demonstrate how cultural norms shape caregiving roles, often placing responsibility on female family members and normalizing caregiving burdens (Nguyen et al., 2021; Cheng et al., 2025). Nationally, the Philippines faces rising dementia prevalence alongside limited healthcare resources, insufficient caregiver support, and financial constraints (Dominguez et al., 2021; Anlacan et al., 2024). Filipino caregiving remains largely family-centered, influenced by cultural expectations and limited institutional support. Locally, studies in communities such as Cavite highlight the realities of dual caregiving among solo parents, including financial strain, physical exhaustion, and emotional challenges, balanced by cultural values of responsibility and love (Tabogon et al., 2024). These contextual layers emphasize the urgency of understanding caregiving experiences within specific cultural and socio-economic settings.

1.4 Theoretical and Conceptual Basis of *Anakina* Dual Caregiving Experiences

This study is anchored in the Sandwich Generation concept introduced by Miller (1981), which explains the dual caregiving role of individuals supporting both children and aging parents (Kenton, 2022; De La Cruz, 2022). It situates the *Anakina* as individuals managing competing demands across generations. It is further grounded in the Acceptance Theory of Family Caregiving, which explains how caregivers internalize their roles through cultural values such as *utang na loob* and filial piety, influencing coping, adaptation, and resilience (Feliciano et al., 2022). Together, these frameworks provide structural and psychological perspectives, capturing both the external realities and internal processes of caregiving among *Anakina*.

1.5 Research Gaps on Filipina Solo Parent Sandwich Generation Dementia Caregiving

Existing literature predominantly focuses on single-generation caregiving, spousal caregiving, or general sandwich generation experiences, with limited attention to Filipina solo parents managing dual caregiving roles in the Philippine context. While studies acknowledge caregiving burden, dementia impact, and cultural influences, few explore the intersection of solo parenting, dementia caregiving, and Filipino cultural values. This gap is significant given the increasing prevalence of dementia and the reliance on family-based care systems. This study addresses this gap by documenting the lived experiences of *Anakina*, providing insight into their challenges, coping mechanisms, perceived benefits, and culturally shaped caregiving practices.

1.6 SDG Alignment of *Anakina* Dual Caregiving and Dementia Research

This study aligns with several Sustainable Development Goals: SDG 3 – Good Health and Well-Being, as it addresses mental health, caregiver burden, and dementia-related health challenges. SDG 5 – Gender Equality, as it highlights the

disproportionate caregiving responsibilities carried by women, particularly Filipina solo parents. SDG 8 – Decent Work and Economic Growth, as dual caregiving affects productivity, employment stability, and economic well-being. SDG 10 – Reduced Inequalities, as it reveals disparities in access to healthcare, caregiver support, and social services. The research contributes to improving caregiver well-being, promoting inclusive health systems, and supporting vulnerable populations within family-centered care structures.

1.7 Multidisciplinary Sustainability Importance of *Anakina* Caregiving Study

This study contributes to socio-economic sustainability by highlighting the financial and labor burdens faced by dual caregivers and informing policies that support caregiver welfare. It supports public health sustainability by emphasizing the need for mental health services, dementia care programs, and caregiver interventions. It also advances cultural sustainability by preserving and critically examining Filipino caregiving values such as filial piety and utang na loob, while acknowledging their dual role as both support systems and sources of burden. In terms of community and institutional sustainability, the findings provide insights for healthcare providers, policymakers, and social institutions to design culturally responsive programs and support systems. Overall, the study strengthens understanding of caregiving within a multidimensional sustainability framework, emphasizing the need for integrated approaches that address health, culture, gender, and socio-economic realities.

2. Material and methods

2.1 Research Design

This study utilized a qualitative research design employing a hermeneutic phenomenological approach to deeply understand the lived experiences of Filipina solo parents performing dual caregiving roles. Qualitative research was appropriate as it explored complex human experiences that cannot be captured numerically, focusing on “how” and “why” questions (Tenny et al., 2022). Hermeneutic phenomenology emphasized interpreting the meaning individuals assign to their experiences within their life contexts (McLeod, 2025). This approach enabled the researchers to examine how *Anakina* understood their dual caregiving roles, including their challenges, coping strategies, perceived benefits, and culturally influenced practices. Through hermeneutic interpretation, the study not only described but also interpreted the deeper meanings of participants’ experiences, ensuring that their perspectives were meaningfully represented.

