

## Health

### Health Facilities and Services

Health service delivery in Cavite covers the entire range of health interventions with varying degrees of emphasis at different health care levels. Hospitals are mainly classified as general hospitals, which provide services for all kinds of illnesses, diseases, injuries, or deformities. These hospitals have emergency and outpatient services, primary care services, family medicine, pediatrics, internal medicine, obstetrics-gynecology, surgery with diagnostic and laboratory services, imaging facility, and pharmacy. Based on DOH Administrative Order No. 2010-0012, hospitals are further categorized as:

- **Level I hospitals** - emergency hospitals that provide initial care and management to patients requiring immediate treatment and primary care on prevalent diseases in the locality. It includes isolation facilities, maternity, dental clinics, 1<sup>st</sup> level x-ray, secondary clinical laboratories with a consulting pathologist, blood stations, and a pharmacy.
- **Level II hospitals** - general hospitals that include Level I services and departmentalized clinical services, respiratory units, ICU, HICU and HRP, high-risk pregnancy units, tertiary clinical laboratories, and 2<sup>nd</sup> level x-rays.
- **Level III hospitals** - general hospitals that include Level II services and teaching/training, physical medicine and rehabilitation, ambulatory surgery, dialysis, tertiary laboratory, blood bank, and 3<sup>rd</sup> level x-ray.

Additionally, the provincial government budget funds the provincial hospitals, while the municipal/city government budget finances the municipal/city hospitals. Management and financial parameters are determined primarily by the local chief executive and, in varying levels of influence and technical leadership of the respective provincial/city/municipal health officer or chief of hospital.

Cavite has a total of 56 licensed hospitals, wherein 44 hospitals are privately owned while 12 hospitals are government-operated. As of 2019, Cavite has 32 Level I general hospitals, 20 Level II hospitals, and three Level III hospitals. The Level III hospitals are De La Salle University Medical Center and St. Paul Hospital Cavite Inc., both located in the City of Dasmariñas, and General Emilio Aguinaldo Memorial Hospital, a government hospital in Trece Martires City. Moreover, one hospital in Cavite, the CarSIGMA District Hospital in General Mariano Alvarez, falls under the infirmary category. Further, it is notable that there are no hospitals in the municipalities of Amadeo, Indang, General Emilio Aguinaldo, Mendez, Ternate, and Magallanes.

The Korea-Philippines Friendship Hospital, which has been operational since 1999, is treated as an annex to GEAMH, although it operates as semi-private in terms of hospital services.

The province is also home to the regional hospital for mentally ill patients. The Regional Center for Mental Health, located in Trece Martires City, has been called as Cavite Center for Mental Health (CCMH) since its devolution to the province in 1993.

The Provincial Health Office also initiated the establishment of district hospitals. The health system in these hospitals delivers comprehensive, high quality, accessible, affordable, effective, efficient, and sustainable services to the Caviteños.

Augmenting the health care services of the existing hospitals are the 47 health centers and 523 barangay health stations (BHS) located all over the province. Health Centers are created for every city and municipality to improve access to primary health care facilities and services in the barangay. Health centers are categorized as main health centers, city health centers, and rural health units. Health centers are managed thru their city/municipal health officers and staffed with doctors, nurses, midwives, medical technologists, sanitary inspectors, nutritionists, and volunteer health workers. The basic health services delivered include medical consultation services, treatments of minor ailments, maternal and child health care, dental health, nutrition, the dispensation of drugs and medicines, on calls and attendance at home, immunization and conduct of health education, family planning, sanitation campaign, and other related activities. On the other hand, the barangay health station (BHS) is the primary health care facility at the barangay level. BHS provides first aid, maternal and child health care, diagnosis of social diseases, and other basic health services to all the members of the community it is serving. It is commonly staffed with rural health midwives, barangay nutrition scholars, and barangay health workers, and they follow a schedule of medical services from Monday to Friday. Sometimes health centers schedule special medical projects or missions and conduct health education classes during weekends, especially when the DOH issues health warnings and epidemic cases.

### Hospital Bed – Population Ratio

One of the indicators in measuring health service accessibility of hospital and other related facilities is sufficient hospital beds. As a standard set by the Philippine Statistics Authority-National Statistics Coordination Board (PSA-NSCB), there should be one hospital bed per 1,000 population. De La Salle University Medical Center holds the highest bed capacity of 300 beds, followed by General Emilio Aguinaldo Memorial Hospital with a bed capacity of 284 beds. The hospitals in Cavite had a combined authorized bed capacity of 3,091 beds.

The bed population ratio stood at 0.71 hospital beds per 1,000 population using the 2020 total population. The 1<sup>st</sup> and 4<sup>th</sup> District has reached the standard requirement of hospital beds. In terms of cities and municipalities, Cavite City, Kawit, City of Dasmariñas, Trece Martires City, and Tagaytay City reached the standard requirement. Cavite City, with 2.79 hospital beds per 1,000 individuals with five hospitals, got the highest rate, followed by Trece Martires

City with 1.71 hospital beds per 1,000 individuals in the area. In general, the province has significantly insufficient hospital beds with an approximately 1,254 unmet bed needs to meet the 4,345 bed needs in 2020.

However, most of the hospital beds are from private hospitals, there is still an observed inadequacy of bed capacity and other health facilities in government hospitals due to the increasing number of patients from low income families who opt to avail medical and health care services. With this, the provincial government continuously exerts efforts to improve, upgrade, and acquire additional facilities for its public hospitals and health units. At present, the Provincial Health Office provides services in different areas in terms of health, mainly, services delivered during

COVID-19 response operations. The province implements tie-up programs with various non-government organizations and volunteer teams to reach out patients with special needs especially those belonging to the underprivileged families.

The location of the hospitals in the province is strategically located. Some municipalities may not have their own hospitals in the localities but are serviced by their neighboring towns considering their proximity. Barangay Health Stations and Rural Health Units are also present in every localities to provide immediate health services.

