

Selection No. 1201501

Comparative Study of Regional Differences in Pantawid Pamilyang Pilipino Program Implementation

FULL REPORT

**Prepared for:
The World Bank**

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1 Our understanding of the issues

1.1 Background and Rationale

In February 2008, the Philippine Government launched a conditional cash transfer (CCT) program (Pantawid Pamilyang Pilipino Program) that provides grants to supplement the income of poor households in selected municipalities in exchange for complying with conditionalities tied to promoting the family's education and health needs. The long term objective is to help break the intergenerational poverty cycle through investment in human capital.

When the program started in 2008, it covered 293,553 poor households in 30 provinces, 148 municipalities, and 12 cities. The program expanded in 2009 and 2010 covering a total 1 million households. By end of 2011, the program had further expanded to cover an additional 1.3 million to reach a total of 2.3 million households nationwide. As of August 2016, the 4Ps program is being implemented with 4,397,171 active households nationwide.

With such huge operational coverage, the task of handling an enormous and long-term national flagship program has attendant consequences, such as the risk of weakened operational control as the program scaled up every year. Though operational and field manuals have been laid down to standardize the processes and procedures, and in spite of the regular consultation-cum-technical assistance workshops given to all regional focal persons, monitoring indicators show that on average, there are regions that register low and high compliance performance. And since the program is implemented at the city/municipal level, there may be further significant municipality variation within regions.

Based on key 4Ps compliance indicators, a couple of regions stand out as consistent top performers while a few were consistently lagging at the bottom (See Table 1 in Annex A for reference). Program data from 2010 – 2014 shows that, for Health conditionality, both Region 1 and CARAGA are at the top with 90% average compliance rate; in Education, Region 1 is also at the top with 89%, while CARAGA is tied at second place with four other regions with 83% average compliance rate. The compliance rates with the Family Development Session (FDS), a unique feature of the Philippines' 4Ps, are high for all regions and do not indicate much variance. Still, Regions 1 and CARAGA matched the average compliance rate of 93%.

On the other hand, a few regions have registered consistently low average compliance rates in health and education, the key indicators of most 4Ps. Notable in this regard are the Autonomous Region in Muslim Mindanao (ARMM) and the National Capital Region (NCR). Though both have high average FDS compliance rates (ARMM – 93%; NCR – 89%), both are ranked lowest in health and education. From the same 2010 – 2014 program data, ARMM has the lowest average compliance rates of 65% in Health and 60% in Education. Surprisingly, NCR has low average compliance rates of 69% in Health and 75% in Education.



A cursory look at the national health and education statistics provides interesting points of congruence. NCR, though the least poor among all regions¹, has the biggest enrollees to public elementary school ratio at 2,409:1 while ARMM (273:1), Region 1 (263:1), and CARAGA (247:1) have acceptable ratios². In terms of the ratio of Barangay Health Stations (BHS) per 10,000 population, NCR also comes in lowest at 0.39; followed by ARMM with 1.18; Region 1 (2.11) and CARAGA (2.48) have BHS-to-population ratios that are still higher than the national, which is 1.92³.

From the point of view of a CCT program like Pantawid Pamilya, the sufficiency of education and health facilities may spell the difference in the achievement of its ultimate goal which is to break the intergenerational cycle of poverty. Looking at the latest publicly available official government data on poverty⁴, ARMM faces the toughest challenge in reducing poverty across a generation as its poverty incidence almost doubled (27% to 49%) after two decades (1991 to 2012).

After ARMM, it is interesting to note that NCR, the region that has the least number of poor families (76,530) and lowest poverty incidence (2.6%) continue to register sub-par performance in key indicators such as 4Ps compliance rates and the adequacy of public school and health facilities.

In contrast, CARAGA is promising because despite its still unacceptable level of poverty incidence at 32%, it registered the steepest decline in poverty incidence among Mindanao regions during the same period (from 48%; a 16%-point drop) and even outperformed other regions in terms of 4Ps compliance rates. Another region that saw a 16%-point decrease in poverty incidence (30% down to 14%) was Region 1, the top region in terms of overall average compliance rates.

While the program as a whole is on track in meeting its short-term objectives of keeping children in school and keeping them healthy⁵, it is deemed necessary that the program management study the performance and outcome differentials of the regions and look deeper into why some regions do very well while others continue to lag behind. A lot of factors can affect the implementation and performance of the program, but which of these are key in driving positive and negative results is yet to be identified and ascertained.

¹ Based on 2012 Full Year Official Poverty Statistics. National Statistics Coordination Board. December 2013. (See also Table 2 of Appendix 1 for summary)

² 2013 – 2014 Public Elementary School Enrollment Data, Source: www.data.gov.ph

³ 2011 Field Health Service Information System Annual Report. National Epidemiology Center. Department of Health.

⁴ 2012 Official Poverty Statistics. National Statistical Coordination Board. December 2013.

⁵ Based on the 1st and 2nd Waves of Pantawid Pamilyang Pilipino Program Impact Evaluation.



1.2 Research Objective

This study aims to have a deeper assessment and understanding of the factors affecting the regional differences when it comes to the success of implementing the Pantawid Pamilyang Pilipino Program (4Ps). It intends to shed light as to what is driving the high compliance rate in the specific areas (e.g., Ilocos Region 1, CARAGA – top 2 highest compliance rate in education and health⁶), and what is hindering its success in consistently low-compliance rate regions (e.g., NCR, ARMM – bottom performers in education and health⁷). To further flesh out the nuances in implementation and provide contrast, this study also ensured that specific well-performing municipalities are also represented in the low-compliance rate regions.

In line with this, the following specific objectives were explored:

- **Determine attitudes towards the Pantawid Pamilyang Pilipino Program amongst different stakeholders**
 - What the program stands for/ means for the beneficiaries and implementors
 - Organizational profile and culture of the Regional Program Management Office (RPMO) – attitudes, beliefs, habits, and practices of the members
- **Gauge the Pantawid Pamilyang Pilipino Program implementation's fidelity**, with focus on the salient phases of the program, i.e., beneficiary updating, conducting Family Development Session (FDS), compliance verification, conducting payout, handling of grievances
 - Perception and understanding of the program's implementation framework/ process amongst the various stakeholders
 - How the current implementation scenario compares vs. the standard/ ideal
- **Identify leverage and improvement points** of the Pantawid Pamilyang Pilipino Program implementation in driving compliance
 - Factors that drive compliance in high-compliance cities/ municipalities
 - Factors that hinder compliance in low-compliance cities/ municipalities
- **Document perception of constraints** in program implementation:
 - Identify the challenges faced by beneficiaries and regional/ municipal implementers, the magnitude of major challenges, their means of addressing them, and the results of their action

⁶ Based on average compliance rates from 2010-2014. (See also Table 1 of Appendix 1)

⁷ Based on average compliance rates from 2010-2014. (See also Table 1 of Appendix 1)



2 Methodology

2.1 Methods Used

A multi-method qualitative approach was employed to obtain a full picture of the CCT program from the points-of-view of the different stakeholders.

Mini-Focus Group Discussions among beneficiaries

A qualitative research focus group discussion with five (5) respondents were convened. Keeping the group to a smaller number allowed for greater disclosure and more in-depth probing among the beneficiaries' personal experience with the CCT program. This enabled the researcher to flesh out these experiences at a detailed level, with focus on the different steps/ phases in the program implementation process. At the same time, it made use of group dynamics to encourage sharing of opinions and building of ideas particularly as to how the implementation of the CCT program can further be improved.

In-depth Interviews (IDIs) via Home Visits among beneficiaries

A one-on-one approach that allowed respondents to openly share needs and insights that can be too personal or sensitive in nature, which they may not be willing to divulge in a group setting. This granted us a deep-dive exploration of the beneficiaries' general attitudes and lifestyle, and how these relate to their attitudes toward and compliance with the CCT program. It also made use of the home environment and the artefacts in it to have a clearer grasp of the beneficiaries' milieu and the factors that may influence their behavior towards the program.

In-depth Interviews (IDIs) among RPMO staff and program partners

A one-on-one approach was also employed in exploring the attitudes, behavior, and experiences of key informants involved in CCT program implementation. This enabled us to probe in-depth into their participation in the program implementation as well as personal views and observations on how to further improve the process.

Implementation of Mini-FGDs and In-Depth Interviews:

- **Qualitative specialists facilitated the mini-FGDs and conducted the In-depth Interviews.** The fieldwork team was comprised of qualitative specialists and consultants who are experienced in managing group dynamics and weaving through both group and in-depth discussions to uncover the relevant information and insights called for by the research.
- **Discussion guides** were prepared for the mini-FGDs and In-depth Interviews (see Appendix 2). These are semi-structured questionnaires that lay down the flow of the discussions, the objectives being addressed per



section, time allotted per section, and specific probe points to ensure that all pertinent topics are covered and discussions are optimized. Separate discussion guides were prepared for the FGDs among beneficiaries, In-Depth Interviews via Home visits among beneficiaries, and In-depth Interviews among RPMO staff and program partners – each guide was tailor fitted to capture the relevant information needs for each segment.

- All sessions were **recorded in digital audio**, while **mini-FGDs** (except those conducted in Maguindanao) **were also recorded on video** with the full knowledge and consent of the respondents to fully document the sessions for the purpose of analysis
- Mini-FGDs were held in an **FGD room** (for NCR) or **hotel function room/ barangay halls** (for provincial regions)
- In-depth interviews were conducted in the **beneficiaries' home**, and **any place that is most convenient for the RPMO staff and program partners** – most were conducted in their respective offices which also allowed the team to observe their working environment and take a look at the pertinent documents related to the conduct of their respective functions.

Rapid assessment of external factors

To provide a broader context and to supplement findings from the mini-FGDs and in-depth interviews, the research team likewise embarked on desk research and observations to determine external factors surrounding the CCT program that may have significant effects on its implementation.

A rapid assessment form was developed to capture political, economic, social, technological, legal, and environmental dimensions that may have had an impact on the implementation of the CCT (see Appendix 2). This comprises of relevant guide questions for each dimension, accomplished by the research team via desk research and via observations/ informal interviews with locals in the respective cities/ municipalities during the actual fieldwork.

2.2 Respondents and Survey areas

2.2.1 Respondents

- Beneficiaries of the Pantawid Pamilyang Pilipino Program – The study targeted the designated grantees or registered parent/guardian (grandparents, other relatives) of Pantawid households.
- Program Personnel – Aside from beneficiaries, the study also targeted key Pantawid figures involved in the implementation of the program. This includes staff from the Regional Program Management Office (RPMO), program implementers (provincial, city, and municipal links) and Program Partners:
 - City Links



- Provincial Links
- Social Welfare Assistant
- Compliance Verification Officer
- Beneficiary Data officer
- Grievance Officer
- Monitoring & Evaluation Officer
- Regional Program Coordinator
- Elementary or High School Teacher
- Nurse or Midwife in a health facility

2.2.2 Areas Covered

A total of ten (10) areas were covered in this study (five cities and five (5) municipalities) – six (6) of which were tagged as areas of high compliance and four (4) were identified as low compliance areas. *(3) cities and two (2) municipalities with high-compliance rate; two (2) cities and three (3) municipalities with low compliance rate.*

For the low compliance regions, we ensured the representation of one (1) municipality that is relatively well-performing to be able to determine nuances in implementation and the potential leverages that the program can adopt to address low compliance. Barangays were selected based on number of beneficiaries, with a good representation of beneficiaries with 0-5 and 6-18-year-old children

Table 1. Cities and municipalities covered in high compliance regions

HIGH COMPLIANCE REGIONS	SPECIFIC MUNICIPALITIES
REGION I	<ul style="list-style-type: none"> ▪ Santo Domingo, Ilocos Sur (Brgy. Paras) ▪ San Carlos City in Pangasinan (Brgy. Guelew)
CARAGA	<ul style="list-style-type: none"> ▪ Butuan City, Agusan del Norte (Brgy. Manila De Bugabus, Brgy. Anticala) ▪ Libjo in Dinagat Islands (Brgy. San Antonio)

Table 2. Cities and municipalities covered in low compliance regions

LOW COMPLIANCE REGIONS	SPECIFIC MUNICIPALITIES
ARMM	<p>Low-performing:</p> <ul style="list-style-type: none"> ▪ Municipality of Datu Odin Sinsuat, Maguindanao (Brgy. Bugawas) ▪ Municipality of Sultan Kudarat, Maguindanao (Brgy. Limbo) <p>Well-performing:</p>



	<ul style="list-style-type: none"> ▪ Municipality of Talayan, Maguindanao (Brgy. Talayan)
NCR	<p>Low-performing:</p> <ul style="list-style-type: none"> ▪ Malate, Manila (Brgy. 704) ▪ Makati City (Brgy. Pembo) <p>Well-performing:</p> <ul style="list-style-type: none"> ▪ Taguig City (Brgy. Western Bicutan)

2.2.3 Sample sizes

A total of twenty (20) MINI-FGDs, broken down as follows per area:

Table 3. Breakdown of Mini-FGDs Among Beneficiaries

Segment	Number of MINI-FGDs									
	NCR			ARMM			CARAGA		Ilocos Region 1	
	Malate, Manila	Makati City	Taguig City	Datu Odin Sinsuat	Sultan Kudarat	Talayan	Butuan, Agusan del Norte	Lbjo, Dinagat Islands	Santo Domingo, Ilocos Sur	San Carlos, Pangasinan
4Ps Beneficiaries	2	2	2	2	2	2	2	2	2	2
TOTAL	20 MINI-FGDs									

NOTE: Parent leaders were excluded from the mini-FGDs given their relative influence in the community so as not to disrupt and bias the discussions among regular beneficiaries

Findings from the beneficiaries' MINI-FGDs were supplemented with **a total of thirty (30) In-Depth Interviews via home visits**, with the following breakdown:

Table 4. Breakdown of Home Visits Among Beneficiaries

Segment	Number of IDIs									
	NCR			ARMM			CARAGA		Ilocos Region 1	
	Malate, Manila	Makati City	Taguig City	Datu Odin Sinsuat	Sultan Kudarat	Talayan	Butuan, Agusan del Norte	Lbjo, Dinagat Islands	Santo Domingo, Ilocos Sur	San Carlos, Pangasinan
4Ps Beneficiaries	3	3	3	3	3	3	3	3	3	3
TOTAL	30 IDIs									

NOTE: For each municipality, a parent leader was part of the interview sample to also get their views on the program given their level of involvement

A total of **forty-eight (48) In-depth Interviews** among RPMO staff and program partners.

