

Lived Experiences of Filipino Soldiers on Combat Deployment that Resulted in Enemy Casualties

Mary Joy S. Dean^{1*}, Vann Nathaniel C. Mangahas² & Dr. Teresita T. Rungduin³

¹⁻³Philippine Normal University, Manila, Philippines. Email: dean.mjs@pnu.edu.ph*

DOI: <https://doi.org/10.46382/MJBAS.2024.8212>



Copyright © 2024 Mary Joy S. Dean et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Article Received: 20 March 2024

Article Accepted: 26 May 2024

Article Published: 31 May 2024

ABSTRACT

This paper is a qualitative phenomenological study that explores the lived experiences of Filipino Soldiers on combat deployment that resulted in enemy casualties. Five (5) Filipino Soldiers who have experienced combat deployment that resulted in enemy casualties participated in this study. The present study adopted the phenomenological data analysis of Creswell (2014) to analyze the participants' responses. The findings revealed that the participants' perspectives about killing changed when they became soldiers. The participants experienced two types of encounters—intentional and accidental, with the enemies during the experience of the phenomenon. This study also revealed the psychological and emotional effects of combat deployment that resulted in enemy casualties to the participants and the coping strategies they used to deal with it. The psychological support that they received was also explored in this study. However, the participants gave contrasting answers regarding the support they receive; two out of five participants stated that they do not receive psychological support. Lastly, the study identified the personal definition of killing in combat to the participants, whereas they view it as a sport, a sacrifice, and a necessity.

Keywords: Filipino soldiers; Combat deployment; Killing in combat; Enemy casualties; Armed forces; Military operations; Military experiences; Phenomenology; Mental health; Military psychology.

1. Introduction

The Philippine military is the first line of defense of the Philippines against national and international threats that resulted from political conflicts. Filipino soldiers are exposed to combat and exchange in gunfire, which is life-threatening and detrimental to their mental health. Although these situations are just part of their job, experiencing this will affect their perceptions on morality and their overall well-being. One phenomenon experienced by soldiers during combat deployment is having enemy casualties. Depressive symptoms, PTSD, suicide thoughts, and other psychological issues have been connected to killing during combat (Kelley et al., 2019; Purcell et al., 2016; Maguen et al., 2012; Maguen et al., 2009). Hence, this study aims to explore the lived experiences of Filipino soldiers in combat deployment that resulted in enemy casualties.

Posttraumatic Stress Disorder (PTSD) is a common condition in the population of the military, which is caused by various factors that occur before, during, and after a traumatic event, which is combat deployment (De Guzman & Dela Cruz Fajarito, 2017). Along with combat exposure and its tendency to result in enemy casualties, being away from their family and loved ones in order to serve and protect the country, along with focusing on survival, are some of the challenges that Filipino soldiers face and are possible stressors (Reyes et al., 2020). Given these stressors and the limited attention to mental health in the Philippines, the availability of psychological help for soldiers is a concern.

This study aims to explore the definitions of killing while in combat, provide an overview of the psychological effects of combat exposure that resulted in enemy casualty, coping strategies that soldiers utilize after a stressful combat, and the psychological help offered by the government that awaits them after being deployed. The received

professional help to be identified is for ensuring that Filipino soldiers have good mental health post-deployment and help them improve resilience against traumatic events. However, due to the male-dominated nature of the military, certain stigmas are present and are acknowledged by soldiers.

In addition, the male stigmas present in the Philippine culture and the lack of significance given to mental health in the Philippines are factors that also affect the self-esteem of Filipino Soldiers. Soldiers tend to stigmatize seeking professional mental help because they often see it as a weakness (Iversen et al., 2011). Filipinos possess a masculine stereotype that all men should be dependable, especially men who are part of the force. Seeking professional help is viewed as odd and a sign of weakness for a long time in the Philippines (Church and Katigbak, 2000), and this means that soldiers may think that having this weakness equates to not being dependable at all.

1.1. Study Objectives

This study aims to explore the lived experiences of Filipino Soldiers on Combat Deployment that resulted in enemy casualties. Specifically, the present paper seeks to understand the following:

- a. The perspective of soldiers on killing before and after joining the military.
- b. The psychological effects of combat deployment that resulted in enemy casualties.
- c. The coping strategies utilized by soldiers to overcome combat-related stress.
- d. The psychological support that they receive from their organization and the government.
- e. The ascribed meaning of killing while in combat.

2. Literature Review

2.1. Combat Deployment and Mental Health

The deployment of soldiers in combat zones especially those will result in enemy casualties or killing while in combat can significantly affect their mental health and well-being (Kelley et al., 2019; Purcell et al., 2016; Maguen et al., 2012; Maguen et al., 2009). Several studies have discussed the relationship of deployment to the increased risk of mental health issues, including post-traumatic stress disorder (PTSD), depression, anxiety, and substance abuse (Bonanno et al., 2012). These may have a negative impact on the soldier's daily life such as having trouble in adjusting to post-deployment life that may worsen their mental health and well-being (Gorman et al., 2011). Hence, in maintaining the mental health and well-being of military personnels, it is essential to identify and address their mental health needs. However, there is still a stigma associated with seeking and availing mental health services (Gorman et al., 2011). Because of the traditional masculine attributes displayed by soldiers, many avoid receiving mental health care because they think it will reflect poorly on them and make them unsuitable for promotions and redeployment (Gorman et al., 2011). According to the findings of the same study, soldiers view stigma as a significant determinant of whether or not they seek mental healthcare, and those who decide against seeking assistance are less resilient than those who do.

2.2. Potentially Traumatic Events (PTE) of Soldiers

Potential traumatic events are events that are bound to cause significant psychological distress or trauma. These events can include natural disasters, accidents, and interpersonal violence such as sexual assault or domestic violence (American Psychiatric Association, n.d.). Soldiers are exposed to potentially traumatic events (PTE) during their military service, which can have a significant impact on their mental health. The impact of PTE varies on individual factors such as preceding mental health conditions, social support, and exposure to trauma prior to PTE (Hoge et al., 2004). In most cases, exposure of soldiers to PTE results in post-traumatic stress disorder (PTSD). According to DSM-5, PTSD is characterized by the presence of four cluster symptoms (intrusion, avoidance, arousal, reactivity) that develop after exposure to a traumatic event (American Psychiatric Association, 2013). In addition, most cases of PTSD among soldiers occur only after combat deployment. According to the experiences of war veterans, flashbacks, shell shock, and combat fatigue are some of the effects that most veterans suffer from (Blakemore, 2020). Hence, strong social support is essential to war veterans suffering from PTSD (Jakupcak et al., 2010).

2.3. Perspective of Filipino Soldiers on Mental Health Care

There is a significant gap between soldiers' needs for getting their mental health addressed and treatment and the rate of those who seek it (Zinzow et al., 2012). In the United Kingdom, soldiers who refuse to seek professional help but are suspected to have PTSD symptoms possess stigmatizing beliefs about mental health care, viewing it as something to be embarrassed about (Iversen et al, 2011). As a result of this self-stigma, soldiers internalize their negative beliefs that could cause low self-esteem. Soldiers fear that seeking professional help may be seen as a weakness, and they are worried about being viewed negatively by their commanding officers and fellow soldiers that may develop low regard for them (De Guzman & Dela Cruz Fajarito, 2017). The Filipino masculine stereotype to be dependable is possessed by most Filipino soldiers and since seeking professional help is perceived as a weakness, engaging in mental health care is seen as not being dependable (Church & Katigbak, 2000). In addition, participants of De Guzman & Dela Cruz Fajarito's study felt like they have lost their "dangal" after being diagnosed with PTSD. Dangal is translated from Filipino as honor from within (Salazar, 1985). Filipinos have a value of being family-centered or "maka-pamilya" (Andres, 1986), and Filipino soldiers diagnosed with PTSD claim that social support from their families was their deal breaker for seeking professional help.