**Table 3.60 Number of Health Facilities by City/Municipality, Province of Cavite: 2019-2020**

City/Municipality	Hospitals				Health Centers		Number of Barangays	Barangay Health Stations	
	Government Hospitals		Private Hospitals		2019	2020		2019	2020
	2019	2020	2019	2020					
<b>1<sup>st</sup> District</b>	<b>3</b>	<b>3</b>	<b>7</b>	<b>8</b>	<b>9</b>		<b>143</b>	<b>44</b>	
Cavite City	2	2	3	3	5	6	84	0	0
Kawit	1	1	1	2	2	1	23	21	20
Noveleta	-	-	1	1	1	1	16	3	15
Rosario	-	-	2	2	1	1	20	20	20
<b>2<sup>nd</sup> District</b>	<b>1</b>	<b>1</b>	<b>8</b>	<b>8</b>	<b>7</b>		<b>73</b>	<b>59</b>	
City of Bacoor	1	1	8	8	7	7	73	59	59
<b>3<sup>rd</sup> District</b>	<b>-</b>	<b>-</b>	<b>4</b>	<b>4</b>	<b>3</b>		<b>97</b>	<b>39</b>	
City of Imus	-	-	4	4	3	7	97	39	49
<b>4<sup>th</sup> District</b>	<b>1</b>	<b>1</b>	<b>5</b>	<b>5</b>	<b>2</b>		<b>75</b>	<b>87</b>	
City of Dasmariñas	1	1	5	5	2	4	75	87	85
<b>5<sup>th</sup> District</b>	<b>2</b>	<b>2</b>	<b>8</b>	<b>8</b>	<b>5</b>		<b>105</b>	<b>108</b>	
Carmona	1	1	1	1	1	1	14	12	12
Gen. M. Alvarez	1	1	1	1	2	1	27	28	28
Silang	-	-	6	6	2	1	64	68	13 <sup>a</sup>
<b>6<sup>th</sup> District</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>4</b>	<b>2</b>		<b>33</b>	<b>39</b>	
City of Gen. Trias	1	1	4	4	2	3	33	39	48
<b>7<sup>th</sup> District</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>3</b>	<b>4</b>		<b>116</b>	<b>101</b>	
Amadeo	-	-	-	-	1	1	26	14	14
Indang	-	-	-	-	1	1	36	33	33
Tanza	-	-	2	2	1	1	41	37	40
Trece Martires City	1	1	1	1	1	2	13	17	16
<b>8<sup>th</sup> District</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>8</b>		<b>187</b>	<b>139</b>	
Alfonso	-	-	1	1	1	1	32	27	27
Gen. Emilio Aguinaldo	-	-	-	-	1	1	14	10	14
Magallanes	-	-	-	-	1	1	16	11	12
Maragondon	1	1	-	-	1	1	27	11	11
Mendez	-	-	-	-	1	1	24	17	0
Naic	1	1	2	2	1	1	30	27	32
Tagaytay City	1	1	1	1	1	1	34	34	0
Ternate	-	-	-	-	1	1	10	2	2
<b>CAVITE</b>	<b>12</b>	<b>12</b>	<b>43</b>	<b>44</b>	<b>40</b>	<b>47</b>	<b>829</b>	<b>616</b>	<b>523</b>

*a Bulihan, Silang only*

*Source: Provincial Health Office, Trece Martires City*

**Table 3.61 List of Licensed Hospitals and Bed Inventory by Classification, Province of Cavite: 2019-2020**

City/Municipality	Name of Hospital	Level	Authorized Bed Capacity	Hospital Bed to Population Ratio	Projected Bed Needs	Unmet Bed Needs
<b>1<sup>st</sup> District</b>				<b>1.47</b>	<b>368</b>	
<b>Cavite City</b>				<b>2.79</b>	<b>101</b>	
	Cavite Naval Hospital	I	100			
	Dra. Olivia Salamanca Memorial District Hospital	I	50			
	Bautista Hospital	II	60			
	A. De La Cruz Maternity Hospital	I	11			
	Cavite Medical Center	II	60			
<b>Kawit</b>				<b>1.57</b>	<b>108</b>	
	Kawit Kalayaan Hospital	I	25			
	Binakayan Hospital and Medical Center	II	100			

City/Municipality	Name of Hospital	Level	Authorized Bed Capacity	Hospital Bed to Population Ratio	Projected Bed Needs	Unmet Bed Needs
Noveleta	San Pedro Calungsod Medical Center	I	44	0.85	49	7
	St. Martin Maternity and Pediatric Hospital	I	42			
Rosario	E. Contreras Medical Clinic	II	24	0.44	111	62
	Our Savior Hospital, Inc.	II	25			
<b>2<sup>nd</sup> District</b>				<b>0.58</b>	<b>665</b>	<b>277</b>
<b>City of Bacoor</b>				<b>0.58</b>	<b>665</b>	<b>277</b>
	Bacoor District Hospital	I	10			
	Bacoor Doctors Medical Center	I	60			
	Crisostomo General Hospital	I	20			
	Metro South Medical Center	II	50			
	Molino Doctors Hospital	I	38			
	Prime Global Care Medical Center, Inc.	I	12			
	Southeast Asian Medical Center, Inc.	II	50			
	St. Dominic Medical Center, Inc.	II	100			
	YR - St. Michael Medical Hospital, Inc.	I	48			
<b>3<sup>rd</sup> District</b>				<b>0.44</b>	<b>497</b>	<b>277</b>
<b>City of Imus</b>				<b>0.44</b>	<b>497</b>	<b>277</b>
	Imus Family Hospital, Inc.	I	15			
	Medical Center Imus	II	90			
	Our Lady of the Pillar Medical Center	II	98			
	Paredes Primary Care Center	I	17			
<b>4<sup>th</sup> District</b>				<b>1.11</b>	<b>703</b>	
<b>City of Dasmariñas</b>				<b>1.11</b>	<b>703</b>	
	Asia Medic Family Hospital and Medical Center	II	50			
	Dasmariñas City Medical Center Inc.	II	60			
	De La Salle University Medical Center	III	300			
	Emilio Aguinaldo College Medical Center	II	154			
	St. Paul Hospital Cavite Inc.	III	100			
	Pagamutan Ng Dasmariñas	II	119			
<b>5<sup>th</sup> District</b>				<b>0.52</b>	<b>574</b>	<b>277</b>
<b>Carmona</b>				<b>0.81</b>	<b>106</b>	<b>20</b>
	Pagamutan Bayan ng Carmona	I	15			
	Carmona Hospital MC	II	71			
<b>General Mariano Alvarez</b>				<b>0.20</b>	<b>172</b>	<b>138</b>
	San Jose Hospital and Medical Center Inc.	I	15			
Silang	CarSIGMA District Hospital	Infirmary	19	0.60	296	119
	Estrella Hospital	I	20			
	St. Mazenod Hospital Inc.	I	12			
	Velazco Hospital	I	25			
	Silang Doctors Hospital	I	10			
	Adventist University Hospital	I	10			
	Silang Specialist Medical Center	II	100			
<b>6<sup>th</sup> District</b>				<b>0.51</b>	<b>451</b>	<b>222</b>
<b>City of General Trias</b>				<b>0.51</b>	<b>451</b>	<b>222</b>
	General Trias Medicare Hospital	I	10			
	Divine Grace Medical Center	II	50			
	General Trias Maternity and Pediatric Hospital	I	50			
	Gentri Doctors Medical Center Inc.	II	69			
	Gentri Medical Center and Hospital Inc.	II	50			
<b>7<sup>th</sup> District</b>				<b>0.65</b>	<b>633</b>	<b>222</b>
Amadeo				-	42	42
Indang				-	69	69

