I. RATIONALE

Conditional Cash Transfer Program in Latin American countries and the Carribean such as Mexico, Brazil, Honduras, Jamaica and Nicaragua in the late 1990s shows effectiveness in promoting human capital accumulation among poor households. There is clear evidence of success in increasing enrollment rates, improving preventive health care and raising household consumption on nutrient dense foods. Conditional Cash Transfer program provides cash grant to poor families to enable them to invest in human capital by sending their children to school and bringing them to health centers for preventive health check ups.

The Government of the Philippines, through the leadership of the Department of Social Welfare and Development was challenged to replicate or adopt the Conditional Cash Transfer (CCT) Program dubbed as Pantawid Pamilyang Pilipino Program to address key health and educational issues and growing incidence of poverty that continues to affect the extremely poor Filipino families.

The main goal of the Pantawid Pamilyang Pilipino Program is to break the inter-generational cycle of poverty by fostering change in behavior among parents to invest in their children's (and their own) future (health, nutrition, education) because low schooling and high malnutrition rate are strongly associated with poverty cycle in the Philippines.

To effectively implement the program, a well designed and efficient program procedures and mechanics are needed to serve as guides to local implementers. This will help define and delineate roles and responsibilities of the local government implementers, ensure availability of the demand-side on health, nutrition, education and support services for the beneficiaries in order to achieve success in program implementation.
II. LEGAL BASIS

The implementation of Pantawid Pamilyang Pilipino Program is in pursuant to the Millennium Development Goals addressing the following:

a. Eradicate extreme poverty and hunger
b. Achieve universal primary education
c. Reduce child mortality
d. Improve maternal health
e. Promote gender equality and empower women

The Department as one of the national agencies working towards the achievement of the Millennium Development Goals is committed to implement the Pantawid Pamilyang Pilipino Program.

Executive Order No. 221 of 2003 Amending EO No. 15, series of 1998, entitled “Redirecting the Functions and Operations of the Department of Social Welfare and Development” mandates the DSWD to provide assistance to Local Government Units (LGUs), non-government organizations (NGOs), other national government agencies (NGAs), people’s organizations (POs) and other members of civil society in effectively implementing programs, projects and services that will alleviate poverty and empower disadvantaged individuals, families and communities for an improved quality of life as well as implement statutory and specialized programs which are directly lodged with the Department and/or not yet devolved to LGUs.

III. DESCRIPTION

The Pantawid Pamilyang Pilipino Program (4Ps) is a poverty reduction strategy that provides cash grant to extreme poor households to allow the members of the families to meet certain human development goals. It is focused on building human capital of poorest families (health/nutrition and education) because low schooling and high malnutrition rate are strongly associated with poverty cycle in the Philippines.
GOAL and OBJECTIVES

Goal:

To promote human capital among poor families specially children, to break the intergenerational cycle of poverty.

Objectives:

1. To improve preventive health care of pregnant women and young children
2. To increase enrollment/attendance of children at elementary level
3. To reduce incidence of child labor
4. To raise consumption of poor households on nutrient dense foods.
5. To encourage parents to invest in their children’s (and their own) future
6. To encourage parent’s participation in the growth and development of young children, as well as involvement in the community.

6. TARGET AREAS and CLIENTELE

a. Areas

In the selection of target areas for the implementation of the program, priority is given to the 20 poorest provinces based on the 2006 Family Income and Expenditure Survey (FIES) issued by the National Statistical Coordination Board (NSCB). Further, the poorest province in the regions which are not included in the 20 poorest were likewise considered to ensure a regional spread/nationwide implementation.

The Small Area Estimates (SAE) developed by the NSCB shall be used to select the municipalities in the poorest provinces.

Cities shall be selected using the list of poor areas issued by the National Anti-Poverty Commission (NAPC).
Selection of barangay is done in consultation with the Local Government Units giving consideration to the social development projects of the government. Barangays are only selected in urban areas while the municipality in rural areas are fully covered by the project.

b. Clientele

Eligible Households

Eligible households for the program shall meet the following qualifications:

- Residents of the municipalities and barangays identified as areas of implementation of the 4Ps.
- Selected by the statistical formula (Proxy Means Test) developed for the program and belongs to the extremely poor household classification as defined by the poverty threshold of the municipality/province based on the issuance of the National Statistical and Coordination Board (NSCB) at the time of selection.
- Household with children 0 - 14 years old or with pregnant woman at the time of selection.

