

THE FILIPINO OLDER PEOPLE AND COVID-19

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MMHRDC WEBINAR SERIES: "THE ROAD TO SUPER SENIORS: THE SCIENCE OF AGEING"

It's earlier than you think, but it's never too late

11:21 – 11:50 AM | 19 SEPTEMBER 2020



Outline of presentation

- Data sources
- Status of the Filipino Older People: evidence from the base data of the LSAHP
- Vulnerability of the older Filipinos to COVID-19
- Concluding notes





- 2018 Baseline data of the Longitudinal Study of Ageing and Health in the Philippines (LSAHP)
- COVID19 tracker of the Department of Health (DOH)
 - compiled by University of the Philippines Population Institute (UPPI) and the Demographic Research and Development Foundation, Inc. (DRDF)



LSAHP Objectives

- The 2018 Longitudinal Study of Aging and Health in the Philippines (LSAHP), the first nationally representative longitudinal study on aging to be conducted in the country is designed to:
 - Investigate the health status and wellbeing of the Filipino older people and their correlates;
 - Assess the determinants of health status and transitions in health status.



Longitudinal Study of Ageing and Health in the Philippines





Longitudinal Study of Ageing and Health in the Philippines

LSAHP Data

- first nationally representative longitudinal study on aging to be conducted in the Philippines
- sample size: 5985 respondents aged 60 years and over living in community dwellings
- oversampled those in the ages 70-79 and 80+
- multi-actors (older person, caregiver, adult child of older person)
- funded by the Economic Research Institute for ASEAN and East Asia (ERIA)



Study Instruments

Five (5) questionnaires:

- Household questionnaire
- Main questionnaire for OP
- Questionnaire for OP's caregiver
- Questionnaire for OP's child
- Anthropometric questionnaire for OP

Note: caregiver and child questionnaires are aimed to provide additional anchors for future tracking of the older person



Summary of Interviews Conducted

Total number of OP interviewed: 5,985

Response rate: 94.5%

SPMSQ – 301 failed (5%)

Number of caregivers interviewed: 5,143 (85.9%)

Number of children interviewed: 3,573 (59.7%)

Anthropometric measurements: 5,731 (95.8%)

Inner body scan: 4,022 (70.2%)









SOCIO-DEMOGRAPHIC PROFILE



40% are male. 60% are female.



58% are living in rural areas.

Reference:

Cruz, C. J. P., & Cruz, G. T. (2019). Filipino older persons. In Cruz, G. T., C. J. P. Cruz and Y. Saito (Eds.), Ageing and Health in the Philippines (pp. 27-46). Jakarta: Economic Research Institute for ASEAN and East Asia.



86% are members of the Catholic Church.



On average, have **5.7 children**.

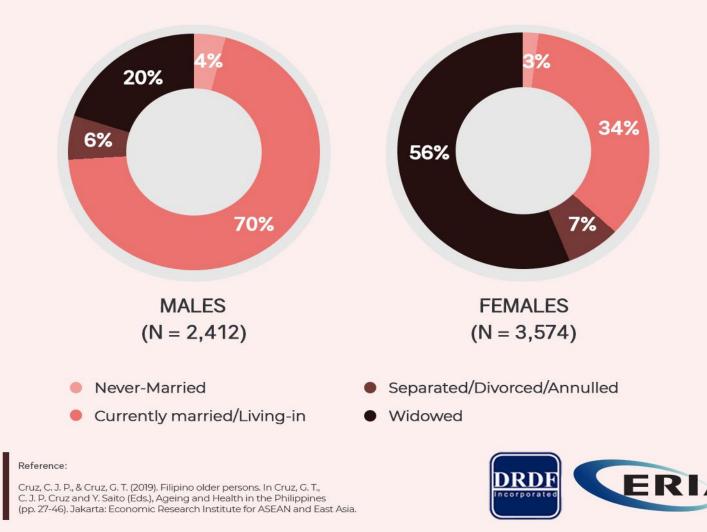


Who are the Older Filipinos?

