



PN-ABS-045

# Philippines



Cover: Fertility preferences of currently married women; 63 percent want no more children and 19 percent want to delay the next birth for at least two years. Only 9 percent of married women want to have a child within two years (see Figure 5).

# NATIONAL DEMOGRAPHIC SURVEY 1993

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National Statistics Office  
 Solicarel Building  
 Ramon Magsaysay Boulevard  
 Santa Mesa  
 Manila, Philippines

This report summarizes the findings of the 1993 National Demographic Survey (NDS) undertaken by the National Statistics Office in collaboration with the Department of Health, the University of the Philippines Population Institute, and other concerned agencies in the Philippine government. Funding for the 1993 NDS was provided by the U.S. Agency for International Development.

The 1993 NDS is part of the worldwide Demographic and Health Surveys (DHS) program, which is designed to collect, analyze, and disseminate demographic data on fertility, family planning, and maternal and child health.

Additional information on the 1993 NDS may be obtained from the National Statistics Office, Solicarel Building, Ramon Magsaysay Boulevard, Santa Mesa, Manila, Philippines. Additional information about the DHS program may be obtained by writing to: DHS, Macro International Inc., 11785 Beltsville Drive, Calverton, MD 20705-3119, USA (Telephone 301-572-0200, Fax 301-572-0999).



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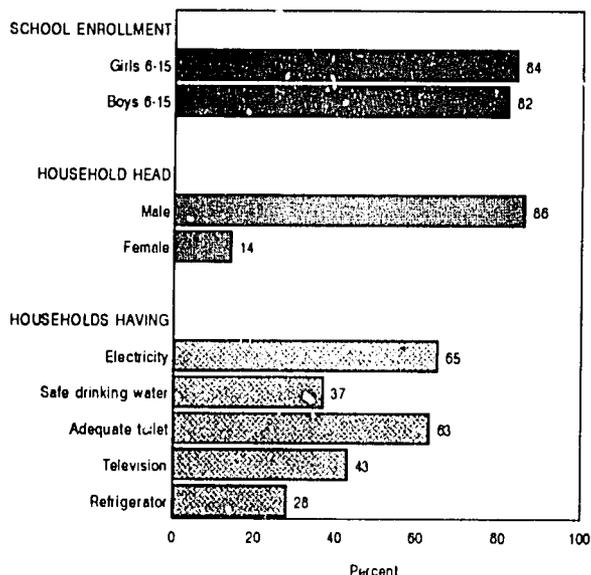
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## Background

The 1993 National Demographic Survey (NDS) is a nationally representative survey of 12,995 households and 15,029 women 15-49. The NDS provides detailed information on fertility, family planning, infant, child, and maternal mortality and maternal and child health to policymakers and program managers in the areas of population and health. The survey findings are presented at the national level, by urban-rural residence, and for 14 regions in the country. Results of this survey can be compared with data obtained from previous demographic surveys, e.g., 1978 Republic of the Philippines Fertility Survey, and the 1983 and 1988 National Demographic Surveys.

Fieldwork for the 1993 NDS was conducted from April to June 1993 by the National Statistics Office in collaboration with the Department of Health, the University of the Philippines Population Institute, and other Philippine government agencies. Funding for the 1993 NDS was provided by the U.S. Agency for International Development and the Philippine government.

**Figure 1**  
**Characteristics of Survey Population**



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### Characteristics of the Survey Population

- The majority of Filipino women have had some formal education (92 percent), and a large proportion (45 percent) had completed secondary education. There is virtually no difference in the educational attainment of men and women; for example, 84 percent of girls are enrolled in school compared to 82 percent of boys of the same age.
- On average, a household is composed of 5.3 persons. One in 7 households is headed by a woman.
- Electricity is available in 2 of 3 households in the Philippines. More than 1 in 3 households have access to safe drinking water (piped into dwelling/yard/public tap) and a similar proportion have sanitary toilet facilities (private/shared flush toilet).
- Television is available in 4 in 10 households; more than 1 in 4 households have a refrigerator, 1 in 5 has a bicycle, and 1 in 6 has a gas or electric range.

