

BIBLIOGRAPHY

PAGAO, CHARLES W. OCTOBER 2012. Perception of married women in Bakakeng Norte, Baguio City towards the Responsible Parenthood, Reproductive Health and Population Development Act of 2011. Benguet State University, La Trinidad, Benguet.

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ABSTRACT

This study was conducted in June 2012 at Bakakeng Norte, Baguio City with the following objectives: to determine the socio-demographic profile of the respondents; to determine the perception and knowledge of married women regarding the RH Bill; and to determine the perceived problems that may arise upon the enactment of the RH Bill.

A total of 50 women from Bakakeng Norte were the respondents. Most of the respondents were relatively young and were able to reach tertiary level. Though, most of them were unemployed. Majority of them are Roman Catholic, Kankanaey and had a small number of children (1 to 4) even though being married from one (1) to nine (9) years. This implies that they had the freedom to decide in planning for their family.

Majority of the respondents are aware of the Responsible Parenthood, Reproductive Health and Population Development Act and were willing to support the Bill but they do not have enough knowledge and information. Their religion and cultural belief do not influence their point of view and belief regarding the Bill. They were able to sustain the needs of their family and they believed that the Bill would promote gender equality, equity and women's empowerment in terms of health and human rights; it would provide



necessary reproductive health care needs; it would eliminate discrimination against women; the state and their religion would not dictate on how they plan their own families; access to health care services would prevent reproductive tract cancers; it would avoid unwanted pregnancy; and it would promote breast feeding. They claimed that the Bill is anti-abortion and pro-life; that it would promote family planning; it would address health care needs of their families; it would provide better education for their children; it would improve their standard of living; and would provide basic needs for their families. They believed that there should be an appropriate mandatory age for sex education. They also believed that the passage of the bill would enable newlywed couples to decide the number of children they desire; that it would help alleviate the growing population in our country; that it would help parents become more responsible in raising their children; that it would give women specially the poor access to information regarding health and pregnancy issues; and that it would eliminate poverty. They also believed that sexual act would be properly exercised within marriage only with the passage of the bill.

With regards to the problems that might arise, the respondents disagreed that the state should dictate on how they should plan for their family. They agreed that it would increase incidence of premarital sex and unwanted pregnancy and that it might encourage couples to have multiple partners. The respondents agreed that the use of contraceptives may have undesirable effects, contraceptives would be accessible to young men and women and there would be a proliferation of the sale of contraceptives. They disagreed that conflict between the Church and the Government that the Bill would be a major attack on authentic human values.



RESULTS AND DISCUSSION

Socio-Demographic Profile of the Respondents

Table 1 shows that a greater number (42%) of the respondents were 20 to 30 years old and only a few (22%) were 41 to 62 years old. This indicates that majority of the respondents were relatively young. Majority of the respondents (58%) were able to reach Tertiary level and only 4% of them reached Primary level. This indicates that all the respondents are literate and could easily understand the Reproductive Health Care Bill.

As shown in Table 1, the respondents were unemployed (64%). Majority are Roman Catholics (64%); (66%) were kankanaey (66%); and with one (1) to four (4) children. Sixty percent (60%) of the respondents are married from one (1) to nine (9) years.

Table 1. Socio-Demographic Profile of the Respondents

INFORMATION	FREQUENCY (F)	PERCENTAGE (%)
Age		
20-30	21	42
31-40	18	36
41 to 62	11	22
TOTAL	50	100



Table 1 continued...

INFORMATION	FREQUENCY (F)	PERCENTAGE (%)
Educational Attainment		
Primary Level	2	4
Secondary Level	19	38
Tertiary Level	29	58
TOTAL	50	100
Occupation		
Unemployed	32	64
Employed	18	36
TOTAL	50	100
Religion		
Roman Catholic	34	68
Others (Anglican, Jehova, Born Again, Lutheran, Iglesia Ni Cristo, Baptist)	16	32
TOTAL	50	100
Ethnicity		
Kankanaey	33	66
Others (Cebuano, Zambal, Ilonggo)	10	20
Ilokano	3	6
Tagalog	2	4



Table 1 continued...