3. Methodology

3.1. Qualitative Design and Methodology

The current paper utilized a qualitative research design to obtain an in-depth understanding of the lived experiences of Filipino Soldiers who experienced combat deployment that resulted in an enemy casualty. The qualitative research design is an approach that aims to investigate an individual's perspectives on their beliefs, experiences, and meaning systems (Mohajan, 2018). Specifically, this paper used a phenomenological research design among the subsets of the qualitative research paradigm. Phenomenological research is a qualitative research approach that determines the key components of a phenomenon's human experience through the research

participants' perspective (Creswell, 2009). It describes the phenomenon's collective meaning based on several people's lived experiences (Creswell, 2014).

3.2. Research Site

The present study used a one-on-one interview to gather data which was conducted through an online video call using Google Meet or Zoom. A Google Form link was distributed to the possible research participants. After completing the form, the researchers messaged the participants confirmation of the mode and schedule of the interview.

3.3. Research Participants

Purposive sampling was utilized in this study. There is a total of five Filipino soldiers who participated in this study. Each participant has experienced combat deployment that resulted in enemy casualties. This study included any Filipino soldiers who experienced the said phenomenon regardless of their rank and years of service. Table 1 provides a summary of the participants' demographics.

Participant 1 is a 30-year-old male who is currently single. He has been serving as a soldier for eight years—his current rank is First Lieutenant.

Participant 2 is a 27-year-old male who is currently single. He has been serving as a soldier for three years—his current rank is Second Lieutenant.

Participant 3 is a 33-year-old male who is currently married. He has been serving as a soldier for 11 years—his current rank is Corporal.

Participant 4 is a 35-year-old male who is currently married. He has been serving as a soldier for 11 years—his current rank is Captain.

Participant 5 is a 34-year-old male who is currently single. He has been serving as a soldier for 12 years—his current rank is Captain.

3.4. Data Collection

The data was collected through an online one-on-one semi-structured interview. Prior to the interview, the possible research participants were asked to answer a Google Form. The said Google Form contains the informed consent, the purpose of the study, the participant's demographics, and information about their availability for an interview. Completing the form meant agreeing to participate in the study and giving consent to the researchers to use their interview answers in data analysis. The researchers then messaged the participants informing them about the confirmation of the mode and schedule of the interview; the message included a Google Meet link or a Zoom Meeting Link.

Before formally starting the interview, the researchers first introduced themselves, discussed the study's objectives and the interview guidelines, and asked permission to record the interview. In order to obtain the lived experiences of the participants, the researcher used a semi-structured interview guide containing questions about their

experiences in combat deployment that resulted in enemy casualties. The area of discussion includes their perspectives on killing before and after being a soldier, the process of combat deployment, psychological challenges associated with their lived experiences of the phenomenon, coping mechanisms, psychological support that they are receiving, and their descriptions of killing while in combat deployment. Table 2 lists the summary of the areas of discussion with its corresponding sample questions.

3.5. Data Analysis

The study adopted the approach to the phenomenological data analysis of Creswell (2014). After the interview, each recording was transcribed. Then, the researcher conducted horizontalization by reading the transcription of the interview and highlighting important sentences. The important sentences were then developed into a cluster of meanings. This cluster of meanings was transformed into themes. The emergent themes were then analyzed to find the connections between each theme. Some themes intersected and became subthemes. The highlighted important sentences, subthemes, and emergent themes were then used to describe the lived experiences of Filipino soldiers in combat deployment that resulted in enemy casualties.

3.6. Role of the Researcher

In a qualitative research design, the researcher's primary role is to examine and understand the participants' lived experiences (Alase, 2017). In phenomenological research, the participants are also referred to as "co-researchers" because they are included in the definition of the phenomenon's essence alongside the researchers (Moustakas, 1994 as cited in Yuksel & Yildirim, 2015). Hence, one of the roles of the researchers is to inform the participants about the research's purpose, objectives, background, and selection process of participants. Researchers also have an active role in urging participants to share detailed information about their lived experiences. Lastly, the researchers must separate themselves from their preconceived notions of the phenomenon in order to accurately respond to the research questions and objectives through the perspective of the participants.

3.7. Methods of Validation and Ethical Standards

The interview guide questions, and the protocol were reviewed by the course professor. The researchers constructed an interview guide and protocol consisting of the project brief, discussion guide, introduction of researchers, introduction of objectives, interview guidelines, interview questions, and conclusion. The researchers only started interviewing the participants after receiving the approval of the course professor. The method of bracketing was also employed by the researchers wherein they set aside their preconceived perceptions about the phenomenon being studied to ensure that the personal perspectives of the researchers would not affect the understanding of the lived experience of the participants (Chan, Fung & Chien, 2013).

In ensuring the data privacy and protection of the participants, the researchers ensured that no identifiable information about the participants was included in this study. The interview recording, transcription, and the personal information of the participants were also kept confidential and secured. The participants were also given informed consent, where all the necessary information about the research was included. The researchers also provided their contact details to the participants if they had further questions about the study. Additionally, no

deceptive approaches are used in this study's research process to ensure a positive outcome. Lastly, the participants were allowed to withdraw their participation at any stage of the study.

Table 1. Summary of the Participants' Demographics

Participant	Age	Civil Status	Rank	Years of Service
1	30	Single	First Lieutenant	8 years
2	27	Single	Second Lieutenant	3 years
3	33	Married	Corporal	11 years
4	35	Married	Captain	11 years
5	34	Single	Captain	12 years

Table 2. Summary of the Areas of Discussion with Corresponding Sample Questions

Area of Discussions	Sample Questions
1. Perspectives on Killing Before and After Being a Soldier	How do you view killing before being a soldier? How do you view killing now that you are a soldier?
2. Process of Combat Deployment	Can you describe the situation where you first experienced a combat deployment that resulted in enemy casualties? How did it make you feel?
3. Psychological Effects and Coping Mechanisms	How does the experience of combat deployment that resulted in enemy casualties influence your mental health? What coping strategies did you employ in dealing with the effects of killing while in Combat on your mental health?
4. Psychological Support Received	How can you describe the psychological support that you receive from the government or your institution?
5. Descriptions of Killing During Combat Deployment	How do you define killing in combat?

4. Results and Discussion

The data analysis revealed seven overarching themes that describe the lived experiences of Filipino soldiers in combat deployment that resulted in enemy casualties.

4.1. Perspective on Killing as a Civilian

The first theme discusses how the participants viewed killing before becoming soldiers. Specifically, it discusses how the participants saw killing as a sin to the rule of law and the law of God and as an unfamiliar experience.

Killing as a sin to the rule of law and the Law of God: The first subtheme describes how the participants viewed killing as prohibited by the Law. They also saw killing as a sin in God's eyes.

Participant 2: "Dati, para saakin pagpatay is a crime ganun, masama sa mata ng Diyos." (*Before, for me, killing was a crime, like that, something that is bad in the eyes of God*)

Participant 3: "As a civilian, kapag makarinig kami non na patay, kahit anong klase pagpatay, brutal man o hindi, masyadong mabigat samin yan...Lalo na kapag relihiyoso ka, hindi sanay sa ganong environment." (*As a civilian, when we hear about someone being killed, any kind of killing, whether brutal or not, it's really heavy for us... Especially if you are religious and not used to that kind of environment.*)

Death as a familiar concept: Because of their family background and previous job, some participants' felt like dealing with death is something that is not new. However, the experience of deliberate killing is unfamiliar to them.

Participant 4: "Before akong naging soldier, ang profession ko kasi is nurse, nurse ako by profession so dealing with death is hindi naman na bago sakin. Yun lang, death through natural causes and due to sickness, pero yung deliberately wala pa kong experience non nung civilian ako." (*Before I became a soldier, I was a nurse by profession, so dealing with death is not new to me. However, it is only death through natural causes and due to sickness, but I deliberately had no experience when I was a civilian.*)

Participant 5: "Nung civilian ako, kasi sakin hindi siya bago, kasi coming from a family of military kami. Napag-uusapan siya, mga ganon. Pero yun nga, in depth, may naiisip ka na siguro hindi naman aabot sa ganon, parang may other means bago aabot sa ganon." (*When I was a civilian, it wasn't new to me because I come from a military family. It was talked about, things like that. But in depth, you think maybe it wouldn't come to that, like there might be other means before it gets to that point.*)

4.2. Perspective on Killing as a Soldier

The second theme discusses the participants' perspectives on killing as a soldier. Specifically, it discusses how the participants saw killing as justified and how their view on killing has three stages.