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*More than 1 in 3 households have access to safe drinking water.*

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## Fertility

### Levels and Trends

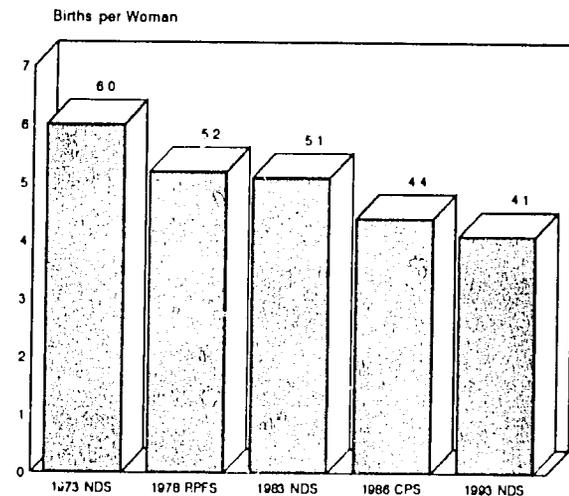
- If Filipino women maintain current fertility rates during their reproductive years, they can expect to have 4.1 children. This represents a reduction in fertility from 1988 of 7 percent (4.3 per woman).
- The fertility of Filipino women is among the highest in Southeast Asia. Only Cambodia and Laos have higher fertility rates. By the late 1980s, Thailand and Indonesia had already attained much lower fertility rates: 2.4 and 3.3, respectively.
- Fertility levels vary significantly by place of residence, region, and education. Urban women have on average 1.3 fewer children than rural women; women who have no education have one child more than women who have secondary education, and two children more than women with college education. Women in Bicol have on average nearly 6 children, while those living in the National Capital Region have less than 3 children.

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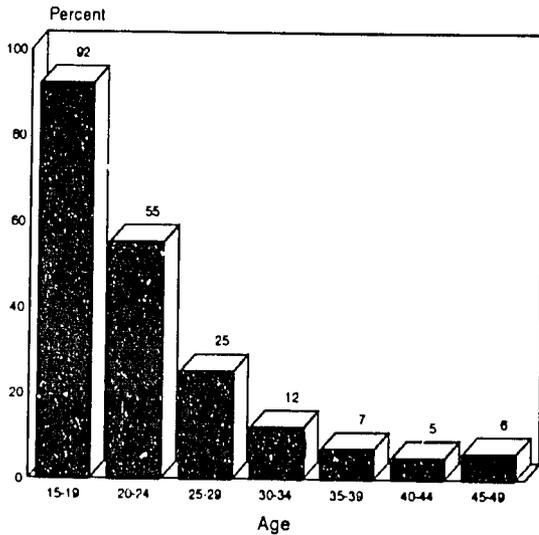
*If Filipino women maintain current fertility rates during their reproductive years, they can expect to have 4.1 children.*

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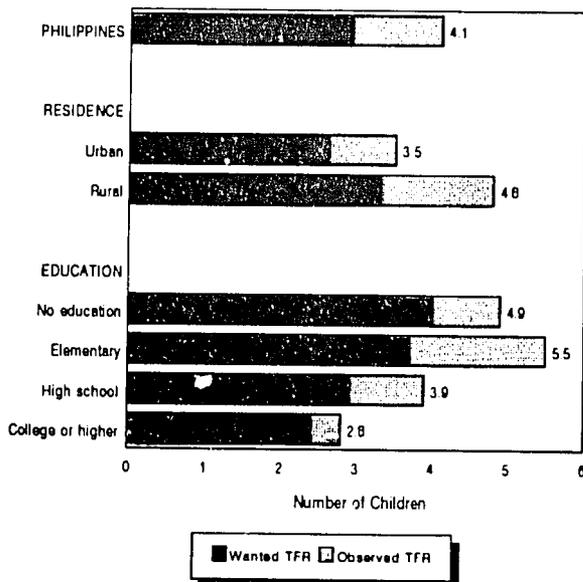
**Figure 2**  
Total Fertility Rates, Philippines, 1973-1993



**Figure 3**  
Proportion Single by Age



**Figure 4**  
Median Age at First Marriage by  
Residence and Education  
(Women 25-49)



## Marriage

- At age 15-19 years, more than 9 in 10 or 92 percent of the women are not married and, at the peak of fertility, age 25-29, 1 in 4 women remains single. One in 20 women age 35 and older has never been married.
- Overall, 50 percent of Filipino women 25-49 married at age 21 or older. The median age at first marriage has increased dramatically from 19 in 1988 to 21.6 in 1993.
- The median age at first marriage varies significantly by place of residence, region, and level of education. Urban women marry about 2 years later than rural women. Women in Metropolitan Manila marry later than women living elsewhere in the country; about 2 years later than those living in other areas such as Luzon, and 3 to 4 years later than women in Mindanao. Women who have never gone to school marry more than 2 years earlier than women with secondary education.