INFORMATION	FREQUENCY (F)	PERCENTAGE (%)
Ethnicity		
Ibaloi	2	4
TOTAL	50	100
No. of Children		
1-4	38	76
5-7	6	12
8-10	6	12
TOTAL	50	100
No. of Years Married		
1-9	30	60
10 to 39	20	40
TOTAL	50	100

Perception and Knowledge of the Respondents on the RH Bill

Table 2 shows the perception and knowledge of the respondent regarding the RH Bill. Majority (88%) of the respondents were aware of the Responsible Parenthood, Reproductive Health and Population Development Act, only 12% of them claimed that they were not aware of the Bill.



Eighty four percent (84%) of the respondents were willing to support the Bill in the study area while 58% of them claimed that they do not have enough knowledge or information about it.

In relation with the religion and cultural belief of the respondents, 66% said that it did not influence their point of view and belief regarding the Bill as claimed by 68% of them. Furthermore, 62% of the respondents could still be able to sustain their family needs.

Majority of the respondents (92%) believed that the Bill would promote gender equality, equity and women's empowerment in terms of health and human rights. Also, it would be able to provide the necessary needs among women (94%), discrimination against women would be eliminated as noted by 54% of the respondents. 88%, they believed that the state or their religion would not dictate on how the couples will plan their own families.

The Table 2 also shows that accordingly, they believed that access to health care services will prevent and manage reproductive tract cancers like breast and cervical cancer (88%), that unwanted pregnancies among women should be avoided (84%) and that breast feeding should be promoted (90%) as stated in the Bill. Majority (80%) of the respondents agreed that the RH Bill is anti-abortion, pro-life (84%), it would promote family planning (90%), it would address health care needs of their families (82%), it would provide better education for their children (88%), it would also improve their standard of living (72%), and would provide the basic needs for their families (62%).

Moreover as shown in table 2, 82% of the respondents agreed that there should be an appropriate mandatory age for sex education. The majority of the respondents (80%) believe that the bill would enable newlywed couples to decide the number of children they desire; that it would help alleviate the growing population in our country (86%); that it



would help parents to become more responsible in raising their children (84%) because according to them having less number of children, they are able to focus on providing the proper care and needs of their children; that it would help women especially the poor in accessing information regarding their health and pregnancy issues (84%); and that it would help eliminate poverty (62%). 52% of the respondents also claimed that sexual act would be properly exercised within marriage only if the bill will be passed.

As shown in the same table, fifty four percent (54%) practiced natural birth control and forty six percent (46%) practiced artificial birth control. The respondents are amenable with the two (2) child policy (68%) because according to them, they are able to sustain and support the needs of their children. Unlike having many children, they said that it is very difficult.

Table 2 implies that the RH Bill is family centered and that the respondents have the freedom to decide whether to follow the RH Bill or not concerning their reproductive health.

Table 2. Perception and Knowledge of the Respondents on the RH Bill

INFORMATION	YES		No	
	(F)	(%)	(F)	(%)
Are you aware of the Responsible Parenthood, Reproductive Health and Population Development Act (RH Bill)?	44	6	88	12
Do you support the Bill?	42	8	84	16



Table 2 continued...

INFORMATION	YES		No	
	(F)	(%)	(F)	(%)
Do you have enough information about the Bill?	21	29	42	58
Your religion and cultural belief has an influence on your viewpoint towards RH Bill?	17	33	34	66
Does your religion and cultural belief contradict your belief regarding the Bill?	16	34	32	68
With your current occupation are you able to sustain the needs of your family?	31	19	62	38
The Bill will promote gender equality, equity and women's empowerment in terms of health and human rights?	46	4	92	8
The Bill will be able to provide the necessary reproductive health care needs among women?	47	3	94	6
Discrimination against women will be eliminated when the bill is amended?	27	23	54	46
Freedom of choice among couples to plan their families will not be dictated to by the state or your religion	43	7	86	14
Do you agree that access to health care services will prevent and manage reproductive tract cancers like breast and cervical cancer?	44	88	6	12
Unwanted pregnancies among women will be avoided?	42	84	8	16
Promotion of the Bill regarding Breastfeeding?	45	90	5	10
The Bill is Anti-Abortion?	40	80	10	20
The Bill is Pro-Life	42	84	8	16
The Bill will promote family planning?	46	96	4	8



Table 2 continued...

