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An analysis of the relationship between labor export policy and the Philippine health professional education

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Abstract

According to the National Statistics Office, 66.6% of overseas workers in the Philippines are composed of highly skilled workers or professionals, including health professionals. The Philippines is a top source of health professionals all over the world. To show the connection between the health professional education and labor migration in the Philippines, this paper explores the kind of education that health professionals receive in the country. The research uses the dual labor market theory of Michael Piore, in explaining the causality why graduates opt to choose overseas employment. Through key informant interviews and secondary data gathering the researcher found out that the education of health professional in the Philippines lacks emphasis on public service, leading to the lack of commitment of students to remain in the country where they are badly needed.

Key Words: Labor Export Policy, Health Professional education, Labor Migration, Overseas Filipino Workers, Dual Labor Market
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Chapter 1

Introduction

The Philippines during the 1970s was as promising as today’s Asian Tigers. On the education department, the Philippines had been comparable to developed countries, with its adult literacy rate of 83% and high enrolment rates in all levels. The country achieved 100 percent gross enrolment rate at the primary level, about 50 percent at the secondary and 25 percent at the tertiary level (Tan, 2001). With regards to political institutions, the Philippines had been Asia's first democracy when it declared its independence from Spanish rule.

But despite of these benchmarks or conditions, the Philippines has failed to become a development success. These educational and political advances have led to the enormous exodus of labor instead of rapid economic development. The country had failed to effectively utilize its highly educated labor force, and the government have instead opted to export them due to lack of domestic job opportunities. The Philippine government created a well-developed infrastructure for credentialing and processing workers before they are deployed overseas and provides a network of services for them through their consulates in migrant-destination countries. The government also regulates recruitment agencies and has a government recruitment agency that not only finds positions abroad for Filipinos, but also markets Filipinos to governments and private companies around the world. At present, different countries all over the world even look to the Philippines as a model for labor export due to its elaborate set of government institutions to facilitate overseas employment (TAN, 2009).

Why is the Philippine government focusing on exporting our labor force instead of giving its priority on building the country’s domestic economy and creating more jobs for unemployed
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sector in the country? This question could be given light by looking at the connection between the capacity of the state to control the education system, labor export, and economic development. In particular, the purpose of this paper is to look at the relationship between the enrolment in the health professional education in the Philippines and labor export. Does the education of health professionals determine the number of Filipinos who leave the country to become Overseas Filipino Workers (OFW)? If this is the case, how is education of health professionals affecting the labor export of those students? This paper would answer this question by showing how the government had taken an active role in exporting labor, then it will try to discuss the relationship of education and overseas employment. Lastly, it would show what is in the Philippine education system that seems to train its students for labor export.

According to a position paper submitted to the Philippine Senate Committee on Health, by the Alliance of Health Workers and the University of the Philippines College of Public Health, they attribute the exodus of nurses to three structural reasons. First, the Government’s labor exportation policy which includes skilled contract workers and health professionals; second, the aggressive recruitment strategies of local and international agencies; and lastly, the western orientation of nursing education which make Filipino graduates marketable to foreign countries (Ortin, 1994). This paper aims to focus on the third structural reason. This paper aims to discuss how the western orientation of education of health professionals contributes on the increasing number of Filipino migrant workers.

**Bringing, the State role in Migrant-Sending Societies**

Different migration studies have been conducted which explores the migrant-sending society’s perspective. These studies have ranged from studies on how to reduce the costs for migrants to
remit money to their home countries, how technology transfer is taking place between immigrant networks in Silicon Valley and business development in their home countries, how to create a system for taxing the brain drain, about the changing nature of citizenship, concerning the relationship between migration and economic development, and how migration effects the foreign policy and security of both sending and receiving countries (Ruiz, 2007). But little studies exist that looks at the role of sending states in migration. As the international migration scholar Douglas Massey states, “Few analysts have considered the role of the state in immigrant-sending societies” (Massey, 1999). To understand the role of the state in migrant-sending societies, it is important to understand how and why the state develops immigration institutions.

Traditional international migration scholars would argue that the mass exodus of labor to overseas markets is a result of high unemployment and the need for foreign currency by the sending state. Lacking in this explanation is why a state would deliberately facilitate their “out-migration” through a government overseas employment program. As Saskia Sassen has shown in her work, traditional push factors for explaining emigration are not sufficient (Sassen, 1988). She illustrates how other state economic development policies such as “foreign investment and job creation should have acted as a deterrent rather than inducement to emigration.” State policies in other arenas (for example on economic development policies) are directly affecting the sending state’s emigration policies. Thus, this paper it would try to explain how the Philippines has deliberately facilitate their labor export and how education had help to further this.
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Research Objectives

This study aims to provide an analysis in the relationship between health professionals education in the Philippines and the increasing number of overseas health workers. Specifically, the study sets to achieve the following.

(1) To discuss if there is inherent labor export policy in health professional education

(2) To show what is about the education of health professionals that it seems to train its students for labor export.

Methodology

Data Collection

For this research factors like the presence of labor export policy and its mechanisms, the oversupply of health professionals and the increasing number of overseas workers are given much considerations. Labor export could be seen in institutions like the Department of Labor and Employment (DOLE), OWWA, POEA, Technical Education and Skills and Development Authority (TESDA), International Labour Affairs Service (ILAS), Philippine Overseas Labour Office (POLO).

