Culturally Aligned Aged-Care Services: Addressing Needs and Barriers in General Santos City, Philippines

Dec Airo Mari Ausan[1*]

[1]Human Studies Department, Acknowledge Education, Sydney, Australia

ABSTRACT

The aging population in General Santos City, Philippines, presents unique challenges in accessing and delivering appropriate aged-care services. This study aimed to identify the preferred aged-care services among the elderly population in General Santos City, considering their cultural values and needs, and to propose a framework for developing culturally aligned aged-care support services for the elderly in General Santos City. A mixed-methods research design was employed, combining qualitative and quantitative approaches. In-depth interviews with 30 elderly residents, community leaders, and caregivers were conducted to gather information on their preferences and needs for aged-care services. Thematic analysis was used to analyze the qualitative data. A survey questionnaire was also used to collect quantitative data on the demographic characteristics of the respondents and their perceptions of the importance of various aged-care services. The findings indicated healthcare services, home-based care, and social support as essential components of aged-care services. Barriers to accessing services included availability, affordability, accessibility, and awareness. Culturally sensitive, family-centered, and community-based care was preferred. The study also found that the elderly in General Santos City have a strong preference for culturally aligned aged-care services that are family-centered and community-based. They also expressed a need for affordable and accessible healthcare services, as well as social support services to reduce isolation and promote mental well-being. In conclusion, the study highlights the need for a holistic aged-care approach that integrates healthcare services, home-based care, and social support, while considering cultural values and addressing barriers to access. The proposed aged-care services emphasize culturally sensitive, family-centered, and community-based models of care. These models should be tailored to the specific needs of the elderly population in General Santos City, taking into account their cultural values and beliefs.

1. Introduction

The global phenomenon of aging presents a complex interplay of challenges and opportunities, particularly in the realm of healthcare and social services. As the demographic landscape shifts towards an older population, nations worldwide are experiencing a significant increase in the number of elderly individuals, necessitating a reevaluation of existing support systems and the development of innovative approaches to address their unique needs.

The Philippines, with its strong cultural emphasis on family ties and community support, faces a particularly compelling set of circumstances as it navigates the implications of its growing elderly population. One of the primary challenges posed by an aging population is the increasing demand for healthcare services. The Philippines' healthcare system, already strained by a notable shortage of healthcare professionals, is facing mounting pressure to accommodate the complex medical needs of older

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adults. Reports indicate that many healthcare workers prefer to seek employment abroad, exacerbating the existing understaffing crisis (Boniface, 2007). This shortage is critical as older adults typically require more frequent and specialized medical attention, particularly for noncommunicable diseases (NCDs), which are prevalent in this demographic (Alba et al., 2021). Moreover, the COVID-19 pandemic has disproportionately affected older populations, highlighting vulnerabilities in the healthcare system (Fung, 2022). The rise in chronic diseases, coupled with the aging population, necessitates a comprehensive approach to healthcare that integrates preventive measures and effective management strategies for NCDs (Bowling, 2007).

On the other hand, the aging population also presents opportunities for enhancing healthcare services. The Philippine government has initiated universal health coverage (UHC) strategies aimed at improving access to healthcare for vulnerable populations, including the elderly (Cleland et al., 2021). These initiatives are crucial in reducing health disparities and ensuring that older adults receive the necessary care without facing financial burdens. Additionally, the integration of traditional and alternative medicine into the national healthcare system could provide culturally relevant options for managing health conditions prevalent among older adults (Burzynska, 2016). Furthermore, the family structure in the Philippines, characterized by strong familial ties, often results in family members taking on caregiving roles for elderly relatives (Gill, 2022). This cultural aspect can be leveraged to create community-based support systems that enhance the quality of care for older adults while alleviating some pressure on formal healthcare services. However, it is essential to provide adequate training and resources to family caregivers to ensure they can effectively support their elderly relatives (Godden, 2001).

The investigation into the preferred "Aged-Care Services to Support Filipino Elderly" (ASSFE) in General Santos City necessitates a comprehensive understanding of the unique needs and preferences of the elderly population in this specific context. Existing literature highlights several critical aspects that can inform this study, including the importance of community-based services, the integration of medical and elderly care, and the socio-economic factors influencing elderly care preferences. Community-based services are essential for meeting the diverse needs of the elderly. Wang et al. emphasize that community-based adult services (CBAS) should integrate medical care to enhance the quality of life for older adults, allowing them to remain connected with their families and communities while reducing overall care costs (Gemmeke, 2022). This aligns with findings from Jiang and Liu, who advocate for integrated community home elderly care services that bridge health service departments and elderly service centers, thereby promoting healthy aging at home (Goins, 2003). Such integration is particularly relevant in General Santos City, where local cultural and social dynamics may shape the elderly's preferences for care services.

