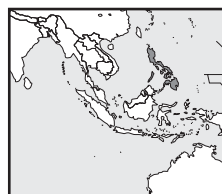


PHILIPPINES

Ten years over, ten years to go



Ten years have gone by since the Copenhagen and Beijing summits and the Philippines is still struggling to deliver on its social commitments. The country may one day wake up to face a frightening scenario: a generation of malnourished, uneducated, unhealthy Filipinos living in insecure environments.

Social Watch Philippines

Isagani Serrano¹

A scary future

The Government is compromising long-term sustainability by not investing enough in human security. Instead of social cohesion we may have a more divided society by 2015.

Table 1 shows how the projections of Social Watch Philippines contrast with the Government with respect to the country's chances of achieving minimum entitlements for the poor.

Exclusion by poverty and hunger

Poverty declined by 15.5% in the last 15 years, from 40.2% in 1990 to 24.7% in 2005. Over 21 million Filipinos remain poor today.

However official figures are contested, particularly the drop of almost 3% from 27.5% in 2001. The Government has been criticized for reducing poverty through statistics, changing its methodology by lowering the poverty line and reducing family size from six to five members. The Asian Development Bank (ADB) itself asserts that the new methodology resulted in a lower poverty headcount and the adjustment of trends. The ADB believes poverty worsened between 2000 and 2003.

Unemployment is another disputed area. Unemployment rose from 10.4% in 2003 to 11.3% in January 2005. These rates are already high enough yet many believe that the figures were adjusted to hide the reality of massive unemployment and underemployment. The new method of determining rates uses weeks instead of quarters as a time reference and as the basis for trend analysis.

Rural poverty has not improved at all and in some provinces it has even got worse. Living conditions for the growing urban poor are not much better either. Already more than half of Filipinos are city inhabitants and their numbers are expected to rise by 2015.

Inequality continues to fester. The Gini coefficient hovers at 0.48. The income ratio of the richest quintile to the poorest quintile was 16 to 1 in 2000 compared to 13 to 1 in 1990. Average household

TABLE 1

Projections on meeting the MDG targets			
MDG TARGETS	OFFICIAL ASSESSMENT	SWP ASSESSMENT	
		Overall prospects	Prospects for the poorest regions & provinces
Poverty	High	Less likely	Unlikely
Hunger/Nutrition	Medium	Unlikely	Very unlikely
Safe water	High	Access, Yes Quality, No	Unlikely
Education: Participation	High	Likely	Less likely
Education: Survival	Medium	Unlikely	Unlikely
Education: Gender	High	Parity, Yes Equality, No	Parity, No Equality, No
Child Mortality	High	Less likely	Unlikely
Maternal Health	Medium	Unlikely	Very unlikely
HIV/AIDS	High	Likely	Growing threat
Environment	—	Less likely	Unlikely
On Slum Dwellers	High	Less likely	Unlikely

income has declined by 10%, from PHP 175,000 (USD 3,230) to PHP 144,000 (USD 2,657). Household spending also went down by 8% accompanying shrinking incomes. The poor continue to be denied access to resources like land and capital.

The country is trapped by debt, with a perennial trade deficit and unable to raise sufficient revenue to finance its budget. The national debt has risen to USD 65 billion. Consolidated public sector debt is USD 107 billion.

Debt servicing eats up 85% of government revenues and if off-budget debt payments are included could run up to 51% of government expenditure for 2005.

Economic growth has been steady for 15 years, except during the 1997 Asian crisis. But it is a lopsided, narrow, inequitable and jobless growth.

The Philippines has been under-investing in basic education, at levels generally below 3% of GNP and lower than most neighbouring countries in Southeast Asia. UNESCO recommends an expenditure level of at least 6% of GNP.

The same is true for health. According to the World Health Organization (WHO), the Philippines ranks among the lowest (161st) in health spending and 126th in its overall health level. It spends far less

than other middle-income countries and is therefore unable to generate comparable health conditions.

A World Bank study of 10 Asia-Pacific countries in 1993 showed that the Philippines had the second lowest per capita health expenditure and health spending as a percentage of GDP.²

Roughly the Philippine budget is spent as follows: 33% for debt servicing, 32% for government employee salaries, 12% to basic education, 1.3% for health services, with between 10-20% lost to corruption.