INFORMATION	YES		No	
	(F)	(%)	(F)	(%)
The Bill will provide better education for your children?	44	88	6	12
The Bill will improve your standard of life?	36	72	14	24
The Bill will provide basic needs for your family?	33	66	17	34
There shall be a mandatory age-appropriate reproductive health and sexuality education?	41	82	9	18
The Bill will enable newlywed couples, individuals and women to have the number of children they desire?	40	80	10	20
The Bill will help alleviate the growing Population in our country?	43	86	7	14
The Bill will improve your quality of life?	38	66	12	24
Parents will become more responsible in raising their children?	42	84	8	16
The Bill will help women especially the poor ones get access to the right information on their health and pregnancy issues?	42	84	8	16
The Bill will eliminate poverty?	31	62	19	38
Upon the enactment of the Bill, sexual act would be properly exercised within marriage only?	26	52	24	48
Do you use Natural Birth Control?	27	54	23	46
Do you use Artificial Birth Control?	23	46	27	54
Are you amenable with the two child policy?	34	68	16	32

*Multiple responses



Problems that May Arise Upon the Enactment of the RH Bill

As shown in Table 3, majority (82%) of the respondents disagreed that the state should dictate on how couples should plan for their family; 74% agreed that it would increase unwanted pregnancy because of the increase incidence of premarital sex; 70% agreed that it would increase the incidence of premarital sex because there are no limits on the access of contraceptives; 66% of the respondents agreed that the use of contraceptives might have undesirable effects; 66% of them disagreed that it may encourage couples to have multiple partners; 58% agreed that contraceptives would be accessible to young men and women and there would be a proliferation of the sale of contraceptives. Majority of the respondents (58%) disagreed that conflict between the Church and Government might arise; Also 52%, had disagreed to the problem that it will be a major attack on authentic human values.

Table 3. Problems that May Arise Upon the Enactment of the RH Bill

PROBLEM	AGREE		DISAGREE	
	(F)	(%)	(F)	(%)
The state will dictate on how couples should plan their family.	9	18	41	82
It would be a major attack on authentic human values as well as to Filipino cultural values.	24	48	26	52
It would increase the incidence of premarital sex.	35	70	15	30
It would increase unwanted pregnancies among women.	37	74	13	26
Accessibility of contraceptives among young men and women.	29	58	21	42



Table 3 continued...

PROBLEM	AGREE		DISAGREE	
	(F)	(%)	(F)	(%)
Proliferation of the sale of contraceptives.	29	58	21	42
The use of contraceptives may have undesirable side Effects on women.	33	66	17	34
It may encourage couples to have multiple partners.	17	34	33	66
Conflict between the Church and Government may arise.	21	42	29	58

*Multiple responses



SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Summary

The study on the perception of married women in Bakakeng Norte, Baguio City towards the responsible parenthood, reproductive health and population development act of 2011 was conducted to determine the socio-demographic profile of the respondents, determine the perception and knowledge of married women regarding the RH Bill, and to determine the problems that may arise upon the enactment of the RH Bill.

Fifty respondents from the Barangay of Bakakeng Norte, Baguio City were considered as respondents of the study.

The results indicate that the respondents were relatively young, all literates, and unemployed. Majority are Roman Catholics, Kankanaey and with one (1) to four (4) children. They had been married from 1 to 9 years and were practicing both natural and artificial birth control where they used contraceptive pills, tubal ligation and intra uterine device (IUD). Their ideal family size was 3 and they supported the two child policy.

With regards to the perception and knowledge, the respondents were aware of the Responsible Parenthood, Reproductive Health and Population Development Act and were willing to support the Bill but they do not have enough knowledge and information about it. Their religion and cultural belief do not influence their point of view and did not contradict their belief regarding the Bill. They were able to sustain their family needs. They believed that the Bill would promote gender equality, equity and women's empowerment in terms of health and human rights; it would provide necessary reproductive health care needs; it would eliminate discrimination against women; the state and their religion would



not dictate on how they plan their own families; access to health care services will prevent reproductive tract cancers; it would avoid unwanted pregnancy; and it would promote breast feeding. They claimed that the Bill is anti-abortion and pro-life, that it would promote family planning, it would address health care needs of their families, it would provide better education for their children, it would improve their standard of living, and it would provide basic needs for their families. They believed that there should be an appropriate mandatory age for sex education. They also believed that the passage of the bill would enable newlywed couples and individual women to have the number of children they desire; that it would help alleviate the growing population in our country; that it would help parents become more responsible in raising their children; that it would give women specially the poor access to information regarding health and pregnancy issues; and that it would eliminate poverty. They also believed that sexual act would be properly exercised within marriage only with the passage of the bill.

