

Philippines

2022 Demographic and Health Survey

Summary Report





The 2022 Philippines National Demographic and Health Survey (NDHS) was implemented by the Philippine Statistics Authority (PSA). Funding for the 2022 NDHS was provided by the Government of the Philippines, while provision of handheld tablets for data collection was partially supported by the Commission on Population and Development (POPCOM). ICF provided technical assistance through The DHS Program, which is funded by the United States Agency for International Development (USAID) and provides support and technical assistance in the implementation of population and health surveys in countries worldwide.

Additional information about the 2022 NDHS may be obtained from the Philippine Statistics Authority, PSA Complex, East Ave., Diliman, Quezon City; telephone: (+632)-8938-5267; fax: (+632)-8376-1995; email: info@psa.gov.ph; internet: www.psa.gov.ph.

Additional information about The DHS Program may be obtained from ICF, 530 Gaither Road, Suite 500, Rockville, MD 20850, USA; telephone: +1-301-407-6500; fax: +1-301-407-6501; e-mail: info@DHSprogram.com; Internet: www.DHSprogram.com).

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ABOUT THE 2022 NDHS

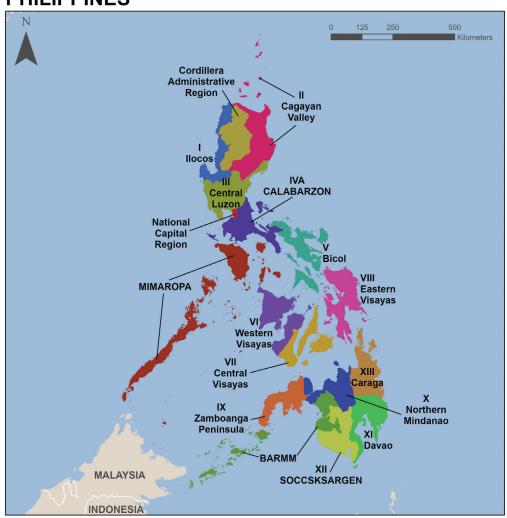
The 2022 Philippines National Demographic and Health Survey (NDHS) is designed to provide data for monitoring the population and health situation in the Philippines. The 2022 NDHS is the 7th Demographic and Health Survey conducted in the Philippines since 1993. The objective of the survey is to provide reliable estimates of fertility, marriage, family planning, breastfeeding practices, nutrition, maternal and child health, childhood mortality, awareness and behavior regarding HIV/AIDS and other sexually transmitted infections (STIs), women's empowerment, violence against women, and other health-related issues such as knowledge, attitudes, and behavior related to chronic and infectious diseases that can be used by program managers and policymakers to evaluate and improve existing programs.

Who participated in the survey?

A nationally representative sample of 27,821 women age 15-49 in 30,372 households were interviewed. This represents a response rate of 98%. Fieldwork began on May 2, 2022 and data collection activities were completed on June 22, 2022. Caution was taken while mobilizing the teams throughout the data collection period to mitigate the risk of COVID-19.

The sample design for the 2022 NDHS provides estimates at the national level, for urban and rural areas, and for each of the Philippines's 17 administrative regions.

PHILIPPINES



CHARACTERISTICS OF HOUSEHOLDS AND RESPONDENTS

Household Composition

Households in the Philippines have an average of 4.2 members. Women head 1 in 4 Filipino households. Twenty-eight percent of the household population in the Philippines is under age 15.

Cooking, Heating, and Lighting

Overall, 95% of the household population has electricity, including 98% in urban areas and 91% in rural areas. In the Philippines, 58% of the household population uses clean fuels and technologies for cooking, including stoves/cookers using electricity, liquified petroleum gas (LPG)/natural gas/biogas, solar, and alcohol/ethanol. Use of clean fuels and technologies for cooking is more than twice as high in urban areas (78%) than rural areas (36%).

While less than 1% of the population lives in households with heating, 44% of those use clean fuels and technologies for space heating, including central heating, electricity, LPG/natural gas/biogas, solar air heater, and alcohol/ethanol. Clean fuels and technologies for space heating are more commonly used in urban areas than rural areas (58% compared to 36%). Nearly all of the household population uses clean fuels and technologies for lighting, including electricity, solar lanterns, rechargeable flashlights/torches/lanterns, battery-powered flashlights/torches/lanterns, and biogas lamps.

Household Durable Goods

In the Philippines, 48% of households own a motorcycle or tricycle, 25% of households own a bicycle or scooter, and 12% of households that own a car, jeep, or van. One-third of households own farm animals, while 15% own agricultural land.

Information Communication Technology (ICT) and Internet Use

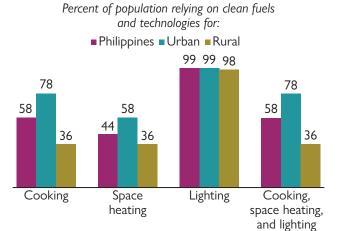
Overall, 92% of Filipino households own a mobile phone, 74% own a television, 47% own a radio, and 30% own a computer. ICT ownership is generally higher in urban areas, except for radios, which are equally common in urban and rural areas.

Six in ten women age 15-49 watch television at least once a week, while 23% listen to the radio at least once a week. Even fewer women read the newspaper weekly. One-third of women access none of these three media at least once a week. Eighty-two percent of women in the Philippines used the internet in the last 12 months.

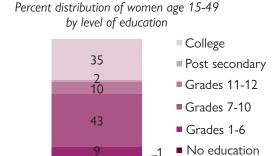
Education and Literacy

In the Philippines, 1% of women age 15-49 have no education, while 37% of women have postsecondary or college education. Overall, 99% of women are literate.

Primary Reliance on Clean Fuels and Technologies by Residence



Women's Education



HOUSEHOLD WATER AND SANITATION

Drinking Water

Overall, 97% of the household population in the Philippines has access to at least basic drinking water service. At least basic drinking water service includes drinking water from an improved source, either on the premises or with a round-trip collection time of less than 30 minutes. Still, 1% of the household population has only limited service, 2% has access to unimproved sources, and less than 1% uses surface water. By residence, 99% of the urban population and 94% of the rural population have access to at least basic drinking water service. Ninety percent of the household population had sufficient quantities of drinking water in the month before the survey.

Sanitation

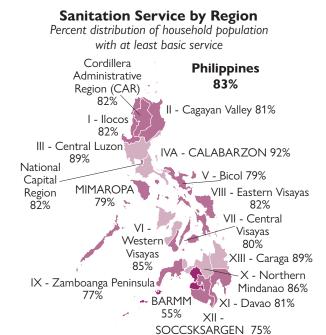
Philippines

Overall, 83% of the household population has at least basic sanitation service, meaning they have access to improved facilities that are not shared with other households or have safely managed sanitation service where excreta are safely disposed of in situ or transported and treated off-site. Basic sanitation service is more common in urban areas (84%) than in rural areas (81%). By region, basic sanitation services ranges from a low of 55% of the population in Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) to a high of 92% in CALABARZON.

