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Health Care as an Electoral Issue in Pandemic-Era Philippines: Convergences, Divergences, and Prospects

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Abstract: This is a descriptive study on health care as an electoral issue in pandemic-era Philippines. Specifically, it is aimed at: 1) analyzing the convergences and divergences on the various presidential candidates' take on health care as an electoral issue; and 2) projecting the prospects for healthcare reform by highlighting social movements' recent related advocacies. The analyses will focus on how their stances either retain or aim to reverse healthcare privatization and commodification in the Philippines. The paper asserts that most of the 2022 presidential candidates converged on free health care as an advocacy, and that the dynamic relationship between veterans of the so-called parliament of the streets, think tanks, academe, and progressive parties can help precipitate a paradigm shift that would eventually galvanize public opinion to concretize healthcare reform aspirations into policy reform, even after the election cycle is over.

Key Words: Philippine elections; healthcare reform; free health care; privatization; social movements

1. INTRODUCTION

Partly because of lack of mass testing, effective contact tracing, and relatively slow-paced vaccination, the Philippines remained a COVID-19 hotspot for almost two years, at least until the end of October 2021 when new infections seem to be relatively on a downtrend. Nevertheless, new waves of infections can all of a sudden reverse trends and precipitate a new health care crisis, until the pandemic withers away (or put "under control" globally). Thus, even in the next few years, healthcare is poised to continue being among the major public issues, in a country where COVID-19 hospitalization costs compel individuals to spend for huge out-of-pocket payments (OOPs) despite having public insurance through PhilHealth and even if they also have private medical insurance through private Health and Maintenance Organization (HMOs). Pulse Asia's September 2021 polling which found personal and national concerns converging on health

(see **Supplementary Figure 1 & 2**) will mirror real-world concerns even after the 2022 elections.

2. METHODOLOGY

This is a descriptive study on health care as an electoral issue in pandemic-era Philippines. It is aimed at: 1) analyzing the convergences and divergences on the various presidential candidates' take on health care as an electoral issue; and 2) projecting the prospects for healthcare reform by highlighting social movements' recent related advocacies. For the first objective, available electoral agenda and public statements of top presidential candidates, and selected senatorial candidates will be analyzed and compared. The discourse and documentary analyses mostly focused on their 2022 election cycle pronouncements and documents (from 2021-2022), though in some instances, earlier statements and documents were also reviewed to help contextualize the paper's insights. The major political groups include the following: 1) Sambayan (Leni Robredo-Kiko



Pangilinan ticket); Aksyon Demokratiko (Isko Moreno-Willie Ong ticket); PDP-Laban (Manny Pacquiao-Lito Atienza ticket), Bongbong Marcos, Jr.-Sara Duterte ticket; Partido Lakas ng Masa/Laban ng Masa (Leody de Guzman-Walden Bello ticket); and Makabayan Bloc. This paper tackled how their stances either retain or aim to reverse healthcare privatization and commodification in the Philippines. Prospects will be projected by discussing the convergence of public opinion and various presidential candidates' stances on healthcare reform, and by highlighting social movements' recent related advocacies.

3. RESULTS AND DISCUSSION

Former Sen. Ferdinand “Bongbong” Marcos, Jr., the top presidential bet in all recent national surveys and the eventual declared winner of the presidential race, has a surprisingly unclear program for healthcare. In an interview, (Tamayo, 2022), Marcos promised to “revisit the system” and to “use our experience to fix it so that when another medical issue arises in the future we will be ready.” The most concrete policy which Marcos (2021) announced is his advocacy for “more budget...for medical research...” Marcos (2021) called upon PhilHealth to immediately settle “unpaid claims” by private hospitals. His recent lack of clarity on healthcare policies is surprising because in 2010, as a senatorial candidate, he wanted “to create a genuine free healthcare program for every Filipino” bragging that he “was able to provide 100% coverage of free healthcare” in Ilocos Norte. He co-authored Senate Bill No. 18 (filed on July 1, 2010) which mandates the automatic enrollment of every Filipino citizen into the National Health Insurance Program run by PhilHealth. The said bill languished in the Senate, but its main goal was eventually fulfilled by UHCA’s passage. He echoed similar campaign promises on healthcare in 2016, as a vice-presidential candidate. Like Moreno and Lacson, Marcos promises to continue the Duterte administration’s Build-Build-Build program (Remitio, 2021).

