JOURNAL OF INTERDISCIPLINARY PERSPECTIVES

ISSN Print: 2984-8288, ISSN Online: 2984-8385
Vol. 3 No. 11, pp. 14-31, November 2025

Exploring the Narratives of Adults with History of Neglect Raised in Institutional Care and Transitioning Through the Independent Living Program

April Ann B. Manuel
Polytechnic University of the Philippines, Manila, Philippines

Author Email: abmanuel94@gmail.com

Date received: August 12, 2025
Date revised: September 30, 2025
Date accepted: October 13, 2025

Originality: 99%
Grammarly Score: 99%
Similarity: 1%

Recommended citation:
Manuel, A. A. (2025). Exploring the narratives of adults with history of neglect raised in institutional care and transitioning through the independent living program. *Journal of Interdisciplinary Perspectives*, *3*(11), 14-31. https://doi.org/10.69569/jip.2025.624

Abstract. Child neglect represents the most prevalent, yet frequently underrecognized, form of child maltreatment, and is associated with enduring psychological, cognitive, and social consequences. In the Philippines, thousands of children experiencing neglect or abandonment are placed in institutional care facilities (DSWD, 2023). Upon reaching the age of legal emancipation, these youth are expected to transition to adulthood, often through the government's Independent Living Program (ILP), which aims to prepare them for self-reliant living. While Independent Living Programs (ILPs) deliver fundamental life skills, vocational training, and psychosocial support, they often remain insufficient in addressing the deep-seated psychological effects stemming from early neglect and institutionalization. Employing a narrative inquiry approach, thirteen (13) purposively selected respondents were interviewed through semi-structured formats, and the data were analyzed using NVivo (version 14) software. Narratives revealed themes of parental absence and family disruption, chronic poverty and deprivation, early adultification and responsibility, family dysfunction and emotional strain, resilience and coping strategies, pathways to support and intervention, emotional responses to separation and institutional transition, and structure, discipline, and institutional routine. This study provides a foundation for future research in the fields of child welfare, youth development, and mental health. Future researchers can build on this study's findings by exploring the longitudinal impacts of neglect on youth in independent living programs, as well as the effectiveness of various intervention strategies in supporting care leavers.

Keywords: Child neglect; Independent living program; Youth transition from care; Qualitative; Residential care

1.0 Introduction

Across the globe, millions of children are denied the care and protection necessary for healthy development, with neglect representing the most prevalent yet often overlooked form of child maltreatment. According to the World Health Organization (2020), nearly one in four adults worldwide reports having suffered physical abuse in childhood, while neglect, though harder to quantify, is widely acknowledged as a pervasive and damaging experience. Child neglect, defined as the persistent failure to meet a child's basic physical, emotional, educational, or medical needs, has been associated with long-term psychological, cognitive, and social challenges (Norman et al., 2012).

In Asia, rising poverty, internal migration, armed conflict, and social disintegration continue to place many children at risk of abandonment, abuse, and neglect. The region has witnessed an increase in the number of children placed in institutional care, often due to familial incapacity, economic hardship, or parental absence. While residential facilities may offer basic protection, they frequently lack the relational and emotional continuity essential for holistic child development (UNICEF, 2019). Youth raised in institutional settings often struggle with social integration, emotional regulation, and life planning upon leaving care.

The Philippines reflects this regional dynamic. The Department of Social Welfare and Development (DSWD, 2023) estimates that tens of thousands of Filipino children reside in residential care facilities due to abuse, neglect, abandonment, or exploitation. Upon reaching the age of 18, the legal age of emancipation, these young individuals are expected to transition into independent adulthood, often with minimal preparation or support. Many people face significant barriers such as unemployment, homelessness, and mental health crises (David et al., 2021).

To address this transition gap, the Independent Living Program (ILP) was developed as a government-mandated intervention designed to prepare youth leaving institutional care for self-reliant adulthood. Institutionalized through DSWD Administrative Order No. 6, Series of 2005, the ILP is part of the national substitute parental care and aftercare system. It targets care leavers who are unlikely to reunify with their families and equips them with essential life skills, psychosocial support, and vocational preparation.

Despite its promise, the ILP in the Philippines faces implementation challenges, including inconsistent delivery across institutions, insufficient funding, staff shortages, and a lack of long-term monitoring and evaluation. Critically, most assessments of the program focus on administrative or operational indicators and rarely include the voices of the youth themselves. Care-leavers often report being unprepared for life after care, citing feelings of isolation, anxiety, and limited access to sustainable livelihood opportunities (David et al., 2021). Moreover, neglected children are at a higher risk of developing mental health issues such as depression, anxiety, and post-traumatic stress disorder. These issues can hinder their ability to lead healthy and productive lives, making it imperative to address their needs comprehensively (Smith & Doe, 2016).

Existing studies on neglected children in ILPs predominantly focus on quantitative outcomes, such as educational attainment, employment status, and housing stability (Courtney & Heuring, 2005). However, there is a lack of qualitative research exploring the personal narratives and lived experiences of these children. Understanding their unique perspectives is crucial for developing interventions that address their specific mental health needs. While ILPs provide essential services such as housing, education, and life skills training, they often fall short in addressing the mental health needs of neglected children (Geenen & Powers, 2007). Most programs are not equipped with adequate mental health resources or trained personnel to support children with complex trauma histories. There is thus a pressing need to explore the personal narratives and lived experiences of these youth in order to evaluate and enhance the responsiveness of ILPs to their actual needs.

This study seeks to fill that gap by examining the narratives of adults with histories of neglect who are enrolled in or have recently completed an Independent Living Program in the Philippines. Through a qualitative exploration of their personal narratives, the study aims to shed light on how these young individuals navigate the transition to adulthood, the coping strategies they employ, and the forms of support they find most meaningful. By foregrounding their voices, this research contributes to a more human-centered and trauma-informed understanding of care-leaving by foregrounding the clinical implications of trauma exposure, the emotional unpreparedness of neglected youth, and the deficiency of integrated psychosocial support within transitional care frameworks.

Notably, this study contributes to the growing body of knowledge in Filipino clinical psychology, providing culturally grounded insights into how trauma, loss, and survival are experienced and processed within the Philippine context. It opens pathways for context-specific research, therapeutic innovation, and training in trauma-informed care that are tailored to the realities of youth care-leavers in the country. By integrating clinical theory with the real-life narratives of neglected children, this study aims to bridge the gap between psychological need and service provision, ultimately advocating for a more compassionate, informed, and clinically responsive transition framework.

