

Executive Summary

The 2018 Longitudinal Study of Ageing and Health in the Philippines (LSAHP) is the first nationally representative longitudinal study of ageing to be conducted in the Philippines. It is designed to (1) investigate the health status and well-being, as well as their correlates, of Filipinos aged 60 years and over; and (2) assess the determinants of health status and transitions in health status and overall well-being. The LSAHP is part of a comparative study of the Philippines and Viet Nam. It is funded by the Economic Research Institute for ASEAN and East Asia and implemented by the Demographic Research and Development Foundation, Inc.

The baseline survey covered 5,985 older persons (OPs), aged 60 years and over, and had a response rate of 94%. The survey employed a multistage sampling design, with provinces as the primary sampling units, barangays as the secondary sampling units, and OPs as the ultimate sampling units. The survey was conducted from October 2018 to February 2019. Follow-up interviews will be conducted after 2 years. Computer-assisted personal interviews using tablets were conducted for the survey.

This report provides an updated profile of older Filipinos, focusing on their health and well-being, as well as on their caregivers and adult children. The analysis focuses on outcome indicators of various dimensions of health and well-being, categorised by age and sex of OP respondents.

Filipino Older Persons

Female OPs have the numeric advantage, constituting 60% of the total OP population. The mean age is 69 years, with males registering an average of 68 and females 70 years. More male OPs are currently married (63%) or living in (6%), whilst most female OPs are widowed (56%). Most older Filipinos attained at most an elementary education (66%), but the age pattern for those who reached high school indicates an improving educational profile, from 18% amongst those aged 80+ to 31% amongst those aged 60–69.

The majority (60%) of OPs co-reside with at least one child, and a great majority (75%) have been living in their current residence for at least 5 years. An

overwhelming majority (79%), more so amongst males and the older cohort, prefer to live in the countryside.

Only 8% of OPs have either a surviving father or mother, and an insignificant proportion (0.4%) have both surviving parents. Nearly all older Filipinos have children (95%), with an average of six children ever born. Two in five OPs reported having lost at least one child to death. Five percent of OPs have adopted children or stepchildren, each such OP having an average of 2.6 adopted children or stepchildren. Almost all OPs (96%) reported having at least one grandchild. On average, they became grandparents at about 48 years old. About 24% are fully or partially in charge of the care of any of their grandchildren, significantly more so amongst older females than males (27% vs. 19%).

Self-assessed Health

Most older Filipinos have average self-rated health (48%). Overall, females have better self-rated health than males, with the level declining with advancing age. OPs have a more positive assessment of their health whilst growing up, with 68% claiming to have been very healthy and 23% reporting having been healthier than average.

Diagnosed Illnesses

Illnesses diagnosed by a physician were grouped into two: those that are not life-threatening and are recognisable to the OP even without a medical diagnosis (group 1) and those that require a medical diagnosis (group 2). The prevalence of group-1 diseases is generally low. The most commonly cited are arthritis (18%) and cataracts (17%). Of the group-2 diseases, hypertension has the highest prevalence (46%). Diabetes, angina and/or myocardial infarction, and renal and/or urinary ailments are the next highest, all below 13%. For both groups, the most prevalent illnesses are more evident amongst older females, with no discernible pattern by age.

About 4% of OPs have had a heart attack, experienced at an average age of 63 years for males and 59 years for females. Amongst these OPs, only half were taking medication for their heart condition at the time of the survey, with the proportion highest amongst those aged 80+ (67%).

Oral Health

The state of oral health of older Filipinos is poor, based on the criteria of 9 original teeth retained, with males having significantly more (11) than females (8). The mean decreases with age, from 11 amongst those aged 60–69 to 5 amongst those aged 80+. In all, 28% of older Filipinos are completely edentulous or have no remaining original teeth; the proportion is higher amongst females (35%) than males (17%) and increases monotonically with age. Close to half (47%) of those in their 80s have no remaining original teeth. About 3 in 10 older Filipinos reported having dentures.

Sleep, Pain, Falls, and Incontinence

Older Filipinos reported an average sleep duration of 6 hours, with about 8 in 10 satisfied with their sleep.

One in three (33%) older Filipinos reported that they are often troubled with pain, with no apparent gender difference. More than half (58%) of those who are troubled with pain suffer from moderate pain, whilst a tenth reported severe pain.

Nineteen percent had experienced a fall in the last 12 months, with an average of 1.7 falls during that period. The average frequency of falls increases with age. The oldest cohort reported an average of two falls in the 12-month period. Of those who had had a fall, 15% reported being injured seriously enough to need medical treatment.

Incontinence is not prevalent. More than 8 in 10 older Filipinos reported no loss of control of either bladder or bowel movement.

