

Part 2 -CHAPTER 4

The Philippine Health and Care Workforce in an Ageing World

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CHAPTER 4

The Philippine Health and Care Workforce in an Ageing World

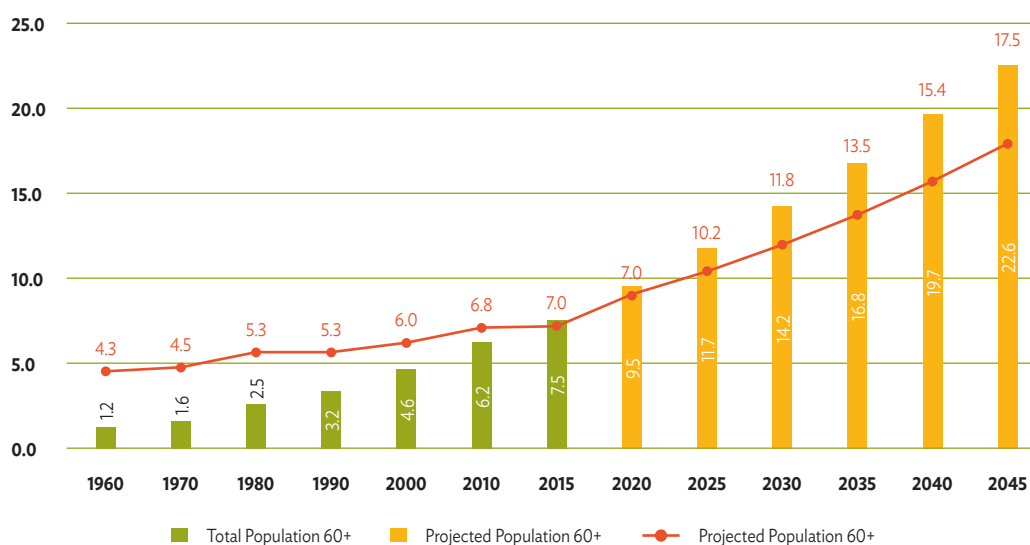
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The Philippines is Ageing

Based on the Census of Population (2015), 7.5 million Filipinos were aged 60 years and above or 7% of the total population. Between 2030 and 2035, the population of Filipino older persons is estimated to double in size (Figure 4.1). With its ageing population, the Philippines needs to prepare for the care of older persons.

Figure 4.1. Total Population and Proportion of Population Aged 60 and Over, Philippines: 1960–2004 (millions)

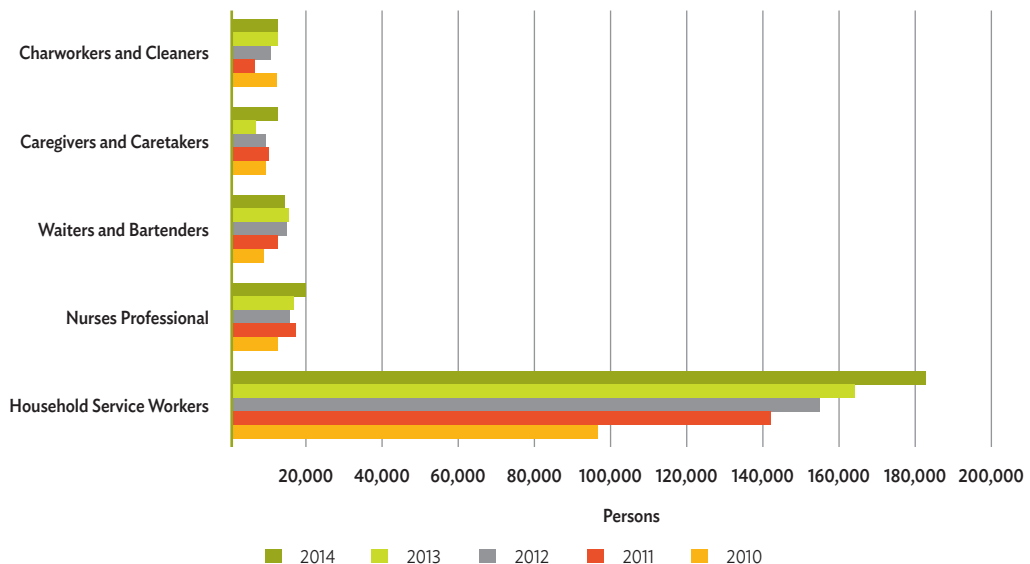


Source: Census of Population and Housing (various years and the low assumption estimates); Philippine Statistics Authority (2015).

Policy and Discourse on Overseas Deployment

The Philippines has become a major source country of domestic care and healthcare workers, sending them to the Middle East, North America, Asia, and Europe. From 2010 to 2014 nurses and caregivers were the top workers deployed to these countries (Figure 4.2).

