



Older Persons in the Philippines: a Demographic, Socioeconomic and Health Profile

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Abstract

This study aims to describe the ageing situation in the Philippines and to provide a national portrait of older Filipinos, focusing on their demographic and socioeconomic characteristics, health status and household conditions. Data are mainly drawn from the 1990, 2000 and 2010 Philippine Census of Population and Housing (CPH), and the 2013 Philippines National Demographic and Health Survey (NDHS). The study shows that the population of the Philippines is still young but is slowly ageing. Older people in the country are predominantly women, and they are more concentrated in rural areas. Nearly 1 in 5 older Filipinos has at least one functional difficulty, and around 6 in 10 are covered by health insurance. Although their level of education is relatively low compared to the general population, their educational profile has been improving over time. Older Filipinos live in a housing unit that is of acceptable quality, although a significant proportion lives in less than ideal housing condition. Their access to electricity, clean water, and decent toilet facility is generally high, but far from universal. Sources of social support for older Filipinos remain steady, as most of them have a large household size and the majority live with their children. Although the older population, as a whole, is usually considered as a vulnerable group in the face of rapid demographic and economic changes, there are specific segments within this group that merit special attention. Specifically, careful attention should be directed to older women, those living in rural areas, and the oldest-old because they suffer a significant disadvantage in terms of functional difficulty, health insurance coverage and access to potential sources of social support.

Keywords Older Filipinos · Population ageing in the Philippines · Demographic and socioeconomic characteristics · Health status and household conditions

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Introduction

Population ageing refers to “the process of structural transformation from a youthful population with a large proportion in childhood or young adulthood to a mature population with increased proportions at middle and older ages” (Booth 2018:431). By convention, 60 or 65 years are arbitrarily used as the threshold ages to categorise the ‘older age’ group (Victor 2010). In most developed countries, the chronological age of 65 years has been used as the cut-off age for defining older people, to approximate the retirement ages (Ananta and Arifin 2009), but in developing countries, including the Philippines age 60 is commonly used as the cut-off (Abalos et al. 2018; Cruz et al. 2016). A country is usually considered to be an ‘ageing’ society when the proportion of older people aged 65 years and over to the total population exceeds 8 to 10% (Gavrilov and Heuveline 2003). As will be later shown in this paper, the age structure of the Philippine population is slowly shifting toward the older age groups due to declining fertility and improving longevity. Although the ageing phenomenon in the Philippines is at an early stage compared to other Southeast Asian countries, it is important to understand how the different demographic processes play out to produce the ageing situation in the country and to describe the individual characteristics and household conditions of older Filipinos. Older people comprise the fastest growing segment of the Philippine population, and their share relative to the total population is expected to further increase as a result of past demographic events. The ageing of the population has many significant socioeconomic and health implications and presents challenges for public health and economic development (Gavrilov and Heuveline 2003). However, the unfolding of the ageing phenomenon in the Philippines is occurring in the near absence of formal support system for older people (Kinsella and Phillips 2005; Natividad et al. 2014) and the lack of health infrastructures to cater for their healthcare needs. Thus, a careful assessment of the key characteristics of older persons is very important for the development of policies and programs by the government, civil society organisations and the private sector (Knodel and Chayovan 2009). Although there are earlier studies that have examined the demographic and socioeconomic characteristics of older Filipinos (e.g., Biddlecom and Domingo 1996; Morada et al. 1986; Natividad 2000), most of these are quite dated. Given the recent changes in the demographic and socioeconomic landscape that have swept the Philippines in the past decades, it is important to examine how these changes influence the characteristics and conditions of the current generation of older Filipinos, using more updated data. There is also a dearth of studies in the Philippines that track changes in the characteristics of older Filipinos, despite the availability of cross-sectional data across different periods. To address this gap, this study also examines trends in the characteristics of older Filipinos using comparable data. Looking at trends in the characteristics of older Filipinos will improve our knowledge of the characteristics of future cohorts of older Filipinos and thus can help us better prepare for their needs. This study is broadly divided into two sections. The first section presents some basic demographic indicators in the Philippines in order to understand the ageing phenomenon in the country. The second section provides a national portrait of the Filipino older persons focusing on their demographic and socioeconomic characteristics, health status and household conditions. Trends in the characteristics of older Filipinos are also examined in this section. Whenever available, indicators are disaggregated by age, sex, place of

residence and marital status in order to identify which specific segment of the older population faces greater vulnerability. Data are mainly drawn from the 1990, 2000 and 2010 Philippine Census of Population and Housing (CPH), and the 2013 National Demographic and Health Survey (NDHS). A more detailed description of these data can be found elsewhere (Minnesota Population Center 2018; National Statistics Office [NSO] 2010; Philippine Statistics Authority (PSA) and ICF International 2014).

The Demographic Setting

Table 1 presents an overview of the demographic profile of the Philippines for the past five decades, starting in 1970. The table shows that the Philippine population has more than doubled from 36.7 million in 1970 to 92.3 million in 2010. During the last five decades, the country's population growth rate declined from 3.0% in 1970 to 1.9% in 2010. If this growth rate persists, the Philippine population will double in the next 36 years.

The steady increase in the Philippine population has been driven by the country's high fertility rate. Although the total fertility rate (TFR) in the country has already declined from 6 children in 1970 to 3 children in 2013, the decline has been slow. Given this above replacement fertility, the Philippines stands out as one of the countries with high TFR in the Southeast Asian region, along with Timor Leste, Lao People's Democratic Republic (PDR) and Cambodia. A lack of a clear and consistent population policy has been cited as one of the reasons for the slow decline in the country's fertility rate (Herrin 2002). The high fertility of the country resulted in an age structure that is predominantly young (Natividad 2000). This is seen in the country's population pyramid shown in Fig. 1. The country's age structure still follows a pyramidal shape, with a broad base indicating a large number of children resulting from the country's long history of high fertility and its slow decline. The indent in the middle starting at ages 20 to 24 could be due to the emigration of young people to other countries to search for better employment opportunities. The narrow shape at the peak of the pyramid reflects the low level of life expectancy in the past decades and its slow improvement in recent years, resulting in a small proportion of Filipinos advancing to old age. The youthful composition of the country's age structure is also evident in the dependency ratio that shows the number of young dependents (0–14) and old dependents (65 and above) to the total working-age population (15–64). The decline in the young dependency ratio from 89 in 1970 to 53 young dependents in 2010 reflects the steady decline in fertility. In contrast, the number of old dependents has been increasing, albeit slowly from 5 dependents in 1970 to 7 dependents in 2010.