Still, 15% of Filipinos have access to limited or unimproved sanitation service, and 3% practice open defecation.

Rural

basic service



Handwashing

In the Philippines, 95% of the population has access to a basic handwashing facility with soap and water, including 96% of people in urban areas and 94% of people in rural areas. By region, access to basic handwashing is lowest in BARMM (81%) and highest in Cordillera Administrative Region (CAR) (99%).

Menstrual Hygiene

Ninety-four percent of women age 15-49 with a menstrual period in the year before the survey used disposable sanitary pads to collect or absorb blood, 4% used cloth, 3% used reusable sanitary pads, 3% used underwear only, and less than 1% used nothing. Among women with a menstrual period in the year before the survey who were at home during their last menstrual period, 99% were able to wash and change in privacy, and 97% used appropriate materials during their last menstruation and were able to wash and change in privacy.

Urban

FERTILITY AND ITS DETERMINANTS

Total Fertility Rate

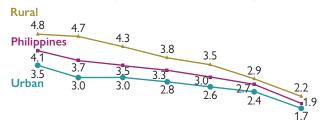
Currently, women in the Philippines have an average of 1.9 children. Fertility has declined steadily, from 4.1 children per woman in 1993 to 1.9 children per woman in 2022.

On average, rural women have more children than urban women (2.2 children versus 1.7 children). By region, the total fertility rate ranges from a low of 1.2 children per woman in the National Capital Region (NCR) to a high of 3.1 children per woman in BARMM.

Fertility in the Philippines generally declines with increasing household wealth*, from 3.1 children per woman in the poorest households to 1.4 children per woman in the wealthiest households.

Trends in Total Fertility Rate by Residence

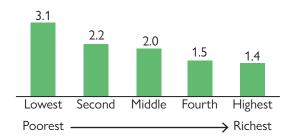
Average number of births per woman for the 3-year period before the survey



1993 1998 2003 2008 2013 2017 2022 NDS NDHS NDHS NDHS NDHS NDHS NDHS

Fertility by Household Wealth

Births per woman for the 3-year period before the survey

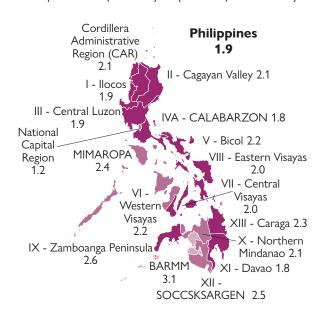


Pregnancy Outcomes and Induced Abortion

Of all pregnancies to women age 15-49 ending in the three years before the survey, 88% resulted in live births and 12% resulted in pregnancy losses. Among pregnancy losses, 11% were miscarriages, 1% were induced abortions, and 1% were stillbirths. The risk of miscarriage generally increases with increasing age at pregnancy outcome and increasing pregnancy order.

Total Fertility Rate by Region

Births per woman for the 3-year period before the survey



^{*} Wealth of families is calculated through household assets collected from DHS surveys—i.e., type of flooring; source of water; availability of electricity; possession of durable consumer goods. These are combined into a single wealth index. They are then divided into five groups of equal size, or quintiles, based on their relative standing on the household wealth index.

Age at First Menstruation, First Marriage, Sexual Intercourse, and Birth

In the Philippines, the median age at first menstruation among women age 15-49 is 13.0 years. This means that half of women had their first period before the age of 13.0 and the rest had their first period after that age.

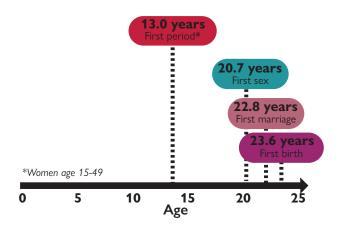
Overall, 55% of women age 15-49 are currently in union, meaning that they are either married (36%) or are living together in consensual unions (19%). Half of Filipino women age 25-49 were married by 22.8 years, the median age at first marriage. Rural women marry at a younger age than urban women (21.7 years compared to 23.8 years).

The median age at first sexual intercourse is 20.7 years among women age 25-49. The median age at first sex among women varies by region, from 20.0 years in Northern Mindanao to 21.3 years in CAR.

The median age at first birth for women age 25-49 is 23.6 years. This means that half of women age 25-49 give birth for the first time before this age. On average, urban women give birth for the first time over one year later than rural women (24.4 years compared to 22.7 years).

Sexuality and Reproductive Health Milestones

Among women age 25-49, median age at



Early Sexual and Reproductive Health Behaviors

In the Philippines, the legal age of marriage is 18 years, although marriage before this age is permitted among indigenous peoples and Muslims. One percent of adolescent women age 15-19 were married before age 15. Only 2% of women age 25-49 report that they were first married by age 15 and 14% were first married by age 18.

Similarly, 1% of adolescent women age 15-19 had sexual intercourse before the age of 15. Very few young women have had a live birth before the age of 15.

Teenage Pregnancy

Overall, 5% of adolescent women age 15-19 have ever been pregnant: 4% have given birth, 2% were pregnant at the time of the survey, and less than 1% have ever had a pregnancy loss. Teenage pregnancy is highest in the regions of Northern Mindanao at 11%, Davao and Central Luzon, both at 8%.

Teenage pregnancy in the Philippines generally declines as household wealth increases, with teenage pregnancy being highest among those in the lowest wealth quintile (10%) and lowest among those in the highest wealth quintile (2%).

Teenage Pregnancy by Household Wealth

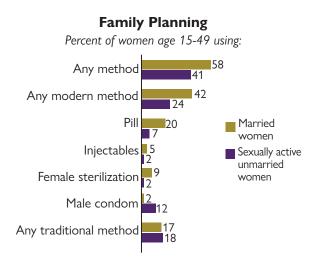
Percent of women age 15-19 who have ever been pregnant



FAMILY PLANNING

Current Use of Family Planning

In the Philippines, 58% of married women and 41% of sexually active unmarried women age 15-49 use any method of family planning. Use of modern methods of family planning is higher among married women (42%) than among sexually active unmarried women (24%). The most popular modern methods among married women are the pill (20%), female sterilization (9%), and injectables (5%). Sexually active unmarried women use male condoms (12%) and the pill (7%) most often among modern family planning methods.

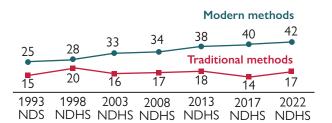


Use of any traditional method is about the same for married and sexually active unmarried women, at 17% and 18%, respectively. Thirteen percent of married women practice withdrawal and 3% use the rhythm method. Fifteen percent of sexually active unmarried women practice withdrawal and 2% use the rhythm method.