For this research, the researcher had conducted secondary data gathering (library and online research), three key informant interviews (KIIIs). The secondary data were used for the background and for determining the relationship between the education of would be health professionals and labor export and its connection to the increasing number of overseas workers.
The key informant interviews include Dr. Gene Nisperos of Health Alliance for democracy, Dr. Ramon Paterno of University of the Philippines-Manila National Institute for Health and Ms. Pamela Pangilinan of MIGRANTE International. Dr. Nisperos and Dr. Paterno were chosen for their knowledge with regards to the character of health professional education. The interview with them was used to explain the characteristics of health professional education in the Philippines. While on the other hand, the interview with Ms. Pangilinan was used to explain what is Labor export Policy. Their statements were supported by relevant documents to comprehensively explain the relationship of labor export and health professional education.

**Scope and Limitation**

This study has solely focused on discussing the relationship between the education of would-be health professional and labor export policy. Thus, only the conditions present in their education was examined.

The claims that are made in this study were also limited since only the conditions that are present in the education of would-be health are examined in addressing the research objectives at hand. Moreover, the data needed to prove that there is indeed a relationship is limited since it mostly came from secondary sources and the statements or opinion of the key informant interviewees. Thus, this study leaves other researchers on Philippine education to further demonstrate the validity of the generalizations stated in this study which had been based from the said sources.
Theoretical Framework

Traditional human capital theory would argue that there is an elastic relationship between educational and wages in the domestic labor market. Within the realm of a single labor market, labor is rewarded with higher wages because of the increased accumulation of knowledge, skills and training from formal education (Cain, 1976). This view failed to answer the problem in the Philippines where it has inadvertently produced surplus workers that the domestic market could not absorb. The problem lies by the failure of the internal market and the jobs available in the domestic labour market. For the analysis of the problem, Michael Piore’s theory on dual labor market could be used (Piore, 1979). Contrary to the standard human capital theory, the dual labor market theory argues that labor market is split into two segments, the primary and secondary labor markets.

The primary labor market consists of jobs that do reward people who have accumulated human capital with higher wages. Primary jobs require and develop stable working habits, skills are often acquired on the job, wages are relatively high and job ladder exist.

While, on the other hand, the secondary labor market consists of positions that have the same wage rate regardless of the person’s skills and training. Secondary jobs do not require and often discourage stable working habits, wages are low, and job ladders are few. This results in an inelastic relationship between education and wages in the secondary labor market.

Piore argues in this theory that there is something inherent about industrialized countries that create a high demand for migrant labor to fill jobs in the secondary labor market since natives are usually unwilling to fill them because of their lack of upward mobility (Piore, 1979).
The dominance of private education institutions and the absence of strong emphasis on public service serve as a major contributing factor on the continuance of the increase of overseas Filipino Workers. This however, does not work that simple. Using the theory of dual labor analysis as the main theory for analysis, it could be infer that graduates who privately paid for their education prefer to work on primary labor markets. This intent to work in primary labor market coupled with the absence of emphasis to public service make a condition for labor export. Since, primary labor market often was located in industrialized countries. Graduates, though they have a choice they would still prefer to work in primary labor markets because of higher wages.

The presence of Labor Export Policy and its machineries in the Philippines, plus the factors mentioned earlier contributes to the increase of overseas Filipino workers. In addition to factors mentioned earlier, factors like the absence of social relevance in the education of health professionals, oversupply of health professionals, the inability of the domestic economy to absorb these professionals and presence of labor export works hand in hand to cause the increased in overseas workers.
Background

Philippine Human Resource

The Philippines’ labor force was estimated in 2011 to be about 39.29 million or about 64.2% of the total number of Filipinos approximately at 89 million (NSO, 2011). Of all those in the service industry, about 1.3% are estimated to be comprised of health human resources (NSO, 2011). In 2008, unemployment rate was shown at 7.4%, and remains stable at that rate until 2010 (BLES, 2010). Even though the number of Filipinos that were employed was considerably high at 92.9% in 2010, the employment situation in the Philippines is not ideal. Underemployment in the country has been fairly high at 17.5% in 2008, and had continued to rise to still 19.6% by 2010 (NSO, 2011).

Moreover, overseas deployment continues to increase despite crisis in various host countries, particularly those of the Middle East. According to the Department of Labor and Employment (DOLE) Secretary Rosalinda Baldoz, over 1.3 million highly skilled overseas Filipino workers or international service providers were hired abroad in 2011. Furthermore, the Philippine Overseas Employment Administration (POEA) Chief Hans Cacdac said that the deployment of OFWs has posted a 5% growth as of October 2011 (Jaymalin, 2012).

The number of overseas Filipino workers was also considerably high at around 8.5 million in 2009 (NSO, 2011), and would even continue to increase according to the recent study conducted by the Philippine Institute for Development Studies (PIDS). The study also reported that the aging population of the developed countries would pave way to their increased demand of health professionals and other professionals coming from developing states. Due to the migration policies of the Philippines that provide structure for migration that is both permanent and
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temporary, the number of migrants in the population would then continue to increase (Torres, 2010).