Table 5. Breakdown of IDIs Among RPMOs and Program Partners

Segment	Number of IDIs									
	NCR			ARMM			CARAGA		Ilocos Region 1	
	Malate, Manila	Makati City	Taguig City	Datu Odin Sinsuat	Sultan Kudarat	Talayan	Butuan, Agusan del Norte	Lbjo, Dinagat Islands	Santo Domingo, Ilocos Sur	San Carlos, Pangasinan
City Links	1	2	1	1	1	1	1	1		2
Provincial Links				(1) Province of Maguindanao			1	1	1	1
Social Welfare Assistant			1	(1) Province of Maguindanao				1	1	
Compliance Verification Officer	(1) NCR Regional Office			(1) ARMM Regional Office			(1) CARAGA Provincial Office		(1) Region I Regional Office	
Beneficiary Data officer	(1) NCR Regional Office			(1) ARMM Regional Office			(1) CARAGA Provincial Office		(1) Region I Regional Office	
Grievance Officer	(1) NCR Regional Office			(1) ARMM Regional Office			(1) CARAGA Provincial Office		(1) Region I Regional Office	
Monitoring & Evaluation Officer	(1) NCR Regional Office			(1) ARMM Regional Office			(1) CARAGA Regional Office		(1) Region I Regional Office	
Regional Program Coordinator	(1) NCR Regional Office			(1) ARMM Regional Office			(1) CARAGA Regional Office		(1) Region I Regional Office	
Elementary Teacher			1		1			1		1
Nurse or Midwife in a health facility			1			1		1		1
TOTAL PER AREA	12			12			12		12	
TOTAL	48 IDIs									



2.3 Limitations of the study

Limitations of Qualitative Research Design

Being qualitative in nature, findings from this study are not meant to be conclusive for the entirety of the 4Ps implementation. Rather, the research aims to provide **indications of possible situations and behavior occurring in the implementation of the program** that may contribute to the success and failure of the program in terms of beneficiary compliance, which may or may not necessarily occur in other regions not covered by the study. The magnitude of these behaviors cannot be measured in this study, though recurring patterns across regions are highlighted to provide indications of what behaviors and observations are shared or unique to a certain area.

Limitations in Sampling

Since only 1 education and 1 health program partner are allotted per region, these respondents can only speak for what is happening specific to their municipality. Thus, there is no sufficient read of the education and health program partners' attitude and behaviors in other municipalities, and the inputs on the health and education components of the 4Ps mainly come from the triangulation of beneficiaries and stories of RPMOs. All education program partners interviewed are elementary school teachers since selection of respondents was based on their availability during the fieldwork period.

The viewpoint of the LGU could also have provided us with a richer and holistic context to the situation of the 4Ps program in the respective municipalities covered, given their significant impact in the program's implementation. In lieu of this, insights on the LGU's role in the program in the specific regions covered were based on the point of view of the respondents, as well as the research team's observations and desk research. However, they are not part of the respondent sample coverage.

Deviations in Implementation

Due to security risks in specific CARAGA and ARMM barangays in line with presence of insurgents, the team was unable to conduct the home visits as planned in the respondents' homes. Similarly, some areas in ARMM were inaccessible due to flash floods during the time of fieldwork. As a compromise, respondents were instead interviewed one-on-one in their residence's barangay hall to ensure the team's safety.

Such security concerns also hindered the team from targeting municipalities in the island province of Basilan in ARMM, which is not easily accessible due to geographic constraints and political conflict. As a result, areas in ARMM were limited to the mainland province of Maguindanao.

ARMM mini-FGDs were not recorded on video due to the unstable electricity supply in the barangay hall.



3 Framework of Analysis

The following analysis framework reflects the interrelations between the different components affecting the implementation of the 4Ps. By looking at each of the specific factors, we will be able to identify the strong and weak links in each of the areas covered when it comes to the implementation and compliance performance of the regions.

The framework for this study takes into consideration the differences between **institutional mechanisms**, such as government programs – in this case, the 4Ps program as implemented by the DSWD and Program Partners — and **local realities in the community**, namely value systems and their expression in behavioral norms. The key differences lie in the fundamental epistemological presuppositions of both, as well as in their application to daily life.

Generally, institutional mechanisms are perceived to be legal-rational, i.e., based upon a set of presupposed relations between the institution and the citizen, on the management of the system on the basis of goals, with the relationships as secondary, on the exchange of values for private benefit in a market economy, and on the individual and not the family or other social unit as the basic unit of society. Legal-rational institutions are also perceived to be impersonal; they are not set up to favor one person or another but rather to deal with all who come before them on the same level.

The traditional social setting on the other hand, across the different cultural systems in the Philippines, is very different. Across the archipelago, traditional family- and kinship based systems still prevail, and in many ways this shapes the orientation of people towards dealing with others. Thus, when dealing with strangers and persons in authority, politeness and concern for face prevail. Together with this is bridge building through gifts and other attempts to create personal relationships. This is also a reflection of the sense of *kapwa* or the sense of self-in-the-other that appears to be shared across the cultures of the Philippines.

Politeness and face as a strategy is rooted in a number of historically and culturally based factors:

1. **Kapwa** (sense of self-in-the-other) and its expressions in **pakikisama** (getting along with others) and **pakikitungo** (maintaining relations with others more powerful) is a culturally based value that helps in survival of the group by promoting sharing of resources.
2. **A sense of solidarity** (*kapwa*) is also a defensive measure, in that people will protect each other to the extent that they feel this sense of *kapwa* with one another.
3. **Bridge-building and mediation** are also cultural strategies favored by communities that are powerless in the face of outside forces. This has long been the case with many indigenous groups, having to negotiate their existence both with outsiders (government and private groups) and with larger neighboring communities.
4. **Traditional power relations**, based on a class system that, while it has no significant political power, nevertheless retains a great deal of respect as far as local communities are concerned.



The diagram below outlines the characteristic features of both the legal-rational institution and the traditional social system:

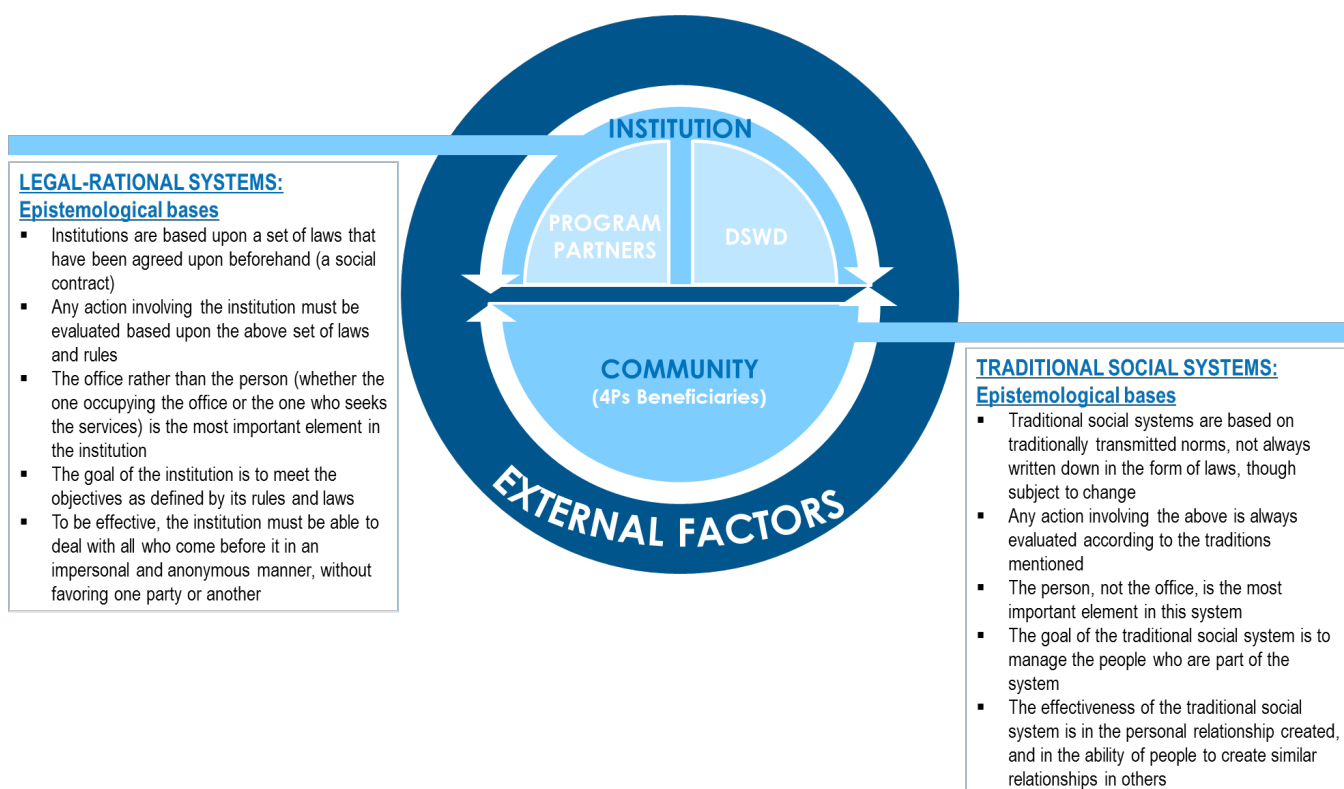


Figure 1. Characteristic features of legal-rational institution vis-a-vis traditional social system

Institutional definitions and mechanisms that rely on impersonal relationships such as government and lending institutions have to contend with these cultural mechanisms in the community. What often happens is that as the cultural interpenetrates the institutional, the participants in the institutional mechanisms will negotiate the rules of the institution and the cultural mechanisms that they are part of. People will make choices, whether (a) **to adhere to institutional rules**, (b) **to follow local community norms**, or (c) **to aim for a mix of both**. Each choice has attendant consequences:

- For people who are part of the institution, i.e. employees and responsible officials, strict adherence to the rules can cost them greatly in terms of relationships to the community.
- Adherence to community norms, while the default behavior for many people, may also end up creating problems for clients of institutions, as the kinds of assumptions they bring into the institution will differ greatly from what the institution is based on. The result is
- The third option, that of a mix of adherence to both institutional rules and community norms is often preferred by both the institution members and their clients. Thus, a client may seek to build bridges within the institution by cultivating relationships with

members within. Similarly, members of institutions will also maintain as much as possible *pakikitungo* or smooth relations with their clients.

Though in many ways there is indeed a disjoint between the two, **this does not mean that there is a dysfunction**, i.e., that the two cannot come together. Both the institution and the traditional social system can be made to harmonize provided there is sufficient knowledge about how both work separately, and a willingness to see to it that they can be harmonized.

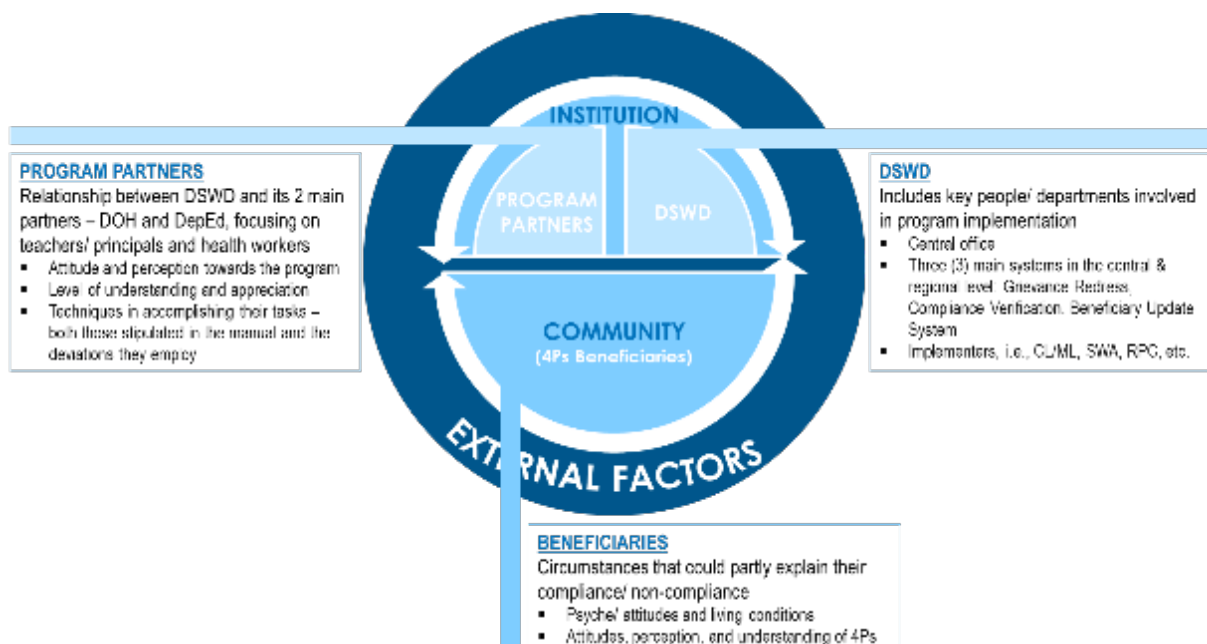


Figure 2. Analysis framework illustrating the relationship between institutional and community factors

Apart from the internal factors that make up the core of the analysis framework, external factors are likewise examined to determine their impact to the success of 4Ps implementation. Analysis aims to uncover the role that the LGU and other geographical, economic, and socio-politico-cultural factors play in enabling or hindering the compliance of beneficiaries to the conditionalities, as well as in enabling or hindering program implementers (DSWD RPMOs, Program Partners) in performing their functions.

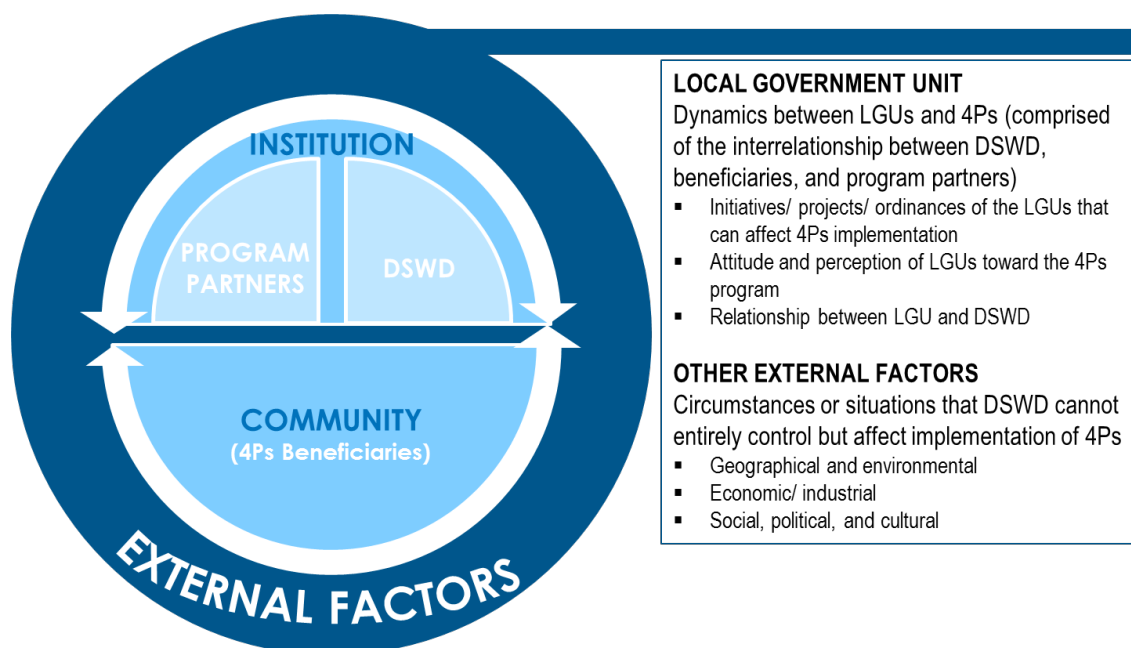


Figure 3. Analysis framework illustrating the external factors affecting compliance

4 Contextual Information on the Areas Covered

ILOCOS REGION – Municipality of Sto. Domingo, Ilocos Sur and San Carlos City, Pangasinan

GENERAL REGIONAL INFORMATION

Region I, an area more commonly referred to as the Ilocos Region, is situated at the north western tip of Luzon island, east of the West Philippine Sea (South China Sea). It is geographically made up of a combination of rolling plains and coastal areas, which gives rise to its regional livelihood of farming and livestock raising, as well as fishing and other sea industries. As per the 2015 national census, the Ilocos Region is home to 5,026,128 residents⁸, spread across four administrative provinces: Ilocos Norte, Ilocos Sur, La Union, and Pangasinan.

