

The lived experiences of resilience among mothers with histories of abuse

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Abstract

This narrative qualitative study investigates how Filipino mothers with histories of abuse develop resilience through motherhood within their everyday realities. The purpose is to explore the psychological mechanisms and cultural factors that enable these mothers to transition from trauma to transformative caregiving. Utilizing a narrative inquiry approach, the researchers conducted semi-structured interviews with five survivor-mothers in Lucena City, Philippines selected through snowball sampling and analyzed the data using thematic narrative interpretation. Findings reveal that motherhood serves as a vital turning point and awakens inner strength and a commitment to breaking intergenerational cycles of violence through gentler, communicative parenting. Despite financial struggles, participants navigated trauma by leaning on informal safety networks, such as siblings, neighbors, and *kumares*, and drawing courage from faith and their children. Parenting functions as a space for identity reconstruction and healing. Therefore, local government units and social workers should integrate these culturally grounded, informal support systems and spiritual strategies into formal trauma-informed parenting interventions to better support long-term maternal recovery.

Keywords: *motherhood, trauma-informed parenting, informal networks, Filipino survivor-mothers*

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1. Introduction

Motherhood is a transformative transition that often serves as a catalyst for personal growth, especially for survivors of physical, emotional, or sexual abuse. While trauma can erode self-worth, maternal responsibilities frequently reveal latent psychological strength (van Ee & Meuleman, 2024; Uy et al., 2023). In the Philippines, the Department of Health and national police recorded 1,809 abuse cases against women requiring medical attention between January and July 2023, involving physical assault (746), sexual abuse (647), and emotional distress (294) (Center for Women's Resources, 2023). This resilience is nurtured through critical protective factors. The Philippine Commission on Women (2025) identifies spiritual support, child-centered prioritization, and community participation as essential coping strategies that allow survivors to move beyond victimization toward a future defined by hope.

According to the 2017 National Demographic and Health Survey (NDHS), one in four (26%) ever-married Filipino women had experienced physical, sexual, or emotional violence by their husband or partner (Philippine Statistics Authority [PSA], 2018). This prevalence remained a critical concern during the global health crisis; in 2020 alone, over 15,000 cases of Violence Against Women and Children (VAWC) were documented as lockdowns trapped survivors with their abusers (Philippine Commission on Women [PCW], 2023). While the 2022 NDHS indicates a slight decline to 17.5%, the persistence of over 8,000 reported physical violence cases in 2021 underscores a chronic social problem that demands more than just legal intervention; it requires an understanding of how these women navigate their realities as mothers (PCW, 2023).

Despite thousands of cases reported under the VAWC Act, a research gap remains regarding how mothers navigate the transition from trauma to resilience. Current literature often prioritizes the pathology of abuse over the "inner strength" and informal networks vital for recovery (Sabri et al., 2022; Sorsa et al., 2023; Flasch et al., 2017). This study addresses this gap by recognizing the individuals behind the statistics, illustrating how parenting functions as a space for identity reconstruction. These findings inform psychologists and social workers of the need for trauma-informed, culturally sensitive interventions that empower survivors to convert suffering into purpose.

The purpose of this study is to explore the emergence of resilience by centering survivors' narratives and identifying recovery mechanisms. By examining how these women rebuild identity amid financial and psychological hardship, the study bridges clinical theory

with the everyday realities of Filipino mothers. It seeks to describe lived experiences, identify internal and external protective factors, such as faith and social bonds, and examine how personal healing impacts parenting styles. While statistics capture the breadth of the problem, they often fail to capture the depth of the recovery process.

2. Literature Review

2.1. Abuse

Abuse leaves psychological scars that profoundly impact a mother's self-worth, daily functioning, and caregiving. The enduring emotional burden often disrupts stability, with research linking histories of abuse to increased risks of depression, anxiety, and post-traumatic stress (Bany-Mohammed et al., 2025; Brewin et al., 2025). These struggles, compounded by unresolved trauma, can lead to emotional unavailability and insecure attachments. Consequently, the overwhelming demands of caregiving may trigger cycles of withdrawal and guilt (Hussin & Sabri, 2023).

