

Philippines

2013 National Demographic and Health Survey

Key Findings





This report summarizes the findings of the 2013 Philippines National Demographic and Health Survey (NDHS) carried out by the Philippine Statistics Authority (PSA). The NDHS is part of the worldwide MEASURE Demographic and Health Surveys program, which is designed to collect information on a variety of health-related topics including fertility, family planning, and maternal and child health. The United States Agency for International Development (USAID) provided technical assistance through ICF International. The opinions expressed in this report are those of the authors and do not necessarily reflect the views of USAID and the Government of the Philippines.

Additional information about the survey may be obtained from the Demographic and Social Statistics Division (DSSD) of the Household Statistics Department, PSA, Solicarel Building 1, Ramon Magsaysay Boulevard, Sta. Mesa, Manila; Telephone: (632) 713-7245, Fax (632) 716-1612, E-mail: info@mail.census.gov.ph.

Information about The DHS Program may be obtained from ICF International, 530 Gaither Road, Suite 500, Rockville, MD 20850, USA; Telephone: +1.301-407-6500, Fax: +1.301-407-6501, E-mail: reports@dhsprogram.com, Internet: <http://www.dhsprogram.com>.

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ABOUT THE 2013 NDHS

The 2013 National Demographic and Health Survey (NDHS) was designed to provide data for monitoring the population and health situation in the Philippines. The 2013 NDHS is the tenth in a series of national demographic surveys conducted by the National Statistics Office every five years since 1968. The major objective of the survey is to provide current data on key demographic, family planning, and health indicators, particularly data on household characteristics and practices; health insurance coverage; awareness of common non-communicable and infectious diseases; health-seeking behavior; utilization of health facilities; fertility levels; fertility preferences; marriage and sexual activity; knowledge and use of family planning methods; childhood mortality; maternal and child health; knowledge on AIDS and HIV prevention; and extent of violence against women in the Philippines.

Who participated in the survey?

A nationally representative sample of 16,155 women age 15-49 were interviewed. This represents a response rate of 98% of women. This sample provides estimates for the Philippines as a whole, for urban and rural areas, and for each of the 17 regions.



HOUSEHOLD CHARACTERISTICS

Household Composition

Filipino households consist of an average of 4.7 people. A large proportion of the Philippine population (34%) is under age 15. Nineteen percent of households are headed by women.

Housing Conditions

About nine out of ten Filipino households have access to electricity. Urban households are more likely to have electricity than rural households (94% versus 82%).

The majority of households have ready access to safe drinking water, either through water piped into their homes (31% of urban households and 22% of rural households), or from a tube well (9% of urban households and 24% of rural households). About one out of three urban households and two out of five rural households have their source of drinking water within their premises. Sixty percent of households do not make an effort to make their drinking water safe.

Two-thirds of households have an improved (and not shared) toilet facility. Almost three of four urban households have an improved toilet facility compared to two in three rural households. Most households have a private flush toilet (72 percent in urban areas, and 64 percent in rural areas). About 12 percent of households in rural areas have no toilet facility, compared with only 5 percent of urban households.

Ownership of Goods

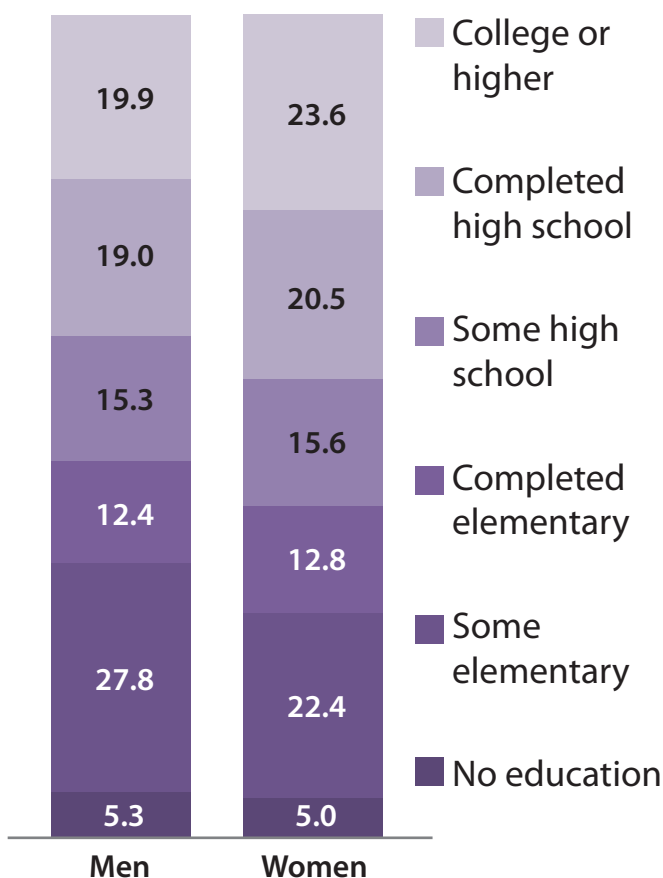
Currently, 84% of Filipino households own a mobile phone, 75% have a television, and 57% own a radio. Households in urban areas are more likely to own a mobile phone or television than rural households. Only 23% of households own a computer, and 8% of households have landline or wireless telephone at home. Thirty percent of households own a motorcycle or tricycle and 20% own a bicycle or trisikad (pedicab). Only 19 percent of households has a member who is a beneficiary of the Pantawid Pamilyang Pilipino Program (4Ps) or the Conditional Cash Transfer (CCT) program of the government.

