Life Satisfaction Among Older Filipino Sexual Minorities and Their Experiences of Support

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Studies have shown conflicting views on whether or not sexual minorities aged sixty and above face the same challenges of aging that heterosexual persons do. In the Philippines, few studies feature the intersections of age and sexual orientation. This study discusses the perceived life satisfaction of five male and five female sexual minorities between ages sixty to seventy, considering that they have lived in environments of strong heteronormative beliefs reinforced by Filipino family values influenced by the state and cultural/religious institutions. Through interviews with ten older sexual minority respondents, I explore their experiences of acceptance and rejection from their families and friends. I look at how the factors of sexual orientation, gender identity, and expression (SOGIE) may have affected the quality of support they receive as they age, and ultimately, how these influence their disposition as they experience changes brought by aging. Results of this study show the respondents' fears and insecurities over their lack of familial support, which can be attributed to how their sexual and gender identities have been stigmatized.

Keywords: older adults, aging, family support, lesbian, gay

In general, older persons face challenges of shifting social positions as they experience health deterioration, retirement, and changing household roles (Brossoie, 2009). Families of older persons could play a crucial role in helping them cope with new experiences

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brought by aging (Brossoie, 2009) through providing them with care and other kinds of support especially in collectivist countries where many live in multi-generational households (UN DESA, 2011).

In the Philippines, families are often extended and members tend to stay together in a shared household unit (UN DESA, 2011). A person is taught at a very young age to be loyal to his or her family and to respect the authority of parents who are entitled to influence decisions a person makes especially in terms of choosing a career and finding a spouse (Jocano, 1995). A person may either bring pride or shame to a family when she or he does not live up to family values (Shapiro, 2007). In return, the family provides security and support. Even in trying times when a family member fails, families often assist him or her in getting back on track (Jocano, 1995).

Older persons usually stay with their children and continue to support them financially or by taking on more reproductive work like caring for their grandchildren or helping manage their households (UN DESA, 2011). Hetero-exclusive norms highly influence family forms through various channels, such as the state, organized religions, and institutions of employment and education, among others (Tan, 2014). Household roles are often divided according to gender role assignments of productive work for men and reproductive work for women (Eviota, 1992). Filipino family members who do not marry or form their own legally or legitimately recognized families usually continue to support their families of origin.

The case, however, may differ in the experiences of older Filipino sexual minorities because their actual or perceived sexual orientation or gender expression may have determined whether or not they were accepted by their families. In many cases, hetero-exclusive norms embedded in traditional Filipino family values hinder the acceptance sexual minorities receive from their families (Jordan and Lim 2013). There are stereotypes that assume that older sexual minorities end up lonely and isolated (Tan, 2012). Scholars have debated on whether or not older sexual minorities find the same sense of security and satisfaction that hetero norm-conforming persons get from familial support as they face the challenges of aging (Camic and McParland, 2016). There have also been conflicting studies on whether or not sexual minority elderly receive the same quality of support from members of their social network (Brotman et. al., 2006).

There are few studies which feature aging lesbian, gay, bisexual, and transgender (LGBT) persons in the Philippines (Motilla, 2004). Majority focus on gay elderly and men who have sex with men (MSM) (Tan, 2012). Other works in forms of feature articles (Pascual, 2014) and short films (Gaarmand, 2010) show homelessness and financial instability as their plight which resulted from the lack of support or rejection by their families of origin.

Research on lesbian, gay, and bisexual (LGB) older adults show that seniors who have been "out of the closet" for a longer period of time experienced more victimization than those who were secretive of their sexual orientations for a longer period of time (Kimmel, 2014). Some scholars believe that the loneliness experienced by gay and lesbian elderly may have been caused by the same factors that other hetero norm-conforming elderly experience such as a death of a family member (Motilla, 2004). Others say that gay and lesbian older adults receive the same amount of familial support that hetero norm-conforming persons do but from different sources (Brennan, Cantor, & Shippy, 2004), often from friends or chosen family instead of or apart from members of their families of origin. Some researchers argue that claiming that LGBT persons experience the same challenges that hetero norm-conforming persons do while aging renders them invisible, silencing their issues (Brotman, Ryan, & Meyer, 2006).

