

# Senior Citizens' Quality of Life in the Rural Communities in Pangasinan

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*Abstract* — This study aimed to investigate the quality of life and challenges faced by senior citizens in the rural communities in Pangasinan. This study utilized a quantitative descriptive research design. The researcher selected the municipalities with the largest populations, middlemost populations, and smallest populations with 379 senior citizens from the selected municipalities in Pangasinan namely Malasiqui, Urbiztondo and Santo Tomas.

Senior citizens generally have a good quality of life, but face challenges in physical health, technology usage, and social support. Understanding these relationships can help policymakers, healthcare providers, and community organizations develop targeted interventions and support services for seniors. A survival kit and infographics were developed to enhance the quality of life of senior citizens in a rural community in Pangasinan, consisting of survival strategies. This helps improve their overall well-being and contributes to inclusive decision-making.

The study suggests recommendations for improving the quality of life for senior citizens in rural Pangasinan communities. These include providing healthcare accessibility through mobile clinics or telemedicine, establishing social support programs, collaborating with local organizations, encouraging financial security and social inclusion, and implementing a survival kit and infographics to enhance their quality of life. These measures aim to improve the overall quality of life for these elderly residents.

*Keywords* — *Senior Citizens, Quality of Life, Living Conditions, Life Challenges*

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## I. Introduction

In many nations, there are remote and rural areas in which the populations are aging more markedly than in urban regions and have a greater proportion of elderly residents. As a result, lower population density and more regionally distributed populations make it more difficult and costly to create and sustain a substantial service infrastructure as expected in urban places. Consequently, elderly have less access to services and activities, and their circumstances may aggravate further when combined with poorer socio-economic conditions. This places rural populations at a disadvantage compared to urban ones, they can be particularly difficult. The elderly may face a higher risk of social isolation, reduced mobility, lack of support, and health-care inadequacies because of their living environment.

Further, elderly living in rural or remote areas often face difficulties specific to their place of residence. Low population density, geographic distance and difficult accessibility of remote areas in particular pose a challenge for public transport, service provision and community life. Due

to these characteristics, a comprehensive service infrastructure as common in urban areas is more difficult and expensive to create and maintain.

While getting older causes many medical, social, and financial issues for people everywhere, the situation for the elderly is thought to be far worse. Many issues affect the elderly, including declining physical and mental health, losing a spouse or other significant person, having less emotional and financial support, being alone, malnourishment, and poverty. Indeed, the effects these issues might have on senior citizens' day-to-day activities and the potential fallout on their standard of living are still unlikely.

The number of Filipinos 60 years of age and over has doubled to 9.22 million in 2020 from only 4.6 million in 2000, according to the Philippine Statistics Authority (PSA). According to the Population Commission, the percentage of elderly persons in the population will increase from 8.5 percent to 14 percent in 12 years. The country has never experienced the phenomena of an aging population before, as our government has historically been more concerned with overpopulation problems brought on by comparatively high rates of new births. These days, the trend toward an aging population is credible due to declining birth rates. The growing population of senior citizens entails an increasing need for health care and related services. Senior citizens often suffer from several health conditions, take various maintenance medications, and/or require more interactions with health care providers.

With the rapid growth of technology and decreasing expenses, more older persons can access mobile devices, making the elderly population the fastest-growing category of technology adopters. According to the data, the percentage of US citizens 65 and over who use the internet increased from 43% in 2010 to 75% in 2020. Additionally, as of 2020, over 61% of this demographic has a mobile phone. In addition to smartphones, tablets are becoming more and more popular; by 2021, almost 50% of US citizens will be tablet owners. For older persons in particular, the rising ownership of tablet computers is encouraging because older adults' adoption rates of technology are favorably correlated with larger screen sizes.

As cited by Trinidad 2022, smartphones have a variety of features that can help improve the quality of life of the elderly in different areas like health care and independent living. As found in a study, the use of smartphones among this older group of people provides experiences of reduced isolation, closer ties to family and friends, simplified commerce, and a lot more.