Education of Survey Respondents

A majority of Filipinos have some formal education. Only 5 percent of men and women age six and over have not received any education. Forty-four percent of women and 39 percent of men age six and over have completed secondary school or higher. Urban residents and those in the two highest wealth quintiles are most likely to have attended secondary school and beyond. Women and men living in ARMM and MIMAROPA are least likely to have gone beyond elementary school.

Education

Percent distribution of women and men age 6 years and over by highest level of education attended



FERTILITY AND ITS DETERMINANTS

Total Fertility Rate (TFR)

Fertility in the Philippines has declined over the past thirty years. Currently, women in the Philippines have an average of 3.0 children, a decrease from 3.3 in 2008.

Fertility varies by residence and by region. Women in urban areas have 2.6 children on average, compared with 3.5 children per woman in rural areas. Fertility is highest in ARMM (4.2 children) and Bicol (4.1 children), while the lowest is in National Capital Region with 2.3 children per woman.

Fertility also varies with mother's education and economic status. Women who have high school education or higher tend to have low fertility. Women with no schooling have an average of 3.8 children. Fertility increases as household wealth decreases. The women in the poorest households, in general, have three times as many children as women in the wealthiest households (5.2 versus 1.7 children per woman).

Teenage Fertility

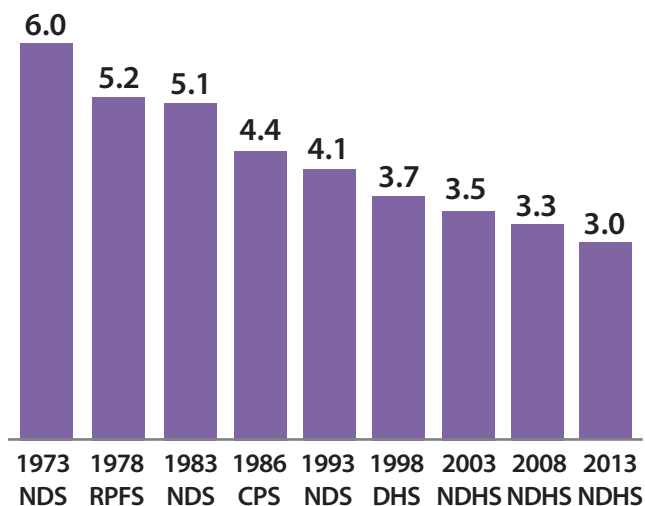
According to the 2013 NDHS, 10% of Filipino women 15-19 have begun childbearing: 8% are already mothers and an additional 2% are pregnant with their first child. Women age 15-24 from Caraga are most likely to be mothers or pregnant (38% have begun childbearing). Young women in rural areas, those with no education, and those from the poorest households are also more likely to have begun childbearing than those in urban areas, those who are educated, and those living in the wealthiest households.

Age at First Sexual Intercourse

Filipino women age 25-49 initiate sexual intercourse at a median age of 21.5, just before marriage. Eighteen percent of women age 25-49 had their first sexual intercourse by the age of 18.

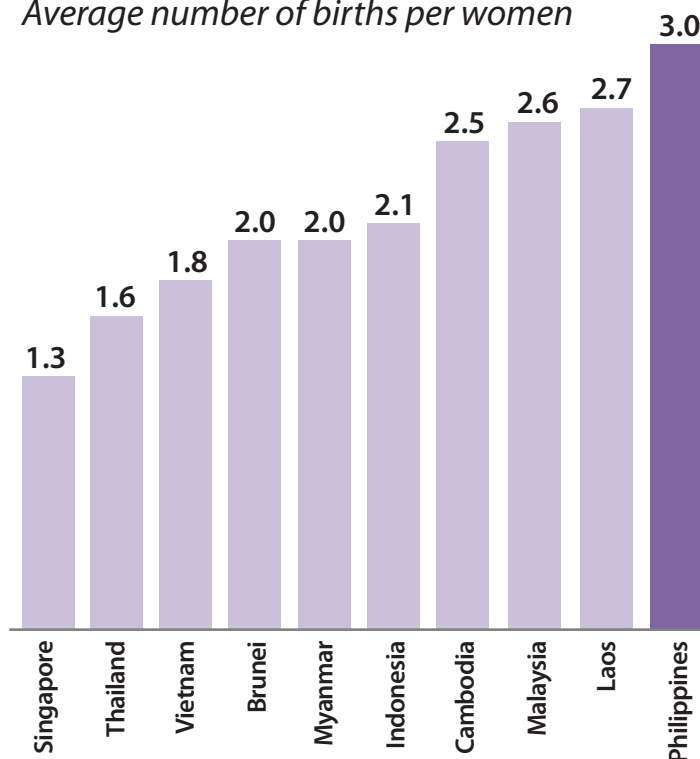
Trends in Fertility

Total fertility rate (number of children per woman)



Fertility in Southeast Asia

Average number of births per women





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FAMILY PLANNING

Knowledge of Family Planning

Knowledge of family planning is universal in the Philippines—almost all women know at least one method of family planning. At least 95% of currently married women know about the pill, male condoms, and female sterilization, while 94% know about injectables, and 91% know about IUD. On average, currently married women know nine methods of family planning.

Current Use of Family Planning

Fifty-five percent of married women are currently using a contraceptive method. One in three married women relies on a modern method, mostly the pill (19 percent) and female sterilization (9 percent). Another 18 percent are using a traditional method, including periodic abstinence and withdrawal.