Furthermore, Overseas Filipino Workers (OFW) remittances amount to $20.12 billion in 2011, rising 7.2 percent from 2010. Banks expects remittances to the Philippines to grow by 6 percent this year despite the prolonged crisis in the euro zone, saying that sustained demand for Filipino workers in other labor markets will boost the amount of money they send home (Remo, 2012).

**Dimensions of Health Worker Migration**

The movement of health workers could either be classified as permanent and temporary migration. Migrants mainly consist of highly skilled professionals. Several factors could be attributed why educated professionals migrate, and these include: economic need, professional and career development and the attraction of a better quality of life or a higher standard of living.

A number of macro-level factors such as high unemployment rates, low wages and per capita/GNP income, deteriorating economic conditions, scarcity of foreign exchange, and institutional policies such as those stated in the overseas contract of the POEA, push Filipinos to work abroad. Another macro-level push factor is the fact that the domestic economy of the country does not effectively absorb all health workers. At the micro-level, factors might include personal and social factors, such as providing for family needs (Chamie, 2009).

The migration decision of OFWs stems from personal factors, but such is also influences by the social and economic forces in the Philippines. This paper aims to discuss one of the social factors that largely influences an individual to work abroad and that is his/her education.
Migration of Health Workers away from the Philippines

The movement of health workers away from the Philippines as migrant workers or deployed overseas workers started in the 1950s particularly in the height of the exchange visitor’s programs with the United States. At that time, the objective of moving to another country was to obtain more advanced training from abroad and to disseminate their would-be acquired skills and learning upon their return to the Philippines so as to improve the quality of health services in the country (Lane, 1992).

Towards the end of the 1960s and the start of the 1970s, active recruitment to the Middle East and North Americas had picked up. At the end of their contracts, workers from Saudi Arabia and other Middle East countries returned. However, most of those who went to North America, especially to Canada and the United States, had stayed as migrant workers before being granted immigrant status (Asis, 2007).

In the face of widespread global nursing shortages towards the end of 1990s, recruitment conditions changed. Destination countries such as the United States offer more attractive and permanent recruitment offers (Asis, 2007).

Stock of Filipino Health Workers

The Philippine health science programs produce 23 categories of health workers (professionals and sub-professionals). Of these 23 categories, there are 9 major types of professional health workers: doctors, nurses, dentist, pharmacist, physical and occupational therapists, medical technologists, and village (barangay and other community health) workers.
Estimated production patterns of health workers in 2010 reveal that the health workers most produced in the Philippines was nurses, and the least produced is occupational therapist. The following are the estimated production trends for each category of health workers:

- Nurses (50,000 to 100,000/year) from 491 Nursing Colleges
- Doctors (2,000/year) from 30 Medical Colleges
- Dentists (2,000/year) from 31 Dental Schools
- Midwives (1,500/year) from 129 Schools
- Pharmacists (1,500/year) from 35 Pharmacy Colleges
- Physical Therapists (1,000/year) from 95 PT/OT colleges
- Occupational Therapist (200/year) from 95 PT/OT colleges

(Sources: PRC, 2010; CHED, 2010)

**Philippine Education System**

The Philippine constitution provides that the State shall protect and promote the right of all citizens to quality education at all levels. Furthermore, the state shall take appropriate steps to make such education is accessible to all. Education is necessary in order to foster patriotism and nationalism; to accelerate social progress; to promote total human liberation and development. As stated in the constitution, education shall inculcate patriotism and nationalism, love of humanity, respect for human rights, appreciation of roles of national heroes in the historical development of the country, rights and duties of citizens, strengthen ethical and spiritual values, moral character and personal discipline (Article XIV, Section 3 (2)). Education should necessarily posses qualities mentioned above, in order to produce citizens that posses the right
values and attitudes, to assure political, social and economic progress and development for the Philippines.

In Section 4 of the same Article, it is stated that the public and private schools have complementary role in achieving this goals. But, the State shall exercise at all time reasonable supervision and regulation of all educational institutions. However, the State has no power to dictate the policies of a private school.

Having stated basic provisions of the Philippine Constitution that pertains to education, we could extract four basic principles regarding the nature and scope of Philippine education system. These principles are:

1. System of education comprise of two branches: (a) Public Schools; and (b) Private Schools
2. Educational system of the Philippines is under government supervision
3. It is the duty of the government to established a system of public education that is “complete and adequate” and most of all accessible to all.
4. Educational system of the Philippines shall aim to develop citizens that were patriotic and nationalistic; respects human rights; knows their rights and duties; and, have developed moral character and personal disciplines.

**Philippine Public School System**

Public schools are schools organized and maintained by the state. The public school system is composed of public elementary, public secondary, public technical school/vocational school and Higher Learning Institutions (State Universities and Colleges) (Fresnosa & Casim,
The Philippine therefore, could be said to have a ‘complete’ public educational system. Which compose of elementary schools, secondary schools, technical/vocational schools and schools which offers instruction in the college and university level.

**Private Schools**

These are institutions which are organized and maintained by private individuals or corporations. The government do not give these institutions any form of subsidies. However, they are regulated and supervised by the state (Fresnosa & Casim, 1964). Several kinds of private schools may be identified. These are the: (a) sectarian or denominated schools, which are owned by churches or religious corporations; (b) non-sectarian; (c) schools which do not follow the regular curricula but offer only specialized courses (Fresnosa & Casim, 1964). Before private schools could operate they shall receive authorization from the government first.

