Exploring Therapeutic Songwriting for Filipino Children with Leukemia

Marisa V. Marin

1Philippine Association for Child and Play Therapy, Makati City, Philippines
2MLAC Psychosocial Services for Well-being, Pasig City, Philippines

Abstract

This study explored the use of songwriting as a therapeutic tool for Filipino children with leukemia to alleviate pain and to accept death. Using a clinical-descriptive phenomenological approach, four children with leukemia were purposively selected to have individual therapy sessions. Findings show that music making, specifically songwriting, can be a therapeutic intervention for children in pain and in preparation for their death. Furthermore, common themes of the songs are discussed and the role of a therapist is mentioned.

Keywords: Therapeutic Songwriting, Children, Cancer, Philippines

Introduction

Music is an integral part of many peoples’ lives. Here in the Philippines, people have used music as a form of entertainment in many areas of social and educational life but it is less common to consider the therapeutic power of music. However, it is worth mentioning the ways in which music has been used to cure ailments in the remote places of the Philippines in current times as well as before the existence of hospitals. Jose Maceda, a Filipino composer and one of the leading ethnomusicologists in our country has observed and experienced being part of a curing ceremony of the Magindanaon culture. Maceda [1] described how the Ambak (the medium who is like a Shaman) explained the belief that no cures can take place without music. He further mentioned that this musical magic has equal importance to dance movements, the participation of the spirits, and the tension of the audience. These are all considered to be directly connected to each other. In further work on this topic Maceda [2] collected vocal music with the names of the Filipino indigenous peoples and the names of the ritual music or song used for curing the sick. Similarly to the Magindanaon some had used a medium like the Ambak to perform the ritual. Therefore, it is also important to mention how the Ambak has a major role in being able to know the right combination of what is needed in the ritual for healing to take place, even determining the slightest quality of sound played in the instrument.

At present, there have been no published articles about songwriting as a therapeutic intervention for hospital setting in three main libraries that have collections of local studies. Most published journal articles based on work in the Philippines is focused on listening to music as a way of creating therapeutic change. In recent years, music has started to be used in medical settings. Doctors and nurses in the Philippines have studied the medical condition of patients comparing those who had some music listening to those who did not receive any music experiences. In the following section of this report these studies will be briefly reviewed. Almazan, Patoza, and Arogata [3] investigated the effect on stuporous patients (n=24) receiving mechanical ventilation who listened to CDs of classical music. Their findings showed that listening to classical music improved their level of consciousness. In another study, the anxiety of patients before surgery and the amount of Midazolam (sedative) used during surgery both decreased in the music group who selected classical and jazz music as compared to the non-music group (n=76) [4]. Even their systolic blood pressure lowered after listening to music. The same results were evident in the lower blood pressure and respiratory rate of hypertensive patients who were assigned to the music group and listened to instrumental music with a slow tempo as compared to the slow-breathing exercise group and no intervention group [5]. Labraque, Rosales, Rosales & Fiel [6] found that the music group exposed to classical music and nature sounds of their choice from a pre-selected music reduced the reported labor pain during childbirth as compared to the non-music group.

In a similar research design that compared music group and non music group among Filipino newborns who underwent heel prick blood extraction (n=35), the babies who listened to classical music manifested positive effects of
shortened duration of crying, decreased cardiac and respiratory rates, and higher oxygen saturation [7]. Generato [8] had observed the same positive effect in easing the pain of neonates through music (n=59). Again, the babies in this study were divided into two groups, the music and non-music group during the heel prick blood extraction. The group exposed to classical music exhibited shortened duration of crying and improved cardiac rate. However, no difference was seen in the oxygen saturation in both groups. In another study, Custodio [9] wanted to simply find out the difference of healthy babies (n=30) who were exposed to classical music using earphones and babies who were placed in a quiet environment. Findings showed that infants exposed to music had lower cardiac and respiratory rate and increased oxygen saturation as opposed to the infants who had a quiet environment. The calming effect of exposure to music brought about the further suggestion from the researchers that music should be introduced into the hospital setting.

In all of this research of music’s effects in this country the process of songwriting is hardly mentioned. To date, there has been no literature that has shown how songwriting is used for therapeutic purposes in the Philippines. Reports from other countries have indicated the use of songwriting as a useful music therapy method for hospitalized children. Kennelly [10] described how songs and the process of songwriting became an effective tool in giving emotional support to an adolescent boy during the crucial life threatening stage of his life. Other researchers have mentioned songwriting as one of the music therapy methods used for self-expression and making connection that can be a source of communication and can be therapeutic for people who are dying [11,12]. Music therapists have also composed songs for a one-day event with the therapeutic purpose of creating group cohesion and to reduce anxiety during the occasion as they gather again after experiencing a loss of a family member [13]. In addition, songwriting has also been used to help the grieving process of adolescents to express issues regarding the death of their loved ones [14], and for pre-adolescent children as well [15].