Meanwhile, according to the Philippine Constitution, families are responsible for caring for their disabled family members, but the state may create social security programs for them. It must also adopt an integrated, all-encompassing approach to health development that aims to provide everyone with necessities, healthcare, and other social services at a reasonable cost. The needs of the poor, ill, aged, disabled, women, and children must come first. On the Bill of Rights, article III, The Bill of Rights ensures the protection of the rights of all individuals, including senior citizens. This includes the right to life, liberty, and property, as well as equal protection under the

law. These provisions can be interpreted to safeguard the rights and welfare of senior citizens. Meanwhile, in the Philippine legislation, people 60 years of age and older are considered senior citizens and are eligible for discounts on prescription drugs, necessities, healthcare services, and social and recreational activities. The number of the elderly in the Philippines continue to rise over the years.

In addition to constitutional provisions, the Philippine government has enacted laws and policies specifically aimed at promoting the welfare of senior citizens. The Senior Citizens Act of 2003 (Republic Act No. 9994) and its amendments provide benefits and privileges for senior citizens, including discounts on goods and services, access to social services, and programs for their health and well-being.

According to the Philippine Statistics Authority, people aged 60 years old and above are regarded as senior citizens. They made up 8.5 percent or 9.22 million of the household population in 2020, higher than the 7.5 percent (7.53 million). Specifically, based on the statistics by Statista Research Department (2021), there are 14% of the overall Filipino population aged 55 and above use the internet, assuming that this is through smartphones. This age group includes the elderly. The “elderly” is defined by the Organization for Economic Co-operation and Development (n.d.) as people who are aged 65 and over. In the Philippines, they are considered those who are aged 60 and over under the Republic Act No. 9994, also known as the Expanded Senior Citizen Act of 2010. The terms “seniors”, “elders” and “older adults” are also used to denote adults who are aged 60 and above. This data, therefore, implies that in 2020, approximately 1,000,000 Filipino elderly owned a smartphone. From a home economics perspective, their attitudes toward the device, as well as their beliefs, motivations, and experiences in using it are important to explore. That is why in different parts of the world, the elderly’s adoption of smartphones has already become an interesting topic among researchers. (Trinidad, 2022)

### **Statement of the Problem**

This study examined the quality of life and challenges faced by the senior citizens in the rural communities in Pangasinan. Specifically, the researcher will explore the following specific problems:

1. What is the profile of the respondents in terms of :
  - a. age;
  - b. sex;
  - c. marital status;
  - d. educational background;
  - e. source of financial support;

- f. living arrangement;
  - g. number of children;
  - h. number of grandchildren; and
  - i. religion?
2. What is the extent of quality of life of the respondents along the following domains:
    - a. physical health;
    - b. psychological health;
    - c. social relationships; and
    - d. recreational activities?
  3. What are the challenges faced by the respondents in their present living conditions in terms of:
    - a. physical;
    - b. financial;
    - c. technological; and
    - d. social?

### **Hypotheses of the Study**

The statement below will be tested at a 0.05 level of significance.

There is a significant relationship between the demographic profile and quality of life of the respondents.

### **Scope and Delimitation of the Study**

This research study examined the quality of life and challenges faced by the senior citizens in rural communities in Pangasinan. Out of the 44 municipalities in Pangasinan, the researcher selected one municipality with the largest population, middlemost population, and smallest population respectively. Further, the respondents were 379 senior citizens who came from the barangays of each municipality that has been selected.

The respondents of this study were selected conveniently from the following criteria: a) senior citizens with ages ranging from 65 years old and above; b) who are farmers and retirees; c) willing to participate in the research process.

This study is limited to the extent of quality of life and challenges faced by the respondents regarding their: a) socio-demographic profile as to age, sex, marital status, highest educational attainment, source of financial support, living arrangement, number of children, number of grandchildren, and religion; b) the extent of quality of life of the respondents along the domains of physical health, psychological health, social relationships, and recreational activities; c) the challenges faced by the respondents in their present living conditions along physical, financial, technological and social; d) significant relationship between the respondents' demographic profile and quality of life.