Use of modern methods of family planning is more common among married women in rural areas (44%) than among those in urban areas (40%). Modern use is highest among married women in Cagayan Valley (58%) and lowest in BARMM (21%).

Trends in Family Planning Use

Percent of married women age 15-49 using:



Trends in Family Planning Use

The use of modern methods of family planning among married women increased from 25% in 1993 to 42% in 2022. The use of traditional methods has not changed much from 15% in 1993 to 17% in 2022.

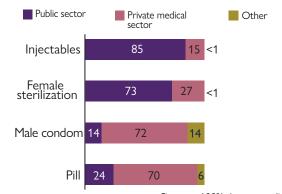
Source of Family Planning Methods

The public sector provides 50% of modern family planning methods in the Philippines. Slightly less than half (46%) of modern method users obtain family planning from the private medical sector and 4% of users obtain modern methods from other sources.

A large majority of women using female sterilization (73%) and injectables (85%), obtained these methods from the public sector. In contrast, the majority of pill (70%) and male condom (72%) users obtained their method from the private sector.

Source of Family Planning Methods

Percent distribution of family planning users age 15-49 by most recent source of method



Figures > 100% due to rounding.

Demand for Family Planning

The total demand for family planning includes both met need and unmet need. Met need is the percent of women who are currently using family planning. Unmet need for family planning is the proportion of women who want to stop or delay childbearing but are not using family planning.

In the Philippines, 42% of all women have a demand for family planning, which includes 8% of women with an unmet need for family planning and 34% of women with a met need. The majority of all women (58%) have no need for family planning, indicating that they do not wish to delay or limit pregnancy.

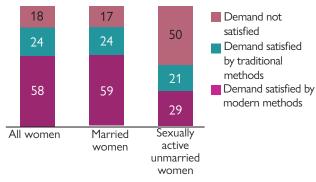
Unmet need for family planning is more than three times higher among sexually active unmarried women than among married women (42% versus 12%). One in five married women in BARMM has an unmet need for family planning.

Demand for Family Planning Satisfied by Modern Methods

In the Philippines, 83% of married women age 15-49 have demand satisfied for family planning, with 59% satisfied by modern methods. Married women in rural areas have higher demand satisfied by modern methods than those in urban areas (62% versus 57%). By region, demand satisfied by modern methods ranges from 37% in BARMM to 78% in Central Luzon. Demand for family planning satisfied by modern methods among married women has steadily increased from 35% in 1993 to 59% in 2022.

Demand for Family Planning Satisfied

Percent distribution of women age 15-49 with a need for family planning



Figures > 100% due to rounding.

Decision Making about Family Planning

Overall, 91% of married women participated in decision making about family planning. Participation in family planning among married women is lowest in Bicol (87%) and highest in Eastern Visayas (95%).

Exposure to Family Planning Messages

Social media (64%) is the most common source of family planning messages. Fifty-four percent of women reported having seen a family planning message on television and 35% at a community meeting or event. Still, 17% of women were not exposed to family planning messages in the 12 months before the survey.

MATERNAL AND NEWBORN HEALTH CARE

Antenatal Care

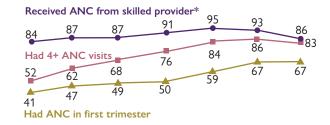
In the Philippines, 86% of women age 15-49 with a live birth in the two years before the survey received antenatal care (ANC) from a skilled provider. Skilled providers include doctors, nurses, and midwives.

Overall, 83% women made four or more ANC visits for their most recent live birth and 67% had their first ANC visit in the first trimester. Among women who received ANC for their most recent live birth, 99% had their blood pressure measured, 88% had a urine sample taken, and 87% had a blood sample taken.

Among women with a live birth in the two years before the survey, 86% took any iron-containing supplements during the pregnancy, and 31% took iron-containing supplements for 180 days or more, as recommended. Seventy-eight percent of women's most recent live births were protected against neonatal tetanus.

Trends in Antenatal Care Coverage

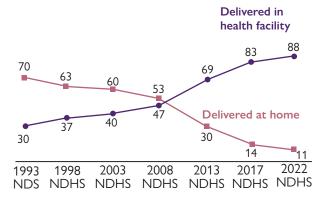
Percent of women age 15-49 who had a live birth in the 2 years before the survey



1993 1998 2003 2008 2013 2017 2022 NDS NDHS NDHS NDHS NDHS NDHS NDHS

Trends in Place of Birth

Percent of live births in the 2 years before the survey



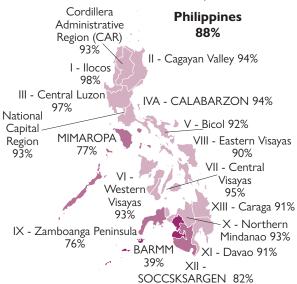
Delivery Care

In the Philippines, 88% of live births are delivered in a health facility, with 56% delivered in a public facility. Still, 11% of births are delivered at home. By region, health facility deliveries range from 39% in BARMM to 98% in llocos.

Health facility deliveries have increased dramatically, from 30% in 1993 to 88% in 2022. Over the same period, home deliveries declined from 70% to 11%. Health facility delivery increases as household wealth increases, from 71% in the lowest quintile to 99% in the highest quintile.

Health Facility Delivery by Region

Percent of live births in the 2 precending years delivered in a health facility



^{*}Skilled provider includes doctor, nurse, and midwife.

In the Philippines, 90% of live births in the 2 years preceding the survey were delivered by a skilled provider. The majority of births were delivered by a doctor (50%) or midwife (29%).

Skilled delivery assistance increased from 54% in 1993 to 90% in 2022. By region, skilled delivery assistance ranges from 42% in BARMM to 99% in CAR. Skilled delivery assistance increases with increasing household wealth, from 73% in the lowest quintile to 99% in the fourth and highest quintiles.

Cesarean Sections

One in every five (20%) live births in the two years preceding the survey were delivered via Cesarean section (C-section). C-section deliveries are more common in private facilities (30%) than in public facilities (17%). By region, C-section ranges from 5% in BARMM to 36% in Central Luzon. Cesearean delivery increases with increasing household wealth, from 6% to 43% in the highest quintile

Postnatal Care for Mothers

Postnatal care helps prevent complications after childbirth. Overall, 75% of women age 15-49 with a live birth in the two years before the survey received a postnatal checkup within two days of delivery, with most checks occurring within 4 hours of delivery (48%).

As with antenatal care, the effectiveness of postnatal care depends on the quality of services provided during examinations. In the Philippines, 74% of mothers had their blood pressure measured, 62% discussed vaginal bleeding with their provider, and 68% discussed family planning. For 55% of mothers, all three checks were performed within two days of delivery.