2.0 Methodology

2.1 Research Design

A qualitative research approach is chosen for this study because it is particularly effective for exploring complex phenomena in a deep and contextual manner. In the context of this study, the qualitative approach will allow researchers to explore the nuanced experiences of neglected children in the ILP. It enables an adaptive research process, where data collection and analysis can evolve as new insights emerge. This flexibility is crucial when investigating the dynamic and often complex lives of neglected children in the ILP.

Furthermore, it emphasizes the collection of rich, descriptive data that provides a deep understanding of participants' experiences. This is achieved through methods such as in-depth interviews, which can capture the complexities of participants' narratives. It situates participants' experiences within their social, cultural, and institutional contexts. Understanding the context is essential for interpreting how the ILP affects the mental health and well-being of its participants. It acknowledges and values the subjectivity of participants, seeking to understand the meanings they attach to their experiences. This is important for exploring how neglected children perceive and interpret their experiences in the ILP.

Meanwhile, this study also employed a narrative inquiry focused on understanding and interpreting the stories individuals tell about their lives. Narrative inquiry is a qualitative research methodology that enables an in-depth exploration of individual experiences and the meanings individuals ascribe to these experiences. This approach is particularly suited for understanding the complex and nuanced experiences of neglected children within ILPs. By capturing their personal narratives, researchers can gain valuable insights into the unique challenges and needs of individuals, informing the development of more effective interventions and support strategies (Riessman, 2008).

Narrative inquiry emphasizes the lived experiences of individuals, capturing the emotional and psychological dimensions of their stories. This is particularly relevant for exploring how neglected children experience and navigate the ILP. Participants are encouraged to express themselves in their own words, using rich and descriptive language. This provides a deeper insight into their thoughts, feelings, and experiences.

2.2 Participants and Sampling Technique

This study employed a purposive sampling technique, a type of homogeneous sampling (selecting participants with shared characteristics). This method allows for the selection of participants based on specific criteria relevant to the study. This ensures that the sample includes individuals who can provide rich, detailed narratives about their experiences.

Thirteen (13) participants were selected based on specific inclusion criteria, which included having a documented history of childhood neglect as verified by institutional records or social worker assessments, completion of the Independent Living Program (ILP), and a current capacity for self-sufficiency, such as maintaining employment or a livelihood. Additionally, participants were required to demonstrate emotional and cognitive ability to provide informed consent and engage in reflective interviews, as well as a willingness to share their personal narratives voluntarily.

To maintain the study's thematic focus, specific exclusion criteria were applied. These included individuals who did not participate in or complete the ILP, residents whose primary classification involved abuse without significant elements of neglect, individuals experiencing acute psychological distress or severe mental health conditions that could compromise ethical participation, and minors under the age of 18.

2.3 Research Instrument

The researcher conducted an in-depth individual semi-structured interview to explore the narratives of adults with a history of neglect transitioning into the Independent Living Program (ILP) provided at the residential care facility. Additionally, the researcher recorded the participants' behavior, mood, and nonverbal responses during the interview, as well as observed their nonverbal responses. These notes will be used to record the results of the nonverbal responses.

2.4 Data Gathering Procedure

The following steps were undertaken during the data gathering process. First, the researcher secured the necessary

approvals from the research adviser, panel members, the chairman of the research committee, and the institutional ethics review board to ensure that the study complied with ethical research standards. Subsequently, the researcher prepared and submitted letters of informed consent and formal requests for approval to conduct the study in the selected residential care facility. Once permission was granted, the researcher invited potential participants to take part in the study. Those who agreed were asked to sign the informed consent form, indicating their voluntary participation in the in-depth, individual, semi-structured interviews.

2.5 Data Analysis Procedure

This study utilized thematic analysis to uncover recurring themes and patterns within the narratives. This process involves coding the data to highlight key statements and themes, followed by interpreting these themes within the context of the participants' experiences and the research questions. By understanding the narratives within the broader scope of the participants' lives—including their history of neglect, their time in the ILP, and their mental health and well-being—this contextual insight will help pinpoint areas where the ILP can be enhanced to support mental health better. Thematic analysis was used to analyze the interview data. NVivo (version 14) software was employed to facilitate systematic coding and theme development.

2.6 Ethical Considerations

In conducting this study, rigorous research procedures were followed to ensure the ethical integrity and well-being of participants. Firstly, obtaining informed consent from all participants is essential. This process involved clearly explaining the study's purpose, procedures, potential risks, and benefits, as well as participants' rights, including their ability to withdraw from the study at any time without consequences. Participants were provided with a comprehensive consent form that detailed this information, which they were required to read, understand, and sign before participating in the study.

Secondly, maintaining confidentiality and anonymity is paramount to protect participants' identities and ensure their personal information remains secure. To achieve this, pseudonyms were used in place of real names in all records, transcripts, and publications related to the study. Additionally, all data were stored securely, with digital files protected by passwords and physical documents kept in locked cabinets, accessible only to authorized members of the research team. This approach ensures that only those directly involved in the research have access to sensitive information.

Lastly, recognizing the potential emotional challenges of discussing experiences of neglect and time in the Independent Living Program (ILP), participants were provided with resources for mental health support. Before the interviews, they received information about available mental health services, including counseling and support groups. During the interview process, a social worker was on-call to provide immediate assistance if needed. Additionally, participants were offered follow-up sessions to address any emotional distress that may have resulted from the study and to ensure they had ongoing support. This comprehensive support system underscores the study's commitment to participant well-being and acknowledges the sensitive nature of the topics being explored.

By adhering to this detailed research protocol, the study aims to uphold the highest ethical standards, thereby fostering a respectful and supportive environment in which participants can share their experiences openly and freely. This approach not only ensured the collection of rich, meaningful data but also prioritized the safety and dignity of the individuals involved.

3.0 Results and Discussion

Table 1 presents the analysis and interpretation of the generated codes and themes from the transcribed interview. Below is the summary of the table of themes and psychological constructs.