IV. IMPLEMENTING PROCEDURES

The following illustration describes the cycle of implementation of the 4Ps:
1. Selection of Eligible Provinces, Municipalities, Cities and Barangays

1.1. Selection of Provinces/Municipalities

Selection of provinces shall be based on the classification developed by the National Statistical Coordination Board (NSCB) using the 2006 Family Income and Expenditure Survey (FIES).

1.2. Selection of Municipalities/Cities

The Small Area Poverty Estimates (SAEs) developed by the NSCB shall be used to select municipalities within the selected provinces.

1.3. Selection of Barangays
Selection of barangays will only apply in urban areas and shall be based on the availability of supply side on health and education based on the results of the supply side assessment conducted by the regional office. Likewise, consultation with the Planning Office of the concerned Local Government Unit shall be done to ensure that the barangays identified for the 4Ps implementation will not be affected by any development projects that may lead to the relocation of residents for at least the next three years.

2. Supply Side Assessment

Supply side assessment shall be conducted upon identification of the target areas using the supply side assessment tool on health and education. The supply side assessment aims to determine the readiness of the city/municipal local government units in ensuring delivery of priority health and education services for the target poor households. Prior to the conduct of assessment, an orientation of the local government units on the mechanics and tools on supply side shall be conducted.

3. Selection of Households

A Household Survey shall be conducted in the target areas, using a two-page assessment tool. The Household Assessment Tool covers the necessary information to run the Proxy Means Test that identifies/determines the poorest of the poor in the target areas. The results of the Proxy Means Test shall be a ranking of households based on the socio-economic profile. Prior to the conduct of household assessment, proper orientation on the use of the household assessment tool shall be undertaken.

4. Organization of Initial Community Assembly

When the household beneficiaries have already been identified, the community assembly in the barangay shall be undertaken. The main thrusts of the initial community assembly include identification and validation of potential beneficiaries and orientation about the program. The conduct of the initial community assembly shall be initiated by the regional office in close coordination with the local government units.
Orientation on the Program and Conditionalities

During the initial community assembly, the potential beneficiaries shall be oriented well on the conditionalities of the program as follows:

a) Pregnant women must get prenatal care starting from the 1st trimester, child birth is attended by skilled/trained professional, get postnatal care thereafter

b) Parents / guardians must attend family planning sessions/mother's class, Parent Effectiveness Service and others

c) Children 0-5 years of age get regular preventive health check ups and vaccines

d) Children 3-5 years old must attend day care program/ preschool

e) Children 6-14 years of age are enrolled in schools and attend at least 85% of the time

Other Duties And Responsibilities of Household Grantees

a) Attend meetings and group sessions and coordinate with 4Ps mother-leader on concerns relative to the program in the community such as schedules of release of cash grants and information on household information such as address, stopping of children in school or transfer to other school.

b) Attend parenting education sessions with the spouse and other related seminars for 4Ps beneficiaries

c) Provide regular update on meeting the conditionalities of the program to the 4Ps mother-leader as part of verification

5. Family Registry Preparation

All potential beneficiaries who agreed to participate in the Program will sign the oath of commitment indicating their willingness to comply with the conditionalities of the program.
Issuance of 4Ps identification cards shall also be undertaken including enrollment to the Land Bank Cash Card Program.

6. Provision of Program Package

Upon registration of household beneficiaries, appropriate program package shall be determined based on the qualified number of children in the household particularly on education grant. For Health grant, P 500.00/month per household shall be given or a total of P6,000.00/year.

For Education grant, 3-14 years old children enrolled at the Day Care Program/Pre-school and elementary education shall receive P300.00/month for 10 months or a total of P3,000.00 in a year with a maximum of 3 children per household.

Thus, household with 3 children shall receive P1,400.00 per month and those with one or 2 children shall receive P800.00 and P1,100.00 per month respectively.

Based on the registry, the Project Management Office will make the payment lists and the amounts to be paid. The first cash transfer shall be made upon signing by mothers of the agreement to participate and comply with the conditionalities. The 1st cash transfer does not require the verification of any of the conditions. Subsequent cash transfer shall be made every two months subject to verification of compliance to conditionalities as specified in the agreement.

Cash transfer shall be coursed through the most responsible adult person (usually the mother) in the household via credit to electronic card banking system particularly through the Land Bank Cash Card program, or other delivery mode most feasible in areas where Landbank and its network banks are not available.