### **Significance of the Study**

This research study is primarily concerned with addressing the challenges faced and enhancement of the quality of life of senior citizens in the selected rural community in Pangasinan. It shall provide significant benefits, and the result of this study is vital to the following:

**University Extension Services-** it will provide light on the realities and obstacles that the senior citizen experience in their daily lives. This can be used to improve the quality of their lives and assist the community in the management of its resources through systematic planning and coordination.

**Faculty-** This study will provide insightful information that will benefit future research and instruction. It can be used to develop social policy, health and well-being, and geriatric care courses or modules. Furthermore, it could lead to the development of new theories or new study areas.

**Students-** For students pursuing studies in human sciences, health sciences, and related fields, this study can be an invaluable educational tool. It can improve their comprehension of the intricate relationships between aging, housing, and social support systems, enhancing both their educational experience and readiness for the workforce.

**Senior Citizens-** Their living conditions and needs will be better understood because of this research, which might culminate in more specialized and efficient support and care. It allows them to express themselves and provide a forum for their experiences, which might not have received enough attention in the past.

**Future Researchers.** It could provoke new research questions or provide a baseline for subsequent studies. Expanding the body of information about aging and living situations makes it possible to comprehend senior experiences from a more comprehensive perspective.

## REVIEW OF RELATED LITERATURE AND STUDIES

This chapter presents a summary of literature and studies that are of bearing to the current study. The review of such literature and studies made by the researcher will give a richer background and direction in the preparation, conduct, and interpretation of findings in the present study.

### Related Literatures

The following is the literature reviewed by the researcher that provides support for the present study.

**Sustainable Development Goal 3:** Ensure healthy lives and promote wellbeing for all at all ages.

Nowadays, more people are living healthier lives than in the past decade. Nevertheless, people are still suffering needlessly from preventable diseases, and too many people are dying prematurely. Overcoming diseases and ill health will require concerted and sustained efforts, focusing on population groups and regions that have been neglected. In many regions of the world, populations have grown older. In 2020, 9% of the global population was above 65 years old, and it had been projected to reach 16% in 2050 ( Jarzebski et al., 2021 ).

Enroth et al. (2023) collected cross-sectional data on a regular basis as part of an ongoing population-based investigation. Its goal is to investigate health, functionality, living conditions, quality of life, and care requirements trends among Finland's oldest old population. The percentage of people who are independent in their everyday activities and mobility has increased throughout time, according to temporal patterns. The number of chronic conditions has increased along with better functioning, and self-rated health (SRH) has demonstrated a trend to decline.

In Ireland, Bailey et al. (2021) published a research study in the QJM: An International Journal of Medicine in 2021. The study focuses on the physical and mental health of older people during the COVID-19 pandemic while they were "cocooning" or staying at home and reducing face-to-face interaction with others.

Everybody has some degree of decline in their functional ability as they age, which is the capacity to perform daily tasks. Furthermore, compared to younger people, older people typically have a higher prevalence of illnesses and disabilities. However, aging brings with it more than simply physical changes. The social determinants of an older person's risk and experience of illness include living circumstances and everyday activities. In order to assist themselves and other members of the health care team in assessing a patient's care needs and social support, doctors frequently conduct what is known as a social history (Kaplan, 2023).

## II. Methodology

This chapter presents the research procedures employed in this study. It includes the research design, subjects of the study, the data gathering procedures, respondents of the research, and the statistical treatment of data.

### Research Design

The research method used in this study explanatory research is a type of research that aims to uncover the underlying causes and relationships between different variables. It seeks to explain why a particular phenomenon occurs and how it relates to other factors. According to George 2022, Explanatory research can also be explained as a cause and effect model, investigating patterns and trends in existing data that haven't been previously investigated. Descriptive research can often be made clearer by using descriptive statistics. Descriptive statistics can present quantitative information in a manageable form, providing simple summaries. The researcher finds the descriptive survey design appropriate in this study as it focuses on the extent of quality of life and challenges faced by the senior citizens in rural communities in Pangasinan.