To a lesser extent, the improvement in mortality has also contributed to the country's population growth. Over the last five decades, life expectancy at birth in the Philippines has improved, although the improvement has been more substantial among women than men. Life expectancy at birth among Filipino men increased from 54.2 years in 1970 to 66.9 years in 2010 or a gain of almost 13 years in half a century. For women, the increase is much larger, from 57.2 years in 1970 to 73.0 years in 2010, a gain of 15.8 years (Flieger and Cabigon 1994; Philippines Statistics Authority 2010a). Over time, the female advantage in life expectancy has doubled from 3 years in 1970 to 6 years in 2010. Life expectancy at age 60 also moderately increased, but similarly, the increase is more notable among older women than older men.

Table 1 Selected demographic indicators for the Philippines, 1970–2010

	1970	1980	1990	2000	2010
General indicators					
Total population ^a	36,684,486	48,098,460	60,559,116	76,504,077	92,335,113
Growth rate	3.03 1973 National Demographic Survey (NDS)	2.71 1983 NDS	2.35 1993 NDS	2.34 2003 National Demographic and Health Survey (NDHS)	1.90 2013 NDHS
Total fertility rate ^b	6.0	5.1	4.1	3.5	3.0
Dependency ratio ^c					
Total	94	83	76	69	60
Under 15	89	77	70	63	53
65 and above	5	6	6	6	7
Life expectancy ^d					
At birth					
Males	54.2	59.8	62.8	65.0	66.9
Females	57.2	63.4	66.4	70.3	73.0
At 60					
Males	16.3	16.5	17.0	17.9	16.4
Females	17.1	18.2	19.0	20.1	20.1
Indicators of population ageing					
Median Age	16.7	18.1	19.2	20.5	23.1
Ageing index ^e (60+/0–14)	0.10	0.13	0.13	0.16	0.20
Number of population 60 and over					
Both sexes	1,646,485	2,541,837	3,187,967	4,565,560	6,241,326
Male	817,069	1,263,076	1,496,517	2,095,026	2,759,749
Female	829,416	1,305,761	1,691,450	2,470,534	3,481,577
Proportion of population 60 and over					
Both sexes	4.5	5.3	5.3	6.0	6.8
Male	2.2	2.6	2.5	2.7	3.0
Female	2.3	2.7	2.8	3.2	3.8
Sex ratio (60+)	98.5	94.7	88.5	84.8	79.3

^a United Nations Statistics Division (2018)^b Concepcion (1991) cited in NSO and Macro International (1994), NSO and ICF Macro (2009), Philippine Statistics Authority [PSA] and ICF International (2014)^c Calculated by the author based on UN data^d Natividad (2000), Cabigon (2009), PSA (2010a)^e Calculated by the author based on UN data

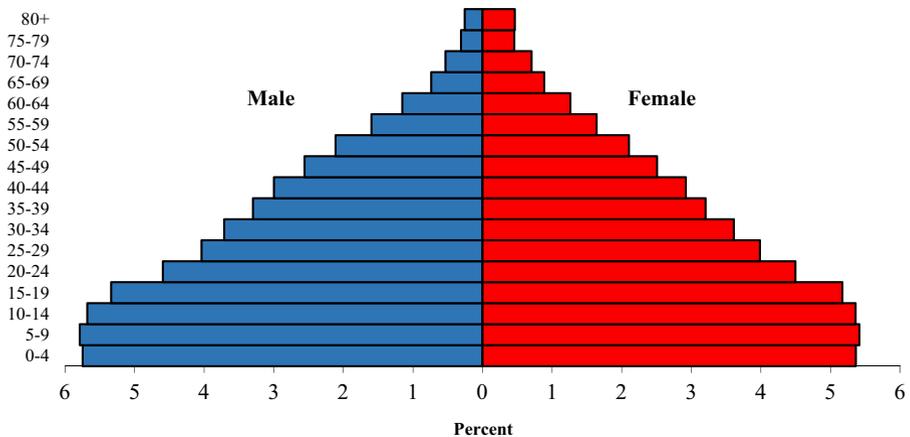


Fig. 1 Population pyramid of the Philippines, 2010. Source: constructed by the author based on 2010 census data

Ageing of the Philippine Population

Although the Philippine population is still comparatively young, it is slowly ageing, as evidenced by the increasing median age from 16.7 years in 1970 to 23.1 years in 2010. The ageing index, defined as the ratio of older people aged 60 and over to persons under age 15 (Knodel and Chayovan 2009), also points to the slow but steady ageing of the Philippine population. Due to declining fertility and increasing life expectancy, the proportion of Filipinos age 60 years and over has continued to increase over time. Similarly, the absolute number of older Filipinos has also increased over the years. However, while the increase in the percentage of Filipino older persons was modest, from 4.5% in 1970 to 6.8% in 2010, the increase in absolute number was more dramatic. In 1970, there were only 1.6 million Filipino older persons, but in 2010, this number had increased to 6.2 million. Older Filipino women continue to outnumber older men, due to the former's longer life expectancy than the latter. The steady decline in sex ratio at older ages reflects the much greater improvement in longevity among older women than older men. If the decline in fertility and the improvement in longevity continue, the proportionate share of the Filipino older persons will continue to increase, while the share of the younger segment of the population will continue to decline over time, as can be seen in Fig. 2. The Philippine Statistics Authority [PSA] (2010b) projected that in 2035, the proportion of Filipinos age 60 and over will reach 12.8%, while the proportion age 65 and over will reach 8.9% of the total population. By then, the Philippine population will be considered an ageing society, based on the definition proposed by Gavrilov and Heuveline (2003).