The 9th National Convention on Statistics estimated that it will take 41 years for the average poor Filipino to break away from poverty. In mid-2004, the ADB reported that about 12 million Filipinos were trapped in extreme poverty and surviving on less than one dollar a day. The Philippine incidence of extreme poverty was lower than the Asian average of 21.4% but it was the highest in Southeast Asia after Laos (30.4%) and Cambodia (34.2%).³

1 This report is based on various studies and local and national consultations done by Social Watch Philippines in 2004 and 2005.

2 Philippine Institute for Development Studies. "Health Care Financing Reform: Issues and Updates". *PIDS Policy Notes* # 98-06, 1998.

3 "Hunger stalks 15% of Pinoy households", *Philippine Daily Inquirer*, 5 October 2004.



A Social Weather Stations (SWS)⁴ survey revealed that hunger rose to record levels in Metro Manila and Mindanao in 2004. Nationwide 11% of household heads surveyed said their family had nothing to eat at least once in the last three months, two percentage points higher than the previous year. In March 2005 this rose to 13% or an estimated 2.1 million families. Since SWS began monitoring the overall incidence of hunger in 1998, March 2001 registered a record high of 16.1%.

Hunger incidence in Mindanao rose to 16% which is the highest in the country. In the Visayas Islands it rose to 13%, almost doubling from 6% in September 2003.⁵ Chronic poverty in Mindanao may be explained by the failure of export crop production to bring progress to the island. Agribusiness companies in Mindanao have brought benefits only to a few agribusiness capitalists and landed families. Half of all provinces in Mindanao are also among the country's 25 poorest. At least half the population in most of these provinces live below the poverty threshold.⁶

The Government admits a low probability of meeting the target of 50% reduction in the number of people suffering from hunger based on the following evidence:

- chronic dietary energy deficiency affecting particularly young children, and pregnant and nursing women;
- protein energy under-nourishment among pre-school and school children;
- micronutrient deficiencies particularly of Vitamin A, iron and iodine among a large group of the population across ages.⁷

The Department of Environment and Natural Resources says that close to 25 million Filipinos (33%) do not have access to safe drinking water while only 26.25 million (35%) have access to water for sanitation.⁸ This explains the vulnerability of the poor to water-borne diseases, such as diarrhea, a leading cause of infant and child mortality.⁹

In some provinces only 30% or less of households have access to safe drinking water. Half of the provinces will not meet the target of improved access.

Exclusion in education

There is hardly any improvement in school access, survival and learning outcome. Primary education participation rates remained virtually stagnant over the last three years. An estimated 10% of children 6-12 years old are not in the school system. Cohort survival and completion rates¹⁰ improved marginally while dropout rates at both primary and secondary levels remain high at 7.2% and 12.8%, respectively.

Survival, more than participation, remains the bane of the education sector. A World Bank study noted that "for every 1000 entrants to Grade 1, 312 do not complete primary school, 249 finish the six-year primary at an average of 9.6 years due to repetition, and only 439 finish primary in six years." Even more alarming, of the "688 who complete primary school, only 7 graduates score at least 75% in achievement tests in English, Science and Math, which is the standard for mastery of required competencies."¹¹ Despite rising school attendance there has been no impact on functional literacy.

Based on the UNESCO Education For All (EFA) Development Index - a composite measure based on enrolment ratio, literacy rate, gender-specific survival rate up to grade 5 - the Philippines ranked 44th, falling behind Thailand, Vietnam, Indonesia and China. In quality of education as measured by survival rate, the Philippines fared no better than some of the poorest countries in Africa such as Burkina Faso and Ethiopia.

The Philippines is one of the few developing countries which has achieved basic parity between boys and girls in school access, retention and achievement. Girls have consistently out-performed boys in gross and net primary enrolment rates, cohort survival to grade 6, repetition and dropout rates and in learning achievement. This was observed throughout the 1990s and holds true generally for both rural and urban areas.

Exclusion in health care

According to National Demographic and Health Survey (NDHS)¹² statistics from 2003, the infant mortality rate declined from 34 deaths per 1,000 live births in 1990, to 29 in 2000. However 40 out of every 1,000 children born in the Philippines die before their 5th birthday.

The Philippines has one of the highest maternal mortality rates (172 deaths per 100,000 live births) in the world. In 2000, 60% of pregnancies in the Philippines were considered high-risk due to poor health conditions and narrowly spaced childbirth. The 1998 NDHS¹³ revealed that the risk of a Filipino woman dying from complications related

to pregnancy or childbirth is 1 in 100. The 1998 NDHS statistics also show that women in the Autonomous Region of Muslim Mindanao (ARMM) and Northern Mindanao face nearly double the risk, with maternal mortality rates at 200 and 300 per 100,000 live births respectively.