Postnatal Care for Newborns

Eight in ten newborns received a postnatal checkup within two days of birth. Still, 20% received no postnatal checkup. Within two days of birth, 91% of newborns were weighed by a health care provider and 79% had both their umbilical cord examined and their temperature measured. For 76% of newborns, their mothers received counseling on breastfeeding, and for 68% their mother was observed breastfeeding. For 3 in 4 newborns, their mother was informed about danger signs and how to recognize if the baby needs immediate attention. All five signal functions were performed during the first two days after birth for 66% of newborns.

Breast and Cervical Cancer Examinations

Ten percent of women age 15-49 have ever been examined by a doctor or health care worker for breast cancer and 9% have ever been tested for cervical cancer. Across regions, breast cancer examination ranges from 2% of women in BARMM to 14% each in CALABARZON, Central Visayas, and Davao. Cervical cancer testing ranges from 1% of women in BARMM to 14% each in Central Luzon and Central Visayas.

Problems in Accessing Health Care

Slightly more than half (51%) of women age 15-49 had at least one problem accessing health care when they were sick. The most common issues were getting money for treatment (42%), not wanting to go alone (18%), and distance to the health facility (16%). More women in rural areas (58%) had at least one problem accessing health care than in urban areas (46%).

INFANT AND CHILD MORTALITY

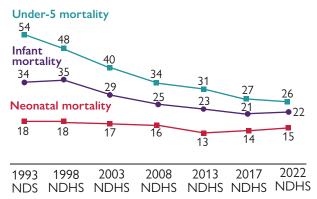
Rates and Trends

Infant and under-5 mortality rates in the Philippines for the five-year period before the survey are 22 and 26 deaths per 1,000 live births, respectively. The neonatal mortality rate is 15 deaths per 1,000 live births. At these mortality levels, about 1 in 38 children in the Philippines does not survive to their fifth birthday.

Childhood mortality rates have declined over time. Since 1993, under-5 mortality has declined from 54 deaths per 1,000 live births to the current rate of 26 deaths per 1,000 live births.

Trends in Childhood Mortality

Deaths per 1,000 live births for the 5-year period before the survey

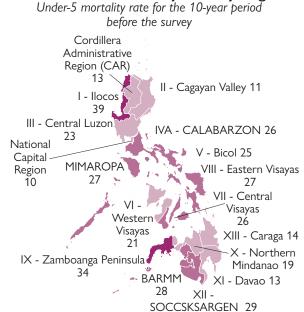


Mortality Rates by Background Characteristics

The under-5 mortality rate is slightly higher in urban areas (27 deaths per 1,000 live births) than in rural areas (26 deaths per 1,000 live births) for the five-year period before the survey.

Mortality rates generally decline with increasing household wealth. The under-5 mortality rate decreases from 35 deaths per 1,000 live births in the lowest quintile to 8 deaths per 1,000 live births in the highest quintile for the ten-year period before the survey. Under-5 mortality rates vary greatly across regions for the ten-year period before the survey, from 10 deaths per 1,000 live births in NCR to 39 deaths per 1,000 live births in llocos.

Under-5 Child Mortality Rate by Region

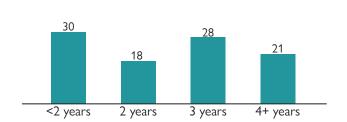


Birth Intervals

Spacing children at least 36 months apart reduces the risk of infant death. In the Philippines, the median birth interval is 46.5 months. Under-5 mortality is highest among children with birth intervals of 23 months or shorter, at 30 deaths per 1,000 live births for the 10-year period before the survey.

Under-five Mortality by Previous Birth Interval

Deaths per 1,000 live births for the 10-year period before the survey



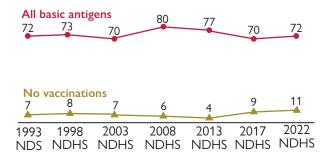
CHILD HEALTH

Vaccination Coverage: Basic Antigens

In the Philippines, 72% of children age 12-23 months are fully vaccinated against all basic antigens—one dose each of bacille Calmette-Guérin (BCG), measles, mumps, and rubella vaccine (MMR), three doses each of polio vaccine, and a diphtheria-containing (DPT) vaccine. Basic antigen vaccination coverage peaked at 80% in 2008 before declining to 70% in 2017, and has since increased slightly. However, 11% of children age 12-23 months have received no vaccinations.

Trends in Childhood Vaccinations

Percent of children age 12-23 months who received:



Vaccination Coverage by Region

Percent of children age 12-23 months who are fully vaccinated according to the national schedule at any time before the survey



Vaccination Coverage: National Schedule

To be fully vaccinated according to the national schedule, children age 12-23 months must be vaccinated against all basic antigens, as well as a birth dose of hepatitis B vaccine, a dose of inactivated polio vaccine, three doses of hepatitis B and *Haemophilus influenzae* type b (usually given as part of diphtheria-containing vaccine), and three doses of the pneumococcal vaccine. Six in ten children age 12-23 months are fully vaccinated according to the national schedule; 48% received the appropriate vaccinations by age 12 months, as recommended.

Vaccination coverage according to the national schedule increases with increasing household wealth, from 45% in the lowest quintile to 73% in the highest quintile. There are wide disparities by region in vaccination coverage according to the national schedule. Coverage is lowest in BARMM (15%) and highest in CALABARZON (82%).

Childhood Illnesses

In the Philippines, 1% of children under age 5 had symptoms of acute respiratory infection (ARI) in the two weeks before the survey and 72% of children with symptoms of ARI were taken to a health facility or provider. Overall, 11% of children under age 5 had fever in the two weeks before the survey. Forty-one percent of children with fever were taken to a health facility or provider for advice or treatment. Among children under age 5, 6% had diarrhea in the two weeks before the survey. Treatment or advice was sought for 37% of children who had diarrhea.

Children with diarrhea should drink more fluids, particularly through oral rehydration therapy (ORT). While 61% of children under age 5 with diarrhea received ORT, 22% of children under age 5 with diarrhea received no treatment.

NUTRITION

Infant and Young Child Feeding Practices

Optimal infant and young child feeding (IYCF) practices are critical to the health and survival of young children. Recommendations include initiating breastfeeding within the first hour after birth, exclusive breastfeeding for the first two days after birth and the first 6 months of life, continued breastfeeding for two years or more, and the introduction of nutritious foods at age 6 months.

In the Philippines, 85% of children born in the two-year period prior to the survey were ever breastfed. Over half (54%) were breastfed within one hour of birth, 73% were exclusively breastfed and during the first two days after birth. At the regional level, breastfeeding is least common in Central Luzon with 72% of children ever breastfed and most common in Northern Mindanao (95%).