Depressive Symptoms

Depressive symptoms were measured using the 11-item version of the Center for Epidemiologic Studies Depression scale. Results show that older Filipinos have an average score of 5 (the total possible score is 22); the average score is significantly higher amongst females and highest amongst the oldest age group (6).

Health Risk Behaviours

An estimated 17% of older Filipinos are current smokers, whilst 32% are former smokers. Current smoking is higher amongst males (30%) than females (9%). The prevalence of current smoking is lowest amongst those aged 80+ (11%). Overall, 29% of older Filipinos reported currently drinking. As with smoking, current drinking is much higher amongst males (49%) than females (15%). There is a steep age-related decline in the prevalence of current drinking.

Antropometric Measures

More than half (56%) of older Filipinos fall within the normal body mass index (BMI) range (18.5 to <25) set by the World Health Organization (WHO), with a significantly higher proportion for males (64%) than females (50%). The proportions at either end of the range are both low, although there are more underweight (14%) than obese older Filipinos (8%). One of the simplest measures of excess body fat is waist circumference. The WHO-recommended cut-off for obesity is a waist circumference equal to or higher than 102 cm (40 inches) for males and 88 cm (34.5 inches) for females. Using these cut-offs, 7% of males and 55% of females are obese. Measures of grip strength show that older Filipinos, on average, have weaker grip strength than their counterparts in Japan, Singapore, and Hong Kong.

Functional Health

More than a fifth (22%) of OPs have difficulty performing at least one of the seven activities of daily living (ADL). About one in four admitted difficulty performing at least one instrumental activity of daily living (IADL). Generally, functional difficulty is higher amongst females than males. Amongst the ADL, OPs find it most difficult to leave the house. Amongst the seven IADL, the use of transportation to leave home is by far the most difficult, regardless of age and sex.

The Washington Group Short Set of Questions on Disability – a measure of functional difficulty – indicates that about 7 in 10 OPs have at least one difficulty amongst the six items. OPs recorded the highest difficulty in remembering or concentrating, with males experiencing greater difficulty than females.

The Global Activity Limitation Index, which measures long-standing activity limitations in a broad range of activities in the 6 months or more prior to the

survey, show that the proportion reporting severe limitation increases dramatically with age. Another measure that captures extreme disability is bed disability. Results show at least 2% of respondents were bedridden within 2 weeks before the survey, with no gender difference. The prevalence of this condition increases significantly with age from 2% amongst those in their 60s to 8% amongst those in the oldest age group.

Of the 10 items in the Nagi measures, OPs found the following tasks the most difficult to perform: standing without sitting for 2 hours, lifting 10- and 5-kilogram objects, climbing 10 steps without resting, and walking 200–300 metres. Generally, there is a clear gender and age disparity, with the females and the older cohort reporting higher levels of difficulty than other respondents did.

Formal Care and Unmet Need for Health Service

Fifteen percent of all OPs availed themselves of inpatient care in the past 12 months, with the proportion increasing with age. Those who utilised inpatient health services were confined an average of 1.8 times in the past year; the average is higher for men and increases with age. Nearly half (49%) of OPs said their children paid for most of the cost of their hospitalisation. About 90% of those who were hospitalised were able to avail themselves of benefits from PhilHealth, the national health insurance system, either as members (83%) or as dependents of members (6%).

More OPs utilised outpatient rather than inpatient care. About 4 in 10 reported receiving medical care for an illness or accident in the past 12 months without staying overnight in a medical facility; the proportion is slightly higher amongst females (44%) than males (39%). In 9 out of 10 cases, those who received outpatient care saw a physician for most of their health problems.

About 3 in 10 OPs felt ill in the past 12 months and thought of going to the doctor but did not. Whilst there are many reasons for not seeking help at that time, the most common one is the lack of financial means. This is indicative of an unmet need for medical attention. In all, one in five OPs have an unmet need for medical care because of financial reasons.

Health Insurance, Vaccination, and Medicines

Eighty percent of older Filipinos have health insurance coverage, nearly all (98%) under PhilHealth. There is no marked difference in health insurance coverage by sex, but the proportion of OPs with health insurance increases with age.

Four in ten older Filipinos are aware of the pneumococcal vaccine, whilst 30% are aware of the flu vaccine. Of those who are aware, about half (53%) have had a pneumococcal vaccination and a little over a third (36%) have had a flu vaccination since they turned 60. The barangay health station is the most common health facility where both vaccinations were received. About 7 in 10 OPs diagnosed with hypertension are taking medications; amongst them, a third received their free medications from the health centre. Amongst the diagnosed diabetics, 68% are taking medications. Unlike hypertensives, only 18% of diabetics receive their free medicine from the health centre all the time. Thirty-eight percent of OPs reported taking any supplement, with a higher proportion amongst females (44%) than males (34%).