2.2 Locale of the Study

The study was conducted in the Philippines, specifically in Cavite, Laguna, and Manila, where the selected participants resided. These locations provided the context for examining the lived experiences of Filipina solo parents engaged in dual caregiving roles within their household environments.

2.3 Participants of the Study

The participants were Filipina solo parents, referred to as *Anakina*, who belonged to the sandwich generation and were responsible for caring for both their dependent children and their mothers diagnosed with dementia. A total of three participants were included, with one each from Cavite, Laguna, and Manila. Participants were middle-aged adults between 30 and 64 years old, either married or unmarried solo parents, residing in the Philippines, with at least one dependent child and simultaneously providing direct care to their biological mother diagnosed with dementia for at least one year. These criteria ensured that participants had sufficient lived experience to meaningfully contribute to the study.

2.4 Sample and Sampling Procedure

Purposive sampling was employed to select participants who met the specific criteria relevant to the study. This method allowed the deliberate selection of individuals with rich and relevant experiences of dual caregiving (Ahmad & Wilkins, 2024). Participants were required to be living in the same household as their mother with dementia to ensure direct and sustained caregiving involvement. The sample size of three participants was considered appropriate for hermeneutic phenomenological research, as it prioritized depth of understanding over generalization. This approach enabled detailed exploration and careful interpretation of each participant’s lived experience while maintaining manageable and meaningful narratives.

2.5 Research Instrument

The study used a semi-structured interview guide designed to capture the lived experiences of *Anakina* engaged in dual caregiving. This instrument allowed consistency across interviews while maintaining flexibility for probing and deeper exploration of individual responses. The guide consisted of three parts: rapport-building questions to establish comfort, core questions focusing on challenges, coping strategies, perceived benefits, and cultural values, and debriefing questions for reflection and clarification. Interviews were conducted face-to-face in private and convenient locations, guided by open-ended questions with follow-up probes. To ensure credibility, the instrument underwent expert validation by a psychology professional, confirming clarity, relevance, and cultural sensitivity. It was also pilot-tested with a non-participant caregiver

to ensure proper flow and understanding. This structured yet flexible design facilitated the collection of rich and in-depth narratives.

2.6 Data Gathering Procedure

Data collection began with recruitment through Facebook support groups, where qualified participants expressed interest and were screened based on the study criteria. Eligible participants were contacted to arrange face-to-face interviews. Prior to data collection, informed consent was secured through written and verbal explanations, ensuring participants understood their rights and the voluntary nature of their participation. Interviews commenced with rapport-building, followed by core questions exploring lived experiences, and concluded with debriefing questions. Sessions were audio recorded, and field notes were taken to ensure accuracy and depth. Each participant was given sufficient time to share their experiences without pressure, and a token of appreciation was provided after the interview. This process ensured ethical, respectful, and participant-centered data collection.

2.7 Data Analysis Techniques

Data were analyzed using Interpretative Phenomenological Analysis (IPA), which focuses on understanding how individuals make sense of their lived experiences (Smith & Fieldsend, 2021). Bracketing was applied to minimize researcher bias by setting aside assumptions and preconceptions. The analysis involved transcribing interviews, repeatedly reading transcripts, and generating initial notes that captured descriptive, linguistic, and conceptual insights. Emergent themes were identified from these notes, with each case analyzed individually before identifying patterns across participants. The interpretative process followed a hermeneutic approach, where participants made meaning of their experiences and researchers interpreted these meanings. Verbatim quotations were used to preserve authenticity. Themes were then organized based on the study's focus on challenges, coping strategies, perceived benefits, and cultural influences, resulting in a nuanced understanding of *Anakina's* caregiving experiences.