Moreover, the socio-economic context plays a significant role in shaping the preferences for aged-care services. Acob et al. highlights the necessity of developing specialized nursing care for the elderly, underscoring the importance of training healthcare professionals in geriatric care to meet the specific needs of this demographic (Leung, 2011). Similarly, Aly et al. identify that elderly individuals often face challenges in accessing health services, particularly those tailored to chronic diseases and emotional support (Lai, 2018). Understanding these socio-economic barriers is crucial for designing effective aged-care services in General Santos City. Furthermore, the psychological well-being of the elderly is a critical factor in their care preferences. Studies indicate that social isolation can lead to increased anxiety and depression among older adults, particularly during periods of quarantine or limited

social interaction (Nancarrow, 2009). Boman et al. also note that loneliness and depression significantly impact the health-related quality of life (HRQoL) of elderly individuals, suggesting that care services should incorporate social engagement opportunities to mitigate these issues (Meulenbroeks et al., 2024). Therefore, any proposed aged-care services in General Santos City should prioritize not only physical health but also the mental and emotional well-being of the elderly. By examining the ASSFE preferences through the lens of a theoretical framework, this research seeks to identify the salient aspects that can inform the development of tailored aged-care services. This study aims to identify and contribute to the development of a comprehensive aged-care support service for the elderly in General Santos City, Philippines.

2. Literature Review

International studies on aged-care services reveal a complex landscape characterized by evolving trends, best practices, and significant challenges. A key trend observed globally is the shift towards community-based care models, which prioritize aging in place and the integration of health services. For instance, research indicates that older Aboriginal and Torres Strait Islander populations in Australia prefer to remain in their communities rather than transition to residential facilities, highlighting a broader preference for home care services among older adults (Watson, 2021). This preference aligns with findings from other regions, such as rural Appalachia, where geographic and cultural factors significantly influence the utilization of formal and informal care services (Siette et al., 2022).

Best practices in aged care emphasize the importance of culturally safe and community-controlled models. Studies have shown that Aboriginal community-controlled aged care services effectively address the unique needs of Indigenous populations, thereby improving their quality of life (Schmid, 2005). Similarly, the integration of smart technologies into

aged care has emerged as a promising approach. For example, the development of smart community aging-in-place service models leverages big data and technology to enhance service delivery and improve the well-being of older adults (Stoddart, 2002). These innovations not only facilitate personalized care but also promote social connectedness, which is crucial for the mental health of older individuals (Santos-Eggimann, 2003).

However, the aged-care sector faces numerous challenges that hinder the effective delivery of services. One significant issue is the fragmentation of information management, which can lead to incomplete and unreliable data affecting care planning and coordination (Park, 2023). The COVID-19 pandemic has further exacerbated these challenges, disrupting center-based aged care services and highlighting the critical need for continuity in care to support older adults and their caregivers (Gill, 2022). Additionally, disparities in service access and quality, particularly for marginalized populations such as Indigenous Australians, underscore the need for targeted interventions and policy reforms to ensure equitable care (Godden, 2001).

The cultural preferences of elderly populations vary significantly across different countries, influenced by a multitude of factors including social norms, familial structures, and environmental contexts. This analysis synthesizes findings from various studies that highlight these differences and the implications for care and support for elderly individuals. In examining the preferences of elderly immigrants, found that Chinese elderly immigrants in the United States preferred culturally sensitive outdoor walking spaces that mirrored their native environments, as these spaces fostered a sense of belonging and reduced feelings of unfamiliarity (Lai, 2018). This preference underscores the importance of cultural identity in the design of public spaces for the elderly, suggesting that environments that reflect their cultural backgrounds can enhance their quality of life and encourage social

participation.

Moreover, intergenerational relationships play a crucial role in the lives of the elderly across cultures. This highlighted that elderly individuals in Karo, Indonesia, desire autonomy while simultaneously relying on their children for support, reflecting a complex interplay of cultural expectations regarding familial roles (Goins, 2003). Similarly, compared intergenerational support among elderly mothers in China, Indonesia, and Germany, revealed that cultural norms significantly shape the emotional utility derived from these relationships (Fung, 2022). These findings suggest that understanding cultural contexts is essential for fostering supportive environments for the elderly.