Justified Killing: Contrary to their perspective on killing as a civilian, when the participants became soldiers, they now viewed some killings as acceptable. A killing is justified if it is purposeful and for the common good. They also see killing as part of their jobs.

Participant 2: "Iba naman kasi yung murder sa justified killing eh. Yung justified killing kasi, it is a part of our job para ma-achieve yung peace and order na minamandate namin eh." (*Murder is different from justified killing. The justified killing is a part of our job to achieve the peace and order that we mandate.*)

Participant 1: "...purposeful man din tsaka para sa good..." (*[it is okay if it is] purposeful and for the [common] good*)

Participant 3: "Pag entry pa lang namin sa military service, gigisingin na yung attitude mo don, na possible na ganto mangyari, possible na mamatay ka, makakkita ka ng patay, or makapatay ka." (*As soon as we enter the military service, your attitude will be awakened, that something like this may happen, you may die, you will see someone dead, or you will kill someone.*)

Participant 5: "So, ang utak mo is you take an offensive to make a defense, parang ganong ang dating eh. Na to protect yourself, to protect your people, to protect your area of operations." (*So, in your brain, you have to take an offensive to make a defense; that is how it is like. To protect yourself, to protect your people, to protect your area of operations.*)

Stages of Soldier's View on Killing: After being a soldier, one of the participants said that the perspective in killing could be divided into three stages. The first stage is the denial. The soldier will refuse to believe they killed an enemy during an encounter. This is the worst and the hardest stage because this is the stage where the soldier still does not realize that their circumstances are now different compared to when they were still civilians. Hence, their perspective on killing as civilians might not apply to their circumstances as soldiers.

Participant 4: "Yung first encounter ko, kumbaga nung first view ko sakanya, meron ka pang pagkadenial pa saakin yon na di namin ginawa yon. Sa mga first encounter ko kasi, ay hindi pala firrst, sa mga series of encounter ko, puro unconfirmed body counts kasi, small group tactics kami. They were able to outmaneuver us, they were able to retrieve the dead, pero may mga mga naiwan na mga gamit, pero judging the amount of blod stains. Sa first encounter nakita ko kasing bumulagta yung tao talaga eh. 15 meters lang siya sa akin, so yun, yun talaga yung worst experience ko. Sa level na yon, during my soldiery, yun yung parang hardest stage na kailangan ko i-deal." (*My first encounter, like my first view of it, I was still in denial that we did that. In my first encounters—actually, not just the first, but in a series of encounters—they were all unconfirmed body counts because we were using small group tactics. They were able to outmaneuver us and retrieve the dead, but they left some items behind, and judging by the amount of blood stains... In my first encounter, I actually saw the person fall. He was only 15 meters away from me, so that was really my worst experience. At that level, during my time as a soldier, that was the hardest stage I had to deal with.*)

The second stage is adaptation. The soldier can now adapt and cope with the thought experience of killing during a firefight.

Participant 4: "Yung parang middle stage saakin, after my third encounter, yun, parang don, medyo nakakacope up, hindi na siya as harsh as the first one pero hindi pa rin ako immune, or manhid as I am now. Hindi naman totally manhid, meron pa rin naman, pero yun nga, I was able to learn how to deal with it. Yun nga parang naka-adapt na ko at this stage." (*The middle stage to me was like, after my third encounter, it is like, I can cope a bit, it is not as harsh as the first one, but I'm still not immune, or numb as I am now. It is not totally numb, you still feel something, but that's it; I learned how to deal with it. It seems like I was able to adapt at this stage.*)

The last stage is the perspective of killing as something normal. The soldier felt like killing was a typical experience during a firefight. However, they still save the injured enemy as much as they can.

Participant 4: "Yun nga, kagaya ng sabi ko sa last stage, although hindi mo masabi na totally manhid, kumbaga parang normal, parang ganon. Pero kasi, hindi naman din, when it comes to our enemies naman, we deal the lethal blow, pero if given the chance naman, magsubside yung firefight, and nakita namin na buhay pa, instead of finishing off, ang thinking ko naman na ngayon is pwede pang salbahin." *(That's it, like I said in the last stage, although you can't say that you are totally numb, it seems like it is normal, like that. However, when it comes to our enemies, we deal with the lethal blow, but if given a chance, the firefight subsides, and we see that the enemy is still alive instead of finishing them off; my thinking now is that the enemy can still be saved.)*

4.3. Process of Combat Deployment

This theme describes how a firefight between the soldiers and the enemies starts. Particularly, the two subthemes describe the two types of encounters with enemies that the participants experienced.

Intentional Encounter: During the day of the firefight, the soldiers were active and purposely found their enemies. This includes finding the enemy's camp and following the tasks or objectives.

Participant 1: "First combat deployment, siguro first combat deployment ko ano, yung last September. With regards to details, test mission namin yan sa area ng Compostela Valley. Siguro yan muna, general idea muna ibibigay ko. Pero kung paano mangyari, ano yun, kung naaalala ko, may binigay samin na target, madaling araw, nakafix yung kalaban, nasa camp sila, naka standby lang sila sa isang lugar holding a defensive position. Nung nagkavisual na kami, nakita namin sila nakatambay, nakaduyan yung nakaduty tapos ayun na, yun yung nangyari." *(First combat deployment, probably my first combat deployment, was last September. With regards to details, that was our test mission in the area of Compostela Valley. I guess that's it, I'll give a general idea first. But as for how it happened, if I remember correctly, we were given a target, early in the morning, the enemy was fixed, they were in camp, just waiting in one place holding a defensive position. When we had visual contact, we saw them loitering, the one on duty was lounging, and that's what happened [that is when the firefight started].)*

Participant 4: "My first encounter was in Northern Samar. Hindi na ko bago sa combat operations that time. That time, two months na kong nagooperate sa bundok pero walang combat encounters. During the third month, second week of combat maneuvers and operations, binigyan ako ng target packet. Kapag sinabi kasing target packet, ano yun eh, intelligence packet. Na nandodoon na yung mapa, nakabilog na kung saan location nung enemy. Then may guide na maggaguide saamin para hindi namin mahit yung enemy defenses, para mahit namin yung camp...From the mountains, lumabas siya, walking towards the town. So, yung mga troops ko pa nga non nagkantayawan, nagbiruan "Sir, Sir yan na yung kampo ng kalaban." Tapos siguro dahil na rin sa ingay na rin nila, and ano na rin sila, kumbaga, kumpyansa na, nagtatawanan kami sa bundok, only to find out na yung tao tumakbo pabalik kung saan siya nanggaling. So yun na, isang indicator na yon na positive, so we rushed up yung position niya, yung place niya, only to find out na nawarning sila, and nakaabang sila saamin. Dun nag into yung firefight, pero luckily, yung troops ko kasi were able to maneuver to a place na hindi nila expected na pupuntahan namin. Sa bangin kasi kami nagmaneuver eh. So after, ginagapang namin pataas, nakita pa namin yung tao na nakatayo, na hinahanap kami. So, what happened was during the first volume of fire papunta dun sa location ng kalaban, nakita talaga namin, ako

personally, nakita ko yung, ang bala kasi kapag tumama sa katawan ng tao, nagkakaroon ng cloud na pula eh, yung parang puff ng blood dahil sa velocity ng bala. So, I knew then na confirmed kill yon kasi dibdib yung tama niya.” *(My first encounter was in Northern Samar. I wasn't new to combat operations at that time. We had been operating in the mountains for two months without any combat encounters. During the third month, in the second week of combat maneuvers and operations, I was given a target packet. When they say target packet, it's an intelligence packet. It contains a map with the enemy's location marked. Then there's a guide who will lead us, so we won't hit the enemy's defenses but hit their camp... He came out from the mountains, walking towards the town. So, my troops were teasing each other, joking, 'Sir, Sir, that's the enemy camp.' Maybe because of their noise and, you know, their confidence, we were laughing in the mountains, only to find out that the person ran back to where he came from. So, that was one indicator that was positive, so we rushed up to his position, his place, only to find out that they were warned, and they were waiting for us. That's when the firefight began, but luckily, my troops were able to maneuver to a place they didn't expect us to go. We maneuvered along the cliff. So after that, as we crawled upward, we saw the person standing, looking for us. So, what happened was during the first volume of fire towards the enemy's location, I personally saw the bullet because when it hits a person's body, there's a cloud of red, like a puff of blood because of the bullet's velocity. So, I knew then that it was a confirmed kill because it hit the chest.)*

Accidental Encounter: During the day of the firefight, the soldiers were not actively finding the enemies. The soldiers were either doing something else or were just observing and walking around their camp. Hence, a firefight was not expected.