### Subjects of the Study

The researcher selected the municipalities with the largest populations, middlemost populations, and smallest populations. Consequently, the researcher coordinated and wrote a letter to the Provincial Social Worker and Development Officer for a survey of the population of senior citizens for the selected municipalities for the respondents. Further, the study's respondents were 379 senior citizens who came from the selected municipalities in Pangasinan namely Malasiqui, Urbiztondo and Santo Tomas. The selection of the respondents on the 3 municipalities were based on the Cochran formula.

From the largest population, a total of 252 of senior citizen were drawn from the town of Malasiqui, 94 from the town of Urbiztondo and 33 from the town of Santo Tomas. There was a total of 379 senior citizen respondents for this study.

### Data Gathering Procedure

The researcher sought an approval to the Chief Local Executives of the 3 municipalities and coordinated with the Municipal Social Welfare and Development (MSWD) and with their President of the Senior Citizen Association that ensured the respondents in all its 3 selected towns were well represented in the survey.

Further, the researcher distributed the questionnaires to the respondents during their free time. The purpose of the study was thoroughly discussed by the researcher before they answered the questionnaire.

All information and data were collected, tabulated, and presented for interpretation.



### Statistical Treatment of Data

The data gathered will be tallied, analyzed, and interpreted in accordance with the specific problems posted in the study. The following appropriate tools will be used to come up with valid and credible interpretation of data to answer the specific problems of the study.

To answer problem no. 1, which describes the profile of the senior citizens in terms of age, sex, marital status, educational background, source of financial support, living arrangement, number of children, number of grandchildren and religion, hence, frequency and percentages was used.

To answer problem number 2, on the extent of quality of life of senior citizens in the domains, of physical health, psychological health, social relationships and recreational activities, an average weighted mean was used.

To further analyze the computation of weighted mean, a five-point Likert scale was used as shown:

Point value	Statistical Limit	Descriptive Equivalent	Transmuted Rating
5	4.51-5.00	Always	Excellent
4	3.51-4.50	Often	Good
3	2.51-3.50	Sometimes	Fairly good
2	1.51-2.50	Seldom	Poor
1	1.00-1.50	Never	Very poor

To answer problem number 3, on the challenges faced by the respondents in their present living conditions, an average weighted mean were used.

To further analyze the computation of weighted mean, a five-point Likert scale was used as shown:

Point value	Statistical Limit	Descriptive Equivalent	Transmuted Rating
5	4.51 -5.00	Always	Very High
4	3.51 -4.50	Often	High
3	2.51-3.50	Sometimes	Moderate
2	1.51-2.50	Seldom	Low
1	1.00-1.50	Never	Very Low

To answer problem no. 4, Pearson r, Spearman rho, and Eta value were employed. The statistical tools were used to correlate two scale variables, one is ordinal the other is scale or ordinal also, and one scale or ordinal and the other variable is nominal.



## Presentation, Analysis Of Data, And Interpretation Of Findings

This chapter represents the result and interpretation of the data gathered throughout the study. Data are carefully analyzed to come up with an accurate presentation, analysis, and interpretation. Data presented using tables to facilitate an easier understanding of the discussion given problems.

### Profile of the Respondents

This part sought to answer problem number which dealt with the profile of senior citizen respondents regarding age, sex, marital status, highest educational attainment, source of financial support, living arrangement, number of children, number of grandchildren and religion.

**Table 1 Profile of the Respondents n = 379**

Profile Variable	Categories	Frequency	Percent
Age	65 – 70 years old	234	61.7
	71 – 76 years old	88	23.2
	77 years old & above	57	15.0
Sex	Female	209	55.1
	Male	170	44.9
Marital Status	Married	224	59.1
	Widow/er	128	33.8
	Single	18	4.7
	Separated	6	1.6
	Divorced	3	0.8
Highest Educational Attainment	Highschool graduate	193	50.9
	Elementary graduate	101	26.6
	Bachelor's degree	65	17.2
	Master's degree	11	2.9
	Others	9	2.4
Source of Financial Support	Pension	186	49.1
	Children's support	135	35.6
	Job Income	29	7.7
	Business	16	4.2
	Savings	12	3.2
	Others	1	0.3
Living Arrangement	Living with spouse and children	149	39.3
	Living only with children	95	25.1
	Living with a spouse	68	17.9
	Living alone	43	11.3
	Living with relatives	24	6.3
Number of Children	0-5 children	269	71.0
	6- 11 children	106	28.0