Demographic and Socioeconomic Characteristics of Older Filipinos

Similar to the overall population, the age structure of Filipino older population is also relatively young. Table 2 shows that about 6 in 10 older persons in the Philippines are in their 60s, while around 11% are 80 years and above. There is little change in the age

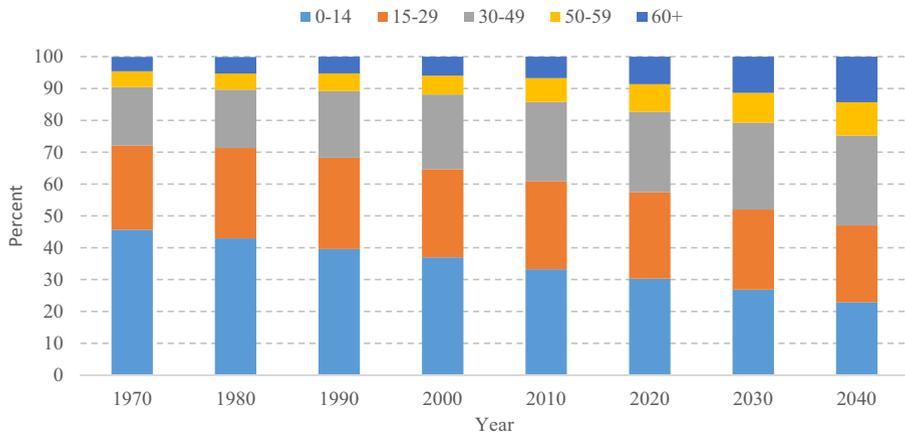


Fig. 2 Distribution of the Philippine population by age group, 1970–2040. Source: calculated by the author from census data. Figures for 2020 onwards are based on projections by PSA (2010b) using the medium assumption

structure of the older Filipinos over time, although it is worth noting that the share of the oldest-old has slowly increased. There is a greater share of men than women who are in their 60s, while there is a higher concentration of women than men in older age groups, reflecting higher male mortality after age 60 (Knodel and Chayovan 2009).

Majority of older Filipinos live in rural areas, and the proportion living in rural areas increased since 1990. The relatively high concentration of older people in rural areas could be due to selective outmigration from these areas, particularly among young people (Costello 1994). While little sex difference exists in the spatial distribution of Filipino older persons, a more striking pattern is noted when it comes to age. Specifically, the proportion of older Filipinos who live in Metro Manila and other urban areas declines with advancing age, while the proportion who live in rural areas increases with age.

The marital status of older people represents an important aspect of family structure that significantly impacts their living arrangements, support systems and well-being (Concepcion and Perez 2006). For example, a longitudinal study among older adults in China shows that being married is associated with better psychological well-being and physical health (Williams et al. 2017). Meanwhile, unmarried older persons are less likely to be financially secure and may not receive as much care when they become ill compared to those who have a spouse (Mujahid 2006). Given the relatively young age composition of older persons in the Philippines, it is not unexpected that majority of older Filipinos are currently married, although the proportion has slightly declined from 64.2% in 1990 to 61.8% in 2010. Currently married includes those who have legally married and those who are in cohabitation. However, given the preponderance of older men to remarry compared to older women, the proportion of men (79.7%) who are currently married are nearly twice higher than women (47.6%). The proportion who are currently married decreases with advancing age, while the proportion who are widowed steadily rises with age. Moreover, while there are more men than women who are currently married, the reverse is true among the widowed. For instance, the share of older Filipinos who are widowed is nearly three times as high among older women (43.2%) as older men (14.6%). The overall proportions of older Filipinos who are widowed remain unchanged over the past two decades, partly reflecting the slow

Table 2 Demographic and socioeconomic characteristics of older persons in the Philippines, 1990–2010

Indicators	1990	2000	2010	2010									
	Sex		Age group			Type of place of residence			Marital status				
	Male	Female	60–69	70–79	80 +	Metro Manila	Other urban areas	Rural area	Never married	Currently married	Formerly married		
Age group													
60–69	60.9	60.7	59.7	63.2	56.9	–	–	64.0	62.0	57.8	57.2	68.4	43.5
70–79	29.7	28.6	29.6	28.2	30.8	–	–	26.9	28.3	30.8	29.6	26.0	36.7
80+	9.3	10.7	10.7	8.6	12.3	–	–	9.1	9.7	11.4	13.2	5.7	19.8
% female	53.1	54.1	55.8	–	–	53.2	57.9	64.4	56.3	55.2	69.1	43.0	77.9
Place of residence													
Metro Manila	9.9	–	10.9	10.4	11.3	11.7	9.9	9.3	–	–	13.8	10.6	10.9
Other urban areas	36.5	–	29.4	29.1	29.6	30.5	28.1	26.8	–	–	29.8	29.0	29.9
Rural area	53.6	–	59.7	60.6	59.1	57.8	62.1	63.8	–	–	56.4	60.4	59.2
Marital status													
Never married	5.6	5.1	6.2	4.3	7.6	5.9	6.1	7.6	6.3	5.8	–	–	–
Currently married	64.2	63.6	61.8	79.7	47.6	70.7	54.1	32.8	60.0	61.1	–	–	–
Widowed	29.3	30.0	30.5	14.6	43.2	21.5	38.6	58.7	29.6	30.9	–	–	–
Divorced/separated	0.9	1.3	1.5	1.4	1.6	1.9	1.2	0.8	2.5	1.7	–	–	–
Education													
No grade completed	19.6	10.5	5.7	5.2	6.2	4.1	6.6	12.2	0.8	4.0	7.9	4.5	7.7
Below primary	40.8	35.3	30.7	30.1	31.2	26.7	35.2	40.9	10.3	24.2	26.2	29.0	35.0
Primary completed	24.5	32.8	32.2	30.5	33.5	33.6	32.0	24.7	25.1	31.3	28.3	32.4	32.5

Table 2 (continued)

Indicators	1990		2000		2010									
	Sex		Age group		Type of place of residence		Marital status							
	Male	Female	60–69	70–79	80 +	Metro Manila	Other urban areas	Rural area	Never married	Currently married	Formerly married			
Secondary completed	9.6	15.8	19.9	23.1	17.5	22.6	17.1	12.5	39.2	25.0	13.9	21.4	21.6	16.4
University completed	5.6	5.6	11.4	11.1	11.6	12.9	9.0	9.7	24.5	15.5	7.0	16.2	12.5	8.4
% Literate	78.1	81.0	93.2	93.5	93.0	95.0	92.1	86.3	–	–	–	91.8	94.4	91.2

Source: calculated by the author based on 1990, 2000 and 2010 Census microdata

improvement in male mortality at older ages in the Philippines. Aside from the higher remarriage rates of men, other factors that could explain the sex difference in marital status include the relative longevity of women and spousal age differences: the husband is usually older increasing the likelihood that the husband will die earlier than the wife (Abenoja 1990; Knodel et al. 2002; Knodel and Ofstedal 2003; Sobieszczyk et al. 2003; Mehio-Sibai et al. 2009; Mujahid 2006). For example, age at marriage for Filipino men in 2010 was 27.0 years, while it was only 24.4 years for Filipino women or a difference of almost 3 years (Abalos 2014). This age difference is slightly higher compared to that of Malaysia (2.1 years) and Singapore (2.4 years) but lower than that of Indonesia (3.4 years) and Thailand (3.5 years) (Jones 2018). Men's tendency to delay marriage could be due to the heavy cost of marriage commitment and responsibility that comes with it (Mercado 1990). Since husbands are usually expected to be the primary provider of the family, women may feel less pressure compared to men and may, therefore, get married, even at an early age (Mercado 1990).