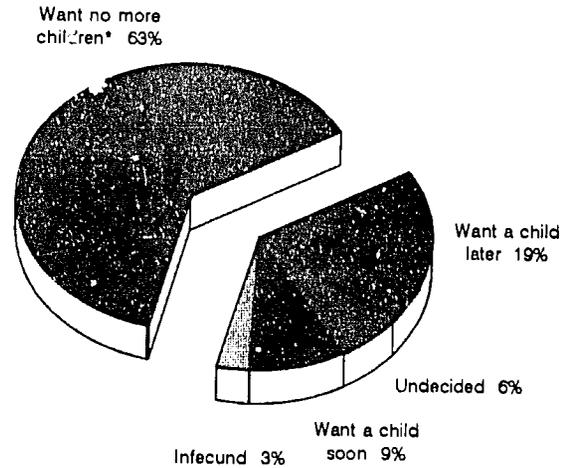
*Fifty percent of Filipino women 25-49 married at age 21 or older.*

### Fertility Preferences

- Nearly two thirds of married women do not want to have additional children and 19 percent want to delay their next birth for at least two years.
- If all unwanted births were avoided, the total fertility rate for the three-year period before the survey would be 2.9 children, which is almost 30 percent lower than the actual rate.
- The gap between wanted fertility and actual fertility varies by place of residence, region, and women's education. It is highest among rural women, women who live in either Bicol (2.4 children) or Northern Mindanao (1.9 children), and women who have elementary education (1.8 children).

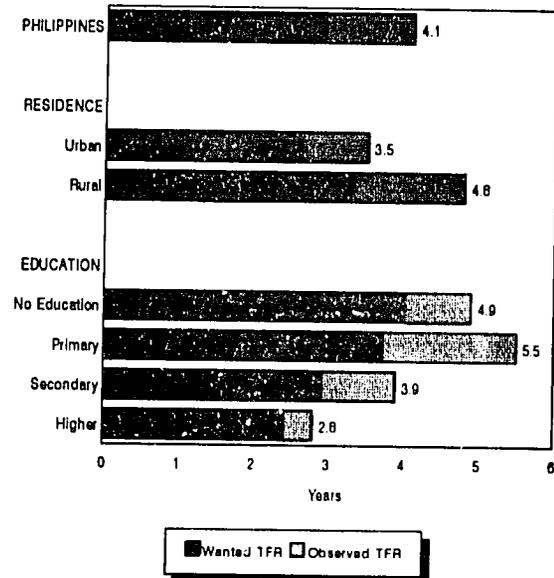
*Two thirds of married women do not want to have additional children.*

**Figure 5**  
Fertility Preferences  
(Currently Married Women 15-49)

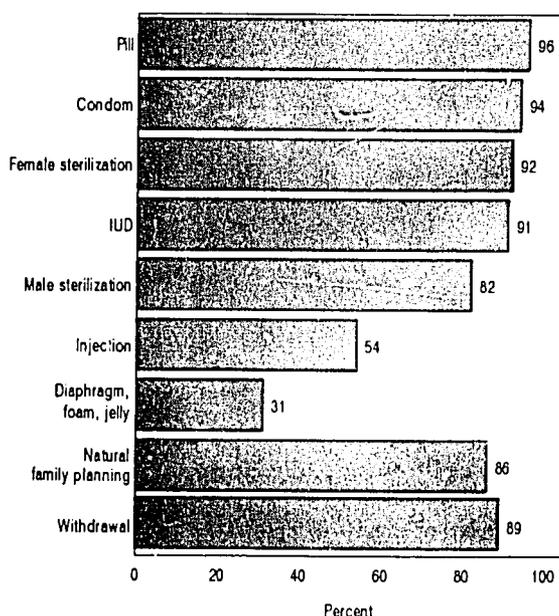


\*Includes 12 percent sterilized women

**Figure 6**  
Total Fertility Rates and Wanted Fertility Rates by Residence and Education  
(Women 25-49)



**Figure 7**  
Knowledge of Contraceptive Methods  
(Women 15-49)



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## Family Planning

The decline in fertility in the Philippines can be attributed to several factors, the most important of which is an increase in the use of contraception.

### Knowledge and Use of Contraception

- Knowledge of family planning is virtually universal. The pill, female sterilization, the IUD, and condoms are known to over 90 percent of married women. Traditional methods are also widely known. Natural family planning is known to 86 percent of married women and withdrawal to about 89 percent of women.