In the Philippine context, the connection between abuse and motherhood is complicated by cultural and societal factors that often encourage silence and endurance. The Department of Social Welfare and Development (2023) reported a significant increase in abuse cases during the COVID-19 pandemic, where movement restrictions left many women trapped with their abusers. Cultural expectations around family preservation and sacrifice often make it difficult for many Filipino mothers to speak out. Specifically, Alampay (2024) revealed that Filipino mothers often suppress their emotional pain to maintain family harmony, influenced by cultural values such as "*pakikisama*" (social harmony) and "*hiya*" (shame). This quiet endurance, while viewed by the community as a form of maternal strength, often prevents internal healing and perpetuates cycles of emotional disconnection within the household. Furthermore, Austria et al. (2025) found that Filipino mothers who experienced physical or psychological abuse often struggled with emotional bonding and self-doubt, which oftentimes lead to psychological compromises that intended to shield children but resulted in emotionally strained parent-child relationships.

Physical abuse. Mothers who became pregnant as a result of physical abuse face unique and difficult challenges that extend beyond the immediate trauma (Alhusen et al., 2015). Pregnancy, which is typically seen as a hopeful and transformative period, may instead be experienced as a continuation of trauma, marked by fear, confusion, and deep emotional

turmoil. The trauma from physical abuse can weaken a mother's sense of safety and trust, which are critical components in building strong maternal bonds. Furthermore, the effects of trauma often extend into physical health; pregnant women who have endured abuse may face increased risks of complications, including high blood pressure, premature birth, or miscarriage (Krywko et al., 2022). Social stigma adds another layer of difficulty; in many communities, mothers who become pregnant because of abuse often face judgment or blame, leading them to hide their experiences instead of seeking help. This lack of open communication prevents them from accessing mental health services or support systems that could aid in their recovery.

Sexual abuse. Sexual abuse, particularly when it results in pregnancy, imposes profound psychological and emotional challenges on survivors (Trickett et al., 2011). The intimate nature of pregnancy and childbirth can trigger distressing memories, leading to heightened anxiety and symptoms of post-traumatic stress disorder (Horsch et al., 2024; Ginter et al., 2022; Ahsan et al., 2023). Survivors of sexual abuse are at increased risk of developing perinatal mental health issues such as depression and anxiety, which can disrupt the bonding process between mother and child (Trickett et al., 2011). In the Philippine context, cultural stigma and victim-blaming norms further silence survivors. Green et al. (2024) demonstrate how deeply ingrained cultural beliefs discourage open discussion about abuse, which prevents survivors from accessing necessary support and hinders their recovery. The implementation of trauma-informed care is essential in improving outcomes, ensuring that healthcare environments become places of safety rather than fear for survivors.

Emotional abuse. For mothers who became pregnant as a result of emotionally abusive relationships, the trauma can have long-lasting effects on their mental health and sense of self-worth. Emotional abuse often involves manipulation, degradation, and isolation, all of which erode a person's confidence (Khan & Akram, 2025). Research shows that emotional abuse significantly increases the risk of PTSD, particularly during and after pregnancy (Horsch et al., 2024; Ginter et al., 2022; Ahsan et al., 2023). In the Philippine context, culturally driven expectations surrounding motherhood often silence victims. Alampay (2024) found that societal norms such as "*pakikisama*", "*utang na loob*", and "*hiya*" contribute to the minimization of emotional harm within Filipino households. These values pressure mothers to endure abuse quietly, fearing judgment or rejection if they speak out. This silence deepens

emotional isolation and limits access to psychological support, strengthening the belief that personal suffering is a necessary sacrifice for family unity.

Psychological abuse. Psychological abuse, which includes emotional neglect and verbal aggression, remains one of the most insidious forms of maltreatment due to its deep influence on emotional well-being. However, recent research shows the potential for recovery; domestic violence survivors in the Philippines improved their psychological well-being by finding meaning in life and expanding their perspectives (Agyapas et al., 2025). Lausi et al. (2024) identified “psychological inflexibility” as a key factor mediating the negative effects of abuse, characterized by rigid cognitive patterns that limit an individual’s ability to respond to distressing thoughts. Enhancing psychological flexibility appears crucial for recovery, as it allows survivors to cope more effectively with trauma. In the Philippines, culturally sensitive support systems, social bonds, and faith contribute significantly to fostering this resilience.