Participant 3: “nasa Agusan Del Norte. Syempre bagong sundalo, pag-alis niyo dito sa kampo, expected niyo na ang pupuntahan niyo ay kalaban. Pagdating namin sa area, yung mission namin is seven days, three days pa lang habang kumakain kami ng tanghali, hindi namin alam na may malapit na pala yung kalaban. Dahil nga may SOP na tinatawag yung mga sundalo, discipline, noise discipline, so mas nadetect namin yung kalaban. Hindi nila alam pala na nandon rin kami. So ang nangyari, naunahan namin yung enemy, naunahan namin sila ng putok. Dun pa lang nawalan na sila ng diskarte. Umabot ng firefight ang 15 minutes sa report, yun nagkaroon ng isang enemy casualty. ” *(In Agusan Del Norte. Of course when you are a new soldier, once you leave the camp you already expect that you will go to the enemies. When we arrived in the area, the mission was for seven days, on the third day, while we were eating our lunch, we did not know that there were already enemies near us. Because of the SOP that the soldiers call, discipline, noise disciple, we were able to detect the enemies. They also did not know that we were there. So, what happened was we were able to fire ahead of them. They just lost their strategy. The firefight reached 15 minutes in the report, and there was one enemy casualty.)*

4.4. Psychological and Emotional Effects

The fourth theme outlines the psychological and behavioral effects experienced by the participants that are associated with combat deployment that resulted in enemy casualties.

Uneasiness: After the encounter, the soldiers experience uneasiness. Wherein they constantly think about what happened, and the enemy casualty.

Participant 1: "...parang di ka mapakali. Parang gising ka lang parati, iniisip-isip mo pa rin yung nagawa mo."
(...you feel uneasy and restless. It's like you're always awake, still thinking about what you've done.)

Participant 3: "3 days akong nagiisip, naiimagine ko yung itsura nung enemy casualty...Bata pa kasi yung enemy casualty namin, menor de edad pa." *(I was thinking for 3 days, I could imagine the appearance of the enemy casualty... Because our enemy casualty was still young, still a minor.)*

Difficulty in Sleeping: The soldiers' experiences difficulty in sleeping after the encounter that resulted in enemy casualties. Almost all the participants mentioned that during the first few days after the encounter, they are having difficulty in sleeping because they cannot erase the image of the enemy casualty to their minds.

Participant 4: "...medyo mahirap, mahirap matulog. Kita mo yung ano, yung image na paulit-ulit, tapos naaninag mo pa yung mukha niya. So yun, parang, medyo mahirap, mahirap matulog, parang, it eats you up inside kasi hindi ka naman pinalaki na maging killer. Wala namang parents na nagpapalaki ng anak nila ng ganon." *(...it's a little hard, it's hard to sleep. You see the image repeatedly, then you can even see his face. So, it's like, it's a little hard, it's hard to sleep, it's like, it eats you up inside because you were not raised to be a killer. No parents raised their children to be like that.)*

Change in Behavior: The soldiers, even their loved ones noticed a change in their behavior. Some participants became reserved because of what happened. One soldier became irritable because on top of the encounter that resulted in enemy casualties, he was also physically injured.

Participant 5: "Iritable, actually, babalik ka ng bahay, syempre binata ka eh, dun ka pa rin sa family mo eh, naobserve nila yung mga changes. Actually nagets ko kung bakit yung tatay ko parang baliw, hindi naman parang baliw, parang maliit na bagay, parang ganon. Kasi nga yung sinasabi ko sayo, na grace under pressure ka sa troops, hahanpan mo yun ng outlet, so minsan, dahil pamilya na yung kasama mo sa bahay, kilala mo na, hindi ka na nahihiya... dun mo nalalabas. Which is ako naman kapag hindi ako stress, kapag good mood, naexpress ko yan sakanila. Pasensya na medyo tinopak nanaman ako." *(Irritable, actually, when you return home, of course, being single, you're still with your family, they observe the changes. Actually, I understood why my father seems a bit crazy, not really crazy, [gets mad to] just minor thing, like that. That's what I'm telling you, that when you are in front of your troops you have to show them, grace under pressure, you'll find an outlet, so sometimes, because your family is at home, you already know them, you're not ashamed anymore... you get angry at them instead. But when I'm not stressed, when I'm in a good mood, I can express it to them, then I'll apologize for my behavior.)*

Feelings of Sympathy and Sadness for the Enemy Casualties: After the firefight, soldiers feel sympathy for the killed enemy because they feel like they are also a victim of propagandas. They are still humans with family hence, they feel sad because of their situation and with what happened.

Participant 2: "Syempre yung buhay kasi diba sagrado kasi ang buhay ng isang tao. Hindi natin pwede itigil yung buhay kasi wala tayong karapatan eh. Sabi nga nila, ang Diyos lng ang nagbigay ng buhay natin, ang Diyos lang ang makakabawi nun kaya sa part ko na bilang isang tao, nandun pa rin yung awa sa tao na yun tapos sa family nya. Biktima lang din naman siya eh kasi nagawa niya yun kasi mali yung propaganda na naturo sa kanya. Dun ako

naawa sa family niya eh kasi biktima rin sila ng maling propaganda." (*Of course, life is sacred. We can't just stop the life of a person; we don't have the right to do that. Just like what they say, only God can give us our life, God is the only one who can take it back, hence, as a person, there's still compassion for the person, then his family. They are still victims, he only did those because of the wrong propaganda that was taught to him. I feel pity for his family, because they are also victims of the wrong propaganda.*)

Participant 1: "Pero pagpunta mo mismo doon sa pinangyarihan, ano pa din eh, parang malulungkot at malulungkot ka rin. Kasi syempre, tao parin yung napatay mo." (*But when you actually go to the scene, it still feels sad, really sad. Because, of course, it's still a person you killed.*)

Participant 3: "So ang naramdadaman ko don na nakakita ako ng mismong actual, na kami mismo dahilan bakit nakitil ang buhay niya, medyo may awa siya kasi tao yung nadisgrasya. Hindi siya hayop, pare-parehas kami, may pamilya, ang inisip ko na lang don ay sa kinagisnan namin, sa kahit 1 yr pa lang ako sa serbisyo noon, nakita ko na mali yung ginagawa nila sa tao. Itinanim ko na lang sa isip ko na di baleng mabawasan yung mga masasamang tao, ang matira is yung mabubuti..." (*So what I felt when I saw the actual [casualty], that we were the reason why his life was taken, I felt pity because he was a human being who was killed. He's not an animal, we're all the same, we have a family, the only thing I thought about was based on what we grew up with, even though I was only in the service for just a year back then, I saw that what they were doing to people was wrong. I just planted in my mind that it's okay to reduce the bad people, what's left are the good ones..."*)

4.5. Coping Strategies

The fifth theme enumerates and discusses the coping mechanisms that the Filipino soldiers employed to overcome the negative psychological effects associated with combat deployment that resulted in enemy casualties. Specifically, it highlights how communication with the family and fellow soldiers, sports, other games, and entertainment, changing the environment, clinging to faith, isolation and substance use helped them cope.

Communication to the Family and Fellow Soldiers: One of the most common coping strategies used by the participants was communicating with their families and their fellow soldiers. The respondents highlighted the importance of having somebody to talk to about life.