METHOD

I met the participants of this study with the help of relatives, friends, and a small organization for gay and lesbian elderly called Home for the Golden Gays, of which five of the participants are members. Overall, respondents of this study consist of five self-identified gay men, two self-identified lesbian women, and three other lesbian women who did not outright identify with the lesbian label but spoke of their romantic attraction to those with the same sex. The respondents are all aged sixty to seventy-one and by law are considered senior citizens. All of them receive low or inconsistent incomes except for one male respondent who works as a professor at a state university, and who is one of three respondents with a college degree. Six respondents

reside in Nasugbu, Batangas, while the rest live within Metro Manila. Of all ten respondents, the two self-identified lesbians are in long term relationships with a partner of the same sex with whom they support

In gathering data, I conducted an in-depth interview with each respondent at their homes. The main tool used in the process is a checklist of questions on: 1) their relationship with their families of origin, 2) their views and experiences of aging in relation to their sexual orientation and gender expressions, 3) sources and nature of support they receive which help them through challenges of aging, and 4) how they felt about their current situation.

In this article, I focus on the respondents' expressed feelings about aging. I look at their sentiments in relation to their relationships and support networks and how aspects of their sexual orientation and gender expressions come into play. I analyze gathered data according to themes of 1) the respondents' perception of themselves in terms of gender identity, 2) their experiences in homophobic spaces, 3) their positions in their support networks, and 4) their apprehensions as they undergo changes brought by aging.

Borrowing from the premise of discourse analysis as discussed by Claudio (1999), I recognize that the analyses I make are my own interpretations and do not necessarily assume the respondents' positions. In other words, I recognize that there are nuances to my understanding of the participants' accounts and experiences that come from my own understanding of particular themes in this study.

RESULTS AND DISCUSSION

Gay and Lesbian Identities Among Older Filipino Adults

Sexual minorities around the age of sixty at the time this paper was written formed their identities decades before the emergence of organized LGBT groups in the nineties (Tan, 2014). Very few of the respondents of this study were aware of fairly recently coined terms related to sexual orientation, gender identity, and gender expression (SOGIE) (International Commission of Jurists, 2007). For the purpose of clarity in the coming discussion, I use the categories of sexual orientation, gender identity, and gender expression (SOGIE) as they are internationally used in speaking of the respondents' experiences. In line with my use of such international categories, I bring to this section Claudio's (2015) definition of gender as "a social organizing force that encompasses the domains of the biological, intrapersonal, interpersonal and social and that determines a person's access to and control of opportunities and resources."

At the beginning of and throughout the interviews, when asked about their sexual orientation, respondents made a variety of statements on being gay or lesbian, showing different views on the terms. Formal concepts of SOGIE do not neatly fit the respondents' understanding of gay and lesbian identities. Tan (2008) explains that in Philippine culture, the Tagalog translation of gay, bakla, pertains to an assigned male (based on genitalia) who has feminine characteristics may it be from having feminine facial features, speech, or mannerisms. Likewise, a lesbian or a "tomboy," the latter of which would in the Philippine context be imagined as "more masculine," pertain to an assigned female (also based on biological qualities) who has masculine attributes which may also range from physical features or gestures. The use of the terms may not always have anything to do with sexual orientation (Camic & McParland, 2016). Reactions of the respondents to the question on their sexual orientations show how they view their identities only within a linear scale which have on opposite poles notions of "pure" forms of male and female.

In looking at the experiences of the respondents of this study, it is important to remember that the gender system works alongside other systems of class, age, ethnicity, and many other systems of hierarchy which determine a person's social position. Claudio's definition of gender as a system which categorizes people according to "maleness" and "femaleness" beyond a biological context is one where hierarchical values are given to gender categories in which the feminine is subordinate to the masculine (2015). Gender classifications outside of the male and female binary, then, follow the "woman" category in the hierarchy provided that the man and woman categories are heterosexual. The inequalities that a gender system creates come from how people have been conditioned and socialized to see the differences created by the categories rather than from mere biological differences

of the supposed male and female categories (Claudio, 2015).

Most respondents showed discomfort from being identified close to their more extreme notions of gay and lesbian identities. The first respondent, for example, referred to her sexual orientation as "AC/ DC," which has been used in the Philippines as synonymous to the "bisexual" label. However, she has only always been attracted to women. It later became clear that she did not adhere to the lesbian label because she saw herself as having a mixture of both feminine and masculine qualities and capacities. In other words, she felt that she lacked the masculinity she perceived as necessary to be considered as "lesbian." Another example is how two female respondents avoided answering the question on their sexual orientation, initially explaining that they are only "somewhat lesbian" as opposed to a description of a lesbian with a very masculine self-representation that younger people may label as transgender.