Vice President Leni Robredo’s official campaign website offers a separate “Kalayaan sa COVID Plan” (“Freedom from COVID-19 Plan”) on top of her economic platforms. The said plan is primarily hinged on “freedom from the fear of getting sick.” It

directly advocates “free and accessible healthcare. Free medical consultation using technology.” The said plan intends to carry on with the Universal Health Care Act’s (UHCA) implementation, remarking that it has been slow and promising to accelerate it “to ensure that free health services will be delivered to communities.” Robredo’s plan intends to “raise the capacity of hospitals,” and ensure that every region and province would have a “functioning tertiary hospital.” She also promises to hire more personnel, buy more equipment, and to double public expenditure for healthcare. She also supports Public-Private Partnerships (PPPs) in the health care sector to supposedly accelerate the delivery of services like “laboratory exams at emergency services” and the construction of healthcare infrastructure, as it deems the public sector’s capability on these matters “insufficient.” Robredo also promises to reform PhilHealth by forming professional teams that would “swiftly analyze PhilHealth’s expenses.” Rather than put a spotlight on PhilHealth’s huge payments to private (and mostly profit-oriented) firms (see **Supplementary Figure 3**), their plan would further facilitate such payments, vowing to cut “red tape” in the “process of having PhilHealth claims paid.”

Manila Mayor Isko Moreno’s official campaign website presents a “Bilis Kilos 10-Point Agenda” (“Fast Action 10-Point Agenda”) which includes health – promising to put the people first through “health and affordable treatment” – and presents a before-and-after photograph of some Manila public hospitals which Moreno impressively refurbished. Manila City government’s website (n.d.) says that services in such hospitals “...are FREE of charge” for residents. Moreno provided further details on his plan to reform PhilHealth, saying that he will “put a finance guy” to head the agency (Ranada, 2021). A separate webpage in his website is dubbed as “Build Pa More,” (“Build Some More”), promising to build at least 300 public hospitals, among other things. The same webpage offers a redirect to a video entitled “The Continuity President,” where a clip of administration Sen. Christopher “Bong” Go promising to support the presidential candidate who would continue Duterte’s policies like the Build-Build-Build program, which is essentially a synonym of PPPs, is featured, along with



a picture of Moreno shaking the president's hands. Moreno directly mentioned that he intends to carry on with national and local PPPs (Jordan, 2021). In another campaign video released on January 31, 2022 in his official social media accounts in Twitter and Facebook, Moreno also promised to reduce the doctor-patient ratio in public hospitals.

Senator Manny Pacquiao's healthcare advocacy – to “improve health care services” – is 6th in his “20-round priority agenda.” Pacquiao is a co-author of the UHCA and as a presidential candidate, he favors giving “special priority to the country's senior citizens by providing them with free hospitalization, free medical checkups, and maintenance medicine subsidies,” and promises “to strengthen and modernize the country's barangay health care system to de-clog government hospitals” (Escosio, 2021). He also wants to end corruption in PhilHealth (Bordey et al., 2022) and he opposed moves to privatize the public health insurer, pointing out that its privatization would certainly result to hiking members' premium contributions “because it would need to earn profits like other private health insurance providers” (Magsino, 2020). As a presidential candidate, Pacquiao has no public stance on healthcare PPPs, but he's a co-author of Senate Bill No. 2074 (filed on Feb. 24, 2021), which requires the national government to provide “Guarantees on Private Sector Return,” and “Guarantees on Loan Repayment” for local PPPs. Activists are opposed to such guarantees which use “public funds to guarantee business profits, not social security” (Social Watch, 2016).

Senator Ping Lacson (2021a) bats for a “healthcare coverage to all Filipinos without any financial burden from out-of-pocket medical expenses,” and purportedly “make the Universal Health Care Act not only look good on paper but actually serve its purpose...” Lacson's Reporma (Reform) partymate and senatorial candidate Dr. Minguita Padilla co-wrote the policy document “Health Agenda 2022 and Beyond” (Lacson, 2021b) but the presidential candidate did not formally adopt the document. On reforming PhilHealth, like Moreno, Lacson believes that the public insurer “should be

headed by somebody who knows accounting and fund management...” (Tamayo, 2021). He has also delivered a privilege speech on alleged PhilHealth corruption in 2019 (Lacson, 2021c). Lacson (2021d), commits to fully funding the UHCA to ensure “healthcare coverage to all Filipinos without the huge financial burden from out-of-pocket medical expenses.” Related to PPPs, Lacson promised to continue the Build, Build, Build program (Bordey, 2022).