Only a small proportion (6.2%) of Filipino older persons are never married, reflecting the universality of marriage in the country. Non-marriage is higher among women, those in their 80+ and those living in Metro Manila. The higher non-marriage rates among older women than older men could be due to the greater acceptability of remaining single among women (Rodell 2002). Being a spinster is not deemed shameful in the Filipino culture whereas men who remain a bachelor in old age may be subject to some ridicule for not being a man (Rodell 2002). Certain family obligations of women during their younger years, such as taking care of their siblings or staying home most of the time to help out in household chores, may have also limited their socialisation compared to their male counterparts, (Mercado 1990) and eventually their marriage prospects. Since divorce is not legal in the Philippines and other measures to legally dissolve marriage are expensive, only a negligible proportion of older Filipinos are divorced and separated, although this proportion has been increasing over time (Abalos 2017).

Over the last two decades, the educational profile of older Filipinos has significantly improved. The proportion with no schooling declined from 19.6% in 1990 to 5.7% in 2010, while those with secondary education increased from 9.6 to 19.9%. This improvement in education has important implications for older Filipinos' economic activities, health status, lifestyle, and other behaviours. The educational profile of older persons in the Philippines also differs by demographic characteristics. A slightly higher proportion of older women than older men has below secondary education, while proportionally more men (23.1%) than women (17.5%) completed secondary education. The relatively higher level of education among Filipino men than Filipino women could be attributed to the slight preferential treatment given to boys relative to girls in pursuing higher education in the past (Abenoja 1990; Mercado 1990; University of the Philippines Population Institute (University of the Philippines Population Institute [UPPI] 1981). This norm is motivated by the belief that girls can start to contribute in the household at an earlier age and that women stay at home as caretakers for the children (de Guzman et al. 1995). However, this sex difference is likely to fade given the improvement in the educational participation of women in recent years. The younger cohorts of older Filipinos completed a much higher level of education compared with the older cohorts. The educational profile of future cohorts of Filipino older persons is also expected to improve even more given the expansion of educational

opportunities in the Philippines in the past decades (Biddlecom and Domingo 1996; Hermalin et al. 2007). This improvement in the educational profile of future cohorts of older Filipinos suggests that family support will be linked more to the needs of the older persons and less related to custom (Biddlecom and Domingo 1996).

Differences in educational attainment are not only apparent across cohorts but also across the place of residence. Filipino older persons living in Metro Manila and other urban areas have better educational profile compared to their rural counterparts. For example, the proportion who completed secondary education is nearly thrice higher among older persons in Metro Manila (39.2%) than those in rural areas (13.9%). Outmigration of those with higher level education to urban areas such as Metro Manila due to better employment opportunities could explain this educational difference by place of residence. Easier access to educational facilities and services in urban areas could also contribute to higher levels of education of those living in urban areas. Meanwhile, the never married older Filipinos have the highest proportion who did not finish schooling, but they also have the highest proportion who completed tertiary education, compared to the currently and formerly married older Filipinos.

Literacy rate in the Philippines has always been high due to its liberal definition, which is the ability to read and write a simple message (De Guzman et al. 1995). Parallel with the improvement in educational attainment is the increase in the literacy rate of older Filipinos from 78.1% in 1990 to 93.2% in 2010. This increase is a reflection of the several changes in the social and political milieu during their younger years that corresponded to middle and later part of the American occupation in the Philippines (1898–1942), where universal basic schooling up to primary level was encouraged as part of its education policy (Natividad 2000). Older men and women do not differ much in terms of literacy, while a higher proportion of those in their 60s is literate compared to the oldest-old. Since a higher proportion of the never married did not complete schooling, their literacy rate is relatively lower compared to the currently married.

Health Status and Health Insurance Coverage of Older Filipinos

Good health is an important determinant of quality of life (National Research Council 2011). Indicators on functional difficulties, which are available in the 2010 CPH, are used to gauge the health status of Filipino older persons. Functional difficulties experienced by people may have been caused by their health conditions, which could refer to “diseases or illnesses, other health problems that may be short or long lasting injuries, mental or emotional problems, and problems with alcohol or drugs” (NSO 2010:118–119). “Difficulty is usually manifested when a person is doing an activity with increased effort, discomfort or pain, slowness, or changes in the way he/she does the activity” (NSO 2010:119). As shown in Table 3, almost 1 in 5 Filipino older persons has at least one functional difficulty, slightly more so among women (19.1%) than men (17.8%). Difficulty in seeing, even if wearing eyeglasses, was the most common difficulty reported by older Filipinos (13.4%). This was followed by difficulty in walking or climbing steps (5.8%), and difficulty in hearing, even if using a hearing aid (5.6%). Only a small share of older Filipinos have difficulty in remembering (2.8%), bathing or dressing (1.9%) and communicating (1.2%). The proportion with

Table 3 Health status (2010) and health insurance coverage (2013) among older Filipinos