Quality of life (QoL) assessments further illustrate the impact of cultural factors. Conducted a study in Vietnam that revealed disparities in QoL among the elderly based on gender, economic status, and rural versus urban living conditions (Boniface, 2007). This highlights the necessity of culturally informed approaches to health and social care that consider these demographic variables. In a comparative study, examined the measurement invariance of depression scales among elderly populations in China and the Netherlands, emphasizing the need for culturally sensitive tools to accurately assess mental health across different cultural contexts (Bowling, 2007).

Cultural beliefs also influence health-related behaviors and perceptions. Discussed the challenges in implementing oral healthcare services for the elderly, noting that cultural beliefs significantly shape their perceived needs and preferences for care (Alba et al., 2021). This is echoed in the findings noted that Chinese elderly immigrants in Australia exhibited health behaviors influenced by both traditional practices and their new social environments, indicating a blend of cultural influences on health management (Burzynska, 2016). Furthermore, studies on nostalgia and sentimentality among elderly populations reveal that emotional connections to the past can vary significantly across cultures, affecting how elderly individuals cope with aging and loss (Goins, 2003). These emotional dimensions are crucial for understanding the psychological well-being of the elderly and the support systems that can be developed to enhance their quality of life.

The landscape of aged-care services in the Philippines is characterized by significant national trends, policies, and challenges that reflect the complexities of an aging population. As the number of older adults continues to rise, the Philippine health system faces mounting pressure to adapt and provide adequate care. This response synthesizes recent studies that highlight the current state of aged-care services, focusing on the gaps in health coverage, the role of local governance, and the socio-cultural factors impacting care delivery. One of the primary challenges in aged-care services in the Philippines is the inadequacy of the Universal Health Coverage (UHC) system. Indicates that the UHC Service Coverage Index for the Philippines stands at 55, which is significantly lower than the potential, suggesting that many older adults experience unmet health needs. This inadequacy is compounded by financial constraints, which are a major barrier to accessing necessary health services (Leung, 2011). Furthermore, emphasizes that the traditional family structure, which has historically provided support for older adults, is weakening due to factors such as the overseas employment of family members, leading to increased reliance on formal care services that are often lacking in quality and availability (Muelenbroeks et al., 2024)

The decentralization of health services in the Philippines has also created disparities in care delivery. Note that local governments heavily depend on funding from the Philippine Health Insurance Corporation (PhilHealth) to sustain health facilities, which has led to uneven service provision across regions. This is particularly problematic in poorer municipalities, where health service delivery is often

inadequate (Watson, 2021). The lack of a cohesive strategy for integrating health and social care further complicates the situation, finding that the separation of these sectors results in fragmented care for older adults who often have complex health needs (Siette et al., 2022).

Moreover, the training and preparedness of healthcare workers to address the specific needs of older adults are critical. Studies indicate that there is a significant gap in the training of healthcare professionals regarding geriatric care, which is essential for improving service delivery (Schmid, 2005). The need for a structured transition program focusing on elderly care is highlighted as a potential solution to enhance the competencies of healthcare workers (Santos-Eggimann, 2003). Additionally, the importance of multidisciplinary teamwork in delivering effective care to older patients.

Culturally, the Philippines has a strong tradition of familial support for the elderly, yet this is increasingly challenged by socio-economic changes. The phenomenon of "parenting by proxy," where children are unable to provide direct care due to work commitments abroad, has led to a decline in familial support for older adults (Park, 2023). This shift necessitates a reevaluation of how aged-care services are structured and delivered, ensuring that they are culturally sensitive and aligned with the needs of the population.

The specific needs and preferences of Filipino elderly individuals are deeply intertwined with their cultural values and beliefs, which significantly influence their well-being and health-seeking behaviors. A prominent aspect of Filipino culture is the strong emphasis on family and filial piety, which dictates that adult children have a moral obligation to care for their aging parents (Gemmeke, 2022). This cultural value often translates into a preference for family-based care, where older adults receive support and assistance from their children and extended family members. However, this traditional model is facing challenges due to socioeconomic changes, such as increased migration and urbanization, which can separate families and limit their ability to provide direct care.