As a psychologist in a tertiary pediatric hospital in the Philippines, I have been part of a medical team who were willing to integrate my music play approach into the hematology unit, which treated mostly children with leukemia. Since music as a therapy was something new to them, I designed my sessions with the children in response to their needs. This research explores and describes therapeutic songwriting as a way of supporting children in their last stage of their lives. It is my intention to introduce songwriting, as a therapeutic intervention in the Philippine hospital setting for children with leukemia. Moreover, this current report show how discover common themes were found in the songs created in our therapy sessions.

Working with sick children in the last stages of their lives

During my scheduled days in the hospital, I was sometimes called by the doctors to visit patients who were in the last stages of their lives; what is described as salvage therapy. Salvage therapy, is a term doctors here had coined if, medically, nothing else can be done except to give pain relievers while waiting for the inevitable. So, I was tasked with helping to make children’s remaining days as comfortable as possible, and also to prepare them for death. Upon the recommendation of the doctors, I scheduled my therapy sessions with the children in the hospital according to priority. In the late 1990’s to early 2000, I was the lone psychologist of the hematology unit of a tertiary pediatric hospital in the National Capital Region of the Philippines.

I integrated play and other expressive therapies techniques, specifically music making, into my practice. The doctors have given me freedom to do my own approach in my therapy visits to all the hematology patients in the charity ward and private rooms.

I have chosen to describe 4 children with leukemia, aged 8–11, who I worked with in their last stages of their lives. I have changed their names for the purpose of confidentiality. It has taken me years to finally write about these children because of several reasons. Firstly, I needed to locate families to ask permission in writing about their children but until the present, it has still been a challenge for me to do so since they live in other regions of our country. Also, some of the contact files from the hospital were already disposed of after the patient had died. Second, as the only psychologist here who uses music in my work, specifically songwriting, I am also struggling to write this report and provide a context. Lastly, as a therapist, I also have to take care of my own grieving process and healing after being with children who one by one died after having a personal-therapeutic relationship with them.

In analyzing the cases, I have written my observations, personal detailed account, personal reflections, of the therapy sessions that had a therapeutic songwriting as an intervention. In addition, I have analyzed the lyrics used in the songs written, finding the common themes of the songs.

Results

This reflective inquiry is presented in a descriptive, phenomenological, and clinical manner, consisting of narrative accounts of the therapeutic process of the songwriting therapy sessions. The unique cases of each of the four children are discussed separately, drawing pertinent themes in their songs.
**Nancy: So Many People To Thank**

Nancy, 10 year-old girl, diagnosed with Acute Lymphocytic Leukemia (ALL) at age 6.5. Her mother and a caregiver accompanied her to the hospital. I had heard about her and her prowess to play the organ. I had the chance to start working with her, when the head doctor asked me to visit her in her private room to provide musical support to her because any time she could die. My therapeutic goal then was to establish rapport for the first and maybe the last time and make a song preparing her for death. I did not expect that it was going to be easy for me to do so. From the minute I entered her room, she welcomed me with an exhausted expression and said to me that she could already see angels. And that prompted me to suggest writing a song about angels with her. Her face lit up and she agreed. When I asked what was her language preference, she requested if it could be written in English so that the whole world could understand. And so she narrated her story, telling me too, about a saint and how much she had to thank all the people that helped her and took care of her while in the hospital. She enumerated all of them from the doctors, nurses, teachers, media people, to her mom and her yaya (caregiver). As she was telling her story, I was writing the lyrics of the song and asking her approval at each stanza. At a certain point, she asked me what the word unbearable meant when I put it as part of a stanza. When I translated it in the Filipino language, she understood what it meant and affirmatively said, ‘Tama yon!’ (‘That’s right!’) with her worried smiling face. When the whole song was over, I sang and played the keyboard for her (Appendix A). She had a joyful face and reacted by saying, ‘Ang bilis mo naman nagawa yung kanta.’ (‘You made the song so fast.’) I replied, ‘I was inspired by your story and by my own angel.’