7. Monitoring and Verification of Compliance

Compliance of beneficiaries to the conditionalities set forth by the program shall be monitored by the DSWD Program Management Office. A monitoring and verification mechanism shall be installed in all schools and health centers where children beneficiaries of education grant and mothers are availing education and health services. Focal persons in each school
and health centers shall be identified to assist the beneficiaries to enroll and access to this monitoring and verification system.

Compliance refers to carrying out the specific conditionalities on health and education by the household grantee. Non-compliance to any of the conditionalities may have corresponding repercussion which may lead to termination from the program.

8. Succeeding Release

The DSWD-Project Management Office is responsible in the consolidation of reports on monitoring and verification of compliance of household’s beneficiaries. The results of verification shall be used to determine the amount of subsequent release of cash grants to beneficiaries.

B. Regular Conduct of Community Assemblies

Regular community assembly shall be conducted in the barangay to bring all concerns of the household grantees to the overall operation of the program. In the conduct of community assembly, a cluster of 20-30 household grantees in a neighborhood are organized to form into a group called assembly.

The conduct of the community assembly shall aim primarily to monitor compliance of household grantees to program conditionalities, remind household grantees of their commitments and responsibilities, facilitate activities and interventions needed by the household members and the community in general, facilitate grievances and complaints and facilitate the conduct of sessions on family planning, mother’s class, parent effectiveness seminars and other parenting education activities. Community assembly is scheduled to be done twice a month and to be facilitated by the municipal link and/or mother leader.

C. Organization of Grievance Committee

To provide quick access to and due process in resolving non-compliance and complaints and to promote a graft-free program by evolving a transparent approach in resolving grievances particular to meeting the conditionalities of the program, a
grievance committee shall be organized at the national, regional and municipal levels.

The National Grievance Committee is composed of DSWD, DepEd, DOH, NAPC, DILG and DBM. The Program Director serves as the Chairman. It shall have the functions of reviewing and conducting investigation filed by the Regional Grievance Committee. It shall act on and provide decisions and recommendations on cases endorsed at the national level particularly on cancellation/termination of household grantees resulting from 3rd instance of non-compliance to program conditionalities as well as provide technical assistance on matters filed at the regional level.

The Regional Grievance Committee composed of Regional Director from DSWD, DepEd, DOH, DILG and the Provincial Social Welfare Officer. DSWD Director chairs the Regional Grievance Committee. It shall monitor the progress of compliance to conditionalities on filed cases at the municipal level and shall monitor resolution of grievances, disputes, comments and complaints of cases filed at the municipal level. The Regional Grievance Committee shall serve as the main repository of intake forms on all grievances at the municipal level, and conduct quarterly ex-post facto review of at least 10% of all decisions made at the municipal level. The Regional Grievance Committee provides decisions pertaining to suspension in cases of 2nd instance of non-compliance to 4Ps conditionalities. The Regional Grievance Committee shall likewise forward to the National Grievance Committee cases recommended for termination.

The Municipal Grievance Committee is composed of City/Municipal Social Welfare Officer, Municipal Health Officer, Municipal Link, School Principal and Parent Leader of the Concerned Barangay. It shall receive filed cases of non-compliance to APP conditionalities from any of the members of the community. It shall provide clarifications and resolutions to any form of complaints and problems from the household grantees and/or between and among the grantees and any member from the community, and shall refer and file unresolved cases at the regional level on cases of suspension.

V. INSTITUTIONAL ARRANGEMENTS
The National, Regional and Local Advisory Committees shall be created and be chaired by the Department of Social Welfare and Development. It shall draw inter-agency policies for the implementation of the program in accordance with the mandates of the agencies concerned such as the Department of Education, Department of Health and National Anti-Poverty Commission. Organization of Advisory Committee shall be undertaken down to the regional and municipal levels in order to strengthen coordination in the implementation and operationalization of sectoral activities to better execute the requirements in the implementation of the program in order to meet the conditionalities on education and health.

To ensure effective and efficient implementation, the following are the specific roles and functions of the Department as the lead implementing agency, and partner agencies:

**Department of Social Welfare and Development**

**Central Office:**

a. Oversee and coordinate the implementation, monitoring and evaluation of the Program.

b. Chair the Advisory Committee at the National and Regional levels.

c. Jointly conduct assessment of supplies for health and education in partnership with concerned agencies.

d. Identify target areas based on existing data and select potential beneficiaries;

e. Forge agreements with the LGUs to ensure availability of the supply side

f. Provide technical assistance to the regional, provincial, city/municipal level on the over-all operations of the program

g. Serve as repository of data and information about the program

h. Develop and implement grievance system for the program

i. Mobilize, manage and account program funds and resources

**Regional Office:**
a. Translate national policies to region specific operational guidelines to ensure smooth implementation of the Program,
b. Coordinate the implementation/operationalization of sectoral activities to better execute Program objectives and functions at the regional, provincial and municipal levels
c. Review and resolve all Regional concerns and requirements needing actions,
d. Ensure that supply side on health and education are available at the target municipalities,
e. Hold regular monthly committee meetings, and
f. Prepare/submit monthly/quarterly accomplishment reports.