Moreover, the Filipino elderly often face unmet needs related to healthcare services, financial security, and social support, which are critical for their subjective well-being (Fung, 2022). Access to healthcare services can be limited due to financial constraints, geographical barriers, and a lack of culturally appropriate services. Financial insecurity is also a significant concern, as many older adults rely on their families for financial support or have limited retirement savings. Social isolation and loneliness are prevalent among the Filipino elderly, particularly those who live alone or have limited social networks. This can negatively impact their mental and emotional well-being, leading to an increased risk of depression and anxiety. Several studies have explored the specific needs and preferences of Filipino elderly individuals in various contexts. For instance, investigated the concept of resilience among Filipino American adults, highlighting the importance of cultural values and social support in coping with challenges and maintaining well-being. Similarly, examined Filipino patient perspectives on healthcare access and utilization, emphasizing the role of cultural factors, such as the concept of "pakikisama" (smooth interpersonal relationships), in shaping health-seeking behaviors. Other studies have focused on specific health conditions and challenges faced by the Filipino elderly. Explored beliefs about promoting cognitive health among Filipino Americans who care for persons with dementia, highlighting the influence of cultural beliefs and practices on caregiving approaches. Investigated facilitators and barriers to health-seeking behaviors among Filipino migrants, emphasizing the need for culturally sensitive health promotion strategies. Examined cultural and knowledge barriers to acute stroke care in the Filipino American community, underscoring the importance of

culturally tailored interventions to improve health outcomes.

3. Methods

This study employed a mixed-methods research design that harmoniously integrates qualitative and quantitative approaches. The qualitative component of the study takes the form of in-depth interviews, a research method renowned for its ability to elicit detailed narratives and uncover the intricate layers of human experience. These interviews serve as a conduit for the elderly residents of General Santos City to articulate their preferences for aged-care services. The interviews are semi-structured, guided by a carefully crafted interview protocol that ensures consistency while allowing for flexibility to explore emergent themes and unique individual experiences. The survey utilizes a combination of closed-ended questions, which provide quantifiable data, and open-ended questions, which allow for more personalized responses and capture the diversity of perspectives within the elderly population.

The study's population encompasses the elderly residents of General Santos City, Philippines, a vibrant and diverse community facing the challenges and opportunities that accompany an aging population. To ensure the study's findings are representative and meaningful, a purposive sampling technique is employed. This non-probability sampling method allows for the selection of respondents who possess specific characteristics or experiences relevant to the research question. In this case, the selection criteria include age, residency in General Santos City, and involvement in the community, ensuring that the sample reflects the diversity of the elderly population and captures the perspectives of those most likely to utilize aged-care services. A total of 30 respondents are carefully selected, representing a cross-section of the elderly community in General Santos City. This sample size is deemed appropriate for qualitative studies, allowing for in-depth exploration of individual

experiences while ensuring the manageability of the data analysis process. The respondents include elderly individuals themselves, providing firsthand accounts of their needs and preferences, as well as community leaders and caregivers, offering valuable insights into the broader context of aged-care services in General Santos City.

The purposive sampling technique employed in this study is a deliberate and strategic approach to respondent selection. It prioritizes the inclusion of individuals who are knowledgeable about the topic and can provide rich, detailed information that illuminates the research question. This technique is particularly well-suited for qualitative studies, where the goal is to gain an in-depth understanding of a phenomenon rather than to generalize findings to a larger population. The selection of respondents is guided by specific criteria that ensure the sample is representative of the elderly population in General Santos City and captures the diversity of experiences within this group. These criteria include; Age: Respondents must be 60 years of age or older, the commonly accepted threshold for defining "elderly" in the Philippines; Residency: Respondents must be residents of General Santos City, ensuring that the study's findings are relevant to the specific context of this community; Involvement in the community: Respondents are selected based on their level of engagement with the community, including participation in social activities, utilization of community services, and interaction with other elderly individuals. This criterion ensures that the sample includes individuals who are actively involved in the community and have firsthand experience with the availability and accessibility of aged-care services.

