

Why I support the RH Bill  
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First of all, let me start by saying that there are a few aspects of the RH bill which, like the people who oppose the bill, I don't like. For instance, while I agree that sex and reproductive health education should be part of the intermediate and high school curricula, I don't think it should be mandatory as stipulated in Sec 16 of the RH Bill. Parents who think that they have the sole right to teach their children about sex should have the right to demand that their children be exempted from the sex education classes. I am also against Section 22 which imposes prison sentences ranging from one month to six months on people who commit acts prohibited by the bill, such as the refusal by any health care provider to perform ligation or vasectomy. There are a couple of other provisions of the bill that I don't like which I will not discuss in the interest of time, which the next speaker will most likely point out.

I have talked to the principal sponsor of the bill. I think the bill's sponsors are amenable to amendments. But I don't think they will compromise on the main thrust of the bill which is to enable "couples and individuals to decide freely and responsibly the number and spacing of their children and to have the information and means to carry out their decisions." And in this regard, I strongly support the RH bill. Let me explain why, using the arguments presented in a position paper that was signed by 27 faculty members of the UP School of Economics.

Women from families that can barely afford to put enough food on their tables can't afford modern contraceptive methods. Insisting that they all rely solely on NFP or natural family planning is to insist that they use the method that most well-educated and well-to-do women have chosen not to use. For instance, tubal ligation or female sterilization is the birth control method chosen by one-sixth of women from the richest one-fifth of our population. In other words, if one excludes women who still want to have at least one more child, more than a third of well-to-do and highly educated women would have undergone bilateral tubal ligation many years before they reach menopause. On the other hand, among poor women, who will find the cost of ligation to be prohibitive, only five percent have undergone ligation.

In contrast, only seven percent of women from the wealthiest one-fifth of our population rely on periodic abstinence or the rhythm method. There is a very simple reason why Natural Family Planning will not work for many couples. Let me quote from a column written for the Philippine Star by Father Ruben Tanseco S.J. four years ago regarding natural family planning: (Thanks to Boo Chanco for emailing it to our e-group.)

"This method, as the only one supported by the official Church for the last how many decades, has not worked effectively in our country, as far as control of population is concerned. Just to single out one reason, among others: For so many poor, uneducated couples, learning NFP as the only means of family planning is too difficult, cumbersome, and needs much discipline and spirituality. Many are not able to make it. The poor are already

deprived of so many things, and to deprive them of love-making when they spontaneously feel like doing so is to make their lives even more miserable.”

My first teacher in economics, Fr. Georges Piron CICM, a former president of the Philippine Economic Society, once told me that he thought that celibacy or permanent abstinence on his part was a lot easier than periodic abstinence from sex among married couples. If not for its tragic effects on the poor, I would have found comic relief in the fact that *periodic* abstinence from sex is the only family planning method that is acceptable to men who are committed to *permanent* abstinence. In the economics profession, the best pure theorists like Kenneth Arrow are reluctant to give advice to policy makers. Good theorists know that excessive attention to details will make the theorizing too difficult and must therefore choose which details to ignore. Hence, the reluctance to give advice to policy makers who think that the devil is in the details. Unfortunately, as pointed out by Fr. Tanseco, in terms of birth regulation, which requires understanding sexual details, the pure theorists have no such qualms.

Indeed, whether one looks at Fr. Carroll’s small sample from Payatas or the global empirical literature, the failure rate for NFP is rather high. More than 20% of women who don’t want to get pregnant and rely solely on NFP get pregnant within one year of using the method.

I’m sure Fr. Tanseco would not mind if I had added the following sentence to his column that I had just cited: To tell the poor that the state is willing to provide free elementary and high school education to their children but will not subsidize their access to family planning services is good example of Indian-giving (with apology to all the Indians). This is so since the school drop out rates for the poor are extremely high. For instance, among children from the poorest quintile of our population that enter grade one, less than two thirds will finish grade six. The state seems to be telling them that school is free, but most of their kids won’t finish school because the state won’t help them plan their families.

So why in heaven’s name should we want the poorest and least educated parents in our society to rely solely on NFP, the method that most of the richest and most educated reproductive adults in our country have found, to use Father Tanseco’s words, too difficult?