Indicators	Total		Age group				Type of place of residence				Marital status		
	Male	Female	80 +				Metro Manila	Other urban areas	Rural area	Never married	Currently married	Formerly married	
			60–69	70–79	70–79	80 +							
% with functional difficulty (2010)	13.4	12.6	13.9	10.3	15.8	23.8	15.5	13.1	13.1	11.7	12.0	16.3	
Difficulty in seeing, even if wearing eyeglasses	5.6	5.5	5.6	2.4	7.1	19.0	4.2	4.8	6.2	5.9	4.1	8.2	
Difficulty in hearing, even if using hearing aids	5.8	5.4	6.0	2.9	7.2	18.2	5.5	5.4	6.0	6.3	4.4	8.3	
Difficulty in walking or climbing steps	2.8	2.4	3.1	1.2	3.2	10.6	2.1	2.4	3.1	3.4	1.9	4.4	
Difficulty in remembering	1.9	1.8	2.1	0.7	2.0	8.5	1.8	1.9	2.0	2.5	1.3	3.0	
Difficulty in bathing or dressing	1.2	1.2	1.2	0.6	1.3	4.2	1.0	1.2	1.2	2.2	0.8	1.7	
Difficulty in communicating	18.5	17.8	19.1	13.2	22.2	38.2	19.2	17.8	18.7	18.4	16.0	23.4	
At least one functional difficulty	63.0	66.5	60.3	65.9	60.8	52.1	61.0	67.8	60.9	–	–	–	
% covered by any type of health insurance (2013)	58.3	60.9	56.4	60.9	56.6	48.1	53.2	61.4	57.8	–	–	–	
Philippine Health Insurance Corporation (PhilHealth)	3.7	3.5	3.8	3.9	2.9	4.6	3.2	4.3	3.4	–	–	–	
Government Service Insurance System (GSIS)	13.1	17.9	9.3	15.3	10.2	7.6	22.5	19.2	7.5	–	–	–	
Social Security System (SSS)	1.6	1.9	1.4	1.8	1.2	1.5	4.1	2.3	0.7	–	–	–	
Private insurance company/Health Maintenance Organization (HMO)	0.3	0.4	0.3	0.4	0.3	0.3	1.0	0.3	0.2	–	–	–	
Others	–	–	–	–	–	–	–	–	–	–	–	–	

Source: calculated by the author based on 2010 CPH and 2013 NDHS data

at least one functional difficulty steadily increases with advancing age, from 13.2% among those in their 60s to 38.2% among the oldest age group.

The overall prevalence of at least one functional difficulty is slightly higher among older persons in Metro Manila than in other areas. However, when the individual functional difficulty indicators are examined, it can be seen that older Filipinos from rural areas are more disadvantaged in terms of these health indicators. Specifically, compared with those who are living in Metro Manila and other urban areas, there are much higher proportions of older people in rural areas who have difficulty in hearing, walking or climbing steps, remembering, and bathing or dressing. Meanwhile, the currently married older persons have better health status than their unmarried counterparts, lending support to earlier studies showing marriage to have beneficial effects on an individual (Waite 1995, 2009). For example, except for the eyesight difficulty, the currently married older persons reported lower prevalence in all functional difficulty indicators compared to their never married and formerly married counterparts.

The prevalence of sickness and disability tends to increase in older ages; thus, it is important for older persons to have health insurance to cover their healthcare needs, particularly those who do not have sufficient income or savings. Social health insurance in the Philippines began in 1969 with the approval of Republic Act (RA) 6111 that created the Philippine Medical Care Commission (PMCC) which was responsible for implementing the Philippine Medical Care Plan (Medicare) (Obermann et al. 2006). In 1995, RA 7875 (National Health Insurance Act) was passed, creating the Philippine Health Insurance Corporation (PhilHealth) that is responsible for managing and developing the National Health Insurance Programme (NHIP), which, in effect, replaced the PMCC (Hindle et al. 2001). A major goal of this new policy was to achieve universal coverage by 2010 (Obermann et al. 2006). This national health insurance program gives access to in-patient and outpatient services in accredited medical facilities all over the country (Gonzales 2007). It covers both workers of the formal economy, such as government employees and private employees, and members in the informal economy including migrant workers, self-employed individuals, sponsored members and indigents (Gonzales 2007). Table 3 shows that majority (63.0%) of older persons in the Philippines are covered by any type of health insurance, such as PhilHealth, Social Security System (SSS) and Government Service Insurance System (GSIS). PhilHealth is the most common health insurance provider, covering 58.3% of Filipino older people. Meanwhile, only 13.1% of older Filipinos are covered by SSS, and only 3.7% are covered by GSIS. SSS provides social security coverage for private-sector employees, while GSIS covers employees of the government and state enterprises (Natividad et al. 2014). Health insurance coverage is higher among older men (66.5%) than older women (60.3%) and declines with advancing age, from 65.9% among those in their 60s to 52.1% among the oldest-old. The relatively lower coverage among the oldest-old could be partly explained by the much later introduction of health insurance through Medicare in 1969; hence, this cohort is likely to be not covered by this scheme when they were still active in the labour force (Cruz et al. 2016). It is expected that there will be higher coverage among the succeeding cohorts of older Filipinos when the current PhilHealth reforms begin to take effect in the older ages (Cruz et al. 2016). Finally, older people from other urban areas have higher health insurance coverage than those from Metro Manila and rural areas.

Household Characteristics of Older Filipinos

The household, particularly in developing countries, is considered the most crucial institution for older people (Zimmer and Kim 2001). It represents the institution where economic and other goods are distributed (Thornton 1984) and serves as the main venue for the expressions of age, gender, kinship and economic roles (Zimmer and Kim 2001). The number of individuals in a household is influenced by a host of demographic factors, including the prevailing fertility and mortality rates, marriage timing, risk of marital dissolution and remarriage (Bongaarts 2001). A household in the Philippine context is usually defined as “a social unit consisting of a person living alone or a group of persons who sleep in the same housing unit and have a common arrangement in the preparation and consumption of food” (NSO 2010: 20). Table 4 presents some household characteristics of older Filipinos including their household size, household headship rate and living arrangements. These indicators provide a glimpse of the sources of social support available to older Filipinos.

Household size is the most basic indicator of the extent to which older people live in isolation or in a dense social environment (Domingo and Casterline 1992). Table 4 indicates that the household size of older Filipinos slowly declined from 4.9 in 1990 to 4.4 in 2010, partly a reflection of the slow fertility decline in the country. Household size does not widely vary between older men and women but tends to decline with age. The decline in household members as the older person grows older could be due to widowhood or the moving out of the older Filipino’s children from parental abode to form their own household. Household size is higher in urban than in rural areas, possibly due to the relatively high cost of living in urban areas, motivating household members to pool resources and to maximise economy of scale instead of forming their separate households.