One respondent identified himself as gay even if he has never had a romantic relationship with other men, basing his self-classification on the way he moved which he considered to be feminine. Similar to the female respondents, while all the gay respondents seemed to comfortably identify with a gay label, they were quick to set themselves apart from negative stereotypes of gay men. In several interviews, a description of the degree of "gayness" or "lesbianism" close to the category of transgenderism falls under these negative stereotypes. Qualities respondents looked down on which they attribute to the "more gay" or to the "more lesbian" include irresponsibility, drunkenness, substance abuse, stealing, and cross-dressing. The respondents favored an image of themselves and of the identities they represent as one that does not go too far away from their assigned sex and nowhere close to that of the opposite sex. An effort to look like people of the opposite sex was frowned upon by respondents and was closely attached to the descriptions mentioned. Most either presented themselves to look close to how they should stereotypically look based on their biological and assigned sexes or think that they adequately do. Only one lesbian respondent embraced her masculine expressions without any sign of insecurity. Of ten, only two female respondents made no negative comments about how far one's gender expression can go.

The discomfort that majority of respondents expressed from the more extreme degrees of "gayness" or "lesbianism" which they set themselves apart from may be related to internalized homophobia. Also described as self-hate on the basis of SOGIE, internalized homophobia may arise from discrimination, apart from gender inequality and gender-based violence, resulting from the imposition of heteronormative norms by societies through cultural practices and laws.

In the Philippines where there is a strong heteronormative culture, more "heterosexual-looking" sexual minorities are seen as generally more acceptable and "decent" compared to those whose appearances are closer to the opposite sex. A gay respondent who is well-versed in discussing LGBT discrimination and gender equality is among those who expressed discomfort over flamboyant gay men. When asked about their experiences of discrimination or prejudice in relation to their sexual orientation which is often interpreted as basis for their gender identity and gender expression or the other way around, most respondents did not outright identify specific instances. Instead, their experiences of homophobia and stigma surfaced in the ways they perceive the acceptance they receive from those around them in the privacy of their homes and in public spaces.

Homophobic Spaces

It is likely that the respondents' experiences of internalized homophobia resulted from practicing vigilance in their self-representations grounded in what they thought were "decent" behavior. Living among hetero norm-compliant persons may have showed the respondents ways in which they would be accepted by the people in their environment. This vigilance is evident in their behaviour where they avoided extremes of feminine (for men) and masculine (for women) gestures.

Apart from looking gender-neutral, some respondents have had to be secretive of their romantic relationships. Common among gay respondents were expressions of embarrassment over having had same-sex partners in the past. They spoke of their romantic relationships as part of a juvenile and irresponsible phase in their lives. Otherwise, they feel that acting upon their desires could cause shame or vulnerability to violence. Many respondents felt that they did not experience as much violence as others they knew did because they were more careful and remained "decent".

A number of the respondents shared experiences of discrimination in several spaces. In tracing their childhood, respondents remember being aware of their gender for as long as they could recall. Gay respondents said that they have always been inclined to act in a feminine manner while female respondents have always felt comfortable with their masculinity. Eight out of ten respondents had no experience of having to discuss their sexual orientation and gender expression with their families. However, some have had to negotiate their identities with members of their family.

More than half of the female respondents had parents or a relative who tried to "correct" them by making them wear more feminine clothes. One of them had a sister who burned her pants so that she would not have a choice but to wear a skirt. One gay respondent, upon his mother's suspicion of his sexual orientation, experienced battery on a daily basis and was eventually kicked out of home to live on the streets. Another respondent had to conceal his feminine expressions for two decades until his father died to avoid battery. The latter also encountered bottles being thrown at him by drunk men in his neighborhood. Unfortunately, the two respondents who experienced physical violence also blamed themselves, explaining that they would not have been beaten if they acted "appropriately" and avoided places they should not have gone to.

