

FAMILY HEALTH AND HEALTH OF SPECIAL POPULATIONS

The basic unit of Philippine society is the family. In Filipino culture, this is made up of the husband, wife, children and the extended family, including both the families of the husband and the wife. The family is the first emotional and social support mechanism, the first provider of education and the first health care giver. Traditionally, the role of economic provider rests on the husband. The responsibility for the care and discipline of children rests mainly on the mother, but increasingly the father takes his share. The love, care and guidance provided by both are crucial for the children's healthy development.

Typical in this setting is the tradition of families caring for their elderly. The Filipino value of *utang na loob* or gratitude, includes expectations that parents will live with their children when old age comes. From the point of view of the elderly, this living arrangement may realize their expected benefits from having children. With urbanization and industrialization, an emerging issue is how long this family arrangement for the aged will continue to be practiced.

Demographic, social and economic changes have brought variations in family composition and structure. There are more challenges that create stressful situations affecting the family's ability to nurture and care, especially of the children. One emerging variation in family composition and structure is the solo-parent family that is made up of one parent and his or her child or children. Majority of solo parents is female. A solo parent may be a widow or widower and his or her children, a single woman and her natural child, or a mistress and her children by a married man. There are also temporary solo parents, mostly wives whose husbands are abroad or elsewhere.

Rapid urbanization and migration, high unemployment rate, continuing peace and order instability, natural disasters and overseas employment have contributed to family disorganization and instability. This is seen in the reported increase in juvenile crimes, street children, substance abuse, prostitution and family violence involving children and women as victims. There is a need for a wide range of programs to help families discharge their economic and social functions and cope with the pressures imposed on them by the rapid socioeconomic change.

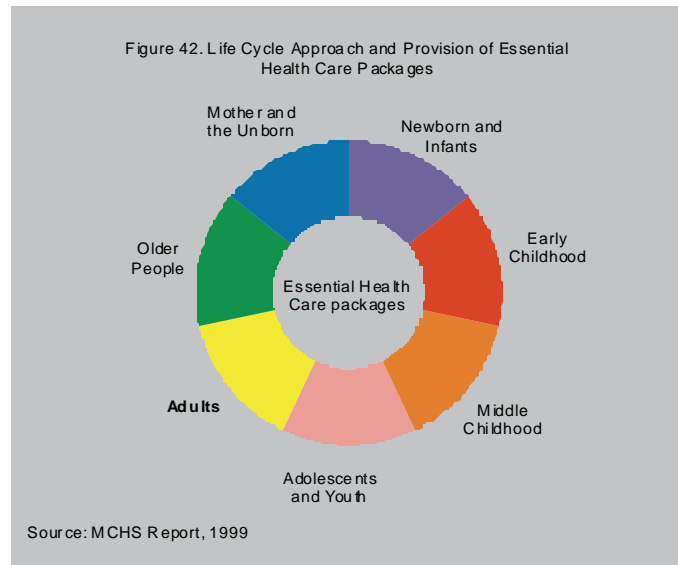
The 1998 NDHS showed some characteristics of the household. These are considered indicators of health and socioeconomic conditions. On the average, a household is composed of five persons. The heads of families and households are mostly male. Women-headed households make up about 15 percent. Education is highly valued by Filipino families.

Seven out of 10 households have electricity. Almost half have piped water, mostly in urban areas. In rural areas, wells and springs are among the main sources of water. Majority of households has either a flush toilet or a closed pit latrine. Large proportions (17 percent) of rural households have no toilet facilities. Households with television and radio make up about 80 percent and 56 percent respectively.

Majority of the women in the households works. One out of three women who work has one or more children under six years old. Three out of 10 take care of their children while they work. Relatives are also common caregivers for children.

The programmatic approach to family health uses the life cycle approach, which covers the several stages of life from the womb to being a newborn, infant, preschooler, child, adolescent, adult and the older person.

At each stage, a minimum package of services should be made available to ensure the state of well-being of the family. One factor that should be stressed is the vital role of the family in the full spectrum of child development. Also steps should be taken to



alleviate socio-psychological concerns which give rise to special categories of population.

Special targets are set for the special groups of population that include: children in need of special protection, women in difficult circumstances, migrant workers, persons with disabilities, rural and urban poor and indigenous peoples.

Tackling health issues of these groups require more focused preventive efforts and understanding of their needs and differences that set them apart from the mainstream. The two major health challenges are to build better data systems to get a better profile of their health status and to translate these data into strategies and intervention and packages of health services that will reach out to these groups. Issues affecting the enjoyment of the rights of these vulnerable sectors are growing. The protection of these rights, the most basic of which is the right to life and health, is important to meet their full potential, development and productivity.

**Table 15. Essential Health Care Packages
at Various Stages of Life**

Mothers and Unborn	Newborns and Infants	Early Childhood
<ul style="list-style-type: none"> ● Antenatal registration ● Tetanus toxoid immunization ● Nutrition (including vitamin A, iron, folate supplementation) ● Treatment of existing conditions or diseases ● Recognition, early detection and management of complications before, during and after pregnancy ● Clean and safe delivery ● Promotion and support to breastfeeding and management of breast complications ● Information services for family planning ● STD/HIV prevention and management ● Dental care 	<ul style="list-style-type: none"> ● Resuscitation ● Routine eye prophylaxis ● Prevention and management of hypothermia ● Newborn screening ● Immediate and exclusive breastfeeding ● Complementary feeding at six months ● Prevention and management of infection ● Birth registration ● Birth weight and growth monitoring and promotion ● Full immunization ● Micronutrient supplementation ● Dental care ● Developmental milestone screening ● Advice on psychosocial stimulation 	<ul style="list-style-type: none"> ● Growth monitoring and promotion ● Nutritional screening ● Micronutrient supplementation ● Developmental milestone screening ● Disability detection ● Management of common childhood illness ● Dental care ● Counseling on accident prevention and use of safe toys and psychosocial stimulation ● First aid

Source: DOH

**Table 16. Essential Health Care Packages
at Various Stages of Life**

Middle Childhood	Adolescence and Youth	Adults	Older People
<ul style="list-style-type: none"> ● Integrated management of childhood illness ● Accident prevention ● Nutrition and diet counseling ● Dental care 	<ul style="list-style-type: none"> ● Management of illness ● Counseling on substance abuse, sexuality and reproductive tract infections ● Nutrition and diet counseling ● Mental health ● Family planning and responsible sexual behavior 	<ul style="list-style-type: none"> ● Nutrition and diet counseling ● Screening and management of degenerative diseases ● Dental care ● Counseling on substance abuse ● Family planning and responsible sexual behavior ● Reproductive health ● Mental health 	<ul style="list-style-type: none"> ● Nutrition and diet counseling ● Dental care ● Post-reproductive care ● Screening and management of chronic debilitating and infectious diseases ● Counseling on substance abuse ● Mental health

Source: DOH