STO. DOMINGO, ILOCOS SUR



Figure 4. Vicinity map of Paras, Sto. Domingo

The municipality of Sto. Domingo is located in the northern area of the province of Ilocos Sur, 8 kilometers north of the provincial capital of Vigan City. Wide planting fields predominantly occupy the land area of the municipality⁹, with almost half of its total area reserved for agricultural purposes. Aside from the plains found in the area, there are also seaside towns

⁸

Population of Region I – ILOCOS REGION (Based on the 2015 Census of Population. Philippine Statistics Authority. June, 2016. Accessed August 12, 2016. <https://psa.gov.ph/content/population-region-i-ilocos-region-based-2015-census-population>

⁹

Facts about the Municipality of Sto. Domingo. Official Website of the Municipality of Sto. Domingo. Accessed August 11, 2016. <http://www.stodomingo-ilocossur.gov.ph/aboutstodomingo.html>

located in Sto. Domingo that have direct access to the West Philippine Sea. It is composed of 36 barangays, of which 29 are rural and only 7 are considered urban.

Economic activity in this municipality is driven primarily by agriculture, wherein the expansive fields that are scattered around the municipality are primarily used for planting crops and produce. Most of these farms are owned by wealthy residents and local businessmen who hire local residents as farmworkers to till, nurture, and harvest crops such as rice, corn, sugarcane, and tobacco. In addition to the agricultural trade of Sto. Domingo, the municipality also has a fishing industry due to its seaside location.

Aside from these major local industries, employment opportunities for residents are still mostly limited. Most Sto. Domingo locals work as farm laborers in the planting fields surrounding the municipality, while some work as fishermen in seaside towns. Because of the limited work opportunities in Sto. Domingo, some residents seek out employment in the more urban city of Vigan, where they find work in the businesses that abound there. Others even venture abroad as overseas Filipino workers to provide for their families back in the municipality.

With most residents earning only minimally through the available options for employment in the municipality, many of the citizens of Sto. Domingo struggle with various financial burdens. According to interviews with local respondents, chief among their financial concerns would be their day-to-day sustenance which they spend around 100 pesos on. In addition to this, parents of children who are enrolled in school are also pressured to allocate money for the needs of their enrolled kids (e.g. allowance in the form of money or meals, whichever is available). Parents give their children around 10 pesos for money daily, as well as an allotted 50 pesos in the event that they encounter sudden financial costs due to school projects and compulsory contributions. Differences in the financial requirements among children enrolled in elementary and high school are minimal, only varying from time to time depending on the projects assigned to the students. Typically, high school students are required to pay for printing and internet use (around 15 to 20 pesos), which is sometimes asked of elementary students as well.

Sto. Domingo is currently led by a longstanding political clan which has held power in the municipality since 2001. Under their tenure of more than a decade, they have spearheaded infrastructure projects and local programs that cater to health, among many others, according to the local residents and natives. Their term also yielded the 191st ranking of the municipality in terms of Government Efficiency¹⁰ ("the quality and reliability of government services and support for effective and sustainable productive expansion") among LGUs in the country, ranked 79 among third class municipalities¹¹.

As per observations noted by local residents during study interviews, infrastructures for health and education are adequate based on their experiences. Currently, there are seven health clinics¹² dispersed throughout the municipality on top of the private general hospital situated in

¹⁰ 2016 *Cities and Municipalities Competitive Index*. National Competitiveness Council. Accessed August 13, 2016. <http://www.competitive.org.ph>

¹¹ Ibid.



Sto. Domingo. In the school year 2009-2010, there were a total of 28 established schools, of which 27 were public institutions¹³, scattered around the municipality. According to residents, access to these schools were easy, with most of them only walking to reach the nearest educational institution. While data on the municipal literacy in Sto. Domingo is not available, provincial data suggests that it might be relatively high, considering the 94.09 percent literacy rate¹⁴ throughout the province of Ilocos Sur in 2000. Most residents in the province finished at least elementary and high school.

SAN CARLOS CITY, PANGASINAN

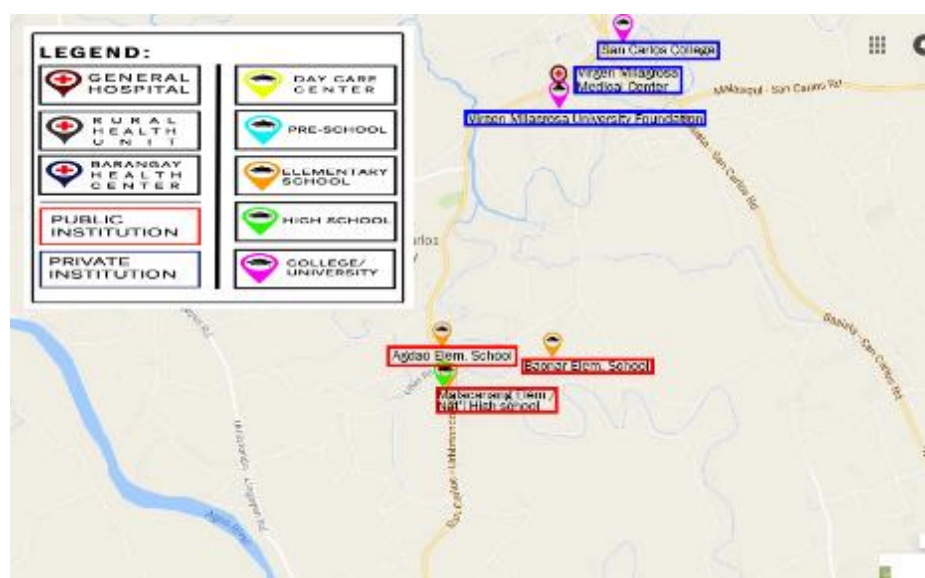


Figure 5. Vicinity map of Guelew, San Carlos City

San Carlos is considered to be the most populated city in the Ilocos Region, with 188,571 people residing in the city as per the 2015 census¹⁵. These residents are spread across the 86 barangays that make up San Carlos, of which 15 are considered urban centers while the rest are designated as rural.

San Carlos City features a sprawling landscape mostly composed of rolling plains dedicated to farming and agriculture. They are recognized for producing rice, root crops, and corn – produce which are sold within the city, as well as to other neighboring areas. Aside from this, San Carlos is also known for other non-agricultural industries that drive economic activity in the city such as its bamboo handicraft industry. Other than this, San Carlos also has enterprises that involve

¹² *Facts about the Municipality of Sto. Domingo*. Official Website of the Municipality of Sto. Domingo. Accessed August 11, 2016. <http://www.stodomingo-ilocosur.gov.ph/aboutstodomingo.html>

¹³ Ibid.

¹⁴ *Ilocos Sur QuickStat*. Philippine Statistics Authority. August, 2016. Accessed August, 11, 2016. https://psa.gov.ph/sites/default/files/attachments/ird/quickstat/Ilocos%20sur_32.xls

¹⁵ Ibid.

livestock trading and inland fishing, particularly in the areas with expansive land and those who have live in towns near the Agno River.

San Carlos is also considered to be a bustling urban center, being the most populated city in the province and the region. It's a transport hub designated as one of the provincial stops of several bus companies. It houses several educational institutions, which includes higher education institutions such as the Pangasinan State University (San Carlos Campus) and the Virgen Milgarosa University, as well as several other schools that cater to different levels. In the school year 2009-2010, it recorded 45 day care centers, 74 elementary schools, and 34 secondary schools making education relatively accessible for the residents of the city¹⁶. This is one of the contributors as to why the general literacy rate in the province of Pangasinan is relatively high at 95 percent¹⁷.

CARAGA REGION – Butuan City, Agusan del Norte and Municipality of Libjo, Dinagat Islands

GENERAL REGIONAL INFORMATION

Region XIII, also known as CARAGA, is an administrative region that is located at the northeastern portion of Mindanao and is home to an estimated 2.7 million Filipinos¹⁸. The region is composed of five provinces (Surigao del Sur, Surigao del Norte, Agusan del Sur, Agusan del Norte and Dinagat Islands), six cities and 67 municipalities¹⁹.

¹⁶ Ibid.

¹⁷ *Pangasinan QuickStat*. Philippine Statistics Authority. August, 2016. Accessed August, 11, 2016. https://psa.gov.ph/sites/default/files/attachments/ird/quickstat/pangasinan_32.xls

¹⁸ *Population of Region XIII - CARAGA (Based on the 2015 Census of Population)*. Philippine Statistics Authority. June, 2016. Accessed August 12, 2016. <https://psa.gov.ph/content/population-region-xiii-caraga-based-2015-census-population>

¹⁹ Ibid.



BUTUAN CITY

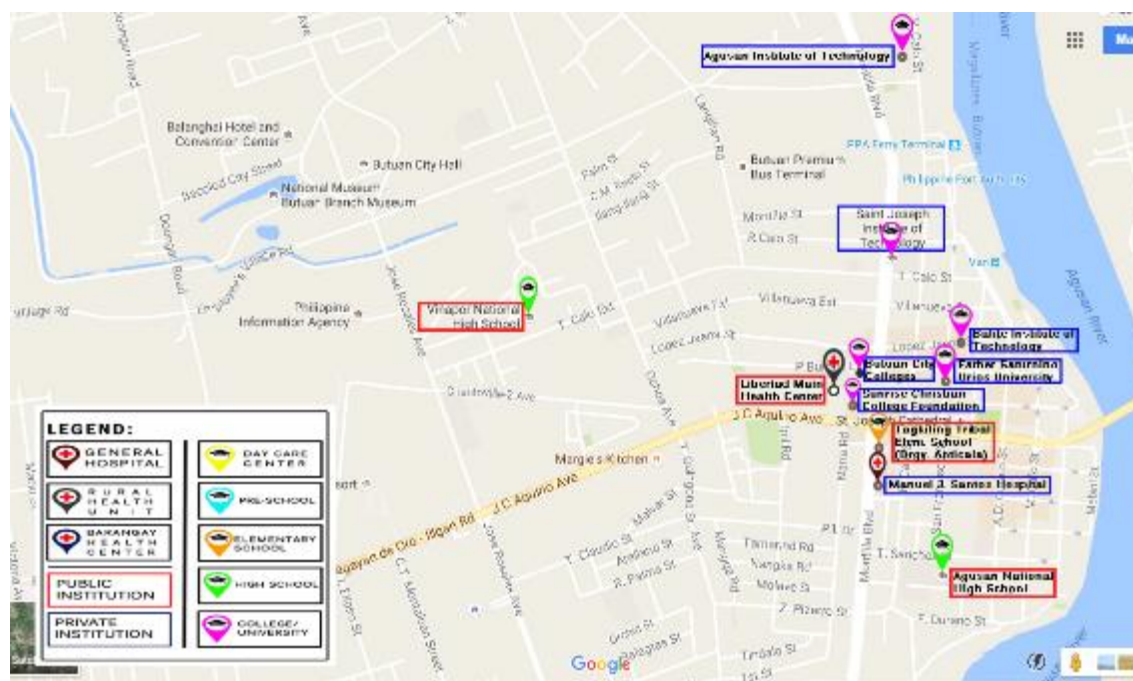


Figure 6. Vicinity map of Anticala, Butuan City

Butuan is located in the northwestern part of the Caraga region and is perceived to have a very strategic location as it serves as the “gateway” to the whole region and the “link” between the different Northern Mindanao provinces – Misamis Oriental, Surigao and Davao²⁰. In fact, it is currently the only highly urbanized city in Caraga and serves as both the regional and provincial trading center of the region²¹.

Butuanons that were interviewed have described the steady developments happening in their city in the past few years. These developments are characterized by the construction of new infrastructures like numerous buildings, hotels, malls and even a golf course. According to the participants of the FGDs and HVs, these developments paved the way for new job opportunities that are mostly construction-related. Such signs of progress seem to make Butuanons seem more positive about their future. However, farming remains to be the staple source of food and income in the study areas of barangay Anticala and Manila de Bugabus, especially since both barangays are near the rural mountains. In both these areas, residents mostly have irregular jobs, these refer to jobs that are occasional (e.g. working in farms during planting/harvest season), temporary (e.g. construction) or jobs that they chanced upon (e.g. running errands for neighbors like doing laundry). Aside from these different ways to earn money, most families also plant vegetables in their backyards wherein the produce is mainly used for home

²⁰ *Butuan City Commodity Investment Plan*. Accessed August 12, 2016. <http://drive.daprdp.net/iplan/ccip/Butuan%20CCIP%20FINAL.pdf>

²¹ Marielle Antonio (Ed.), *Planting the seeds of a sustainable future-City Government of Butuan*, Institute for the Solidarity of Asia, (2015). Accessed August 12, 2016. <http://isacenter.org/wp-content/uploads/2015/06/2015-Transformation-Story-Butuan-City.pdf>

consumption. However, it can also be sold to the market or to their neighbors if they have too much stock.