Participant 1: "... usap-usap kayo dapat sa loob ng team, kada unit merong camping." (*You should talk to each other within the team, each unit has camping.*)

Participant 3: "Makipagkwentuhan ka sa mga kabatch mo sa ibang topic pero hindi tungkol dun sa engkwentro. Dapat future ng pamilya, future mo ang pagkwentuhan, ang pagtuunan ng pansin... Kasi kung hindi, hindi ka makipag-usap, hindi mo libangin sarili mo, wala rin namang mangyayari. Di mo na maiibabalik, wala na. Ang isipin mo na lang maglibang ka sa sarili. Tignan mo yung future ng pamilya mo para mabali yung isip mo don. Kesa naman ikaw, yun lagi sinasabi namin, kesa ikaw naman madisgrasya kasi may nag-aantay sayong pamilya." (*Talk to your batchmates about other topics but not about the encounter. The focus of the conversation should be about the future of your family, your future... Because if not, if you don't talk to others, if you are not entertaining yourself, nothing will happen. You can't go back to what happened, it is already done. Just think about*

entertaining yourself. Look at the future of your family to distract your mind. It's better that it is not you, that's what we always say, it's better for you to be safe because you have a family waiting for you.)

Sports, Other Games and Entertainment: Another common coping strategy that the participants use is involving themselves in sports. Online games and other entertainment also help them forget about what happened.

Participant 1: "Tapos isa pa yung iniinvolve kami sa sports, maraming ganun dun, sports" (*One more thing is that they involve us in sports, there's a lot of sports there.*)

Participant 4: "Saakin, videogames, nagvividogames ako para maalis ko yung thoughts ko don. Tapos, gigabytes of movies, series, panoorin ko siya hanggang antukin ako." (*For me, videogames, I play videogames to get rid of my thoughts. Then, gigabytes of movies, series, I watch them until I fall asleep*)

Changing of Environment: Participants also like to change their environment through travelling when they are on vacation or if they have free time. Most of them like to go to the beach to relax.

Participant 2: "Mag unwind, sakin, basta lumabas lang ako, pumunta sa beach ganun. Sceneries. Be with nature." (*Unwind, for me, as long as I go out, go to the beach like that. Sceneries. Be with nature.*)

Clinging to Faith: The participant's sense of faith to God was also an important coping mechanism. Before an encounter, they would pray that God will protect them, and they go to church when they have the chance to ask for guidance.

Participant 3: "Ang pinakabackground mo jan is yung sa taas. Humihingi ka ng kaligtasaan sakanya, so nung nakita mong may casualty na sa kabila, ibig-sabihin non, dinidinig na ng panginoon ang dasal mo. Ibig sabihin kagustuhan na ng panginoon ang pangyayari." (*Your main background is the one above. You ask for safety from him, so when you see that there is a casualty on the other side, it means that the Lord is listening to your prayer. It means that the lord wills the event.*)

Participant 2: "Kung pwede, magsimba ka ganun, seek guidance sa ating Panginoong Diyos." (*If possible, go to church, seek guidance from our Lord God.*)

Isolation: One of the participants mentioned that one of his coping strategies is to isolate himself for a moment, so he could think about what he should say and how he should act.

Participant 5: "Ah coping strategies, sa sarili ko ah, personally, meron akong metric system na nakikita ko na wala ako sa lugar. Pero dahil kailangan mo panindigan yung galit mo, which is alam mo naman talaga sa sarili mo na wala ka naman talaga sa point...ina-isolate ko yung sarili. Halimbawa sa bahay, kapag may certain issues na pumutok ka ba, nagkukulong ako sa kwarto kasi ayoko ng makasakit, kasi baka makasalita akong masakit, hindi mo yon mababawi. Kahit magsorry ka don, mahirap pa rin. Ganon ako, including sa office, meron akong area sa office na parang safe haven ko, na kapag may bad news or galit ako, hindi ako nagrereact, pumupunta ako don, nagkukulong muna ako, parang ganon. Basta di ako pwede kausapin kasi yun nga baka makasalita ako ng ano or what." (*Ah, coping strategies, personally, I have a metric system where I see that I'm not in the right place. But because you need to stand by your anger, which you really know deep down that you're not really on point... I*

isolate myself. For example, at home, when certain issues arise that might cause me to explode, I lock myself in my room because I don't want to hurt anyone, because if I say something hurtful, you can't take it back. Even if you apologize, it's still difficult. That's how I am, including at the office, I have an area in the office that's like my safe haven, where if there's bad news or I'm angry, I don't react, I go there, I isolate myself first, it's like that. I just can't be talked to because, you know, I might say something hurtful or what.)

Substance Use: Most of the participants also resorted to substance use to cope, specifically, drinking alcohol.

Participant 4: "Tapos nung first two encounters, hindi ko masabi na bunsod lang ng celebration namin na walang sugatan samin, successful yung operation namin or dahil stressed kami dahil sa nangyari, we drunk a lot nung mga panahon na yon. Bukod sa ginagawa na lang namin na justification na we are drinking mountain water, so in order na mapatay yung bulate, mag-alcohol kami, parang ganon...Pero, it did help, that time, mas maganda matulog." *(After the first two encounters, I can't say whether it was because of our celebration that no one was injured, our operation was successful or because we were stressed because of what happened, we drank a lot during those times. Apart from the fact that we are just making the justification that we are drinking mountain water, so in order to kill the worms, we will drink alcohol or something like that...But, it did help, at that time, sleep was better.)*

4.6. Psychological Support Received by Filipino Soldiers

The sixth theme identifies the psychological support that they received from the government or their institution. Specifically, the participants identified general counseling services, group therapy, and psychological evaluations as a type of psychological support that they received. However, two participants said that they did not receive enough psychological support.

Counseling: The commanders or sergeant major assesses the soldiers first to evaluate the effect of the firefight on the soldiers. If they think that the soldiers need formal counseling, they will be referred to one. For the injured soldiers, they have a specific set of activities to help them deal with their traumatic experiences.

Participant 3: "Yes po, nagcoconduct muna niyan yung sgt major, kumbaga parang siya yung tatay namin sa kampo, maliban sa commander namin. Nagkakaroon po yan ng counseling. After ng battle, tinitignan nila yung personnel nila yung mga sumama sa firefight, kung normal pa ba siya, lalo kung matagalan yung engkwentro na nangyari. Dun pa lang kapag nakita ng sgt na apektado siya masyado, dun na siya bibigyan ng counseling, isang linggo...Yung kakilala ko halos mag-ayaw na siya sa serbisyo pero naagapan siya through counseling." *(Yes, the sergeant major will conduct that first, as if he was like our father in the camp, aside from our commander. That's like having counseling. After the battle, they check on their personnel who joined the firefight, if he is still normal, especially if the encounter that happened took a long time. If the sergeant major saw that one is heavily affected, he would be given counseling, for one week...I know someone who almost left the service, but the counseling helped stop him from doing so.)*

Participant 5: "Meron ng mga programs, nasa social media yan eh, mga mental health support ng army. Pero nung time namin nung 2013, may program yung hospital eh, magugulat ka na lang may activity bukas, may seminar. So sama-sama kaming mga baldado, mga nakahospital gown. Grouping kayo, ako kasi galing ako sa sa mga catholic

school, so sabi ko alam ko yung mga ganto ah, papaiyakin tayo, papapikitan yung mata, iisipin yung mga mahal sa buhay, yung mga ganon. Tapos may music na nakakaiyak, kung ano yung gusto mo isulat, so mga mga ganong program... narealize ko na importante pala siya, malalaman mo yung mga kapwa mo pasyente na iba iba kayo ng hugot, grabe yung mga kasama ko eh, yung iba may hiwa sa ulo, yung isa peke na yung isang mata, iba-iba. May ganon kaming support system, parang nakaschedule siya." *(There are programs, it's on social media, the mental health support for the army. But during my time in 2013, the hospital had a program, you'll just be surprised, there's an activity tomorrow, and there's a seminar. So those who are disabled are with each other, those in hospital gowns. You are grouped, I am from a Catholic school, so I was like I know those things, they will make us cry, close our eyes, think of our loved ones, that kind of thing. Then there is music that will make you cry, you write what you want, so those kinds of programs... I realized that those are important because you will know your fellow patients' stories and experiences, the ones with me had extreme injuries, the other has a cut on the head, and the other one has a fake eye, each one is different. We have a support system; it is also scheduled.)*

Psychological Evaluations: Filipino Soldiers are required to take several psychological evaluations throughout their careers as a requirement for entering the service, promotions, reenlistments, etc.

