

## PHILIPPINE MEDICAL ASSOCIATION



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### Background

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In 1903 the Philippine Medical Association (PMA) was organized mainly to address the needs of medical doctors in the Philippines and to promote excellence in the practice of medicine in the country. However, after more than a century into its foundation, the organization found itself playing a greater role that encompasses what it was supposed to basically do. In response to the call of times the PMA has evolved from a mere professional organization into a vital and active partner in nation building.

The Philippines has undergone several revolutions in the past. Each was supposed to lead into a better and more resilient citizenry effectively responsive to the changes of the times. Most recent of such a revolution happened in February 1986 along a historic stretch of land called Epifano de los Santos Avenue or EDSA as it is popularly known today.

The 1986 EDSA revolution personifies the awakening of a nation, particularly its people, to its inherent power to cause positive change in the broad spectrum of things that affect its daily life. We Filipinos call this phenomenon “people power.” It is the Philippines’ gift to this imperfect world for even as I speak to you now “people power” is actively reshaping our world. Middle Eastern and African countries like Egypt, Libya, Syria, and many others has been or is in the process of being transformed by this said phenomenon. In the western world, the “Occupy Wall Street” anti-corporate greed and economic inequity sentiment, which started in New York City, is spreading like wild fire in the United States and has already reached Europe and even Asia.

So what are the basic elements needed for this so called “people power” to ensue?

A valid reason, an effective network of orga-

nizations providing focused leadership and direction, an efficient mass communication machinery to deliver the said valid reason to the people for them to act, and finally a united and resolutely determined people seeking positive change based on solid conviction are some of the more important ingredients that can be forwarded to answer the above question.

But where and when do we use “people power”? Is it only used to topple down oppressive governments as it is popularly known to do today?

The resounding answer is a definite NO!!

On the contrary, this said phenomenon transcends politics and must be used to effect the needed change of heart most especially in correcting improper behavior, beliefs, and practices in all of us.

### The PMA, the Health and Other Sectors of Philippine Society

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The PMA is the umbrella organization of medical doctors in the Philippines. It counts among its current members a total of 70,000 strong physicians spread out in its 118 component or locally located societies and its 98 specialty and affiliate societies nationwide.

Recently, the PMA successfully solidified its partnership with various national professional organizations of nurses, dentists, pharmacists, midwives, medical technologists, and other professional groups belonging to the Filipino healthcare sector in general. This was borne out primarily due to the need for solidarity which was precipitated by major calamities that struck the Philippines in succession a few years ago.

The PMA also signed various memoranda of agreement for cooperation with major departments or agencies of the Philippine government

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beyond its basic healthcare agreement with our country's Department of Health (DOH).

Furthermore, the PMA has intensified its engagement with the different faith based organizations in the Philippines including various churches. Discussions however focused specifically on the general healthcare concerns of our people rather than on dogmas of faith of these varied denominations.

The PMA found these alliances necessary in order to pursue its core advocacies on health for our people. These said advocacies are currently being implemented countrywide through a proactive strategy we call tri-sectoral engagements. Such engagements crucially require the participation of government or public sector, also the private sector which includes the PMA, and finally the faith based sector of society as a whole.

The PMA has also ventured in Philippine politics. In the last May 2010 national election the PMA leadership publicly endorsed and worked for the election of former senators and then candidates for President and Vice-President Benigno "Noynoy" Aquino III and Manuel "Mar" Roxas II respectively. However beyond the endorsements, the PMA together with other health organizations crafted a comprehensive Universal Healthcare Program for then candidate Aquino to implement in his six year term as President of the Republic of the Philippines in the event that he gets elected. This program was founded basically on the concept of Public-Private Partnership engagement and a more comprehensive implementation of the Philippine Health Insurance (Philhealth) law to benefit the almost 100 million Filipinos that must be covered in the next six years. The said program also aims to address the maternal and child health, including major infectious diseases, issues embedded in the United Nation's Millennium Development Goals (UN-MDG). The UN-MDG needs to be complied by year 2016. Beyond all these, the said program intends to address the other issue of non-communicable diseases (NCD) or lifestyle related maladies that has been found to be responsible for majority of deaths due to diseases occurring worldwide.

Some of the risk factors undeniably linked to these NCDs include tobacco smoking and other environmental factors like poor eating habits and sedentary lifestyle all of which are now the subject of a PMA lead nationwide campaign in collaboration with our various partners from the

public, private and the faith based sectors of our society today.

### **H.E.R.O. and Smoke Free Philippines Advocacy**

In 2005, total healthcare expenditure in the Philippines amounted to 165 billion pesos, or about 3.5% of the GNP. Net of administrative costs, 10% was spent for public health while 80% was spent on personal health care services, majority of which has been for the treatment of diseases and their complications. Our country's healthcare spending has been focused on "sick care," paying for products and services for patients to treat diseases when people have already developed them or are in the advanced stages, with expenditures escalating as more technology, medicine, professional fees and hospitalization costs are used in management. This is a highly inefficient way of using meager personal and government health resources, especially since it is well-established that much less resources are needed to prevent the onset of these diseases. To illustrate the urgent need as well as practicality of the preventive approach, it must be pointed out that, at present, the Philippine healthcare system is beset by the double burden communicable and non-communicable diseases which are potentially preventable given the proper education of the population.