Social Watch Philippines and others have consistently asserted that the abovementioned maternal mortality rate masks the depth of the social problem located in many parts of the country where the figures are much higher. A fact sheet published by the Population Commission and the UN Population Fund¹⁴ revealed that 3,650 women Filipino women die each year due to pregnancy-related causes.

The high maternal mortality rates in many parts of the country are the result of a lack of access to quality healthcare services and facilities, particularly in the rural areas and large communities of the urban poor. Most births are attended by traditional birth attendants or *hilots*, many of whom lack the necessary knowledge and skills to ensure safe and healthy deliveries.

Regional disparities in access to maternal care have been noted. The number of women receiving pre-natal care from a health professional registered highest in Western Visayas (93.4%) and in Metro Manila (92.1%). In ARMM, pre-natal care is available only to 49.9% of women and only 56% of deliveries were attended by skilled health professionals. Among the regions ARMM registered both the lowest percentage of births delivered by a health professional (21.7%) and births delivered in a health facility (10.7%).

The Philippines exports many doctors, nurses and caregivers yearly, yet many women and children in rural areas die without seeing a doctor. The average hospital bill is three times the average monthly income¹⁵ despite the Generics Act of 1988, which intended to provide safe and effective but affordable drugs to low-income households. Prices of drugs and pharmaceutical products are the highest in Asia, 250% to 1,600% higher than in neighbouring Indonesia, Malaysia, India, Bangladesh and Sri Lanka.¹⁶

Right to a healthy environment compromised

The rehabilitation of our environment has seen little progress since 1990. The Philippines continues to face serious challenges in urban air and water pollution, natural resource degradation, and declining quality of coastal and marine resources. The Philippines is among the richest countries in the world in biodiversity, but its rate of deforestation is also one of the highest. Laws intended to arrest, if not reverse, the decline have been failing.

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4 Social Weather Stations was established in 1985 as a private non-profit social research institution. Its members are social scientists in economics, political science, sociology, statistics, market research, and other fields (www.sws.org.ph).

5 Collas-Monsod, Solita. "Low real income, more equal distribution", *Philippine Daily Inquirer*, 4 September 2004.

6 De la Rosa, Billy. "Food for all: Can we achieve it? (Hunger stalks the country's food basket)", *Philippine Daily Inquirer*, 10 October 2004.

7 Herrin, Alejandro, et al, 1993 as quoted by Manasan, Rosario, et al. *Financing Social Programs in the Philippines: Public Policy and Budget Restructuring*. Makati City: Philippine Institute for Development Studies, 1996.

8 Lacuarta, Gerald G. "25M Pinoys have no access to clean water - DENR" *Philippine Daily Inquirer*, 26 March 2003.

9 Department of Health. *Philippine Health Statistics*, 1998.

10 Cohort survival is the ratio of the number of students in a particular grade to the number of students in the previous grade the previous year.

11 Cited in the Education For All (EFA) plan, Department of Education, August 2004.

12 *Ibid.*

13 National Demographic and Health Survey (NDHS) data cited in the *Philippine Progress Report on the Millennium Development Goals*, January 2003.

14 Rina Jimenez-David's column in the *Philippine Daily Inquirer*, 16 July 2004.

15 Department of Health, *1999 Updates: Philippine Health Statistics*.

16 Feria, Monica. "Fighting the high cost of health," *Philippine Graphic*, 27 September 1999.

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The 2002 environmental sustainability index developed by Yale and Columbia Universities ranked the Philippines 117th out of 142 countries studied.¹⁷ In environmental quality (water, air, biodiversity), the Philippines ranked third to last.

Liberal policies have led to the relaxation of investment rules and non-compliance with environmental standards. The Government is in denial and insists that natural resources are under-exploited despite mounting evidence of overexploitation and abuse. It has opened the door wide to extractive industries, especially mining. Mining is seen by the Government as a solution to the country's fiscal crisis.

There is no shortage of environmental policy and legislation; however attempts to integrate sustainable development principles into the country's policies and programmes have failed to bring about a fundamental shift away from what many believe to be an unsustainable path of development.