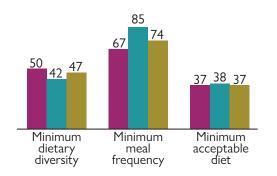
Forty-one percent of children 0-5 months are exclusively breastfed, despite the recommendation that children be exclusively breastfed in the first 6 months. Exclusively breastfeeding is higher in rural areas (45%) than in urban areas (37%). Exclusively breastfeeding is higher in the lowest wealth quintile (53%) than in the other four quintiles (32%-39%).

Complementary foods should be introduced when a child is six months old to reduce the risk of malnutrition. In the Philippines, 80% of children age 6-8 months were fed solid, semi-solid, or soft foods the day before the survey.

IYCF Indicators on Minimum Acceptable Diet by Breastfeeding Status

Percent of children 6-23 months meeting feeding practice recommendations

■ Breastfed ■ Nonbreastfed ■ All children 6-23 months



Minimum Acceptable Diet and Unhealthy Feeding Practices

Children age 6-23 months have a minimum acceptable diet when they are fed from at least five of eight defined food groups the minimum number of times or more during the day before the survey. Nonbreastfed children must also receive at least two milk feeds for a minimum acceptable diet. In the Philippines, 47% of children age 6-23 months received the minimum number of food groups during the previous day or night, 74% were fed the minimum number of times, and 37% were fed a minimum acceptable diet. Among nonbreastfed children, 89% received the minimum number of milk feeds.

There was minimal difference between the percent of breastfed and nonbreastfed children fed a minimum acceptable diet (37% versus 38%). Minimum meal frequency is lower among breastfed children (67%) than among nonbreastfed children (85%). In contrast, a minimum dietary diversity is higher among those who are breastfeeding than among those who are not breastfeeding (50% versus 42%).

For infants and young children, unhealthy feeding practices should be avoided and replaced with nutritious foods that provide important nutrients. In the 2022 NDHS, 35% of children age 6-23 months were given a sweet beverage, 46% were fed unhealthy foods, and 27% did not consume any vegetables or fruits during the previous day.

Micronutrient Supplementation and Deworming among Children

Overall, 73% of children age 6-59 months received iron-containing supplements in the last 12 months and 79% of children received vitamin A supplements in the last six months. Half of children age 12-59 months were given deworming medication in the past six months.

HEALTH CARE UTILIZATION AND FINANCING

Health Insurance

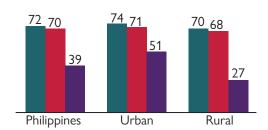
The National Health Insurance Program, administered by PhilHealth, is the country's social insurance program. Seventy-two percent of the Philippine population has some form of health insurance coverage with PhilHealth, covering 70% of the population. The Social Security System covers 35% of the population and the Government Service Insurance System and private insurance each provide coverage for 4% of the population. Still, 28% of the population has no health insurance.

Health insurance coverage is higher among the urban population (74%) than among rural population (70%). By region, health insurance coverage ranges from 42% of the population in BARMM to 81% of the population in Davao. Health insurance coverage increases as household wealth increases, from 59% in the lowest wealth quintile to 86% in the highest wealth quintile.

Health Insurance Coverage by Residence

Percent of household population with:





Recent Health Care Treatment

Three percent of household members visited a health facility for advice or treatment 30 days prior to the survey. Of these, 55% first visited a private medical facility, 44% first visited a public medical facility, and less than 1% visited an alternative medical provider or a nonmedical facility. The average roundtrip travel time was 41 minutes.

Barangay health stations were the most commonly visited public health facility (13%), while private clinics were the most commonly visited private facility (33%). The most common reason for visiting a health facility was sickness or injury (45%), followed by a medical checkup, (41%) and a prenatal or postnatal check (7%).

Hospital Care

Two percent of household members stayed in a hospital or clinic in the 12 months preceding the survey. More than half of this group (55%) received care at a public facility, while 45% received care at a private facility. The most common reason for confinement was sickness or injury (66%), followed by birth or miscarriage (28%).

Cost of Treatment and Purchase of Medicines

The average travel cost for persons who visited a health facility or provider in the 30 days preceding the survey was Philippine Pesos (PhP) 174, while the average cost of treatment was PhP 2,540. The average cost for treatment at private facilities was nearly three times the amount paid at public facilities (PhP 3,563 versus PhP 1,269).

Seventy percent of households purchased medicines or vitamins in the last 30 days. Among these households, 89% purchased medicines or vitamins from a drugstore and 6% from a sari-sari store. The most common reasons for purchasing medicines or vitamins from a drugstore were accessible location (38%), availability (29%), and affordability (21%).

Knowledge and Use of Local Health Programs

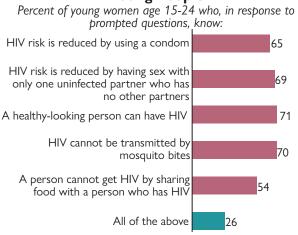
Local government units (LGUs) have initiated several health programs for Filipinos. Seventy-four percent of respondents are aware of free COVID-19 testing or vaccination, 53% were aware of free medicines, and 42% were aware of free medical consultations. Only 1% were aware of free screening for diseases or mental health programs. In the past 30 days, almost two-thirds (64%) of households had at least one member use an LGU health program, and 45% had at least one member make use of free COVID-19 PCR testing or vaccination.

HIV KNOWLEDGE, ATTITUDES, AND BEHAVIOR

Knowledge of HIV and HIV Prevention Methods

In the Philippines, 93% of women age 15-49 have heard of HIV or AIDS. Only 59% of women in BARMM and 50% of women with no education are aware of HIV or AIDS. Only 28% of women age 15-49 have heard that antiretroviral medicines (ARVs) treat HIV, and about half (49%) know that the risk of mother-to-child transmission (MTCT) can be reduced by the mother taking special drugs. Knowledge of ARVs is lowest among those with no education (5%) and highest among those with a college education (37%).

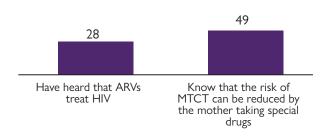
Knowledge of HIV Prevention among Young People



Among women age 15-24, 26% have knowledge about HIV prevention. Of specific prevention methods, nearly two-thirds (65%) know that using condoms during sexual intercourse can reduce the chances of getting HIV, slightly more (69%) know that having just one uninfected faithful partner can also reduce the chances of HIV infection. Seven in ten young women know that a healthy-looking person can have HIV. And of common misconceptions about HIV transmission, 54% of young women know a person cannot get HIV by sharing food with someone who has HIV, and 70% know that HIV cannot be transmitted by mosquito bites.

Knowledge of Medicines to Treat or Prevent HIV

Percent of women age 15-49 who:



Multiple Sexual Partners and Higher-Risk Sexual Behavior

Less than 1% of women age 15-49 had sex with more than one partner in the last 12 months. Four percent of women had sex with a person who neither was their husband nor lived with them, and among these women 10% used a condom during their last sexual intercourse with such a partner.