Table 1. *Summary Table of Themes and Psychological Constructs*

Theme	Subthemes	Clinical/ Psychological Construct	Brief Clinical Interpretation
Parental Absence and Family Disruption	Paternal Abandonment, Caregiving Gaps, and Lack of Protection	Attachment Disruption, Relational Trauma	Long-term emotional insecurity and disrupted relational trust due to early neglect (Cooke et al., 2019).
Chronic Poverty and Deprivation	Food Scarcity, Disrupted Education, and Unstable Homes.	Deprivation-Related Trauma, Toxic Stress, Cognitive Strain	Chronic material deprivation shapes stress reactivity, attention, and learning outcomes (Sheridan & McLaughlin, 2020).
Early Adultification and Responsibility	Early Care Giving, Financial Responsibility, and Emotional Burden	Parentification, Role Confusion, Adultification	Burdensome adult roles impair emotional development and self-worth (Hooper et al., 2021; Ghafoori & Hierholzer, 2023).
Family Dysfunction and Emotional Strain	Violence, Substance Misuse, and Emotional Neglect	Complex Trauma, Affective Dysregulation	Family instability leads to chronic trauma responses and emotional volatility (Hodges et al., 2022; Ford & Courtois, 2020).
Resilience and Coping Strategies	Initial fear, Emotional Detachment, Feelings of Being Controlled	Institutional Trauma, Separation Anxiety, Shame	Entry into care evokes trauma symptoms and internalized rejection (Jones & Williams, 2023; APA, 2022).
Pathways to Support and Intervention	Adherence to Structure, Staff Relationships, and Behavior Monitoring	Behavioral Conditioning, External Regulation	Structure supports stability but may hinder emotional growth (Raghavan & Midgley, 2020; Liu et al., 2019).
Emotional Responses to Separation and Institutional Transition	Mood Swings, Withdrawal, Unprocessed Anger, or Grief	Emotion Dysregulation, Trauma-Linked Repression	Trauma and lack of emotional modeling hinder affective regulation (Siegel, 2021).
Structure, Discipline, and Institutional Routine	Confusion About Self-Worth, Longing for Family, and Reconnection Attempts	Identity Diffusion, Internalized Shame, Developmental Arrest	Difficulty integrating self-concept due to neglect and relational rupture (Fonagy et al., 2019; Masten, 2021).

3.1 Parental Absence and Family Disruption

This theme talks about the early lives of the people who took part, which were marked by poverty, parents who were not there, unstable family structures, and emotional or physical neglect. All of these things led to their eventual placement in institutional care. These problems in the caregiving system often cause long-term emotional instability and an early sense of independence. These issues stem from subthemes such as father abandonment, separation or loss of a caregiver, and inconsistent or disrupted caregiving.

Father Abandonment or Death

The stories show that fathers are often not around, whether they are leaving, disappearing, separating from their parents, or dying. As shared by one of the participants,

"My father has passed away, and my mother is in – where was it – Bataan."

This put many families in challenging situations, with mothers often having to care for their children alone. Sometimes, the father's absence made things worse, like when he drank too much or was violent, which made the

home even less stable. The loss of a father figure had a significant impact on the family's finances and their dynamics.

The results are in line with what other studies have found: when a parent is absent, especially when the father is not involved, it can lead to grief, distrust, and a belief that the child is unwanted or a burden. Specifically, not having a father has been linked to taking more risks, having low self-esteem, and losing one's sense of self. In families where someone died or left, emotional growth and trust in relationships were even more affected, which could have caused symptoms similar to those of complex trauma. This finding is similar to what Santos and Lagrada (2021) discovered in their research on Filipino children whose parents had moved away. These children often have similar psychological responses, such as grief and confusion.

Separation or Loss of Caregiver

This subtheme discusses instances when primary caregivers, typically mothers, were unable to provide sufficient care. They could not do it because they were heavily in debt, had to care for many children, and did not have a steady job, especially if they were housewives. As in the case of one of the participants,

"When my dad disappeared, it was like they separated and then they left us alone until I came here to Joyville."

In these situations, children often lacked sufficient food, attended school at irregular times, and had limited access to necessities. In these situations, caregivers often had to get help from outside sources or put the children in care facilities.

The participants' stories align with research that shows being poor increases the likelihood of neglect. In the Philippines, financial difficulties are a common reason for families to break up and for children to be placed in institutions. Lamberte and Olivar (2018) stated that kids from low-income families are more likely to get broken care and psychosocial neglect. Furthermore, shocking statistics show that a lot of Filipino children live in poverty, with millions living below the poverty line. This illustrates how systemic issues hinder caregivers from meeting their children's basic needs.

Unstable Caregiving Environment

Before being put in an institution, many of the participants lived in homes that were unstable and unsafe. This included being around violence in the community and, in some cases, violence in the home because of a parent's drug abuse. Children often did not know what was happening with their family or why they were being placed in care, which made them feel confused and unwanted. There was not always a consistent presence of parents or encouragement in the homes, which made people feel insecure all the time. One participant had recalled,

"It is because back in our place, there were a lot of killings and violence."

People who live in unstable caregiving situations, where there is violence or emotional unavailability, are more likely to have affective dysregulation and distrust of other people. When young people feel like they are to blame for things, it can make them feel worse about themselves and stop them from asking for help. In the Philippines, cultural norms may make these situations even more complicated. For example, children are often expected to protect their elders and not talk about family problems openly, which could make their mental health problems worse. This shows even more how these kinds of environments, especially when parents are not around, make emotional growth and trust in relationships worse, which can cause symptoms of complex trauma.

3.2 Chronic Poverty and Deprivation

This theme explores the profound and widespread experiences of financial hardship and the lack of basic needs that participants faced prior to entering residential care. These situations had a significant impact on their health, educational opportunities, and the overall stability of their family. These issues stem from subthemes such as food insecurity and malnutrition, lack of access to education, unemployment, and unstable income.

Food Insecurity and Malnutrition

Participants consistently reported experiencing food insecurity, including eating only one meal a day and not having access to sufficient school food. Stories were shared about getting by on very little food, such as boiled

sweet potatoes or taro, and experiencing low energy all the time because they lacked a structured diet and essential vitamins. These situations often left people without food, resulting in malnutrition. One of the participants shared,

"We were all so thin, malnourished, because there was no food and no work."

These stories are in line with research on how being poor for a long time as a child can cause toxic stress and make it hard to pay attention, control emotions, and do other things that require executive function. The participants' reports of being hungry and not having enough food are in line with the idea that these kinds of environmental stressors can have effects on the brain and behavior that are similar to those of post-traumatic stress. In the Philippines, financial difficulties are a common reason for families to break up and for children to be placed in institutions. The Philippine Statistics Authority (2021) and a UN report (2022) both showed that millions of Filipino children live below the poverty line. This is directly related to the experiences of the study's participants, who had to meet their daily basic nutritional needs.

Lack of Access to Education

The participants' stories reveal significant challenges in accessing education, primarily due to financial constraints. Many people could not afford to attend school; some had to drop out completely to work, while others took on a variety of odd jobs to earn money. Many people noticed how different it was for them not to be able to afford basic school supplies or snacks compared to their classmates. A participant stated,

"Ah, it is hard, my parents cannot afford to send me to school."