**Language of Instruction**

Instructions in schools are primarily given in English (American English) language. As supplementary medium of instruction, use of local dialects is allowed. Filipino is thought as a subject in the curriculum. Local dialect could be used as a medium of instruction in Grades I and II. But, in the Secondary and collegiate levels, English should be the medium of instruction (Fresnosa & Casim, 1964).

**Evolution of our Educational System**

The present system of education in the Philippines is patterned after the prevalent state school system of the United States of America (Isidro, 1949). Since its establishment, adaptations were made to suit local conditions. In adapting the educational system the needs of the Philippines, leaders used utmost care and deliberation (Fresnosa & Casim, 1964).
Education is one of the most important institutions in human’s life. What you believe, what do you consider important are greatly affected by the way you are educated. The school as an institution could serve as an avenue in which state passes values that the state consider important.

For long education and employment was perceived to have positive relationship. Simply put, it is considered the higher your educational attainment the higher the possibility of you being employed and receiving higher earnings. In this regard education is considered to be in a form of investment that enables individuals to acquire knowledge and skills needed in order to improve their employability and productive capacities for gains in the future.

Philippine education system was always considered to receive high attendance rate implying that there is widespread interest in education (Son). The Philippines performance in labor productivity, contrast with the fact that there is a rising level of education in the country. Added to this, the low growth performance of the Philippines would become even more puzzling if we would consider the educational attainment of the labor force. In this context it is deemed necessary to asked “why does educational attainment of labor force in the Philippines does necessarily equate to high productivity?”

In this regard the next section would focus on finding the relationship between the orientation of the health professional education in the Philippines and the growing number of overseas workers based on data gathered from primary and secondary sources. After the data presentation the theoretical framework would be applied in order to fulfil the main objective of this study-to analyze the relationship between health professional education and the large number of health migrant workers.
Chapter 2

Data Presentation and Analysis

Labor Export Initiation

The initiation of labor export started during the regime of then president Ferdinand Marcos. During the 1960s, social unrest was widespread throughout the Philippines. There had been a growing unemployment among the population resulting to numerous protests all over the country. Former President Ferdinand Marcos’ main solution to this problem was to create a comprehensive overseas employment program (Kroef, 1963). With limited employment opportunities and inability of the state to control the private tertiary educational system, the Philippines produced a large educated unemployed population that could only find jobs in overseas labor markets. During the period of Martial Law, President Ferdinand Marcos issued Presidential Decree 442 in 1974 that formalized the Philippines overseas labor migration program. This promoted overseas contract work and developed the Overseas Employment Development Board (OEDB) and the National Seamen Board to facilitate the process (Landé, 1965). In a 1976 speech, Marcos was promoting the benefits of the 1974 labor export policy: “We have provided jobs for our people not only in our new and expanding industries but also in the world labor market. Filipino talents and skills are becoming ubiquitous in many parts of the world. Returning Filipino workers have helped improve our skills and technological standards.” As the labor export program expanded, the number of OFWs grew exponentially. Even though population has grown rapidly during this period, the percentage of OFWs continued to increase, reflecting the increasingly reliance on overseas employment. Overseas employment was also absorbing those who are educated. Because of its economic viability, the government extends the
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program. If one would study closely the Medium Term Development Plan (MTPDP 2004-2010) of former President Gloria Macapagal-Arroyo, the primary solution to the worsening unemployment of the country is labor export (Sigliwa, 2010). Remittances that the Philippines receive from OFW amounts to 11% of the country’s GDP. The Bangko Sentral ng Pilipinas (Central Bank of the Philippines) even admits that the remittances are one of the major machineries that keeps the economy of the country going (Sigliwa, 2010).

Labor export policy (LEP) is not a written law. According to Pamela Pangilinan from MIGRANTE International, “labor export policy is not a law, but rather, it is like a system used by the government to export labor” (P. Pangilinan, personal communication, September 29, 2011). According to MIGRANTE International in order to effectively facilitate labor export, the government should have effective machineries. The said organization further stated that there are two major departments in the government which serves as the main machineries for labor export. These are the Department of Labor and Employment and the Department of Foreign Affairs. The Department of Labor and Employment have five components that facilitate labor export. These are the Overseas Workers Welfare Administration (OWWA), Philippines Overseas Employment Administration (POEA), Technical Education and Skills Development Authority (TESDA), International Labor Affairs Service (ILAS) and Philippine Overseas Labor Office (POLO). The Department of Foreign Affairs on the other hand has four components that facilitate labor export. These include the Office of the Undersecretary for Migrant Workers Affairs (OUMWA), Commission on Filipinos Overseas (CFO), Assistance to Nationals Unit (ANU), and the Embassies and consulates.

When a nation’s population becomes far larger than what its domestic economy can readily accommodate, governments can either do nothing and allow poverty to set in or they can choose
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to export their people (Chamie, 2009). The Philippines’ labor force according to a study conducted by Benedicto Ernesto R. Bitonio, Jr. entitled “Labour market governance in the Philippines: Issues and institutions” is far larger than what the domestic economy could accommodate. Thus, the government in this case chooses to export its people (Bitonio, 2008).