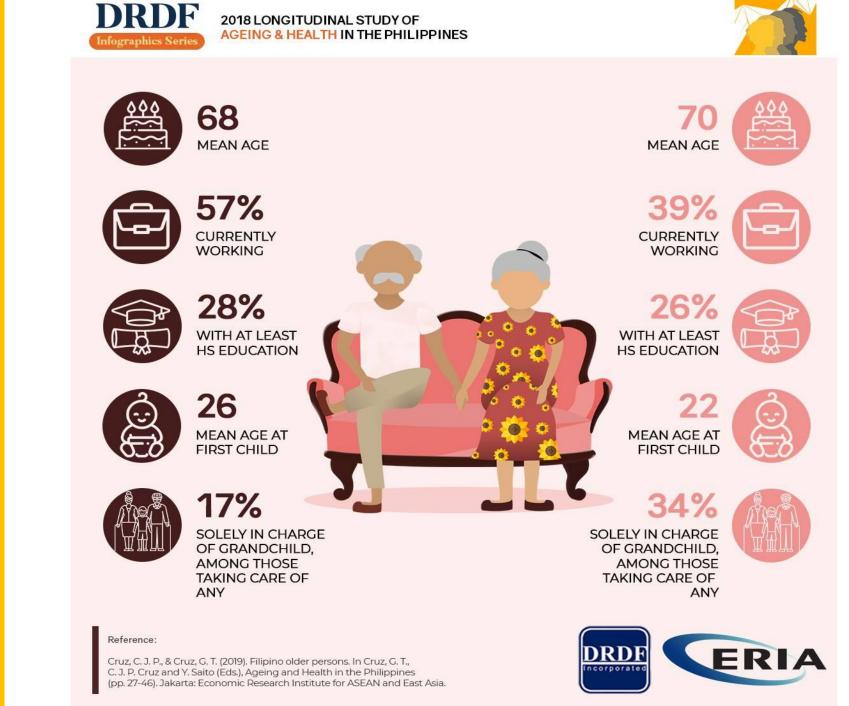




Older women are more likely to be widowed, while most older males remain married or living-in.



Who are the Older Filipinos?



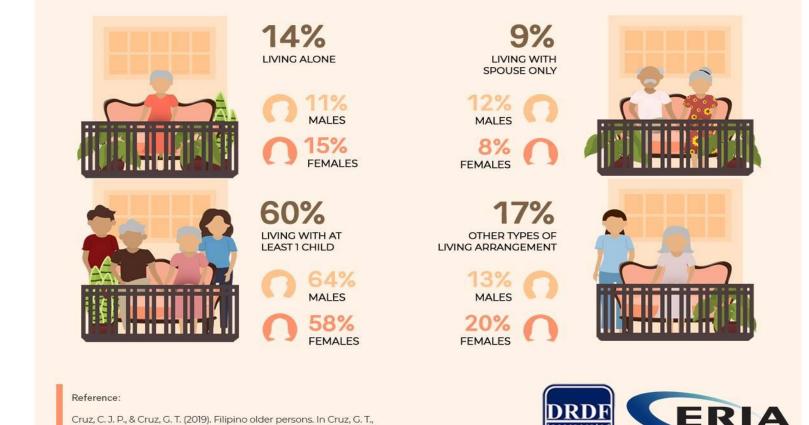
Who are the Older Filipinos?





Co-residence with children is the most common living arrangement among older Filipinos.

14% of older Filipinos live alone, more common among older women (15%) and those in the oldest age group (80+; 19%).



Incorporate

Cruz, C. J. P., & Cruz, G. T. (2019). Filipino older persons. In Cruz, G. T., C. J. P. Cruz and Y. Saito (Eds.), Ageing and Health in the Philippines (pp. 27-46). Jakarta: Economic Research Institute for ASEAN and East Asia. There is an active and reciprocal intergenerational exchange of resources and support between OP and their children

- OP receive financial and material support and visits from their children
- OP provide emotional support to their children
 - take care of grandchildren
 - 1 in 4 OPs are involved in the partial or full care of any of their grandchildren





Longitudinal Study of Ageing and Health in the Philippines

Longitudinal Study of geing and Health in the Philippine

Economic Status

Older Filipinos are economically poor

- 46% are living below the poverty line at the time of the survey in 2018
- 13% household is a recipient of the 4Ps/CCT recipient
- 47% are recipient of the P500 monthly social pension from DSWD
- 14% household experienced hunger in the last 3 months
- **49%** grew up in what they consider poor families