Participant 4: "Definitely, psychological evaluation. Kasi kapag magundergo kami ng promotion, mandatory yan. Neuro and drug test. As to counseling, meron namang offered, pero hindi ko siya kinukuha kasi, in the sense na it might be perceived as a weakness eh, lalo na yung position na hinahawakan mo, tapos youre going there, sa akin ah, nung mga panahon na yon, tingin ko hindi siya viable option. Okay na saakin na natetest ako, na lumalabas, dun sa yung mga may sentence na kukumpletuhin mo, may mga test pa na makikita ron na medyo impatient ka ganon, quick to action mga ganon. Yun, at least nalalaman ko, I can make adjustment. Kung matest ako, and malaman ko yung result or maexplain saakin yung result, I can make the necessary adjustments." *(Definitely, psychological evaluation. Because when we are in the process of our promotion, it's mandatory. Neuro and drug test. As for counseling, there are services offered, but I didn't take it because, in the sense that it might be perceived as a weakness, especially the position you're holding, then you're going there, for me, during that time, I don't think it was a viable option. I was already okay that I'm being tested, there are those with sentences that you have to complete, and there are other tests that show that you're a little impatient, quick to action like that. That, at least I was able to know the results, I can make adjustment. If I get tested, and I know the result or the result can be explained to me, I can make the necessary adjustments.)*

No Psychological Support Received: Contrary to the other three participants, two of the participants mentioned that they don't receive any psychological support from the government. One also mentioned that although they undergo neuro tests, he thinks that those are still not enough.

Participant 1: "From the government, mukhang wala. Kahit sa institution, sa organization, hindi siya established eh, sadyang yung coping strategies lang talaga... Sa nakita ko yan ah." *(From the government, I think there's none. Even from the institution, in the organization, it is not established, it is really just our coping strategies that we use... That is only what I see.)*

Participant 2: Psychological? Wala ata akong naririnig mula sa gobyerno eh. Kanya-kanya na lang din, sarili na lang din makakatulong sayo eh. Pero wala naman kasi atang program ang gobyerno para sa sundalo. Pagkatapos ng mga gera, mga ganun, mga encounter. Mahirap na kasi kapag utak na kalaban mo eh. Kahit kaya pa ng katawan mo kaso utak mo na mismo may ayaw, parang aayaw na rin yung katawan mo eh. Every year may neuro test naman kami, pero hindi naman masasabing psychological support yun kasi idedetermine lang naman nun kung psychotic ka o hindi eh. Wala kasi yung usap talaga na nangyayari para masabi kung may fear ba o trauma yung soldier o wala." (*Psychological? I haven't heard anything from the government. We are on our own, your self is the only one who can help you. But the government doesn't have a program for soldiers. After wars, such encounters. It's hard if you are fighting with your mind. Even if your body can handle it, if your brain does not want it, it seems like your body doesn't want it too. Every year we have a neuro test, but it cannot be called psychological support because it only determines if you are psychotic or not. Because there is no conversation that is really happening to tell if the soldier has fear or trauma or not.*)

4.7. Ascribed Meaning of Killing while in Combat

The participants' descriptions of killing while in combat are the focus of the final theme. Killing while in Combat is like a sport, a sacrifice and a necessity are the subthemes that emerged.

Killing while in Combat is like a Sport: Killing while in Combat is like playing a sport wherein, they will do everything to win. The adrenaline rush made the participant numb, and once the adrenaline rush went down, that is when everything sunk in.

Participant 1: "Siguro gamitin natin yung sagot ko kanina. Iba yung ano eh, nasa scope yung target mo kesa yung malapitan. Kasi yung pag nasa scope, iba yung reference. Puputukan mo nalang ganun. Iba yung sa malapitan, kasi parang ano eh, with regards dun sa act, nandun yung adrenaline pa. Parang wala kang pakiramdam kapag pinull mo trigger. Parang after week pa mawawala adrenaline tsaka ka malulungkot, kasi after ng adrenaline rush, dun mo lang marerealize na tao pa rin yung target mo. Bakit mayroong adrenaline rush? Kasi ayaw mong mapunta dun sa posisyon ng target mo. Sa simpler term, parang naglalaro ka ng sports na ayaw mong matalo." (*I guess I will use my answer earlier. It is different, when your target is in a scope and if it is near. Because if the target is in a scope, the reference is different. You will just fire. It is different when it is near, because it is like, with regard to the act, there is still adrenaline. You won't feel anything once you pull the trigger. Then after a week, once the adrenaline goes down, that is when you will feel sad, because after the adrenaline rush, that only the time that you will realize that your target is also a human. Why is there an adrenaline rush? Because you don't want to be in the position of your target. In simpler terms, it is like you are playing sports that you don't want to lose.*)

Killing while in Combat is a Sacrifice: The participants feel like killing while in combat is a sacrifice because it is something that they are not proud of, but they had to do it for the country. They are also sacrificing themselves because they know that there is always a chance that they will not be able to go home.

Participant 2: "Yun nga yung sabi ko kanina, killing in combat, hindi ka dapat mgng proud sa sarili mo na may pinatay ka. Pero isipin nalang natin na pumatay kami para sa peace and order ng bansa. Kasi sino ba naman gagawa

nun kung di kami? At least kami na yung gagawa para sa mga kababayan nating di kayang gawin yun. Sacrifice." *(Just like what I have said earlier, killing in combat, you should not be proud of yourself that you killed someone. But just think that you killed for the peace and order of the country. Because who will do that if not us? At least we are the ones who will do it for our countrymen who can't do that. Sacrifice.)*

Participant 3: "Sabi ko nga sainyo, pagenter mo pa lang, may kasabihan na ang men in uniform, ang kabilang paa is nasa hukay na. So normal na, expected na siya dahil nanumpa ka. Luto ang isip mo na ipagtatanggol at ipagtatanggol mo ang bayan mo kahit ano ang mangyari, mapahamak ka man, o ano man mangyari sayo, maiwan mo man pamilya mo." *(I told you, the moment you entered, there is a saying that the men in uniform, their other foot is already in the pit. So, it's normal, it is expected because you swore. Your mind is made up that you will defend and defend your country no matter what happens, no matter what happens to you, no matter what happens to you, even if you leave your family behind.)*

Killing while in Combat is a Necessity: The participants defined killing while in combat as a necessity because it is needed for their own survival. It is something that they really have to do to protect themselves.

Participant 4: "...it's a necessity kasi it's part of your very own survival. It is not just our job; it is part of our survival in the field. Kasi if you are not gonna kill your enemy, lalo kapag naunahan ka, ikaw yung kill count, ikaw yung patay. It's either them or us." *(It is a necessity because it is part of your very own survival. It is not just our job; it is part of our survival in the field. Because if you are not going to kill your enemy, especially if they shot first, you will be the kill count. It is either them or us.)*

Participant 5: "Survival siya kasi it is either you or me. Survival kasi, na sa moment na yon, hindi na siya, yung surrounding na yun, hindi na siya conducive for talking, parang fighting arena na siya. Kasi diba may diplomacy pa tayo, pero kapag combatant at combatant na ang naghaharap, yan na yung way namin mag-usap eh. Bala na yung mag-uusap diyan. So makikita mo it is either you and your team or them. So kaya ko, nabanggit na survival, it's not the intent to kill a person na mawala siya sa mapa, kasi may mga pinapakain pa yon eh, mga dependent niya. It is more of protecting yourself." *(It is a survival because it is either you or me. Survival because at that moment, in surroundings like that, it is already not conducive for talking, it is like a fighting arena. Well, we still have diplomacy, but when a combatant and combatant face each other, that's the way we talk. The bullets are the ones who are going to talk. So, you will see, it is either you and your team or them. So that is why I mentioned it is for survival, it is not the intent to kill a person just to remove him from the map, because the person still has a family to feed, his dependents. It is more of protecting yourself.)*

4.8. Discussion

This study aimed to describe the lived experiences of Filipino soldiers on combat deployment that resulted in enemy casualties. Results revealed the perspectives of the participants on killing, as well as the process of combat deployment. The data collected also showed the psychological and emotional effects of the experience of combat deployment that resulted in enemy casualties and their coping mechanisms to deal with the effects. The results also showed the psychological support that the participants received and their ascribed meaning of killing in combat.