The premeditated efforts with clear targets which produce structures that are tailor-made to identify employment, recruit workers, deploy workers, respond to specific needs in the foreign employment market, and direct and track inflows, maintain records of their workers abroad, offer welfare support workers while abroad, and reintegration when workers return are just a few manifestations of an intentional labor export in a country (Bakunda & Mpanga, 2011). This situation is very apparent in the case of the Philippines. Labor export efforts could be seen via the agencies like the Philippine Overseas Employment Agency (POEA) and the Overseas Workers Welfare Administration (OWWA). These agencies deliberately seek jobs outside the country. And as everybody knows, these agencies play a key role on the deployment of workers.

Labor Export is also being promoted by international organizations such as the United Nations (UN), World Bank, and the World Trade Organization (WTO). For example the UN in 2004 declared that, “The question is no longer whether to have migration, but rather how to manage migration effectively to enhance the positive side of the tally sheet and reduce the negative. Which forms of migration are desirable, and should be facilitated and under what circumstances? Which forms are undesirable and need to be rechanneled (VALUING MIGRATION: COSTS, BENEFITS, OPPORTUNITIES, AND CHALLENGES, 2004, p. 2)?” UN even affixes the promotion of the labor migration to the trade liberalization agenda of the World Trade Organization (WTO). In connection with this, the Global Forum on Migration and Development promotes the idea “that migration is an opportunity, not a threat, and as such, migration policies
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can contribute to development and to achieving the Millennium Development Goals.” As it could be seen, here there is such a high regard to the economic gains from migration. And for such governments like the Philippines have resorted to exporting their own people as a development strategy (IBON International).

**Formation of a Labor Exporting State**

According to Neil G. Ruiz on his paper “The Emigration State: Labor export as Development Policy”, the same political and economic forces that led to the formation of labor export program made the private market, the government, and the Filipino population increasingly dependent to labor export (Ruiz, 2007). The demands from these three actors laid the conditions for the labor export industry to grow. Specifically he identified social and economic responses to labor export, which include: (1) the rising demands for higher education by the Filipino population to target overseas jobs and the supply-side response of private education in meeting these demands, (2) the reliance by the Philippine government for foreign exchange from remittances to help deal with its balance of trade problems and also to continue to find employment for the educated unemployed and underemployed, and (3) the rise of the interests of Philippine businesses that were involved in remittances, overseas recruitment agencies, and the supply of higher education (Ruiz, 2007). Government incentive for private sector involvement in education started with the passage of Private School Law (Act No. 2706) in 1917. Further incentives like tax and organizational incentives were given for public sector involvement (Ruiz, 2007). Because of these incentives private sector involvement increases, these private sector led educational institutions enrol large number of students. This eventually led to the overproduction of degree holders who were unable to be absorbed in the domestic labor market, thus increasing the demand for overseas jobs. As stated earlier the specific conditions of the Philippines political
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economy pave a way for the growth of labor export. Labor export before was instituted to answer the problems on balance of payment and increase in debt and lack of employment generation in the domestic labor market. The further need for remittances and source of employment led to more dependence by the Philippine government on labor export. Because of the benefits—remittance and employment—that it gets from labor export it helped the government deal with its problem and led to further institutionalization of its policy. The increased dependence of the Filipino population and the Philippine government to labor export could be seen as a reason for the increased involvement of the private sector in labor export industry. Private banks and money transfer industries sparked throughout the Philippines to enter the remittances business. With changes in government bans, private recruitment agencies became an alternative to the Overseas Employment Development Board (OEDB) to help fill the increasing demands for overseas jobs.

These three responses to labor export made the state increasingly dependent on labor export and led to the institutionalization of labor export in its development strategy. The government created policies that would promote, rather than dissuade the production of graduates for the export market and at the same time to provide incentives for private participation in the process of exporting people and related businesses. The Philippine state continued to depend on the foreign currency that came from migrant remittances to help the country relieve its balance of payments crisis and this allow the state to continue its debt-driven export-oriented development strategy. Labor Export also became institutionalized because the private sector saw the benefits from creating businesses in the industry—not only in terms of remittances, but other services related to overseas employment such as training and education, the recruitment process, and banking facilities.
Dominance of Private Tertiary Educational Institutions

Higher education in the Philippines has historically been dominated by private institutions. It started with the development of private sectarian schools during the Spanish colonial era. Private sectarian universities were developed in the city of Manila and Cebu City which were all founded by Catholic religious congregations (Dumlao-Valisno, 2001). The Catholic Church also played a major role in primary and secondary schools during the Spanish colonialism. Public education in the Philippines began during the American colonialism with the establishment of the Department of Public Instruction. Between 1901 and 1902, more than a thousand American teachers, known as the “Thomasites,” arrived from the United States on the vessel S.S. Thomas. They taught in English and instilled in Filipinos a deep faith in the general value of education at the primary level (Dumlao-Valisno, 2001). Education began reaching the masses when the Philippine Assembly declared in the 1935 constitution that “the government shall establish and maintain a complete and adequate system of public education and shall provide at least free public primary instruction and citizenship training to adult citizens” (National Economic and Development Authority, 1977). When the Philippines became an independent nation in 1946, this mandate evolved to universal primary schooling for all Filipinos. This expansion of primary education resulted in a large demand for higher education. The University of the Philippines, the first public institution of higher education that was opened in 1908, was not capable of accommodating the large amount of applicants. The state commitment to free elementary education for the masses left the state with little resources to invest in higher education. A new generation of non-sectarian private tertiary institutions that were owned and founded by prominent Filipino families and businessmen emerged to fill this gap (Landé, 1965). These private venture colleges multiplied after the passage of the 1917 Private School Law (Act No.
This American-sponsored law gave private colleges and universities full autonomy both in funding and control (Gulosino, 2003). This allowed many of these private venture colleges to operate as for-profit institutions that eventually became highly profitable joint stock companies (Landé, 1965). Although private higher education institutions fill the gap in the demand for higher education, the autonomy left to these institutions for funding and control over curriculum had allowed private schools to be more concerned with monetary gain. At present, private higher education institutions still dominate the higher education system in the Philippines. There are 2,080 higher education institutions in the Philippines, of which 1,573 are private institutions and 607 are public institutions (CHED, 2010).