Age at First Marriage

In the Philippines, 15 percent of women age 25-49 were married by age 18 and about one in three were married by age 20. The median age of first marriage of women age 25-49 is 22.3. Women in urban areas marry a year and a half later than their counterparts in rural areas (median age of 23.1 versus 21.5 years). Women have their first sexual intercourse at about the same time of their first marriage, at a median age of 21.5 years.

Age at First Birth

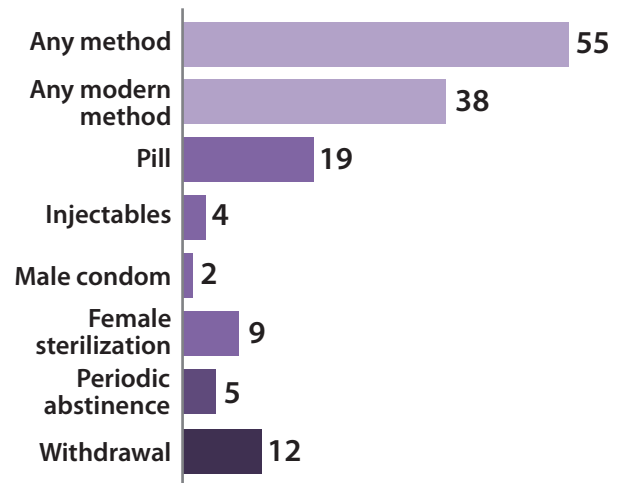
Childbearing in the Philippines generally starts after marriage; half of women age 25-49 had their first birth by age 24. Eight percent had their first birth by age 18. Women in urban areas begin childbearing two years later than women in rural areas. Age at first birth also varies by education and wealth; women who have attended secondary school have their first birth at a median age of 22.5 years compared to 20.1 among women with no education. Women from wealthier households also wait longer to begin childbearing.

Desired Family Size

The mean ideal family size in the Philippines is 2.8 children for all women and 3.0 children for currently married women.

Current Use of Family Planning

Percentage of currently married women age 15-49 who are currently using family planning



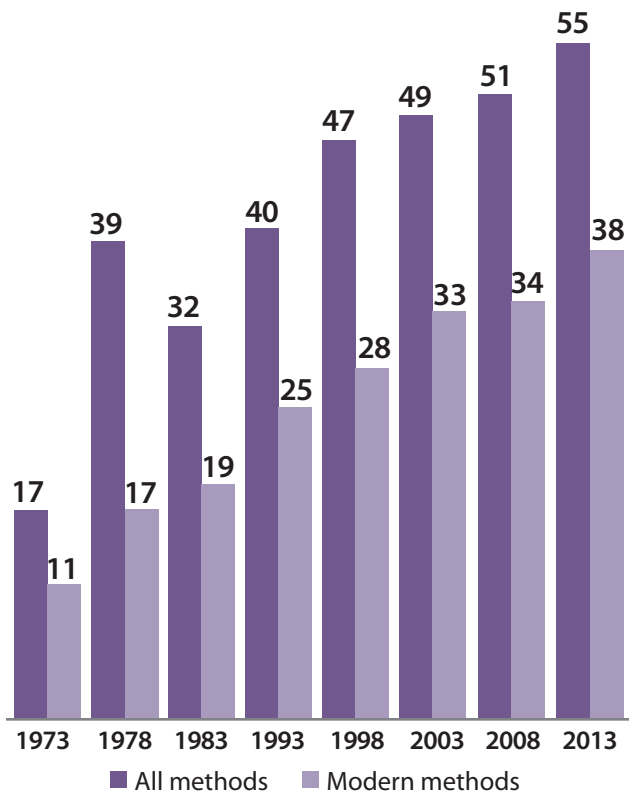
Use of modern methods is the same for both urban and rural areas (38 percent). Contraceptive use ranges from a low of 24% of married women in ARMM to a high of 62% in Eastern Visayas. Use of family planning varies very little by wealth quintile, except

for the lowest quintile with the lowest level of use, indicating that while family planning programs are reaching women of all economic levels, the access of the poorest group to these programs is still somewhat limited.

Trends in Family Planning Use

In the last 40 years, the use of family planning has increased dramatically, but has increased more slowly since 1998. Use of all methods rose from 17 percent of currently married women in 1973 to 55 percent in 2013, and use of modern methods increased from 11 percent to 38 percent. However, the rate of increase has recently slowed down. In the last 5 years, use of all methods increased by only 4 percentage points, from 51 to 55 percent, despite women’s clearly stated desire to limit childbearing.

Family Planning Trends
Percentage of currently married women age 15-49 who are currently using family planning, 1973–2013



NEED FOR FAMILY PLANNING

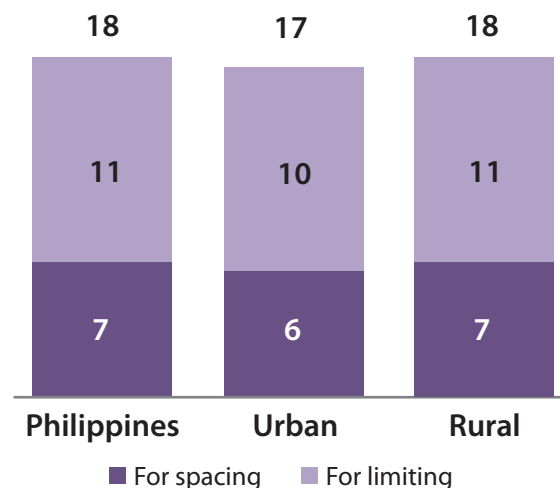
Desire to Delay or Prevent Childbearing

Most women (81 percent) either want to delay or prevent childbearing. Over 62 percent of married women either want no more children or have already been sterilized. Another 19 percent want to wait at least 2 years before having another child. These women are potential users of family planning.