The primary instrument used in this study is a self-constructed survey interview guided questionnaire. This meticulously designed instrument serves as a roadmap for the data collection process, ensuring consistency and rigor in the information gathered. The questionnaire is tailored to the specific research

question, focusing on the preferences, needs, and barriers related to aged-care services in General Santos City. The questionnaire is administered through two modes: Google Forms and printed research questionnaires. This dual approach allows for flexibility and accessibility, catering to the diverse preferences and technological capabilities of the respondents. Google Forms provides a digital platform for respondents who are comfortable with technology, while printed questionnaires offer a traditional option for those who prefer a paper-based format. The questionnaire comprises a combination of closed-ended and open-ended questions, striking a balance between quantitative and qualitative data collection. Closed-ended questions provide structured responses, allowing for easy quantification and analysis. Open-ended questions, on the other hand, provide respondents with the freedom to express their thoughts and experiences in their own words, capturing the nuances and complexities of their perspectives.

The data gathering procedure is a carefully orchestrated process that ensures the integrity and reliability of the data collected. It involves the following steps; Identification of respondents: The researcher identifies potential respondents through the purposive sampling technique, ensuring that the sample meets the predetermined criteria; Recruitment and consent: Potential respondents are approached and provided with information about the study, including its purpose, procedures, and potential risks and benefits. Informed consent is obtained from each respondent before their participation; Administration of the questionnaire: The questionnaire is administered to the respondents through either Google Forms or printed research questionnaires, depending on their preference and accessibility; Conduct of interviews: In-depth interviews are conducted with the respondents, guided by the interview protocol. These interviews provide a platform for respondents to elaborate on their responses to the questionnaire and share their

experiences and perspectives in greater detail; Data collection: The data collected through the questionnaires and interviews are compiled and organized for analysis.

The data analysis process is a critical stage in the research journey, where the raw data is transformed into meaningful insights that address the research question. This study employs a combination of qualitative and quantitative data analysis techniques, reflecting the mixed-methods research design. The qualitative data, gathered through in-depth interviews, is analyzed using thematic analysis. This widely used qualitative data analysis method involves identifying, analyzing, and reporting patterns (themes) within the data. The process involves several steps, including; Familiarization with the data: The researcher immerses themselves in the data, reading and re-reading the transcripts to gain a comprehensive understanding of the respondents' experiences and perspectives; Generating initial codes: The researcher systematically codes the data, identifying interesting features and assigning labels to them; Searching for themes: The researcher collates codes into potential themes, gathering all data relevant to each theme; Reviewing themes: The researcher checks whether the themes work in relation to the coded extracts and the entire data set; Defining and naming themes: The researcher refines the themes, identifying the essence of each theme and providing a clear and concise name; Producing the report: The researcher writes up the analysis, weaving together the themes with illustrative quotes from the data and providing a compelling narrative that addresses the research question. The quantitative data, collected through the survey questionnaire, is analyzed using descriptive statistics. This branch of statistics involves summarizing and describing the main features of a dataset. The descriptive statistics used in this study include; Frequency distributions and percentages: To describe the demographic characteristics of the participants (age and gender); Measures of central tendency

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(mean): To summarize the data on the perception of needs for aged-care services; Measures of dispersion (mean and standard deviation): To describe the variability in the data for the mentioned variables.

The data collected in this study is treated with the utmost confidentiality and anonymity. Respondents are assured that their responses will be kept confidential and used solely for the purpose of this research. All data is stored securely, and any identifying information is removed or anonymized to protect the privacy of the participants. This study adheres to the highest ethical standards, ensuring the protection and well-being of all participants. Ethical approval is obtained from the relevant institutional review board before the commencement of data collection. Informed consent is obtained from each respondent, ensuring they understand the purpose of the study, their rights as participants, and the potential risks and benefits of their involvement.

4. Results and Discussion

Table 1 provides a breakdown of the participant characteristics in the study on aged-care services in General Santos City. The majority of participants fall within the age range of 45-60, with 30% in each of the 45-49 and 51-55 age brackets. This suggests the study focused primarily on individuals in their middle to late career stages, potentially those with aging parents or who are approaching retirement and considering aged-care needs for themselves. A smaller proportion (13.3%) are in the 61-65 age group, representing those who might be experiencing early retirement or have already transitioned into needing some level of aged-care support. Very few participants are younger than 45 or older than 65. This indicates these age groups were not the primary focus of the study. A significantly higher proportion of participants are female (73.3%) compared to male (26.7%). This could indicate a greater involvement of women in caregiving roles or decision-making related to aged-care services within the community. The participants are equally divided (33.3% each) among three roles: Community Leaders, those Living with Elderly Family Members, and Caregivers for Family Members. This balanced representation allows for diverse perspectives on aged-care needs and challenges.