2.2. Resilience

Resilience is the capacity to adapt, recover, and grow in the face of adversity, allowing individuals to maintain psychological well-being (American Psychological Association, 2020). For mothers with histories of abuse, resilience embodies their strength to rise and reclaim their lives. These women stand as powerful narratives of survival and empowerment. According to Van et al. (2022), psychosocial interventions empower mothers to nurture their children and foster resilience even amidst the chaos of shelter life.

In the Philippine setting, Jardin and Jaluague (2022) explored the experiences of domestic violence victims, revealing themes of reclaiming strength, self-confidence, and creating support systems. These findings emphasize resilience as a central element in the journey of abused women, where remarkable inner strength is demonstrated by standing up for their children and actively building support networks.

Individual attributes, which refers to the personal characteristics and internal resources, enable a person to cope with adversity. In mothers who have experienced abuse, these include self-efficacy, emotional regulation, and determination. Ugapay (2025) provides a rich exploration of how self-advocacy is a pivotal attribute, where survivors gradually reclaim agency by articulating needs and making empowered decisions. Gano and Austria (2025) emphasize that Filipino women draw on core attributes such as spiritual faith, hope, and self-

reflection to transcend trauma. These personal qualities enable women to creatively navigate and adapt to abusive environments.

2.9. Social Support

Community support plays an important role in developing resilience. Access to trauma-informed care and supportive networks significantly enhances parenting capacity (Bagheri et al., 2025). Despite systemic barriers like stigma, motherhood emerges as a powerful motivator for recovery. Lancaster et al. (2024) argue that community-based support groups significantly enhance emotional regulation while Santos and De Guzman (2025) emphasize the critical role of family support in the psychological recovery of abused mothers. Furthermore, government-led initiatives like the Bayanihan to Heal as One Act exemplify how community-level support mitigates socio-economic and emotional stressors for marginalized families during crises like the pandemic (DSWD, 2022).

Equally important are societal resources, such as formal systems and policies that provide safety and legal protection. According to Sorsa et al. (2023), comprehensive family services serve as vital resources that contribute to resilience. Similarly, funding for shelters and legal aid is a necessary initiative from the government. For instance, the 18-Day Campaign to End Violence Against Women led by the PCW raised awareness and mobilized communities to eliminate violence. These campaign activities, ranging from legal consultations to psychosocial support, show that resilience is strengthened not only by personal factors but by sustained, visible, and accessible societal interventions.

3. Methodology

3.1. Research Design

This study adopted a qualitative narrative research design to explore the lived experiences of survivor-mothers. Narrative research is uniquely suited for this inquiry as it focuses on collecting and interpreting individuals' stories to understand how they assign meaning to trauma and healing over time (Gavidia & Adu, 2022). This design allowed the participants to express their personal journeys in their own voices, providing rich, contextualized insights into the reconstruction of their identities and maternal roles.

The researchers determined that data saturation was achieved after the fifth interview, as the narratives began to show informational redundancy. At this stage, the core themes, such

as motherhood as a turning point and the rejection of punitive discipline that consistently recurred across different participants' stories, suggesting that further data collection would likely not yield substantially new insights into the shared patterns of resilience among this specific group.

3.2. *Participants of the Study*

The study utilized snowball sampling to recruit five (5) mothers in Lucena City, Quezon Province, who had experienced various forms of abuse. This sampling technique was chosen due to the sensitive nature of the topic, allowing the researchers to reach a “hidden” population through referrals from community organizations and initial participants. The focus was on mothers who had navigated the complexities of childcare while managing their own healing, regardless of age, to capture a diverse range of coping strategies and resilience processes. The summary of their backgrounds is presented in Table 1.

Table 1

Profile summary of mothers with histories of abuse

Participant Pseudonym	Age	Household and Family Structure	Abuse History and Context
Adelfa	53	Lives with her husband; mother of three grown children (ages 25, 20, and 18). Focuses on maintaining a supportive home.	Experienced emotional abuse at age 21. Faced fear and instability early in marriage due to a violent father-in-law.
Dalya	45	Resides in a rural area; manages a large household of seven children. Her husband works as a farmer.	Experienced physical abuse during youth while living with relatives; subjected to hitting and scolding.
Lily	-	Supports a large family of seven children (ages 10 to 26). Lives with her spouse, father, and several children.	Experienced childhood emotional and psychological trauma caused by a threatening uncle; led to early displacement.
Mirasol	63	Lives with her three unmarried children (ages 31, 25, and 22). Manages daily household and pet care.	Endured emotional and psychological abuse during marriage; separation occurred at age 50 following a husband's affair.
Rosalinda	37	Lives with her common-law husband and five children (ranging from age 17 to an unborn child).	Experienced physical and emotional abuse during childhood, primarily from her mother.