HIV Testing

Nine percent of women age 15-49 have ever been tested for HIV and received the results of their last test. Only 2% of women were tested for HIV in the 12 months preceding the survey and received the results of their last test. Two in ten women have heard of HIV self-test kits, though only 1% have used them.

HIV testing increased from 2% of women who have ever been tested for HIV and received their results in 2008 to 9% of women in 2022. HIV testing is more common in urban areas (12%) than in rural areas (6%).

Women's Empowerment

Employment

Nearly 6 in 10 married women age 15-49 (59%) were employed in the 12 months preceding the survey. Among employed women, 79% were paid in cash only, while 19% were not paid for their work.

Control over Women's Earnings

Over half (56%) of married women age 15-49 decide with their husband how the wife's cash earnings are used, while 40% of married women make their own decisions on how their earnings are used. Joint decision making on how to spend her cash earnings is highest in MIMAROPA (69%) and Cagayan Valley (68%), while independent decision making on how to spend her earnings is most common among women in Davao (57%) and Central Visayas (55%).

Ownership of Assets

About 3 in 10 Filipino women own a house alone or jointly while 6% own land alone or jointly.

About one-third of women age 15-49 have and use a bank account. Most women (91%) own a mobile phone. Nearly half (49%) of women reported that they used a mobile phone for financial transactions in the last 12 months whether or not they owned one. Over half of women (57%) have and use a bank account or used a mobile phone for financial transactions in the last 12 months.

Attitudes toward Wife Beating

Overall, 9% of women age 15-49 agree that a wife beating is justified under at least one specific circumstance, this is a decline from 24% in 2003. By region, attitudes justifying wife beating range from 6% in CALABARZON to 15% in Zamboanga Peninsula.

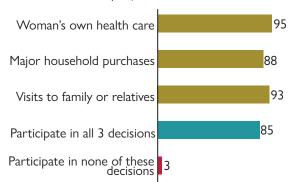
Participation in Household Decisions

The 2022 NDHS asked married women about their participation in three types of household decisions: her own health care, making major household purchases, and visits to her family or relatives.

In the Philippines, 95% of married women have sole or joint decisionmaking power in their own health care, 88% make decisions about major household purchases, and 93% make decisions about visits to their family or relatives. Overall, 85% of married women participate in all three above decisions and only 3% participate in none of the three decisions.

Women's Participation in Decision Making

Percent of married women age 15-49 participating in specific decisions



Decision Making on Sexual and Reproductive Health

Eighty-two percent of married women age 15-49 make their own informed decisions regarding sexual relations, contraceptive use, and reproductive care. This varies by region, from 57% in BARMM to 88% in Cagayan Valley, Central Luzon, and Eastern Visayas.

DOMESTIC VIOLENCE

Experience of Physical Violence

In the Philippines, 13% of women age 15-49 have ever experienced physical violence since age 15. In the last 12 months, 4% of women experienced physical violence. By marital status, 15% of women who are married or living together have ever experienced physical violence, compared to 7% of never-married women who have never had an intimate partner, and 11% of never-married women who have ever had an intimate partner. Experience of physical violence is highest among divorced, separated, or widowed women (30%).

Experience of Sexual Violence

Overall, 4% of women age 15-49 have ever experienced sexual violence by any perpetrator and 1% of women have experienced sexual violence in the last 12 months. Fourteen percent of women who are divorced, separated, or widowed have ever experienced sexual violence.

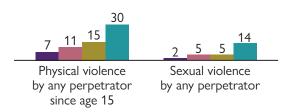
The most common perpetrators of sexual violence among women who have ever been married or had an intimate partner were their current husband/intimate partner (45%) and a former husband/intimate partner (35%).

Among never-married women who have never had an intimate partner, the most common perpetrators of sexual violence were strangers (29%) and relatives other than parents or siblings (28%).

Experience of Violence by Marital Status

Percent of women age 15-49 who have ever experienced:

Never r	narried	Ever married		
■ Never had	Ever had an	■ Married/	■ Divorced/	
an intimate	intimate	living	separated/	
partner	partner	together	widowed	

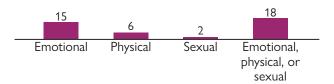


Intimate Partner Violence and Controlling Behavior

In the Philippines, 18% of women who have ever had a husband or intimate partner have experienced violence committed by their current or most recent husband/ intimate partner, whether physical, sexual, or emotional. This includes 15% who experienced emotional violence, 6% who experienced physical violence, and 2% who experienced sexual violence.

Recent Violence by any Husband/Intimate Partner

Percent of women age 15-49 who have ever had a husband or intimate partner who have experienced violence by any husband/intimate partner in the last 12 months



Over one-third of women (36%) who have ever had a husband/intimate partner experienced at least one specific type of controlling behavior by their current or most recent husband/intimate partner. Nine percent of women reported that their husband/intimate partner displayed 3 or more controlling behaviors, the most common being jealousy or anger if they talk to other men (26%) and insisting on knowing where they are at all times (20%).

Help Seeking to Stop Violence

Among women who have ever experienced physical or sexual violence, 34% sought help to stop the violence, while 24% did not seek help but did tell someone about the violence. Still, 42% of women who experienced physical or sexual violence never sought help and never told anyone. The most common source of help women seek from is their own family (61%).

CHRONIC AND OTHER INFECTIOUS DISEASES

Tuberculosis

Overall, over a quarter (26%) of household respondents have ever had any sign or symptom of TB. More rural residents (32%) had any sign or symptom of TB than urban residents (21%). By region, experience of TB signs or symptoms ranges from a low of 11% in NCR to a high of 42% in Central Visayas.

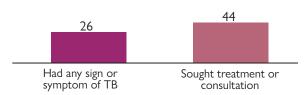
Among those with at least one sign or symptom of TB, 44% sought consultation or treatment. The most common reasons why respondents who experienced TB symptoms did not seek consultation were self-medication (78%), symptoms harmless (21%), and fear of going to health facility due to COVID-19 (13%).

The vast majority (97%) of household respondents have heard of TB. The most commonly known symptoms of TB are coughing (59%) and coughing for several weeks (55%). The least known symptoms were night sweating (5%) and difficulty breathing (1%).

Tuberculosis Symptoms and Care Seeking

Percent of household population that has:

Among household population that had at least one symptom, percent who:



Similarly, the overall majority (98%) know that TB can be cured, though only 26% correctly identified germs/ bacteria as the cause of TB. Over half (54%) correctly state that TB can be spread by coughing or sneezing.

Cancer Screening

Nearly all household respondents have heard of cancer (97%), but only 5% have been screened for cancer. Breast cancer was the mostly common type of cancer screening (42%), followed by cervical cancer (17%), and ovarian cancer (14%).