Department of Health

DOH shall:

a. Ensure representation in the Advisory Committees at the national, regional, city/municipal levels
b. Ensure that supply of health and nutrition services are available in target provinces/cities/municipalities/barangays.
c. Augment the LGUs logistics needs to enable them to provide the supply-side for 4Ps, including enrollment to Philhealth
d. Assign/designate a permanent staff to form part of the 4Ps Team at the national, regional/provincial/city/municipal levels
e. Help monitor program operation particularly on compliance of conditions for health

Department of Education

DepEd, which is mandated to provide basic education that is equitably accessible to all children shall:

a. Ensure representation in the Advisory Committee at the national, regional, city and municipal levels
b. Ensure that supply of schools, teachers and education materials are available to 4Ps target provinces/cities/municipalities/barangays

c. Assign/designate a permanent staff to form part of the 4Ps Team at the regional/ provincial/ city/ municipal/ school levels

d. Help monitor Program operation particularly on compliance of conditions on education among beneficiaries

Department of the Interior and Local Government

DILG, which mandated to promote peace and order, ensure public safety and further strengthen local government capability aimed towards the effective delivery of basic services to the citizenry, shall:

a. Actively participate in the activities of the National Advisory Committee and Technical Working Groups that may be created in all levels for the implementation of the Pantawid Pamilyang Pilipino Program (4Ps)

b. Encourage LGUs to incorporate pro-poor programs particularly on health and nutrition in their plans and budget

c. Assist lead implementing agencies in capacitating target LGUs in accessing resources for the upgrading of facilities to meet the MDG goals

d. Assist lead implementing agencies in the monitoring and evaluation of Program implementation specifically at the barangay level

National Anti-Poverty Commission

NAPC as the "coordinating and advisory body" that exercises oversight functions in the implementation of Social Reform Agenda shall:

a. Ensure representation in the Advisory Committee at the national level

b. Provide data/statistics on poor families nationwide

c. Help monitor Program operations at the regional level

The Local Government Units
The Local Government Units (LGUs) shall:

a. Ensure availability of the supply side on health and education in the target areas
b. Provide necessary technical assistance for Program implementation
c. Coordinate the implementation/operationalization of sectoral activities at the City/Municipal level to better execute Program objectives and functions
d. Coordinate with various concerned government agencies at the local level, sectoral representatives and NGO to ensure effective Program implementation
e. Prepare reports on issues and concerns regarding Program implementation and submit to the Regional Advisory Committee, and
f. Hold monthly committee meetings

VI. MONITORING AND EVALUATION

Monitoring shall be conducted to assess the household grantees' ability to follow or comply with the conditionalities both for health and education. Monitoring shall be conducted at the local government unit level to determine the availability of the supply side on health and education. Appropriate Monitoring Tools shall be used in monitoring the compliance to program conditionalities and supply side to ensure that basic sectoral services are provided to help the target beneficiaries meet the conditionalities particularly on health and education.

The Advisory Committee at the National, Regional and Municipal level shall have the main functions of overseeing the overall implementation of the program in their respective levels and shall undertake monitoring visits to assess the efficiency and effectiveness of the program and provide appropriate recommendations in strengthening program implementation.

An Independent Monitoring and Advisory Committee shall likewise be created at all levels to function as independent monitor of the program. This is a group of imminent personalities meeting regularly to discuss issues and concerns, provide inputs and recommend actions to further improve program implementation.

Program impact can only be measured by doing evaluation on program policies and implementation. For 4Ps, evaluation shall be
done by an outside group to ensure objectivity. The PMO and the field offices shall provide all the necessary support to the evaluating team at all levels of evaluation processes. Evaluation is necessary in all social development programs as it defines the effectiveness of policies set forth, the mechanisms installed and the implementation procedures with the aim of improving the program.

VII. EFFECTIVITY

Issued in Quezon City, this 16th of July 2008.

ESPERANZA I. CABRAL
Secretary