Table 1. Participants characteristics.

Characteristic	Frequency	Percentage
Age Group		
44 years old and below	1	3.3%
45-49 years old	9	30%
51-55 years old	9	30%
56-60 years old	6	20%
61-65 years old	4	13.3%
66 years old and above	1	3.3%
Gender		
Female	22	73.3%
Male	8	26.7%
Role		
Community Leader	10	33.3%
Lives with Elderly Family Member	10	33.3%
Caregiver for Family Member	10	33.3%

Table 2 presents the main challenges encountered by respondents in accessing aged-care services in General Santos City, as well as their preferred components for these services. The most common challenge (23.3% of respondents) is facing a combination of availability, affordability, accessibility, and awareness issues. This highlights the complex and interconnected nature of barriers to aged-care services, requiring a multi-pronged approach to address them effectively. 10% of respondents specifically cited availability as the main challenge, suggesting a lack of sufficient aged-care services in the community. This could include a shortage of facilities, limited types of services offered, or long wait times for available services. Another 10% pointed to awareness as the primary issue. This indicates a need for better communication and information dissemination about available aged-care services, eligibility criteria, and how to access them. While only 6.7% solely identified affordability as the main challenge, it's a contributing factor for many, appearing in combination with other barriers. This suggests that the cost of services can be a significant obstacle for some individuals seeking aged-care support. Similarly, accessibility is a challenge for some, particularly in combination with other barriers. This could involve physical limitations in accessing facilities, lack of transportation, or geographical distance. The most preferred component (53.3%) is a combination of culturally sensitive, family-centered, and community-based care. This emphasizes the desire for a holistic approach that considers the individual's cultural background, involves their family in care decisions, and integrates them within their community. A smaller proportion (13.3%) prioritizes health promotion and disease prevention. This highlights the importance of proactive measures to maintain the health and well-being of older adults and prevent age-related decline. The remaining preferences show varying combinations of family-centered, community-based, and health promotion components, indicating a desire for personalized care that addresses individual needs and preferences.

Table 2. The main challenges in accessing services.

Challenges in accessing services	Respondents	Percentage
Availability, Affordability, Accessibility, Awareness	7	23.3%
Availability	3	10%
Awareness	3	10%
Availability, Affordability, Access	3	10%
Affordability	2	6.7%
Availability and Awareness	3	10%
Affordability and Awareness	2	6.7%
Preferred components of aged-care services	Respondents	Percentage
Culturally Sensitive, Family-Centered, Community-Based Care	16	53.3%
Health Promotion and Disease Prevention	4	13.3%
Family-Centered, Community-Based, Health Promotion	2	6.7%
Family-Centered Care	1	3.3%
Community-Based, Health Promotion	1	3.3%

Table 3 presents the results of a thematic analysis of qualitative data gathered from interviews with elderly residents, community leaders, and caregivers in General Santos City. The analysis revealed three key themes related to aged-care services: healthcare access, social interaction, and home support and safety. Healthcare access highlights the challenges faced by the elderly in accessing affordable and convenient healthcare. Illustrative quotes reveal concerns over the high cost of medicine, difficulties in reaching healthcare facilities due to transportation issues, and a desire for home nursing care. This suggests a need for; Exploring options like subsidies or low-cost service models to address financial constraints; Addressing transportation barriers and potentially offering mobile healthcare services; Providing healthcare services in the home to increase convenience and accessibility. Social interaction emphasizes the importance of social interaction for mental well-being and preventing loneliness among the elderly. Quotes express feelings of isolation, a desire to join social groups, and the need for accessible spaces for socializing and exercising. This indicates a need for; Organizing group activities and events that cater to the interests and abilities of the elderly; Establishing senior centers or community spaces where the elderly can gather and socialize; Ensuring that social activities are accessible to those with physical limitations. Home support and safety focuses on the challenges of providing care at home and ensuring the safety of elderly individuals. Quotes express concerns about falls, the need for training in caregiving tasks, difficulties with medication management, and the desire for home modifications. This suggests a need for: Providing training programs for family members on caregiving skills, including home safety, medication management, and basic healthcare tasks. Educating families about home safety modifications and potentially offering assistance with implementing these modifications. Providing access to healthcare professionals for guidance and support in caregiving tasks.