*Knowledge of family planning is virtually universal.*

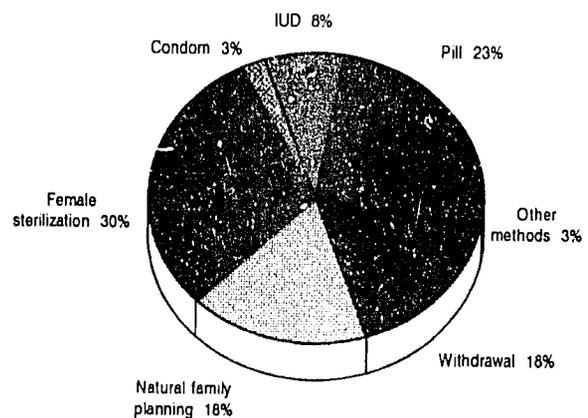
- The majority of women who know of either the pill or condom (the most recognized methods) know a place where each can be obtained.
- Among married women, about 61 percent have used a contraceptive method: 35 percent have used a traditional method and 45 percent have used a modern method.

- At the time of the survey, 40 percent of married women were using contraception. One in 4 was using a modern method, while 1 in 6 was using a traditional method. The most common modern method is female sterilization. Three in 10 women who are using a modern method are sterilized. The next most popular modern method is the pill, which is used by 2 in 10 current users.

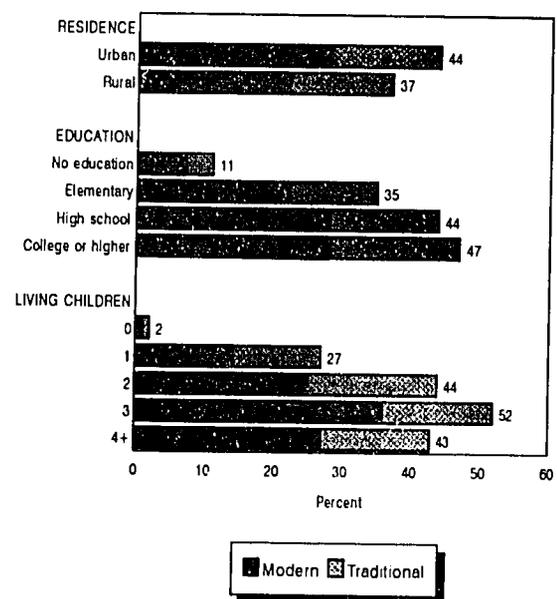
*At the time of the survey, 40 percent of married women were using contraception.*

- Urban women have a higher rate of contraceptive use than rural women (43 versus 37 percent, respectively). By region, the lowest level of use is found among women in West Mindanao (29 percent) and the highest in North Mindanao (49 percent); 42 percent of women in Metropolitan Manila are contraceptive users.
- Use of contraception is closely associated with level of education. More than 40 percent of women with high school or college education use a contraceptive method compared with 35 percent of women with elementary education and 11 percent of women with no education.
- The contraceptive prevalence rate of 40 percent in the Philippines is lower than that of its Southeast Asian neighbors. The percentage of married women using contraception in Thailand in 1987 and Indonesia in 1991 is 66 and 50 percent, respectively.

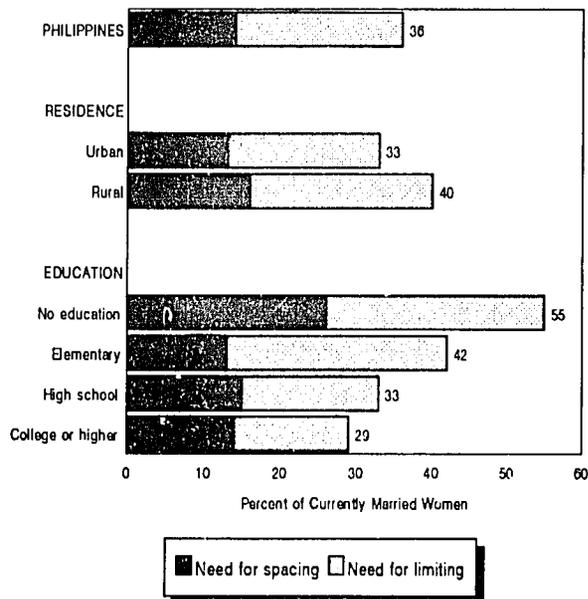
**Figure 8**  
Current Use of Family Planning Methods  
(Currently Married Women 15-49)



**Figure 9**  
Current Use of Family Planning by Selected Characteristics  
(Currently Married Women 15-49)



**Figure 10**  
**Unmet Need for Family Planning**  
 (Currently Married Women 15-49)



## Unmet Need for Contraception

- More than one quarter of married women in the Philippines have an unmet need for family planning. This includes women who are not using any method but want to delay their next birth for two or more years (12 percent), and women who want to stop childbearing (14 percent).
- Satisfying the potential demand for family planning could increase contraceptive prevalence to 69 percent. The demand for limiting childbearing is about double the demand for spacing (45 and 23 percent, respectively).
- Unmet need for family planning is highest among rural women and women who have elementary education or less.