The selection of a small, purposeful sample is consistent with qualitative standards that prioritize 'information-rich cases' over statistical generalizability (Patton, 2015). In narrative inquiry, this depth is essential to uncover the intricate psychological 'turning points' that define the transition from trauma to resilience. Data saturation was achieved by the fifth participant, as the narratives reached a point of thematic repetition where no new dimensions of the resilience process were emerging.

3.3. Instrumentation and Data Gathering Process

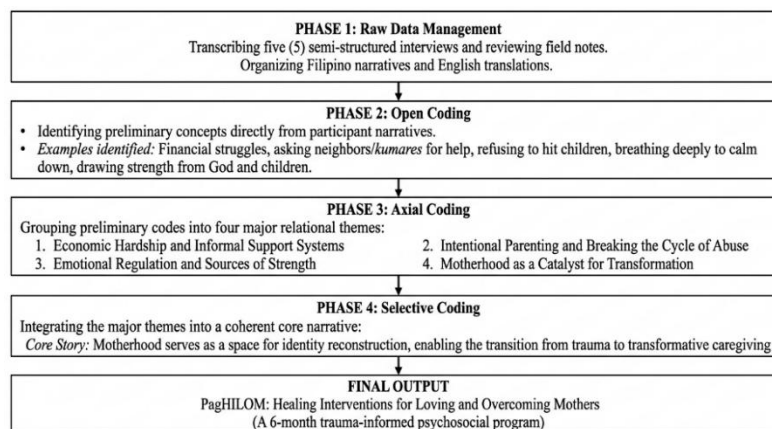
Data were collected using a semi-structured interview guide audited by a research specialist to ensure methodological rigor. The guide included open-ended questions focusing on maternal challenges, turning points, and effective support systems. Interviews were conducted in person in safe, private settings, using the participants' preferred language to foster an empathetic environment. Field notes were simultaneously taken to document non-verbal cues and emotional reactions, enriching the contextual data.

3.4. Data Analysis

The study employed thematic narrative analysis to examine the data. This process involved an iterative coding cycle: open coding to identify preliminary themes (emotional challenges, resilience factors), axial coding to explore relationships between these factors, and selective coding to combine themes into a coherent narrative. This systematic approach, integrated with field notes, ensured that the unique "story" of each mother was captured while identifying shared patterns of recovery and empowerment. As shown in Figure 1, this systematic analysis integrated field notes to capture individual stories and identify shared patterns of resilience.

Figure 1

*Thematic Narrative Analysis
Framework*



3.5. Research Ethics and Approval Process

The study's protocol was evaluated and formally granted approval by the Institutional Research Ethics Review Committee, which specifically assessed the risk-to-benefit ratio regarding the vulnerability of survivor-mothers. To ensure psychological safety, a three-stage trauma-informed protocol was strictly followed. Before the interviews, researchers conducted a structured psychological briefing where informed consent was obtained both in writing and through a verbal explanation in the local dialect. This process ensured that participants fully understood the study's sensitive nature and their absolute right to withdraw or skip questions without penalty. Under the Data Privacy Act of 2012, participants were also informed of the use of pseudonyms to maintain total confidentiality. During the interviews, the researchers practiced active emotional monitoring to detect physiological signs of distress, such as crying or trembling. In such instances, the protocol mandated an immediate pause of the recording to provide a non-pressured "cooling-off" period where participants could process their emotions in a safe space. Interviews only resumed upon the participant's explicit verbal confirmation of their comfort. After the sessions, a formal debriefing or "de-rolling" process was conducted to shift the focus from traumatic narratives to the participants' current strengths and resilience. Each mother received a physical directory of local psychological hotlines and social services for professional intervention. Finally, a follow-up check-in was conducted 24 hours later to ensure continued emotional stability and to monitor for any delayed distress.