Figure 4.2. Deployed Land-Based Overseas Filipino Workers by Top-Five Occupational Categories, New Hires: 2010–2014



Source: 2010–2014 Overseas Employment Statistics (Philippine Overseas Employment Administration, n.d.).

Healthcare workers deployed abroad include physicians, physical therapists, occupational therapists, speech pathologists, radiologists, medical technicians, and laboratory workers (Philippine Overseas Employment Administration, n.d.; WorkAbroad.ph, n.d.).

Supply and Demand for Caregivers

In light of an ageing worldwide population, an increase in demand for domestic and international caregivers is anticipated. Aside from the traditional markets such as the United States and Canada, rising demand is felt in Europe (Spain); the Middle East (Israel, Bahrain, and Saudi Arabia); and Asia (Japan, the Republic of Korea).

Training of Caregivers

A caregiver is a person who provides, without supervision, in a private household in which the person resides, childcare, senior home support care, or care of the disabled.

The Technical Education and Skills Development Authority (TESDA) is a Philippine government agency that performs the role of standard setting, registration of programs, assessment, and certification, as well as the conduct of monitoring and continuous evaluation of caregiver training programs. Its caregiver course includes training to care for the elderly in its list of 12 modules. As a result of the Economic Partnership Agreement with Japan, it is hoped that Philippine healthcare workers will be recognised and employed.

Dementia Services and Workforce

Dementia is a disease that affects memory, daily function, and personality. Age is a risk factor, with the likelihood of dementia increasing from approximately 1% for people in their 60s to nearly 25% for people aged 85 years and older. About 32% of Filipino senior citizens report symptoms of forgetfulness and confusion (National Institutes of Health and Department of Health Philippines, 2000). No cure is available and at the most severe stages, a patient with dementia will need assistance in activities in daily living such as feeding, bathing, dressing, walking, and toileting. Although home and community-based care is preferred, changing family structures and the huge time and emotional demands on the family make nursing home care a viable option. The total cost of dementia care in the Philippines has been estimated at PHP849.2 million, with PHP321.3 million spent on informal care, assuming that a family member or informal carer spends 1.6 hours per day providing activities in daily living care (Wimo, Winblad, and Jönsson, 2010). The need for caregivers for persons with dementia in the Philippines and the rest of the world is expected to increase in the coming decades.

The Department of Health Philippines does not hold any data on the number of people in the workforce in mental health care but has reported that every regional health unit has at least one health staff member in charge of the mental health program. There is also a gap in health services structure monitoring. For example, there is no database and monitoring of the health workforce for either public or private facilities dedicated to dementia (De la Vega, Garcia, and Torreblanca, unpublished).

A study on dementia services and the workforce in 26 facilities showed that most of the carers were female, with a mean age of 34.2 years. Half the workforce with experience providing care for dementia patients rated the quality of their service 80% and above. Knowledge on the definition and diagnosis of dementia was poor at 27%. Most were willing to receive training (Dela Vega et al., 2018).

There are no specific dementia modules in the TESDA caregiving program. Special courses offered by the academe, specialty medical specialties, and advocacy groups are occasionally available. The World Health Organization Western Pacific Regional Office (2018) has chosen the Philippines as one of two sites for field-testing the Dementia toolkit for community workers in low and middle-income countries.

Recruitment System, Placement Fee

Health workers who wish to be deployed go through recruitment agencies accredited by the Philippine Overseas Employment Administration (POEA). Directly hired health workers must similarly undergo processing by the POEA. The POEA processing fee is US\$100 or its peso equivalent, the Overseas Workers Welfare Administration (OWWA) membership fee is US\$25 or its peso equivalent, and OWWA Medicare costs PHP900 (Philippine Overseas Employment Administration, 2013).

Some TESDA accredited training centres offer job search and employment services, and a few have direct links with embassies of countries that need caregivers.

Other Concerns

As a geriatrician, the author has encountered several retired and ageing caregivers from foreign countries. Some do not have health insurance or social insurance that will support their old age. Having worked and lived away from family for many years, they have less reliable social support from family members. Home and host countries will need to address the social security needs of these foreign workers (Asher, 2010).

Future Directions

Improved curricular content on aged and dementia care is recommended for all health professional schools and caregiver training courses.

The Department of Labor and Employment has been working on the following measures to advance for the careers and welfare of the Filipino care and healthcare workforce through the following: 1) benchmarking course curriculum and comparability studies and technical cooperation towards signing and implementing mutual recognition agreements (MRAs); 2) promoting welfare, social security, and protection of rights through bilateral dialogues with countries of destination; and 3) implementing the Association of Southeast Asian Nations (ASEAN) Qualifications Reference Framework and MRAs on seven priority professions, including nursing.

Other considerations may include 1) inter-regional dialogue on long-term care (ASEAN and East Asia); 2) a coalition of sending countries to work with receiving countries (Indonesia and Philippines vis-à-vis Hong Kong, for example); and 3) legislation for a whole-of-nation approach to fast ageing (Perez, 2018).

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