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*More than one quarter of married women have an unmet need for family planning.*

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## Maternal and Child Health

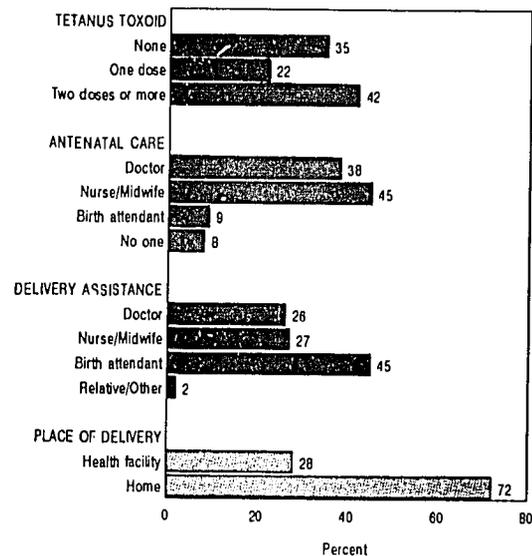
### Antenatal Care and Assistance at Delivery

- Mothers received a tetanus toxoid injection during pregnancy for two thirds of births in the five years preceding the survey.
- For more than 8 in 10 of births mothers received antenatal care services from a health professional. Care was received from a nurse or midwife in slightly more than half of these births.

*For more than 8 in 10 births mothers received antenatal care services from a health professional.*

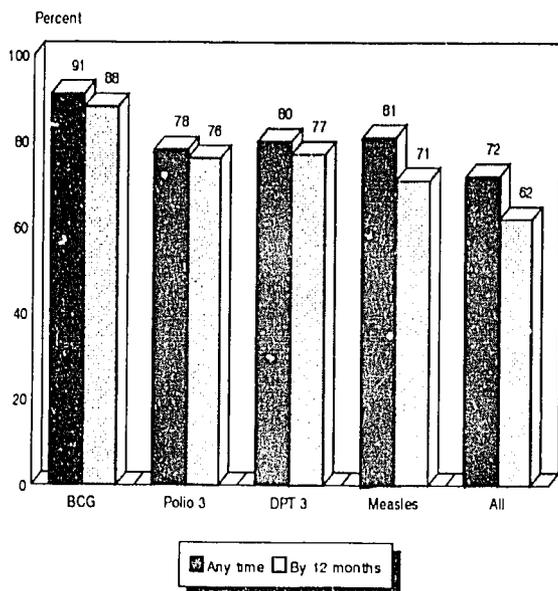
- More than half of all births during the last five years were delivered by a doctor, nurse, or midwife. The majority of births, however, were delivered at home (72 percent).
- Maternal care does not vary significantly by area of residence. However, urban women are twice as likely to be assisted by a doctor, nurse, or midwife during delivery than rural women (70 percent compared to 36 percent).

*Figure 11*  
Maternity Care Indicators  
(Births in the Last Five Years)



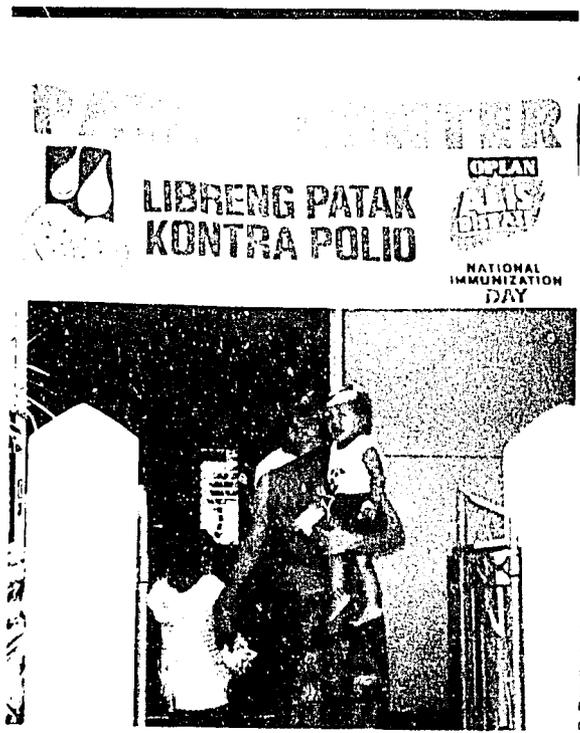
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**Figure 12**  
**Vaccination Coverage**  
 (Children 12-23 Months)