I told her that I would visit her again the next day to teach her the song and we would try to record the song too. I suggested that while waiting for me, she could look at the lyrics and draw first. She said she was looking forward to it and agreed that she would also draw while waiting for me. Upon my next visit, she already put the lyrics of the song in an artwork she did and beamingly showed it to me (Figure 1). It was very rewarding and relaxing to play the keyboard for her as I taught her the song. Four days after, I heard the news that she was back in the hospital. I thought I could record the song with her, but she died a few hours before I reached the hospital. At first I could not understand why the doctor was congratulating me. It was only afterwards that I found out that during the last 4 days of Nancy’s life, she was at peace and blissfully humming the song.

For Nancy, the songwriting process was a way of relaxation while confined in the hospital. It also became an expression of her thoughts and feelings. This was also a means to have a personal-therapeutic connection with me as her psychologist. I was there to give comfort and assurance that she will leave a legacy, song of gratitude to her family and friends.

**Nick: Longing To Go Home**

Nick, 8 year-old boy, diagnosed with ALL at age 6. For 2 years, since the first day he came to the hospital I have regularly met with Nick as he went through his medical treatments. The doctor assigned to him had scheduled his chemotherapy and confinement during my scheduled days in the hospital, upon the continuous request of Nick and his family to see me. It came to a point that Nick had to stay in the hospital for 6 months due to complications of his illness. He became good friends with JB (see below). Both boys would play together as they waited for their procedure in the hematology unit. Both of them had participated in the activities offered for the patients like art and music. Every time I visited Nick in his room we played with whatever toys he had. Nick and his mother would update me on Nick’s medical condition, and Nick and I would talk about how he felt. I had experienced his mood swings from being happy to sad, fearful to angry. I witnessed the deterioration of his physical built from a once chubby, fair complexioned boy to a lanky one and with discolored skin. Sometimes we played music together using the percussion instruments, to just pour out his pent-up emotions. During one of our sessions, he told me he was already missing home and that he wanted to play with his younger brother and his friends back home. He also missed playing with JB. It was then that I took the opportunity to ask him if we could write a song about friends and he shyly...
agreed. English was his language preference in writing the lyrics. I placed the tambourine and toy drum near him as I asked him some questions about who were his friends, and what activities he did with them. As he was answering the questions, I was making the song already (Appendix B). He timidly smiled when I told him the song was almost finished. I sang the song a capella but using a drum to keep my beat. His restless demeanor changed to a more attentive and relaxed manner as I sang it. I asked him if he liked the song and if I properly described what a friend was to him. He just happily said, “Yes”.

When I told him that he had to finish the song by thinking of the title, he just simply smiled and stated, ‘Friends’. I visited him twice a week after making the song, singing the song with him or singing the song to him when he was too weak to even speak. After a month, I handed a framed copy of the lyrics of the song to his mother when I paid my last respects to Nick during my final visit, this time at the funeral home.

For Nick, the songwriting session became therapeutic as he expressed his longing to play and be with his friends. Also, it became a source of promoting positive change, altering his mood from being restless and impatient to having a relaxed disposition. As his therapist, I wanted to lessen his anxiety and boredom in the hospital. It also made our therapeutic relationship stronger as we were able to accomplish a song together.

**JB: Let Me Do My Song**

JB, 8 year-old boy, diagnosed with ALL at age 5. I was with him and his family from Day 1 of his medical condition. He got a sponsor for his medical treatment because he was curable and was responding very well to his treatment. He was a cute, dark-complexioned, intelligent, and kind boy who loved to play. Almost always, our session would include playing toy soldiers and cars. And he would always take pride in saying he got a high grade in Math. He was always part of the group of children who performed and sang for any event in the hospital. Nick became one of his best friends in the hospital. The mother and the father took turns to accompany him to the hospital. In spite of the fact that he came from a poor family, it had always moved me deeply to see how he would open a pack of chips and would offer it to all the children in the charity ward before getting a piece for himself. Unfortunately, when he was about to be considered off-therapy, he caught an infection that made his condition deteriorate so fast. Upon the doctor’s recommendation, I had to visit him in the charity ward to prepare him for death. On the day that I visited him for songwriting, he already knew our schedule. I assigned him to think of a topic of a song the last time we met because he said he wanted to make one. The minute he saw me from a distance he signaled his parents to leave the charity ward. To my surprise, he was already prepared and started reciting the lyrics in a sing-song manner making the first two verses on his own (Appendix C). I had to rush to write down all of the lyrics he was dictating. He wanted to continue the song with me because it was not yet finished. I told him, I was so impressed with his two stanzas but asked him if we could change the third person pronoun sila (them) to tayo (we). I had to change it for him to own the feeling he expressed in the lyrics. He agreed. Intuitively, I felt in this moment that he was beginning to face the inevitability of his death. Our eye contact meant the beginning of a new stanza, a stanza that would be a transition to express the finality of life.