Unmet Need for Family Planning

Some of the married Filipino women who want to stop having children or want to delay the next birth are already using family planning. However, 18 percent of these women are not using any contraceptive method. This group of women who are at risk of unwanted pregnancy have an *unmet need* for family planning.

Unmet Need for Family Planning
Percentage of currently married women age 15-49 with unmet need for family planning



One in five poor married women and one in four uneducated married women has unmet need for family planning, compared with one in six wealthy and highly educated married women.

Exposure to Family Planning Messages

About three in four women were exposed to any messages about family planning on the radio, television, newspaper/magazines or posters or through online/internet in the last few months before the survey. Television is the most frequent medium for family planning messages. Lack of exposure is highest in ARMM (51 percent), Davao (36 percent), and Zamboanga Peninsula and CALABARZON (31 percent each).

Informed Choice

Family planning clients should be informed about the side effects of the method used and given options about other available methods. Almost three-quarters of Filipino women users of modern methods were ever informed about side effects and two-thirds were told what to do if they experienced side effects. Seventy-seven percent were informed of other methods that could be used.

Reasons for Non-Use of Family Planning in the Future

Twenty-nine percent of married women cited method-related reasons for non-use of family planning, the most important of these being health concerns/fear of side effects (26 percent). Seventeen percent of women who do not plan to use a family planning method in the future wanted as many children as possible. Opposition to use was also cited by nine percent of the women. Younger women are more likely to cite health concerns/fear of side effects (39 percent).



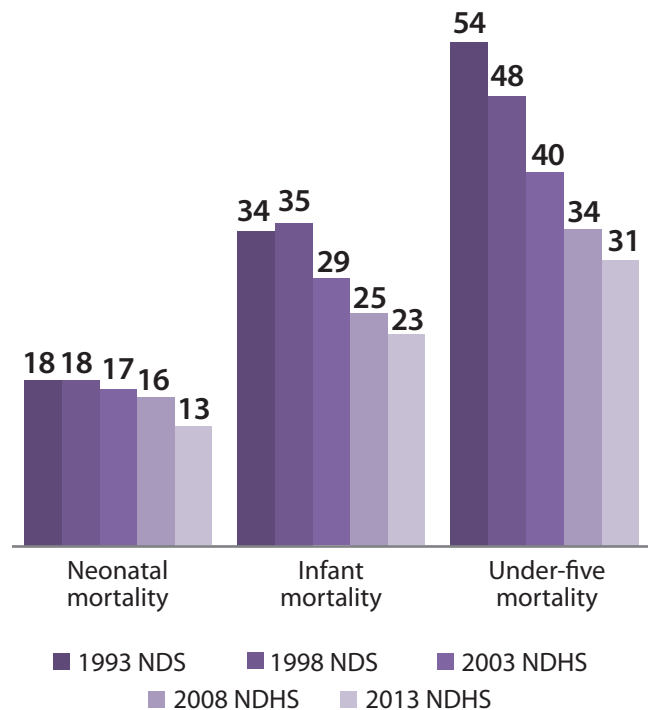
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INFANT AND CHILD MORTALITY

Levels and Trends

The infant mortality rate for the five years before the survey (2009-2013) is 23 deaths per 1,000 live births and the under-five mortality rate is 31 deaths per 1,000 live births. These are lower than the rates of 25 and 34 reported in 2008, respectively. The neonatal mortality rate, representing death in the first month of life, is 13 deaths per 1,000 live births.

Trends in Childhood Mortality Death per 1,000 live births



Under-five mortality decreases as household wealth increases. Children from the poorest families are more than twice as likely to die before the age of five as those from the wealthiest families.



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MATERNAL HEALTH

Antenatal Care (ANC)

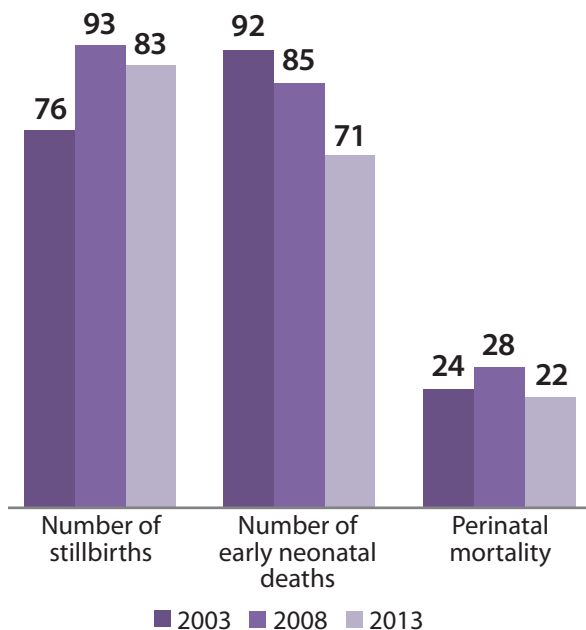
More than nine in ten Filipino women received some antenatal care (ANC) from a trained health professional – 39 percent from a doctor and 57 percent from a nurse or midwife. Four percent of women received no antenatal care. Women living in urban areas, those with higher levels of education, and those from the wealthiest households are most likely to receive ANC from a medically trained provider. About four in five women received four or more ANC visits, as recommended, and 62% went to their first ANC visit during their first trimester.