When looking at the share of private tertiary enrolment, the majority of students are studying in private institutions. Despite the growth of public tertiary schools from Marcos’ educational reform program, private institutions are still educating the majority of students (Dumlao-Valisno, 2001). In higher education, an Asian Development Bank study claims that the Philippines is second to the world only to the United States in the number of higher education institutions (Dumlao-Valisno, 2001).

Examining the growth of tertiary enrolment alone does not give a full picture of the type of training students are receiving. Succeeding sections would discuss the type of training the would-be professionals are receiving.

*Nature of Philippine education*

A lot of universities opens and offers courses, with the main objective of making their students “globally competitive”. There are a lot of universities espousing global competitiveness of its graduates as their main objective (Villegas, 2007). The course offered by these universities are
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reflective of this objective According to Professor John N. Ponsaran of the Development Studies program in UP Manila:

“If examined closely, it means that they want to make their students ‘commercially viable’ to be able to export them like products in other countries. Schools serve as if they are ‘assembly lines’ to be able to mass produce workers as products. In an economic system that capital prevails, everything becomes a commodity or a product. This includes environment, human resource, social service like education, health, culture, humanity, emotion and others. (J. Ponsaran, personal communication, January 17, 2012).

According to Dr. Edberto Villegas, a Development Studies professor from UP, global competitiveness pertains to ‘commodification of all’. Global competitiveness in this is sense is used in the paradigm of trade.

Furthermore, Professor Ponsaran stated that:

“It is apparent that traditional courses are outline according to other countries, and this is mirrored in the curriculum, assigned readings, language used in the classroom, and even the practicum or on-the-job training (OJT) for the students. For example, there are health courses that focus on geriatric care. Initially, it seems that there is nothing wrong with it but the true aim was to answer the needs of the aging population from the rich countries of the world or the Global North, instead of the welfare of their poor countrymen. There are universities who remove courses like BA Sociology, BA Public Administration and BA Political Science, and change it with courses like BS Tourism and BS Hotel, Restaurant and Institutions Management (HRIM) because these courses
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have higher demand from industry inside and outside the country. In short, the prerequisite on maintaining a course is its potential profit” (J. Ponsaran, personal communication, January 17, 2012).

The curricula of schools have been gradually patterned to the globalization programs of monopoly capitalists. Schools give emphasis to the needs of capitalist businesses, emphasizing the need to produce world-class workers (Villegas, 2007).

According to Mr. Isagani Cruz, the former Undersecretary of the Department of Education, textbooks play a vital role in the life of the people. He even stated that:

“Our English textbooks still do not realize that adverbs can modify nouns; our Filipino textbooks still teach Tagalog, rather than Filipino; our Mathematics textbooks do not use what children can see around them, thus defying the ancient - now mistakenly called constructivist - principle that we learn only from what we already know. Our Science textbooks do not excite children enough to think of pursuing careers in science. Our Social Studies (previously, Makabayan) textbooks do not make our children proud to be Filipino and do not motivate them to stay in our country (Cruz, 2010).”

Today, English as the medium of instruction serves as the strongest shackle in the chain of colonialism in which the Philippine Education system is connected (Lumbera, 2007). Furthermore, according to him, the most significant reason why English is highlighted as a medium of instruction to ensure that the Philippines can produce workers that can speak English for the world economy. This view reduces the role of education as a mere mechanism to fulfil the demands of the world market. This statement is supported by Professor Ponsaran, stating that “English is often used as medium of instruction to be able to
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communicate to foreign patients. Even the reading materials have western orientation and not contextualized on local conditions. This is especially made this way because they expect that they would apply what they learned from the university would be on transnational corporation” (J. Ponsaran, personal communication, January 17, 2012).

Health Professional Education, for whom?

To explain the problems in the health human resource sector, it is with great importance to look at the way they are produced. There are three main problems that have been identified by Dr. Ernesto O. Domingo in his paper entitled “Reforms in the Health Human Resource Sector in the Context of Universal Health Care”. These are: (1) near complete dominance by free market forces, with the demand favoured over what the market can bear; (2) capacity for training determines the quota of students rather than sustainability of graduates entering the workforce; and (3) notable absence in the educational/training program of a strong emphasis on public service and common good rather than private gain (Domingo, 2010).

