

**Statement to The Hague Forum, 8-12 February 1999**

**As written:**

STATEMENT

by

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of

**REPUBLIC OF THE PHILIPPINES**

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Mr. President, Excellencies

On behalf of the Philippine Delegation, I wish to thank the United Nations Population Fund for inviting us to this Forum. To the Government and the People of the Netherlands, our congratulations for the leadership you are showing, especially in relation to developed countries which have reneged on their funding commitment made in Cairo.

It has been more than four years since the ICPD Program of Action was adopted. Having committed ourselves to the Program of Action, I am here to report for the Philippine government what have been accomplished since Cairo and to outline what we plan to do under the administration of President Estrada, who was elected less than eight months ago on the strength of a pro-poor and market-friendly socioeconomic and political platform.

Since the Cairo Conference, the Philippine government worked closely with NGOs and peoples' organizations to push reforms that promote development that is broad-based, sustainable and focused on human resources. These initiatives recognize the vital role of population and human development and seek to attain rapid economic growth without sacrificing the environment.

To help achieve this, the government worked closely with the civil society to draft a medium-term development plan for 1993 to 1998 which aimed to improve the quality of life of all Filipinos through the strategy of people empowerment and human resource development which is at the same time constrained by a definite timetable for economic globalization, as shown by our strong commitment to the ASEAN vision of an ASEAN Free

Trade Area or AFTA by 2004. It was therefore all the more important to pursue a social reform agenda to alleviate the socioeconomic status of the lagging sectors of our economy which are least prepared to meet the challenge of globalization. In addition, we also decided to focus on gender equity, equality and women empowerment. This is reflected in the Philippine Plan for Gender-Responsive Development. We also made sure that our development plans are consistent with what we call the Philippine Agenda 21, our Blueprint for Sustainable Development, which is also in keeping with our commitment to the Rio Agenda 21. Philippine Agenda 21's main focus is on the interrelationships between population and environment and how development could be achieved without sacrificing the environment.

While the impact of these programs and plans cannot be felt immediately and are in fact still being measured, initial results have been positive. Strides have been made in the areas of health care, including sustainable reproductive health care systems; in the promotion of gender equality, equity and empowerment of women; people empowerment through community development initiatives; and adolescent sexuality.

After holding clean and peaceful elections in May last year, the Philippines remain firm in its commitments to the ICPD Program of Action. As already mentioned, we are now in the process of drawing up the Medium Term Philippine Development Plan for 1999-2004. This Plan will continue to highlight people-centered issues in development, with strong emphasis on poverty reduction, especially in the way the government allocates public funds and intervenes in the market.

Thus, development of agriculture through the modernization of technology and the improvement of productivity and incomes is a primary concern.

Within the regular 1999 budget of the Department of Health (DOH) some major programs affecting the overall health care system have been developed. These include the Women's Health and Development Program which seeks to ensure women's health and development through participatory strategies that enable women to take control over their health and their lives

There is also the Reproductive Health Program which seeks to monitor progress in 10 key service elements at both national and local levels of the health sector. These elements range from family planning and maternal health care to male reproductive health and prevention and management of violence against women.

The DOH's other initiatives also addressed specific and critical areas previously glossed over by the health care system. These include reproductive tract infections, family planning, adolescent reproductive health; and sustainability of family planning and reproductive health services through alternative financing schemes.

Another important initiative is the joint development of family health care packages by the national government's regional health offices and local government units. This is directed to address specific health needs at the community and household levels. These packages cover safe motherhood, immunization, water and sanitation, health of women and

older persons, and others.

In the area of gender equality, equity and empowerment of women, two tools have already been developed to deepen integration of women into the population and development mainstream. First is the framework for analysing gender responsive population policies with reproductive health perspectives. This enables us to assess the degree of gender equality, equity and empowerment of women in population activities. The second is the framework of women-centered and gender-sensitive policies and programs for women's health. This tool contextualizes family planning in the matrix of gender relations and health and reproduction. These efforts in mainstreaming gender had started even before the ICPD.

Five landmark legislation and presidential directive have been passed since 1994 to address women concerns, particularly violence against them. These include:

1. The "Anti-Rape Law" which reclassifies rape as a crime against persons rather than a crime against chastity;
2. The "Rape Victim Assistance and Protection Act";
3. The "Family Courts Act" which creates Family Courts which will have jurisdiction over cases of domestic violence;
4. The "Anti-Sexual Harassment Act", and
5. The "Paternity Leave Act".

Another significant program is the institutionalization of budget support for gender-

and-development (GAD) activities. The GAD budget, which was first operationalized in 1995, mandated all government agencies to set aside five percent of their total budget for gender-related activities.

There is also the issue of adolescent sexuality, a concern being addressed to youth through information-education and communication programs aimed at fostering a more responsible attitude to sexuality and reproductive health.

Needless to say, a lot more work have to be done. Reproductive health will be an important component of the Medium Term Philippine Development Plan for 1999 - 2004. We need to mobilize the required resources to carry out all elements of the Program of Action. Since the Cairo Conference in 1994, total funding for reproductive health and family planning reached PhP 1 billion, of which 58 percent was provided by the foreign donor community. Thus far, government, due to strong resistance from the hierarchy of the Catholic Church in our country, has been unable to allocate public funds for contraception. Furthermore, local government units, under the devolution provision of the Local Government Code, should now take a more direct and active hand in the implementation of rural health programs in general and reproductive health services in particular.

Certain policy reforms are also essential.

1) Policy reforms for institutional development must continue to strengthen population-related concerns within the larger framework of development that is pro-poor and

also market-friendly. Without any form of coercion, reproductive choices that have always been available to the rich must also be available to the poor. Such reforms should promote gender-equality and empowerment, and facilitate reproductive health concerns aimed at helping families attain desired family size.

2) Policy reforms should address the need to expand the participation of local government units and NGOs in the provision of population-related services and information, and

3) Anticipating the declining international support to rural health and public health concerns, policy reforms should encourage the search for alternative schemes to ensure the financial sustainability of such vital programs. Such schemes include the implementation of a national health insurance system to cover not only employed people but the self-employed and indigenous as well. The Government, for its part, has increased its budgetary support for the health sector and will continue doing so under the current leadership.

In closing, let me repeat that the Philippine government's development program is pro-market, pro-poor, pro-environment and pro-people. As such, there is no other way but to reaffirm the commitments that our government made in Cairo.

Thank you very much and good afternoon.