City/Municipality	Name of Hospital	Level	Authorized Bed Capacity	Hospital Bed to Population Ratio	Projected Bed Needs	Unmet Bed Needs
<b>Tanza</b>				<b>0.17</b>	<b>312</b>	<b>260</b>
	JNRAL Family Corporation	I	22			
	Tanza Family General Hospital	I	30			
<b>Trece Martires City</b>				<b>1.71</b>	<b>211</b>	
	General Emilio Aguinaldo Memorial Hospital	III	284			
	M.V Santiago Medical Center	I	75			
<b>8<sup>th</sup> District</b>				<b>0.49</b>	<b>454</b>	<b>232</b>
<b>Alfonso</b>				<b>0.34</b>	<b>59</b>	<b>39</b>
	DLS-Dr. Rodolfo Poblete Memorial Hospital	I	20			
<b>General Emilio Aguinaldo</b>				-	<b>24</b>	<b>24</b>
<b>Magallanes</b>				-	<b>24</b>	<b>24</b>
<b>Maragondon</b>				<b>0.25</b>	<b>41</b>	<b>31</b>
	Cavite Municipal Hospital	I	10			
<b>Mendez-Nuñez</b>				-	<b>35</b>	<b>35</b>
<b>Naic</b>				<b>0.56</b>	<b>161</b>	<b>71</b>
	Naic Doctors Hospital, Inc.	I	30			
	Naic Medicare	I	10			
	First Filipino Saint Hospital	I	50			
<b>Tagaytay City</b>				<b>1.20</b>	<b>85</b>	
	Tagaytay Hospital and Medical Center	II	90			
	Ospital ng Tagaytay	I	12			
<b>Ternate</b>				-	<b>25</b>	<b>25</b>
<b>CAVITE</b>			<b>3,091</b>	<b>0.71</b>	<b>4345</b>	<b>1254</b>

Source: Provincial Health Office, Trece Martires City

## Health Human Resources

Health human resources are the main drivers of the health care system and are essential for the efficient management and operation of the public health system. There are 73 doctors, 33 dentists, 396 nurses, and 344 midwives employed in the city/municipal health offices.

These resulted in the doctor-population ratio of 1:59,518 and the dentist-population ratio of 1:131,661. As observed, these figures are below the standard doctor-population ratio of 1:20,000 and the standard dentist-population ratio of 1:20,000. Nurses totaling to 396 personnel has led to a nurse-to-population ratio of 1:10,972, which is above the standard ratio of 1:20,000. Moreover, midwives had marked the ratio of 1:12,630 against the standard ratio of 1:5,000.

Based on the data, there is a need to increase the number of key health personnel in the province to provide necessary healthcare services to the people. Specifically, there is an approximate need of 144 doctors, 184 dentists, and 525 midwives to satisfy the standard ratio. The provincial government is resourcefully applying different

strategies to cope up with the increasing demands for various medical and health services. Through the Provincial Health Office, PGC implements tie-up programs with various non-government organizations and volunteer teams to reach outpatients with special needs, especially those belonging to the underprivileged families. However, private health personnel are not included in the computation of ratios.

Barangay Health Workers (BHWs) and Barangay Nutrition Scholars (BNS) are the front liners in providing the basic health and nutrition services in their communities. As of 2020, 3,479 BHWs and 961 BNS are employed in the barangay health centers in the province. Despite the great number of BHWs in the province, the standard ratio set by the Department of Health (DOH) of one BHW per 20 households in the barangay was not met.

In addition, there are 46 medical technologists, 11 nutritionists/dietitians, two sanitary engineers, and 64 sanitary inspectors.

Table 3.62 Number of Public Health Personnel and Ratio to Population by City/Municipality: 2020

City/Municipality	Doctors		Dentists		Nurses		Midwives		Barangay Health Workers	
	Number	Ratio	Number	Ratio	Number	Ratio	Number	Ratio	Number	Ratio
<b>1<sup>st</sup> District</b>	<b>15</b>	<b>1:24,565</b>	<b>7</b>	<b>1:52,638</b>	<b>52</b>	<b>1:7,086</b>	<b>53</b>	<b>1:6,952</b>	<b>351</b>	<b>1:287</b>
Cavite City	8	1:12,584	1	1:100,674	16	1:6,292	21	1:4,794	62	1:481
Kawit	1	1:107,535	2	1:53,768	11	1:9,776	9	1:11,948	104	1:231
Noveleta	3	1:16,484	1	1:49,452	10	1:4,945	6	1:8,242	40	1:334
Rosario	3	1:36,936	3	1:36,936	15	1:7,387	17	1:6,518	145	1:232
<b>2<sup>nd</sup> District</b>	<b>9</b>	<b>1:73,847</b>	<b>5</b>	<b>1:132,925</b>	<b>60</b>	<b>1:11,077</b>	<b>38</b>	<b>1:17,490</b>	<b>166</b>	<b>1:1,031</b>
City of Bacoor	9	1:73,847	5	1:132,925	60	1:11,077	38	1:17,490	166	1:1,031
<b>3<sup>rd</sup> District</b>	<b>5</b>	<b>1:99,359</b>	<b>6</b>	<b>1:82,799</b>	<b>24</b>	<b>1:20,700</b>	<b>48</b>	<b>1:10,350</b>	<b>72</b>	<b>1:1,553</b>
City of Imus	5	1:99,359	6	1:82,799	24	1:20,700	48	1:10,350	72	1:1,553

City/Municipality	Doctors		Dentists		Nurses		Midwives		Barangay Health Workers	
	Number	Ratio	Number	Ratio	Number	Ratio	Number	Ratio	Number	Ratio
<b>4<sup>th</sup> District</b>	<b>6</b>	<b>1:117,190</b>	<b>0</b>	<b>-</b>	<b>34</b>	<b>1:20,681</b>	<b>52</b>	<b>1:13,522</b>	<b>351</b>	<b>1:483</b>
City of Dasmariñas	6	1:117,190	0	-	34	1:20,681	52	1:13,522	351	1:483
<b>5<sup>th</sup> District</b>	<b>14</b>	<b>1:41,024</b>	<b>5</b>	<b>1:114,867</b>	<b>30</b>	<b>1:19,144</b>	<b>43</b>	<b>1:13,357</b>	<b>530</b>	<b>1:256</b>
Carmona	7	1:15,179	2	1:53,128	9	1:11,806	15	1:7,084	123	1:228
General M. Alvarez	2	1:86,217	1	1:172,433	12	1:14,369	20	1:8,622	110	1:363
Silang	5	1:59,129	2	1:147,822	9	1:32,849	8	1:36,956	297	1:228
<b>6<sup>th</sup> District</b>	<b>4</b>	<b>1:112,646</b>	<b>1</b>	<b>1:450,583</b>	<b>34</b>	<b>1:13,252</b>	<b>15</b>	<b>1:30,039</b>	<b>305</b>	<b>1:302</b>
City of General Trias	4	1:112,646	1	1:450,583	34	1:13,252	15	1:30,039	305	1:302
<b>7<sup>th</sup> District</b>	<b>8</b>	<b>1:79,152</b>	<b>2</b>	<b>1:316,610</b>	<b>70</b>	<b>1:9,046</b>	<b>39</b>	<b>1:16,236</b>	<b>506</b>	<b>1:258</b>
Amadeo	1	1:41,901	0	-	8	1:5,238	6	1:6,984	74	1:138
Indang	1	1:68,699	0	-	11	1:6,245	8	1:8,587	139	1:124
Tanza	5	1:62,423	1	1:312,116	29	1:10,763	13	1:24,009	220	1:284
Trece Martires City	1	1:210,503	1	1:210,503	22	1:9,568	12	1:17,542	73	1:555
<b>8<sup>th</sup> District</b>	<b>12</b>	<b>1:37,806</b>	<b>7</b>	<b>1:64,809</b>	<b>92</b>	<b>1:4,931</b>	<b>56</b>	<b>1:8,101</b>	<b>1198</b>	<b>1:81</b>
Alfonso	1	1:59,306	0	-	9	1:6,590	6	1:9,884	222	1:61
General E. Aguinaldo	1	1:23,973	0	-	5	1:4,795	5	1:4,795	127	1:40
Magallanes	1	1:23,851	1	1:23,851	1	1:23,851	6	1:3,975	93	1:59
Maragondon	1	1:40,687	1	1:40,687	9	1:4,521	6	1:6,781	300	1:32
Mendez	1	1:34,879	0	-	10	1:3,488	7	1:4,983	101	1:82
Naic	4	1:40,247	2	1:80,494	27	1:5,962	11	1:14,635	209	1:144
Tagaytay City	1	1:85,330	1	1:85,330	23	1:3,710	11	1:7,757	53	1:356
Ternate	2	1:12,327	2	1:12,327	8	1:3082	4	1:6,163	93	1:70
<b>CAVITE</b>	<b>73</b>	<b>1:59,518</b>	<b>33</b>	<b>1:131,661</b>	<b>396</b>	<b>1:10,972</b>	<b>344</b>	<b>1:12,630</b>	<b>3,479</b>	<b>1:290</b>