Based on the data on the number of health professionals produced in the Philippines mentioned earlier, we could infer two things. First is, that we have huge numbers of health professionals graduating every year. Second, the number of medical and allied schools is of a huge number. The question is, why did such schools proliferate? These schools proliferated mainly because they have the capacity and resources to offer such courses. But, at the same time, they are being oblivious to the absorptive capacity of the public and private sector to engage in health care provision. The entry of the students in these schools occurred with little consideration to where they would go after graduation. Because there is no work to absorb these new graduates, this leads to migration to countries which can accommodate them.
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According to Dr. Gene Nisperos, Secretary General of the Health Alliance for Democracy:

“We keep on producing nurses, which is right of course, because we need nurses, but the nurses that we’re producing do not work here. Everyone is saying that we have a surplus of around 400,000 of nurses, but if you would look at our health care delivery system, we lack nurses. So why would you say that we have a surplus if our own system needs additional nurses? The answer here would be that the agency that runs our health care system doesn’t do anything so that nurses that we produced remains here in the Philippines. If we would look at the datum, 85% of all nurses that we produce are working abroad. That means only 15% of those nurses work here in the Philippines. We keep on producing but we are not preparing our system to accommodate all that we have produced” (G. Nisperos, personal communication, February 20, 2012).

In this table, it is noted that the Philippines is the only country in Southeast Asia that is included in the top 20 countries where most migrant physicians in the United States originate from.

**Public Gain over Public good**

The deliberate or serious effort to emphasize public service and the common good over private gain is in notable absence in all education and training given by the academic institutions in our
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country to would be health professionals (Domino, 2010). According to Dr. Ramon P. Paterno of the Institute of Health Policy and Development Studies, UPM-NIH:

“Instead of facing the problems of the community, the problem of our health system is that the health professional that we produce tend to concentrate on the hospitals. In addition, we produce doctors who are specialists. The big problem here is that, the way we train our health professionals teaches them to follow where the money is. And the money in health system is in the hospital, not in the community” (R. Paterno, personal communication, February 23, 2012)

This statement is supported by Dr. Nisperos, stating that “the graduates of the health profession are not trained to serve the country, they are being prepared on how they could earn” (G. Nisperos, personal communication, February 20, 2012).

While there is an increase in the number of academic institutions which offer health professional education and training, the probability that graduates would place themselves in a position that would ensure service to the country had not increased. The commercialization of education created a new generation of students that are highly-individualistic, believing that the knowledge they have acquired in schools was due to their capacity to pay and no amount of gratitude was paid towards society. Upon graduating, their main goal was to gain back what they have invested in their education from the society at large. Personal benefit is given more priority than providing public service (Villegas, 2007). Would-be health professionals are vulnerable to the pull factors of the other countries since they are thought to be career oriented, and both better careers and higher earnings are provided by other countries (G. Nisperos, personal communication, February 20, 2012)
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Heavy emphasis on the science of medicine and the know-how of the profession keeps the discussion of the social aspect of the profession at a minimum level (Domingo, 2010). Health professional education has community medicine subjects. But along with these subjects are inter-cultural studies which just offset the community medicine subjects.

**Curriculum and Training**

The design and content of the medical curriculum in the Philippines has been shaped according to the global demand for doctors, nurses, and health professionals so as to produce graduates whose knowledge, skills, and way of thinking are suitable for health systems outside the Philippines (Domingo, 2010).

As stated earlier, the primary medium of instruction in the collegiate levels is English. But, more problematic than the medium of instruction is the fact that our education is patterned after the US is even more problematic. The whole of medical education, including the entire textbook used, is from the US despite the fact that many other countries also produce good doctors. It’s not just about the language used but the whole system is patterned after the US. For example would you give the same weight on discussing about tuberculosis- a disease which a lot of Filipinos have - and tick-borne diseases which is almost non-existent in the Philippines? On a normal circumstances, no. But in the Philippines it is still studied. Education here is not based on what is relevant, nor is it based on the actual situation of the country (G. Nisperos, personal communication, February 20, 2012).

Eighty to ninety percent of textbooks used in the Philippine health professional education are not local. Almost all of the textbooks used are from the US. As an illustration, when our country was trained how to circumcise, our health professionals didn’t learn it from textbooks because there
is no circumcision in the US. Protocols and guidelines that would be health professionals would learn are based on the protocols and guidelines in the US (G. Nisperos, personal communication, February 20, 2012).

**Health professional education and its relationship with Labor Export Policy**

It is established that the Philippines produces a large number of health professionals. In the case of nurses it is estimated that there is 324,500 unemployed or misemployed nurses (PRC, 2010). Employed nurses summed up 175,000, of which 27,000 works locally and 150,000 are abroad. It could be drawn here that the graduates of medical courses face the problem of unemployment. Thus, they would turn to the international market for opportunities of employment.

As established, the government in 1970s turned to overseas employment to answer problems of unemployment. To facilitate this, the government devised machineries which would allow the smooth flow of labor migration. In turn, institutions like the POEA and DOLE were established. These institutions actively search for job opportunities abroad and they also process the papers for the employment of members from the Philippine labor force.

The theory of dual labor market could be applied to a developing country like the Philippines who have a developed education system. Graduates entering the domestic labor market that have privately invested in higher education gravitate towards more prestigious positions and higher-paying jobs. This highly educated population is unwilling to take low-paying jobs that require manual labor. In a country with a higher educational system producing more degree holders than jobs the country can absorb, like the Philippines, a specific problem occurs that is reflected in both the educated unemployment and underemployment rates (Ruiz, 2007). Although education could be seen as a way to uplift or upgrade an economy, the case of the Philippines would show
that there could be detrimental effects when the educated labor force are only willing to work in jobs in the primary labor market that they view as worthy of their educational background.