Household headship, to some extent, reflects an individual’s status in the family or the household (Cruz et al. 2009). It also indicates how important a household member is and the degree of power he or she has in controlling and allocating the family’s economic and social resources (Phua et al. 2001). The 2010 CPH defines household head as “an adult person, male or female, who is responsible for the organisation and care of the household, or who is regarded as such by the members of the household” (NSO 2010: 76). However, in reality, household headship in the traditional Filipino family is bestowed on the breadwinner who is usually the husband/father (Medina 2015). Thus, it is not unexpected that 81.1% of households in the Philippines in 2013 were headed by men (PSA and ICF International 2014). Although women also contribute substantially to the household, men are usually ascribed the headship position in most data collections, due to the patriarchal view that men are the providers of the family, while women serve as its nurturers (Torres 1994). Women only become the head of household when the husband is absent mostly due to widowhood, but to a lesser extent could also include marital separation and temporary separation due to labour migration, military service or incarceration (Medina 2015; Torres 1994). The low prevalence of female-headed household in the country could also be due to the social stigma against female-headed household, particularly those headed by separated and unmarried lone mothers (Chant 1997). Older people in the country command high regard from the younger generation and they occupy a special place of honour (Medina 2015); thus, it is not surprising that majority of older Filipinos still retain headship over their household, as shown in Table 4. Headship rate among older Filipinos is more than twice as high among men (88.5%) as women (36.9%) and tends to decline with increasing

Table 4 Household characteristics of older persons in the Philippines, 1990–2010

Indicators	2010													
	Year		Sex				Age group			Type of place of residence			Marital status	
	1990	2000	2010	Male	Female	60–69	70–79	80+	Metro Manila	Other urban areas	Rural area	Never married	Currently married	Formerly married
Average household size	4.9	4.7	4.4	4.5	4.4	4.6	4.2	4.3	4.7	4.6	4.3	4.2	4.6	4.2
% Household head	55.7	57.4	59.7	88.5	36.9	60.1	61.0	53.5	57.8	59.0	60.4	40.2	56.7	69.2
Living arrangements														
Living alone	4.4	5.7	7.0	5.8	8.0	5.4	8.9	10.9	4.9	5.9	7.9	19.5	1.1	15.9
Living with spouse only	10.7	11.8	12.1	14.8	10.0	11.8	13.8	8.9	8.5	10.6	13.5	0.0	19.6	0.0
Living with children	62.9	62.6	62.5	65.0	60.5	66.7	56.6	55.2	66.4	64.9	60.6	15.7	66.9	63.1
Other arrangement	22.0	19.9	18.4	14.4	21.5	16.1	20.7	24.9	20.2	18.7	17.9	64.8	12.4	20.9

Source: calculated by the author based on 1990, 2000 and 2010 CPH data

age. The declining headship rate with advancing age could be attributed to the declining health status of older Filipinos as they age, making them unable to fulfil their obligations or responsibilities as household head (Sarmiento 1990). Older persons from the rural areas and those who are ever married tend to head their own household compared to their urban and never married counterparts. Since housing costs are relatively inexpensive in rural areas compared to urban areas, older people are more likely to establish or keep their own dwelling unit and become the household head, rather than move in with their children or other relatives. Meanwhile, married older Filipinos tend to stay in the same household with their spouse and young children, and mostly remain in the same household, even when all their children have already moved out. In this type of living arrangement, either of the couple, usually the husband, becomes the household head.

Living arrangements represent an important dimension of the overall well-being of older people (Domingo and Casterline 1992). Living in the same household facilitates the exchange of support between older people and their children (Chan 1997; Knodel and Chayovan 1997), particularly in the provision of assistance to frail older persons (Domingo and Asis 1995). Although assistance can extend beyond the household, coresidence acts as insurance to meet the future needs of older people (Martin 1989) and increases the likelihood of obtaining care from family members (Ugargol et al. 2016). In the Philippines, living with children is the most common form of living arrangement among older people. Although some scholars suggest that the declining fertility will lead to the higher proportion of older people not living with their children (Costello 1994), data indicate that the proportion of older Filipinos living with their children has remained stable over time, echoing findings from earlier research (Knodel and Ofstedal 2002). The generally high level of coresidence with children among older Filipinos and its stability over time could be rooted in the traditional expectations for children to support their parents in old age (Domingo and Casterline 1992). One way for children to provide this support is through coresidence. Adherence to this cultural expectation may have been motivated by the children's sense of "utang na loob", an "immeasurable and eternal" debt of gratitude for their parents for giving them life and providing them care while growing up (Hollsteiner 1970:72). Those who fail to repay this "utang na loob" is sanctioned by "hiya", or "the uncomfortable feeling that accompanies awareness of being in a socially unacceptable position, or performing a socially unacceptable action" (Lopez 1991; Lynch 1970:16).

Although the majority of older Filipinos live with their children, this level of coresidence is relatively lower compared to other Southeast Asian countries (Knodel and Debavalya 1997; Knodel and Ofstedal 2002). For example, census data show that 67.2% of older people in Cambodia (2008) and 64.4% in Vietnam (2009) coreside with their children compared with 62.5% in the Philippines (2010) (Minnesota Population Center 2018). One reason for the relatively lower coresidence rates among older people is the physical constraints of the small housing unit of the Filipino household (Domingo and Casterline 1992).

Coresidence with children is higher among older men (65.0%) than older women (60.5%), and tends to decrease with advancing age, from 66.7% among those in their 60s to 55.2% among the oldest-old. Previous research shows an increasing trend toward coresidence at older ages, and it was argued to be a reflection of the older person's deteriorating health status (Karagiannaki 2011), thus their increasing need for assistance from their children. That the opposite pattern is observed in the Philippines could

mean that parent-child coresidence in the Philippines may be a reflection of the life-course circumstances of the children rather than parental needs (Domingo and Casterline 1992; Knodel et al. 1996).

Living in the same household with their children is more common among older people living in Metro Manila (66.4%) and other urban areas (64.9%) compared with those living in rural areas (60.6%). Previous studies argue that urban crowding, housing shortages, and high housing costs could lead to higher coresidence in urban areas relative to rural areas (Knodel and Ofstedal 2002; Martin 1989). Coresidence with children is also more common among older Filipinos who are currently married (66.9%) and formerly married (63.1%) compared to those who have never married (15.7%). This is expected since those who have ever been married have more available children to live with compared to those who have never married.