**Vaccination of Children**

- Among children age 12-23 months, 72 percent have been fully immunized against the six principal childhood diseases. Nearly all of these children were vaccinated during the first year of life, as recommended by the World Health Organization.
- More than 90 percent of children 12-23 months have received BCG vaccine as well as the first doses of DPT and polio vaccine; 81 percent were immunized for measles. The difference in the proportion receiving the first dose of DPT and polio vaccine and those receiving the second and



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*Among children age 12-23 months, 72 percent have been fully immunized against the six principal childhood diseases.*

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third doses represents the magnitude of follow-up cases that the program has to consider. Of the children who received DPT 1 and polio 1, about 12 to 14 percent did not receive the third dose of the vaccines.

- Although it is recommended that children be fully vaccinated during their first year, only about 62 percent of Filipino children 12-23 months completed the vaccination schedule by age 12 months. Coverage is highest for BCG (88 percent) and lowest for measles (71 percent).

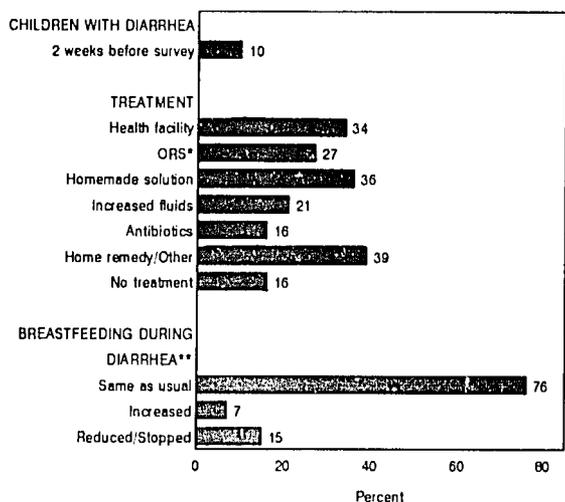


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**Figure 13**  
 Treatment of Diarrhea in the  
 Two Weeks Preceding the Survey  
 (Children under Five Years)



\*Oral Rehydration Salts

\*\* Applies only to children who are still breastfed

*Two in 10 children with diarrhea in the past two weeks received no treatment.*

### Treatment of Diarrhea

- One in 10 children under 5 years had diarrhea in the two weeks before the survey. One in three children who had diarrhea was taken to a health facility.
- Oral rehydration therapy (ORT) for treating diarrhea is known to 85 percent of mothers of children born in the past five years. Oral rehydration salts (ORS) and recommended home solution are the most commonly used forms of ORT.
- Two in 10 children who had diarrhea in the past two weeks received no treatment. Oral rehydration salts (ORS) and recommended home solution were given to 27 percent and 36 percent of the children with diarrhea, respectively. Four in 10 children received neither ORT nor increased fluids. One in 6 children was given antibiotics.
- Among children who were still breastfeeding at the time of the survey, 15 percent were given less or no breast milk during the bout of diarrhea.



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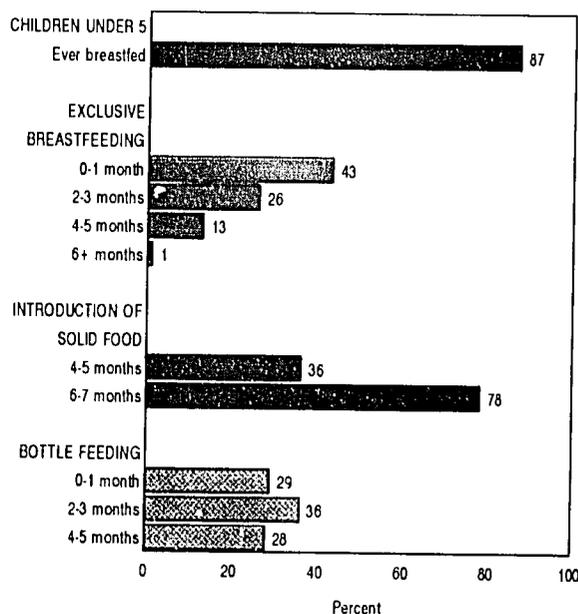
### Infant Feeding Practices

- Breastfeeding of children is less common in the Philippines than in many other developing countries. Overall, 13 percent of children born in the preceding five years were not breastfed.
- Among those infants who were breastfed, the median duration of breastfeeding is 14.1 months.
- According to the World Health Organization, children under 4 months should be given breast milk exclusively. In the Philippines, only 1 in 4 children is exclusively breastfed between the age of 2 and 3 months. The mean duration of exclusive breastfeeding is less than 3 months.