This lack of access to regular school made things even harder for these kids.
The results show that poverty directly affects a child's ability to attend school, forcing them to choose between survival and education. This is a crucial aspect of how long-term poverty impacts child development.
Lamberte and Olivar (2018) stated that kids from low-income families in the Philippines are more likely to be neglected in a psychosocial way, which includes not getting an education. The study participants' experiences of dropping out of school to work illustrate how long-lasting financial problems can hinder normal development, ultimately affecting cognitive abilities and mental health in the long run.

Unemployment and Unstable Income

Before entering residential care, many of the participants' families were unemployed or had unstable income sources. Mothers often had jobs that were not steady or paid well, such as being a laundress, or they were housewives who did not work outside the home. Children had to perform a variety of tasks, such as scavenging or building things, to help their families earn money. This suggests that the family was constantly in a state of survival need. One participant expressed,

"*My mother would just do laundry – she looked around for neighbors who needed clothes washed, anything extra, so that we would have something to eat. Moreover, of course, I also scavenged for things to earn money, whatever I could do to help.*"

The stories of unstable income and child labor fit with what we know about how being poor for a long time as a child can put much stress on the economy. Kids go into "survival mode" when they are always worried about meeting their basic needs and do not have any adult support or emotional safety. This phenomenon supports the idea that socioeconomic factors and parental education have a significant effect on neglect. As Amoah (2020) pointed out, the stories told by participants reveal a societal problem where low-income families often force their children to leave home or assume adult responsibilities.

3.3 Early Adultification and Responsibility

This theme examines how participants were compelled to assume adult roles and responsibilities prematurely due to challenging family circumstances. This had a significant impact on their emotional growth and sense of self. These issues stem from subthemes such as children assuming adult roles, sacrificing their childhood needs, and the early realization of hardship.

Children Assuming Adult Roles
Often, participants discussed taking on adult-like responsibilities at a very young age. This included working, such as looking for money or doing construction side jobs, to help the family make ends meet. Some people remembered feeling like they had to take care of their younger siblings, even thinking they were acting like a mother at a young age. These duties were often imposed on them when their parents were away or when they were inferior. One of the participants mentioned,

"I am doing sidelines so I can have some income, I am doing construction like that, then I go everywhere to make money."

These stories align with the concept of "adultification," which occurs when children assume adult responsibilities prematurely due to family issues, being left behind, or having their roles reversed. Recent studies by Ghafoori and Hierholzer (2023) and Jones and Neal (2022) demonstrate that premature adulthood can have long-term emotional consequences, including higher levels of anxiety, hyper-independence, unmet emotional needs, and difficulties forming balanced relationships as an adult. This phenomenon is related to "parentification," which occurs when children assume caregiving or emotional roles that are not appropriate for their age (Hooper et al., 2021). In the Philippines, cultural ideas about sacrifice and emotional strength, such as utang na loob (debt of gratitude) and pagkamatatag (emotional resilience), can reinforce adultification and make people less likely to seek emotional help, which can slow down their recovery. Without trauma-informed care, these people may carry burdens into adulthood that they do not realize they have, which are often mistaken for "strength" or "maturity," hiding their psychological distress.

Sacrificing Childhood Needs
The stories show that they gave up a lot of everyday childhood needs, often because they felt like they had to or that they were a burden to their struggling families. One of the participants reported,

"I also thought, why should I still be a burden to them, so that is it."

This reveals a childhood that was repressed, as meeting personal needs often came second to helping the family survive. The internalization of guilt and the feeling of being a burden are two considerable emotional costs of growing up too soon. This aligns with the notion that these types of roles can instill a sense of pride in one's strength. However, they can also leave individuals feeling emotionally drained, isolated, and guilty for not being "good enough" to keep families together. Being overly focused on meeting the needs of your family instead of your own growth can make it challenging to meet your own emotional needs and hinder the development of healthy relationships later in life. In clinical terms, this theme points to developmental trauma and suppressing emotions, which can hide deeper psychological problems.

Early Realization of Hardship
From a very young age, participants reported being aware of the problems their families were facing. People who were aware of this often made social comparisons, like noticing that they did not have as much food as their peers. These early realizations often caused a lot of emotional pain, including crying spells and feelings of pain and confusion about their situation or why they were separated from their families. For many, the sudden shift to a harsh reality without parents being present all the time was tough to cope with. As one of the participants expressed,

"Even when I was just in Grade 2 or Grade 3, I could already say that life was hard. Why? Because my classmates always had snacks or food to bring to school, and I did not."

This subtheme is closely related to the idea that being poor for a long time as a child can cause toxic stress, which changes the structure of the brain and slows down emotional and cognitive development (Sheridan & McLaughlin, 2020). Being exposed to factors such as hunger, unsafe housing, and unstable family environments more frequently makes it harder to regulate emotions, maintain attention, and perform other executive functions (Blair & Raver, 2021). Over time, these early problems can lead to neurobiological and behavioral effects that are similar to those seen in post-traumatic stress, even if there was no direct abuse (McLaughlin et al., 2019). The emotional effects, which are described as painful and overwhelming, are similar to the psychological effects of being abused or abandoned as a child, which are often caused by complex trauma. Being very aware of problems

at a young age, primarily through comparing themselves to others, can make them feel different or unwanted, which can hurt their mental health even more.

3.4 Family Dysfunction and Emotional Strain

This theme examines the challenging home lives of participants prior to their admission to institutional care. These included problems with their parents, neglect, and being around violence, all of which caused much emotional stress. These issues stem from subthemes such as parental substance abuse, parental illiteracy or neglect, and exposure to violence and danger.

Parental Substance Abuse

Participants often talked about how their parents abused drugs, especially alcohol, in their homes. This often showed up as fathers who drank too much and put alcohol ahead of everything else. In some cases, this behavior was linked to domestic violence, where the father would hurt the mother. These kinds of actions made the family less stable as a whole and made it difficult for parents to provide their children with consistent care and support. As one of the participants conveyed,

"My father drank a lot. Moreover, when he was not given money, he would hurt my mother."

The stories show that parental substance abuse is a common theme, which is consistent with research that shows that childhood family dysfunction, such as witnessing violence, is linked to affective dysregulation and interpersonal distrust in adulthood (Hodges et al., 2022; van der Kolk, 2014). When someone in the family has alcoholism, it makes things very chaotic and unpredictable, which can make it harder for people to develop emotionally and trust each other. The effects that participants talked about are in line with what we know about how living in chronic poverty often means having parents who are "waiting... and drinking, drunkards," which makes it even harder for them to work and care for their children.

Parental Illiteracy or Neglect

The stories suggest a pattern of parents failing to care for their children and, in some cases, providing them with inadequate education. One person said that their mother only finished third grade and did not understand much, so she went along with what the kids wanted, even if it meant not encouraging them to go to school regularly. The fact that families often moved or stayed with neighbors instead of having a stable home indicates that their basic needs were not always met, and they lacked guidance. As expressed on one of the participants' accounts,

"My mother only finished third grade and had a limited understanding of things – she would just go along with whatever her children wanted."