Perinatal Mortality

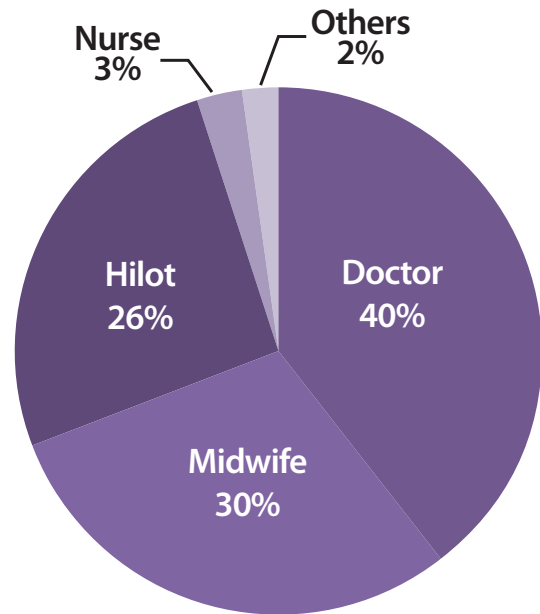
Pregnancy losses occurring after seven completed months of gestation (stillbirths) plus deaths among live births that occur in the first seven days of life (early neonatal deaths) constitute perinatal deaths. Overall, 83 stillbirths and 71 early neonatal deaths were reported by women interviewed in the 2013 NDHS, resulting in a perinatal mortality rate of 22 per 1,000 pregnancies in the Philippines.

Trends in Perinatal Mortality

Number of stillbirths and early neonatal deaths, and the perinatal mortality rate for the five-year preceding the survey



Assistance During Delivery



Among women who do receive ANC, 80% were informed about signs of pregnancy complications, 59% had their blood sample taken, and 65% had their urine sample taken. Most women were weighed and had their blood pressure measured (97% and 98%, respectively). Eighty-two percent of women's last births were protected against neonatal tetanus.

Delivery and Postnatal Care

Almost 4 in 10 Filipino births occur at home, while 61% occur in a health facility. Facility births are most common among women having their first child (76%), those who have made at least four ANC visits

(71%), those with college or higher education (84%) and those in the highest wealth quintile (91%). Urban births are more likely to be delivered in a health facility than rural births.

About three in four births (73%) are assisted by a medically trained provider (doctor, nurse or midwife). Another 26% are assisted by hilots. Assistance at delivery by a medically trained provider is much higher in urban areas (83%) than in rural areas (64%). Trained assistance at delivery also increases dramatically with education and wealth. Only 17% of women with no education compared to 90% of women who completed college or higher; and 42% of women in the poorest households compared to 96% of women in the wealthiest households were assisted by medically trained providers.

Postnatal care helps prevent complications after childbirth. Twenty-three percent of women had no postnatal checkup. Seventy-two percent had a checkup from a medically trained provider within the first two days of birth.

Problems in Accessing Health Care

Overall, about three in five women report problems getting health care when they are sick. Lack of money is the most common problem. Women in their teens, women with 5 or more children, those living in rural areas, those with no education, and poor women are more likely than the other women to report problems in accessing health care for themselves.

CHILD HEALTH

Vaccination Coverage

According to the 2013 NDHS, 69% of Filipino children aged 12-23 months had received all recommended vaccines—one dose of BCG and measles, and three doses each of DPT, polio and Hepa-B vaccine at any time before the survey. Four percent of children had not received any of the recommended vaccines.

Vaccination coverage is slightly higher in urban areas than rural areas (73% compared to 65%). There is marked variation in vaccination coverage by region, ranging from 29% in ARMM to 84% in Cordillera Administrative Region. Vaccination coverage increases

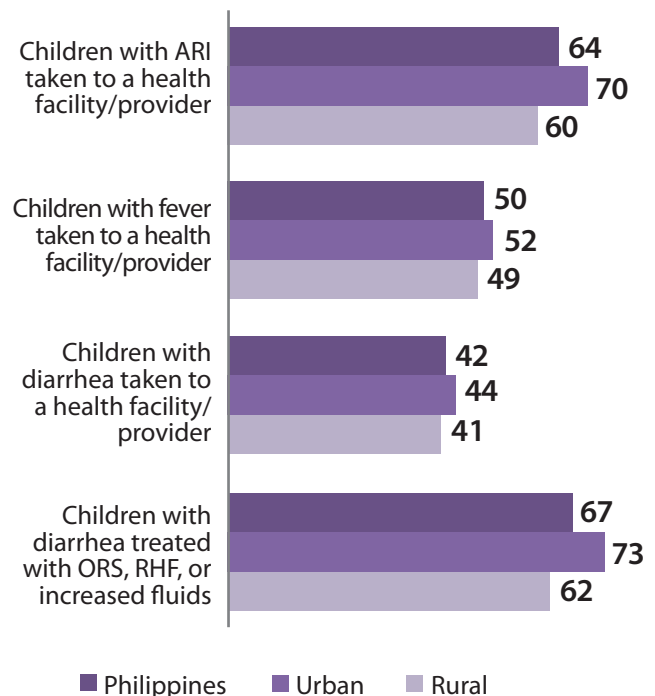
with mother's wealth index; 59% of children whose mothers are in the lowest wealth quintile have been fully vaccinated compared to 81% of children whose mothers are in the highest wealth quintile.

Childhood Illnesses

Six percent of children under five had symptoms of an acute respiratory infection (ARI) in the two weeks before the survey. For 64% percent of these children, treatment or advice was sought from a health facility or medically trained provider. At least one in four children under five (28%) had a fever in the two weeks before the survey. In 50% of these cases, treatment or advice was sought from a health facility or medically trained provider.