Informal Care and Long-term Care

The spouse is most commonly cited as taking care of the respondent when he or she is sick. About 6 in 10 males reported their spouse as their major caregiver, whilst 38% of females reported a daughter.

About 8% of OPs are receiving care because of a continuing health condition and are thus classifiable as receiving long-term care (LTC). Practically all (over 92%) require daily care. The spouse and daughter are most commonly reported as providing LTC for male OPs, and a daughter for female OPs. When asked from whom they would prefer to receive care should they develop dementia or be bedridden or become invalid, OPs most frequently cited a daughter, the spouse, and a son. Evidently, for OPs, LTC provision remains a female-dominated family responsibility.

Economic Well-being

Older Filipinos have generally poor overall economic well-being. The three most commonly cited income sources are children within the country (58%), pension (42%), and earnings from work (34%). Nearly one in four older Filipinos (23%) mentioned receiving income from their farm (i.e. products). Fifteen percent

reported money from children abroad as a source of income. On average, OPs have about two sources of income. Their median monthly income is PHP3,000 (~US\$59 assuming an exchange rate of PHP51). Reliance on pension remains low, at 42%.

Nearly all OPs have at least one asset, with the proportion declining with advancing age. The most widely held nonfinancial assets are the house the OP resides in (85%), appliances (56%), and farms and/or fishponds (19%). Ownership of real estate – a house and/or lot other than their current place of residence – was reported by 15% of OPs. About 13% have cash and 5% have bank savings.

Nearly one in four OPs (22%) reported having liabilities, the most common being loans from moneylenders such as pawnshops, credit unions, and cooperatives (43%), followed by personal loans (22%).

Considering their total household income and expenditures, 4% said they had enough money with some left over, 38% had just enough for them to pay expenses with no difficulty, 43% reported some difficulty in meeting household expenses, and 14% said they had considerable difficulty in meeting expenses. About half of OPs (49%) grew up in what they considered poor families.

Generativity, Attitudes, and Beliefs

The study explored generativity by looking at how OPs invest their time and resources, focusing on those that have greater meaning and purpose in their lives. Using the Loyola Generativity Scale, results show that OPs scored themselves highest on being needed by other people and having a good influence on the lives of others. They also feel that many people rely on them for advice, and they are keen on teaching or imparting knowledge to other people. However, they do not think they have important skills to pass along. At least 27% think that others would never say they (the OPs) have made valuable contributions to the larger society.

Most older Filipinos continue to espouse traditional beliefs pertaining to family dynamics, gender roles, and age-appropriate behaviour, such as falling in love and getting married at older ages. There is an overwhelming belief that children are obligated to support and take responsibility for their ageing parents, and there is a strong preference for co-residence with a daughter.

Older Filipinos have an overwhelming preference for independent living, although some said they would like to live near any of their children. Older males exhibited

the greatest desire for independent living (71%); amongst them, 48% want to live alone but near any child.

Leisure Activities, Religiosity, and Volunteerism

OPs generally engage in sedentary leisure activities such as watching TV (66%), whilst others engage in physical exercise (52%) and gardening (27%). About one in three attends social activities at least once a month. The majority (76%) attend religious services outside the home. Three in four OPs consider religion very important in their lives.

Slightly more than 3 in 10 OPs are members of nonreligious organizations, most commonly organizations of retired OPs and business, professional, or farm associations. Fourteen percent of OPs are engaged in volunteer work, either in church or the community; this is more common amongst females and younger cohorts.

Loneliness, Social Isolation, and Life Satisfaction

Loneliness amongst older Filipinos is relatively uncommon. The majority of OPs (75%) rarely or never feel a lack of companionship. About 10% of OPs said they always or fairly often feel the need for more companionship, 7% of OPs said they always or fairly often feel left out in various situations, and 6% of OPs feel they are always or fairly often isolated from others.

The LSAHP used the Lubben Social Network Scale to assess social isolation; results show that 27% of OPs have marginal ties with family and friends. This means that nearly 3 in 10 OPs each have fewer than two relatives or friends to perform social integration functions.

A great majority of older Filipinos are satisfied with their lives; 48% of OPs are very satisfied and 46% are somewhat satisfied. Only 6% are unsatisfied. Life satisfaction is not significantly different across sex and age.

Use of Information Technology

The use of information technology (IT) amongst older Filipinos is low. About 3 in 10 OPs own cell phones, 3% own a tablet, and 1% own a laptop. The top five mentioned uses of IT gadgets are for calling friends and family (94%), chatting

and messaging (22%), voice or video calls (18%), sending or receiving email (18%), and watching movies and TV shows and listening to music (16%).