As we continued, I asked him what he wanted to say next for his new stanza. He was again reciting the first line of the third verse in a sing-song manner with a reflective smile. I sang it back to him, adding a little bit of melody to his vocal chanting. The flow of the lyrics went steadily. We were in a higher dimension, our hearts singing together as if we knew the next lyrics and melody of the song before we even made it. At a certain point he asked me a word he wanted to put but could not think of the word, *future*. I even teased him along the way to check if he knew the words he was dictating to me and he confidently said, “Yes”.

When we paused, I asked his permission if I could end the song already with my own words. He nodded and gave me a go signal because he really wanted me to do the last lines of the song, and so I did (Appendix C). We looked at each other and gave each other a “high 5”. This time, to clearly show him that I got the message of his last line, I just repeated what he said, changing just a few words. I knew we were thinking on the same level. Before I left, I tapped and rested my hand on his shoulder because I couldn’t hug him even if I wanted to. To hug him meant letting him feel I was crying inside.

To end the songwriting process, I asked him what was the title of the song and he replied, ‘Ang Mundo Ay Para Sa Lahat’ (‘The World Is For Everyone). The parents asked him what he did and he just told them, ”We made a song, but it’s our secret.” The parents did not know exactly what transpired during our therapy session. They only found out about the lyrics of the song when I gave them a framed copy of the words when I went to JB’s wake 4 days after we made it.

For JB the songwriting therapy session was his way of preparing himself for death. Even though he didn’t verbalize it, it was evident in the process of writing the song itself. The session allowed him to express himself. And as for me, writing the song with him was my contribution to his legacy of leaving the song behind for his loved ones. Furthermore, I worked with his process and ensured that there was some acceptance of his deteriorating condition.

**Liezl: The Fear of Butterfly**

Liezl, was an 11 year-old girl, diagnosed with Acute Myeloid Leukemia (AML). It was always tiring for Liezl to travel and go to the hospital because she lived a long way away in the provinces. And most of the time, due to financial constraints,
she also missed her scheduled medical treatment. I only had
the chance to visit her in the charity ward two times before I
had the songwriting therapy session with her. In those 2 visits
I noticed how thin, and fragile she was. She told me how she
dreaded coming to the hospital because of the medical
procedure she has to go through. I also found out how she
loved to sing and dance. On my third visit, three days after my
previous visit, I told her that while waiting to have her
chemotherapy we could create a song regarding her fear about
the medical procedure. She agreed and when I asked her
questions about her feelings, she emphasized how she did not
like medical injections. She described how she did not like the
butterfly- shaped needle because it was painful when they
pricked her with it. But she also knew she had to do it or else
her condition would get worse. While she was sharing her
concern, I was already writing the first two stanzas. I used
the Filipino language. When I asked her what she did in order
to help her cope and ease the pain, she mentioned praying and
playing. I also reminded her that she can also sing and dance.
She even teased me by saying, ‘dance like Michael Jackson in
Thriller’. And when I affirmed that she can do that, she
showed her smile and gave a timid laugh. When I told her that
the song was finished (Appendix D), she entitled the song,
‘Takot Kalimuutan, Lunas Harapin’ (Forget Your Fears and
Find a Solution). She said, ‘Let’s try singing it already.’ She
attempted to apply a fast tempo to the tune because she
thought it would be more fun to sing it that way. And so we
sang and laughed while doing it.
The last I knew of her was from the doctors. She didn’t
continue coming back and it was hard to contact her family
because of where they lived. The doctors suspected that she
had already died.

For Liezl, the songwriting session was used to distract her
while waiting for the medical treatment that she feared. It also
helped her calm down and ease her tension. And apart from
enjoying it, it also provided a means of self-expression for her.
As for me, it was to develop a personal-therapeutic
relationship with her. I integrated in the lyrics the possible
ways that she tried to cope with the discomfort and pain that
was part of her medical treatment.

Discussion

Songwriting with patients confined in the hospital has been
an activity that enables them to express the pain and hardships
they feel and experience with their illness [16]. This study has
shown how four children, diagnosed with leukemia expressed
their feelings and thoughts through songwriting while
undergoing medical treatment, and facing impending death.
Liezl used the songwriting process to express her fear of
undergoing a medical procedure, and to ease her tension while
waiting to undergo treatment. Nancy approved of the word
suffering to be part of the lyrics of her song. JB and Nick had
expressed their feelings of isolation, and longing to play and
be with friends.

