## Population Trends Philippines


U.S. Department of Commerce Economics and Statistics Administration bureau of the census

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"The impact of the high rate of population growth is intricately linked to the welfare and sustainable development for a country like the Philippines, where poverty drives millions of people to overexploit their resource base, in the process sacrificing the future to meet the needs of the present."

Philippines Commission on Population

In its report to the 1994 International Conference on Population and Development (ICPD), the Philippines Commission on Population sets out the rationale for the government's continued concern with and attention to reproductive health; the status of women; and the interrelationships linking population, resources, environment, and development. The ICPD document also refers to the past quarter century of slow decline in
population growth and warns of a "long, arduous road to a demographic transition" ahead.

The Philippines has experienced declines in fertility, mortality, and natural increase since the inception of the government's formal population program in 1969. But improvements in health and vital rates have not been as rapid as some might have expected. The mean number of children born to a Filipino woman during her reproductive years (the total fertility rate, or TFR) fell from 5.8 in 1970 to 4.1 in 1990 and to an estimated 3.8 children in 1995. Life expectancy at birth (both sexes combined) rose from 55.7 to 64.3 years over the 1970-1990 period and is presently estimated to be about 66 years. The crude rate of natural increase, a function of the difference between annual births and

Figure 1.
Population of the Philippines by Age and Sex: 1995 and 2020

deaths, has declined slowly, from 3 percent per annum in 1970 to 2.8 percent in 1980 to around 2.3 percent in 1990. Natural increase remains at about 2.3 percent in 1995.

Current levels of these variables are very close to the median values for all countries in the region. However, Thailand, Burma, and Vietnam - the three other countries in the region with comparably sized populations - have lower rates of natural increase and total fertility. The same is true of the Philippines' much larger neighbor to the south, Indonesia.

## Population Growth and Population Change

If present trends continue, the population of the Philippines will increase from its current 73 million persons to some 81 million by the turn of the century and to about 113 million by the year 2020 (table 1). The Philippines' population will grow somewhat older, largely as a result of falling fertility. During the next 25 years, both the working age population and the number of women of childbearing age will grow more rapidly and will become larger proportions of the total than in the past (figure 1).

## Reproductive Health and Contraceptive Use

One of the challenges facing the Philippines during the next 25 years derives in part from the future growth in the number of women of reproductive ages (15-49) - the number rises from 18 million in 1995 to 30 million in the year 2020. If the government
were to provide only the same level of reproductive health services to women in 2020 that it now provides, its budget for these services would need to increase by more than 60 percent over the coming 25 years.

In addition, current proportions of births that are high risk births and unmet demand for family planning services suggest a need for attaching even greater priority to reproductive health. According to the report of the 1993 National Demographic Survey (NDS), 62 percent of births in the Philippines are high risk; i.e., mothers younger than 18 or older than 34 years of age, birth order greater than 3, or birth interval under 24 months.

Although family planning prevalence has doubled, rising from around 20 percent in 1970 to 40 percent of married women of reproductive age in 1993, and use of modern methods of contraception has gained steadily during the 1980's and early 1990's (modern method usage rose from about 15.5 percent of married women of reproductive age in 1980 to 24.9 percent in 1990, table 2), there remains a substantial unmet need. Seventy percent of married women ages 15-49 say they want to limit or space future births (figure 2), but only two-thirds of this implicit demand for family planning services is currently being satisfied. The remaining 26 percent of currently married women - about 2.5 million women - have an unmet need for family planning. About half of this group (or 1.3 million women, most of them over age 25) want to limit further births; the others, mostly younger, want to space births.

Unmet need is highest among rural and less educated women. These are the populations with the highest fertility, the greatest discrepancy between TFR and "wanted fertility" (the level of fertility that would result if all unwanted births were prevented), and the

Figure 2.
Fertility Preferences of Currently Married Women
Ages 15-49: 1993


Figure 3.
Total Fertility - Wanted and
Unwanted - by Education and
Place of Residence: 1991
Wanted fertility Unwanted fertility

lowest levels of contraceptive use (figures 3 and 4).