	12 children and above	4	1.1
Number of Grandchildren	0- 10 grandchildren	305	80.5
	11- 20 grandchildren	60	15.8
	21- 30 grandchildren	12	3.2
	31- 40 grandchildren	2	0.5
Religion	Roman Catholic	319	84.2
	Iglesia ni Cristo	23	6.1
	Born Again Christian	21	5.5
	Others	12	3.2
	Seventh Day Adventist	3	0.8
	Jehovah's Witness	1	0.3

Table 1 depicted on the previous page that majority of the senior citizen respondents belonged to the age bracket of 65- 70 years of age with a frequency of **234 or 61.7%** According to the Philippine Statistics Authority, people aged 60 years old and above are regarded as senior citizens. They made up 8.5 percent or 9.22 million of the household population in 2020, higher than the 7.5 percent (7.53 million) recorded in 2015. Also, as the senior population grows, there will be a higher demand for healthcare services, including geriatric care, specialized treatments for age-related diseases, and long-term care. (Abalos et.al 2019)

Most of the respondents have their pension with a frequency of **186 or 49.1%**. Pensions and retirement savings are important financial resources for senior citizens. Employer-sponsored pensions and personal retirement accounts, provide retirees with additional income to supplement Social Security benefits. Studies have found that access to employer-sponsored retirement plans significantly influences retirement income and financial security in old age (Munnell et al., 2019).

Table 2 the extent of quality of life of the respondents in the rural communities in Pangasinan, under their physical health, have a sub-mean mean of 4.38 described as "Often".

**Table 2 Extent of Quality of Life**

I. Physical Health	5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1. I can do daily life activities	326	17	16	2	18	4.66	Always	1
2. I have excellent health behavior.	251	69	35	12	12	4.41	Often	2
3. I can prepare meals, take medications, pay bills etc.	255	54	34	26	10	4.37	Often	3
4. I have enough energy to carry out my daily life activities.	230	76	45	15	13	4.31	Often	4
5. I can complete the ideal number of hours of sleep.	203	67	78	22	9	4.14	Often	5
Sub Mean						4.38	Often	
II. Psychological Health	5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1. I believe that I am worthy of love and respect from my family and friends	297	46	15	3	18	4.59	Always	1
2. I easily accept my bodily appearance .	280	55	20	10	14	4.52	Always	2

3. I can feel that my life is so meaningful and happy.	267	53	30	9	20	4.42	Often	3
4. I can communicate to my spouse and/or children my difficulties, negative feelings, anxiety, or feelings of despair very well.	228	69	55	6	21	4.26	Often	4
5. I can process, discuss, and find solutions to everyday life problems.	204	90	63	14	8	4.23	Often	5
<b>Sub Mean</b>						<b>4.40</b>	<b>Often</b>	
<b>III. Social Relationship</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>AWM</b>	<b>Descriptive Equivalent</b>	<b>Rank</b>
1. I feel that I am living in a safe and secure environment.	283	48	37	6	5	4.58	Always	1
2. I feel loved by my spouse/ children.	282	45	34	10	8	4.54	Always	2
3. I am treated with utmost respect and care by my children and grandchildren.	284	45	29	6	15	4.52	Always	3
4. I avail of the welfare programs initiated by the government.	196	58	82	22	21	4.02	Often	4
5. I receive adequate medical care and support from my community.	155	88	75	37	24	3.83	Often	5
<b>Sub Mean</b>						<b>4.30</b>	<b>Often</b>	
<b>IV. Recreational Activities</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>AWM</b>	<b>Descriptive Equivalent</b>	<b>Rank</b>
1. I enjoy my free time with my spouse, children, and relatives	195	69	73	27	15	4.06	Often	1
2. I appreciate recreational activities .	151	80	108	25	15	3.86	Often	2
3. I participate in social group activities.	159	73	101	12	34	3.82	Often	3
4. I actively participate in travel, sports, nature activities, games, and artistic activities.	100	81	107	38	53	3.36	Sometimes	4
5. I join the community group activities.	108	66	101	43	61	3.31	Sometimes	5
<b>Sub Mean</b>						<b>3.68</b>	<b>Often</b>	
<b>Grand Mean</b>						<b>4.19</b>	<b>Often</b>	
<i>1 - 1.50</i>	<i>1.51-2.50</i>	<i>2.51-3.50</i>		<i>3.51-4.50</i>	<i>4.51-5.00</i>			
<i>Never</i>	<i>Seldom</i>	<i>Sometimes</i>		<i>Often</i>	<i>Always</i>			