Other respondents experienced discrimination at work. Ilkkaracan and Jolly (2007) discussed how gender-based discrimination reduces livelihood opportunities when they occur in education or the labor market. The respondent who works as a professor was once rejected for a teaching post because the person who interviewed him insisted that gay men preyed on boys. A female bisexual respondent could not take jobs in factories which required her to wear dresses or skirts so her choices for work were limited to jobs that are considered masculine like bus ticket-collecting and a security guard post. On the other hand, other respondents felt comfortable with jobs which are often stereotyped as for those with sexes opposite theirs; two gay respondents worked as stylists, and one lesbian respondent worked as a farmer and manual laborer.

Whether blatantly imposed or not, the respondents were assigned boundaries for their gender expressions throughout time in order to be acceptable to those in their environment (Tan 2014, 24). Apart from taking warning from their own first-hand experiences or hearing of others' experiences of violence and discrimination who were also blamed for acting "inappropriately," perpetrators of gender-based violence exhibit a sense of superiority over their victims on the mere basis of being heteronormative. In other words, perpetrators feel entitled to practice violent behavior against LGBT persons whom they devalue and perceive as inferior to them.

After long decades of living in homophobic environments, respondents have come to view themselves as people who are "not normal", as one respondent pointed out. Most have gotten used to this thinking so that they actually began disliking the more "defiant" non-hetero norm conformists, including themselves. Homosexuality, after all, was medically defined as a mental illness until 1973 (Camic & McParland, 2016). This thinking took its toll on the respondents' self-esteem and some expressed self-acceptance of being "flawed" on the basis of their gender and sexuality.

Apart from safety from violence and discrimination, other factors may have influenced the respondents' expressed discomfort and disgust over more extreme non-hetero norm-conforming expressions. All the respondents are Catholic like almost ninety per cent of Filipinos (Jordan & Lim, 2013). Religious beliefs and practices are factors which influence the stigmatization of sexual minorities. A common biblical teaching, not exclusive to Catholicism, is that God only created men and women. Under this belief, deviating from expectations under the only two created genders is sinful. I partly attribute to this why the respondents were defensive of being gay or lesbian. Apart from shame, teasing, and violence, morality is a major factor which contributes to transphobia and transnegativity (Macapagal, 2013). Because the respondents' identities do not fit into gender binary norms, they strive to keep within boundaries of acceptability so that they may say things like "I am gay/lesbian but I am of the decent kind"—a statement uttered by several interviewees.

Religion, in the Philippines, heavily influences state laws and prevailing cultural practices. To a degree, acceptable practices influenced by these factors favor hetero norms exclusive to heterosexual persons. Marriage, for example, is widely accepted as a hetero-exclusive practice, making it unacceptable in the country for gay and lesbian persons to form their own families legally, and thus, in a way that is socially acceptable. The Catholic Church represented by the Catholic Bishops' Conference of the Philippines (CBCP) has made it difficult for the LGBT community to even gain access to antidiscrimination provisions (Tan 2014), to prevent same-sex marriage itself.

Adoption is another legally problematic process for same-sex couples who are not allowed to share custody of a child. Two of the lesbian respondents have been in stable relationships with their respective partners and have also raised informally adopted children. Neither is able to avail of benefits that other married couples have access to, despite having decade-long relationships with the families they formed.

Existing laws fail to acknowledge different family forms because they prioritize protection for conventional family forms. Structures that protect heteronormative and nuclear family forms benefit from its structure for purposes of using the family as a channel to promote values or for efficiency, where the family is responsible for taking care of its individual members (Aguiling-Pangalangan, 1995; Jocano, 1995; Jordan & Lim, 2013). Deviating from hetero norms is viewed as a disruption to the operations expected of nuclear families.

The influence of such strong structures of the state and dominant religious institutions affect both private and public spaces, leaving many LGBT persons with few spaces where they could feel accepted. Many of the respondents accepted that they are merely tolerated by the people around them including their families. Because the respondents of this study credit the acceptance they receive to acting closer to the prescribed gender expression based on their sexes, they do not only disapprove of more extreme expressions of non-heteronormativity, but also disapprove of their own SOGIE. As a result, many of the respondents felt the need to continuously compensate for being gay or lesbian. In families to which they belong, many supported their relatives either financially or through care. The support they gave their families was much more than what was expected of heteronorm conforming siblings. Apart from that most had no legally and socially recognized family of their own, respondents gave their family support as a way of thanking them for the acceptance they received despite their SOGIE. However, as many experienced, that they served their families did not mean a mutually beneficial exchange of support with their families of origin.