4. Findings and Discussion

The participants shared their lived experiences with histories of abuse in their journey through motherhood. This section presents the themes identified through their narratives.

Theme 1: Limited Financial Resources for Daily Needs

Economic hardship shaped the everyday realities of mothering in this study. Limited financial resources, especially in relation to food, education, and basic needs, emerged as a constant source of stress. Table 2 captures the weight of these financial negotiations.

These narratives reflect the emotional weight of unstable financial conditions. This finding is reflected in the work of Jocson and Ceballo (2020), who examined how low-income Filipino mothers respond with intensified caregiving and strategic resourcefulness to protect their children's wellbeing despite limited material support.

Table 2*Participant narratives on financial hardship and maternal sacrifice*

Participant	Verbatim Statements
Rosalinda	<i>“Isa sa pinakamalaking hamon ang kahirapan. Kakulangan sa pera..” (One of the biggest challenges is poverty. Lack of money...)</i>
Mirasol	<i>“Laging hirap. Gabi – gabi ng nangungutang para makaraos lang... Kailangan mong kapalan na yung muka mo...” (Always struggling. Every night borrowing money just to get by... You have to swallow your pride...)</i>
Dalya	<i>“Hmm... yung pinaka mahirap siguro, nung sabay-sabay silang nag-aaral tapos halos wala kaming pera. Naiiyak ako noon kasi iniisip ko, baka maputol yung pag-aaral nila.” (Hmm... the hardest part was when they were all studying at the same time and we almost had no money. I cried then because I thought their schooling might be cut short.)</i>

Theme 2: Informal Support Systems as Sources of Stability

Stability, for many mothers, came not from formal institutions but from the people around them. Support did not always come in grand gestures; often, it came in small acts that made survival feel possible, as shown in Table 3.

Table 3*Informal support networks and community connection*

Participant	Verbatim Statements
Dalya	<i>“May mga pagkakataon, humingi ako ng tulong sa kapatid ko o sa kapitbahay. Simpleng tulong lang.. bigas, ulam.” (There were times I asked for help from my sibling or neighbor. Just simple help... rice, a dish.)</i>
Lily	<i>“Meron. Kumare ko. Pulis. Dun ako humingi sa kanya ng tulong... hanggang ngayon kami parin.” (Yes. My close friend, a policewoman. I asked her for help... until now we are still together.)</i>
Mirasol	<i>“...sa kapatid ako humingi ng tulong at sa mga kaklase ko kasi.....alam na nga nila yung nangyari sa akin.” (...I asked for help from my sibling and my classmates because... they already knew what happened to me.)</i>

These stories show that support was often found in unexpected places. This finding is aligned with the study by Gilmer et al. (2021), which found that informal support networks such as family, friends, and community members are essential sources of emotional stability and resilience.

Theme 3: Breaking the Cycle of Past Abuse

Childhood and relational abuse shaped how mothers approached parenting. Instead of replication of harm, they responded with intentional gentleness. Table 4 details their commitment to change.

Table 4*Narratives on intentional parenting and breaking cycles of violence*

Participant	Verbatim Statements
Adelfa	<i>“Kaya yung asawa ko hindi namin pinaranas sa pamilya namin na yung ganon.. yung naranasan namin doon...” (That’s why my husband and I never let our family go through what we experienced back then...)</i>
Dalya	<i>“...hinding-hindi ko ipaparanas yun sa mga anak ko... Ako yung gusto nilang maging sandalan, hindi yung katatakutan.” (...I will never let my children go through that... I want to be someone they can lean on, not someone they fear.)</i>
Lily	<i>“Sa mga anak ko yung naranasan ko noon ayokong maranasan nila ngayon..” (I don’t want my children to experience what I went through before.)</i>
Rosalinda	<i>“... Kaya ngayong ako ay ina na, pinangako ko sa sarili ko na hinding-hindi mararanasan ng mga anak ko yung naranasan ko noon.” (...Now that I am a mother, I promised myself that my children will never experience what I went through before.)</i>

These narratives reveal a clear intention to break cycles of abuse by creating homes where children felt secure. This finding is aligned with the work of Gano and Austria (2025), who examined how mothers intentionally reshape caregiving as a space for healing and emotional repair.