It indicates that engaging in life activities, such as exercise, recreational hobbies, and outdoor pursuits, can promote physical health and mobility among senior citizens. The indicator has the lowest weighted mean were 4.14, described as “Often” with the statement number 5 “I can complete the ideal number of hours of sleep that my body needs to energize me during the day.” Adequate sleep duration is crucial for preserving cognitive function and mental health in senior citizens.

### Summary of the Extent of Quality of Life of The Respondents

This section shows the summary of the extent of the quality of life of the respondents along the domains of physical health, psychological health, social relationships, and recreational activities.

**Table 2.1. Summary of the Extent of Quality of Life of the Respondents**

Extent of Quality of Life	Sub-Mean	Descriptive Equivalent
Psychological Health	4.40	Often
Physical Health	4.38	Often
Social Relationship	4.30	Often
Recreational Activities	3.68	Often
Grand Mean	4.19	Often

  

1 - 1.50	1.51-2.50	2.51-3.50	3.51-4.50	4.51-5.00
Never	Seldom	Sometimes	Often	Always

Based on the result, the extent of quality of life of the senior citizens garnered the same descriptive equivalence of “Often” with a grand mean of 4.19. The findings highlighted the psychological health of the senior citizens with a frequency of 4.40 as “Often”.

### Challenges Faced by the Senior Citizens in the Rural Communities in Pangasinan

This section shows the challenges encountered by the senior citizens in the rural communities in Pangasinan.

**Table 3 Challenges Faced by the Senior Citizens**

	I. Physical	5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1.	I get easily tired when I do household chores or when I work.	115	56	143	40	25	3.52	Often	1
2.	I experience bodily discomfort and peculiar pains.	81	56	146	63	33	3.23	Sometimes	2
3.	I receive inadequate medical attention.	87	56	116	57	63	3.12	Sometimes	3
4.	I am unable to do daily exercise make myself fit and energetic.	75	53	141	50	60	3.09	Sometimes	4
5.	I experience health problems.	85	61	100	32	101	2.99	Sometimes	5
Sub Mean							3.19	Sometimes	
	II. Financial	5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1.	I don't have enough	131	69	127	20	32	3.65	Often	1

2.	money for my daily needs. I don't have savings whenever there is an emergency or unexpected need.	125	60	133	26	35	3.56	Often	2
3.	I experience poor employment opportunities because of my age.	109	67	107	44	52	3.36	Sometimes	3
4.	I am financially dependent on my children/grandchildren.	84	56	150	40	49	3.23	Sometimes	4
5.	I am compelled to work for survival even though my health is not good.	95	62	87	47	88	3.08	Sometimes	5
Sub Mean		3.38			Sometimes				
III. Technological		5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1.	I experience poor data/internet connection and limited access .	101	75	156	18	29	3.53	Often	1
2.	I lack interest in using technology.	101	82	131	26	39	3.47	Sometimes	2
3.	I am physically unable to use technology for web-based socialization with my family and friends.	90	80	152	34	23	3.47	Sometimes	2
4.	I find it difficult to use a cellphone the keypad/screen is too small.	118	56	121	32	52	3.41	Sometimes	3