Positioning Oneself Within a Support Network

In line with the tradition of the ideal Filipino family, an individual is born into a fixed position which serves as a blueprint for his or her behavior (Jocano, 1995) commonly under the strict supervision of his or her parents (Aguiling-Pangalangan, 1995). Living up to one's family traditions often involves gender role assignments. Gay and lesbian persons unintentionally defy this or are perceived to do so, especially regarding the expectation to marry and form a family with a nuclear form.

The idea of same-sex marriage is almost unimaginable for many people in the Philippines, especially among older people. When they were young, none of the participants were expected to form their own families. While this was disappointing to some of their parents, most participants felt that they were accepted by their families of origin. However, their accounts show that it was not without conditions of "decency," or acting according to hetero norms and providing additional assistance to their families. Only the self-identified bisexual respondent felt that she was given extra care by her parents and siblings because of her gender and sexuality.

Most respondents began helping their families at a very young age. As members of their families of origin who were expected to remain unmarried, a number of the respondents were assigned larger roles. Some respondents began supporting their younger siblings through hard labor and by taking odd jobs. Others were assigned reproductive work at home. As their siblings began to form their own families, their responsibilities grew. One respondent sacrificed his dream of teaching in exchange for working as a stylist so that he could send forty-eight

of his nephews and nieces to school. Two respondents were asked by their siblings to quit their jobs to take care of their then aging parents and young nieces and nephews at home.

Despite sacrificing for their families, two gay respondents still faced rejection. As mentioned earlier, these two respondents experienced violence. One of them was kicked out of his home and had to live on the streets, never seeing his family again. Similar stories have been documented elsewhere where gay boys who were rejected by their families were forced to live on the streets because they were perceived to have brought shame to the family (Pascual, 2014).

Due to having no formed families of their own, the respondents lived with those closest to them. Some respondents continue to live with members of their families of origin, like their siblings, nephews and nieces, and a parent or another older person. Some live with a partner and younger members of their extended family whom they raise as their own children. Some respondents live with friends or have healthy relationships with housemates. Others live alone. In general, those living with family have better food intake than those who do not (Florencio, 1995). Three of four respondents who live alone only have a residence out of others' charity. One of them lives in a compound's backyard under a roof made of recycled tarpaulins. Relying on charity may cause older persons to feel stigmatized and deprived (UN DESA, 2011). While respondents who rely on charity are grateful for the support they receive from their neighbors, they also shared feelings of self-pity and uncertainty.

At home, participants took on different roles as breadwinners, home managers, or a combination of both. Many considered those they live with as their families, apart from those they have blood relations with. Most, despite earning very little, felt that they are able to cope with changes they undergo as they age with the help of their families and friends. Upon aging, most people experience many changes in terms of health, mobility, financial stability, and shifts in social positions, among others (Brossoie, 2009). Most aging Filipinos find health deterioration and financial instability most bothersome (Carlos, 1999) especially since there are hardly state provisions which ensure care for the elderly despite state laws (Lucentales, n.d.).

All participants have their own sets of aging-related problems.

Most of them recognize how they have weakened compared to when they were young. A number also showed some signs of problems of mental health, including episodes of sadness, anxiety, and for one participant, episodes of delusion. Those who live alone find it more difficult to support themselves compared to those who live with family or friends, with the exception of the only financially stable respondent of this study. While most respondents experience financial insecurity, not all of them are bothered by it. Few who are able to enjoy the company of friends and family members, during times of leisure in particular, trust that they have people they can depend on in the event that they become ill.

Majority of the participants have been anxious and even overwhelmed by changes they undergo as they age. Despite huge sacrifices for their families of origin, the respondents admitted to still having no assurance that those they have sacrificed for will actually care for them when they become less capable of caring for themselves. As time passes, the nieces and nephews they have supported in the past begin to form their own families or prioritize caring for their parents instead. No definite family member is legally or culturally expected to give them care. Even if they helped raise their siblings in the past, these family members also happen to be experiencing aging and have their own children to tend to.

There is no cultural practice or belief in the Philippines that assigns responsibility to care for elderly family members who are unmarried and without children. Even in our state laws, the dominant view only acknowledges nuclear family forms. According to the law, it is the children of the elderly who are responsible to care for them (Carlos, 1999). Situations of gay and lesbian elderly only worsen when they face vulnerability to discrimination and rejection which limit their options for support.