According to child neglect literature, this kind of neglect is a constant failure to meet basic needs. Child neglect includes an unstable caregiving environment, which can be caused by parents who cannot read or are too passive. Pasian et al. (2020) say that socioeconomic factors and parental education can affect child neglect. Participants' reports of not getting consistent support for education and not having a stable place to live are similar to what Republic Act No. 9523 calls "physical neglect," which means a child is "malnourished, ill-clad, and without proper shelter," or "unattended." This kind of environment limits kids' opportunities. It keeps them in a cycle of deprivation, which is in line with the idea that neglect can mean being emotionally unavailable and lead to long-term mental health issues.

Exposure to Violence and Danger

Participants talked about living in places where they were in danger and violence was common. This included seeing "killings and violence" happen in their neighborhoods. Also, parents' drug and alcohol abuse could sometimes directly lead to physical harm in the family, since fathers' drinking could make them hurt the mother. This kind of exposure made their lives unsafe in ways that went beyond money problems, adding to the trauma they had already experienced as children. One of the participants recounted,

"It is because back in our place, there were a lot of killings and violence."

Being around violence and danger at home or in the community is a big part of family dysfunction. Studies show that having a dysfunctional family as a child, such as seeing violence, can lead to affective dysregulation and

distrust in relationships later in life (Hodges et al., 2022; van der Kolk, 2014). In systems where there is so much violence, emotional growth and trust in relationships are even more affected, causing symptoms that are consistent with complex trauma (Hodges et al., 2022). The stories told by participants show that surviving bad situations involved more than just money problems; they also had to deal with dangerous situations, which shows how unsafe caregiving environments can affect children's health.

3.5 Resilience and Coping Strategies

This theme examines the various ways participants adapted and the strengths they discovered within themselves to cope with the challenges they faced in their early lives and their transition to independent living. It demonstrates how people were able to survive and thrive despite facing significant challenges. These issues stem from subthemes such as resourcefulness, awareness of family struggle, and seeking better environments.

Resourcefulness

Participants demonstrated considerable resourcefulness, often taking the initiative to find work and support their families from a young age. This meant taking on various kinds of work, such as looking for money, undertaking construction work on the side, or doing chores around the house to help the family make ends meet. Some people also took on early caregiving roles for their younger siblings, demonstrating a sense of responsibility and independence when their parents were not available to assist them. According to one of the participants,

"I am doing sidelines so I can have some income. I am doing construction like that, then I go everywhere to make money."

This resourcefulness helped them manage their own finances and continue their education or work part-time to support themselves, even after they entered institutional care. The concept of "early adultification" suggests that children assume adult responsibilities too soon because their families are experiencing difficulties. This fits with the stories of resourcefulness. Some people might see this as a sign of strength, but it often hides deeper emotional costs and unmet needs. However, being able to "do this" and "learn to trust myself" also shows that you are naturally strong. People do not think of resilience as not feeling bad; they think of it as having flexible strategies that help you survive and grow mentally (Levy et al., 2021). These individuals are actively trying to help and deal with their situations, which demonstrates that they are employing a proactive coping strategy in the face of deprivation. This shows that they believe in themselves and are determined to overcome their problems.

Awareness of Family Struggle

From a young age, the participants were acutely aware of the problems their families were facing, demonstrating emotional maturity beyond their years. This meant understanding the sacrifices their mothers made, how dire their poverty was, and why they were put in care. Even though these were hard truths, many people accepted them practically, knowing that being placed was often a necessary step for their own growth and a way to escape ongoing problems. One of the participants shared,

"But my mindset at that time was – if I did not go to Joyville, it was possible that nothing would happen with our lives, there would be no progress. Because I really tried – like, I studied on my own, I put myself through school."

This early understanding altered their perspective, enabling them to focus on self-improvement and academic success. This intense awareness of family problems and acceptance of them shows how the brain processes bad experiences. It suggests a kind of "meaning-making" in which people use their past struggles to help them understand their life's purpose and where they want to go in the future. Early exposure to hardship can cause toxic stress and make it hard to control your emotions. However, being able to think about and understand their situation instead of getting angry shows that they are becoming more emotionally mature. This aligns with the notion that resilience entails rebuilding meaning through choice and focusing on the future (Levy et al., 2021). The stories make it clear that knowing their family's limits, even though it was painful, was a strong reason for them to grow as individuals and seek better opportunities.

Seeking Better Environments

A significant way participants addressed their problems was by actively seeking or being placed in better, more stable environments, such as the children's home or the Independent Living Program. Many of them were sent there by social workers, community leaders, or faith-based organizations. This indicates that there are structured methods for escaping from hazardous or unfavorable situations. Some people saw going into institutional care as

a way to get away from violence or get an education and basic needs that they could not get anywhere else, even though they were sad about being separated at first. People thought this move would lead to better health, stability, and educational opportunities. As recalled by one of the participants,

"My mother, what do you call it, my parents separated, and we are five siblings. My sibling and I were brought to the DSWD, and then the DSWD placed us here."

Moving into structured care facilities is a significant way to help and intervene with children who have been neglected. The goal of these residential homes is to provide children with a stable living environment and the necessary tools to thrive. Families or community groups that actively refer children to these kinds of shelters show that they understand how badly these kids need safer, more supportive places to live. This aligns with what people have said about how places like children's homes addressed neglect in a structured manner by meeting basic needs, teaching essential life skills, and establishing a routine. The stories show that the idea of a better environment, combined with the real improvements they saw (such as better health, access to food, and education), became strong reasons for them to accept and adapt, which helped them stay strong.

3.6 Pathways to Support and Intervention

This theme discusses the various ways people can access the children's home and the Independent Living Program (ILP). These paths often relied on important support from social networks, faith-based groups, and official government channels. They helped people transition from difficult home situations to structured care, which was greatly needed. These issues stem from subthemes such as referral by social workers or NGOs, faith-based or community-based access, family or community initiative, and educational or program-based entry.

Referral by Social Workers or NGOs

Formal social work channels and non-governmental organizations (NGOs) helped many of the people who went to institutional care get there. A nurse or other concerned person would often initiate this process by referring families to social workers, who would then connect them with care centers. Formal government agencies, like the Department of Social Welfare and Development (DSWD), put some children directly into the residential facility because their parents could not take care of them or had left them. One of the participants recalled,

"My mom knew someone from DSWD, and I was surprised when I was told that we would be staying here temporarily so we could study and be taken care of."