It is important for me to emphasize that all topics, themes,
titles of the songs were drawn from the requests made during
discussions with the patients. Even the preference of the
language used was their choice. 2 of them preferred the song
to be written in English, while the other 2 used the Filipino
language. All of them made the title of their own song. The
choice of topic in our songwriting therapy session was greatly
dependent on the children. For Nick, I based it on our
conversation when he mentioned how he already missed
playing with his brother and friends. For Liezl, it was based on
her disposition of being nervous while waiting for a medical
procedure. For Nancy, it was based on her welcoming remark
of seeing angels when I entered the room. For JB, it was
continuing and completing a song that he already started to
write before the songwriting therapy session. It is well
accepted in therapy that it is significant to empower the child
by following his lead and respecting his pace [17].

All 4 children wanted their caregivers to be out of the
room, or not near us while composing the song. It became a
sacred time for them, especially for JB, when he even
mentioned to his parents that we wrote a song but it was our
secret. Among the 4 children, only JB contributed to the actual
lyrics of the song. For the other 3 children, I was the one who
wrote the lyrics while they narrated their story, their concern
and feelings during the therapeutic process on that day. But it
was only Nancy who had the chance to put the lyrics of the
song in an artwork.

The song provides an opportunity to use metaphors and
symbols to describe situations that are otherwise difficult to
articulate [18]. JB and Nancy had a feeling that death was
about to come as implied in their songs. Though we never
discussed about the topic of death per se, the titles of their
songs implied an awareness of their impending death.

JB and Nancy had utilized this songwriting therapy
session to write songs that they wanted to share and leave
behind like a legacy. Nancy was able to express this because
through the song, she wanted to express her gratitude to the
people who journeyed with her. Though JB did not express
this verbally, I sensed it from his unspoken word and gesture
that at the time, the song was a secret, but he would leave it to
me to share it with others, specifically his parents, when he
was gone. O’ Callaghan, Petering, Thomas & Crappsley [19]
concluded that patients are usually joyful when they hear their
completed legacies. They further explained that it carries them
through the loss embedded in the work, elicits new insights,
affirms existing ways of knowing, and brings relief in the
knowledge that others will experience what they want known
[19]. It gives the children the sense of pride and joy in
accomplishing something tangible.

During the individual songwriting process, one can see
how happy and comforted the children are. Music making can
evoke a positive disposition resulting in them being active and
eager to learn, and sing the song. As I have always explained to
parents and doctors, going through any kind of music based
therapy experience should have one of its objectives the
element of fun. Hospitalized children enjoy just being in the music moment. This confirms what Hilliard [20] has emphasized; that music therapy sessions can provide opportunities for children to have fun while engaging in treatment goals.

It is relevant for me to mention how vital the role of the therapist in this crucial stage of the children’s lives. It is essential that the music therapist working with such vulnerable children is able to be immediate in her creative contribution since each session should be conceptualized as a complete treatment, due to the possibility of discharge or worsening condition [18]. As experienced in the cases presented, JB and Nancy had lived only a few days more.

Edwards [21] suggested similarly that the role of the music therapist is emergent and responsive rather than defined and certain in each and every circumstance of attending a procedure, working with at the bedside or during a regular, scheduled session. In order for therapy to take place effectively, it should be flexible and sensitive to the child’s present concern and act on it accordingly. The doctors have also played a major role in telling me who to prioritize among the patients. They have always respected my strategy with each child and the therapeutic intervention I used. It is also important to mention that it involves a competent therapist to know the techniques that are needed in a particular therapy session. As Bruscia [22] explained, while music can be beneficial without the help of a therapist, music therapy requires the skilled application of music by a therapist.

Significantly, I would like to emphasize how the Filipino children who are hospitalized can benefit from having a music play therapy experiences and to say how much songwriting can be an effective tool in easing their pain and can make lasting therapist-child-relationship even in preparing them for death.