The first and second themes discussed the participants' perspectives on killing as a civilian or before being a soldier and as a soldier. The results revealed that their perspectives on killing changed when they became soldiers. As civilians, killing was seen as unfamiliar and a sin not only to the rule of law but also to the law of God. However, these perspectives changed when the participants entered the military as they now view killing as something that could be justified. After a few experiences of combat deployment, the unfamiliar feeling they once felt about killing becomes normal for them. Killing is a result and a significant aspect of a combat experience; hence when they kill during a combat deployment, they face a form of reality that can pierce through previous beliefs about life, the self, and humanity (Purcell et al., 2016).

The third theme showed that the participants experienced two types of encounters during combat deployment that resulted in enemy casualties. An intentional encounter is when the soldiers were currently having an operation when the firefight happened; this means that they are intentionally looking for the enemies. However, two participants mentioned that their first experience of combat deployment that resulted in enemy casualties happened accidentally. An accidental encounter is when the soldiers were not doing an operation when the firefight happened.

The fourth and fifth themes revealed the psychological and emotional effects of combat deployment that resulted in enemy casualties and the strategies they used to cope with it. Killing in combat has been linked to suicidal ideation, depression, post-traumatic stress, and other psychological problems (Kelley et al., 2019; Purcell et al., 2016; Maguen et al., 2012; Maguen et al., 2009). The results of the study are closely related to the previous studies about the effects of killing in combat on psychological health as the participants reported feeling uneasiness, difficulty in sleeping, and change in behavior including an increase in irritability after their experience in combat deployment that resulted in enemy casualties. Most participants reported seeing the face of the killed enemy after a few days of the firefight. This is similar to the study by Maguen (2009) which revealed that soldiers get troubled or haunted by the experience of killing a combatant or a civilian in a combat operation. The current study also revealed that one participant felt happy after the combat operation because it meant that their operation was successful, and only felt sympathy after a few days. However, most participants said that there were feelings of sympathy, sadness, and conscience for the killed enemy as they thought that the enemies are still human.

The present study also supports the previous study by Kelley et al. (2019) that increased alcohol use is linked to killing during combat. Substance use, specifically alcohol use, was one of the most common coping strategies used by the participants after their operations to both deal with the psychological effects of the experience of killing in combat and to celebrate the successful operation. Communication with family and fellow soldiers was also one of the most common coping strategies used by the participants. Active support from families and fellow soldiers is significant for the soldiers to cope (Dolan & Ender, 2008). Other coping strategies mentioned by the participants include engaging in sports, online games, and other entertainment, changing of environment, clinging to faith, and isolating oneself.

One of the areas of discussion in the present study was the psychological support the soldiers receive after combat deployment. The participants mentioned that psychological evaluations and general counseling services are

offered, including group therapy. Mental health professionals play a significant role in helping soldiers deal with psychological problems caused by killing in combat (Purcell et al., 2016). However, two participants stated that they did not receive any psychological support after their combat deployment; one even noted that the routine Neuro-Psychiatric Examination done was not enough to alleviate the negative psychological impact of combat deployment.

The last theme revealed how the participants define killing in combat. One participant described it as a sport where you do not want to be on the losing team. Two participants expressed it as a sacrifice as they sacrificed their morality and life for the country. The rest of the participants said that killing in combat is necessary as they need it to survive.

5. Summary, Conclusions and Recommendations

5.1. Summary of the Study

The main objective of this study is to explore the different lived experience of Filipino soldiers after experiencing combat deployment. This study utilized a qualitative phenomenological approach to investigate different perspectives and experiences. The findings of this study cover the soldier's perspective of killing before and after joining the military, the psychological and emotional effects of experiencing combat and the exchange of gunfire, coping strategies to overcome the effects of combat, and their description of killing during combat. The purpose of this study is to probe the different experiences of Filipino soldiers to identify how combat deployment affects them mentally, together with the aim of contributing to the little amount of literature that involves Filipino soldiers. The research focused on members of the Philippine Army who have been deployed before involving enemy casualties and have not been wounded in combat. A total of 5 soldiers were interviewed who are Lieutenants and Captains in the force.

5.2. Summary of Findings

The researchers gathered information from 5 Filipino soldiers aged 27-35 years old. The salient findings of the study are as follows: Before being a soldier, they were civilians too and they perceived killing as an unlawful act as it is against the constitution and law of God. This perspective evolved as they became a soldier, where they perceived killing as a part of their job, and killing while on duty is labeled as 'justified killing'. There are two possible processes that result in enemy casualty during combat deployment: the intentional and accidental encounter. Intentional is where the troop were tasked to advance to the enemy's location to eliminate a target and its company while the accidental encounter is where they were just roaming or guarding a territory and later come across with enemies, resulting in exchange of gunfire. The psychological and emotional effects of these events are uneasiness, difficulty in sleeping, change in behavior, feelings of sympathy and sadness for the enemy casualties, and feelings of happiness or contentment after combat. Filipino soldiers cope with these experiences through different ways. Some of these strategies involve communicating with their families and fellow soldiers, engaging in sports, other games, and entertainment, changing of the environment (exploring nature for leisure), increased faith and religious practice, self-isolation, and substance use.

Higher ranking officers (Captains) claim that there is available psychological support from the government, but the Lieutenants said that they received no support from the government after getting deployed. However, there is an annual neurological test available for all soldiers but most of them refuse to undergo this test because once failed, it could jeopardize their status as a part of the military. Lastly, the soldiers described killing while in combat as something comparable to playing sports where you need to be courageous to be victorious, requires sacrifice, and is a necessity.

5.3. Limitations of the Study

The researchers acknowledge several limitations of this present study. The researchers failed to consider other variables that might affect the participants' lived experiences. The present study was not able to consider the sex of the possible participants. The researchers could only find male soldiers willing to participate in the study. However, there might be a difference between the lived experiences of male and female soldiers regarding combat deployment that resulted in enemy casualties. Due to the time constraints and sensitivity of the research topic, the study could only include five participants; hence, the study's results should not be used for generalizability.

5.4. Conclusion

Based on the findings of the study, various conclusions were drawn by the researchers. First is the faith and religious practice and beliefs of Filipino soldiers. Out of the 5 respondents, 2 of them mentioned that clinging to faith or seeking help and guidance from God was a huge part of their coping strategies and it helped them overcome their unpleasant experiences from combat. The respondents also mentioned that before being a soldier, they perceive killing as an immoral act because it is against the word of God. When they became a soldier, they changed their perspective, viewing killing as just a part of their job description. This resulted in the conclusion that soldiers never wanted or were never willing to take another person's life, it was viewed as just a part of their job and was described as 'justified killing'. Psychological support from the government was also an issue. Contrary to the other three participants, two of them mentioned that they never received psychological help from the government, only an option of getting an annual neurological test that if failed, could potentially lose their job. The participants who claimed that there is available professional help from the government are captains and a corporal, and those who mentioned that professional help was unavailable were two Lieutenants. It can also be concluded that combat deployment resulting to enemy casualties has psychological and emotional effects to the soldiers; hence, there should be availability of psychological support to address these effects.

5.5. Recommendations

The present study only had a sample size of five male soldiers. It is highly recommended that future researchers include more participants and focus on female soldiers as they might have different lived experiences. Another recommendation is to study the stigma around seeking psychological help, as during the interview, some participants mentioned negative connotations against seeking professional help. However, the present study was not able to further assess it. Studying the soldiers diagnosed with mental illness and physically injured could also provide other perspectives.

The researchers also recommend that the Armed Forces of the Philippines strengthen their mental health programs for their soldiers and ensure that these programs are available for everyone. Mental health seminars are also recommended to increase the awareness of the soldiers and to increase their help-seeking behavior. Creating a helpline for soldiers dealing with mental health problems is also recommended. One of the participants mentioned it to the researchers, citing that most of the time, soldiers do not have the luxury of going to the hospital to seek professional help as they are assigned to far areas. Hence, a helpline would be a great alternative for them.

Declarations

Source of Funding

The study has not received any funds from any organization.

Competing Interests Statement

The authors have declared no competing interests.

Consent for Publication

The authors declare that they consented to the publication of this study.

Informed Consent

The participants were given informed consent, where all the necessary information about the research was included. The authors also provided their contact details to the participants for discussion if they had further questions about the study.