Leody de Guzman's presidential campaign adopted Laban ng Masa's (Fight of the Masses) “25 Point Program for the 2022 Elections” which contains a concise yet comprehensive policy advocacy for healthcare: “From the proceeds of the wealth tax and the debt cancellation...fund a universal health care program delivering quality, preventive care for free...” (Laban ng Masa, 2021). Hence, he is the only presidential candidate, at this point, who has tackled the inconvenient problem of how to fund the establishment of a free healthcare system without raising public insurance premiums. A revised version of Laban ng Masa's electoral agenda (2022) reiterated free health care as a major plank in De Guzman's candidacy, along with related policies which includes reversing the privatization of public services, prioritizing public health based on primary health care, guaranteeing free quality health care, re-funding and building more and better public hospitals etc. De Guzman's campaign did not specifically mention Build-Build-Build or PPPs, but as early as 2012, their party, Partido Lakas ng Masa (Party of the Strength of the Masses) has been opposing “a Public-Private Partnership scheme which will privatize several public hospitals in the country, including the Philippine General Hospital and the National Orthopedic Hospital.” In a 2017 statement, the said party reiterated its opposition to both schemes from which – they assert – only Duterte's rich business partners would profit, and would be clawed back in the form of high fees on services and higher tax rates on the masses.

Despite not fielding their own presidential candidate – and instead throwing their support behind Robredo's candidacy – Makabayan Bloc's healthcare sector agenda merits attention and



analysis as theirs is arguably the most comprehensive, and more detailed one. Makabayan Bloc's framework – which is closer to Laban ng Masa's – is a little bit different from Robredo's. Makabayan Bloc's "Pagbabagong Makabayan Plataporma 2022" ("Pro-People Change Platform for 2022") contains 7 points, first of which is to "promote comprehensive and humane response to the pandemic," encompassing policies such as expanding, strengthening, and ensuring sufficient budget for the health care system (Labog, 2021b). Neri Colmenares (2021), one of Makabayan Bloc's two official senatorial candidates, urged presidentiables to adopt "...a more comprehensive and thoroughgoing overhaul of the public health system..." as "(t)he COVID-19 pandemic has exposed the weaknesses and limitations of the current public health system. It's a system that is severely lacking, expensive for ordinary people, disjointed and inefficient. The country needs a new integrated, comprehensive and free public health system." He adds that "(t)o achieve this, we need a new law that will give public health facilities... enough funding, supplies and personnel to provide health services FREE OF CHARGE." Furthermore, he asserts that this requires "the reintegration of the currently devolved public health system, with an emphasis on preventive and community-centered health services." Colmenares presented the same points in Makabayan Bloc's 5th National Convention in the same year. Also in 2021, under the 18th Congress, the Makabayan Bloc filed the 20-page House Bill 9515 ("An Act Providing for a Free, Comprehensive, and Progressive, National Public Health Care System") which intends to remake the country's health care system away from commodification and privatization, closer to genuinely universal health care system where tax-funded free health services – with no OOPPs – are available at least in public health care facilities. The most far-reaching reforms that the said bill proposes include: 1) instituting tax revenues as the sole source of funds for the public health care system thereby abolishing PhilHealth and doing away with mandatory contributions (Section 6; Section 32-33); 2) free health care in public health facilities (including free medicines) with no OOPPs (Section 6); 3) free oral and dental health care services in all facilities (Section 13);