Interestingly, despite frequently feeling lonely, half of the respondents frown upon the idea of state provisions for same-sex partnerships. In general, they view it as inappropriate, because to them, same-sex partnerships are unstable compared to heterosexual ones. Some respondents long for a partner but feel that nobody could romantically be attracted to them because of their age. The other half of the respondents who support same-sex marriage include those

who have had partners for decades. They realize how important it is for partnerships to be legally acknowledged in terms of benefits they could avail of. Others find the idea of a legally legitimized relationship romantic. Regardless of their stand on same-sex marriage, a number of respondents long for a partner whom they could grow old with and who would give them the love and support they need to avoid misery. One respondent attributed his loneliness to having no romantic relationship, an aspect of aging featured in a study to be significant to older gav men (Motilla, 2004).

Based on the respondents' accounts, friends play major roles in their lives. Gay and lesbian older adults have been known to create "alternative families" who help mitigate the effects of stigmatization (Tan, 2012, quoting Grossman, D'Augelli, & Hershberger, 2000). Both in the absence and even in the presence of family, friends play a major role in the support systems of LGBT persons (Camic & McParland, 2016). Friends allow LGBT persons to display and be comfortable with an expression of themselves that others, including their families of origin, may not accept, apart from giving care and helping with other life challenges (Camic & McParland, 2016).

The participants did not only feel free of judgment in the company of friends, but they also felt that they have sibling-like relationships with them. Those who are not always able to rely on blood relatives are able to fully rely on friends for care and financial needs. For those who live alone and rely on charity, occasional assistance from friends help them survive. While friends give them food or access to feeding activities, they often feel anxious in times when friends are unavailable. Four respondents have also solely relied on their neighbors when they experienced life-threatening medical emergencies. The devotion they receive from friends differs from that which they receive from members of their families of origin in that friends had never been obliged to give the amount of care and support the respondents receive from them. The respondents felt that they were freely and unconditionally accepted and loved by their peers.

Woes and Fears of Aging Sexual Minorities

Brennan et. al. (2004) found in their study that both LGBT and

heterosexual elderly receive the same amount of support but from different sources. This is evident among the respondents of this study who keep close ties with members of their families of origin, friends, or a combination of both. However, their reported feelings of sadness, loneliness, isolation, fears, and inadequacy, show that the care and support they receive from their support network is not enough to keep them generally satisfied.

Few respondents saw their aging-related concerns to be related to gender and sexuality but several reasons for their reported dissatisfaction can be traced to their experienced internalized homophobia as well as their experiences of discrimination. That they had no option to form their own legally and socially accepted families led to some respondents' longing for a family of their own, which in three respondents' minds is composed of a father, mother, and their children. Some participants also reported having had intentions of forming their own biological families in the past to avoid the loneliness and lack of care they experience at present. To many respondents, having no biological offspring causes uncertainty over who would care for them when they have weakened further and are unable to work or care for themselves. Nobody is socially expected to care for them as much as biological children would be expected to do so with their parents.

Despite sacrifices they made for their families, older sexual minorities remained unsure of which one of the members of their families of origin would actually support them. This was a pressing insecurity particularly for one respondent, who supported almost fifty nieces and nephews, and for the two who were asked to stop working so that they could manage their extended households. For these respondents, the lack of savings, apart from care, contributed to their anxieties. Even those who had informally adopted and raised children do not feel entitled to the care that biological children of others are expected to give their parents.

On the other hand, respondents who felt that a relative they cared for would probably care for them when they age further expressed discomfort over the possibility of a role reversal, in which they are now being supported instead of being the ones supporting their families. They fear being perceived as inefficient and parasitic. Changes in such social roles can often cause anxiety for aging persons (Brossoie 2009, 25).

Respondents who live alone experienced more emotional insecurity from having fewer options for support for when they age further, as most of their friends are also faced with the same challenges of aging or are preoccupied with other priorities. In cases of lesbian and gay older adults who have no contact with their relatives, exhaustion from working beyond retirement years for survival aggravated their fears. One respondent blamed himself for his family's rejection, which resulted to his homelessness. He shared feelings of regret over being irresponsible and defiant, when he was actually neglected by his family for being gay.

The longing to have a family of one's own led to feelings of not being entitled to love and care. Some older sexual minorities tend to overvalue the care they get from their families of origin, especially since many of them consistently had to win the acceptance of their families. Despite insecurity from the possibility that their families will not take care of them, some felt that they could only hope their families would, since they made sacrifices for those families in the past. They expressed gratitude for the conditional acceptance they received from their families despite their "unacceptable" sexuality. Some gay respondents even defended members of their families of origin saying that they were only angry at them for being gay because they worried about discrimination.