*Thirteen percent of children born in the preceding five years were not breastfed.*

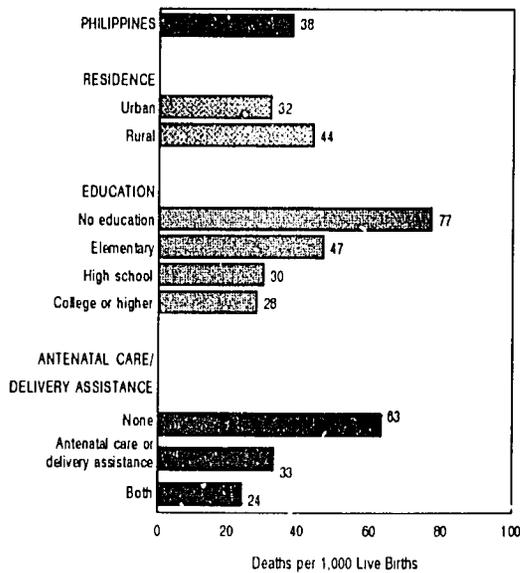
- Bottle feeding, a practice discouraged by health professionals, is relatively common in the Philippines. A bottle is given to 1 in 3 infants under 4 months of age.

**Figure 14**  
Breastfeeding Status  
(Children under Five Years)



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**Figure 15**  
**Infant Mortality by Selected Characteristics**  
 (Ten-year Period Preceding Survey)



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## Infant, Child, and Maternal Mortality

### Infant and Child Mortality

- Thirty-four of every 1,000 children die before reaching their first birthday. In the five years preceding the survey, infant mortality was 34 deaths per 1,000 live births. For the same period, under-five mortality was 54 deaths per 1,000 live births.
- The probability of dying is considerably higher for infants born less than two years after a preceding birth than for those born after a birth intervals of more than two years (54 versus 33 deaths per 1,000 births, respectively).
- Childhood mortality varies significantly by mother's residence and education. The level of mortality for urban infants is about 40 percent lower than for infants living in rural areas. The probability of dying in infancy is more than double for children whose mothers have no education than for those whose mothers have secondary or higher education.

*Thirty-four of every 1,000 children die before reaching their first birthday.*

## Maternal Mortality

- A major cause of death for women of child-bearing age is pregnancy or childbirth.
- One indicator of maternal mortality is the maternal mortality ratio (MMR), which reflects the number of maternal deaths per 100,000 live births. In 1993, the MMR was estimated using information about the survival status of the respondent's sisters.

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*The maternal mortality ratio is estimated at 209 deaths per 100,000 births for the period 1987-93.*

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- The 1993 NDS data indicate that the MMR has not changed significantly in the 14 years preceding the survey. The maternal mortality ratio is estimated at 213 deaths per 100,000 births for the period 1980-86 and 209 deaths per 100,000 births for the period 1987-93.



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## Conclusions and Recommendations

### Fertility and Family Planning

The results of the 1993 National Demographic Survey underscore the need for expanded health-based family planning services.

Despite virtually universal knowledge of contraceptive methods, current use of family planning remains comparatively low. With a contraceptive prevalence rate of 40 percent, the Philippines is among the lowest-performing countries in fertility regulation in Southeast Asia. More than one quarter of married women do not want to become pregnant in the near future or do not want any more children but are not using any form of contraception. An increase in use of family planning can be achieved if the demand for family planning can be met effectively.

Key areas for family planning program success include the following:

- Greater education of women, particularly of those in rural areas, can promote informed choices on methods of responsible family limitation and spacing of births. These will eventually translate to wider use of family planning methods and extensive reaping of health benefits associated with contraceptive use.
- Persuading women to postpone childbearing and to space subsequent births could have a major impact on maternal and child health.

### Maternal and Child Health

The survey findings likewise confirm the need to promote maternal and child health services. Both maternal mortality and infant mortality decrease in proportion to the number of births assisted by trained personnel. While 8 in 10 births received antenatal care from a doctor or a nurse/midwife, the majority of births were delivered at home, almost half with the assistance of a birth attendant. Short birth intervals are of concern in reducing child mortality, which is significantly higher in rural than urban areas. Early introduction of supplements and bottle feeding are common and increase the health risks for infants. A significant proportion of young children are not fully immunized.