Theme 4: Communication-based Discipline in Filipino Motherhood

Mothers described discipline as a relational practice grounded in conversation rather than physical punishment. Table 5 explores these communication strategies.

Table 5*Thematic accounts of non-punitive and relational discipline*

Participant	Verbatim Statements
Dalya	<i>“Sa salita lang. Hindi ko sila sinasaktan...gusto ko lumaki sila na alam nilang mahal sila, hindi takot, hindi sugatan yung puso nila.” (Only through words. I don’t hurt them... I want them to grow up knowing they are loved, not afraid, not with wounded hearts.)</i>
Rosalinda	<i>“...mas pinipili ko ang magpayo at magpaliwanag. Itinuturo ko sa kanila ang tama at mali at paano humarap sa sitwasyon...” (...I choose to advise and explain. I teach them what is right and wrong and how to face situations...)</i>
Mirasol	<i>“Sa ngayon, inuuna ko ang paliwanag at payo bago ko sila hayaan magdesisyon.” (For now, I prioritize explanation and advice before allowing them to make decisions.)</i>

These narratives reflect a conscious rejection of punitive discipline. This finding is aligned with the work of Lasco et al. (2025), who examined how Filipino parents are increasingly turning to communication-based discipline that emphasizes emotional safety.

Theme 5: Motherhood as a Turning Point for Resilience

For many, becoming a parent was an emotional awakening that stirred inner strength. Table 6 presents how motherhood served as a catalyst for recovery.

Table 6

Motherhood as the primary motivation for personal transformation

Participant	Verbatim Statements
Dalya	<i>"...no'ng nagkaanak ako... parang doon ko lang naramdaman yung tunay na lakas... Sila yung dahilan bakit hindi ako bumigay." (...When I had children... that's when I truly felt strength... They were the reason I didn't give up.)</i>
Adelfa	<i>"Noong nagkaroon na ako ng mga anak. Naging matatag na ako, kase sila ang nagpalakas ng loob ko." (When I already had children, I became strong because they gave me courage.)</i>
Rosalinda	<i>"Kahit ang daming sugat ng nakaraan... Ang mga anak ko ang dahilan kung bakit ko gustong maging mas maayos na tao." (Even with so many wounds from the past... My children are the reason why I want to become a better person.)</i>

These narratives show that resilience was not about being fearless. It was about being afraid and still choosing to stand. Motherhood became the turning point not because it erased the past, but because it gave them a reason to rewrite it. Their children were not just part of their story. They were the reason the story continued. In choosing to protect, nurture, and love their children, these mothers also chose to protect, nurture, and love themselves. Every act of care became a step toward healing. Every moment of struggle became a chance to begin again. This finding is aligned with the study by Masten and Monn (2015), which describes resilience as a process shaped by caregiving roles, relational meaning, and the motivation to protect others. Their research shows how parenting can awaken emotional strength and support personal change, especially in the face of challenges.

Theme 6: Renewed Strength Drawn from Children, Faith, and Spouse

Strength was not something they found alone; it was received through those who stayed. Table 7 summarizes these external sources of grounding.

These narratives show that resilience was shaped by connection and faith. This finding is aligned with the study by Lee-Chua (2022), which found that Filipino resilience is often shaped by faith and enduring relationships.

Table 7*Thematic sources of spiritual and relational strength*

Participant	Verbatim Statements
Dalya	<i>“Unang-una, yung asawa ko... At siyempre, ang Diyos... kasi kung wala Siya, baka matagal na akong sumuko.” (First of all, my husband... And of course, God... because without Him, I might have given up long ago.)</i>
Mirasol	<i>“Syempre ang una ay Panginoong Diyos – lagi nya akong noginagabayan...” (“Of course, the first is the Lord God – He always guides me...”)</i>
Rosalinda	<i>“Una ang Diyos... Pangalawa yung kinakasama ko... Malaking bagay na may kasama akong hindi ako iiwan..” (First is God... Second is my partner... It means a lot to have someone who will not leave me.)</i>

Theme 7: Emotional Regulation Through Reflection and Reframing

Past trauma often resurfaced through triggers like loud voices. Table 8 emphasizes the conscious acts of emotional regulation used by the mothers.

