



**PHILIPPINE OBSTETRICAL AND GYNECOLOGICAL SOCIETY**  
**(Foundation), INC.**

**POSITION STATEMENT ON THE PROPOSED 2010 REPRODUCTIVE**  
**HEALTH BILLS**

The PHILIPPINE OBSTETRICAL AND GYNECOLOGICAL SOCIETY (Foundation), INC. has stated in its Mission Statement that we are a society of God-fearing Obstetrician-Gynecologists committed to serve the Filipino people by advancing the art and science of reproductive health, enhancing professional growth and welfare of its members through training and research, fostering women's advocacy programs and upholding the highest ethical standards of practice through excellent health care delivery. The Society envisions itself as the leading organization in reproductive health, working towards significant reduction in maternal and perinatal morbidity and mortality, reproductive tract infections and cancer. It aims to promote increased awareness of women's health issues through expanded community service, continuing medical education, training of members, efficient networking, active linkages and collaboration with GOs and NGOs, relevant research programs, effective public education and information dissemination, and sound health policy reforms and advocacy guided by our moral, socio-cultural and ethical values.

The POGS (Foundation), INC. is a national organization whose membership includes the whole spectrum of Philippine society. We are a heterogenous and pluralistic group of medical specialists of diverse cultural mores and persuasions with different religious affiliations and beliefs. We are singularly bound by our commitment to the Society's aforementioned mission and vision. We stand united in our diversity, respecting each other's right to his religious beliefs and not imposing our own standards on anyone. Collateral to these, we uphold the high ethical and moral standards of medical practice expected of us by the Society.

We support the REPRODUCTIVE HEALTH CARE BILL in the context of our mission-vision to uphold the equality of the rights to life for both mother and child, freedom of religious beliefs, a right to proper education on health and right to health services as may be necessary for patient's need and also the rights of the physician to his beliefs on certain provisions on services that may be counter to his religion.

Two years ago, in a Senate Hearing on the RH bills, these statistical data were presented:

- “90.3 million population ranks the Philippines as No. 12 in the international list
- 10-11 mothers die daily from pregnancy and childbirth in the Philippines
- 162/100,000 Live births die annually.
- 24/1000 Live births newborns die annually (both highest in the region)
- 100,000 of these abortions are on women 15-24 years old
- 60% of married women do not welcome another pregnancy but do not know how to prevent one.
- 4.9 million adolescents and young adults began sex lives early and has experienced childbirths.
- An estimated 400,000 induced abortions occur annually. 100,000 of which are hospitalized for complications.
- WHO recommended that Filipino families may have 2.5 babies for comfortable population growth however actual number of babies per family is 3.5.”

We agree with the dismal figures presented two years ago in the hearing of Senate Bill No. 3122. To us obstetricians, the introduction of reproductive health bills in Congress is long overdue.

As regards the current RH Bills proposed in Congress, a comparative review was done on the following bills by the Ethics and Medical Practice Committee with assistance from the Women’s Reproductive Health Advocacy Committee.

- H.B. No. 96 - Hon. Representative Lagman
- H.B. No. 101 - Hon. Representative Garin
- H.B. No. 513 - Hon. Representative Bag-ao and Bello
- H.B. No. 1160 - Hon. Representative Biazon
- H.B. No. 1520 - Hon. Representative Syjuco
- H.B. No. 3387 - Hon. Representative Ilagan and de Jesus

Although expressed differently, all the proposed House Bills espouse the following:

1. Setting up more maternal healthcare facilities and services.
2. Building more modern and complete Nursery Health Care Facilities and Services.
3. Setting up blood banks in hospitals and other health facilities.
4. Establishing centers for education and information on Reproductive Health.
5. Government to supply centers of family planning materials to help prevent unwanted pregnancies.
6. Providing mobile clinics in congressional districts that render education and information on reproductive health and sex education.
7. Humane and non-discriminating healthcare to post abortive complication cases.
8. Mandatory age-appropriate reproductive health and sexuality education in schools by adequately trained teachers.
9. Premarital counseling centers in churches and in government offices that conduct marriage licensure services.
10. Ensuring that reproductive health services are delivered with a full range of supplies, facilities and equipment and that service providers are adequately trained for such reproductive health care delivery;
11. Expanding the coverage of the Philippine Health Insurance Corporation (PhilHealth), especially among poor and marginalized women, to include the full range of reproductive health services and supplies as health insurance benefits

All the proposed aforementioned measures should be consolidated into one Reproductive Health Bill, with the inclusion of our recommendations.

We support also these provisions under Section on “Prohibited acts”:

- a. “Refuse to perform legal and medically-safe reproductive health procedures on any person of legal age on the ground of lack of third party consent or authorization. In case of married persons the mutual consent of the spouses shall be preferred. However in case of disagreement, the decision of the one undergoing the procedure shall prevail. In the case of abused minors where parents and/or other family members are the perpetrators as certified to by the Department of Social Welfare (DSWD) and Development, no prior parental consent shall be necessary.”

- b. “Refuse to extend quality health care services and information on account of the person’s marital status, gender, sexual orientation, age, religion, personal circumstances, or nature of work, provided that, the conscientious objection of a healthcare service provider based on his/her ethical or religious beliefs shall be respected; however, the conscientious objector shall immediately refer the person seeking such care and services to another healthcare service provider within the same facility or one which is conveniently accessible; provided further that the person is not in an emergency condition or serious case as defined in RA 8344 penalizing the refusal of hospitals and medical clinics to administer appropriate initial medical treatment and support in emergency and serious cases.”

**Recommendations:**

1. We strongly recommend inclusion of the following:
  - a. Inclusion of fetal health care in the element of Maternal, Infant and Child health and Nutrition, including Breastfeeding.
  - b. Protection of physician’s right to give medical advice and intervention in the case of minors, in due consideration of the latter’s right to reproductive health care.
  - c. We support patient autonomy in seeking reproductive health care.
2. Consolidate all proposed RH Bills into one.
3. To have a successful implementation of a Reproductive Health Bill, an increase in the National Budget with a corresponding increase in the allotment for health be effected so that even though the government may not afford a health budget as high as 7% as in Scandinavian countries, the government may reach the WHO recommendation of 5%, a far cry from the present 1% of the 1.6 trillion pesos.
4. We recommend the retention of the Population Commission and representation of POGS as a member of the said Commission.

## **Clarifications:**

There is much disinformation and misconception in media and other fora on the following issues. We would like to state that:

1. Contraceptive pills:
  - a. Do not cause abortion; in fact they prevent unwanted pregnancies hence nothing to abort.
  - b. Do not cause death and disease when used appropriately. The hormones in the pills are synthetic hormones that are comparable to those produced by women's ovaries. They are modified in doses and composition to make them better, safer and predictable in their medical effects.
  - c. Do not cause cancer; in fact they reduce cancer of endometrium and ovaries. The reported slight increase in the risk for breast cancer is obviated by taking pills based on the national clinical guidelines
2. Availability of Family Planning information and materials will not cause promiscuity but will reduce unwanted pregnancies, teenage pregnancies, criminal abortions and consequently reduce maternal and fetal mortality.

## **Remarks:**

- Every pregnancy should be planned, cared for and supported.
- A consolidated Reproductive Health Bill should be enacted immediately to lessen the number of mothers, unborn and newborn lives wasted daily.