COVID-19 Symptoms and Care Seeking

The 2022 NDHS asked household respondents if they had experienced COVID-19 symptoms since January 2020 and 16% said yes. Among those with COVID-19 symptoms, 35% sought treatment. Those who did not seek treatment for COVID-19 symptoms cited self-medication (84%) and fear of going to the health facility due to COVID-19 (35%) as the most common reasons for not seeking consultation. The most well known sources of transmission for COVID-19 are talking (72%) and coughing (66%).

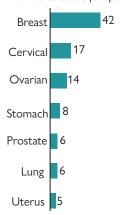
Overall, 93% of household respondents know that COVID-19 can be prevented. The most commonly known prevention methods are wearing a facemask (84%) and social distancing (76%).

Knowledge of Heart Disease and Diabetes

The majority of household respondents have heard of heart disease and diabetes, 95% and 98%, respectively. Stress (40%) and family history of heart disease (34%) were the most commonly cited characteristics that make someone more likely to have heart disease. For diabetes, consumption of sweet and fatty foods (88%) and history of diabetes (37%) are the most frequently cited characteristics that make someone more likely to have diabetes.

Type of Cancer Screening

Among household respondents who have been screened for cancer, percent who were screened for specific types of cancer



INDICATORS

		dence		
Fertility	Philippines	Urban	Rural	
Total Fertility Rate (number of children per woman)	1.9	1.7	2.2	
Median age at first birth women age 25-49 (years)	23.6	24.4	22.7	
Women age 15-19 who have ever been pregnant¹ (%)	5	5	6	
Family Planning (among married women age 15-49)				
Current use of any method of family planning (%)	58	57	60	
Current use of a modern method of family planning (%)	42	40	44	
Demand satisfied by modern methods of family planning (%)	59	57	62	
Infant and Child Mortality (deaths per 1,000 live births) ²				
Neonatal mortality	15	16	14	
Infant mortality	22	23	20	
Under-five mortality	26	27	26	
Maternal and Newborn Health Care				
Live births delivered in a health facility (%)	88	92	85	
Live births assisted by a skilled provider ³ (%)	90	93	86	
Child Health (among children age 12-23 months)				
Children who are fully vaccinated against all basic antigens ⁴ (%)	72	72	72	
Children who are fully vaccinated according to the national schedule ⁵ (%)	59	62	57	
Nutrition				
Children born in the last 2 years who were ever breastfed (%)	85	82	89	
Children age 6-23 months living with their mother fed a minimum acceptable diet ⁶ (%)	37	39	36	
Children age 6-59 months who were given iron-containing supplements in last 12 months (%)	73	73	73	
Household Water, Sanitation, and Hygiene				
Household population with access to at least basic drinking water service (%)	97	99	94	
Household population with access to at least basic sanitation service8 (%)	83	84	81	
Women's Empowerment				
Married women age 15-49 who participate in household decisions (%)	85	86	84	
Women age 15-49 who own a house either alone or jointly (%)	30	25	35	
Women age 15-49 who have and use a bank account or used a mobile phone for financial transactions in the last 12 months (%)	57	63	48	
Domestic Violence				
Women age 15-49 who have experienced physical violence since age 15 (%)	13	12	13	
Women age 15-49 who have ever had a husband or intimate partner who have experienced violence by any husband/intimate partner in the last 12 months ¹⁰ (%)	12	10	14	
Health Care Utilization and Financing	_			
Population with any health insurance	72	74	70	
Households in which any household members availed any health programs initiated by local government units in the past 30 days (%)	64	67	61	
HIV Knowledge, Attitudes, and Behavior		- 10		
Women age 15-49 who ever tested for HIV and received the results (%)	9	12	6	
Women age 15-49 who were tested for HIV in the last 12 months and received the results (%)	2	2	1	
Chronic and Other Infectious Diseases				
Household respondents who have ever had any sign or symptom of TB ¹¹ (%)	26	21	32	
Household respondents who correctly identify the cause of TB as microbes/germs/bacteria ¹² (%)	26	30	21	
Household respondents who have experienced COVID-19 symptoms since January 2020 (%)	16	15	17	
Household respondents with COVID-19 symptoms who sought consultation or treatment ¹³ (%)	35	41	29	

Note: Figures in parentheses are based on 25–49 unweighted cases. 'Women age 15-19 who have ever had a live birth, pregnancy loss (stillbirth, miscarriage, abortion), or are currently pregnant. ²Figures are for the ten-year period before the survey except for the national and urban-rural rates, in italics, which represent the five-year period before the survey. 'Skilled provider includes doctor, nurse, and midwife. 'Fully vaccinated against basic antigens includes BCG, three doses of DPT-containing vaccine, three doses of DPT-containing vaccine, three doses of polio vaccine, and one dose of measles-rubella. ⁵Fully vaccinated according to the national schedule includes BCG, three doses of DPT-containing vaccine, three doses of polio vaccine, one dose of measles-rubella, one dose of hepatitis B vaccine (given at birth), a dose of inactivated polio vaccine, three doses of hepatitis B and Haemophilus influenzae type b (usually given as part of diphtheria-containing vaccine), and three doses of the pneumococcal vaccine. ⁵Fed a minimum acceptable diet during the day or night before the survey is being fed a minimum dietary diversity, a minimum

Region								
National Capital Region	Cordillera Admin. Region	llocos	Cagayan Valley	Central Luzon	CALABARZON	MIMAROPA	Bicol	
1.2	2.1	1.9	2.1	1.9	1.8	2.4	2.2	
a	24.1	23.6	22.5	23.5	23.6	22.3	22.8	
3	6	2	6	8	5	5	2	
54	56	65	68	61	57	60	65	
38	43	43	58	41	37	45	39	
59	59	57	78	58	53	62	51	
6	10	19	8	11	14	15	13	
8	10	29	8	21	19	19	14	
10	13	39	11	23	26	27	25	
93	93	98	94	97	94	77	92	
96	99	98	96	98	96	80	93	
66	84	76	90	78	87	74	81	
57	66	70	78	66	82	43	72	
81	91	93	84	72	78	84	85	
33	46	33	51	52	32	41	35	
68	74	81	82	78	81	60	72	
99	94	>99	99	>99	99	96	93	
82	82	82	81	89	92	79 79	73 79	
UZ.	02	02	01	07	72	,,	,,	
84	92	89	88	91	85	86	77	
22	28	21	34	29	25	36	34	
71	57	53	55	68	68	54	65	
8	8	15	12	14	12	14	19	
ŏ	ŏ	15	12	14	12	14	19	
8	12	16	11	11	9	18	19	
79	79	71	74	78	69	73	76	
82	67	64	42	68	58	32	53	
UZ.	07	01	12	00	30	32	33	
17	7	4	6	13	12	7	6	
3	2	1	1	2	4	2	2	
11	31	30	34	23	15	35	27	
50	26	13	23	26	19	22	11	
11	21	16	23	18	13	20	13	
54	54	34	43	41	47	28	30	

meal frequency, and a minimum milk feeding frequency. ⁷Based on mother's recall. Iron-containing supplements include tablets, syrup, and micronutrient. ⁸At least basic sanitation service: safely managed and basic sanitation services. ⁷Women participate in household decisions if they make all 3 of the following decisions alone or jointly with their husband: 1) their own health care, 2) major household purchases, and 3) visits to their family or relatives. ¹⁹Whether emotional, physical, or sexual violence. ¹¹A sign or symptom of TB includes: cough or fever for two or more weeks, chest/back pain, blood in sputum, or night sweats. ¹²Because respondents could provide multiple responses, some respondents with correct responses may have also cited incorrect responses. ¹³Fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea. a = Omitted because less than 50% of women had a birth before reaching the beginning of the age group