By the way, the wisdom of government subsidizing the provision of family planning services to the poor is related but not the same as the empirical question regarding the relationship between growth rates of population and the economy. Clearly, if the new or additional population is better than the original population (e.g., in terms of education and entrepreneurial ability), the increase in population will result in higher per capita income. Imagine, for example, the percentage increase in the number of medals that we would win in the next Olympics if Jamaica were to become part of the Philippines. The increase in population, on the other hand, would be only three percent. So medals per capita will skyrocket! Similarly, it should be clear that higher birth rates among the poor cannot result in higher growth of per capita income in a country with high corruption and low tax collections, and as a result, low spending on health and education.

But the issue at hand is not whether growth in our per capita income will rise if the poor had lower birth rates. That could very well be the case. But that that is not the issue. The question that really matters is whether helping the poor avoid unwanted pregnancies is good public policy. It obviously is because unwanted pregnancies are a heavy burden on the poor. Indeed,

the advocates of NFP-only policy, should not even advocate NFP if they do not think that unwanted pregnancies are a very heavy burden on the poor. Of course, a society that mandates free primary and secondary education and enshrines improving the welfare of the poor in its constitution cannot be blind to the fact that on average poor families end having two more children more children than they want. Moreover, the latest data show that poverty incidence is less than 10% for one-child families and rises steadily to 57% among families with nine or more children. But even if the number and percentage of families below the poverty line cannot be reduced by making family planning more accessible to the poor, their lives will still improve since unwanted births make the poor poorer. (And as pointed out by Father Tanseco, think of the potential increase in their welfare because of the potential increase in sex!)

Larger families make less investments in human capital per child – investments that are crucial in breaking the chain of transmission of poverty from one generation to the next. Average annual spending on education and health per child is negatively correlated with family size. While it is tragic that unwanted pregnancies could make poor families even poorer, the long-term impact on poverty of our government's inability to act decisively to help the poor plan their families is equally serious. Children from poor families are likely to be less educated, more malnourished and less healthy. In other words, today's unwanted births are quite likely to add to the future number of poor household heads and mothers.

It should also be obvious that population policy need not be coercive. Contrary to what critics of the bill say, public subsidies to the provision of family planning services do not distort market forces. Indeed, it strengthens the market and the political system as well, to the extent that better educated citizens are less likely to sell their votes. As already mentioned, there is evidence that the poor prefer smaller families than they actually end up having, except that they are unable to achieve their preference. On the average, among the poorest 10% of women of reproductive age, 44% of pregnancies are unwanted. Among the poorest families, contraceptive use is extremely low. For instance, among the poorest 20% less than a third use *modern* methods. In short, state support to family planning is not undue interference in people's choices. On the contrary, it empowers people, especially the women, and helps them implement their choices, much the same way that public subsidies to basic education enable people to make better choices.

One can of course argue that an effective family planning program will help bring down the crime rate and the number of street children and even improve the quality of the environment as it will reduce the number of people living along the creeks and riverbanks and in what is supposed to be public forests. But the empirical evidence is hard to gather and the cause and effect relationship even harder to establish and quantify. But even if the effects on the environment and the crime rate are ignored, what cannot be denied is that public subsidies to family planning services to the poor is good for the poor, and as the experience of Indonesia and Thailand shows, at fairly low cost to the government. This alone is good enough reason to support the bill. The possible good effects on per capita income growth and the quality of the environment is just gravy or icing on the cake.

One thing that the debate on the RH bill has done is increase the supply of logical fallacies. For instance, in a televised debate, the side objecting to the RH bill said that reducing corruption

would have a bigger impact on poverty than the RH bill. However, it should be obvious that it is a lot easier to make family planning services available to the poor than to reduce corruption. Moreover, it's not one or the other. We should do both. And the more we fail in reducing corruption, the more we need to help the poor avoid unplanned and unwanted pregnancies. If because of corruption we can do so little to help the poor improve their lives, we should at least help them avoid unwanted pregnancies.

Finally, some opponents of the bill say it is not necessary to legislate family planning since the executive branch can improve the poor's access to family planning services without the RH bill. This really takes the cake, since the argument is coming from the very same people who have done everything in their power to pressure GMA not to disburse the money that congress has already appropriated for modern contraceptives. That they have thus far been very successful is another reason why the congress should pass the RH bill.