What to do

The Government must realize that commitments are less about targets and more about honouring human rights obligations and commitments to social and environmental justice. Development policy must be reoriented from a human rights perspective.

Also, the Government must be held accountable for the disastrous outcomes of its liberalization, privatization and deregulation policies. A comprehensive public review is in order. Curbing corruption is urgent.

More and stronger popular mobilizations are necessary to get the Government to change policy and deliver on its promises. The Global Call to Action against Poverty is one such opportunity to raise the level of public awareness and mass action.

Statistics and their interpretation are a continuing concern for social watchers and activists. Disaggregating national figures by gender and location reveals the different realities of poverty and exclusion. Here, Social Watch Philippines has shown leadership and this should continue.

Social Watch Philippines must continue engaging local governments to translate social and environmental commitments into local development plans, budgets, and investment priorities. Success stories and lessons must be documented and spread around to serve as examples to be emulated. ■

¹⁷ Environmental Sustainability Index 2002.
www.ciesin.columbia.edu/indicators/esi/rank.html

TANZANIA

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Challenges

- Inadequate agricultural policies do not address the core problems of farmers. Poor implementation of policies leads to poor production, thereby intensifying poverty.
- A strong patriarchal system is still in place, contributing to women's discrimination, subjection and subordination, and their weak position in all development sectors.
- Stakeholders have not yet addressed equity issues in relation to the MDGs. Reports so far have focused on national averages, but it would be more helpful to explore how MDG indicators differ by gender, rural/urban setting and region.
- Corruption hinders the implementation of development projects and the provision of services to the poor majority of Tanzania.
- HIV/AIDS is also a major challenge since it creates poverty and reduces the size of the workforce.

Recommendations

- The Government, civil society and development partners must join hands and develop fiscal policies which support poor farmers, who make up the majority of the population. Sufficient production will be achieved when poor farmers have access to credit, access to affordable agriculture inputs, and access to regional and global markets. This can be achieved by improving infrastructure and access to market information.
- Cultural and traditional practices which discriminate against women and subject them to exploitation and oppression must be opposed by raising awareness in society and changing its perception of women.
- Policies must be formulated to address the quality of education, low performance levels, low enrolment, and high dropout rates, which compromise girls' educational achievements.
- The relaxation of trade barriers by rich countries can significantly increase the incomes of poor Tanzanians, and the encouragement of public and private partnerships in financing social services and infrastructure could lead to better results.

Conclusions

The Government should adopt a participatory approach and formulate different poverty eradication strategies as an essential part of poverty analysis. In this way, more regionally focused poverty strategies can be adopted which reflect the realities of poor people.

The conceptualization of poverty from a gen-

der perspective is also necessary in order to understand how men and women experience poverty differently. Although many men and women are poor, when analyzing the way poverty is both shared and distributed within families, it is evident that "all suffer but some suffer more than others".

This perspective emphasizes the role that both men and women must play in analyzing and developing strategic options in the fight to eradicate poverty. When poor men and poor women are consulted, it becomes obvious that current macroeconomic policy is limited in its ability to eradicate poverty and develop alternative development approaches which take the needs of these people into account. Therefore gender must be integrated into poverty analysis in national and international poverty debates and into the appropriate economic, political and social policies, programmes and projects for poverty eradication. ■

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There are several immediate actions the Government must take to fulfill its human development commitments made 10 years ago. First and foremost, the Government must reinstate the collection of sex-disaggregated data at every level. Without a gender analysis, it is impossible to design a package of policies that meets the specific needs of the poor, provides an array of services to the general public and ensures that the private sector does its share. For example, policies addressing paid maternity leave, childcare and specific ergonomic needs cannot be created without first having the data which reflects the extent of discrimination in the workplace.

The federal Government must enforce equal opportunity laws and raise the minimum wage. Federal and state lawmakers must strengthen their commitments to affordable housing and public health insurance while minimizing the escalation of health care costs. They must also devote sufficient funds to provide childcare for low-income working mothers and guarantee every child access to a high quality education. Welfare policies need to address the reduction of poverty with fully funded welfare benefits which compensate for inflation.

Finally, corporations must pay a wage above the poverty line, provide affordable health insurance including pre-natal care, offer sufficient retirement benefits to all of their employees including mothers who work part-time, and train women to fill managerial positions. By adequately providing for their workers, corporations can enable the Government to help those really in need; then we can truly claim to be a nation of dignified and secure women, men and children. ■