4) renationalization of health services (Section 18); 5) setting minimum standards for public health care facilities (Section 23); 6) prohibition of privatization (Section 34); and 6) tax holidays and incentives for local private hospitals in areas where there are no public facilities (Section 39). PPPs are not directly mentioned in Makabayan Bloc's electoral statements, but it is a consistent critic of PPPs. In 2016, Colmenares and other Makabayan Bloc legislators voted against the "institutionalization of the Aquino administration's Public-Private Partnership (PPP) scheme" (Cruz, 2016). Makabayan Bloc also actively opposed the privatization of the Philippine Orthopedic Center under the PPP scheme (Reformina, 2014). Reversing privatization and commercialization of and increasing public expenditure for social services such as healthcare (Point 2), and demanding accountability with regard to what it labels as "plunder" in PhilHealth and other agencies (Point 5), are also part of Makabayan Bloc's 2022 electoral agenda (Labog, 2021). Makabayan Bloc is the only group that calls for the abolition of PhilHealth in the long run thru House Bill 9515. A Makabayan legislator opined that "(i)nstead of giving funds to a privatized and marketized healthcare system, funds should instead be given to public hospitals..." (Mercado, 2020). Makabayan Bloc envisions establishing a fully tax-funded public healthcare system where public funds directly finance the operation of hospitals, salaries of healthcare personnel etc. – similar to Laban ng Masa and De Guzman's policy objectives, albeit, minus the abolition of PhilHealth. Meanwhile, Pacquiao and Lacson would also want corruption in PhilHealth to stop, while Lacson, Robredo, and Moreno all favor reforming the public insurer by appointing an actuarial scientist or a financial expert as its head. To fully fund the public healthcare system, Makabayan Bloc's House Bill 9515 mandates the use of existing taxes and other sources of public funds, while Laban ng Masa and De Guzman call for a wealth tax. Combining both proposals would be preferable, considering the huge costs of healthcare in a country with an ever-burgeoning population like the Philippines. The huge administrative costs of running a government-owned corporation like PhilHealth, seems to bolster the practicality of abolishing it altogether to save money on administrative costs



(related to collecting premium contributions and disbursing claims) and directly rechannel such freed funds to the public healthcare system. Lacson is the only other presidential candidate to directly promise full funding for the public healthcare system, but he offered no details as to how he would implement it. Without directly promising full funding, Robredo's, Pacquiao's, and Moreno's promises would effectively require full funding or at least, drastically bigger public expenditure for the public health sector too.

4. CONCLUSIONS

Supplementary Table 1 summarizes the convergences and divergences of the presidential candidates on healthcare issues. On health care cost, there is convergence in supporting free healthcare, while on the issue of health care insurance, candidates converged on reforming/overhauling PhilHealth, with the exception of the Makabayan Bloc (that favors the abolition of PhilHealth) and Marcos (who has no clear stance on the issue). With regard to health care financing and PPPs, most of the candidates converged on the status quo (using existing tax revenues and PhilHealth premium contributions to finance healthcare; and continuation of PPPs). De Guzman diverges on the rest in advocating for a wealth tax to supplement existing revenues for healthcare financing. Both De Guzman and the Makabayan Bloc also diverged from the rest in opposing PPPs. Robredo, Lacson, and De Guzman all favor free healthcare for all – like Makabayan Bloc – while Pacquiao favors free healthcare for senior citizens, and Moreno advocates for affordable healthcare. Marcos seems to favor free healthcare based on his promises in past campaigns. It is in healthcare PPPs that the difference between the mainstream presidential candidates on the one hand, and the social movement-linked groups (Makabayan Bloc and Laban ng Masa and De Guzman) on the other hand, is more pronounced. Robredo clearly stated that she supports healthcare PPPs while the rest of the mainstream candidates also impliedly support healthcare PPPs within the context of their over-all support for and/or promise to continue PPPs and the Build-Build-Build program in general. Such stark difference in the stance on Build-Build-Build and PPPs matter because healthcare PPPs have been in existence for many years now and a house bill

has been passed, under which healthcare PPPs could be considered as forms of privatization, and thus, in effect, de-facto healthcare commodification too.