Source: Provincial Health Office, Trece Martires City

Table 3.63 Number of Other Public Health Personnel and Ratio to Population by City/Municipality: 2020

City/Municipality	Barangay Nutrition Scholars	Medical Technologists	Nutritionist/Dietitians	Sanitary Engineers	Sanitary Inspectors
<b>1<sup>st</sup> District</b>	<b>103</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>11</b>
Cavite City	35	2	0	0	5
Kawit	24	2	0	0	2
Noveleta	21	1	1	0	1
Rosario	23	1	0	0	3
<b>2<sup>nd</sup> District</b>	<b>77</b>	<b>6</b>	<b>3</b>	<b>0</b>	<b>5</b>
City of Bacoar	77	6	3	0	5
<b>3<sup>rd</sup> District</b>	<b>97</b>	<b>4</b>	<b>2</b>	<b>0</b>	<b>4</b>
City of Imus	97	4	2	0	4
<b>4<sup>th</sup> District</b>	<b>165</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>4</b>
City of Dasmariñas	165	3	1	1	4
<b>5<sup>th</sup> District</b>	<b>105</b>	<b>7</b>	<b>0</b>	<b>1</b>	<b>8</b>
Carmona	11	4	0	1	3
General Mariano Alvarez	29	2	0	0	1
Silang	65	1	0	0	4
<b>6<sup>th</sup> District</b>	<b>82</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>5</b>
City of General Trias	82	3	1	0	5
<b>7<sup>th</sup> District</b>	<b>144</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>10</b>
Amadeo	17	1	0	0	1
Indang	19	0	0	0	3
Tanza	67	2	1	0	3
Trece Martires City	41	2	2	0	3
<b>8<sup>th</sup> District</b>	<b>188</b>	<b>12</b>	<b>0</b>	<b>0</b>	<b>17</b>
Alfonso	32	2	0	0	3
General Emilio Aguinaldo	14	1	0	0	2
Magallanes	16	1	0	0	1
Maragondon	27	2	0	0	2
Mendez	23	1	0	0	1
Naic	26	2	0	0	5
Tagaytay City	40	2	0	0	2
Ternate	10	1	0	0	1
<b>CAVITE</b>	<b>961</b>	<b>46</b>	<b>11</b>	<b>2</b>	<b>64</b>

Source: Provincial Health Office, Trece Martires City

## Health Indicators

Health indicators provide information on the status of the well-being of the people. They help organizations, communities, and governments across the nation focus their resources and efforts to improve the health and well-

being of all people. This section includes the nutritional status and vital health indices in the province.

## Nutritional Status of Children

The nutritional status of children is determined by comparing their actual weight and the standard weight of children based on their corresponding age prescribed by the Nutrition Council of the Philippines. The province of Cavite determines the nutritional status of Caviteño children through the program Operation Timbang Plus (OPT). OPT is the annual weighing and height measurement of all preschool children ages 0 to 59 months old and children ages 60 to 71 months old who are not yet in school. The program identifies and locates the malnourished children for a referral to suitable nutrition and nutrition-related services. The data generated by the program are used for local nutrition action planning, particularly quantifying the prevalence of wasted, stunted, underweight, overweight, and obese children that need to be prioritized for interventions in the community.

From the weighed children, there are 4,963 underweight and 1,681 severely underweight children, with a prevalence rate of 2.44 and 0.82, respectively. The prevalence rate of underweight and severely underweight children has decreased from 0.19 and 0.08, respectively, in 2020. Moreover, 5,487 children are considered overweight, leading to a prevalence rate of 2.69. In terms of underweight prevalence, the municipality of Magallanes got the highest prevalence of 5.01. In terms of severely underweight prevalence, Magallanes also acquired the highest at 2.08. Meanwhile, Tagaytay City got 0.00 underweight and the severely underweight rate, which means that almost all children weighed in their localities are of normal weight. Furthermore, in terms of height, 8,083 children (3.97) are considered tall for their age, 134,036 children (65.78) are of normal height, 9,269

children are stunted (4.55), and 4,329 children (2.12) are severely stunted.

In addition, 4,441 children (2.18) are considered obese for their height, 5,672 children (2.78) are overweight, 4,859 children (2.38) are moderately wasted, and 2,388 children (1.17) are severely wasted.

In terms of cities and municipalities, it is evident that the municipality of General Mariano Alvarez has a high undernourished prevalence rate compared to other LGUs. It has the highest underweight prevalence rate at 3.08, stunted prevalence rate at 6.61, and moderately and severely wasted prevalence rate at 4.79 and 3.39, respectively.

Additionally, the data shows that malnutrition in the province is not severe. The downward trend in the prevalence rate for the malnourished children shows a positive picture. The health offices regularly conduct OPT and supplemental feeding and deworming to address malnutrition in the province.