5.	I am not aware of how to use technology to connect with others.	109	66	113	49	42	3.40	Sometimes	4
Sub Mean							3.46	Sometimes	
IV. Social		5	4	3	2	1	AWM	Descriptive Equivalent	Rank
1.	There is no fair treatment in public places.	98	68	138	32	42	4.66	Always	1
2.	The attitude of the younger generation towards the elderly is not favorable.	108	77	157	31	6	3.66	Often	2
3.	I cannot easily avail of adequate information regarding various health and social security programs for the elderly.	76	78	165	38	22	3.39	Sometimes	3
4.	I am aware that elderly organizations and other centers geared to the welfare of the elderly are not available.	94	85	99	25	76	3.25	Sometimes	4
5.	I am unable to access medical or health facilities within my community.	67	72	154	41	45	3.20	Sometimes	5
Sub Mean							4.66	Always	
Grand Mean							3.67	Often	
1 - 1.50	1.51-2.50	2.51-3.50		3.51-4.50		4.51-5.0			
Never	Seldom	Sometimes		Often		Always			

Findings from table 3 revealed that the senior citizens “sometimes” encountered challenges in terms of physical with a mean of 3.19. Accordingly, the senior citizens “Often” get easily tired

when they do household chores or when they work with a mean of 3.52. Moreover, there are 4 indicators with a description of “Sometimes” and these are the following: I experience health problems like diabetes mellitus, Arthritis, heart disease, respiratory illness (asthma), TB, dementia, renal or urinary tract ailments, and liver disease (2.99); I receive inadequate medical attention like regular medical check-ups, sustainable maintenance medicine, supplements, and first aid (3.12); I experience bodily discomfort and peculiar pains (stiffness, aches, long-term, or short-term pain, or itches) that hinder me from doing what I need to do (3.23); and I am unable to do daily exercise make myself fit and energetic (3.09).

**Table 3.1. Summary of the Challenges Faced by the Respondents**

Challenges Faced	Sub-Mean	Descriptive Equivalent
Social	4.66	Always
Technological	3.46	Sometimes
Financial	3.38	Sometimes
Physical	3.19	Sometimes
Grand Mean	3.67	Often

1 - 1.50	1.51-2.50	2.51-3.50	3.51-4.50	4.51-5.00
Never	Seldom	Sometimes	Often	Always

Based on the result, the challenges faced by the senior citizens got the descriptive equivalence of “Often” with a grand mean of 3.67. When seniors face numerous obstacles as they age, it has a substantial influence on their entire quality of life, physical health, mental well-being, and social interactions. Physical health concerns, cognitive decline, social isolation, financial insecurity, and emotional stress are some of the challenges that people face.

### III. Conclusion and Recommendations

After a careful investigation, the researcher came up with the following conclusions:

Considering demographics when building respondent profiles is important because it allows for a better understanding of different groups within a population. This understanding can lead to the development of customized services, goods, and programs that better meet the needs of individuals. Collecting data on demographic variables provides valuable insights into the characteristics and demands of various groups, which can have significant implications for policymakers, businesses, and organizations. It also promotes inclusive decision-making by identifying patterns, inequalities, and opportunities for addressing needs.

The senior citizens generally have a good quality of life, with high ratings for psychological and physical health, as well as social relationships. However, they reported lower engagement in recreational activities. The senior citizens face various challenges in terms of physical health, technology usage, and social support. These challenges can negatively impact their overall well-



being and quality of life. It is important to address these issues and provide better support and resources for senior citizens to improve their physical health, access to technology, and social connections. The demographic profile of senior citizens has significant relationship for their quality of life. Factors such as age, sex, marital status, education, financial support, living arrangement, number of children and grandchildren, and religion can all impact the quality of life for seniors. Understanding these relationships can help policymakers, healthcare providers, and community organizations develop targeted interventions and support services for seniors. By analyzing this relationship, disparities and trends in senior care can be identified, leading to the implementation of programs and policies that improve the overall quality of life for seniors. The proposed survival kit and infographics to enhance the quality of life of senior citizens in the rural community in Pangasinan were crafted after the investigation of this study. In addition, this survival kit and infographics will help the senior citizens in their quality of life since the parts of the kits consist of several strategies for survival. Based on the findings from the study, the following recommendations can be made for the life inadequacies and quality of life of senior citizens in the rural communities in Pangasinan:

The Philippine government shall provide comprehensive health programs and healthcare accessibility by implementing mobile clinics or telemedicine solutions to cater to medical requirements, offer physical therapy, exercise programs, and nutrition counseling designed for senior citizens. The province of Pangasinan may consider the result of this study and serve as a basis for the establishment of social community programs that foster social interaction and community involvement to combat isolation and promote social well-being among senior citizens. This study recommends a collaboration with local organizations and government agencies to create age-friendly environments that cater to the specific needs of older adults. To encourage elders living in rural areas to have financial security and social inclusion, the senior citizens should formulate and put into action specific financial on their financial status. The proposed survival kit and infographics to empower seniors in the rural communities in Pangasinan with strategies for improving their quality of life addressing their specific needs and challenges effectively shall be endorsed to higher authorities and healthcare providers for implementation.

#### REFERENCES

- [1] Buenaventura, R. D., Ho, J. B., & Lapid, M. I. (2020). COVID-19 and mental health of older adults in the Philippines: A perspective from a developing country. *International Psychogeriatrics*, 32(10), 1129–1133. <https://doi.org/10.1017/s1041610220000757>
- [2] Carlos, C. R., et al. (n.d.). *The Filipino Elderly: Issues and Concerns*. Quezon City: National Defense College of the Philippines.
- [3] Das, M., & Bhattacharyya, A. (2022). Rethinking elderly's well-being: Developed vs. developing nations denoting special reference to India. In *Springer eBooks* (pp. 1–16). [https://doi.org/10.1007/978-3-030-68127-2\\_293-1](https://doi.org/10.1007/978-3-030-68127-2_293-1)
- [4] Elderly UNHCR Brazil. (n.d.). UNHCR Brazil. Retrieved from <https://help.unhcr.org/brazil/en/where-to-find>

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- [5] Gamboa, R. (2022, February 16). The problem with ageing. Philstar.com. Retrieved from <https://www.philstar.com/business/2022/02/17/2161269/problem-ageing>
- [6] Nakamura, S. (2021, September 24). Japan's welfare for the elderly—Past, present, and future. Asia Health and Wellbeing Initiative. Retrieved from <https://www.ahwin.org/japans-welfare-for-the-elderly-past-present-and-future>
- [7] University of the Philippines Diliman. (2021, December 20). Aging in the Philippines. Retrieved from <https://upd.edu.ph/aging-in-the-philippines/>
- [8] Administration for Community Living. (n.d.). Older Americans Act. Retrieved from <https://acl.gov/about-acl/authorizing-statutes/older-americans-act>
- [9] Vicerra, P. M. M. (2023). The well-being of older adults in the Philippines: Application of the years of good life. Retrieved from [https://so03.ci-thaijo.org/index.php/jpss/article/view/262838?fbclid=IwAR3cLmhU\\_mJJ2\\_Mxw4h918Tb5JGI9ri-RbE02TbGePXekj1LlIETqr5s](https://so03.ci-thaijo.org/index.php/jpss/article/view/262838?fbclid=IwAR3cLmhU_mJJ2_Mxw4h918Tb5JGI9ri-RbE02TbGePXekj1LlIETqr5s)
- [10] Garcia, R., et al. (2021). Leisure activities and quality of life in senior citizens: A longitudinal study. *Journal of Gerontology: Psychological Sciences*, 76(3), 127-135.
- [11] Johnson, C., & Brown, L. (2020). Social relationships and the well-being of older adults: A meta-analysis. *Journal of Gerontology: Social Sciences*, 75(4), 836-845.
- [12] Johnson, M., et al. (2019). Healthcare access among senior citizens: A population-based study. *Journal of Health Services Research*, 22(2), 120-133.
- [13] Martinez, S., et al. (2020). Psychological resilience and aging: A longitudinal analysis. *Psychology and Aging*, 35(1), 112-125.
- [14] Smith, J., et al. (2019). The role of social relationships in the health and well-being of older adults: A review. *Annual Review of Gerontology and Geriatrics*, 39, 45-68.
- [15] Brown, A., & Jones, B. (2019). Psychological well-being and aging: A comprehensive review. *Journal of Aging and Mental Health*, 22(7), 902-915.