

Are Health Services Reaching Filipinos Living in Slums?

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Based on NDHS 2013 Secondary Analysis 1: A Look into Urban Health Inequality in the Philippines
by Nel Jason Haw, Jhanna Uy and Ricci Rodriguez

SERVICE DELIVERY

KEY FINDINGS

- ✓ Inequalities in urban areas are not yet well studied in the Philippines.
- ✓ Health outcomes of Filipinos living in urban slums are worse than those living in non-slums, and sometimes worse than those living in rural areas.
- ✓ Service delivery indicators such as antenatal care visits, facility-based delivery, and immunization also demonstrate such inequalities.

METHODOLOGY

- Secondary data from the National Demographic and Health Survey (NDHS) of 2013 was used.
- Respondents were classified according to the UN definition of slum.

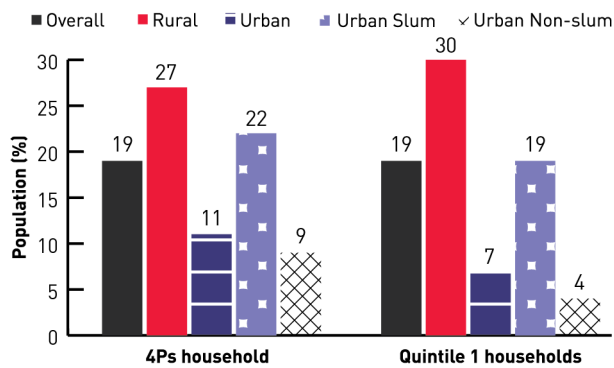
UN-HABITAT defines a slum household as a group of individuals living under the same roof in an urban area who lack one or more of the following:

1. Durable housing of a permanent nature that protects against extreme climate conditions.
2. Sufficient living space which means not more than three people sharing the same room.
3. Easy access to safe water in sufficient amounts at an affordable price.
4. Access to adequate sanitation in the form of a private or public toilet shared by a reasonable number of people.
5. Security of tenure that prevents forced evictions.

RESULTS

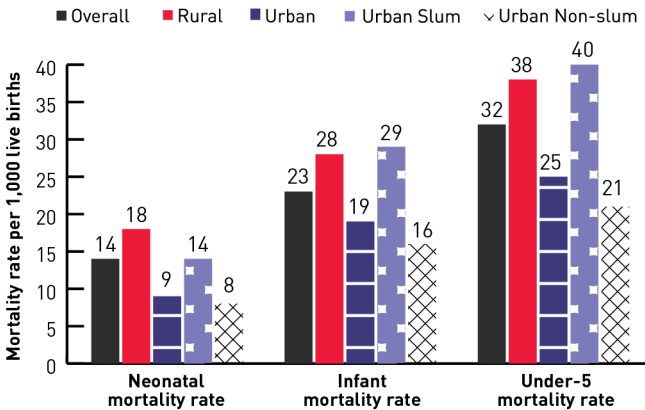
- A total of 6,521 households with 30,201 members were included in the analysis using secondary data from NDHS of 2013.
- The proportion of poor households between urban slums and rural areas are similar, significantly greater than those in urban non-slums (Figure 1)

Figure 1. Measures of poverty by type of residence



- While aggregate child mortality rates are seemingly better in urban than rural areas, urban slum areas have equally worse or worse off mortality rates across the five years of life than rural areas (Figure 2)

Figure 2. Mortality rate by type of residence among live births



- Inequalities are not only apparent in health outcomes such as mortality rates, but also in service utilization and social determinants of health. There were noted significant differences in service utilization on antenatal care visits, facility-based delivery, and immunization of children (Figure 3). The inequalities also exist in social determinants like poverty, education, and Philhealth membership (Figure 4).