Figure 8. Beneficiary residence (exterior) in Anticala, Butuan City

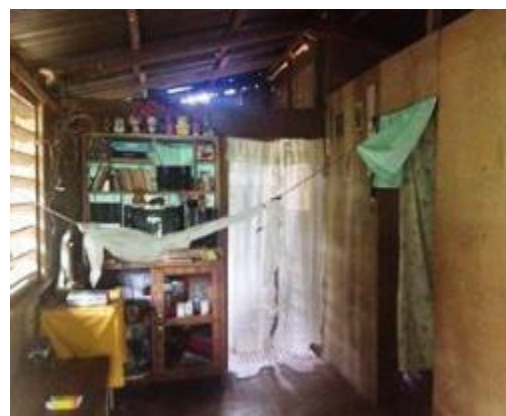


Figure 7. Beneficiary residence (interior) in Anticala, Butuan City

According to the beneficiaries that were interviewed, their financial concerns mostly revolve around their family's needs like food, particularly rice since most have backyard farms, utility bills and school-related expenses. In terms of school-related expenses, they need to give their child as much as Php50 (depends on the distance of the school from their homes) for fare and another Php5 (for elementary students) or Php10 (for high school students) for their *baon* or snacks.

In terms of education and health related infrastructures in the area, beneficiaries that were interviewed have the sentiment that schools are not a problem in their area although some tend to be a bit too far from their homes. Especially for those residing in mountainous areas, it takes their children 30 minutes to an hour to reach their schools. Hospitals are also not a concern

since 7 of the 15 hospitals in Agusan del Norte are located at Butuan City including the Agusan del Norte Provincial Hospital²². As claimed and observed in Barangay Anticala, health centers are also located near barangay halls for the convenience of the people. Generally, although schools or health centers/hospitals can be far from their residence, beneficiaries that were interviewed did not seem to mind the distance.



Figure 9. Health Center beside the Barangay Hall in Anticala, Butuan City

²² Health. Agusan del Norte Official Website. Accessed August 12, 2016.
<http://www.agusandelnorte.gov.ph/index.php/socio-eco-profile/population-and-social-profile/health>



Figure 10. Vicinity map of Manila De Bugabus, Butuan City

LIBJO, DINAGAT ISLANDS

The whole province of Dinagat Islands are located at the northeast of Surigao del Norte. The municipality of Libjo, in particular, is part of the first district of the province and can be reached via a two- to three-hour ferry or pump boat ride from the Surigao City Port. The location of Libjo makes going in and out of it quite difficult especially since fare for the ferry/boat ride is expensive, one-way fare ranges from Php200 to Php340.

As observed and based on the interviews that were conducted, aside from the difficulty of going in and out of the islands even going around the municipality can be difficult as well. Terrain in Libjo varies from being flat, rugged to mountainous and not all areas have cemented roads. This type of topography leads to the use of different forms of transportation. Some residents live in parts of the island that require them to use a boat in order to get to the municipality proper while others have to traverse mountainous areas where they can either ride a *habal-habal* (local term that refers to a motorcycle) and pay a minimum fare of Php10 or just walk, this is especially true in areas where there are no *habal-habals*.

Aside from the general difficulty of going around the area, issues with the terrain and transportation also has a great effect when it comes to availing the social services in the area (e.g. health and school infrastructures might be too far away for some residents). According to the beneficiaries and program implementers that were interviewed, barangay health workers solve this problem by going to different barangays themselves. However, this leaves the health centers unattended for a number of days.

In terms of health and education related infrastructures, beneficiaries point out that there are very limited resources in their municipality. In fact, according to a 2006 data from the IPHO,



there are only 2 health stations that cater to 16 barangays in Libjo²³. The problem with the limited facilities is further worsened by the terrain and transportation system in the area that makes going around the municipality difficult. Aside from the lack of facilities, beneficiaries and even the program implementer and health worker that were interviewed reported that there is also a lack of equipment and manpower in the health sector of the area. School facilities, on the other hand, some are not well-maintained or are made of fragile materials (e.g., bamboo).



Figure 12. Central Elementary School in Libjo, Dinagat Islands



Figure 11. An abandoned classroom in Libjo, Dinagat Islands that needs to be repaired

Libjo is tagged as a fifth income class municipality²⁴ – a municipality that has earned an average annual income of PhP15,000,000 to PhP24,999,999 in the previous four calendar years. According to the program implementers and the beneficiaries interviewed, there are three main sources of income in Libjo: mining, farming and fishing. According to the program implementers there are those who choose to rely on mining since it pays better; however, the job is seasonal only (i.e., there are off seasons where mining operations take a break) and is also quite dangerous. Farming is another option that residents tap in order to feed their families. It can either be backyard farming or getting paid for helping out in the farm of other people. Similar to the rural barangays in Butuan, families in Libjo tend to have backyard farms where the produce is mainly for home consumption. This helps them save money since all they have to worry about is the rice. According to those interviewed, fishing is also another route they can take to earn money.

As observed, price of goods and commodities in Libjo are high since most are bought from Surigao, with rice being the most burdensome to buy for the residents. However, no matter how expensive, rice is still a necessity since it remains as the staple food for the family. Aside from the daily struggle of getting food on the table, those who have children who go to school need to spare at least PhP5 to PhP10 a day for their child's food allowance and PhP20 for their round-trip *habal-habal* ride. However, parents some would rather just have their children walk to school due to lack of money.

²³ General Profile (Dinagat Islands). Accessed August 12, 2016.

<http://dev.dinagatislands.gov.ph/executive/ppdo-main/socio-economic-profile-2/general-profile/>

²⁴ Municipality/City: Libjo (Albor). The Philippine Statistics Authority.

NATIONAL CAPITAL REGION – Malate District, Makati City, and Taguig City

GENERAL REGIONAL INFORMATION

The National Capital Region (NCR), more commonly referred to as Metro Manila, is the capital region and the seat of government of the Philippines²⁵. It was created through Presidential Decree No. 824 by then President Ferdinand Marcos²⁶. It is composed of the cities and municipalities of Caloocan, Las Piñas, Malabon, Mandaluyong, Manila, Makati, Marikina, Muntinlupa, Navotas, Paranaque, Pasay, Pasig, Pateros, Quezon, San Juan, Taguig and Valenzuela.

As stated in Presidential Decree No. 824, these areas are under the direct supervision of the President of the Philippines, hence referred to as a “special development and administrative region”. As of the latest census of population in 2015, NCR accounts for 12.8%, or 12.88 million, of the country’s whole population²⁷.

²⁵ *Population of the National Capital Region (Based on the 2015 Census of Population)*. Philippine Statistics Authority. May, 2016. Accessed August 10, 2016. <https://psa.gov.ph/content/population-national-capital-region-based-2015-census-population-0>

²⁶ *Region NCR National Capital Region: Brief Description*. Visit My Philippines. Accessed August 10, 2016. <http://www.visitmyphilippines.com/index.php?title=Regional%20Profile&func=all&pid=388&tbl=0>

²⁷ *Population of the National Capital Region (Based on the 2015 Census of Population)*



MALATE DISTRICT, MAKATI CITY AND TAGUIG CITY

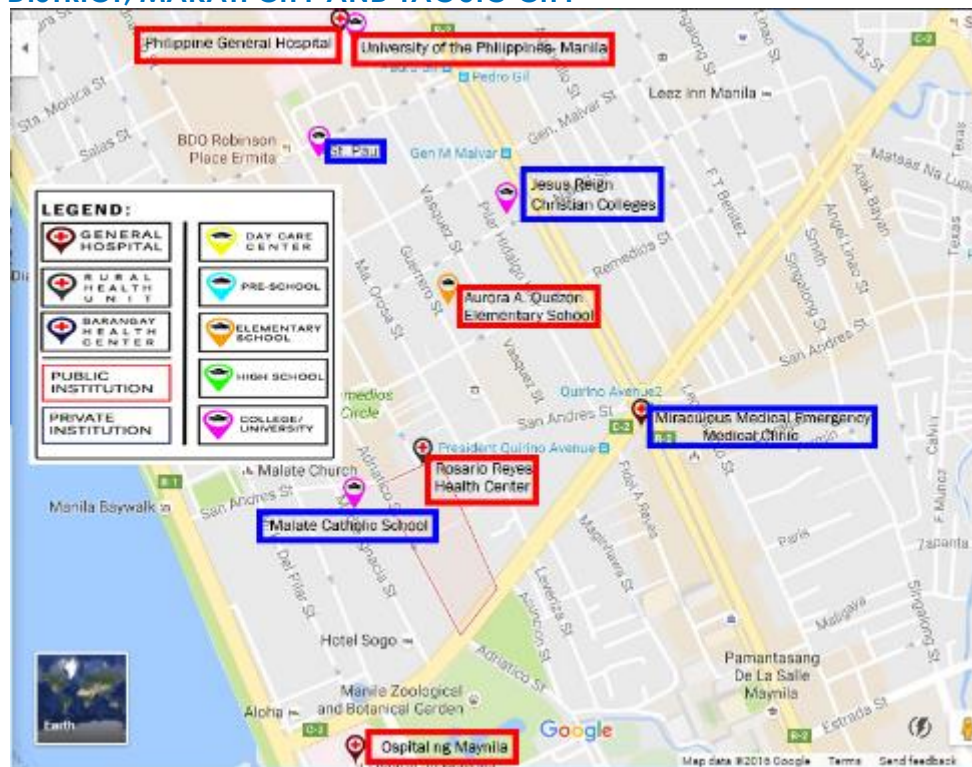


Figure 14. Vicinity map of Brgy. 704, Manila City

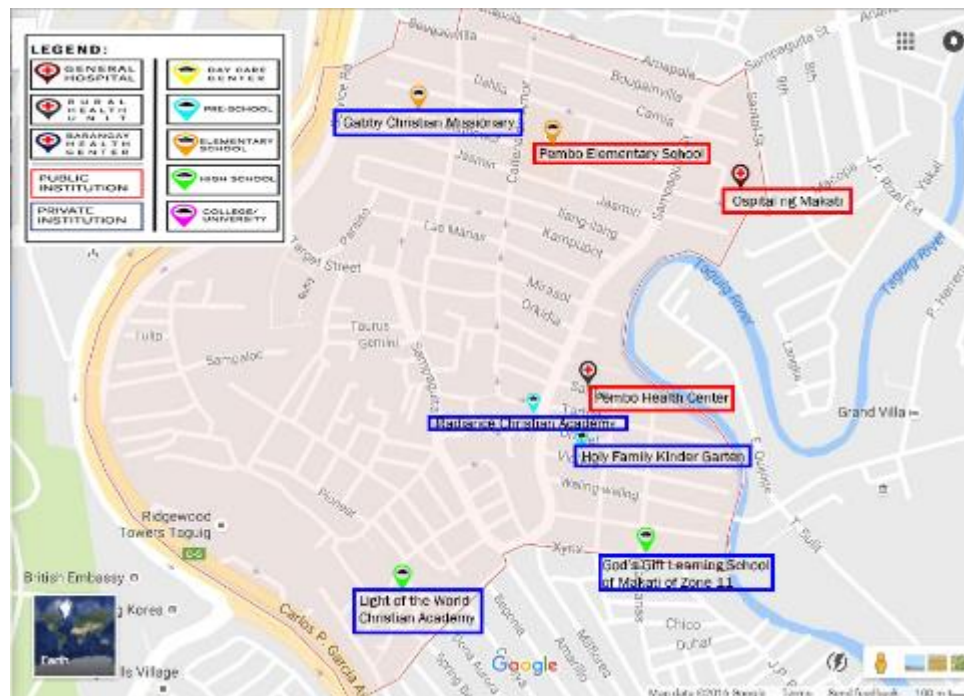


Figure 13. Vicinity map of Pembo, Makati City



Figure 15. Vicinity map of Western Bicutan, Taguig

The cities of Makati, Taguig and Manila, the city where the district of Malate is located, are highly urbanized cities that have commercial areas within their bounds. However, people from different parts of the country go to these areas with the belief that they will have better opportunities, hence results to NCR being labelled as the most densely populated region in the country²⁸.

According to the 2015 census of population from the Philippine Statistics Authority, the city of Manila, not to be confused with the bigger Metro Manila administrative region that it is a part of, has a total land area of 3,855 hectares and is home to 1,780,000 residents. The district of Malate, specifically, is one of the sixteen (16) districts of the city and has 86,196 residents, as of the 2015 census of population, spread in its 57 barangays²⁹.

Makati City, on the other hand, is divided into two legislative districts, with 32 barangays in total³⁰. As of the 2015 census of population, the city currently has 583,000 residents and a total land area of 27,355,700 hectares³¹. The city, known for having a strategic location and for being the country's premier business district³², used to be a municipality of Rizal and was

²⁸ *Population of the National Capital Region (Based on the 2015 Census of Population)*

²⁹ *Ibid.*

³⁰ *Basic Facts and Figures*. Makati Government Official Website. Accessed August 9, 2016. http://www.makati.gov.ph/portal/uploads/staticmenu/docs/physical_features.pdf

³¹ *Population of the National Capital Region (Based on the 2015 Census of Population)*

³² *The Economic Structure*. Makati Government Official Website. Accessed August 8, 2016. http://www.makati.gov.ph/portal/uploads/staticmenu/docs/economic_structure.pdf

only converted to an independent city under Republic Act 7854 of then President, Fidel Ramos, in 1994³³.

The City of Taguig went through numerous changes before it finally came to be the Taguig that we know today. According to the official website of the city, it used to be a municipality under Rizal province and was subsequently merged, separated and re-merged with Muntinlupa and Pateros³⁴. Taguig was eventually turned into a highly urbanized city independent of Muntinlupa and Rizal during the 70s and, through a plebiscite in 2008, was further politically subdivided to 28 different barangays occupying a total land area of 4,518 hectares³⁵. As of the 2015 Census of the Population, the city currently has 805,000 residents and is the fastest growing city in the region, with an average annual population growth rate of 4.32%³⁶.

NCR is the center of the country's economy, hence the highly urbanized cities of Manila, Makati and Taguig boast of their thriving economies and varied industries³⁷. According to the Department of Trade and Industry (DTI), Manila remains to be a central player in the different economic related industries in the region (e.g. banking, transportation, finance, retail, etc.)³⁸.

Makati, on the other hand, is known as the country's premier business district. In fact, it has recently won in the 4th Regional Competitiveness Summit as the number one in terms of economic dynamism and second place in terms of competitiveness³⁹. However, according to property advisors Cushman and Wakefield, Taguig City has already defeated Makati City when it comes to renting Grade-A office spaces⁴⁰. This is a proof that Taguig City, particularly its Bonifacio Global City (BGC), has quickly become an important business district as well. According to the local government's official website, aside from being the home to numerous BPO companies and the main offices of international brands, other investors and even the business regulators like the Philippine Stock Exchange are expressing interests to transfer to BGC - proof that Taguig is becoming a trusted business ally⁴¹.