The migration flow that the Philippine state created through its labor export policy opened the labor market for its educated class to seek higher returns for their education. By creating an overseas labor market through a government labor export program, the Philippines provided not only a safety-valve, but an opportunity for those “investing” in education to be employed with high financial returns to their education.

With the increase in degree holder population in the Philippines, the labor force increasingly becomes more unwilling to take jobs in the domestic secondary labor market. This labor force could either choose to become unemployed for a longer period, accept a job in the secondary labor market and become underemployed or seek jobs in the overseas labor market. The dual labor market in the Philippines ends up perpetuating the problem of increasing dependence on an overseas labor market. This project advances the dual labor market theory in the Philippines by illustrating how education produces pressures for the state to seeking ways for the educated population to obtain higher returns from the overseas labor market.

The Philippines have oversupply of health professionals. The government answer to this problem is to look for jobs opportunities outside the country that would accommodate this supply of health workers. Using the dual labor market theory, health professionals refused to work on the secondary labor market, they would opt to work on primary labor market which often belongs to the industrialized countries. Poor working conditions and low pay also make it hard to retain qualified health professionals in service to hard-to-reach populations and many choose to emigrate to more attractive jobs abroad. In addition, some countries are unable to use all the
providers they have educated since new doctors, nurses, midwives and other health professionals cannot be deployed without sufficient budgetary resources to hire and support them.

But this does not work entirely on that sequence. The Philippine health education system is composed of largely private institutions; this gives the impression that education is a product of individual effort. Because of these, the main goal of students after they graduate is bankroll their investment to their education. They would work with the main goal of acquiring what they have invested in their education (Villegas, 2007).

The kind of education and training that would-be health professionals receive play a major role in their decision in working abroad. As shown earlier, little importance is given to the social relevance of education. With this, they do not have the awareness that they have the social responsibility to provide public service and common good. They lack the commitment to become health workers that provide universal health care. Furthermore, the undue emphasis on technical knowledge, proficiency in skills, literacy in technology, and narrow specialization prepare students for practice in first world countries rather than developing countries like ours. Though, it can’t be denied that these skills are needed to developing countries, like the Philippines, the primary concern of education is to address the immediate health concern. Countries show wide variations in the burden of different categories of disease. In low-income countries communicable diseases, maternal and prenatal conditions and nutritional deficiencies represent 69% of the disease burden against only 8% in high-income countries (as shown in the figure below). There is a mismatch of the skills that they acquire from their education to what it is needed in the country. The mix of skills they have acquired during their professional education is often not well oriented to their eventual workplace. The scientific content of their education may be poorly matched to the epidemiology of the communities in which they work.
Health professional education with its character paves way to favourable condition for international labor migration. The curriculum does not produce service oriented professionals, but rather profit-driven professionals whose main goal is to acquire financial return. With this, they would search that would give them the most profit.

Chapter 3

Conclusion

Medical and allied schools are mostly composed of private institutions, thus embedding in the students the belief that they should get back what they have spent on their education. Students and would-be health professionals calculate the benefits that they would gain in the future for
any present spending. Using the theory on dual labor market, graduates would choose to work on primary labor market because as this is where one would earn the most.

Enrolment in health professional education rose up, thus, since the Philippines cannot accommodate the oversupply of health professionals, it created an educated unemployed workforce. The presence of labor export machineries paved a way to the increasing number of overseas workers. Students mind set are conditioned to work on primary labor market, which often than not are in the industrialized world. Thus, graduates decide to work overseas.

**Recommendation**

It should be emphasized that academic excellence should also include relevance to society. Academic excellence should not be limited to achieving high grades and demonstrating superior performance. The education curriculum for health professionals should be infused with more social sciences, intertwined in the biomedico-technical subjects. Technical lecture should be introduced with the subjects social dimensions. Excellence of educational institutions should be associated with how well the students are prepared to address their context-specific population health needs (WHO Transformative Scale Up of Health Professional Education, 2011). Their education should be context based and should address the local problems instead of focussing on becoming globally competitive.

The country needs health professionals whose education and outlook prepares them to work not only on individual patients but with families, communities and population as care givers. The education should be fashioned so that students have not only the desire but also the ability to respond to the nation’s health problems. Education could not serve as ‘one solution, fits all’;
reforms on education should be partnered with government institutions effort on giving jobs to our health professionals. As earlier established, there is a shortage of health professional in the Philippines health care delivery system, but it is also established that the Philippines have enough of health professional to fill these gaps, therefore, the government with the cooperation of private health care system should create positions for these professionals, to improve the Philippines health care system.

This entails a process where health professionals become one with the people in understanding their situation and in analyzing the root causes of ill health and disease. Social medicine proponents and advocates believe that the health of the population is a matter of social concern where society promotes health, not only through individual means, but also through social and collective undertakings. In this context, health professional education should be patterned according to the needs of the society. Training and education of would-be health professionals should prepare them to respond to every health problem that the country may face. These students should be prepared to be technologically savvy and at the same time equipped to appreciate and handle the social dimensions of illness.
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