My Personal Journey

I am much amazed how an individual songwriting therapy session with each one of the children can transform their weak fragile disposition to being "alive", active, and enthusiastic to do and finish the song. The songwriting process became a magical bonding of making my personal-therapeutic relationship stronger with each one of them. This music-based therapy intervention was really therapeutic not just for them but also for me. We found comfort while being immersed in the process of creating a song. And the timing of making a song on a particular day of the children’s confinement was also an important factor to consider. I am grateful to the doctors that trusted me to do undertake music based therapy with their patients in the hematology unit of the Children’s Medical Center Philippines presently known as Dr. Fe del Mundo General Hospital. Even using music in this way was unfamiliar to them, I was able to educate them through my experience with the patients. Moreso, my warmest appreciation and admiration to the parents of these children, who have shown me what patience, love and dedication is. And my deepest gratitude to these 4 children, Nancy, Nick, JB and Liezl who have been my source of inspiration and motivation to continually believe in the healing power of music and to continually use it as my medium to serve other children. I have been truly blessed by being a part of their earthly life.

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Biographical Statements

Marina V. Marin, MA, RP, CSCLP is a registered psychologist in the Philippines. She is a founding board member and past president of the Philippine Association for Child and Play Therapy (Philplay) and part of a team of psychologists of the MLAC Psychosocial Services for Well-being. She was the past psychologist of the hematology unit of Dr. Fe del Mundo General Hospital and continuously supports the activities of Leukemic Indigents Fund Endowment (L.I.F.E).

APPENDIX A: ANGELS

Before I used to wonder
If angels are true
I often ask myself
"Are you really there with me"

Often times I realize
Even if angels with wings
Are not here
I know they’re here, they simply are
Because you are here with me

Sufferings are unbearable at times
But you lessen these burdens for me

*If there’s anything
I’ve learned from all these things
Angels are disguised in people we meet
And this is just a passing place
for me for you for all of us. (repeat *)

APPENDIX B: Friends

A friend is someone you can talk to
A friend is someone you play with
But sometimes they start a fight
Still they are your friends.

A friend is someone you ride with a bike

A friend is someone you laugh with
But sometimes they annoy you
Still they are your friends.

Friends, friends friends
That’s how we are with one another

Friends friends, friends
For life and forever.

APPENDIX C: Ang Mundo Ay Para Sa Lahat

[The world is for all of us]

Ang mundo ay bilog
[The world is round]
Paikot-ikot
[It just goes on in circles]
Tulad ng ating buhay
[Just like our life]
Minsa’y masaya,
[Sometimes it’s happy]
Mga bata’y naglalaro
[Our surrounding is beautiful]
Maganda ang panahon
[It is a pleasant day]
Hindi sila nalulungkot
[They don’t feel sad]

Minsan nama’y malungkot
[Sometimes life can be sad]
Naging masama ang panahon
[The day is bad]
‘di makalabas at ‘di makalaro
[Can’t go out and play]
Sa loob lang ng kanilang bahay
[And we’re just confined in our homes]
Nalulungkot sila ’pag walang kalaro
[They feel sad if there is no one to play with]

Dapat hindi nalang maging malungkot
[Let’s just try not to be sad]
Dahil makakapaglaro naman ulit
[Because someday we can play again]
Kayat habang mag-isa magdasal na lang
[While alone let’s just pray]
at manalig
[And have faith that]
Na kinabukasan gumanda na ang panahon
[There will be a brighter future ahead of us]

Sana sa susunod na araw
[I hope in the coming days]
Gumanda na ulit ang panahon
[It will be a brighter day]
Sana sa susunod na araw
[I hope in the coming days]
Gumanda na ulit ang panahon
[It will be a brighter day]
Maganda na ang panahon
[It is already a lovely day]

**APPENDIX D: Takot Kalimutan, Lunas Harapin**
[Forget your fears, find a solution]

Heto na naman
[Here we go again]
At nadarama
[I can feel it once more]
Takot ay hindi maiwasan
[The fear I can't avoid]
Sakit ko'y baka lumala
[My sickness might get worse]

Masasaktan na naman ba ako?
[Will I feel the pain again?]
Buntong hininga paulit-ulit na lang
[Always sighing every now and then]
Dahil sa injection
[Because of the injection]

Lalo na sa butterfly
[Specially that butterfly-shaped injection]

*Takot ko'y 'di maalis
[* My fear doesn't leave me]
Pero puede namang mabawasan
[But I know it could be lessen]
Nagdadasal na lang ako
[If I pray]
Naglalaro ng gameboy
[And play my gameboy]
Para malibang
[To be distracted]
At sumaya kahit konti.
[And to be happy even just a bit.]

Nalulungkot, minsay' nahihilo pa
[I feel sad and sometime dizzy too]
Daanin ko na lang sa kanta
[But lets just sing]
O di kaya'y sumayaw
[Or dance]
At tumula na. (repeat *)
[And recite a poem too.]