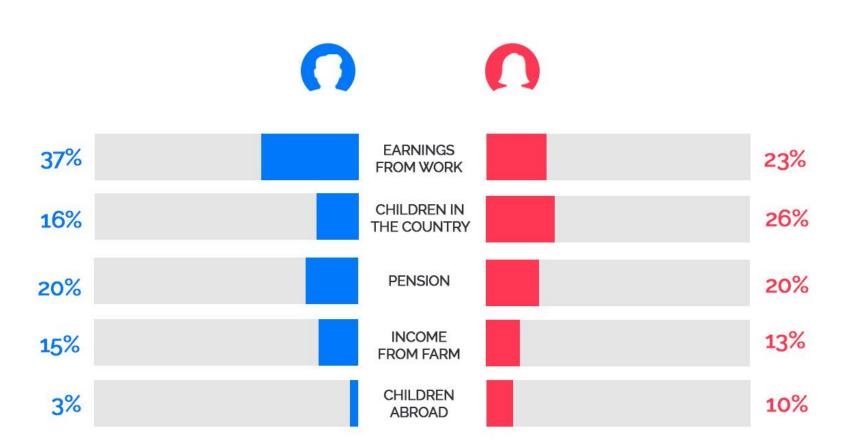


Older Filipinos have fragile and informal sources of economic support

Most important: Older women: remittances from children

Older men: earnings from work

Most important sources of income of older Filipinos by sex





Significant level of unmet economic needs

When older people were asked to assess the sufficiency of their household income:

 57% have some or considerable difficulty in meeting household expenses





Longitudinal Study of Ageing and Health in the Philippines

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Health Status

Older Filipinos have an average self-assessed health (SAH)

Self-rated health	Male	Female	Total
Very healthy	7.6	12.2	10.3
Healthier than average	14.6	10.0	11.9
Of average health	46.3	48.4	47.6
Somewhat unhealthy	29.1	26.6	27.6
Very unhealthy	2.4	2.9	2.7
TOTAL	100%	100%	100.0%



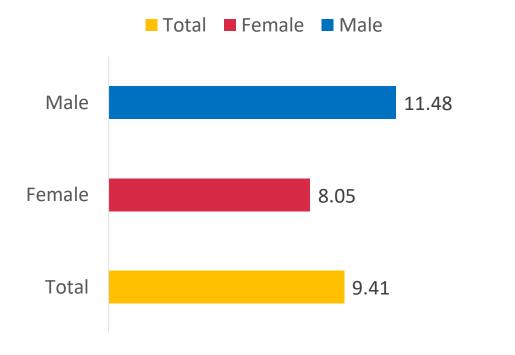
58% have at least one of the risky co-morbidities for COVID-19

Diagnosed illness	Male	Female	Total
High blood pressure	38.4	50.3	45.5
Diabetes	11.9	13.1	12.6
Angina/Myocardial infarction	8.8	14.4	12.2
Chronic respiratory illness	10.0	7.5	8.5
Cerebrovascular disease	7.3	6.3	6.8
Cancer	0.7	0.7	0.7
% with at least 1 of the 6 risky illness for COVID-19	52.9	61.4	58.0



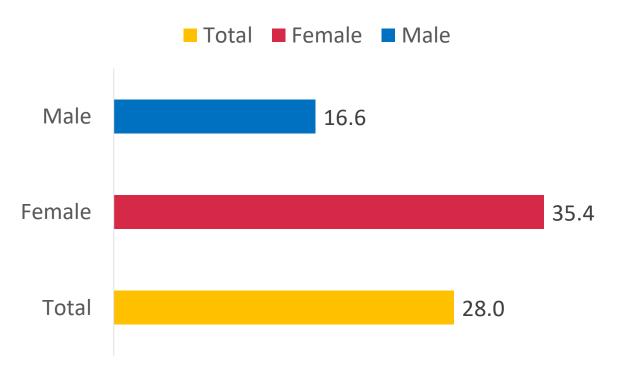
Poor oral health among older Filipinos

Mean number of original teeth



Mean original teeth at 80+: 5

Percent with no teeth



% with no teeth at 80+: 47%



"Are you often troubled with pain?"