Services for Older People

Older Filipinos have a high level of awareness about government programmes that provide privileges to senior citizens (92%). The most common privileges enjoyed by OPs are discounts on transportation, restaurants, and recreational services (77%), followed by discounts on the purchase of medicine (67%) and free medical and dental services in government health facilities (49%). Nearly half (47%) of OPs receive the PHP500 monthly social pension.

Findings reveal a greater predisposition towards institutional living (81%), particularly amongst male OPs and those in the younger cohort. Most think that living in a home for the aged is beneficial for OPs who do not have anyone to attend to them (77%) and that the OPs' health would be better cared for under such a setup (35%).

Family Support and Intergenerational Exchanges

Older Filipinos are highly involved in various forms of exchange of support with their children. Nearly 6 in 10 OPs visited any of their non-co-resident children in the 12 months before the survey, whilst 74% were visited by a non-co-resident child. About 3 in 10 (29%) of OPs contacted their non-co-resident children through letters, telephone calls, or text messages in the past year, whilst 43% received such contact from their children.

Nearly half of OPs provided financial assistance whilst 52% gave material support to any of their co-resident children. Few OPs (3%) provided instrumental support but many (88%) extended emotional support to children living with them.

The majority of OPs received monetary and material assistance from their children in the 12 months prior to the survey, regardless of residence. A much lower proportion received instrumental support (8% from co-resident children and 3% from non-co-resident children). Amongst all types of support received by OPs, emotional support predominates (79% from co-resident and 74% from non-co-resident children).

Overall, OPs are satisfied with the level of contact they have with their children. A considerable proportion (36%) intend to rely on their children for financial support in the future.

Potential and Primary Caregivers

An overwhelming majority (93%) of OPs do not have a primary caregiver but identified a potential caregiver in case they need one in the future. Only 7% of OPs have a primary caregiver; the proportion is slightly higher amongst older females than males (7% vs. 6%) and amongst those aged 80 and over (26%).

Only 13% of all primary caregivers are males. The mean age is 46.2 years for female caregivers and 59.5 years for male caregivers. Of the caregivers, 60% are married and 44% have reached at least high school level. More than a third of caregivers are working whilst 42% have stopped working completely. Only 5% received training in caregiving. Daughters make up the bulk of primary caregivers (40%), followed by spouses (29%) and daughters-in-law (9%). About 8 in 10 (83%) caregivers co-reside with the OP. Non-co-resident caregivers are likely to be living next door to the OP or in the same barangay as the OP. Half of the caregivers reported being of average health.

Based on the caregivers' assessment, 86% of OPs have had difficulty performing at least one ADL. Caregivers are more involved in assisting OPs with household tasks than with personal care. Of the caregivers, 42% said they volunteered for the job whilst 38% said they were the only ones available to do it. The majority of caregivers (78%) find satisfaction in performing their care tasks.

Almost a third of potential caregivers are males (29%) – more than double the percentage of male primary caregivers (13%). However, female caregivers are the preferred potential caregivers of both male and female OPs. Potential caregivers are younger than primary caregivers, with a mean age of 43. The majority of potential caregivers are currently married (66%) and have at least a high school education (43%). More than half are currently working (55%) and 61% are residing in rural areas.

OPs are likely to rely on family members to be their potential caregivers. Daughters account for a third of caregivers mentioned by OPs (32%), followed by spouses (31%) and sons (15%). The majority of reported potential caregivers (64%) live with the OPs. About one in five lives in the same barangay whilst 15% live next door. Close to half (43%) of the potential caregivers said the OPs are

of average health, and a slightly higher proportion said they were healthier than average or very healthy at the moment.

Adult Children of Older Persons

Data were collected from 3,573 adult-child respondents. The information from adult children supports the finding that OPs are most likely to live with an adult child. Adult children have very good relationships with their parents; only 5% said they do not or rarely get along well with their parents. Results show a mutual albeit unequal exchange of support, with more support coming from children than from parents. Older females receive more support than older males.

The majority of adult children reported that their parents are still functional. More than a quarter (27%) of adult children said their parents are still functional and healthy, and more than half (57%) said their parents can still do things on their own despite having medical conditions.

Adult children reported that their mothers deteriorated more than their fathers in the past 2 years. Adult children have a universally positive opinion of children's obligation to take care of ageing parents (99%), whilst 86% agreed that it is the parents' duty to do their best for their children even at the expense of their own well-being. About 68% of adult children agree with the traditional division of labour, and 70% agree that living with a daughter is more suitable for ageing parents than living with a son.

Conclusion

The foregoing baseline LSAHP study findings provide updated and comprehensive, nationally representative findings on the health, economic, and overall well-being of Filipinos 60 years and over, which will enhance evidence-based planning for older people. This is important as we face the emerging demographic reality of ageing, which will mean an expected increase in the number of older Filipinos who will require more interventions in health and social security, pension schemes, elderly infrastructure such as old-age homes and geriatric clinics.