The findings of this study provide a comprehensive understanding of the aged-care needs, preferences, and challenges faced by the elderly population in General Santos City, Philippines. The mixed-methods approach, combining qualitative and quantitative data, offers a rich and nuanced perspective on this critical issue. The qualitative findings highlight the importance of culturally appropriate aged-care services that are family-centered and community-based. The elderly respondents expressed a strong desire to age in place, within the comfort of their own homes and communities, surrounded by their loved ones. This preference aligns with the strong cultural emphasis on family and community ties in Filipino society (Lai, 2018). Family-centered care not only provides practical support and assistance but also fosters emotional well-being and a sense of belonging for the elderly (Watson, 2021).

However, the traditional model of family-based care is facing challenges due to socioeconomic changes, such as increased migration and urbanization (Stoddart, 2002). Many younger family members are seeking employment opportunities abroad, leaving the elderly with limited direct support. This shift necessitates the development of community-based aged-care services that can complement and supplement family care, ensuring that the elderly receive the necessary support to maintain their independence and quality of life (Siette et al., 2022). The quantitative findings corroborate the qualitative themes, emphasizing the importance of healthcare access, home and community care, and social support services for the elderly. The high ratings given to these services underscore their critical role in promoting the well-being of older adults.

Table 3. Thematic analysis of the qualitative data revealed key themes: healthcare access, social interaction, and home support and safety.

Common themes	Description	Illustrative quotes	Interpretation
Healthcare Access	"Affordable healthcare, home nursing care"	"The cost of medicine is a big problem. Sometimes we have to choose between buying food and buying medicine."	"This reflects concerns over the high cost of healthcare and a preference for home-based care to reduce expenses. The need for affordable healthcare is critical, potentially requiring subsidies or alternative low-cost service models."
		"It's difficult to get to the doctor's office because we don't have a car and transportation is expensive."	"This highlights the accessibility challenges faced by some elderly individuals, particularly those with limited mobility or residing in areas with inadequate transportation infrastructure."
		"I wish a nurse could come to my home to check my blood pressure and give me my medications."	"This indicates a desire for home-based healthcare services, such as home nursing visits, to address convenience and accessibility barriers."
		"I'm worried about getting sick and not being able to afford the hospital bills."	"This reflects the financial burden associated with healthcare and the potential for catastrophic health expenditures to push elderly individuals and their families into poverty."
Social Interaction	"Recreational activities, community events"	"I feel lonely when I stay at home all the time. I miss talking to people and being active."	"This addresses the emotional and psychological needs of elderly individuals. Social isolation is a significant concern, and opportunities for social interaction are crucial to maintaining mental well-being and preventing loneliness."
		"I would like to join a group where I can learn new things and meet new people."	"This indicates a desire for social activities that provide opportunities for learning, skill development, and social engagement."
		"It would be nice to have a place where we can go to exercise and socialize with other seniors."	"This highlights the need for community spaces or senior centers where elderly individuals can gather, participate in recreational activities, and connect with their peers."
		"I used to enjoy going to the market and talking to the vendors, but now it's difficult for me to walk that far."	"This reflects the impact of physical limitations on social interaction and the need for accessible and inclusive social activities."
Home Support and Safety	"Family training, home safety modifications"	"I worry about my mother falling in the bathroom. I don't know how to make our home safer for her."	"This highlights the need for family members to receive adequate training in providing care at home. Home modifications to improve safety and prevent accidents are also essential concerns for elderly individuals."
		"I'm not sure how to properly take care of my father's wound. I need some guidance from a healthcare professional."	"This indicates a need for family caregivers to receive training in basic healthcare tasks, such as wound care, medication management, and assisting with daily living activities."
		"It's hard to get my grandmother to take her medicine on time. She forgets or refuses to take it."	"This reflects the challenges faced by family caregivers in managing medication adherence and the potential need for support and education in this area."
		"I wish someone could help me install grab bars in the bathroom and ramps for the stairs."	"This highlights the need for assistance with home modifications to improve safety and accessibility for elderly individuals with mobility limitations."

The findings also highlight the prevalence of barriers to accessing services, such as availability, affordability, accessibility, and awareness. These barriers need to be addressed through targeted interventions and policy reforms to ensure equitable access to aged-care services for all elderly individuals in General Santos City (Nancarrow, 2009). The study's findings have significant implications for policymakers, healthcare providers, and community organizations involved in serving the elderly. The proposed aged-care services emphasize culturally sensitive, family-centered, and community-based models of care. These models should be tailored to the specific needs of the elderly population in General Santos City, taking into account their cultural values, socioeconomic circumstances, and individual preferences (Cleland et al., 2021).