On the issue of free healthcare and full funding for the public healthcare system, a broad consensus is now clearly present (see **Supplementary Table 2**). Social movements' past and present healthcare advocacies are now becoming part of the political mainstream. The earliest multisectoral push for health care for all citizens is observed in BAYAN's "Deklarasyon ng Mga Prinsipyo at Ang Pangarap ng Isang Pambansang Demokratikong Lipunan"/"Declaration of Principles and Our Aspiration for a National Democratic Society" (c.1987) which contains the following health care advocacy: "The State must ensure effective and sufficient delivery of basic social services. Be it free or affordable, the provision of ample and suitable health and medical services must be ensured." Partido ng Bayan/PnB (literally, People's Party), a left-wing party established in 1987 by BAYAN-affiliated forces, and the precursor of Makabayan Bloc, released an updated "Vision and Program of Government" in 1991, expressing its plan to "provide free primary health care and socialized forms of medical services and hospitalization." Fast forward to 2015, Makabayan Bloc's official declaration of endorsement for the presidential & vice-presidential ticket of Grace Poe and Chiz Escudero pointed out their pledge to "increase the budget and expand the system of public education, hospitals, health centers, and housing..." Poe and Escudero's signed response to the said endorsement (2015) provides details of such health care policy: "The health of everyone is important. A person's family must not become bankrupt because of his/her sickness...Public hospitals must be increased and strengthened...The policy of commercialization and privatization of public hospitals must be reviewed. Health care services is not a privilege for those who have money, but a right that must be enjoyed by everyone in society."

In the current election cycle, Makabayan Coalition/Bloc (2022) has thrown its weight behind Robredo's presidential campaign, citing common points between the former's and the latter's platforms, first of which includes strengthening and expanding the public healthcare system, which, as explained



above, is tantamount to establishing a free, fully-funded system. Another milestone in this campaign cycle is Nurses United Partylist's attempt to register (2021), which, though unsuccessful, remains an important threshold for healthcare reform as the said group is the first healthcare professionals' party which includes pushing for "the enactment of free, comprehensive, quality health services including free and quality safe medicines in the country..." in its prospective legislative priorities. During and in between elections, the existence of such partylist would ensure that a robust public campaign for free healthcare will have a focused, dedicated, and competent set of core leaders. Ideologically, Nurses United Partylist is more closely aligned with the Makabayan Bloc, but its registration is nevertheless vigorously supported by Carl Balita, a senatorial candidate under Moreno's Aksyon Demokratiko. Balita includes healthcare as among his three advocacies in his campaign. Another senatoriable, running under Lacson's Reporma party, Dr. Minguita Padilla also lists free treatment under the Universal Healthcare framework as among her campaign priorities. Pacquiao's inclusion of Makabayan Bloc's Colmenares and Labog – both free healthcare champions – in his official senatorial slate further highlight the consensus on free healthcare advocacies. A multisectoral formation for accessible healthcare already exists (UHC Watch) but a more progressive formation is needed to highlight free healthcare, as accessibility is clearly not the only problem in the Philippine health care system. Such more progressive formation would help broaden the advocacy coalition needed to pass any meaningful legislation (Elgin & Weible, 2013). Coalitions can only be built through convincing a variety of groups to work towards a key goal which overlaps with their advocacies/principles. Hence, the broad consensus on free healthcare can only be translated to successful legislation or executive action if proponents from various groups are able to transcend their individual differences so as to focus on one policy goal which they all want to achieve. With the pandemic still in everyone's mind, the time is ripe for such formation to exist and flourish. Past initiatives against healthcare privatization such as Network Opposed to Privatization (NOP) could be revived and steered towards prioritizing free

healthcare advocacy as a pro-active alternative to a merely anti-privatization campaign (which aims to rollback regressive measures – focusing against privatization – but does not effectively wage a "fightback" for free healthcare). Seasoned organized groups of healthcare personnel – from Health Alliance for Democracy/HEAD to Council for Health and Development/CHD, both affiliates of the NOP – are certainly well-equipped in accepting such a challenge. Indeed, HEAD has been championing the free health care cause consistently, and even led a petition drive for the establishment of "Genuine Free Health Care Services for the People" in 2020. These groups should link with political groups – or at least elements of those – that support free health care as an advocacy. The dynamic relationship between veterans of the so-called parliament of the streets, think tanks, academe, and progressive parties can help precipitate a paradigm shift that would eventually galvanize public opinion to concretize healthcare reform aspirations into policy reform, even after the election cycle is over. Future researches could further expound on how such links can be formed and strengthened to build effective and durable advocacy coalitions that are capable of shepherding legislation towards passage and implementation, even outside the election cycle. A more detailed and comprehensive analyses of the social movements' impact on healthcare reform – which the current paper admittedly tackled sparingly due to space constraints – is another relevant topic worth expounding on in future researches.

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6. REFERENCES

Full list of **References, Supplementary Figures 1-3 and Supplementary Tables 1 and 2** are available at: <https://www.researchgate.net/publication/361244137>