Key areas for intervention that could have a major impact on maternal and child health are:

- Developing special programs to reach rural and less-educated women and their children.
- Improving the nutritional status of children through an intensive dissemination of information on the advantages and protection afforded by full breastfeeding during the first four months of life.
- Training birth attendants in appropriate and safe delivery practices in the event delivery requires immediate use of specific supplies and technologies.
- Educating parents about easy home-based treatment of major childhood diseases.



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**Fact Sheet**

**1993 Population Data<sup>1</sup>**

Total population (millions) .....	64.6
Urban population (percent) .....	43
Annual natural increase (percent) .....	2.5
Population doubling time (years) .....	28
Crude birth rate (per 1,000 population) .....	32
Crude death rate (per 1,000 population) .....	7
Life expectancy at birth male (years) .....	63
Life expectancy at birth female (years) .....	66

**National Demographic Survey 1993**

**Sample Population**

Women age 15-49 .....	15,029
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**Background Characteristics of Women Interviewed**

Percent urban .....	56.6
Percent with no education .....	2.1
Percent attended secondary or higher .....	66.6

**Marriage and Other Fertility Determinants**

Percent of women 15-49 currently married <sup>2</sup> .....	54.4
Percent of women 15-49 ever married <sup>2</sup> .....	63.3
Median age at first marriage among women age 25-49 .....	21.6
Median duration of breastfeeding (in months) <sup>3</sup> .....	14.1
Median duration of postpartum amenorrhea (in mon) <sup>3</sup> .....	5.5
Median duration of postpartum abstinence (in months) <sup>3</sup> .....	2.3

**Fertility**

Total fertility rate <sup>4</sup> .....	4.1
Mean number of children ever born to women age 40-49 .....	5.0

**Desire for Children**

Percent of currently married women who:	
Want no more children .....	62.8
Want to delay their next birth at least 2 years .....	18.7
Mean ideal number of children among women 15-49 <sup>5</sup> .....	3.2
Percent of women giving a non-numeric response to ideal family size .....	
to ideal family size .....	1.5
Percent of births in the last 5 years which were:	
Unwanted .....	15.9
Mistimed .....	28.0

**Knowledge and Use of Family Planning**

Percent of currently married women:	
Knowing any method .....	97.2
Knowing a modern method .....	96.9
Knowing a modern method and	
knowing a source for the method .....	67.8
Had ever used any method .....	61.1
Currently using any method .....	40.0

**Percent of currently married women currently using:**

Pill .....	8.5
IUD .....	3.0
Injection .....	0.1
Vaginal methods .....	0.0
Condom .....	1.0
Female sterilization .....	11.9
Natural family planning .....	7.3
Withdrawal .....	7.4
Other traditional .....	0.4

**Mortality and Health**

Infant mortality rate <sup>6</sup> .....	33.6
Under-five mortality rate <sup>6</sup> .....	54.2
Percent of births <sup>7</sup> whose mothers:	
Received antenatal care .....	92.3
Received 2 or more tetanus toxoid injections .....	42.2
Percent of births <sup>7</sup> whose mothers were assisted at delivery by:	
Doctor .....	26.0
Midwife .....	26.8
Traditional birth attendant .....	45.3
Percent of children 0-1 month who are breastfeeding .....	
are breastfeeding .....	84.1
Percent of children 4-5 months who are breastfeeding .....	
are breastfeeding .....	75.5
Percent of children 10-11 months who are breastfeeding .....	
are breastfeeding .....	59.9
Percent of children 12-23 months who received: <sup>8</sup>	
BCG .....	91.2
DPT (three doses) .....	79.9
Polio (three doses) .....	78.2
Measles .....	81.4
All vaccinations .....	71.5

**Percent of children under 5 years<sup>9</sup> who:**

Had diarrhea in the 2 weeks preceding the survey .....	10.1
Had a cough accompanied by rapid breathing in the 2 weeks preceding the survey .....	8.7

<sup>1</sup> 1993 World Population Data Sheet. Population Reference Bureau, Inc.

<sup>2</sup> Based on all women

<sup>3</sup> Current status estimate based on births during the 36 months preceding the survey

<sup>4</sup> Based on births to women 15-49 years during the period 0-2 years preceding the survey

<sup>5</sup> Based on ever-married women. Excludes women who gave a non-numeric response to ideal family size

<sup>6</sup> Rates are for the period 0-4 years preceding the survey (late 1988 to late 1992)

<sup>7</sup> Figure includes births in the period 1-59 months preceding the survey

<sup>8</sup> Based on information from vaccination records and mothers' reports

<sup>9</sup> Figures include children born in the period 1-59 months preceding the survey