Pain indicators	Male	Female	Total
% who are often troubled with pain	32.8	33.8	33.4
% who experienced moderate severity of pain	55.7	60.3	58.5
% who said pain make it difficult for them to do their usual activities	60.0	60.0	60.0
Body parts that felt pain Shoulders Lower back Joints of the hands/arms	48.8 21.1 21.8	51.6 23.6 32.0	50.5 22.6 28.0



History of falls among older Filipinos

19.4% report a fall in the last 12 months

incidence of falls increases with advancing age: 21% among 80+

1.73 mean number of falls in the past 12 months

Of those who had a fall, **15%** reported being injured seriously enough to need medical attention.



Anthropometric Measures

- Body mass index (BMI)
 - 56% normal
 - 14% underweight
 - 22% overweight
 - **8%** obese

More males than females are underweight More females than males are overweight or obese





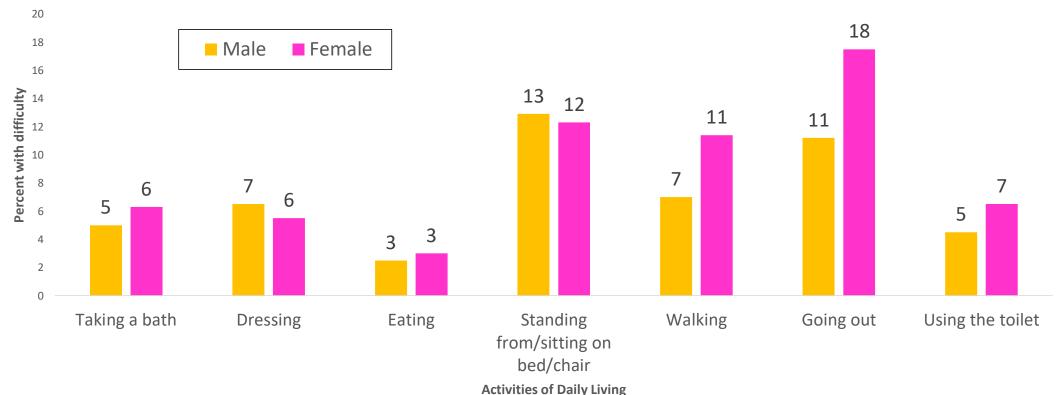
Longitudinal Study of geing and Health in the Philippines

Longitudinal Study of

Functional Health: a new way of looking at ageing

ADL(Activities of Daily Living) Difficulty

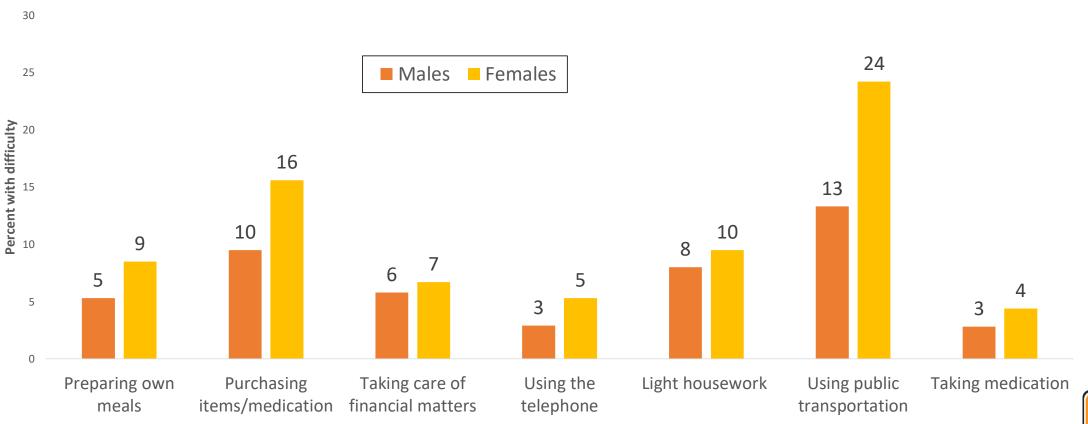
21% of older persons have at least one ADL difficulty.
Functional disability increases with advancing age of OP.