During the two weeks before the survey, 8% of children under five had diarrhea. The rate was highest (15%) among children 6-11 months old. Forty-two percent of children with diarrhea received treatment or advice from a health facility or provider. About half (49%) with diarrhea received fluid from ORS packets, and 56% received oral rehydration therapy (ORT) – either ORS or recommended home fluids. Nineteen percent of children received home remedies and 26% received antibiotics. Seventeen percent received no treatment.

Treatment of Childhood Illness



THE NUTRITIONAL STATUS OF WOMEN AND CHILDREN

Breastfeeding

Breastfeeding is very common in the Philippines, with 94% of children ever breastfed. Early initiation of breastfeeding is beneficial to both infant and mother. Placing the infant at the breast immediately after birth and early suckling stimulates the release of hormones that helps the uterus contract to its normal size more rapidly, thus reducing the mother's blood loss. The 2013 NDHS results shows that 50 percent of children born in the five years before the survey were given breast milk within one hour of birth and 82 percent were put to the breast within 24 hours of birth.

Vitamin A and Iron Supplementation

Micronutrients help protect children from certain diseases. Vitamin A, which prevents blindness and infection, is particularly important for children and new mothers. Eighty-five of children age 6–59 months received a vitamin A supplement in the six months prior to the survey and 38% were given iron supplements in the week before the survey.

Pregnant women should take iron tablets for at least 90 days during pregnancy to prevent anemia and other complications. About one in two women took iron tablets for at least 90 days during their last pregnancy.



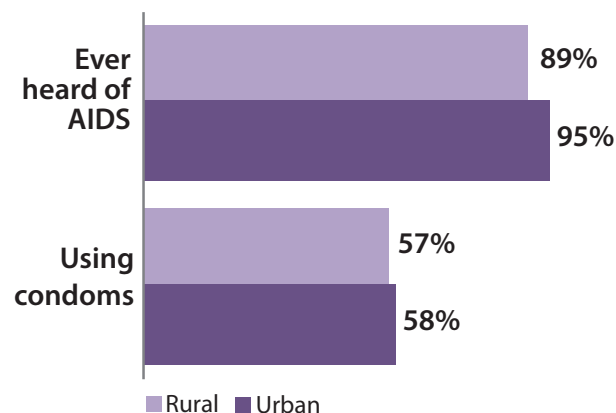
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HIV/AIDS KNOWLEDGE AND ATTITUDES

Knowledge and Misconceptions related to HIV/AIDS

Ninety-two percent of women have heard of AIDS. However, only 57% know that using condoms may prevent transmission of HIV. Knowledge about using condoms to prevent transmission of HIV is higher in rural areas than in urban areas and increases dramatically with education and wealth. For example, only 21% of women with no education know that using condoms limits the risk of HIV infection compared to 66% of those with college education or higher.

Knowledge of AIDS and HIV Prevention Percentage of women age 15–49



Misconceptions about HIV transmission are still common in the Philippines. Only 60% know that AIDS cannot be transmitted by sharing food with someone who has AIDS. Three in four women know that a healthy-looking person can have the AIDS virus.

Premarital Sex and Use of Condoms among Youth

Among never-married women age 15–24 years, seven percent said they had sex in the 12 months preceding the survey, and eight percent said they used a condom at their last sexual intercourse. Condom use at last sex is more likely among those with higher educational attainment, and those residing in urban areas.

Age at First Sexual Intercourse among Young Adults

Age at first sex among young adults age 15-24 is one of the UNGASS indicators that are reported every other year. Two percent of women 15-24 had sexual intercourse before age 15, while 19 percent of women 18-24 had sexual intercourse before age 18. Looking at age at first sexual intercourse by background characteristics, the proportions of young women who had sexual intercourse before age 15 and before age 18 are markedly lower among women who have never married than among those who have ever married. Young women in urban areas are less likely to have had sexual intercourse than young women in rural areas, whether by age 15 or 18. Education has a negative association with early initiation of sexual activity; as education increases, the proportion of women reporting first sexual intercourse before age 18 decreases.

WOMEN'S EMPOWERMENT

Employment

Sixty-one percent of currently married women age 15-49 interviewed in the NDHS were employed in the year before the survey. Among those who are employed, most earn cash (82%), while 12% are unpaid. Most women decide with their husbands how their earnings are spent. Three percent of women who earn cash report that mainly their husband decides how their earnings are spent.

Ownership of Assets

Sixty-seven percent of currently married women do not own a house, while 82% do not own land. Only 10% of women own a house by themselves. Ownership of a house or land increases with age. Women with more education and more wealth are less likely to own land or a house.

Participation in Household Decisions

Filipino women contribute to many household decisions. More than half of women decide on their own health care (52 percent) and purchases for their daily household needs (61 percent). About three in four women participate in all four of these decisions; only one percent participates in none of them.