2.8 Ethical Considerations

The study adhered to the Code of Ethics of the Philippine Psychological Association and ensured the protection of participants' rights, dignity, and welfare. Participants were fully informed of the study's purpose and procedures and provided voluntary consent, with the option to withdraw at any time. Interviews were conducted with sensitivity, allowing participants to pause or discontinue if needed. Emotional well-being was prioritized, with supportive measures available during distress. Confidentiality was maintained through anonymization and secure storage of data, accessible only to the research team. Participants were also given the opportunity to review findings through member checking to ensure accuracy. Oversight from a registered psychologist ensured ethical compliance throughout the process. A token of appreciation was provided in recognition of participants' contributions, reinforcing a respectful and ethical research environment.

3. Results and Discussion

3.1 Challenges Experienced by *Anakina* in Dual Caregiving

3.1.1 Solo Caregiving

The participants consistently reported carrying full caregiving responsibility alone, both in raising their children and caring for their mothers with dementia. They described experiences of abandonment, widowhood, and lack of sibling support, resulting in complete responsibility for daily caregiving tasks and decision-making. This reflects the intensified burden of the sandwich generation, where caregiving demands are already high (Pashazade et al., 2023). The absence of shared caregiving increases stress and reduces coping capacity (Fink, 2025), aligning with the participants' experiences of isolation and overwhelming responsibility.

3.1.2 Physical Exhaustion

Participants reported persistent physical strain, including headaches, dizziness, elevated health risks, sleep deprivation, and disrupted eating patterns. Caregiving tasks extended throughout the day and night, leaving little time for rest or personal care. These findings align with research showing that dementia caregiving leads to chronic fatigue, insomnia, and health deterioration (Cheng et al., 2025; Schulz et al., 2020). The neglect of basic needs reflects the cumulative toll of sustained caregiving, where caregivers prioritize others at the expense of their own health (Bongelli et al., 2024; Fink, 2025).

3.1.3 Emotional Exhaustion

Participants expressed deep emotional strain, including grief from losing partners, stress from managing behavioral symptoms of dementia, death-related thoughts, and financial anxiety. These experiences were continuous and interconnected with their caregiving roles. Emotional exhaustion is widely recognized in caregiving literature as a major consequence of prolonged caregiving demands (Hasmi Nizarl et al., 2022). The combination of grief, caregiving burden, and limited support increases vulnerability to stress and psychological distress (Wangliu & Chen, 2024; Cruz & Dominguez, 2020), reflecting the participants' lived realities.

3.2 Coping Mechanisms of *Anakina*

3.2.1 Adaptive Coping Strategies

Participants reported using adaptive strategies such as seeking support from friends, engaging with social media for information and emotional relief, and practicing self-encouragement and positive thinking. These strategies helped them manage stress and continue caregiving responsibilities. These findings support literature indicating that social support, information-seeking, and positive reframing improve caregiver resilience (Cruz & Dominguez, 2020; Pascual, 2021). Digital platforms also serve as important sources of knowledge and connection, especially when formal support systems are limited (Theng et al., 2023; Cheng et al., 2025).

3.2.2 Maladaptive Coping Responses

Participants also described maladaptive responses, including temporary withdrawal from caregiving situations and moments of redirected frustration toward their mothers. These behaviors occurred during periods of extreme stress and emotional overload. Such responses are consistent with findings that caregiver burnout and lack of support can lead to maladaptive coping behaviors (Hasmi Nizarl et al., 2022). Avoidance strategies may provide short-term relief but do not address underlying stressors (Pashazade et al., 2023), highlighting the need for stronger support systems.

3.3 Benefits and Positive Outcomes of Dual Caregiving

3.3.1 Strengthened Relationship with Children

Participants reported improved relationships with their children, including receiving financial support, assistance in caregiving, and serving as role models. Their children became both emotional and practical sources of support. These outcomes align with the concept of generativity, where caregiving fosters purpose and strengthens family bonds (Silvestre, 2023). Intergenerational support reflects Filipino values of reciprocity and family solidarity (Pineda, 2024; Dombestein et al., 2020), reinforcing mutual care within the family.