The government-mandated interventions that social workers and the DSWD use to facilitate placements are a direct reflection of their efforts to prepare young people for independent adulthood. The DSWD is in charge of judging and placing children who are at risk. Many residential homes, licensed by the DSWD, play a crucial role in caring for and supporting neglected children. These pathways show how the formal systems in the Philippines deal with child neglect and abandonment, which is in line with the country's national substitute parental care systems.

Faith-Based or Community-Based Access

Many people who participated entered the children's home through faith-based groups or local community networks. Church leaders, Salvation Army officers, or church members who were sympathetic were the primary individuals who assisted families in finding a care facility. Neighbors and local leaders also provided significant assistance with referrals. This illustrates the crucial role informal social networks and religious groups play in identifying and connecting vulnerable children with support systems. Some stories claimed that church captains or community social workers working for the Salvation Army were directly responsible for placement. One of the participants recalled,

"It was our former sitio leader who helped us because he also used to attend the Salvation Army church. There used to be a church there before, but it is no longer there now."

This pathway highlights the significance of community and faith-based organizations as primary sources of support for vulnerable children. Community-level programs like these are vital for meeting the needs of children's welfare, especially in areas where formal social services may be limited. These results support the notion that social protection policies should consider a broader range of social, cultural, and family factors to be effective.

Family or Community Initiative
In some cases, the family or close friends in the community were the ones who suggested that the children be placed. This included mothers who chose to send their kids to the facility because they knew they could not take care of them properly and often felt bad about their kids' lack of food and other resources. When grandparents or other older relatives could no longer care for children due to age or illness, they also took the initiative to place them in formal care. Local leaders, such as a former sitio leader who attended the Salvation Army church, also assisted families in finding the help they needed at the children's home. One of the participants conveyed,

"My mom said that the reason she decided to send us there was because she felt sorry for us. We were not eating properly, and even they, my parents, did not really have anything. We were all so thin, malnourished, because there was no food and no work… We could not be left alone; they could not go to work because they were just at home… waiting… and drinking, drunkards."

This subtheme illustrates the challenges families face when navigating significant difficulties. They often prioritize the child's well-being over keeping the family together. It shows that people understand that poverty does not directly cause neglect, but it does increase the likelihood of it happening. Even though things were hard, some kids did not feel like their parents were neglecting them in these situations because they knew that the placement was for their own good. This illustrates a form of family self-denial and a reliance on community networks when traditional care systems fail.

Educational or Program-Based Entry
Some participants reported that their involvement in the children's home and the Independent Living Program was directly related to educational opportunities or specific recruitment efforts. This included being enrolled as a scholar with the help of a church leader during the pandemic, which provided the child with access to education and support. Some people who had been out of care came back to the children's home and then joined the ILP. A participant articulated,

"My mom is a salvationist; she is a soldier. One time, we went to church, and one of the Captains told her, "Enroll your child so that if ever she becomes a scholar, it could help since you are on your own." Moreover, that is what happened—I got accepted during the pandemic."

These entries demonstrate that the programs actively sought to provide children with structured environments and educational paths that they would not have had otherwise. The Independent Living Program (ILP) is a government-mandated program that helps young people transitioning out of institutional care prepare for independent adulthood. It helps care-leavers who are unlikely to reunite with their families by teaching them important life skills, providing psychosocial support, and preparing them for employment. ILPs are designed to support individuals in their academic and professional pursuits. This path illustrates how these programs serve as vital connections, providing at-risk youth who have been neglected and lived in unstable family situations with opportunities to learn and grow.

3.7 Emotional Responses to Separation and Institutional Transition
This theme looks at the complicated emotional and mental reactions that participants had when they first had to leave their families and then had to adjust to living in an institution and the Independent Living Program (ILP). These stories show a range of emotions, from initial distress to eventually coming to terms with their new situation, and sometimes a mix of emotions about it. These issues stem from subthemes such as feelings of abandonment and confusion, initial grief and crying episodes, anger and resentment toward caregivers, fear and uncertainty, adjustment difficulty, cognitive processing of experience, and ambivalence or mixed emotions.

Feelings of Abandonment and Confusion
When people were put in institutional care, they often said they felt very alone and confused. Many people wondered why they were left behind, if there was something "wrong with us," or if they had been "replaced." This confusion was particularly devastating for younger kids, who struggled to understand why they were being given away to strangers or why their family lives had suddenly changed. These feelings often persisted, resurfacing as deep sadness even years later. One of the participants shared,

"*At first, when our dad left us, that was when I started asking questions like, why were we left behind, unlike others? What could be wrong with us? Were we replaced or something? All those kinds of questions that you know you cannot really answer anyway.*"

These experiences are similar to what clinical research has found about "placement trauma," which looks at how sudden separation from family and institutionalization affects children's mental health (Dozier & Bernard, 2019). Early transitions into care can disrupt attachment systems, make it challenging to manage emotions, and hinder self-discovery (van der Kolk, 2014; Hodges et al., 2022). For teens who have already been neglected for a long time, moving to a new institution may bring back old trauma wounds, such as the fear of being abandoned. In the Philippines, where family ties are significant, these kinds of separations can cause "cultural grief," a process of mourning not only the individuals lost but also the social roles and identities they lost during the transition (Alampay & Tuason, 2020).

Initial Grief and Crying Episodes

During the first few days apart, people often felt very sad and cried a lot. Participants remembered feeling overwhelmed, crying quietly in class, or pulling away from social situations and wanting to be alone. Many people felt this way immediately when they were separated from their families and had to adjust to a new place and new routines. Some people said it took them weeks to get used to the new place. A participant stated,

"*At first, it was really... It was painful, honestly. During my first days at Joyville, I remember experiencing that while my teacher was lecturing in front of the class... At that time, I was sitting there with my notebook covering my face; maybe my teacher thought I was reading or looking at something, but my tears were already falling. Because, you know, it felt like everything suddenly changed.*"

These open and immediate signs of grief are clear signs of separation anxiety and the trauma that comes from being taken away from familiar places suddenly. The participants' struggles to adjust and their initial social withdrawal show how hard it is to integrate emotionally. During this time, children often have to make significant changes to their mental health to deal with the profound loss. Structured environments are meant to provide stability, but the initial emotional impact can be powerful. This shows how important it is to get trauma-informed support during the first stages of institutional care.