References

- Agaibi, C.E., & Wilson, J.P. (2005). Trauma, PTSD, and Resilience: a review of the literature. *Trauma, Violence, & Abuse*, 6(3): 195–216. <https://doi.org/10.1177/1524838005277438>.
- Alase, A. (2017). The Interpretative Phenomenological Analysis (IPA): A Guide to a Good Qualitative Research Approach. *International Journal of Education and Literacy Studies*, 5(2). <https://doi.org/10.7575/aiac.ijels.v.5n.2p.9>.
- American Psychiatric Association (n.d.). What is Posttraumatic Stress Disorder (PTSD)? <https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd>.
- American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders (5th Ed.)*.
- Andres, T.Q.D. (1986). *Making Filipino Values Work for You*. St. Paul Publications.
- Blakemore, E. (2020). How PTSD went from ‘shell-shock’ to a recognized medical diagnosis. *Nat Geographic*. <https://www.nationalgeographic.com/history/article/ptsd-shell-shock-to-recognized-medical-diagnosis>.
- Bonanno, G.A., Mancini, A.D., Horton, J.L., Powell, T.M., Leard Mann, C.A., Boyko, E.J., Wells, T.S., Hooper, T.I., Gackstetter, G.D., & Smith, T.C. (2012). Trajectories of trauma symptoms and resilience in deployed US

military service members: Prospective cohort study. *British Journal of Psychiatry*, 200(4): 317–323. <https://doi.org/10.1192/bjp.bp.111.096552>.

Chan, Z.C.Y., Fung, Y.L., & Chien, W.T. (2013). Bracketing in phenomenology: Only undertaken in the data collection and analysis process? *Qualitative Report*, 18(30). <https://doi.org/10.46743/2160-3715/2013.1486>.

Church, A.T., & Katigbak, M.S. (2000). *Filipino Personality: Indigenous and Cross-cultural Studies*. De La Salle University Press.

Creswell, J.W. (2014). *Qualitative Inquiry & Choosing Among Five Approaches Research Design* (4th Ed.). SAGE Publications.

Creswell, J.W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches*. Politeia, Sage Publications, Volume 891, Issue 12.

Dela Cruz Fajarito, C., & De Guzman, R.G. (2017). Understanding Combat-Related PTSD Symptom Expression Through Index Trauma and Military Culture: Case Studies of Filipino Soldiers. *Military Medicine*, 182(5): e1665–e1671. <https://doi.org/10.7205/milmed-d-16-00216>.

Dolan, C.A., & Ender, M.G. (2008). The Coping Paradox: Work, Stress, and Coping in the U.S. Army. *Military Psychology*, 20(3): 151–169. <https://doi.org/10.1080/08995600802115987>.

Gorman, L.A., Blow, A.J., Ames, B.D., & Reed, P.L. (2011). National Guard Families after Combat: Mental Health, Use of Mental Health Services, and Perceived Treatment Barriers. *Psychiatric Services*, 62(1): 28–34. https://doi.org/10.1176/ps.62.1.pss6201_0028.

Hoge, C.W., Castro, C.A., Messer, S.C., Mc Gurk, D., Cotting, D.I., & Koffman, R.L. (2004). Combat Duty in Iraq and Afghanistan, Mental Health Problems, and Barriers to Care. *New England Journal of Medicine*, 351(1): 13–22. <https://doi.org/10.1056/nejmoa040603>.

Iversen, A.C., Van Staden, L., Hughes, J.H., Greenberg, N., Hotopf, M., Rona, R.J., Thornicroft, G., Wessely, S., & Fear, N.T. (2011). The stigma of mental health problems and other barriers to care in the UK Armed Forces. *BMC Health Services Research*, 11(1): 31. <https://doi.org/10.1186/1472-6963-11-31>.

Jakupcak, M., Vannoy, S., Imel, Z., Cook, J.W., Fontana, A., Rosenheck, R., & McFall, M. (2010). Does PTSD moderate the relationship between social support and suicide risk in Iraq and Afghanistan War Veterans seeking mental health treatment? *Depression and Anxiety*, 27(11): 1001–1005. <https://doi.org/10.1002/da.20722>.

Jindal-Snape, D., & Miller, D.J. (2008). A Challenge of Living? Understanding the Psycho-social Processes of the Child During Primary-secondary Transition Through Resilience and Self-esteem Theories. *Educational Psychology Review*, 20(3): 217–236. <https://doi.org/10.1007/s10648-008-9074-7>.

Kelley, M.L., Bravo, A.J., Hamrick, H.C., Braitman, A.L., & Judah, M.R. (2019). Killing during combat and negative mental health and substance use outcomes among recent-era veterans: The mediating effects of rumination. *Psychological Trauma: Theory, Research, Practice, and Policy*, 11(4): 379–382. <https://doi.org/10.1037/tra0000385>.

- Maguen, S., Luxton, D.D., Skopp, N.A., Gahm, G.A., Reger, M.A., Metzler, T.J., & Marmar, C.R. (2011). Killing in combat, mental health symptoms, and suicidal ideation in Iraq war veterans. *Journal of Anxiety Disorders*, 25(4): 563–567. <https://doi.org/10.1016/j.janxdis.2011.01.003>.
- Maguen, S., Metzler, T.J., Bosch, J., Marmar, C.R., Knight, S.J., & Neylan, T.C. (2012). Killing in combat may be independently associated with suicidal ideation. *Depression and Anxiety*, 29(11): 918–923. <https://doi.org/10.1002/da.21954>.
- Maguen, S., Metzler, T.J., Litz, B.T., Seal, K.H., Knight, S.J., & Marmar, C.R. (2009). The impact of killing in war on mental health symptoms and related functioning. *Journal of Traumatic Stress*, 22(5): 435–443. <https://doi.org/10.1002/jts.20451>.
- Mohajan, H.K. (2018). Qualitative research methodology in social sciences and related subjects. *Journal of Economic Development, Environment and People*, 7(1): 23. <https://doi.org/10.26458/jedep.v7i1.571>.
- Mordeno, I.G., Nalipay, M.J.N., & Mordeno, E.R. (2019). The factor structure of complex PTSD in combat-exposed Filipino soldiers. *Psychiatry Research*, 278: 65–69. <https://doi.org/10.1016/j.psychres.2019.05.035>.
- Purcell, N., Koenig, C.J., Bosch, J., & Maguen, S. (2016). Veterans' Perspectives on the Psychosocial Impact of Killing in War. *The Counseling Psychologist*, 44(7): 1062–1099. <https://doi.org/10.1177/0011000016666156>.
- Reyes, M.E.S., Dillague, S.G.O., Fuentes, M.I.A., Malicsi, C.A.R., Manalo, D.C.F., Melgarejo, J.M.T., & Cayubit, R.F.O. (2020). Self-esteem and optimism as predictors of resilience among selected filipino active duty military personnel in military camps. *Journal of Positive Psychology and Wellbeing*, 4(1).
- Salazar, Z. (1985). Hiya: Panlapi at salita (Hiya: Affixations and word). In A. Aganon & M.A. David (Eds.), *Sikolohiyang Pilipino : isyu, pananaw at kaalaman: new directions in indigenous psychology*, National Book Store.
- Tay, A.K., Mohsin, M., Rees, S., Tam, N., Kareth, M., & Silove, D. (2018). Factor structures of Complex Posttraumatic Stress Disorder and PTSD in a community sample of refugees from West Papua. *Comprehensive Psychiatry*, 85: 15–22. <https://doi.org/10.1016/j.comppsy.2018.05.001>.
- Yuksel, P., & Yildirim, S. (2015). Theoretical Frameworks, Methods, and Procedures for Conducting Phenomenological Studies. *Turkish Online Journal of Qualitative Inquiry*, 6(1). <https://doi.org/10.17569/tojq.59813>.
- Zinzow, H.M., Britt, T.W., Pury, C.L.S., Raymond, M.A., McFadden, A.C., & Burnette, C.M. (2013). Barriers and Facilitators of Mental Health Treatment Seeking Among Active-Duty Army Personnel. *Military Psychology*, 25(5): 514–535. <https://doi.org/10.1037/mil0000015>.