According to the beneficiaries that we have interviewed, they tend to rely on different *rakets* or odd jobs in order to make ends meet (e.g. wash other people's laundry, drive tricycles/jeepneys, etc.). Some also take up contractual jobs (e.g. construction-related, sales,

³³ *Republic Act No. 7854*. The Corpus Juris. Accessed August 11, 2016. <http://www.thecorpusjuris.com/legislative/republic-acts/ra-no-7854.php>

³⁴ *History (of Taguig city)*. Taguig Government Official Website. Accessed August 10, 2016. <http://www.taguig.gov.ph/our-city/history/>

³⁵ *Ibid.*

³⁶ *Population of the National Capital Region (Based on the 2015 Census of Population)*

³⁷ *DTI-NCR*. DTI Official Website. Accessed August 11, 2016. <http://www.dti.gov.ph/rog/index.php/metro-manila>

³⁸ *Ibid.*

³⁹ Michael Frialde, *Makati ranks first in economic dynamism – NCC*, The Philippine Star (June, 2016). Accessed August 10, 2016. <http://www.philstar.com/metro/2016/07/15/1603158/makati-ranks-first-economic-dynamism-ncc>

⁴⁰ *BGC eclipses Makati as office host*. The Manila Times. February, 2016. Accessed August 10, 2016. <http://www.manilatimes.net/bgc-eclipses-makati-as-office-host/243650/>

⁴¹ *Top financial regulators flock to Taguig*. Taguig Government Official Website. Accessed August 11, 2016. <http://www.taguig.gov.ph/top-financial-regulators-flock-to-taguig/>



etc.). The small income they get will then be budgeted in order to cover all the expenses of their families. This situation reduces them to a hand-to-mouth type existence – having a job does not entail a better life for them and their families

Based on the beneficiary FGD and HV interviews conducted for this study, the main financial concern of beneficiaries is getting food on the table. This is followed by other expenses in the house like utility bill. School-related expenses are added financial burdens to these people, they have to give their children money for food (PhP10-30 for elementary students and a minimum of PhP50 for high school students) and fare (minimum of PhP12 a day). Aside from this daily school expenses, they also need to have extra money in case of homework/ projects that teachers assign to their children, most of which require the use of computers and the internet. A minimum of PhP1/minute will be spent for computer rental and this does not yet include fees for printing. Other school fees include the project of the parent-teacher groups that they are also asked to pay, and other contributions (can range from PhP50 to PhP150). Sudden health-related issues are also an added burden. Having health cards (Manila and Makati), health centers and other organizations that they can go to (i.e., Caritas in Manila) help lighten the financial burden of possible circumstances like this.

People, from different parts of the country, flock to NCR with the belief that better opportunities are more accessible in these cities⁴². As observed during the interviews, this situation results to the creation of communities that are composed of diverse groups of people. An example of this is the migration of some Badjao families from their provinces to Malate, Manila where they decided to settle and create their homes. The ease of settling in these areas also make people come and go easily. As observed and gathered from the beneficiary interviews, people in the city also tend to live a busy lifestyle – city life is characterized by fast-paced timelines, congested roads, problematic public transportations, more constricted spaces and problems with pollution.

Seats of government in these areas are currently occupied by politicians from old political clans: Estrada in Manila, Binay in Makati and Cayetano in Taguig.

For the beneficiaries that were interviewed, the number of health facilities in their area is not a problem – in fact, they feel that it is adequate to cater to the people in their community. They also feel that the health centers are easily accessible and are usually equipped with proper equipment and complete manpower (doctor, nurses, etc.). In Manila and Makati, they also have local government issued health cards (Yellow and Orange cards respectively) that give them access to health-related benefits or perks. Aside from these, beneficiaries from Malate also reported that they have numerous civil society organizations and church organizations that provide them with free health-related services as well.

According to the beneficiaries that were interviewed, schools in their areas are also not that much of a concern as well since they are conveniently reachable. However, some complain that classrooms tend to be too congested due to having too many students per class/section.

⁴² Christine Castaneda, *Highest population density still to be found in NCR*. Business World Online. (September, 2016). Accessed September 3, 2016. <http://www.bworldonline.com/content.php?section=TopStory&title=highest-population-density-still-to-be-found-in-ncr&id=132833>



In fact, students in one classroom can range from 55 (for Makati in 2013-2014⁴³) and 68 (in Taguig in 2012-2013⁴⁴). This is far from the Department of Education ideal standard of having 45 students per classroom in the secondary level, a standard that cities in NCR are currently aiming to achieve⁴⁵. Aside from this goal, beneficiaries from Makati and Taguig are also grateful to their local city governments because of the free school supplies (e.g. uniforms, books, pens, etc.) that are given to their children every school year.

AUTONOMOUS REGION IN MUSLIM MINDANAO – Municipalities of Talayan, Datu Odin Sinsuat, and Sultan Kudarat in Maguindanao

GENERAL REGIONAL INFORMATION

The Autonomous Region in Muslim Mindanao (ARMM) is a region located in the southern section of the Philippines. It is recognized as the only region in the country that it is governed by its own autonomous regional government, complete with its own executive and legislative divisions. According to the 2015 national census, there are 3,781,387 residents who live in the region's 4 administrative provinces⁴⁶ – mainland Maguindanao and Lanao del Sur, and the island provinces of Sulu, Basilan, and Tawi-Tawi.

⁴³ *Makati all set for school opening*. Makati City Government Official Website. June, 2013. Accessed August 11, 2016. <http://www.makati.gov.ph/portal/news/view.jsp?id=3022#.V9VYQFt97Mx>

⁴⁴ *Mayor Lani implements the ideal 45 teacher to student ratio in Taguig public schools*. Taguig City Government Official Website. Accessed August 12, 2016. <http://www.taguig.gov.ph/mayor-lani-implements-the-ideal-145-teacher-to-student-ratio-in-taguig-public-schools/>

⁴⁵ Dona Pazzibugan and Kristine Mangunay, *Students swamp 'congested' Metro Manila schools*. The Philippine Star, (June, 2014). Accessed August 11, 2016. <http://newsinfo.inquirer.net/607755/school-heads-cede-offices-to-classes-626-metro-public-schools-have-2-shifts>

⁴⁶ *ARMM QuickStat*. Philippine Statistics Authority. August, 2016. Accessed August, 11, 2016. https://psa.gov.ph/sites/default/files/attachments/ird/quickstat/Armm_32.xls



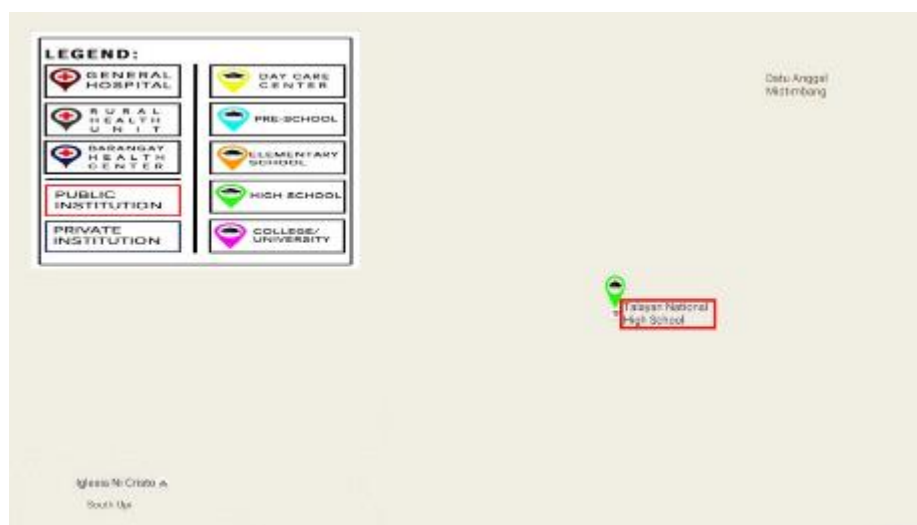


Figure 18. Vicinity map of Brgy. Talayan, Talayan

The province of Maguindanao is found in central mainland Mindanao, a coastal province that covers a combination of seaside coasts, rolling plains, and steep mountains. With 1,173,933 registered residents as per the 2015 national census⁴⁷, the province is also home to the most number of residents in all of ARMM. These residents are spread across the 36 municipalities and 508 barangays of the province.



Figure 19. Aerial shot of the Province of Maguindanao

The municipalities of Talayan, Datu Odin Sinsuat, and Sultan Kudarat – three areas we targeted for this study – are generally similar in terms of geographical features. While their total land area differs – Talayan is the smallest of the three at 143.84 square kilometers, Datu Odin Sinsuat at 461.80 square kilometers, and Sultan Kudarat the largest at 712.91 square kilometers⁴⁸ - they are all geographically composed of wide fields primarily used for agriculture and planting. These municipalities are still largely rural, with foliage still dominating the landscape of their areas rather than infrastructure and urban development.

Maguindanao is recognized as an agricultural province, with 3,603 square kilometers⁸ of its total land area dedicated to farming and other agricultural industries that produce rice, corn, coconut, banana, and cassava. These crops are often traded within the province of Maguindanao itself, as well as to neighboring areas and distant regions. Based on field observations, farming is among the common sources of livelihood in the

⁴⁷ *Maguindanao QuickStat*. Philippine Statistics Authority. August, 2016. Accessed August, 11, 2016. https://psa.gov.ph/sites/default/files/attachments/ird/quickstat/Maguindanao_32.xls

⁴⁸ Ibid.

municipalities of Talayan, Datu Odin Sinsuat, and Sultan Kudarat. Farmers in these areas are often hired by big companies and agricultural manufacturers to till and care for their land, while only a few have farmlands of their own.

Aside from farming, Maguindanao is also recognized for its fisheries, both inland and sea-side. The wide variety of sea produce they catch range from saltwater and freshwater fish as well as shellfish such as crab and oyster. Among the three municipalities, this is more common in Datu Odin Sinsuat which is geographically a town that has access to open water and fishing areas.



Figure 20. Beneficiary residences in Datu Odin Sinsuat and Sultan Kudarat

Most areas in Maguindanao are still rural, with local livelihood still hinged on these aforementioned industries. In these areas (including the municipalities of Talayan and Datu Odin Sinsuat) residents rely heavily on farming and fishing – both industries that are highly seasonal in nature – in order to survive their day-to-day lives. On the other hand, areas near the city of Cotabato – which is a city situated within the province of Maguindanao but is not administratively a part of the region – experience urban development trickling within this vicinity. As more commercial economic opportunities come in to this city (e.g. construction of town malls, increase in big name merchants and local retailers, etc.), areas such as the nearby municipality of Sultan Kudarat also reap the benefits of these economic trends in the urban center. In these areas, it was observed that it is common for residents to seek employment in their more urbanized neighbors where jobs are more varied and high in demand. Given this, they have the option to choose from the jobs they usually have as farmworkers or inland fishermen, but are also bestowed the opportunity to work in the urban city.

Among the financial issues that burden residents in the province of Maguindanao and its municipalities, food and sustenance remains the top concern. Even though most residents are food-producing farmers, many of these people still have limited access to produce because of the high price of goods. As a result, the need to purchase food such as rice and proteins remains, for which they normally allot around 100 pesos of their daily finances to survive.

According to residents, costs for sending kids to school are minimal considering that most enrolled children only walk to their respective schools and bring food from their homes for lunch and snacks. It is only when schools and teachers require their students to shell out money for supplies and school contributions that they give money to their children, which range from 50 to 100 pesos per requirement. Differences among financial requirements of children enrolled in elementary and high school are not particularly evident in the region.

As per respondent interviews, healthcare costs are generally shouldered by their Philhealth insurance. Expenses related to medicine, medical procedures and other treatments are included in their insurance coverage most of the time. Transportation costs, however, remain to be a need they cope with, given the far distances of their homes from the hospitals and health centers that have adequate medical facilities.

Conflicts are not entirely foreign to the history of Maguindanao which has undergone conflicts that include the attempted colonization of the Spaniards, the establishment of a Moro Province by the Americans during the early 20th century, and the penetration of the Japanese during the height of the Second World War.



Figure 21. An army tank in the middle of a normal day in Maguindanao

This series of past turmoil that the region has gone through has not stopped with their tumultuous past. Until now, the province of Maguindanao is still in the middle of various conflicts that are largely driven by politics and the disagreements that result from it. The political climate in Maguindanao is often considered tense, with conflict known to be common in the area and neighboring provinces. This tension, locally called *rido*, is rooted in a variety of factors, commonly stemming from clan disputes over land and influence, perceived insults to clan members, disagreements over issues, and the like.

This affects various aspects of the community – from residents and their daily lives, to local businesses and economic activity. This effectively pits clans against clans, leaving everyday activities – particularly that of economic ones – disrupted until a resolution is obtained. According to Lara⁴⁹, as soon as the *rido* starts, “community members not involved but who have relations with the parties to the *rido* will have to evacuate their residences, farms and places of business until the *rido* has ended (usually through a settlement),” underscoring the scope of the impact of such conflicts. The resulting conflict often spreads across the members of the clans once it erupts. More intense conflicts typically involve the loss of lives among the sides implicated in these tensions.

In addition, the province is also commonly put in the middle of conflict between local extremist groups such as the Abu Sayyaf and the Philippine military. Such armed conflict has long

⁴⁹ Lara, Francisco Jr. J. (2014) Insurgents, clans and states: political legitimacy and resurgent conflict in Muslim Mindanao, Philippines. Quezon City: Ateneo de Manila University Press

hounded the area, particularly in the more rural provinces of Basilan and Tawi-Tawi, which has affected development and accessibility in the region. As a result, bombings and armed encounters are current occurrences that have become familiar for the residents of the region.

5 Research Findings

5.1 FINDINGS AMONG COMPLIANT AREAS

Compliant cities and municipalities covered by the study are characterized by the existence of **various dynamic and inter-related internal and external factors that, either intentionally or unintentionally, complement each other's functions**. The interplay of these different factors is important in producing a scenario that aids and enables compliance.