Table 8*Coping mechanisms for managing trauma triggers and emotional reactivity*

Participant	Verbatim Statements
Dalya	<i>“Aa... minsan pag naririnig ko yung malalakas na sigaw, bumabalik yung takot... Pero ngayon... humihinga ako ng malalim...” (Ah... sometimes when I hear loud shouting, the fear comes back... But now... I take a deep breath...)</i>
Rosalinda	<i>“...naaalala ko yung sakit at takot... Pero pinapaalala ko sa sarili ko na iba na ang buhay ko ngayon...” (...I remember the pain and fear... But I remind myself that my life is different now...)</i>

Mothers used breathwork and relational connection to anchor themselves. This is aligned with the work of Liu et al. (2024), who found that reflection and reframing are key in helping parents respond to distress without harm.

Theme 8: Child Wellbeing as a Source of Emotional Relief

The simple presence of happy, safe children helped mothers regulate their own internal heaviness. Table 9 presents this reciprocal emotional flow.

These narratives reflect how emotional regulation was often anchored in relational presence. Mothers did not rely solely on internal coping strategies. Instead, they found comfort in the visible wellbeing of their children. Their children’s happiness became a mirror of hope, a reminder that despite hardship, something good was growing. Parenting, in this context, was

not just about giving care. It was also about receiving emotional strength from the very bonds they nurtured.

Table 9

Children's emotional state as a regulatory anchor for mothers

Participant	Verbatim Statements
Adelfa	<i>"...nagiging kalma ako kapag nakikita ko yung mga anak ko na- masaya naman silang nag-aaral." (...I become calm when I see my children happily studying.)</i>
Dalya	<i>"...tinitingnan ko lang yung mga anak ko... doon ako kumakalma." (...I just look at my children... that's where I find calm.)</i>
Lily	<i>"Kalma. Basta ako'y makita ko lang yung anak kong masaya, kalma na ako." (Calm. As long as I see my child happy, I am at peace.)</i>

This finding is aligned with the work of Plaza et al. (2024), who examined how Filipino mothers, particularly those experiencing emotional hardship, found calm and reassurance in their children's happiness. Their children's wellbeing became a source of comfort that helped them manage distress and reconnect with their caregiving role.

5. Conclusion

This study explored the narratives of Filipino mothers with histories of abuse to understand the mechanisms of their resilience and recovery. The research identified that Filipino mothers in Lucena City, despite experiencing physical, emotional, psychological, and sexual abuse, demonstrate remarkable resilience. These mothers manage everyday financial struggles through sacrifice and lean heavily on informal support systems, such as siblings, neighbors, "kumares" (godmothers/female friends)", and close friends. The research concludes that motherhood serves as a profound catalyst for personal transformation, allowing survivors to break cycles of violence through intentional, communication-based parenting and spiritual grounding.

Resilience and effective caregiving emerge from personal strengths, values, and support systems rather than from family structure or socioeconomic status alone. Motherhood provides a significant pathway through which survivor-mothers regain confidence and emotional steadiness. Caring for their children enables them to rebuild their identities and convert difficult experiences into motivation for creating safer, more peaceful homes.

The findings have notable implications for social work and community-based mental health interventions in the Philippines. It is recommended that local government units (LGUs) and the Department of Social Welfare and Development (DSWD) integrate trauma-informed parenting programs into their existing services. Future research should consider longitudinal designs to track the long-term impact of such programs on child development and maternal mental health. Moreover, there is a need for policies that strengthen informal community support networks, as these were found to be more accessible to survivors than formal institutions.

This study's qualitative insights are limited by a small sample of five participants from Lucena City, which may not represent all Filipino survivor-mothers. Additionally, the reliance on self-reported narratives is subject to memory and the participants' willingness to disclose sensitive details. Finally, as the research focused exclusively on maternal perspectives, future studies incorporating children or spouses could offer a more integrated view of family resilience.

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Institutional Review Board Statement

This study was conducted in accordance with the ethical guidelines set by the authors affiliated university. The conduct of this study has been approved and given relative clearance by the Research Ethics Review Committee regarding the data gathering involving human subjects.

AI Declaration

The author declares the use of Artificial Intelligence (AI) in writing this paper. In particular, the author used Gemini (AI) for the purposes of summarizing key research points and paraphrasing ideas to improve narrative flow. The author takes full responsibility in ensuring proper review and editing of contents generated using AI.

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