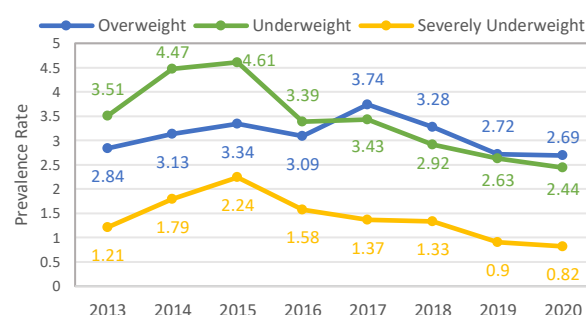


Figure 3.27 Malnutrition Prevalence Rate, Province of Cavite: 2013-2020

Table 3.64 Weight by Age among 0-59 months old preschool children by City/Municipality, Province of Cavite: 2020

City/Municipality	Number of PS Weighed	Overweight		Normal		Underweight		Severely Underweight	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate
<b>1<sup>st</sup> District</b>	<b>16,535</b>	<b>738</b>	<b>4.46</b>	<b>15,036</b>	<b>90.93</b>	<b>545</b>	<b>3.30</b>	<b>216</b>	<b>1.31</b>
Cavite City	4,762	214	4.49	4,365	91.66	137	2.88	46	0.97
Kawit	2,778	73	2.63	2,575	92.69	94	3.38	36	1.30
Noveleta	2,633	75	2.85	2,526	95.94	26	0.99	6	0.23
Rosario	6,362	376	5.91	5,570	87.55	288	4.53	128	2.01
<b>2<sup>nd</sup> District</b>	<b>13,605</b>	<b>384</b>	<b>2.82</b>	<b>12,461</b>	<b>91.59</b>	<b>548</b>	<b>4.03</b>	<b>212</b>	<b>1.56</b>
City of Bacoar	13,605	384	2.82	12,461	91.59	548	4.03	212	1.56
<b>3<sup>rd</sup> District</b>	<b>6,145</b>	<b>196</b>	<b>3.19</b>	<b>5,744</b>	<b>93.47</b>	<b>161</b>	<b>2.62</b>	<b>44</b>	<b>0.72</b>
City of Imus	6,145	196	3.19	5,744	93.47	161	2.62	44	0.72
<b>4<sup>th</sup> District</b>	<b>48,056</b>	<b>634</b>	<b>1.32</b>	<b>46,633</b>	<b>97.04</b>	<b>581</b>	<b>1.21</b>	<b>208</b>	<b>0.43</b>
City of Dasmarinas	48,056	634	1.32	46,633	97.04	581	1.21	208	0.43
<b>5<sup>th</sup> District</b>	<b>22,739</b>	<b>843</b>	<b>3.71</b>	<b>20,672</b>	<b>90.91</b>	<b>773</b>	<b>3.40</b>	<b>451</b>	<b>1.98</b>
Carmona	3,923	211	5.38	3,539	90.21	128	3.26	45	1.15
Gen. M. Alvarez	9,519	371	3.90	8,528	89.59	327	3.44	293	3.08
Silang	9,297	261	2.81	8,605	92.56	318	3.42	113	1.22
<b>6<sup>th</sup> District</b>	<b>16,083</b>	<b>497</b>	<b>3.09</b>	<b>14,877</b>	<b>92.50</b>	<b>551</b>	<b>3.43</b>	<b>158</b>	<b>0.98</b>
City of Gen. Trias	16,083	497	3.09	14,877	92.50	551	3.43	158	0.98
<b>7<sup>th</sup> District</b>	<b>51,468</b>	<b>1,525</b>	<b>2.96</b>	<b>48,517</b>	<b>94.27</b>	<b>1,175</b>	<b>2.28</b>	<b>251</b>	<b>0.49</b>
Amadeo	2,587	167	6.46	2,324	89.83	77	2.98	19	0.73
Indang	5,416	321	5.93	4,890	90.29	165	3.05	40	0.74
Tanza	24,651	566	2.30	23,591	95.70	414	1.68	80	0.32
Trece Martires City	18,814	471	2.50	17,712	94.14	519	2.76	112	0.60
<b>8<sup>th</sup> District</b>	<b>29,134</b>	<b>670</b>	<b>2.30</b>	<b>27,694</b>	<b>95.06</b>	<b>629</b>	<b>2.16</b>	<b>141</b>	<b>0.48</b>
Alfonso	4,378	128	2.92	4,117	94.04	108	2.47	25	0.57
Gen. E. Aguinaldo	2,271	101	4.45	2,059	90.66	94	4.14	17	0.75
Magallanes	1,775	75	4.23	1,574	88.68	89	5.01	37	2.08
Maragondon	2,658	83	3.12	2,446	92.02	101	3.80	28	1.05



City/Municipality	Number of PS Weighed	Overweight		Normal		Underweight		Severely Underweight	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate
Mendez	2,626	113	4.30	2,455	93.49	45	1.71	13	0.50
Naic	7,640	56	0.73	7,440	97.38	135	1.77	9	0.12
Tagaytay City	6,370	78	1.22	6,292	98.78	0	0.00	0	0.00
Ternate	1,416	36	2.54	1,311	92.58	57	4.03	12	0.85
<b>CAVITE</b>	<b>203,765</b>	<b>5,487</b>	<b>2.69</b>	<b>191,634</b>	<b>94.05</b>	<b>4,963</b>	<b>2.44</b>	<b>1,681</b>	<b>0.82</b>

Source: Cavite Provincial Health Office, Trece Martires City

Table 3.65 Height by Age among 0-59 months old preschool children by City/Municipality, Province of Cavite: 2020

City/Municipality	PS Weighed	Tall		Normal		Stunted		Severely Stunted	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate
<b>1<sup>st</sup> District</b>	<b>16,535</b>	<b>914</b>	<b>5.53</b>	<b>13,889</b>	<b>84.00</b>	<b>1,034</b>	<b>6.25</b>	<b>698</b>	<b>4.22</b>
Cavite City	4,762	290	6.09	3,880	81.48	380	7.98	212	4.45
Kawit	2,778	145	5.22	2,416	86.97	144	5.18	73	2.63
Noveleta	2,633	121	4.60	2,432	92.37	70	2.66	10	0.38
Rosario	6,362	358	5.63	5,161	81.12	440	6.92	403	6.33
<b>2<sup>nd</sup> District</b>	<b>13,605</b>	<b>736</b>	<b>5.41</b>	<b>11,208</b>	<b>82.38</b>	<b>1,083</b>	<b>7.96</b>	<b>578</b>	<b>4.25</b>
City of Bacoor	13,605	736	5.41	11,208	82.38	1,083	7.96	578	4.25
<b>3<sup>rd</sup> District</b>	<b>6,145</b>	<b>262</b>	<b>4.26</b>	<b>5,507</b>	<b>89.62</b>	<b>267</b>	<b>4.34</b>	<b>109</b>	<b>1.77</b>
City of Imus	6,145	262	4.26	5,507	89.62	267	4.34	109	1.77
<b>4<sup>th</sup> District</b>	<b>48,056</b>	<b>1,430</b>	<b>2.98</b>	<b>45,353</b>	<b>94.38</b>	<b>907</b>	<b>1.89</b>	<b>366</b>	<b>0.76</b>
City of Dasmarinas	48,056	1,430	2.98	45,353	94.38	907	1.89	366	0.76
<b>5<sup>th</sup> District</b>	<b>22,739</b>	<b>1,751</b>	<b>7.70</b>	<b>18,499</b>	<b>81.35</b>	<b>1,416</b>	<b>6.23</b>	<b>1,082</b>	<b>4.76</b>
Carmona	3,923	249	6.35	3,321	84.65	184	4.69	131	3.34
Gen. M. Alvarez	9,519	1,134	11.91	7,089	74.47	714	7.50	629	6.61
Silang	9,297	368	3.96	8,089	87.01	518	5.57	322	3.46
<b>6<sup>th</sup> District</b>	<b>16,083</b>	<b>733</b>	<b>4.56</b>	<b>14,031</b>	<b>87.24</b>	<b>913</b>	<b>5.68</b>	<b>406</b>	<b>2.52</b>
City of Gen. Trias	16,083	733	4.56	14,031	87.24	913	5.68	406	2.52
<b>7<sup>th</sup> District</b>	<b>51,468</b>	<b>2,400</b>	<b>4.66</b>	<b>45,539</b>	<b>88.48</b>	<b>2,622</b>	<b>5.09</b>	<b>907</b>	<b>1.76</b>
Amadeo	2,587	141	5.45	2,186	84.50	191	7.38	69	2.67
Indang	5,416	233	4.30	4,596	84.86	442	8.16	145	2.68
Tanza	24,651	1,184	4.80	22,421	90.95	837	3.40	209	0.85
Trece Martires City	18,814	842	4.48	16,336	86.83	1,152	6.12	484	2.57
<b>8<sup>th</sup> District</b>	<b>29,134</b>	<b>1,287</b>	<b>4.42</b>	<b>25,363</b>	<b>87.06</b>	<b>1,934</b>	<b>6.64</b>	<b>549</b>	<b>1.88</b>
Alfonso	4,378	178	4.07	3,817	87.19	305	6.97	78	1.78
Gen. E. Aguinaldo	2,271	62	2.73	1,933	85.12	201	8.85	74	3.26
Magallanes	1,775	84	4.73	1,351	76.11	228	12.85	112	6.31
Maragondon	2,658	103	3.88	2,293	86.27	185	6.96	77	2.90
Mendez	2,626	129	4.91	2,277	86.71	155	5.90	65	2.48
Naic	7,640	555	7.26	6,604	86.44	444	5.81	37	0.48
Tagaytay City	6,370	101	1.59	5,950	93.41	303	4.76	16	0.25
Ternate	1,416	75	5.30	1,138	80.37	113	7.98	90	6.36
<b>CAVITE</b>	<b>203,765</b>	<b>8,083</b>	<b>3.97</b>	<b>134,036</b>	<b>65.78</b>	<b>9,269</b>	<b>4.55</b>	<b>4,329</b>	<b>2.12</b>