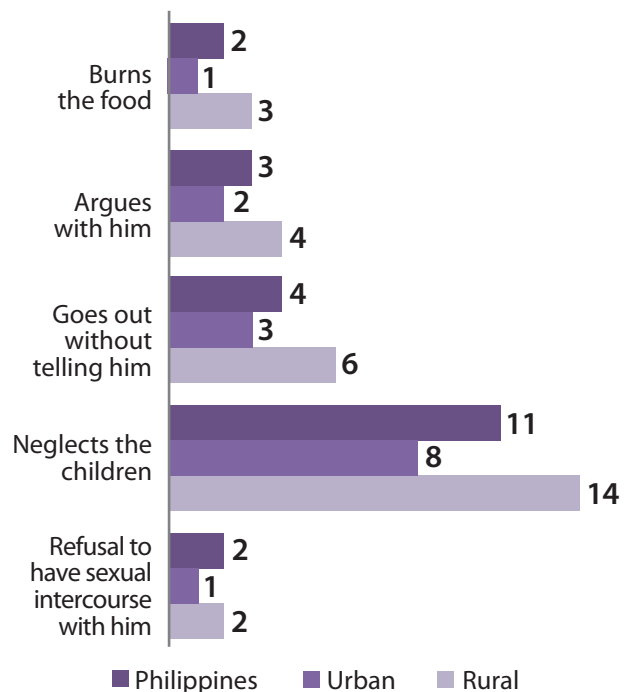
Attitudes Towards Wife Beating

Thirteen percent of women agree that a husband is justified in beating his wife for at least one reason, such as neglecting the children, going out without telling him or when she argues with him. Neglecting the children is the most commonly justified reason for wife beating among women (11 percent), while the least common reason is her refusal to have sexual intercourse with him or burning the food (2 percent each).

Women's Empowerment and Health Outcome

Women who participate in more household decisions are more likely to use a family planning method than women who participate in no decisions. About 46 percent of women participating in no decisions use a method of family planning compared to 56 percent of those who participate in 3-4 decisions. Women who participate in 1-2 decisions are also more likely to receive postnatal care (72 percent) from a medically trained provider. Women who participated in 3-4 decisions have less unmet need for family planning (17 percent).

Attitudes Towards Wife Beating Percentage of women age 15-49 who believe that a husband is justified in hitting or beating his wife





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DOMESTIC VIOLENCE

Experience of Violence

One of five women have ever experienced physical violence since age 15. Six percent experienced physical violence in the past 12 months. The prevalence of violence is higher among divorced, separated, or widowed women (42 percent) than currently married women (22 percent) and never-married women (13 percent). The most common perpetrator of physical violence is the current husband. Six percent of women have ever experienced sexual violence. Three percent of women reported that they have experienced sexual violence in the 12 months before the survey. Violence during pregnancy may threaten not only a woman's well-being but also her unborn child. Among women who had ever been pregnant, 4% experienced physical violence during pregnancy.

Spousal Violence

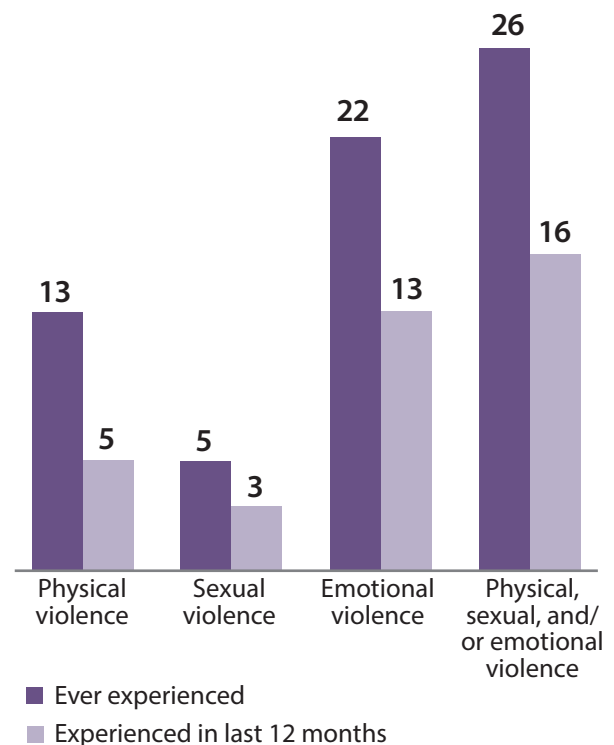
Emotional violence is the most common type of spousal violence: 22 percent of ever-married women report having ever experienced emotional violence by

their husbands or partners, while 13 percent report that the violence occurred in the year prior to survey. Insulting or making her feel bad about herself is the most common type of emotional violence reported.

Women who are divorced, separated or widowed (50 percent) are more likely to report spousal violence (physical, sexual, or emotional). As expected, experiences of violence increase with the number of living children (22 percent among ever-married women with no children compared to 32 percent among women with five or more children) but decrease with wealth (29 percent for poorest women compared to 20 percent for wealthiest women). Women living in Cagayan Valley, MIMAROPA, Bicol, Central Visayas, Northern Mindanao, Davao and Caraga are most likely to report spousal violence (30 percent or higher), while women in ARMM and CALABARZON are least likely to report violence (lower than 20%).