IADL(Instrumental Activities of Daily Living) difficulty

27% of older persons have at least one IADL difficulty



Instrumental Activities of Daily Living

STICK STICK

Active Life Expectancy by sex and age, 2018 (With functional difficulty if with at least 1 ADL or IADL difficulty)

	MALE		FEMALE	
	number of remaining life with functional difficulty (years)	% of remaining years in poor health	number of remaining life with functional difficulty (years)	% of remaining years in poor health
60	4.0	24	8.8	40
65	3.9	28	8.4	46
70	3.7	35	7.8	53
75	3.7	45	7.0	62
80	3.1	51	6.1	72
85	2.8	60	4.8	77



Source: Cruz, G. T., C. J. P. Cruz. (2019), *Is there compression of morbidity in the Philippines*? Paper presented at the International Association of Gerontology and Geriatrics (IAGG) Asia/Oceana, Taipei, Taiwan



Longitudinal Study of Ageing and Health in the Philippines

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Health Care Utilization

Many older people have unmet health care due to financial reasons

- 29% felt ill and thought about seeing a doctor but did not in the past 12 months.
 - Females: 30.3%
 - Males: 27.3%
- 86% of those with unmet need for health care cited financial reasons for not going to the doctor even though they felt ill



Many older Filipinos have limited access to healthcare and limited awareness of some government health programs that can benefit them

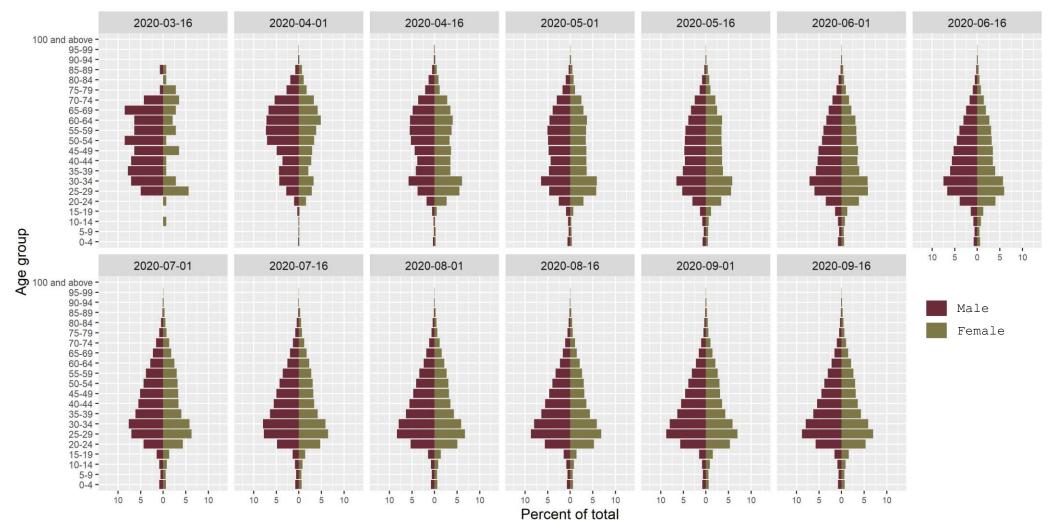
- Many have unmet need for health services
- Significant gaps in health-seeking behaviors of OPs
- 31% of hypertensives and 18% of diabetics obtain free medication from health centers all the time
- 41% are aware of the free pneumococcal vaccine program; 30% know the flu vaccine program
- 80% are covered by health insurance, mostly under PhilHealth, but benefits remain inadequate



Vulnerability of the older Filipinos to COVID-19



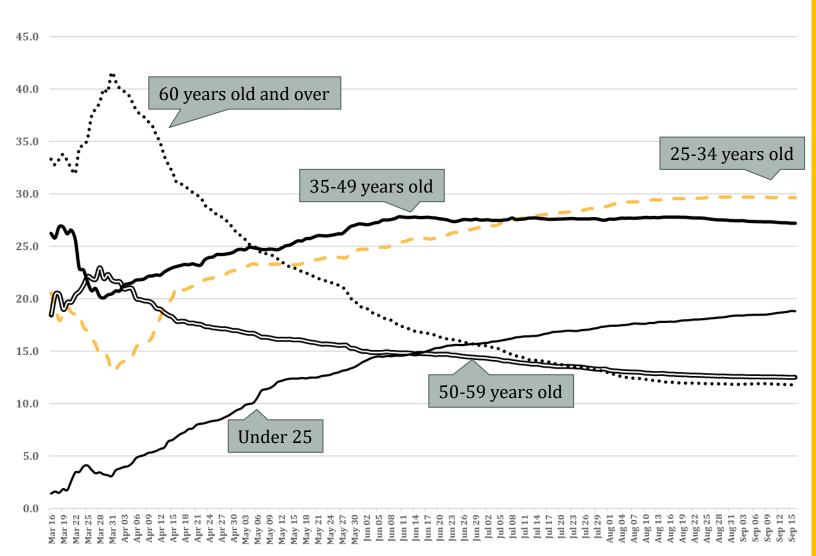
Shifting age structure of COVID-19 infections from older to the younger age groups