With regards to the problems, the respondents disagreed that the state should dictate on how they should plan for their family. They agreed that it would increase incidence of premarital sex and unwanted pregnancy. They also disagreed that it might encourage couples to have multiple partners. The respondents agreed that the use of contraceptives may have undesirable effects, contraceptives would be accessible to young men and women and there would be a proliferation of the sale of contraceptives. They disagreed that conflict between the Church and the Government would arise and that the Bill would be a major attack on authentic human values.



Conclusions

Based on the findings, the following conclusions are derived:

1. The respondents are aware of the Responsible Parenthood, Reproductive Health and Population Development Act but they do not have enough knowledge and information about it. They are willing to support the Bill although most of them practice natural birth control;

2. The respondents are willing to support the bill and they believe that the RH Bill is family centered, that it is anti-abortion and pro-life. They also believed that it would promote gender equality and family planning; and,

3. The respondents agreed that there are certain problems that might arise upon the enactment of the Bill. This includes; accessibility of contraceptives among young men and women, proliferation of the sale of contraceptives and use of contraceptives might have undesirable side effects on women.

Recommendations

Based on the conclusions, the following recommendations are derived:

1. Female residents of Bakakeng Norte, Baguio City that were married should undergo thoroughly seminars and forums regarding the Responsible Parenthood, Reproductive Health and Population Development Act of 2011;

2. Local Government Units should conduct information dissemination regarding the RH Bill in coordination with the Rural Health Unit within the Barangay of Bakakeng Norte, Baguio City; and,

3. The respondents are encouraged to read more articles about the Bill, to watch and listen on certain issues to further increase their understanding and belief regarding the RH Bill.



LITERATURE CITED

- BUSAM, V. 1995 Overpopulation: The World's Problem. Retrieved 2012 from <http://sixpak.org/vince/overpopulation.html>.
- CADAY, S. Y. 2011. Reproductive Health Bill Pro-Stance. Retrieved February, 2011 from <http://www.oppapapers.com>.
- DANGUILAN, M. J 1996. On Women's Health: Beyond Reproduction. Center for Media Freedom and Responsibility. P. 4.
- HERRIN, A. N. 2002. Population Policy in the Philippines, 1969—2002. Philippine Institute for Development Studies (*Surian sa mga Pag-aaral Pangkaunlaran ng Pilipinas*). Retrieved July, 2002 from <http://dirp3.pids.gov.ph/ris/pdf/pidsdps0208.pdf>.
- LIAN, M. A. 2011 Definitely Filipino Alternative To Government-backed and West-inspired "Sex Education". June, 2011 from <http://definitelyfilipino.com/blog/2011/06/07/a-definitely-filipino-alternative-to-government-backed-and-west-inspired-sex-education-2/>.
- MANGAHAS, M. 2009. Reproductive Health and Freedom to Choose. Philippine Daily Inquirer. Retrieved August, 2011 from <http://opinion.inquirer.net>.
- PANGALANAN, E. 2010. Sexuality and Reproductive Health Rights: a situationer in the Philippines. Retrieved August, 2010 from www.thepoc.net/blogwatch-features/9379-reproductive-health-bill-situationer.html.
- PERNIA, M. and A. ORBETA. 2004. Population Growth and Economic Development in the Philippines: What Has Been the Experience and What Must Be Done? P. 11.
- SILLIMAN, J., M. G. FRIED, L. ROSS, E. GUTIERREZ. 2004. Undivided Rights: Women of Color Organizing For Reproductive Justice. Chapter I. P. 1-24.
- SIMONETTA, J. R. 2009. Seven words that can change the World. Retrieved February, 2009 from <http://www.sevenwords.org/human-overpopulation-causes-effects-and-solutions/>.
- YAPCHIONGCO, R. R. 2009. The Reproductive Health Bill Fracas. Retrieved January, 2011 from <http://www.thepoc.net/year-in-pocus-commentary/10810-the-reproductive-health-bill-fracas.html>.