The elderly respondents consistently expressed concerns about the affordability and accessibility of healthcare services. The high cost of healthcare, coupled with limited financial resources, poses a significant barrier for many older adults in accessing necessary medical care (Bowling, 2007). This finding underscores the need for policy interventions that address the financial burden of healthcare for the elderly, such as subsidies, health insurance programs, and alternative low-cost service models (Fung, 2022). Furthermore, the elderly respondents highlighted the challenges they face in accessing healthcare facilities due to transportation issues and physical limitations. This finding emphasizes the importance of developing accessible and convenient healthcare services, such as mobile clinics, home-based care, and telehealth programs (Lai, 2018). These services can bring healthcare directly to the elderly, reducing the need for travel and ensuring that they receive timely and appropriate medical attention.

The strong preference for aging in place, within the comfort of their own homes and communities, was evident among the elderly respondents. This finding aligns with the growing trend towards community-based aged-care models that prioritize aging in place and the integration of health and social care services (Leung, 2011). Community-based care not only allows the elderly to maintain their independence and autonomy but also fosters a sense of belonging and connection to their community (Meulenbroeks et al., 2024). The study's findings suggest that community-based aged-care services should be tailored to the specific needs of the elderly population in General Santos City, taking into account their cultural values and preferences. These services should include a range of support options, such as home care, personal care, respite care, and social support programs (Park, 2023). The integration of smart technologies into aged-care services can also enhance service delivery and promote social connectedness among the elderly (Gill, 2022).

The elderly respondents emphasized the importance of social interaction and engagement in maintaining their mental and emotional well-being. Social isolation and loneliness are prevalent among older adults, particularly those who live alone or have limited social networks (Godden, 2001). These conditions can negatively impact their mental and physical health, leading to an increased risk of depression, anxiety, and cognitive decline (Gemmeke, 2022). The study's findings suggest that aged-care services should incorporate opportunities for social interaction and engagement, such as recreational activities, group outings, and community events. Senior centers and community spaces can provide a welcoming environment for the elderly to connect with their peers, participate in meaningful activities, and contribute to their communities (Alba et al., 2021). Intergenerational programs that bring together young and old can also foster social inclusion and reduce age-related stereotypes (Burzynska, 2016).

The elderly respondents expressed a desire for culturally aligned care that respects their values, beliefs, and traditions. This finding underscores the importance of cultural sensitivity in the design and

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delivery of aged-care services. Healthcare providers and caregivers should be trained to understand and appreciate the cultural background of the elderly, particularly the emphasis on family, respect for elders, and spiritual beliefs (Goins, 2003). Culturally aligned care can enhance the quality of life for the elderly by fostering a sense of belonging, promoting trust in care providers, and ensuring that their preferences and values are respected (Santos-Eggimann et al., 2003). It can also improve health outcomes by addressing cultural barriers to healthcare access and promoting culturally appropriate health practices (Schmid, 2005).

The study identified several barriers that hinder the elderly's access to aged-care services, including availability, affordability, accessibility, and awareness. These barriers need to be addressed through a multi-pronged approach that involves policy interventions, community initiatives, and individual empowerment (Watson, 2021). Policy interventions should focus on improving the availability and affordability of aged-care services, particularly for low-income elderly individuals. This can be achieved through subsidies, health insurance programs, and the expansion of community-based aged-care facilities (Nancarrow, 2009). Community initiatives can play a vital role in improving the accessibility of aged-care services by providing transportation assistance, organizing outreach programs, and creating age-friendly environments (Fung, 2022). Individual empowerment can be fostered through education and awareness campaigns that inform the elderly about their rights, available services, and how to access them (Lai, 2018).

5. Conclusion

This study reveals that healthcare access is paramount, with affordability being a major concern. The elderly prefer to age in their homes and communities, underscoring the need for home-based and community-based care that supports their independence. Barriers to accessing services include availability, affordability, accessibility, and awareness. Social interaction and culturally appropriate care are also critical factors for the well-being of the elderly. The study highlights the necessity for a comprehensive aged-care support service that addresses these needs and challenges. Such a service should prioritize healthcare access, family-centered care, community support, and the removal of barriers to ensure that the elderly in General Santos City can age with dignity and receive the support they need to maintain their quality of life.

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