Source: Cavite Provincial Health Office, Trece Martires City

Table 3.66 Weight for Height among 0-59 months old preschool children by City/Municipality, Province of Cavite: 2020

City/Municipality	PS Weighed	Obese		Overweight		Normal		Moderately Wasted		Severely Wasted	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
<b>1<sup>st</sup> District</b>	<b>16,535</b>	<b>604</b>	<b>3.65</b>	<b>730</b>	<b>4.41</b>	<b>14,523</b>	<b>87.83</b>	<b>465</b>	<b>2.81</b>	<b>213</b>	<b>1.29</b>
Cavite City	4,762	153	3.21	248	5.21	4,199	88.18	108	2.27	54	1.13
Kawit	2,778	79	2.84	90	3.24	2,456	88.41	106	3.82	47	1.69
Noveleta	2,633	53	2.01	55	2.09	2,455	93.24	64	2.43	6	0.23
Rosario	6,362	319	5.01	337	5.30	5,413	85.08	187	2.94	106	1.67
<b>2<sup>nd</sup> District</b>	<b>13,605</b>	<b>308</b>	<b>2.26</b>	<b>411</b>	<b>3.02</b>	<b>12,251</b>	<b>90.05</b>	<b>416</b>	<b>3.06</b>	<b>219</b>	<b>1.61</b>
City of Bacoor	13,605	308	2.26	411	3.02	12,251	90.05	416	3.06	219	1.61
<b>3<sup>rd</sup> District</b>	<b>6,145</b>	<b>130</b>	<b>2.12</b>	<b>147</b>	<b>2.39</b>	<b>5,711</b>	<b>92.94</b>	<b>115</b>	<b>1.87</b>	<b>42</b>	<b>0.68</b>
City of Imus	6,145	130	2.12	147	2.39	5,711	92.94	115	1.87	42	0.68
<b>4<sup>th</sup> District</b>	<b>48,056</b>	<b>417</b>	<b>0.87</b>	<b>450</b>	<b>0.94</b>	<b>46,568</b>	<b>96.90</b>	<b>426</b>	<b>0.89</b>	<b>195</b>	<b>0.41</b>
City of Dasmarinas	48,056	417	0.87	450	0.94	46,568	96.90	426	0.89	195	0.41
<b>5<sup>th</sup> District</b>	<b>22,739</b>	<b>780</b>	<b>3.43</b>	<b>910</b>	<b>4.00</b>	<b>19,609</b>	<b>86.24</b>	<b>808</b>	<b>3.55</b>	<b>634</b>	<b>2.79</b>
Carmona	3,923	163	4.15	191	4.87	3,374	86.01	91	2.32	61	1.55
Gen. M. Alvarez	9,519	366	3.84	376	3.95	8,043	84.49	456	4.79	323	3.39
Silang	9,297	251	2.70	343	3.69	8,192	88.11	261	2.81	250	2.69
<b>6<sup>th</sup> District</b>	<b>16,083</b>	<b>408</b>	<b>2.54</b>	<b>541</b>	<b>3.36</b>	<b>14,454</b>	<b>89.87</b>	<b>464</b>	<b>2.89</b>	<b>216</b>	<b>1.34</b>
City of Gen. Trias	16,083	408	2.54	541	3.36	14,454	89.87	464	2.89	216	1.34
<b>7<sup>th</sup> District</b>	<b>51,468</b>	<b>1,194</b>	<b>2.32</b>	<b>1,629</b>	<b>3.17</b>	<b>46,529</b>	<b>90.40</b>	<b>1,484</b>	<b>2.88</b>	<b>632</b>	<b>1.23</b>
Amadeo	2,587	128	4.95	157	6.07	2,196	84.89	79	3.05	27	1.04
Indang	5,416	241	4.45	307	5.67	4,635	85.58	148	2.73	85	1.57
Tanza	24,651	457	1.85	644	2.61	22,512	91.32	761	3.09	277	1.12
Trece Martires City	18,814	368	1.96	521	2.77	17,186	91.35	496	2.64	243	1.29
<b>8<sup>th</sup> District</b>	<b>29,134</b>	<b>600</b>	<b>2.06</b>	<b>854</b>	<b>2.93</b>	<b>26,773</b>	<b>91.90</b>	<b>681</b>	<b>2.34</b>	<b>237</b>	<b>0.81</b>
Alfonso	4,378	112	2.56	152	3.47	3,959	90.43	104	2.38	51	1.16

City/Municipality	PS	Obese		Overweight		Normal		Moderately Wasted		Severely Wasted	
	Weighed	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Gen. E. Aguinaldo	2,271	76	3.35	109	4.80	2,009	88.46	65	2.86	23	1.01
Magallanes	1,775	74	4.17	95	5.35	1,485	83.66	74	4.17	47	2.65
Maragondon	2,658	81	3.05	77	2.90	2,428	91.35	52	1.96	20	0.75
Mendez	2,626	82	3.12	100	3.81	2,404	91.55	28	1.07	12	0.46
Naic	7,640	53	0.69	169	2.21	7,148	93.56	229	3.00	41	0.54
Tagaytay City	6,370	77	1.21	104	1.63	6,092	95.64	78	1.22	19	0.30
Ternate	1,416	45	3.18	48	3.39	1,248	88.14	51	3.60	24	1.69
CAVITE	203,765	4,441	2.18	5,672	2.78	186,418	91.49	4859	2.38	2,388	1.17

Source: Cavite Provincial Health Office, Trece Martires City

## Vital Health Indices

Vital health indices are the indicators that measure the total health condition in a particular locality or area.