Proper information and knowledge through education are crucial cornerstones of the "people power" strategy which the PMA has adapted in its health advocacies. People can not act if they are not cleared with the reasons and the ways and means on how and why they should act.

The PMA started to use a pro-active approach to maximize its efforts in informing our people on the essential role of prevention vis-a-vis mitigation or reactionary response to a disease or a situation.

With the easily-preventable nature of both communicable and non-communicable diseases, health promotion and education can be a highly cost-effective program to reduce the burden of illness. Since majority of the morbidities involve children and young adults, the PMA is now working with government, the private and religious sectors for the integration of preventive health courses into the primary, secondary and tertiary school curriculum of our country's educational

system under our Philippine College of Physician (PCP) initiated Health Education and Reform Order (H.E.R.O.) program. This may be the most direct way to reach the population-at-risk. The youth may also share the knowledge on preventive healthcare with their families to break the cycle of health risk by starting healthier practices that may prevent the development of the top mortality causes in their adulthood (e.g. tobacco smoking, improper diet and sedentary lifestyle).

Not long ago the PMA with its partners launched a nationwide awareness campaign against NCDs. This is being championed by credible healthcare professionals and is projected to contribute to the elevation of knowledge, and hence expectations and standards for hygiene, sanitation and lifestyle among the populations at risk. The campaign aims to properly inform all stakeholders so that they will then be able to discern healthy from unhealthy practices and will be empowered to look after their own health. It is hoped that more and more Filipinos will become aware that it takes very little from every person to prevent a tremendous expense on diseases and that preventive healthcare is very doable. As individual efforts on health will likely redound to positive effects on the community, the education and awareness approach which influences individuals primarily may prove to be the most efficient, practical, realistic and effective way to reduce the burden of disease in the Philippines.

Today the PMA continues to reach out to every Filipino using our newly forged multi-sectoral network to deliver various health advocacies critical to the prevention of diseases and death among our people. Our tri-sectoral engagement coupled with the right tri-media (radio, television and print) plus cyber and social media campaigns is expected to bring down our life saving programs into the heart of most Filipinos.

### **Smoke Free Philippines**

Smoking is among the top risk factor of non-communicable diseases (NCD) that kills more Filipinos than its infectious counterpart.

Smoking kills. Second hand and third hand smoke equally kills people. This is the constant message that the PMA continuously say to our patients and the public in general as part our duty to inform them on the clear and present danger of this addiction afflicting almost 20 million Fili-

pinos today.

A few years back the PMA passed a resolution banning medical doctors from smoking and directed them to inform their patients about the life threatening effects of tobacco smoke. We also directed our smoking members to smoke cessation programs to help them kick their deadly addiction.

This was a prelude to the launching of the PMA's multi-sectoral Smoke Free Philippines campaign which is currently gaining grounds across the nation. The PMA believes that in order for our tobacco control program to succeed nationwide we must first start within our own ranks. This will afford us the moral ascendancy to talk to other sectors of society about the dangers of smoking and persuade them to act decisively against this killer addiction.

Although the international treaty Framework Convention on Tobacco Control (FCTC), has been ratified by the Philippine Senate in 2005, and various laws has been passed by both local and national government against tobacco smoke more sustainable anti-smoking action needs to be done in this country.

The undeniable influence of commercial tobacco establishments and their formidable pro-tobacco lobbyists in conjunction with the years of worldwide mass media propaganda projecting smoking as "a cool and image boosting activity" for the "in generation" to do has definitely created lasting ripples to the tobacco addiction problem of this country. The almost 20 million tobacco addicts in this nation are proof enough that this is so.

As I speak, a fierce legal battle against smoking in public places of Metro Manila has taken a negative turn. The Metro Manila Development Authority (MMDA), an active health partner of the PMA and a government agency tasked to enforce Philippine laws within the metropolis, was recently prohibited by a court injunction to implement its smoking ban on the streets of Metro Manila due to a legal technicality. This was indeed a sad day in our Smoke-Free Philippines campaign. This event however is a temporary setback because the PMA and its anti smoking co-advocates remain steadfast in our cause.

The PMA believes that real power in this country comes directly from its people. The 1986 EDSA "people power" revolution is a historic testimony to this. If this phenomenon can change

government regime twice in the Philippines and even topple unpopular authoritarian governments across the world as we observed it today then why can it not create a change of heart among our people most especially in the realms of healthcare and healthy lifestyle?

Surely if such a change of heart involving erroneous health beliefs, attitudes, behavior and practices can happen it will positively prevent deadly diseases from afflicting and killing countless of Filipino lives.

So why was the “people power” phenomenon not utilized to support the delivery of vital healthcare advocacies to our people?

Is it because Filipinos in general puts healthcare as one the least of their priorities in the hierarchy of things that they need to do? Can the reason be traced to the fact that most of our countrymen cannot afford a decent healthcare program mainly because most of them fall within or below the poverty line in the economic index of this nation? Perhaps our people were not primed enough for them to unite and push for this crucial agenda on preventive health because they were not aware of the importance and impact of this said public health agenda which absolutely can benefit all of them and the future Filipino generations to come?