After conducting the fieldwork, we were able to identify four (out of the six areas that were initially tagged as compliant) that genuinely exhibited the characteristics of positively performing cities and municipalities – Butuan City from CARAGA region, Taguig City from NCR and San Carlos City and the municipality Sto. Domingo from Region I (Ilocos). These areas have most, if not all, of the following factors that contribute to their compliance rating in the program:

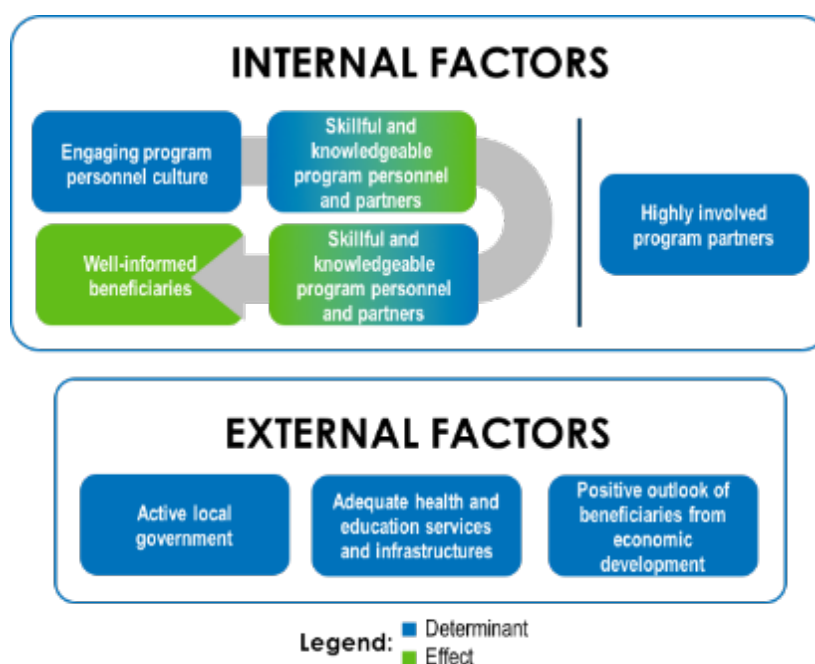


Figure 22. Summary of Internal and External Drivers of Compliance

These different factors can be further categorized into the **actual determinants** and the **effects of these determinants** – both of which enable compliance in their own way. Internal factors such as having an **engaging program implementer culture**, **highly involved Program Partners**, **beneficiaries with a positive outlook** and external factors such as an **active local government** and **adequate health and education services and infrastructures** – are determinants that work independent from one another when producing a scenario that enables

compliance. One determinant, the existence of an **engaging program implementer culture**, on the other hand, further **results to a series of interlinked elements that ultimately help enable compliance** as well. Such a type of culture makes program implementers and partners skilful and knowledgeable about the program, this then creates a better relationship between the beneficiary and the implementer and paves the way for beneficiaries to have better understanding of the program.

The other two areas – Dinagat Islands in CARAGA and the municipality of Talayan in ARMM – were revealed to be special cases wherein high compliance rates were being driven by internal and external challenges in implementing the program. An in-depth discussion for these areas – which we will now refer to as pseudo-compliant areas – can be found in section 5.2

INTERNAL FACTORS THAT DRIVE COMPLIANCE

Engaging program implementer culture

One common thread among the compliant areas of this study is that program implementers work in an engaging office culture led by their immediate supervisors who constantly promote proactiveness and innovation. The key influencers in the office can either be the DSWD regional head or the Regional Program Coordinator, as in the case of Butuan City, or even the head City Links, as in the case of the cities of Taguig and San Carlos and the municipality of Sto. Domingo.

These key influencers encourage program implementers to come up with their own ideas on how to further improve the processes of the program. They also support initiatives that are proposed for the improvement of the Pantawid. These enable and, more importantly, empower program implementers, particularly the City/Municipal Links, to immediately solve the problems in program implementation they encounter on the ground or to introduce initiatives that can improve the process and even help encourage beneficiaries to comply.



Our RPC challenges us to create our own innovations for the provinces that we handle. Making innovations is something that we really target as well.

Kasi parang china-challenge kami n gaming RPC na gumawa ng sarli naming innovation sa province na hawak naming. Part talaga yan ng target namin

- Provincial Link, Libjo, Dinagat Islands, CARAGA

An example of how an initiative has enabled easier compliance is the shift to an **interactive approach to FDS**. Program implementers observed that there is a need to make FDS engaging and more enjoyable in order to facilitate easier learning and ensured beneficiary engagement throughout the session. Hence, their sessions go beyond simple lectures – instead they pattern it after interactive workshops, complete with games, skits, and other entertaining activities that keep the beneficiaries engaged. This is in contrast to FDs in non-compliant areas where beneficiaries say that they just listen to different people talk about different topics. This initiative, practiced across all the compliant areas, has proven to be effective in encouraging beneficiaries to attend FDS. Aside from this, program partners also make sure that further opportunities for beneficiaries to regularly attend their family development sessions are made available. Particularly in the study areas of Region I and in Taguig City, they allow their designated household grantees to send **proxy representatives** (usually in the person of the spouse of the grantee) to the sessions so that their attendance would still be counted even if they are unable



to go to the sessions. Program implementers would also hold **special remedial sessions** for those who are unable to attend or send representatives to the regular sessions.



We do not conduct FDS like a lecture. We have demonstrations like roleplay activities to make it lively, this ensures that parents who attend the session do not fall asleep. The reason we give them activities is so that they really get to appreciate each of our sessions

Ang ginagawa kasi naming sa FDS, kasi hindi siya lecture. Meron iyong demo, acting para mas lively. Syempre alam mo naman ang parents, 'pag antukin. Kaya may mga activities sila para ma-appreciate nila yung bawat klase

- City Link, San Carlos, Pangasinan, Region I



During FDS we have this activity where we have roleplays...For example, if we have a topic about a married couple, one group would stage a skit about a couple who are in a fight while the other group will feature a couple who are calm...It is enjoyable because we get to act out all of our topics

Sa FDS kasi ina-action naming yan e, dinadrama ng mga kasama ko yan...Kunyari yung topic may mag-asawa, yung isang grupo magka-away sila ng asawa nila tapos yung isang grupo naman yung mahinahaon...nakakatuwa siya kasi bawat topic naming dinadrama namin

- Parent Leader, Taguig City, NCR

Another important function of having the capacity to introduce initiatives is that program implementers become capable of delegating their responsibilities. As observed and based on interviews with RPMOs and program implementers themselves, regardless of the area's compliance rating, program implementers (particularly the City/Municipal Links) generally feel that they have heavy workloads. They struggle with juggling monitoring and assisting 400-800 beneficiary families, all while accomplishing administrative tasks (e.g. Fieldwork Social Welfare Development Indicator fieldworks, writing numerous timeline-based reports). The strategies program implementers in compliant areas employ in order to cope with their workload serve as one of the factors that differentiate them from their counterparts in other areas. Such initiatives include:

- For all compliant areas, City/Municipal Links independently making the decision with regards to **how they can best prioritize work in order to manage their workload** (e.g. capability to opt to carry out specific tasks over others first, such as prioritizing the conduct of home visits of non-compliant beneficiaries)
- **Delegating their responsibilities among their resources** help alleviate heavy workload of City/Municipal Links as well
 - Particularly in Taguig City and San Carlos City, City Links **designate information dissemination work to their Parent Leaders** in order to help lighten their workload
 - In San Carlos, a City Link in the area initiated a work delegation via a **rotating report consolidation schedule** among him and his fellow City Links, wherein one person will be in-charge of consolidating a specific system report that are assigned to them (e.g. grievance report that consolidates number of grievances and their subsequent statuses, etc.



Table 6. Staffing of City/ Municipal Links and Social Welfare Assistants among study areas

City/Municipality/ Barangay	Number of beneficiaries covered		No. of C/MLs/ Caseworker		No. of SWA/CWA/FWA	
	2014	2015	2014	2015	2014	2015
NCR						
Malate, Manila	821	933	2	2	5 (for verification as of Oct 2016)	5 (for verification as of Oct 2016)
Taguig City	8,580	8,410	10	11	3	3
Makati City	4,341	4,158	7	8	3	4
REGION I						
San Carlos City, Pangasinan	7,744	7,944	9	10	4	4
Sto. Domingo, Ilocos Sur	856	859	1	1	1	1
CARAGA						
Libjo, Dinagat Islands	1,946	1,708	3	3	1	1
Butuan City, Agusan Del Norte	13,600	14,816	18	18	7	7

Note: Updated DSWD data for ARMM for verification as of Oct 2016

However, of the four compliant areas, Butuan City is most notable when it comes to the number of initiatives they produce and the importance they place on introducing such innovations. In fact, Butuan RPMOs pride themselves in coming up with initiatives which they believe are best practices for the implementation of the Pantawid. According to the RPMOs that were interviewed, their DSWD regional head and the 4Ps Regional Program Coordinator urge them to make the process better whenever possible. Some of these initiatives have been adopted in other regions:

- **Offline Beneficiary Update System** – City and Municipal Links encode beneficiary data updates using a template to make data update process easier, i.e., instead of beneficiary update forms, they submit encoded and streamlined data updates to the Beneficiary Data Office (BDO). They claim to have pioneered this and that it has started to be adopted nationwide
- **Systems Caravan** – They bring the 3 core systems of the 4Ps – Compliance Verification, Grievance Redress, and Beneficiary Update Systems – closer to the beneficiaries via scheduled meetings (either incorporated with FDS, over the counter Payouts, or separate sessions with parent leaders) in specific barangays, especially in areas where there are compliance issues. Since the Compliance Verification Office (CVO), Grievance Redress Office (GRO) and the BDO are present, issues are acted upon on the spot – bulk of which is mostly on data updating. In contrast, there has been no mention of this initiative in the non-compliant areas.



- They also use **strategies in order to monitor grant spending behavior** of the beneficiaries
 - **Cash card sealing (not in all barangays)** – prevents beneficiaries from pawning their cash cards. However, some City Links disagree with this practice because it curtails the beneficiaries' freedom from spending their grants the way they want to
 - **Receipt tracking** – some City Links require beneficiaries to submit all the receipts of the purchases they made using their cash grants (e.g., for child's school supplies, not for gambling)

Such office culture gave Butuan City numerous awards for their exemplary performance in implementing and monitoring 4Ps help keep them driven and inspired.

Skillful and knowledgeable program implementers and program partners that lead to well-informed beneficiaries

As previously discussed, one way to help beneficiaries comply with the conditionalities of the program is to **ensure that they understand what it is about and what they need to do**. In order to achieve this there is first a need to make sure that the **program implementers have, at least, the basic knowledge about the program** as well. This is important because they are the main source of information of the beneficiaries and even, in some cases, the Program Partners.

For Implementers learning about the program happens in two ways – through the **prerogative of the program heads**, as well as the further supplementation by the **program implementers' own initiatives**. For compliant areas, their heads or immediate supervisors (RPC/PLs/Head City Links) make sure that they are armed with, at least, the basic knowledge about the program and the skills that they would need in order to properly implement the Pantawid. In the case of San Carlos City and the municipality of Sto. Domingo, their program heads make sure that they know the basics about the program before they go out on field. Butuan City, on the other hand, has a **Provincial Link who would cascade trainings she receives to her people or she would conduct her trainings for them**. Hence, this factor is clearly another offshoot of the type of organizational culture that exists in the area.

However, trainings for these key people on the ground are still insufficient according to the program implementers. In this case, they mostly rely on internal orientations conducted by their engaging direct superiors, as well as constant reminders that they receive from their fellow implementers to help them in carrying out their responsibilities.

“ We already provide staff trainings. Technical writing is one way to boost the morale of the staff; if you know how to write and have the confidence to stand in front of an audience, we constantly capacitate our staff to improve implementation of the program.

We already provide talaga yung staff trainings. Actually technical writing kasi it's one way to boost the moral ng ating mga staff kasi pag marunong kang magsulat at confidence kung marunong kang tumayo sa harap so we constantly capacitate our staff para lang ma-improve yung implementation ng program.

- *Regional Program Coordinator, Region I*

Aside from the implementers, it is also important that Program Partners also have a good understanding of how the program works. Having proper knowledge about the program ensures



that they can properly implement the program. However, across compliant areas, there seems to be a need to make Program Partners appreciate the program more. Currently some are not on-board with the whole idea of the program – they are just properly implementing the program because it is their responsibility to do so.



When we were just starting there were Mayors who did not allow the Pantawid program in their areas because they felt that they had no involvement in the program. This was especially true for newly elected Mayors

Noon nga when we were starting pa may mga Mayor na ayaw papasukin yung Pantawid kasi hindi naman dahil sila yung pumili ng beneficiaries so hindi nila matanggap na wala silang involvement lalo na kapag bagong upo yung Mayor...

- *Regional Program Coordinator, Region I*

Strong implementer-beneficiary relationships

As mentioned previously, program implementers in compliant areas are also faced with numerous concerns such as the lack of manpower and overwhelming workload. In fact, according to DSWD's 2015 staffing data, each /ML in the compliant areas handle around 500-800 beneficiaries (see *Table 6*). This is more than twice the 200 ideal case management load that C/MLs prefer, hence makes them feel that their areas really lack the necessary manpower. However, such scenarios do not stop them from doing duties that for them make difference in the way the program works in their areas – they make sure that they foster a good relationship with their beneficiaries and become as hands-on as possible. This is another factor that aids compliance and is enabled by having an engaging organizational culture. They are able to do this through:

- **Personally visiting the homes of non-compliant beneficiaries** as much as their schedule permits, which, for program implementers in the cities of Taguig and Butuan, is regardless of their work load. According to DSWD, it is actually the responsibility of the C/MLs to conduct home visits in order to record reasons for non-compliance which they would then consolidate in the beneficiary tracking record. However, C/MLs in these compliant areas go beyond just recording data – they feel that it is important to actually have a connection with their beneficiaries
- **Tapping parent leaders** in order to be updated about the situation of their beneficiaries and to further extend their reach in the community
- **Making their FDS lively and enjoyable** since this is the primary venue where they can interact with all their beneficiaries

They do all of these even though fostering and maintaining close relationships with their beneficiaries is not stipulated in their responsibilities as C/MLs. They still opt to do this because they see that by having strong ties with their beneficiaries, they are able to obtain a better understanding of their beneficiaries' situation which will eventually help them encourage them to comply. This thus makes conducting home visits as much as they can a vital part of their responsibilities – essentially the ideal approach in going about their duties as program implementers.



“ *The home visitation is important because you can actually see their real status since we aren’t allowed to make a report if we haven’t actually seen them.*

Importante yung home visitation kasi makikita mo talaga yung real status nila so hindi kasi tayo pwedeng gumawa ng report na hindi natin sila nakikita na actual.

- Head City Link, Taguig City, NCR

According to Jocano (1990,1997), the importance that program implementers place on fieldworks and personally talking to beneficiaries stems from the **person-centeredness of the Filipino culture**. According to Jocano (2016), this theme of person-centeredness is: “[T]he result of a system of socialization in which people grow up with the constant presence of others around them, and in which reliance on other people is as highly valued as is individual action and capability. Two key words are worth noting here, “**pakikipagkapwa-tao**” which means harmony with others and “**pagkamakatao**” or compassion for others”. Hence, whenever programs like the 4Ps are implemented, implementers may opt to go beyond what their actual job responsibilities dictate. This happens even without the conscious effort of the implementers since such a behaviour has been acquired since childhood.

“ *You need to get to know all your members that you’re holding. You should visit them house to house...yes because sometimes the City Link will come down and say that he needs to talk to this person, what would you do if you don’t know that person lives, how will you guide the City Link? So I make sure to really get to know them all.*

[K]ailangan kilalanin mo lahat yung member mong hawak. I-house to house mo sila.. oo kasi nga di ba pagka minsan bababa yung City Link tapos sasabihin na kailangan niya makausap si ganito, paano ko kung hindi mo alam yung bahay paano mo maituturo di ba? Kaya talagang kinikilala ko silang lahat.