**Table 3.67 Vital Health Indices, Province of Cavite: 2014-2020**

Year	Crude Rate		Mortality Rate	
	Birth	Death	Infant	Maternal
2014	13.43	2.71	9.00	51.00
2015	12.03	3.41	10.94	52.00
2016	11.07	3.44	12.13	54.91
2017	11.11	3.64	8.17	31.81
2018	9.00	3.00	9.00	40.00
2019	9.00	3.00	8.00	41.00
2020	10.00	2.00	2.00	37.00

Source: Provincial Health Office, Trece Martires City

In 2020 the crude birth rate (CBR) in the province was at ten births per 1,000 total populations, compared to 9 per 1,000 total population in 2019, which recorded an increase of one live birth rate levels. Meanwhile, the crude death rate (CDR) slightly decreased from three in 2019 to two in 2020. It is "crude" in the sense that all ages are represented in the rate and does not take into account the variations in risks of dying at particular ages. It can be noted that CDR is inversely proportional to the CBR in the province, such that as the CBR increases, the CDR decreases.

The decline in the death rate is a positive indication for the success in preventing and controlling diseases and sustaining good health condition in Cavite, despite rise of COVID-19 cases. The crude birth rate in the province continues to decrease, which may be due to the shifting lifestyle choices associated with the economic affluence of the populace in the province. Thus, it may be said that immigration substantially contributes to the rise in the provincial population. However, in 2020, CDR increased in the province.

Infant Mortality Rate refers to the number of deaths among infants (below one-year) per 1,000 live births. The province's infant mortality rate for the year 2020 is two per 1,000 live births, which largely decreased from the previous year's rate of eight per 1,000 live births. Moreover, maternal mortality rate includes deaths of women during pregnancy, at childbirth, or in the period after childbirth related to pregnancy and giving birth per 1,000 live births. There was a decrease in the maternal mortality rate from 41 in 2019 to 37 in 2020. Having a physician, nurse, or midwife who has formal training present during birth decreases the maternal mortality rate.

Infant and maternal mortality have decreased by 75.00% and 9.7% consecutively in 2020. The maternal mortality is recorded at 37, which largely decreased by 27.45% from year 2014. However, further actions and programs must be taken to achieve to lower the cases of maternal mortality in the province. On the other hand, the infant mortality rate in the province is relatively low that manifests a safe and healthy condition of infants below one-year-old in the province, generally.

## Morbidity and Mortality

Morbidity and mortality statistics provide principal information for the management of healthcare systems and the planning and evaluation of health service delivery.

Like in other industrializing provinces, lifestyle-related illnesses are included in the top leading causes of mortality and morbidity in the province.

## Ten Leading Causes of Morbidity

Morbidity refers to having a disease or a symptom of a disease, or the amount of a disease within a population.

In 2020, the leading cause of morbidity were Acute Upper Respiratory Infection, with a rate of 296 per 100,000 individuals. The top two causes of morbidity in the province are related to the respiratory system. It may be related to the rise of COVID-19 infections, which usually affects the respiratory system of its host, in the province in 2020.

**Table 3.68 Ten Leading Causes of Morbidity, Province of Cavite: 2020**

Rank	Cases	Number	Rate <sup>a</sup>
1	Acute Upper Respiratory Infections	12,446	296
2	Acute Lower Respiratory Infections	5,186	123
3	Hypertensive Diseases	4,458	106
4	Diseases of the Urinary System	4,067	97
5	Trauma	1,825	43
6	Accident and Injuries	1,773	42
7	Infections of the Skin and Subcutaneous Tissue	1,687	40
8	Influenza and Pneumonia	1,159	28
9	Diabetes Mellitus	751	18
10	Intestinal Infectious Diseases	738	18

<sup>a</sup> rate per 100,000 population

Source: Cavite Provincial Health Office, Trece Martires City

## Ten Leading Causes of Mortality

Mortality is the intensity of death in a population. It is sometimes used to mean the frequency of deaths in a population.



The Cavite Provincial Health Office has recorded that the top cause of mortality in the province is still heart disease, with a rate of 47 deaths per 100,000 population.

**Table 3.69 Ten Leading Causes of Mortality, Province of Cavite: 2020**

Rank	Cases	Number	Rate <sup>a</sup>
1	Heart Diseases	1973	47
2	Influenza and Pneumonia	450	11
3	Malignant Neoplasm	359	9
4	Cerebrovascular Diseases	353	8
5	Other Diseases of the Respiratory System	309	7
6	Hypertension	253	6
7	Renal Failure	214	5
8	Other Disorder of the Nervous System	198	5
9	Diabetes Mellitus	193	5
10	Accidents and Injuries	133	3

<sup>a</sup> rate per 100,000 population

Source: Cavite Provincial Health Office, Trece Martires City

## Leading Causes of Infant, Child, Adolescent, and Maternal Mortality

In Cavite, the leading cause of infant mortality is respiratory and cardiovascular disorders specific to the perinatal period, with a rate of 0.84 deaths per 1,000 live births. With this data, the DOH is still working to achieve 100 percent of medical facility deliveries in the province.

**Table 3.70 Ten Leading Causes of Infant Mortality, Province of Cavite: 2020**

Rank	Cases	Number	Rate <sup>a</sup>
1	Respiratory and Cardiovascular Disorders specific to Perinatal Period	34	0.84
2	Maternal care related to the fetus and amniotic cavity and possible delivery problems	20	0.50
3	Congenital Malformation	14	0.35
4	Disorders related to length of gestation and fetal growth	13	0.32
5	Infections specific to the perinatal period	8	0.20
6	Influenza and Pneumonia	7	0.17
7	Other Diseases of the Respiratory System	7	0.17
8	Disorder Originating to Perinatal Period	7	0.17
9	Other Disorder of the Nervous System	6	0.15
10	Lung Diseases Due to External Agents	5	0.12

<sup>a</sup> rate per 1,000 live births

Source: Cavite Provincial Health Office, Trece Martires City

Child mortality among children one to four years old is also recorded. Many child deaths are unreported due to a variety of reasons like lack of death registration and lack of data on child migrants (UNICEF 2018). In Cavite, the leading causes of child mortality is accidents and injuries, with a rate of 0.02 deaths per 1,000 children aged one to four years old.

On the other hand, adolescent mortality refers to the death of children under the age of 15 to 19. Mortality rates are low in adolescents compared with other age groups. The leading cause of adolescent mortality in the province is heart disease, with a rate of 0.01 per 1,000 adolescents.