Whatever the reason may be the PMA believes that the right information and knowledge when properly understood and assimilated can empower our people and direct them towards decisive action. In order to achieve this goal the PMA has adapted a two pronged approach initially for our anti-smoking campaign and ultimately for our NCD advocacy. This involves a comprehensive nationwide information and education drive generally on non-communicable diseases (NCD) and specifically on the risk factors that causes them (in this case tobacco smoking) coupled with practical and sustainable mitigation, treatment and rehabilitation programs.

The multi-sectoral network that the PMA has successfully formed to engage in various health advocacies, including the Smoke-Free Philippines agenda, is pivotal to our preventive health information and education campaign. With this strategy we can focus on specific targets or organized groups using minimal resources with high effectiveness or compliance rate to our programs.

This said network or alliance can also serve critical roles in the treatment and rehabilitation

programs contained in our Smoke-Free Philippines advocacy.

In order for the above mentioned information and education campaign to succeed credible and authoritative persons or role models has been tapped by the PMA. Aside from medical doctors influential leaders of Philippine society are continuously being recruited to volunteer and give positive testimonials in support to our anti smoking drive. We are also forming a special volunteer group composed of movie and television actors, artists, mass media and popular personalities that can influence public perceptions, opinions and behavior to help us deliver our smoke-free agenda into the hearts of our people.

Several credible studies confirmed the role that mass media played in the propagation of this deadly tobacco addiction worldwide. The PMA intends to use this same influence that mass media yields in opening the hearts and minds of our people on the killing effects of this useless tobacco addiction that holds victim almost a quarter of the Filipino population today.

Since smoking is an addiction most smokers who, finally realized the life threatening effects of tobacco smoke and, wants to quit the habit cannot to do so because of substance dependency. This is where professional help should come in.

Smoke cessation clinics are multi discipline facilities which aim to aid tobacco smokers in quitting their addiction. They act as treatment or rehabilitation centers for smokers. However in the Philippines only a handful of these facilities, majority of which are located in Metro Manila, are available to serve the needs of the almost 20 million smoker nationwide desperately needing professional help to stop their addiction.

The PMA is currently working with its co-advocates tapping the public-private partnership model in preparation for a nationwide roll out of smoke cessation clinics involving medical doctors and their private clinics nationwide. This would entail the streamlining and training of a sustainable program and qualified personnel respectively. We are hopeful that in the next six months to a year we will be able to establish sufficient numbers of smoke cessation clinics to treat and rehabilitate our smoking patients across the nation.

The simple strategy that PMA would like to employ in our quest to finally put to an end the smoking problem of our country is to stop potential smokers from being hooked or addicted to

smoking while getting smokers out of their chronic tobacco addiction through effective treatment and rehabilitation in competent smoking cessation clinics using a certified program.

The first part of this strategy can be addressed by utilizing the “people power” phenomenon through the proper dissemination of information on the ill effects of tobacco smoke to compel smokers to act and have a change of heart against their own addiction. The same phenomenon can again be used to mobilize non smokers to stand up for their rights to breathe clean and smoke free air around them. This will add a very strong but positive pressure to smokers, whose addiction threatens the life of a non smoker, to quit smoking most especially in public places.

The collective efforts of an empowered and enlightened non-smoking public on their basic right to life will be the crucial key to the realization of our Smoke-Free Philippines aspiration soon. After all, non-smokers belong to the majority block of our population as compared to the minority who smokes and continuously threaten

the rights of the non-smoking public every time they engage in their addiction.

The PMA’s Smoke-Free Philippines advocacy admittedly is an uphill battle considering the odds against it. However, we now see a very bright light behind this formidable obstacle confronting us today. We are confident that the strategy we set for this advocacy will in the end prove itself sufficient enough to eliminate this tobacco addiction that has plagued this country for a long time.

If we can succeed in this almost impossible mission of getting rid of our country’s smoking addiction then indeed the other preventable health concerns both in the communicable and non communicable diseases category will be more than doable for us to tackle.

If the PMA can succeed in addressing major healthcare concerns of our country harnessing “people power,” which the Philippines is quite known for, then we definitely can succeed in other urgent concerns of our nation beyond the issue of health.

#### PHILIPPINE MEDICAL ASSOCIATION

Country Report  
The 27th CMAAO Congress & 47th Council  
Meeting  
Taipei, Taiwan  
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#### Local Activities and Concerns

- PMA National Elections in March 2012
- Hosting of MASEAN Conference in May 2012
- National Convention in May 2012
- Disaster Management and Assistance
- Promotion and Strengthening of Advocacies
  - NCD
  - Anti-Smoking
- MOA's and MOU's
  - GO's and NGO's
  - DOH, DND, LGU's, MMDA
  - FCTC, Health Justice, Red Cross
- Medical Missions
- International Program Planning and Management
  - USAID

National Issues and Concerns

- BIR Tax Mapping and Profiling
- PHIC (National Health Insurance)
- Universal Health Care
- Physicians Act 2011