Anger and Resentment Toward Caregivers

Some of the people who took part eventually understood why they were placed, but many were initially angry and upset, especially at their parents for leaving them. These feelings could lead to fights with parents or make them question why they were sent away in the first place. Some people reported feeling that they were being mistreated or given responsibilities that were not suitable for their age before they entered care. One of the participants expressed,

"*I did feel that, especially as I got older. There was a time when I really let out my resentment toward them. I said things like, 'Why did you even send us there?' My mom and I had a bit of an argument. However, eventually, I understood why it had to be that way.*"

The feelings of anger and resentment are similar to the emotional problems that come with attachment problems and the tendency to blame oneself that neglected teens often have (Kim & Cicchetti, 2019). Children may feel this way even more strongly if they believe they are being abandoned, regardless of the actual reasons. In families where neglect, abandonment, or violence were present, emotional development and trust in relationships were even more affected. Even if they later understood it, the way they expressed their anger reveals the emotional work these young people had to do to cope with their past.

Fear and Uncertainty

When they first entered care, the participants reported feeling scared and unsure. This fear stemmed from the uncertainty of what would happen next, such as being separated from their parents and placed with strangers, as well as the stress of having to learn the rules and responsibilities of a new environment. Some people remembered being scared of being left behind or having to deal with new problems, such as managing a budget for the first time without their parents' help immediately. A participant mentioned,

"So, of course, there was pressure and worry—like, what if there was an emergency and we had already spent our budget? What would we do then? However, those fears would usually go away because our administrator back then was kind."

Participants' fear and uncertainty are direct results of the sudden change in their sense of safety and predictability. Youth who have been through trauma often do better in environments that are stable and predictable. These things help them feel safe again and lower their hypervigilance (Bath, 2015; Brunzell et al., 2019). The initial fear of new responsibilities, such as budgeting in the ILP, reveals how anxious people are about suddenly becoming independent without sufficient preparation or experience.

Adjustment Difficulty

A lot of the people who took part said that they had much trouble adjusting when they moved into institutional care and later into the Independent Living Program. This meant feeling out of place, being overwhelmed by new routines and responsibilities for self-care (such as doing chores, laundry, and cooking), and feeling socially withdrawn or alone. For some, the sudden transition to independence, especially without direct supervision, was challenging to adjust to. One of the participants shared his experience,

"The adjustment was gradual—like, during the first few weeks, it really felt unfamiliar. Because it was different being in Joyville under the Independent Living Program and then suddenly being out on your own. The first few months were tough, especially because there was no one older to talk to regularly. Our parents were far away, and the house parents who used to guide us in Joyville were also no longer around. Back then, cellphone use was still limited—we did not have the kind of access we have now, where you can easily video call or message someone. So, whenever I had a problem, the only thing I could really do was pray. That is how I coped."

The problems with adjusting are in line with the "struggles with institutional transition" theme, which says that entering care can bring up trauma symptoms and feelings of rejection (Jones & Williams, 2023; APA, 2022). The military-style routine and the transition to living on your own were both beneficial for building skills, but they were also challenging to learn. Life-skills education aims to restore executive functioning that has been damaged by neglect. However, the first few weeks can be emotionally challenging because people must deal with being alone and lack familiar social interactions.

Cognitive Processing of Experience

Over time, participants demonstrated a capacity for self-reflection and cognitive processing of their experiences. This involved a gradual understanding of why they were placed in care, sometimes reframing it as being "for their own good" or part of a larger plan. Many expressed gratitude for the opportunities received, recognizing that their lives improved significantly after entering the program, enabling them to gain education and social skills that would have been unattainable otherwise. This developmental understanding often led to a reduction in resentment and an embrace of their new path. A participant expressed,

"But over time, you do not really think about it anymore, and it is like you yourself start to understand why it happened. Maybe it was all part of God's plan, something like that."

This subtheme highlights aspects of "post-traumatic growth" and "narrative coherence," where participants reconstruct meaning through agency and a future orientation (Levy et al., 2021). The ability to understand their family's limitations and view their placement as beneficial signifies a mature cognitive and emotional process. This shift from initial confusion and sadness to understanding and thankfulness is a testament to their psychological adaptation and resilience.

Ambivalence or Mixed Emotions

Participants often experienced a range of emotions about their separation and transition. They missed their families, but they also saw the benefits of institutional care, such as improved health, access to food, and opportunities to learn. Along with happiness and thankfulness for the safety and opportunities the children's home provided, they also felt sad and missed their families. This uncertainty resurfaced at times when they were sad, but it often subsided when they realized the reason for their presence. A participant conveyed,

"I missed them, because that is normal for a child. However, my mindset at that time was—if I did not go to Joyville, it was possible that nothing would happen with our lives, there would be no progress."

Individuals who transition from complex backgrounds to structured care often experience a range of mixed emotions. Even though physical needs may be met, the profound emotional effects of separation and neglect, like abandonment anxiety and emotional numbness, can last for a long time. In the Philippines, this concept is similar to "cultural grief," which involves mourning not only for individuals but also for the social roles and identities that are lost during a transition (Alampay & Tuason, 2020). Sadness, relief, and hope can all be present simultaneously, illustrating the complexity of the human mind during significant life changes.

3.8 Structure, Discipline, and Institutional Routine

This theme examines how the highly structured and routine-based settings of the children's home and the Independent Living Program (ILP) impacted the individuals who lived there. It shows how consistent schedules, clear rules, and opportunities to build practical skills made things more stable, but it also talks about some of the problems people thought this kind of environment had. These issues stem from subthemes such as strict daily schedules, clear rules and consequences, teaching life skills, restricting media/entertainment, the perception of system effectiveness, and the routine as both structure and limitation.

Strict Daily Schedules

Many participants reported that the institutional environment had a "military-style routine," characterized by strict daily schedules for meals, chores, and bedtime. There were exact times for everything, from getting up, eating, and cleaning in the morning to doing the dishes and laundry at certain times. In the afternoon and evening, school days were planned around chores and prayer time. One of the participants shared,

"*In Joyville, it was like a military-style routine – there were schedules, a set time for meals, a set time for chores.*"

Following a strict schedule gave people a sense of order and predictability. Setting strict daily schedules is in line with the idea that young people who have been through trauma often do better in environments that are predictable, consistent, and clear. These kinds of environments help them feel safe again and lower their hypervigilance (Bath, 2015; Brunzell et al., 2019). This structured approach may have seemed strict, but it was intended to instill discipline and provide participants with a sense of stability that they previously lacked at home. The routine was an important part of personal growth because it gave kids a stable environment in which to learn and grow.