- Parent Leader, Taguig City, NCR

“ *“Our parent leader, he really goes to us. He is very active...[he really goes] to the houses, he informs us if there is an FDS or if Sir has some instructions or comments.*

Ano naman kasi yung parent leader namin, pumupunta punta talaga. Active siya.... [pumupunta siya] sa mga bahay bahay, nagsasabi kung may FDS o kung may sinabi si Sir.

- Beneficiary, Taguig City, NCR

In order to cope with the lack of manpower, compliant areas (Taguig and San Carlos in particular) tap their Parent Leaders in order to reach out to more beneficiaries without overburdening them with responsibilities. The Parent Leader’s primary task is to be the eyes and the voice of the City Links whenever possible and they do this even without any form of compensation. City Links, on a regular basis, cascade news to the Parent Leaders. Parent Leaders, then, have to make sure that all the beneficiaries in their parent group receive that said information – either through text or by word of mouth. Particularly in Taguig City, such a task empowers the Parent Leader and gives her a sense of responsibility – two factors that contribute to her desire to become active and hands-on when it comes to managing her parent group.

For City Links, having Parent leaders is more than a means for them to alleviate their heavy workload. They also view it as a way to **ensure that beneficiaries feel their presence** when they no longer have the time communicate announcements to them directly.



Among the initiatives they do to establish strong ties with their beneficiaries, the most important is **planning enjoyable, entertaining, and informative family development sessions**. Aside from making compliance easier for the beneficiaries, an interactive FDS also becomes a venue for Program Implementers to establish better ties with their beneficiaries. According to the Head City Link in Taguig City, this is the time when they can actively interact with beneficiaries and at the same time, remind them about their duties to or further explain new directives or news about the program.



I think [the thing that makes me happy about this job] is conducting the FDS, home visitation, because with home visitation you get to see the real status of the people since we can't make reports without actually seeing them. Then the thing I um [like the most] is the FDS where you can see them all.

Siguro yung [nagpapasaya sa akin sa trabaho ay yung] pagconduct ng FDS, home visitation, kasi sa home visitation makikita mo talaga yung real status nila so hindi kasi tayo pwedeng gumawa ng report na hindi natin sila nakikita na actual. Tapos yung talagang pinaka-ano [gusto] ko ay yung FDS kasi doon mo sila nakikita.

- Head City Link, Taguig City, NCR

For the beneficiaries that were interviewed, having the chance to communicate with their City Links is something that they highly appreciate. They positively recall how they can easily go to their City Links to ask questions during the FDS or how they can ask for their Parent Leader's help in passing on a specific question to the City Link, the latter being the usual scenario. This strong relationship, characterized by an openness and constant communication, makes beneficiaries in the compliant areas, particularly in Taguig and Butuan City, well-informed about the program. Because of the proper briefings conducted by their City Links and Parent Leaders, this has given them a good grasp of their conditionalities and the goals of the program.



My third City Link was Sir XXX. He wanted to see me before when I had a problem, he said that I should tell him and he will take care of it. Then I told him and he took care of it. Until now, he is still my City Link, he's good.

Yung pangatlong City Link ko si Sir XXX. Gusto niya ako makita dati noong may problema ako, isangguni ko daw sa kanya tapos siya na ang bahala. Tapos sinabi ko at naasikaso niya. Hanggang ngayon siya pa rin yung City Link ko, okay siya.

- Beneficiary, Taguig City, NCR

Well-informed and knowledgeable beneficiaries

By being knowledgeable about the program, CLs/MLs are capable of disseminating correct information to the beneficiaries and even quickly address their concerns. Through this practice, beneficiaries are then made adequately **informed about the basic tenets of the program**, which also helped in their compliance to the program conditions. Beneficiaries from the compliant areas, as observed and interviewed, exhibit enough basic knowledge about the program that they have an understanding of how the program works, they can identify the people involved in the process and they know other responsibilities that they have to fulfill in order to receive the cash grants. In the case of Butuan City, understanding the program also leads to a better appreciation of the program. The better appreciation then entails that beneficiaries from Butuan City have a different understanding of the cash grants since, as mentioned by Jocano (2016), the meaning of the cash grant will differ based on the relationship



of the community to the program implementers and Program Partners. As observed, for the beneficiaries in Butuan the cash grant is not just for a set of defined needs at the present moment – instead, it is their means to get to a better future.



There's nothing really [confusing with the conditions] since it's all explained very well.

Wala naman [nakakalito sa mga conditions] kasi lahat napapaliwanag nang maayos e.

- Beneficiary, Taguig City, NCR

Highly involved program partners

Program partners in Taguig City are **perceived and treated as real “partners”** of the program since implementers in the area acknowledge the fact that disseminating work load and having an extra hand makes everything easier. Hence, program implementers treat program partners as allies and believe that the program was designed with the interaction of three key departments in mind – DOH, DepEd and DSWD as the lead. Program Implementers in Taguig do this because they Program partners, on the other hand, feel that it is their duty as teachers and health workers to look after 4Ps beneficiaries like all of their other students/patients. Even though they feel that the tasks of the program are an added burden to them, they still feel that it is their obligation to look after these people.



With the Pantawid Pamilya, they made the program alongside DepEd and DOH so we coordinate with DepEd that is like out team mate or partner.

Kumbaga kasi ang pantawid pamilya, itinayo ang programa kaakibat ang DepEd at DOH so nakipag-ugnayan kami sa DepEd na kumbaga katuwang namin sila.

- Social Welfare Assistant, Taguig City, NCR

Hence, program partners in Taguig City seem to have quite an active role in compliance monitoring and verification. Whenever there is a need to verify the non-compliance of a certain beneficiary, the City Link will contact the teacher or health worker and ask for their help in verifying what has really happened. Teachers and health workers would even go with the City Links during their home visits. According to the head City Link and to a beneficiary, some health workers would even go and conduct their own home visit in order to check on beneficiaries. The focal teacher that was interviewed, on the other hand, would make up her own strategies to make sure that monitoring of the students' attendance will be accurate and easy for everyone involved.



For example, like this I haven't had this one vaccinated, you know the monthly, if I don't go to the health center, the worker from the health center will come to me, they're quite familiar with the area so they know where to look for the ones who haven't been back to the health center.

Halimbawa katulad nito hindi ko pa ito napapaturukan, yung buwan buwan na ano, pag hindi ko yun ipinunta, pupuntahan ako ng taga-health center, kabisado na nila may area area yan sila na pupuntahan nila pag ganitong ano hindi na bumalik dito.

- Beneficiary, Taguig City, NCR



Personally, I make my own form that I give out to the advisers so it would be easier and won't have any confusion.

Ako gumagawa talaga ako ng sarili kong form na pinapamigay ko sa mga adviser para mas madali at walang lituhan.

- Teacher, Taguig City, NCR



Aside from the active role they play, health workers in Taguig seem to be more considerate compared to those described by beneficiaries of other study areas in NCR. They are cordial and respectful. In the case of rude health workers, beneficiaries can easily report them to their officials and they can, then, get reprimanded. According to beneficiaries, they are able to see concrete steps taken against such health workers compared – this is in contrast with beneficiaries in Makati where they can also report but actions to solve the complaint are not immediately seen.



The others are nice, but they can't be rude because if we complain about them, they will face consequences.

Mabait naman yung iba kaya lang hindi rin sila pwedeng magsungit eh kasi pag nireklamo sila lagot sila.

- Beneficiary, Taguig City, NCR

Hence, although Program Partners that were interviewed feel that there is a lack of equipment or facilities in their schools or health centers, their dedication and concern for the beneficiaries seem to make up for it. And having program partners like these help make the implementation of the program better and easier. City Links can rely on the teachers and health workers to monitor the beneficiaries. Beneficiaries, on the other hand, are constantly reminded about what they need to do – hence, serve as another component to make sure that they comply with the conditionalities of the program.

EXTERNAL FACTORS THAT DRIVE COMPLIANCE

Adequate health and education services and infrastructure

Having accessible health services and education facilities is a factor that further enables compliance. Beneficiaries that were interviewed in Taguig City, San Carlos City and the municipality of Sto. Domingo report that complying with the requirements for health and education is not difficult given the convenience and ease of access of the infrastructures for these conditions. According to them, responsibilities such as going to local health centers for check-ups and sending their children to school are usually not burdensome, with these necessary infrastructures within their reach.

Local health services in San Carlos and Sto. Domingo, for example, are considered adequate and accessible by the health worker and beneficiaries in these areas that were interviewed. According to the health worker from Sto. Domingo that was interviewed, this is a result of having a Mayor that is very supportive of health related programs. As reported by the beneficiaries, medicinal supplies (e.g. medicine, materials for relevant health services) rarely run out in the health units in their vicinity and are readily available when needed. This is further supported by the accommodating barangay health workers who assist and administer health services for them, and who also ensure that procedures and health conditions are properly explained to the patients. For Taguig City, San Carlos City and the municipality of Sto. Domingo, in terms of accessibility, the health centers and health stations spread across these areas are easily accessible by various means of transport such as the jeepney, tricycle, the habal-habal/motorcycle, or walking.





Our health center is alright, it's wider now, they made it wider. There are several nurses there as well. It wasn't that way before; it was just like a clinic. Now you can stay there even if you have severe illnesses. They were only open for 12 hours before, they open from 7 to 5 on weekdays. But now, even on weekends, they have service 24 hours; so they told us that we could stay there in case of emergencies.

Okay naman 'yung health center namin, lumawak na, pinalawak na. Tapos ang dami nang mga nurse diyan. Dati ma'am hindi siya ganyan, parang clinic lang. Ngayon pwede ka kung grabe ka pwede ka na rin mag-stay diyan. Noon 12 hrs lang sila bukas, mag sisimula sila ng 7 – 5 pag may opisna. Pero ngayon kahit walang opisina, 24 service na sila ma'am kaya sabi nila sa amin pag may emergency daw doon na.

- Beneficiary, Sto. Domingo, Ilocos Sur, Region I



The health facilities here have improved a lot because our Mayor is really health oriented.

Dito po sa amin madaming naging improvement ng health facility namin kasi ang mayor namin ay health oriented talaga.

- Health Worker, Sto. Domingo, Ilocos Sur, Region I

In terms of school facilities, on the other hand, the teacher interviewed in San Carlos City says that they do not encounter many issues when it comes to school facilities. While they have some concerns over curriculum preparation in light of the implementation of the K-12 program, they typically report that they often have sufficient class facilities including rooms, seats, and other materials. According to a beneficiary, the school facility in their areas has improved a lot in the past three years, there are adequate classrooms and the area is clean. For Taguig City, on the other hand, the teacher interviewed reports that there is a need for more classrooms in their city – this is an issue that is corroborated by the incumbent mayor who is currently aiming to achieve the ideal ratio of having 45 students in one classroom only.

It has to be noted, however, that in Taguig, San Carlos, and Sto. Domingo – compliant areas with adequate health centers but with weak program personnel-LGU synergy – these initiatives are said to be largely a result of LGU-directed and regional/provincial Department of Education and Department of Health mandates. While it could be a possibility that such supply side improvements were demanded by beneficiaries through municipal advisory committee meetings, the reality remains that there is an absence of such regional/provincial synergy of the implementation of the program in these areas.



We have many improvements of our health facilities because our mayor is health oriented. He initiated we should have a ward, xray, ECG, ultra sound, extra level 2 laboratory. There have been many improvements in our health center since he came here.

Dito po sa amin maraming improvement ng health facility namin kasi ang mayor namin is health oriented. Kasi sir siya ang nag-initiate na meron kaming ward, meron kaming x-ray, may mga ECG, meron kaming ultra sound, may extra na rin kami level 2 na yung laboratory namin. Maraming nabago dito sa health center magmula nung andito na siya.

- Health worker, Sto. Domingo, Ilocos Sur, Region I

Active local government unit

The LGU, whether supportive of the program or not, can affect the compliance in the area. In the case of Butuan City, their LGU is very supportive of the 4Ps program since they also benefit from the conditionalities in line with their goals of getting the residents to visit health centers



and lower the incidence of out-of-school youth, i.e., More residents go to health centers hence, LGUs are able to monitor the residents better. This synergy is manifested in their active participation in regularly-conducted Municipal/Provincial Advisory Committee meetings and efforts in resolving supply side issues related to education and health. By attending such meetings, the LGU in Butuan City can immediately act on the issues encountered by the program implementers or the beneficiaries. Hence, according to the implementers and beneficiaries that were interviewed, most barangays in Butuan have sufficient education and health infrastructure that are accessible, making compliance to the conditionalities a lot easier.



I think the best practice that we are most proud of here is the commitment of the LGU. There really are programs that are focused on the 4Ps. Example, they gave away toilet bowls to houses that did not have CRs, housing for those that live in disaster-prone areas.

Siguro ang best practice na maipagmamalaki naming dito is yung commitment ng LGU. May mga programs talaga sila na focused sa 4Ps. Halimbawa, namigay sila dati ng toilet bowl sa mga bahay na walang CR, housing para sa mga nakatira sa disaster-prone areas.

- City Link, Butuan, CARAGA

LGUs in Taguig City and in the study areas in Region I, on the other hand, do not necessarily support the program directly. In fact, according to the RPMOs and program implementers that we have interviewed in the study areas of Region I, their LGU feels that the program is stepping in on their territory when it comes to providing social services to their constituents. This results to the lack of synergy between people in the 4Ps and their LGU.

However, when LGUs simply do their jobs they then enable compliance as well. For example, in education, beneficiaries note that the assistance they receive from the respective local government units of their cities/municipalities are a huge help in lessening the financial burden of sending their children to school (e.g. free school supplies in Taguig City). This is corroborated by teachers at local schools who have also witnessed this assistance given to parents and children alike. Hence, the LGU's specific projects for health and education in the area are somehow complementary to the supply side needs of the 4P, hence makes compliance easier for the beneficiaries.

Optimistic outlook of beneficiaries

Beneficiaries in Butuan generally have a positive outlook in life, because at the end of the day they are able to get by despite adversities, through their means of coming up with their own "diskarte" (strategies they employ to address specific concerns). This can somehow be tied with their perception that **Butuan, in general is progressing economically** (as seen in the many construction sites in their areas, creation of new malls, etc,) **and coincidentally, there are tangible improvements in their lives brought about by 4Ps.**

In terms of education, they no longer have to worry as much about the school supplies and other fees that they have to spend money on (e.g., school supplies are bought separately, only when they have extra money – but now they are capable of buying all their children's school needs at the same time; also, they now have money to pay for school contributions).

Their attitude towards education also changed - they prioritize it due to the understanding that it will give their child, and eventually their whole family, a better future. This attitude towards education is manifested by subsequent changes in their behavior – according to RPMOs we



talked to, there has been a decrease in the number out-of-school youths in the region and child labor cases have also lessened, if not totally eradicated.