Apart from feelings of loneliness, it is not surprising that some respondents shared feelings of inadequacy and felt that they could have accomplished more in their careers. In several interviews, participants spoke of their accomplishments or shared their disappointment over their perceived lack of accomplishments. Some interviewees felt that success could have made up for their sexual minority identities, as well as given them security, coming from experienced utilitarian relationships among most respondents and their families.

Many interviewees also discussed their fears of death. Aside from the fear of dying without accomplishments, some also fear dying without any loved ones by their side, so they pray for dying ahead of those they love. Many of them hope for a quick death so that they would not be a burden to whoever volunteers to take care of them. One respondent felt that there may not be anyone willing to take care of her when she has physically deteriorated, despite having an adopted son whom she continues to support. Another respondent said that she has told her nieces and nephews to wrap her body in a mat and throw her into the river when she dies.

The ways in which the respondents spoke of death emphasized their feelings of insufficiency. Their sentiments showed how they feel unworthy of care. They have accepted having to live with a fate of loneliness because of how they have constantly tried to win acceptance and "compensate" for being a sexual minority. And now that they are aging and unable to do things they used to do for their families and peers, they are faced with whether or not they could still gain others' acceptance, which could determine the quality of support their families and peers will give them.

In addition, the respondents have lived in environments where they have had to be cautious with their expressions of gender. A strong religious and heteronormative culture has cultivated guilt in many of the respondents, rendering gay and lesbian identities "sinful," validating their perceived fates of loneliness deemed as a result of their being gay or lesbian.

While many of those who fit in a socially prescribed male and female mold have children to rely on when they age, most sexual minorities can only hope that family and friends they formed good relationships with would be reliable when they have weakened. Apart from actual changes brought by aging, most respondents experience fear and anxiety because of the uncertainty of who will actually care for them. As care and support are expressions of love, the uncertainty of not having them later in life hurts the overall satisfaction of people like the respondents of this study (Camic & McParland, 2016).

Conclusion and Recommendations

The situations of older sexual minorities surface experiences that are unique to them (Kimmel, 2014). Decades of discrimination based on SOGIE has caused many of them lifelong feelings of unworthiness, insecurity, and loneliness, as exemplified by experiences of the respondents. Because feelings of loneliness for the participants of

this study come from experiences of gender-based discrimination that caused their deprivation of the sense of belonging to a family, it is important to strengthen advocacies against the rigid heteronormative beliefs that stigmatize non-traditional and non-hetero family forms and its members. Strategic channels for building advocacy include local barangays, educational spaces, and health institutions, especially those which have existing mental health programs that could accommodate psychosocial needs of older sexual minorities.

Creating spaces for older sexual minorities where they can be comfortable with their gender and sexuality and meet others who experienced the same could help them overcome or prevent loneliness (Kimmel, 2014). Particularly for older adults, LGBT-friendly spaces located near their homes could provide them with a venue for socializing, which openly affirms their identities and where they can feel confident and empowered by a sense of belonging. Mental health practitioners could help manage such places as well as help raise awareness on the experiences of older sexual minorities. More importantly, offering counseling for families of older sexual minorities may help in repairing damaged relationships and may contribute to the life satisfaction of older sexual minorities. Partnerships with various LGBT organizations, as well as government and international institutions, could help build a network which could assist in providing less privileged sexual minorities with basic needs and counseling services to ensure their physical and mental well-being. LGBTfriendly religious spaces could also help erase the notion that they are "inferior" to heterosexual persons, since conventional religious beliefs often judge LGBT persons as practitioners of "sinful" behavior. Models of retirement homes that especially cater to LGBT older adult needs in other countries could be adopted to suit our local culture.

In addition, much more inquiry on the lives of LGBT older adults in the Philippines needs to be done to make visible many other issues they may face concerning their age, sexuality, and gender. As this study only featured a very small sample of ten older sexual minorities who had no opportunities to form their own culturally accepted families, it is worth looking at the experiences of those who were able to marry and have biological children. Further inquiry on other relationships that are important to aging gay and lesbian persons would also help

surface a variety of many other experiences that this study was unable to cover.

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