If the demand for family planning in the Philippines is to be fully met and fertility levels are to continue to fall, contraceptive prevalence must rise, regardless of future method mix or trends in other proximate determinants of fertility. Under a scenario in which method mix, proportion of women of reproductive age who are married, and other proximate determinants of fertility are held constant, more than three times as many couples will need family planning services in the year 2020 as in 1995 if fertility is to fall to a level of around 2.5 children per woman by that year
(figure 5, based on Bongaarts' model for decomposing TFR).

Existing residential and educational differentials in contraceptive use, together with ongoing trends in urbanization and female educational attainment, suggest that demand for family planning services will continue to grow.

- The Filipino population is one of the most highly educated in the developing world and, indeed, supplies skilled manpower to other countries in East and Southeast Asia, the Middle East, and North America. Secondary level enrollment ratios have

Figure 4.

Contraceptive Prevalence and Unmet Need by Education and Place of Residence: 1993

Unmet need for limiting
Unmet need for spacing
Current contraceptive use, all methods


Figure 5.
Projected Number of Married Women Ages 15-49 Using Contraception, Alternative Scenarios


Note: Values in figure 5 were calculated using Bongaarts' aggregate model, assuming 1993 values for proximate determinants other than contraception, a constant method mix, and TARGET-COST program default values for methods. Data are from the 1993 NDS and table 1 on next page.
been well above those of other countries for years: they rose from about 56 percent in 1975 to 73 percent in 1990 (combined sexes data from World Bank 1978, 1993). Twenty-three percent of married women of reproductive age interviewed as part of the 1993 NDS had attended college.

- Urbanization in the Philippines has been rapid, and this process is expected to continue in
the future. In 1970, one-third of the population was urban (UN 1993). Currently, 52 percent (or about 38 million people) live in urban areas. In 2020, 82 million people (or more than the number of persons in the entire country in 1990) are projected to be living in urban areas.
It should not be assumed that unwanted fertility will be eliminated, or that the requisite level of contraceptive prevalence
needed to bring about further declines in overall fertility will be achieved in the Philippines, in the absence of a strong family planning program effort.

Contraceptive prevalence is currently lower in the Philippines than in any other country in Southeast Asia for which data are available. The leadership and commitment of resources by the government of the Philippines, which currently provides over 70 percent of modern contraceptive services, will be critical to the country's ability to complete its demographic transition.

## References

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IPC collects, assesses, and analyzes population and related statistics from all countries. Based on these data, IPC produces the demographic estimates and projections used in this series of reports. This report, written by Tom McDevitt and Vera Harris-Bourne, was prepared with the support of the U.S. Agency for International Development. More detailed information is available from the Chief, InternationalPrograms Center, U.S. Bureau of the Census, Washington, DC 20233-8860.

Table 1.
Population Indicators for Philippines: 1980 to 2020
(Population in thousands)

| Indicator | 1980 | 1990 | 1995 | 2000 | 2020 |
| :--- | :--- | :--- | :--- | :--- | :--- |


| POPULATION |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Total country | 51,092 | 65,036 | 72,859 | 80,961 | 93 |
| Urban. | 20,028 | 31,159 | 38,142 | 45,953 | 82,203 |
| Rural | 31,064 | 33,877 | 34,717 | 35,008 | 30,760 |
| Male, total country |  |  |  |  |  |
| All ages | 25,414 | 32,350 | 36,243 | 40,305 | 56,319 |
| 0 to 14 | 10,956 | 13,198 | 14,295 | 15,245 | 16,944 |
| 6 to 12 | 4,824 | 5,949 | 6,338 | 6,997 | 7,829 |
| 13 to 18. | 3,415 | 4,455 | 4,935 | 5,248 | 6,495 |
| 15 to 44 | 11,009 | 14,711 | 16,857 | 19,054 | 27,555 |
| 15 to 49 | 11,893 | 15,877 | 18,210 | 20,714 | 30,625 |
| 15 to 64. | 13,633 | 18,121 | 20,812 | 23,752 | 36,709 |
|  | 825 | 1,031 | 1,136 | 1,308 | 2,666 |