About 1 in 8 older Filipinos is living with their spouse only, particularly more so among older men (14.8%) than older women (10.0%). The slow but steady increase in the proportion of older Filipinos who live with their spouse only, from 10.7% in 1990 to 12.1% in 2010 reflects the slow increase in life expectancy at older ages in the Philippines. Living in this kind of arrangement declines with age and coincides with the “empty nest stage” life cycle where children usually leave their parents’ home to establish their own household (Giang and Pfau 2007). Higher proportions of older people in rural areas (13.5%) than their counterparts in Metro Manila (8.5%) and other urban areas (10.6%) are living with their spouse only.

Social isolation is viewed negatively in the Filipino society (Domingo and Casterline 1992), so much so that there is no word in any Filipino languages for “privacy” (Lopez 1991). Thus, living alone, particularly at older ages, is not very common in the Philippines, because it implies that the family has reneged on its duties to care for its older persons (Natividad and Cruz 1997). However, despite this social stigma, census data show that the proportion of Filipino older persons who live alone has moderately increased from 4.4% in 1990 to 7.0% in 2010. This increasing pattern is also observed in other Asian countries (Knodel 2014). The proportion of older Filipinos living alone is higher among women (8.0%) than men (5.8%) and steadily rises with age, from 5.4% among those in their 60s to 10.9% among the oldest-old. Older Filipinos in rural areas and those who have never married tend to live alone compared to their counterparts. The higher share of older Filipinos who live alone in rural areas could also be due to the migration of their children to urban areas (Costello 1994). Meanwhile, the higher propensity to live alone among the unmarried could reflect life course circumstances in that they are more likely to live alone because there is no spouse available (Zimmer and Kim 2001).

Housing Conditions and Household Possessions of Older Filipinos

Adequate access to shelter is one of the principles for older persons endorsed by the United Nations in its General Assembly in 1991. Studies have also shown that housing conditions may indirectly influence the psychological well-being of older persons (Phillips et al. 2005). To assess the housing conditions of the Filipino older people several indicators on housing quality are presented in Table 5. Overall, the vast majority of older Filipinos live in a building or house that is in good condition, i.e., does not need repair or needs only minor repair. A significant proportion (15.1%) of older

Table 5 Housing quality and household possessions among older persons in the Philippines, 2010

Indicators	Total		Age group				Marital status		
	Sex	Total	Age group				Marital status		
			Male	Female	60–69	70–79	80+	Never married	Currently married
State of repair of the building or house									
Needs no repair/needs minor repair	79.2	80.3	80.2	79.1	79.6	81.1	80.3	78.6	
Needs major repair/dilapidated/condemned	15.1	14.8	14.6	16.0	15.7	14.9	14.5	16.3	
Others	5.1	5.0	5.3	4.9	4.7	4.0	5.3	5.0	
% living in dwelling with electricity	84.3	87.1	85.9	85.1	87.3	87.7	85.7	85.7	
% with piped water inside house	32.6	34.0	33.6	33.0	33.6	36.4	33.0	33.5	
% in dwelling with flush toilet	65.9	68.7	67.6	66.7	69.2	71.9	67.5	66.7	
% in dwelling with no toilet	4.4	4.0	4.3	4.7	3.9	3.7	4.3	4.7	
Presence of household possessions									
Radio cassette	69.0	68.8	69.5	67.6	68.5	70.9	70.3	65.8	
Television set	73.6	75.8	76.3	72.2	73.5	75.5	75.8	72.9	
CD/DVD/VCD player	53.8	54.4	56.7	50.1	51.0	52.6	55.6	51.6	
Component/stereo set	26.6	27.5	28.1	25.1	26.8	28.3	28.2	24.9	
Landline/wireless telephone	12.5	13.9	13.2	12.8	15.0	17.9	13.6	11.7	
Cellular phone	67.1	67.9	70.8	62.5	63.0	65.6	68.4	66.3	
Personal computer	15.4	16.5	16.8	14.4	16.4	18.6	16.5	14.7	
Refrigerator/freezer	45.2	48.5	47.7	45.2	48.7	52.7	47.9	44.4	
Cooking range	29.4	31.9	31.0	29.5	33.0	35.8	30.9	29.5	
Washing machine	32.6	34.7	34.9	31.6	33.6	36.2	34.6	31.9	

Table 5 (continued)

Indicators	Total	Sex		Age group				Marital status		
		Male	Female	60–69	70–79	80+	Never married	Currently married	Formerly married	
Car/jeep/van	12.7	13.0	12.5	13.0	11.8	13.7	13.4	14.1	10.0	
Motorcycle/tricycle	18.8	19.4	18.3	20.2	16.4	17.4	15.6	20.1	16.9	
Motorised boat/banca	2.9	3.3	2.6	3.3	2.5	2.2	2.1	3.4	2.2	
% in dwelling with an internet connection	11.0	10.5	11.3	11.5	9.8	11.2	13.0	11.2	10.1	

Source: calculated by the author based on 2010 CPH data

persons, however, is living in a dwelling unit that needs major repair or is already dilapidated. These types of housing units cannot fully protect the residents from the elements and may have cracks on the interior walls, leaking roofs, holes on the floors, among other things (NSO 2010). Minimal sex and age differences exist in terms of housing quality of older Filipinos. Meanwhile, a slightly higher proportion of divorced and separated older Filipinos lives in a dwelling that needs major repair compared to their never married and currently married counterparts. Census data also indicate that overwhelming proportions of Filipino older persons live in a housing unit with electricity, but only a third live in households that have access to piped water inside the house or within their yard. In addition, only 67.5% of older Filipinos live in a dwelling unit with a flush toilet, while 4.4% live in a household with no toilet facility. The proportions of older people who live in households with electricity and a flush toilet are higher among older women, the oldest-old and the never married.

Table 5 also shows that older Filipino women, those in their 60s and those who have never been married are generally better off in terms of household possessions. With some exceptions, higher proportions of these segments of the older population live in households that have each item shown in Table 5 compared to their counterparts. The availability of these household possessions, particularly access to landline telephone and cellular phone will facilitate communication between older people and their non-coresident children. Aside from these devices, other means by which older people can maintain contact with their non-coresident children, especially those who are overseas, is through the internet. Based on the 2010 census, only 11% of older Filipinos live in a household that has an internet connection. A slightly higher proportion of older women and the never married lives in households with an internet connection relative to their counterparts.