Figure 3. Key service utilization indicators for maternal and child health

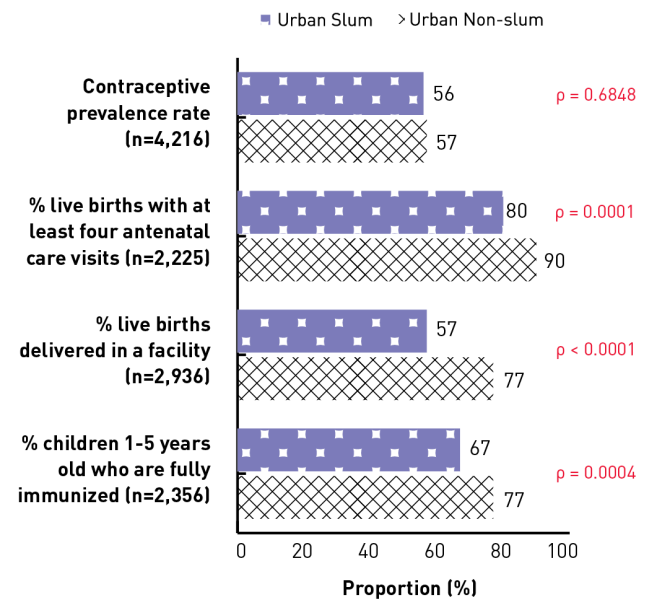
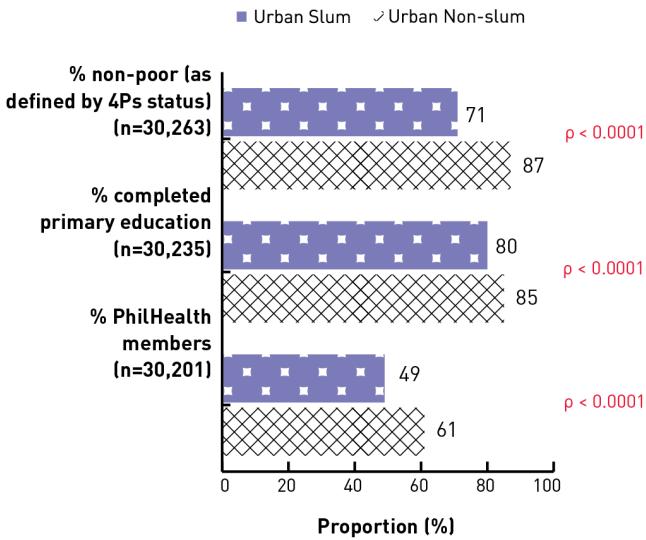
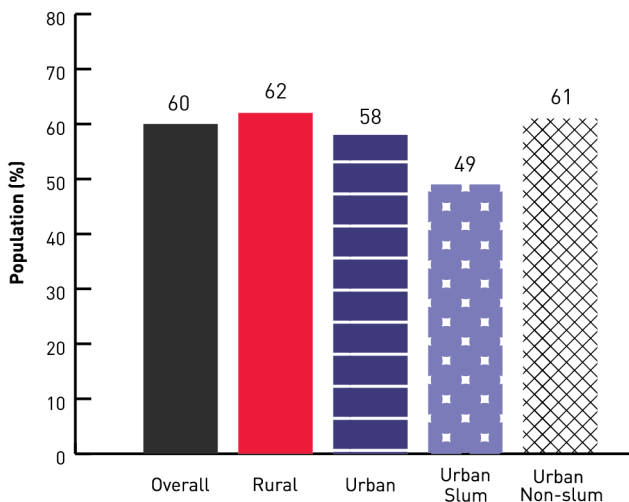


Figure 4. Other key health indicators



While Philhealth enrollment is similar between urban and rural areas in general, urban slums have significantly lower rates (Figure 5)

Figure 5. Proportion of self-reporting PhilHealth members by type of residence



RECOMMENDATIONS

1. Generate more data on barriers to accessing care. Consider establishing **health and demographic surveillance systems** for urban slums, and enable disaggregation of national surveys.
2. Engage other government agencies to address the inequities of **social determinants**, which greatly impact health outcomes.

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operationalizes F1+ for Health's commitment to instill a culture of research and strengthen internal analytic capacity in the Department of Health and build health policy systems research capacity within the sector.

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