Arroyo’s health program
Medical tourism for foreigners
who could afford to pay

Instead of addressing the longstanding problem of the lack of effective and adequate health services for the impoverished people, Gloria Arroyo’s government prefers to service wealthy foreign patients. The regime’s health programs are geared towards “medical tourism.”

Medical tourism involves encouraging foreign patients to take advantage of so-called quality and affordable medical services and health care. Arroyo is keen on getting her hands on the estimated $188 billion fund to be spent on the medical tourism industry worldwide between now and 2013.

Arroyo wants to sell the Philippines as a country where foreigners can avail of cheap medical care. She intends to compete with India, Thailand and Singapore’s medical tourism by offering medical services at even cheaper rates.

Medical tourism stands as a huge contradiction in the face of the regime’s criminal negligence of medical services for the Filipino people. Public health services have gravely deteriorated under the Arroyo regime. Hospitals in many provinces, cities and towns nationwide have been closed down. No concrete steps have been taken to curb the exodus of doctors and nurses from the country. There are no plans to set up a significant drug industry or even a viable project to reduce the prices of medicines.

Instead of addressing these issues, the regime is on a mad scramble to prepare the remaining major hospitals in the country to service foreigners. The Department of Health and Department
of Tourism have been given their marching orders to prepare private and public hospitals for medical tourism. Nine out of 20 hospitals being eyed by the regime for the first phase of its medical tourism project are public hospitals.

The regime has long planned the establishment of the Philippine Centers for Specialized Healthcare (PCSH) that will integrate the resources and services of six public hospitals. It will comprise the Philippine Heart Center (PHC), Lung Center of the Philippines (LCP), National Kidney and Transplant Institute (NKTI), Philippine Children’s Medical Center (PCMH), East Avenue Medical Center (EAMC) and the planned Women’s Medical Center, a 1,000-bed facility to be set up beside the NKTI. The public Fabella Hospital will be closed down in line with the establishment of the Women’s Medical Center.

Additional plans include the construction of a national Reference Laboratory for Degenerative Diseases; centers for diseases of the blood, brain, for cancer and for physical therapy and rehabilitation. The PCSH’s construction is set to be finished by 2010.

The integration of these hospitals and the establishment of the PCSH is focused not on servicing poor Filipino patients for free but on servicing foreign patients who can afford to pay.

**False progress.** Arroyo’s claim that medical tourism will improve the economy and alleviate poverty is a lie.

Arroyo claims that medical tourism will provide more jobs. The integration of the six hospitals is sure to result in massive layoffs and continuing threats to job security for ordinary health workers.

The only ones assured of raking in huge profits are the owners of big corporate hospitals. The pockets of high-ranking government officials tasked with overseeing the transformation of the main public hospitals will also be lined with gold. The only medical professionals assured of very high incomes would be those specializing in cosmetic surgery and high-end serious medical cases such as organ transplants.

Worse, medical tourism will further encourage the illegal trafficking of body organs like kidneys, livers, hearts and eyes. Feigning concern for organ transplant patients, the DOH in a recent statement called on organ donors not to demand high prices. The Arroyo government in fact wants the Philippines to be known as a cheap source of organs for sale (or the “organ-for-sale” capital of the world) as part of its attraction as a center for medical tourism.
Death of health services, death to poor patients. The absence of any plan to raise the budgets of the six hospitals due for integration compels these hospitals to train their sights on medical tourism as a means of augmenting their meager budgets.

Medical tourism will also further encourage small town doctors and nurses to transfer to big cities in Metro Cebu and Metro Manila. It will push doctors to specialize in fields needed for the medical tourism project instead of developing expertise in diseases suffered by the majority of the people.

The regime’s focus on medical tourism will make foreign patients the priority in hospitals. The presence of foreign patients who could afford to pay high fees for kidney transplants, for instance, will push poor Filipino transplant patients further down the waiting list.

With the integration of the six leading public hospitals, ordinary folk with medical problems will have nowhere to go. The focus on wealthy foreign patients will likewise drive the cost of medical care even higher especially in hospitals geared for medical tourism.

Any income that may accrue to the government from medical tourism will not result in better quality health care for the people. The regime has an unequivocal record of neglecting the health sector, with the proportion of the national budget devoted to health care going on a progressively downward spiral.

It is a shame that the Arroyo government chooses to focus on health care for wealthy foreigners when Filipinos are dying because they could not avail of medical services or get to the few remaining medical facilities on time. The Arroyo government will be using hospitals put up through the people’s taxes to serve wealthy foreigners. It has reached the height of its criminal neglect for the medical needs of the Filipino people.
Public Hospitals
that are included in medical tourism

Philippine Heart Center
National Kidney and Transplant Institute
Lung Center of the Philippines
Philippine Children’s Medical Center
East Avenue Medical Center
Amang Rodriguez Memorial Hospital
Quirino Memorial Medical Center
Pasig Medical Center
Jose Reyes Memorial Medical Center

Source: DOH

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