Female, total country


LIFE EXPECTANCY AT BIRTH (years)

| Both sexes . | 62.3 | 64.3 | 65.7 | 66.8 | 70.8 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Male | 60.0 | 61.3 | 62.9 | 64.0 | 68.0 |
|  | 64.7 | 67.5 | 68.6 | 69.7 | 73.8 |

INFANT MORTALITY RATE (per 1,000 births)

| Both sexes | 56.9 | 41.0 | 36.6 | 33.2 | 22.4 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Male . | 64.6 | 46.6 | 40.8 | 37.2 | 25.3 |
|  | 48.8 | 35.2 | 32.1 | 29.1 | 19.4 |

MATERNAL MORTALITY RATIO (per 100,000 births)
For period 1987-1993 .......... 209
Sources: U.S. Bureau of the Census, International Programs Center, International Data Base; National Statistics Office and Macro International, 1994, 1993 National Demographic Survey.

Note: Dependency ratio is the number of persons under age 15 and age 65 and over per 100 persons ages 15 to 64 years.

Table 2.
Contraceptive Prevalence Among Currently Married Women 15 to 49 Years of Age by Method: Selected Years

| Method | Percent of married women of reproductive age |  |  | Percent distributionof users |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 1980 | 1988 | 1993 | 1980 | 1988 | 1993 |
| All methods | 45.4 | 36.2 | 40.0 | 100 | 100 | 100 |
| Pill | 5.0 | 6.9 | 8.5 | 11 | 19 | 21 |
| Condom | 1.8 | 0.7 | 1.0 | 4 | 2 | 3 |
| IUD | 1.8 | 2.4 | 3.0 | 4 | 7 | 8 |
| Female sterilization | 6.5 | 11.0 | 11.9 | 14 | 30 | 30 |
| Male sterilization... | 0.4 | 0.4 | 0.4 | 1 | 1 | 1 |
| Other modern | (NA) | 0.2 | 0.1 | - | 1 | 0 |
| Traditional | 29.9 | 14.5 | 15.1 | 66 | 40 | 38 |
| CHILDLESS WOMEN: 1993 |  |  |  |  |  |  |
| Percent of currently age 45 to 49 . | married | omen |  |  |  | 8.5 |

## AVERAGE DURATION OF POSTPARTUM INFECUNDABILITY: 1993

Number of months. ................................................ 8.8
Sources: 1993 NDS and U.S. Bureau of the Census, 1995, unpublished tables.

Table 3.
Average Age of Users of Selected Methods: 1993
(Currently married women age 15 to 49 years)

| Method | Average age |
| :---: | :---: |
| Pill | 30.0 |
| IUD. | 32.0 |
| Injection. | 31.8 |
| Sterilization. | 38.2 |
| Periodic abstinence. | 34.3 |
| Withdrawal | 33.3 |

Note: Calculated at the U.S. Bureau of the Census using the 1993 NDS data on contraceptive prevalence by age.

Table 4.
Fertility Rates (per 1,000 women)

| Age | 1980 | 1987 | 1991 |
| :---: | :---: | :---: | :---: |
| 15 to 19 | 51 | 51 | 50 |
| 20 to 24 | 213 | 183 | 190 |
| 25 to 29 | 254 | 212 | 217 |
| 30 to 34 | 220 | 199 | 181 |
| 35 to 39 | 164 | 138 | 120 |
| 40 to 44 | 76 | 55 | 51 |
| 45 to 49 | 14 | 10 | 8 |
| Total fertility rate p | 5.0 | 4.2 | 4.1 |

Sources: U.S. Bureau of the Census, International Programs Center, International Data Base; 1988 NDS; and 1993 NDS.