3.3.2 Acceptance of Caregiving Role

Participants developed greater patience, understanding, and emotional acceptance of their caregiving roles. Some also experienced strengthened emotional bonds with their mothers, including increased love and empathy. This reflects the Acceptance Theory of Family Caregiving, where acceptance improves coping and caregiving sustainability (Feliciano et al., 2022). Emotional transformation from frustration to understanding is consistent with caregiving adaptation processes (Tambunan & Simbolon, 2023; Falcão & Paulson, 2022).

3.4 Cultural Influences on Caregiving Practices

3.4.1 Utang na Loob

Participants described caregiving as an obligation rooted in gratitude and reciprocity, expressing a strong sense of duty to repay parental care. They emphasized having no choice but to care for their mothers and sacrificing personal needs to fulfill this responsibility. This aligns with Filipino cultural values, where utang na loob shapes caregiving expectations and behaviors (Pineda, 2024; Angeli et al., 2025). Caregiving is internalized as part of identity rather than a voluntary role (Pashazade et al., 2023), explaining the participants' sustained commitment despite hardship.

3.4.2 Spiritual Faith

Participants consistently relied on prayer and faith for guidance, strength, and emotional support. Spiritual practices were integrated into daily caregiving routines and served as a primary coping resource. Spirituality is a key resilience factor among Filipino caregivers, providing emotional stability and meaning (Cruz & Dominguez, 2020). Faith-based coping supports endurance in demanding caregiving roles and contributes to psychological well-being (Silvestre, 2023).

4. Conclusion & Recommendations

The study revealed that Filipina solo parents (*Anakina*) experience significant challenges in dual caregiving, with emotional exhaustion emerging as the most burdensome aspect, alongside physical strain and the demands of solo caregiving without support. Despite these difficulties, the *Anakina* demonstrated resilience by predominantly using adaptive coping strategies such as seeking social support, utilizing digital resources, and practicing self-encouragement, while maladaptive responses occurred only in moments of extreme stress. The findings further showed that dual caregiving strengthened their relationship with their children, fostering mutual support, shared responsibilities, and the transmission of values, while also contributing to personal growth through increased patience, understanding, and acceptance of their caregiving role. Differences in levels of acceptance among the participants reflected their unique life circumstances and caregiving journeys. Filipino cultural values, particularly utang na loob and spiritual faith, played a central role in shaping caregiving practices and sustaining the *Anakina*'s commitment, providing both motivation and emotional strength as they continued to care for two generations despite limited support.

Based on the findings, it is recommended that mental health support be made accessible to the *Anakina* through affordable and culturally sensitive counseling services and support groups, while family members, professionals, and communities respond to caregivers with understanding rather than judgment. Strengthening shared caregiving within families is essential to reduce the burden on solo caregivers, alongside the development of government programs that provide financial assistance, caregiver allowances, and easier access to resources. Community-based dementia education should be implemented to improve caregiving knowledge, while support systems should integrate Filipino cultural values and spiritual practices that sustain caregivers. The involvement of children in caregiving should be supported through education to reinforce family responsibility, and further research is encouraged to expand understanding of dual caregiving in the Philippine context across different populations and long-term outcomes.

The study was limited to three Filipina solo parent participants from selected locations in the Philippines, focusing only on their lived experiences as dual caregivers without including the perspectives of their children, mothers with dementia, or other family members. The qualitative phenomenological design prioritized depth over generalizability, meaning the findings cannot be applied to all caregivers. Additionally, the study did not examine broader external factors such as healthcare systems or the clinical progression of dementia, which may also influence caregiving experiences.

Compliance with ethical standards

This study was conducted in accordance with established ethical principles to ensure the protection of participants' rights, dignity, and welfare throughout the research process. Participation was voluntary, with informed consent obtained prior to data collection. Confidentiality and anonymity were maintained, and participants were treated with sensitivity, including the option to pause or withdraw at any stage. Data were securely stored and used solely for research purposes, and ethical oversight was provided to ensure adherence to professional standards.

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