Age-sex pyramid of COVID-19 positive individuals: March to September 2020

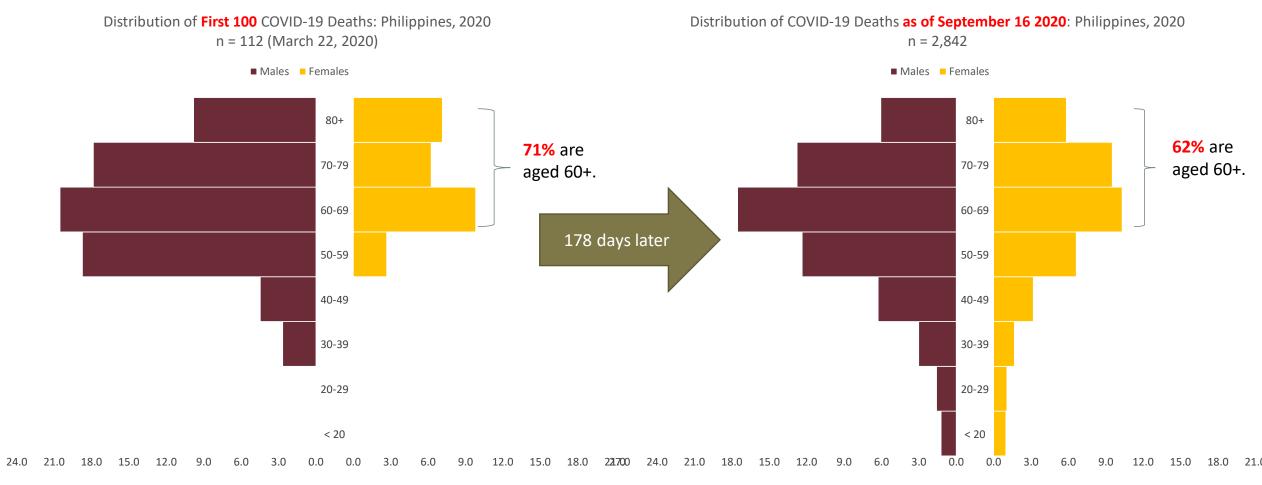
Age-sex pyramid of COVID-19 positive individuals: March to September 2020

50.0



The percent share of individuals ages 25-34 increased from 21% in March to 30% in September

COVID-19 mortality is heavily concentrated on the older age groups





Figures are updated using the Sept 16 data from DOH.

.0

Government response to protect older people from COVID-19

- Lockdown restricted the non-essential movement of individuals, with special emphasis on persons who are at high risk of being infected, i.e. those 60 years old and above, those who are immunocompromised or with co-morbidities such as lung and heart diseases and diabetes
- Prohibition of mass gatherings including religious ceremonies
- Closure of establishment
- Banning of all public transportation



COVID-19 pandemic has magnified the OP's economic vulnerabilities

- deprived workers from their main source of livelihood, food and other necessities;
- those working in the agriculture sector have not been able to market their produce due to travel restrictions;

• OP became dependent on aid provided by the government



ECQ restrictions has affected health and well-being of older people

- Home confinement leads to a more sedentary lifestyle
- The mental health was affected because many are unable to see friends and family



Concluding Notes

- Research findings show that prior to COVID-19, the older Filipinos are already faced with health and economic challenges. COVID-19 is expected to heighten their vulnerability. The drastic change in their daily routines as they are required to spend more time at home, minimize social contact with other family members, and a temporary cessation of work and other activities outside the home are expected to affect not only their physical and mental health but also their economic well-being.
- Ensuring older people's health, safety and protection will require the collaborative effort from government, private sectors, the academe and international development organizations and most importantly the families where older people are embedded.
- In crafting interventions for healthy and active ageing, it is important to take into consideration scientific evidence to ensure to that their unique needs and conditions are taken into account and more keenly addressed.



Many thanks to:



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THANK YOU!

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