INDICATORS

	Region		
Fertility	Western Visayas	Central Visayas	
Total Fertility Rate (number of children per woman)	2.2	2.0	
Median age at first birth women age 25-49 (years)	23.9	23.2	
Women age 15-19 who have ever been pregnant¹ (%)	7	5	
Family Planning (among married women age 15-49)			
Current use of any method of family planning (%)	60	61	
Current use of a modern method of family planning (%)	43	45	
Demand satisfied by modern methods of family planning (%)	56	61	
Infant and Child Mortality (deaths per 1,000 live births) ²			
Neonatal mortality	13	12	
Infant mortality	18	21	
Under-five mortality	21	26	
Maternal and Newborn Health Care			
Live births delivered in a health facility (%)	93	95	
Live births assisted by a skilled provider ³ (%)	94	93	
Child Health (among children age 12-23 months)			
Children who are fully vaccinated against all basic antigens4 (%)	78	78	
Children who are fully vaccinated according to the national schedule ⁵ (%)	63	53	
Nutrition			
Children born in the last 2 years who were ever breastfed (%)	93	83	
Children age 6-23 months living with their mother fed a minimum acceptable diet ⁶ (%)	19	40	
Children age 6-59 months who were given iron-containing supplements in last 12 months (%)	77	75	
Household Water, Sanitation, and Hygiene			
Household population with access to at least basic drinking water service (%)	98	98	
Household population with access to at least basic sanitation service ⁸ (%)	85	80	
Women's Empowerment			
Married women age 15-49 who participate in household decisions (%)	80	86	
Women age 15-49 who own a house either alone or jointly (%)	29	25	
Women age 15-49 who have and use a bank account or used a mobile phone for financial transactions in the last 12 months $(\%)$	44	57	
Domestic Violence			
Women age 15-49 who have experienced physical violence since age 15 (%)	13	14	
Women age 15-49 who have ever had a husband or intimate partner who have experienced violence by any husband/intimate partner in the last 12 months (%)	12	14	
Health Care Utilization and Financing			
Population with any health insurance	70	65	
Households in which any household members availed any health programs initiated by local government units in the past 30 days (%)	58	70	
HIV Knowledge, Attitudes, and Behavior			
Women age 15-49 who ever tested for HIV and received the results (%)	8	12	
Women age 15-49 who were tested for HIV in the last 12 months and received the results (%)	2	2	
Chronic and Other Infectious Diseases			
Household respondents who have ever had any sign or symptom of TB ¹¹ (%)	32	42	
Household respondents who correctly identify the cause of TB as microbes/germs/bacteria 12 (%)	25	21	
Household respondents who have experienced COVID-19 symptoms since January 2020 (%)	15	23	
Household respondents with COVID-19 symptoms who sought consultation or treatment ¹³ (%)	31	22	

Note: Figures in parentheses are based on 25–49 unweighted cases. 'Women age 15-19 who have ever had a live birth, pregnancy loss (stillbirth, miscarriage, abortion), or are currently pregnant. 'Figures are for the ten-year period before the survey except for the national and urban-rural rates, in italics, which represent the five-year period before the survey. 'Skilled provider includes doctor, nurse, and midwife. 'Fully vaccinated against basic antigens includes BCG, three doses of DPT-containing vaccine, three doses of DPT-containing vaccine, three doses of polio vaccine, and one dose of measles-rubella. 'Fully vaccinated according to the national schedule includes BCG, three doses of DPT-containing vaccine, three doses of polio vaccine, one dose of measles-rubella, one dose of inactivated polio vaccine, three doses of hepatitis B and Haemophilus influenzae type b (usually given as part of diphtheria-containing vaccine), and three doses of the pneumococcal vaccine. 'Fed a minimum acceptable diet during the day or night before the survey is being fed a minimum dietary diversity, a minimum

	Region							
Eastern Visayas	Zamboanga Peninsula	Northern Mindanao	Davao	SOCCSKSARGEN	Caraga	BARMM		
2.0	2.6	2.1	1.8	2.5	2.3	3.1		
23.2	22.6	22.8	23.1	22.7	22.9	23.2		
5	7	11	8	4	8	7		
66	56	58	63	55	58	35		
43	48	50	50	46	48	21		
56	68	70	69	69	67	37		
14	13	8	7	17	7	8		
18	27	12	12	24	8	20		
27	34	19	13	29	14	28		
90	76	93	91	82	91	39		
92	76	94	91	83	92	42		
90	66	77	60	61	64	18		
55	60	57	54	47	50	15		
90	89	95	93	89	92	89		
30	39	50	41	45	44	23		
83	60	81	74	64	80	51		
96	89	99	97	96	97	80		
82	77	86	81	75	89	55		
02	77	80	01	73	07	33		
88	82	77	86	87	82	83		
27	40	36	32	37	39	58		
56	40	37	51	36	50	14		
13	17	12	19	10	16	3		
13	17	12	17	10	16	3		
17	17	10	16	9	15	4		
66	69	69	81	75	80	42		
58	64	77	65	58	69	64		
8	4	2	7	4	7	<1		
1	1	1	1	1	2	<1		
30	38	22	41	33	41	12		
26	18	34	13	19	19	50		
19	22	19	19	14	16	9		
29	16	26	26	35	35	27		

meal frequency, and a minimum milk feeding frequency. ⁷Based on mother's recall. Iron-containing supplements include tablets, syrup, and micronutrient. ⁸At least basic sanitation service: safely managed and basic sanitation services. ⁷Women participate in household decisions if they make all 3 of the following decisions alone or jointly with their husband: 1) their own health care, 2) major household purchases, and 3) visits to their family or relatives. ¹⁹Whether emotional, physical, or sexual violence. ¹¹A sign or symptom of TB includes: cough or fever for two or more weeks, chest/back pain, blood in sputum, or night sweats. ¹² Because respondents could provide multiple responses, some respondents with correct responses may have also cited incorrect responses. ¹³Fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.