Clear Rules and Consequences

The institutional setting had clear rules and made it clear what behaviors were not allowed, with consequences for not following them. These rules were posted, and people followed them because they did not want to lose their allowance for a short time or because they wanted to get rewards for good behavior. Through conversations about right and wrong and disciplinary actions, such as warnings or limits on entertainment for minor offenses like not napping during designated times, participants learned to follow the rules. The goal of this system was to encourage responsibility and to follow the rules. A participant reported,

"*No, none, cellphones were not allowed. There were a lot of prohibited things because they posted rules for us, and if you did not follow them, there were consequences.*"

Having clear rules and consequences is a crucial aspect of how institutions are structured. However, research shows that structure is important, but it needs to be combined with relational attunement. Strict rules without emotional support can unintentionally bring back feelings of control and powerlessness that were present during past abuse or neglect (Perry & Szalavitz, 2021). The stories demonstrate that the system's structured rules and enforcement were designed to foster responsibility and accountability, enabling participants to learn about the importance of following rules and the consequences of their actions.

Teaching Life Skills

A key part of the institution's daily routine was teaching basic life skills to help individuals live independently. The participants learned simple, practical tasks that kids in regular families do not usually learn. These skills included doing chores around the house, such as cleaning and laundry, as well as practical tasks that would help them be self-sufficient, like cooking, starting with basic frying techniques. The purpose of these lessons was to prepare them to live independently. A participant stated,

"When we first came here, we were taught how to do household chores – they guided us."

Life skills education is crucial for young people as they become independent, as it helps them rebuild their executive functioning, which is often compromised by neglect. This makes them more self-sufficient and independent (Geenen & Powers, 2007). Independent Living Programs (ILPs) focus on teaching young people practical skills, such as cooking, cleaning, and managing their own needs. The goal is to equip them with the necessary tools to become self-sufficient adults. This hands-on training is an important part of their path to becoming self-sufficient after leaving care.

Restriction of Media/Entertainment

The institution had strict rules about who could use media and entertainment. People were not allowed to use cell phones, and they could only watch TV at certain times, mostly on Sundays, and only educational shows that taught them something or had educational value. The goal of this limit was to encourage people to focus on educational activities and media instead of those considered harmful. One of the participants expressed,

"We were not allowed to watch anything, because cellphones were not allowed inside. So, during our free time, we either played or watched, but even watching had a schedule. We were not allowed to watch shows that were not helpful – the shows had to have lessons or educational value."

Value-based restrictions on entertainment may be intended to promote cognitive development, but overly strict rules can sometimes hinder the ability to have fun or make one's own choices (Hodges et al., 2022). The structured control over what children watch and play is an institutional way to help them grow, aligning with the larger goal of reducing distractions and increasing learning opportunities in a controlled setting.

Perception of System Effectiveness

Most of the people who took part thought that the institutional system worked well and helped them while they were in care. When people say that the system is "excellent" and that they "feel joyful," it sounds like they had a good time overall, especially when compared to how chaotic their home lives were before. They believed that the regular schedule and supportive environment were crucial in helping them become more independent and feel secure from daily worries. A participant shared,

"At first glance, if your mindset is narrow, you might think we were being made to suffer. However, for us, it was not at all like that. It was actually fun, because you saw that you were doing things together, and you had people helping you do things you thought you could not do."

People often thought positively about the administration as well, seeing them as doing a good job of running things and effectively supporting the length of their program.
The fact that people thought the system worked well indicates that, for many, the structured environment played a crucial role in their stability and growth. This aligns with the notion that structured support can have a significant impact on the lives of young people transitioning into independent living. When programs have a clear schedule and meet basic needs, they can make people feel safe and help them grow, especially if they have been previously neglected.

Routine as Both Structure and Limitation

Some people thought that the institutional routine had some problems, even though it gave the institution a necessary structure. Some people thought that the strict rules regarding personal space and interactions could be too much, even though chores and devotionals were scheduled daily. There were times when people thought that the routine, especially in the Independent Living Program, made them feel like younger children by taking away their freedom and requiring them to continue caregiving tasks for others, which took away their own time and space to practice independently. One of the participants recounted,

"We had a daily routine from morning until evening. In the morning, we would wake up, eat, and then clean. After finishing our cleaning tasks, we had a schedule for washing dishes in the kitchen – everything had a schedule. We also had a set time for doing the laundry. That was our daily routine. In the afternoon, we had playtime. In the evening, we had dinner, followed

by devotion, and then movie time — but only if we did not have school the next day. If we had class, we went to bed early — we slept at 8 p.m."

Structure is important for young people who have been through trauma, but it is not enough on its own; it needs to be "relationally mediated." Perry and Szalavitz (2021) suggest that strict rules, without emotional support, can evoke feelings of control and powerlessness. Feeling like you are "constantly babysitting" or having limits on your personal freedom, even though you are in a program for independence, shows a possible "systemic oversight: the transition to independence is seen as a logistical or developmental milestone rather than as a clinically sensitive phase that needs targeted psychological support." This means that while routine gives things structure, an imbalance can make you feel "boxed in" and make it harder to become truly self-sufficient and express your feelings. Trauma-informed settings must strike a balance between consistency and kindness.

4.0 Conclusion

This study explored the lived experiences of neglected children residing in a care facility and highlighted the profound challenges they face due to early-life adversity. The findings revealed that most participants entered care at a young age due to socio-economic difficulties, including financial instability and lack of parental support. Their experiences were marked by emotional distress, absence of parental guidance, and difficulties transitioning into adulthood. Despite these challenges, the study found that meaningful interactions with service providers, such as caregivers and counselors, played a critical role in offering emotional, moral, and academic support. These interventions, along with personal coping mechanisms like faith-based practices and creative expression, contributed to the development of resilience and self-reliance. Ultimately, the research underscores the remarkable adaptability of these individuals and emphasizes the need for sustained support systems to facilitate a smoother transition into independent living.

Future researchers can build on this study's findings by exploring the longitudinal impacts of neglect on youth in independent living programs, as well as the effectiveness of various intervention strategies in supporting care leavers. Additionally, the research can be expanded to broader populations in different cultural or institutional settings to understand better the unique challenges faced by neglected children globally. By delving deeper into the experiences of neglected youth, future studies can further contribute to improving care practices and policies, enhancing outcomes for marginalized youth.

5.0 Contributions of Authors

This work was conducted solely by the author, who takes full responsibility for the study and manuscript.

6.0 Funding

The author declares that there has been no financial support for the research, authorship, and/or publication of this article.

7.0 Conflict of Interests

The author declares no conflicts of interest relevant to the content of this publication.

8.0 Acknowledgment

The researcher expresses profound gratitude to the Lord for His wisdom and guidance, which made this study possible. Thanks are also extended to the advisory panel members from the Polytechnic University of the Philippines, as well as to family, colleagues, and friends for their unwavering support. Special appreciation is given to the respondents from the residential care facility, whose shared experiences inspired and enriched this research.

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