**Table 3.71 Ten Leading Causes of Mortality among Children 1 to 4 years old, Province of Cavite: 2020**

Rank	Cases	Number	Rate <sup>a</sup>
1	Accidents and Injuries	16	0.0231
2	Influenza and Pneumonia	10	0.0144
3	Metabolic Disorders	6	0.0087
4	Chronic Lower Respiratory Diseases	4	0.0058
5	Acute Lower Respiratory Infections	4	0.0058
6	Malignant Neoplasm	2	0.0029
7	Coagulation defects, purpura and other haemorrhagic conditions	2	0.0029
8	Intestinal Infectious Diseases	2	0.0029
9	Malnutrition	1	0.0014
10	Glomerular Disease	1	0.0014

<sup>a</sup> rate per 1,000 population

Source: Cavite Provincial Health Office, Trece Martires City

**Table 3.72 Ten Leading Causes of Mortality among Adolescents, Province of Cavite: 2020**

Rank	Cases	Number	Rate <sup>a</sup>
1	Heart Disease	11	0.0141
2	Malignant Neoplasm	7	0.0090
3	Influenza and Pneumonia	4	0.0051
4	Other diseases of the respiratory system	3	0.0038
5	Renal Failure	2	0.0026
6	Episodic and Paroxysmal Disorder	2	0.0026
7	Trauma	2	0.0026
8	Intentional Self-Harm	1	0.0013
9	Intestinal Infectious Disease	1	0.0013
10	Injury	1	0.0013

<sup>a</sup> rate per 1,000 population

Source: Cavite Provincial Health Office, Trece Martires City

## Main Challenge in Health

The sudden emergence of the Coronavirus Disease 2019 (COVID-19) pandemic is the main challenge that confronts the whole world in 2020. The COVID-19 was declared as a global emergency of the WHO, as it continues to spread outside China.

Since the policy of the state under Section 15, Article II of the 1987 Philippine Constitution promotes and protects the right to health of the people, President Rodrigo R. Duterte declared a State of Public Health Emergency in the country through Proclamation No. 922 series of 2020. The said proclamation capacitated the national agencies and LGUs to immediately act to prevent loss of life, utilize appropriate resources to implement urgent and critical measures to contain or prevent the spread of the virus, mitigate its effective impact on the community, and prevent serious disruption of the functioning of the government and the community.

With the rising number of confirmed cases of COVID-19 in the Philippines despite government interventions, the President also declared the State of Calamity in the entire country and imposed community quarantine rules throughout the Philippines. The implementation of community quarantine and the corresponding imposition of stringent social distancing restricted the population's mobility.

In 2020, the Province of Cavite recorded a total of 17,867 confirmed COVID-19 cases. Among those confirmed cases, 16,330 or 91.40% have recovered while 500 or 2.80% have died from the disease. By removing the number of

deaths and recoveries from the total cases, 5.80% of it (2,037 people) are the currently active cases of the Province of Cavite, as of December 2020.

The COVID-19 pandemic has changed the lives of more than four million people in the Province of Cavite and prompting the government and citizens to immediately adapt to the “new normal” scheme. The pandemic limited the access of the people to basic social services including health, education, information and communication, water and sanitation, and transportation, which resulted in the increasing vulnerability of poor households and the community.

The readiness of the healthcare system was extremely challenged. Despite its development in the past decades, the country is still facing public health challenges and difficulties due to its limited resources and capacity. Insufficient capability to laboratory testing, a limited number of health care facilities, medical equipment and supplies such as personal protective equipment (PPE) to the medical front liners, and shortage of health personnel in the country are some of the evidences that the Philippines has a weak healthcare system. The insufficient numbers of health personnel in the country also added to the burden of pandemic. Thus, demand for timely, appropriate and sufficient healthcare services and mechanisms are significant during the rehabilitation and recovery period.

In addition, new ways to provide social services should be developed to assist the constituent affected by the implementation of community quarantine in the province.

The COVID-19 pandemic also has a significant effect in the economic condition of the province, especially during the imposition of community quarantines. The main contributors to the decline were manufacturing, construction and transportation, and storage. Holistically, the most affected industries were tourism, agriculture and fisheries, and industry and services sectors.

With the consequences of the COVID-19 pandemic, the Provincial Government of Cavite shall establish effective and efficient goals, strategies, programs, and projects to halt the spread of the virus, provide assistance to the affected communities, strengthen community resiliency, and aid in the economic recovery.

## Social Welfare and Development

The Provincial Social Welfare and Development Office (PSWDO) is the provincial office responsible for the protection of the social welfare rights of Filipinos and promoting social development. PSWDO envisions Cavite as being a province where the poor, vulnerable, and disadvantaged individuals, families, and communities are empowered to have an improved quality of life. Being the lead agency in social welfare and development, PSWDO exercises the following functions:

- Advocates for a just and responsive social welfare and development legislative agenda, policies, and plans, as well as ensuring their effective implementation;

- Develops and enriches existing programs and services for specific groups, such as children and young people, women, families and communities, solo parents, older people, and people with disabilities (PWDs);
- Provides social protection for the poor, vulnerable, and disadvantaged sectors and give augmentation funds to local government units for the delivery of social welfare and development services to depressed municipalities and barangays, and provides protective services to individuals, families, and communities in crisis.

## Day Care Services

Daycare centers are established to help with the values formation and socialization of children aged 3 to 6 years old in the absence of their mothers during working hours. Day Care services are manned by daycare workers who are skilled at early childhood education knowledge to prepare children for grade school.

In the Philippines, different laws backed up the establishment of daycare centers. The Presidential Decree No. 603, otherwise known as the Children and Youth Welfare Code, stated that “The Child is one of the most important assets of the nation. Every effort should be exerted to promote his welfare and enhance his opportunities for a useful and happy life.” Moreover, the Local Government Code Chapter 2 Section 17 mandated the barangays to provide and maintain a daycare center as part of its basic services and facilities.

Furthermore, following Republic Act 6972, also known as the Barangay-Level Total Development and Protection of Children Act, Filipino children up to six years of age deserve the best care and attention at the family and community levels, which calls for the establishment of a daycare center in every barangay.

Based on gathered reports from City/Municipal Social Welfare and Development Offices, there are 806 Day Care Centers that cater to a total of 37,122 daycare enrollees in 2020. Out of the total enrollees, there are a total of 51 persons with a disability, 25 male and 26 female students.

Three cities and six municipalities in the province comply with the provisions of RA 6972. These are the cities of Dasmariñas, General Trias, and Trece Martires, and the municipalities of Kawit, Rosario, General Mariano Alvarez, Tanza, General Emilio Aguinaldo, and Naic. On the other hand, the cities/municipalities that failed to comply are Cavite City, Noveleta, City of Bacoor, City of Imus, Carmona, Silang, Amadeo, Indang, Alfonso, Magallanes, Maragondon, Mendez-Nuñez, City of Tagaytay, and Ternate. The said cities and municipalities should establish a daycare center in some of their barangays that lack one. The City of Dasmariñas has the largest number of ample daycare centers with 107 centers, followed by the City of General Trias with 63 centers. It can be noted that the City of Imus has the second largest number of day care centers with 82 centers. However, the 82 centers did not suffice since it has 97 barangays.