Summary and Discussion

The population of the Philippines is still young but is slowly ageing. The country's long history of high fertility and its slow decline, combined with the modest improvement in mortality, has contributed to the slow pace of population ageing in the Philippines. Although the increase in the proportion of Filipino older persons has been very modest, the increase in the absolute number has been substantial: from 1.6 million in 1970 to 6.2 million in 2010. This puts the Philippines in a challenging situation of catering for the basic needs of a young population and at the same time providing for the healthcare needs of its growing number of older population.

There are also pronounced differences in the demographic and socioeconomic profile of older persons in the Philippines. The “feminisation of elderly” observed in many countries is also apparent in the Philippines (Domingo 1994; Knodel and Chayovan 2009) and has slightly intensified over time. This excess of women over men at older ages has been viewed negatively because it reflects high levels of widowhood and older women, particularly those without a spouse, are deemed disadvantaged compared with older men (Knodel 1999). However, while the predominance of women at older ages has been considered problematic, some factors could work to their advantage (Knodel 1999; Sobieszczyk et al. 2003). For example, women may suffer less disruption in the performance of their major roles as they enter old age

compared with men who may experience discontinuity associated with their exit from the job market (Gibson 1996). Older women may also be considered more valued members of the household than non-working older men, because of their greater contribution in terms of performing domestic chores (Knodel 1999).

This study also shows that ageing in the Philippines is mostly a rural phenomenon. Older Filipinos who are in their 60s are more likely to live in urban areas, including Metro Manila, while those in their 70s or 80+ are more likely to live in rural areas. The relative concentration of oldest-old in the rural areas, where access to healthcare facility is limited, is worrisome, since it is at oldest ages where the incidence of disease and disability is generally high. Furthermore, the outmigration of young people from rural to urban areas could also potentially diminish the available pool of caregivers to the oldest-old Filipinos in rural areas.

Appreciable differences in the marital status composition of older men and women in the Philippines are also noted. Specifically, higher proportions of older Filipino men are currently married, while higher proportions of older Filipino women are widowed. This pronounced sex difference in marital status could have important implications for the well-being of older Filipinos. The presence of a spouse among older Filipino men could work to their advantage as “spouses act as a small insurance pool against life’s uncertainties, reducing their need to protect themselves against unexpected events” (Waite 2009: 691). In contrast, the absence of a spouse may put widowed older women in a disadvantaged position due to loss of financial resources (Holden and Smock 1991).

Concomitant with the population ageing in the Philippines are significant changes in the socioeconomic characteristic of older people, particularly education. Over time, the share of older persons with no education significantly declined, whereas those with above secondary education sharply increased. Given the association between higher levels of education and better health status (Zimmer and Amornsirisomboon 2001), the observed improvement in education bodes well for the current and future cohorts of older Filipinos. Older Filipino men, those who are in the younger cohorts, those living in urban areas and who have never married may reap more the benefits of having a better education than their counterparts. Their high level of education could present better work opportunities for them that could translate to better economic status later in life (Knodel and Chayovan 2009).

The sex differences in the demographic and socioeconomic characteristics of older Filipinos also persist when it comes to health status. Older women, those living in rural areas and unmarried older Filipinos reported much higher levels of functional difficulty than their counterparts. The relative disadvantage of older women and those living in rural areas concerning health status also extends to health insurance coverage. Moreover, the increasing prevalence of functional difficulty with advancing age is not accompanied by a corresponding increase in health insurance coverage. In fact, the reverse is observed, with the oldest-old having the lowest insurance coverage. Given the financial insecurity associated with old age, this lack of health insurance among the oldest-old Filipinos may further strain the financial capacity of their family members who may be forced to allocate their limited resources between the healthcare needs of their children and their elderly parents.

Given the long history of high fertility in the Philippines, the current generation of older Filipinos is assured of a bigger household size from which they can draw support. Coresidence with children, which can serve as an indicator of family support, is

generally high and has remained stable over time. However, while this may reflect the resilience of filial obligations toward older people, caution should be taken in automatically equating coresidence with the presence of support or provision of care for older people (Hermalin 2002). As argued by Chan (2005: 277) living with a child “is not evidence in and of itself of a net flow of resources from child to parent, or that coresidence reflects the parent’s needs”. Earlier studies in the Philippines and Indonesia suggest that parents in a coresidential arrangement may be the one providing support to their children, and not the other way around, especially if the children are still young and have not established their independence (Beard and Kunharibowo 2001; Domingo and Casterline 1992). Similarly, noncoresidence with children does not necessarily mean an absence of support (Knodel and Saengtienchai 1999). For example, the 2007 Philippine Study on Ageing (PSOA) data show that older Filipinos received both financial (87.3%) and non-financial (73.7%) support from their non-coresident children (Cruz et al. 2016). These suggest that while the household may play an important role in determining the well-being of older people, the household is not an adequate unit of analysis (Madhavan et al. 2017; Randall and Coast 2015) because the exchange of support extends beyond the household, and the direction of flow of support is not always clear in a coresidential arrangement (Cohen and Casper 2002; Smits et al. 2010). Thus, information on living arrangements among older people should be complemented with information on actual exchange of support between older people and their children who are living within and beyond the household to get a more nuanced picture of the intergenerational exchange of support in the country.

The overall household conditions of older people in the Philippines are generally favourable. Most older Filipinos live in a housing unit that is of acceptable quality, although a significant proportion still lives in less than ideal housing condition. Their access to household necessities, such as appropriate lighting, potable water, and decent toilet facility is generally high but far from universal. The lack of access to these household necessities may further exacerbate the difficulty experienced by those who need assistance in carrying out activities of daily living (ADLs), such as bathing and using the toilet. On the positive side, a significant share of older Filipinos has access to some household possessions, such as radio and television that can play an essential role in their recreation and social life.

Although the older population, as a whole, is usually considered as a vulnerable group in the face of rapid demographic and economic changes (Natividad and Cruz 1997), there are specific segments within this group that merit special attention. Specifically, careful attention should be directed to older women, those living in rural areas, and the oldest-old because they suffer a significant disadvantage in terms of functional difficulty, health insurance coverage and access to potential sources of social support.

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Compliance with Ethical Standards

Conflict of Interest The author declares that he has no conflict of interest.

Informed Consent As there is no person or personal data appearing in the paper, there is no one from whom a permission should be obtained in order to publish personal data.

Ethical Treatment of Experimental Subjects (Animal and Human) This article does not contain any studies with human participants or animals performed by any of the authors.

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