Women's Experience with Spousal Violence

Percentage of ever-married women 15–49



INDICATORS

	Philippines			Residence		Regions				
				Urban	Rural	National Capital Region	Cordillera Administrative Region	I-Ilocos Region	II-Cagayan Valley	III-Central Luzon
Fertility										
Total fertility rate (number of children per woman)	3.0	2.6	3.5	2.3	2.9	2.8	3.2	2.8	2.7	
Median age at first birth for women age 25–49 (years)	23.5	24.3	22.6	25.0	23.4	23.8	22.3	23.8	24.1	
Women age 15–24 who are mothers or currently pregnant (%)	26.8	24.9	29.2	24.3	28.5	30.1	36.5	25.9	24.2	
Median age at first marriage for women age 25–49 (years)	22.3	23.1	21.5	23.7	22.5	22.8	21.0	22.6	23.0	
Currently married women age 15–49 who want no more children (%)	62.3	62.4	62.2	62.3	57.8	64.4	68.2	62.2	66.0	
Family Planning (currently married women, age 15–49)										
Current use										
Any method (%)	55.1	56.5	53.8	61.1	61.2	54.4	58.9	61.2	55.7	
Any modern method (%)	37.6	37.8	37.5	40.1	44.0	37.5	51.5	44.9	36.1	
Currently married women with an unmet need for family planning ¹ (%)	17.5	16.7	18.2	14.0	12.4	19.3	15.6	13.1	17.8	
Maternal and Child Health										
Maternity care										
Pregnant women who received antenatal care from a skilled provider ² (%)	95.4	96.7	94.2	98.7	98.1	97.4	97.2	97.7	97.1	
Births assisted by a skilled provider ² (%)	72.8	83.2	63.6	90.9	85.4	90.0	64.4	87.8	84.6	
Births delivered in a health facility (%)	61.1	72.4	51.3	82.1	75.0	67.2	50.6	68.3	65.7	
Child vaccination										
Children 12–23 months fully vaccinated ³ (%)	68.5	72.7	64.7	79.5	83.6	61.1	54.7	68.9	76.6	
Nutrition										
Children under 5 years who are low birthweight babies (%)	21.4	21.1	21.8	21.4	18.6	17.3	21.7	23.1	21.9	
Ever breastfed (%)	93.7	93.0	94.4	94.1	96.5	93.8	96.0	86.0	92.6	
Children under 5 years who were given Vitamin A supplements (%)	85.2	84.2	86.2	82.2	84.9	87.2	86.7	89.6	83.8	
Childhood Mortality (deaths per 1,000 live births)⁴										
Infant mortality	23	19	28	16	16	23	20	23	19	
Under-five mortality	31	25	38	22	25	26	21	31	23	
HIV/AIDS-related Knowledge										
Has heard of AIDS	91.9	94.6	88.9	95.6	96.7	91.4	80.7	95.5	92.7	
Knows way to avoid HIV by using condoms (%)	57.1	57.5	56.7	53.1	65.3	54.5	47.5	55.4	61.0	
Knows a healthy-looking person can have the AIDS virus (%)	72.5	76.3	68.3	79.4	82.8	53.0	47.5	76.7	69.7	
Gender-based Violence										
Ever experienced physical violence since age 15 (%)	19.6	20.0	19.2	18.3	22.1	18.0	28.0	16.1	16.1	
Ever experienced physical or sexual violence committed by husband (%)	14.6	14.9	14.3	14.9	15.1	15.4	23.6	12.3	10.6	

¹Currently married women who do not want any more children or want to wait at least two years before their next birth but are not currently using a method of family planning.

²Skilled provider includes doctor, nurse, or midwife.

³Fully vaccinated includes BCG, measles, three doses each of DPT, polio and Hepa-B (excluding polio vaccine given at birth).

⁴Figures are for the ten-year period before the survey except for the national rate, in italics, which represents the five-year period before the survey.

Regions

	IVB-Mimaropa	V-Bicol	VI-Western Visayas	VII-Central Visayas	VIII-Eastern Visayas	IX-Zamboanga Peninsula	X-Northern Mindanao	XI-Davao	XII-Soccsksargen	XIII-Caraga	Autonomous Region in Muslim Mindanao
	3.7	4.1	3.8	3.2	3.5	3.5	3.5	2.9	3.2	3.6	4.2
	21.6	23.3	23.4	23.4	22.8	22.2	22.9	22.5	21.8	22.4	22.0
	28.1	26.6	26.6	24.6	24.8	26.4	28.9	30.2	29.5	37.6	24.4
	20.5	22.0	22.5	22.7	21.6	21.0	21.6	21.6	20.7	21.1	20.0
	62.5	66.1	69.0	66.2	61.1	48.8	62.2	61.8	62.5	60.0	31.4
	51.2	44.9	55.4	54.8	61.7	47.3	50.7	53.8	57.5	54.2	23.9
	39.7	21.2	34.3	34.0	37.0	36.2	37.6	39.3	44.2	39.0	15.1
	20.8	27.4	20.0	19.1	11.9	21.0	20.2	17.5	15.6	13.7	27.6
	91.3	97.0	97.9	98.4	95.6	94.0	94.6	97.6	91.6	97.0	52.8
	41.3	65.0	67.8	80.9	67.4	52.0	63.3	67.7	55.7	63.2	20.4
	36.5	50.8	61.2	71.8	61.6	43.4	52.5	62.9	48.5	55.5	12.3
	65.2	61.9	62.2	66.7	65.0	69.2	65.3	71.1	68.7	75.3	29.4
	25.3	19.6	19.2	25.5	18.2	24.9	20.6	16.1	24.5	25.1	21.8
	93.4	97.5	95.7	96.9	97.1	93.1	93.9	96.1	94.2	90.4	95.6
	84.5	88.3	83.9	90.7	87.0	86.6	91.4	83.7	86.8	88.4	61.4
	36	21	25	26	19	27	25	26	37	33	32
	43	33	30	34	32	35	49	37	52	39	55
	91.2	94.5	98.0	92.6	95.6	87.6	92.8	94.3	85.8	90.9	52.2
	49.6	57.9	64.4	62.0	75.2	60.4	61.3	60.7	51.7	62.5	22.2
	68.0	70.2	72.1	81.2	85.1	74.7	79.9	74.8	65.2	77.5	42.4
	23.3	24.8	19.9	18.1	23.0	18.3	24.3	24.0	21.3	24.7	15.1
	20.4	17.5	12.8	12.4	16.0	14.5	17.5	18.2	17.4	19.7	5.9