“ *In order to achieve one’s dreams and ambitions in life, especially for those parents who were not able to finish school, we just pass it on to our kids – we will help them achieve what we were not able to achieve. Even if it the road ahead is difficult and perilous we will strive to do it*

Para maabot ang pangarap at ambisyon, lalo na nung mga parents na hindi nakapagtapos, kahit mga anak na lang, kahit na bako-bako ang daan, matirik tiya-tiyagain yun

- Beneficiary, Butuan City, CARAGA

5.2 FINDINGS AMONG PSEUDO-COMPLIANT AREAS

As mentioned in the previous section, a municipality may also appear compliant as a result of circumventing the program’s conditionalities, either deliberately or inadvertently, when actual behavior of beneficiaries suggests otherwise. This is evidenced by findings from the municipality of Libjo in Dinagat Islands, and municipality of Talayan in Maguindanao which were initially identified as high compliance areas based on 2010-2014 average compliance rates.

Often, this is a consequence of challenges posed by external factors to the program, which then leads RPMOs and/or program partners to consciously or unconsciously digress from what is stipulated in the 4Ps operations manual. Chief among the factors that drive the occurrence of this type of compliance in regions is the lack of implementer and program partner training. This is further exacerbated by external geographical and supply side factors, which leads to the lack of knowledge of key stakeholders in the program.

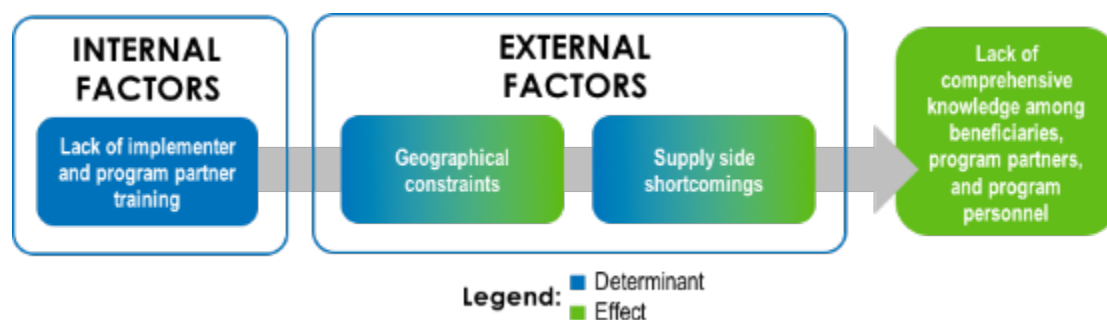


Figure 23. Summary of Internal and External Drivers of Pseudo-Compliance

Pakikipagkapwa-tao (harmony with others) and pagkamatao (compassion for others) in the face of supply-side deficiencies and manpower shortcomings

In regions that were identified as non-compliant, we can observe the intrinsic Filipino values of “***pakikipagkapwa-tao***” (*harmony with others*) and “***pagamakatao***” (*compassion for others*) at play, in that Program Implementers do not want beneficiaries to be marked non-compliant for encountering reasons that are beyond their control. This kind of “**mercy compliance**” is exhibited in Libjo, Dinagat Islands.



This occurs as a result of certain supply side constraints, as evidenced in health supply. A manifestation of this is the **lack of barangay health workers (BHWs)** in these regions. In these areas, a BHW may only be present in a particular barangay at a particular day in the week. Because of this constraint, health program partners do not fault the beneficiaries (pregnant and kids 0-5) if they miss the monthly required check-up due to schedule conflicts. In this case, **health program partners would consider the beneficiaries compliant as long as they show up at the barangay health center at least once every two months.**

“ *Two months are covered. So if there's one month that they're not present, I don't mark them non-compliant. It's fine so long as I get to weigh them and see them going to the health center.*

Dalawa yung buwan na kino-cover, tapos pag sa isang buwan wala sila tapos yung isa meron naman, hindi ko naman shinishade yon. At least matimbang sila makita ko sila na pumupunta sa center.

- **Midwife, Libjo, CARAGA**

“ *Sometimes I forget getting my check-ups done at the center, but the following month you really have to go. The grant I receive does not get lessened if I do that because it still covers the period of record collection, so it's okay.*

Minsan nakakalimot magpa-check up sa center pero the following month kinakailangan talagang pumunta ka. Hindi naman ako nababawasan [ang grant] kapag ganun kasi covered pa naman sa panahon ng pagkuha ng records, pwede pa naman.

- **Beneficiary, Libjo, CARAGA**

There are also instances wherein an infant may miss the scheduled vaccination for the month due to **lack of vaccine supply**. Hence, the health partner would still mark the beneficiary compliant for that month.

“ *The kids below 5 years old really must get immunized. They are the only ones required to do that once a month. If they don't go, I don't mark them non-compliant because sometimes the vaccine stocks are not enough. If we get short on vaccine, we record that in their booklet, we list it, then if the child turns a year old, we check who still needs to be vaccinated.*

Yun talaga, yung mga batang 5 years old below dapat magpa-immunize sila. Sila lang yung required na once a month. Pag hindi sila pumunta, hindi ko naman shine-shade-an kasi minsan din nagkukulang ang vaccine. Pag kinulang ng vaccine, nirerecord naman namin sa booklet nila, nililista naming tapos pag mag-one year yung bata, titingnan naming kung sino yung kailangan pang bigyan.

- **Midwife, Libjo, Dinagat Islands**

Teachers who are program partners for education also give special consideration to students who tend to be absent due to the distance that they have to travel, especially during bad weather, since they reside in remote locations in the mountainous areas or would require pump boat rides to reach the school. The Social Welfare Assistant (SWA) would also sometimes appeal to teachers for consideration when they find out about these constraints on the beneficiary's side which results in them being initially marked as non-compliant.

“ *There are more of those who follow. Many of those who do not are kids who live in the Sitio, in the more distant areas. We have children who come from the houses at the end of the area, there are also those who live in the mountains. It's dangerous, especially during the rainy season, a lot of*



children have already drowned there. If they don't follow and if it's not as frequent, we opt not to mark them non-compliant.

Mas marami ang sumusunod. Karamihan sa hindi sumusunod yung batang nakatira sa sitio, yung sa malayo ba. Meron man kaming mga bata na galing sa mga bahay bahay dyan sa dulo tapos meron pa sa bundok. Lalo na pag tag-ulan at maalon, marami nang bata diyan ang nalunod. Kung minsan lang naman at hindi sunud-sunod na araw lumiban, hindi namin shineshade.

- Teacher, Libjo, CARAGA

“

When I retrieve the CV forms, I first ask the teacher why he/she shaded the student. Because sometimes, the houses of the children are really far from the school – very mountainous or sometimes they have to ride a pump boat. That's why sometimes I talk to the teachers to convince them not to mark them non-compliant because the children go through these thing and won't get their grant. I negotiate with the teacher, but if sometimes they don't agree, It's alright.

Kapag nag-retrieve ako ng CV forms, tatanungin ko muna yung teacher kung bakit na-shade-an ang estudyanteng ito. Minsan malayo talaga ang bahay ng bata sa school, masyado nang bundok o kaya kailangan pa mag-pump boat. Kaya minsan kinakausap ko rin yung teacher na wag nang shade-an kasi kawawa ang bata, walang matatanggap na grant. Pakikiusapan yung teacher, pero kung minsan hindi pumpayag, okay lang rin naman.

- Teacher, Libjo, CARAGA

Due to lack of Municipal Links to conduct FDS sessions, they ask beneficiaries to attend KALAH-CIDSS meetings instead. For them, this teaches beneficiaries to take part in community based decision making and initiatives – hence, is still in line with the objective of the 4Ps.

“

In our area, we hold the FDS every month because the ML has seminars in Butuan. If that happens, we don't hold the FDS. Sometimes it takes 3 months before we have FDS when before it used to be monthly.

Sa amin hindi kada buwan yung FDS kasi may seminar sa Butuan si ML. Pag ganun, walang FDS. Minsan tatlong buwan bago mag-FDS, dati buwan-buwan.

- Beneficiary, Libjo, CARAGA

“

Sometimes it's once a month. It's not the same if we have a meeting with KALAH because sometimes they ask us to attend there if there's an assembly. The KALAH project only gets a few attendees, that's why they ask us 4Ps member to attend there because we're many.

Minsan once a month, hindi pareho pag may meeting sa KALAH kasi doon na kami nilagay ba pag may assembly, yung KALAH project yan kasi konti lang ang uma-attend ng meeting kaya ang 4Ps inano nila para umattend non kasi marami ang 4Ps.

- Beneficiary, Libjo, CARAGA

“

Sometimes our FDS are anchored in Barangay Assemblies for KALAH-CIDSS, especially because there are convergence strategies [for DSWD projects]. Beneficiaries really need to attend KALAH because there they discuss the projects that are to be prioritized by the barangay, they vote on it. So sometimes we get there attendance for the FDS there. Minsan yung FDS namin naka-anchor sa Barangay Assembly para sa KALAH-CIDSS, lalo na kasi may convergence nga [ng DSWD projects]. Yung KALAH kasi kailangan talaga umattend ng mga beneficiaries sa activity kasi doon dinidiscuss kung anong



projects ang priority ng barangay, magvo-votation sia. So minsan doon na namin kinukuha yung attendance para sa FDS.

- *Municipal Link, Libjo, CARAGA*

Geographical and socio-political constraints hinder properly beneficiary monitoring

Aside from this, challenging geographical landscapes such as mountainous terrains and socio-political conflicts such as the presence of insurgents, makes it difficult for program implementers to closely monitor the beneficiaries in the area. Hence, unlike implementors in truly compliant areas who are able to check and validate how beneficiaries are performing as regards the compliance conditionalities, often via home visits, implementers in Talayan do not know for sure whether beneficiaries are indeed complying with the requirements.



First and foremost, it's very common for shootings to happen there in Talayan. We don't get to go there anymore, that's the problem. It's a problem because if ever we get there, of course there will be stray bullets so we might get hit.

Unang una madalas kasi nagbabarilan dyan sa Talayan. Hindi kami makapunta doon. problema yan kasi if ever na magpunta kami doon eh syempre naman yung mga ligaw na bala baka kako kami ang matamaan dyan.

Our role is mainly supervision – the SWA does not tell us if there are problems with the compliance of grantees.

Kasi supervision lang ang papel namin, wala din nasasabi yung SWA namin sa amin kung may problema sa compliance ng mga grantees.

- *Municipal Link, Talayan, ARMM*

Such supply side constraints and geographical and political factors contribute to a lack or muddled understanding of the program's conditionalities among beneficiaries, and to some extent, even among program partners and implementers. Following this, it can be said that this factor is a consequence of these factors, which also drive non-compliance. This then results in beneficiaries being marked as compliant despite the deviations from the requirements stipulated in the manual for education, health, and FDS.

For instance, in Libjo, there seems to be much confusion primarily on health conditionalities, as evidenced by the behavior of both program partners, implementers, and beneficiaries.

- Not aware that it is supposed to be a monthly visit for 0-5 year olds for monitoring. Beneficiaries and RPMOs (SWA and Municipal Link) alike mention that they consider at least one visit within the two-month monitoring period as compliance
- Some with kids 0-5 only take their kids to the center when sick; otherwise, they do not feel compelled to take their kids to the center for monitoring

In terms of education requirement, their understanding of the required attendance likewise varies among some beneficiaries and teachers in Libjo, i.e., as long as children do not skip school for three to ten consecutive days, they are still considered compliant.





If for example the child does not have 85% attendance in the school, the teacher shades him/her non-compliant because of 3 successive absences.

Pag halimbawa yung bata walang 85% attendance sa skwelahan, ishade sa maestro kasi successive na 3 absences.

- **Beneficiary, Libjo, Dinagat Islands**

In Talayan, though beneficiaries' appreciation of the goals of the project is consistently high given their financial needs, their comprehension of the program conditions and other similar aspects remain vague and insufficient. This is evident particularly when beneficiary-respondents are probed about the duties they fulfill as members of the program, to which they respond with unclear replies that do not match across focus groups and home visits conducted in the municipality. Frequent responses of beneficiaries from Talayan include the following misconceptions about the program requirements:

- *For most beneficiaries:* There are no responsibilities that have to be fulfilled as members of the program
- *For some beneficiaries:* Visiting health centers is only prompted by the municipal health worker/if there is a sickness in the family
- *For some beneficiaries:* They are entitled to the education grant so long as their registered children are enrolled, regardless of attendance

A possible reason as to why this occurs is because of the inconsistent relationship of the beneficiaries and their assigned municipal links. Because of hindrances such as geographical constraints and political turmoil that municipal links encounter in carrying out their responsibilities, they in turn are unable to maintain a close connection with their beneficiaries that would enable them to adequately share knowledge and properly orient them with regard to their duties as program members. This can be explained by looking back to the interplay of institution and community, which states that issues typically arise from the lack of coordination between the institutional – in this case, the municipal links representing the program management officers of the Pantawid – and the cultural – the beneficiaries who operate in a different local context. The issue arising from the dissonance between these two elements at play in Talayan is the unawareness of the beneficiaries.

As a result of this unawareness, beneficiaries then are devoid of the initiative to do what is actually required of them, given that they do not know what they are supposed to do in the first place. This lack of initiative, paired with the lapses in compliance recording of the program partners and the absence of constant validation care of the municipal links and social welfare assistants, maintains the high compliance rate in the municipality of Talayan – albeit incorrectly.



To remain a member, we just need to update after 1 year. If the child has been enrolled, he/she has a budget for attendance to the health center. And then you also have to give the name of the children to coincide with the school, and then attendance to school.

If you don't get to maintain vaccination, the monthly cash grant will be lowered.

Para manatiling miyembro, kailangan lang mag-update after 1 year. Pag napasok na yung bata, may budget na siya sa health center. Tapos kailangan lang ibigay yung pangalan nila para mag-coincide sa school, tapos attendance sa school.



Kapag di ka naka-maintain ng bakuna, bababa yung monthly [cash grant] mo.

- **Beneficiary, Talayan, ARMM**



There are actually no conditions to remain a member. The only condition is if your child is older, you have to be removed if he/she is 15 years old already. And then check-ups in the center. For education, you just need to study hard, that's it.

Wala namang kondisyon para manatiling miyembro. Ang kondisyon lang kapag matanda na yung anak mo, kailangan talaga ma-out ka na, pag edad 15 na. Tapos basta magpa-check up sa center. Sa pag-aaral, kailangan lang mag-aral ka nang mabuti, yun lang.

- **Beneficiary, Talayan, ARMM**

5.3 FINDINGS AMONG NON-COMPLIANT AREAS

Non-compliance – as observed in Makati and Manila in NCR, as well as Datu Odin Sinsuat and Sultan Kudarat in ARMM – is driven by the interplay of negative internal and external factors that occur during program implementation. The interaction of these factors primarily results in the failure to marry the institutional mechanism and the local community context of the areas, taking its toll on program implementation and the establishment of strong relationships between implementers and beneficiaries.

Many of the factors listed below are a result of more pressing internal and external determinants that also contribute to the non-compliance of beneficiaries.

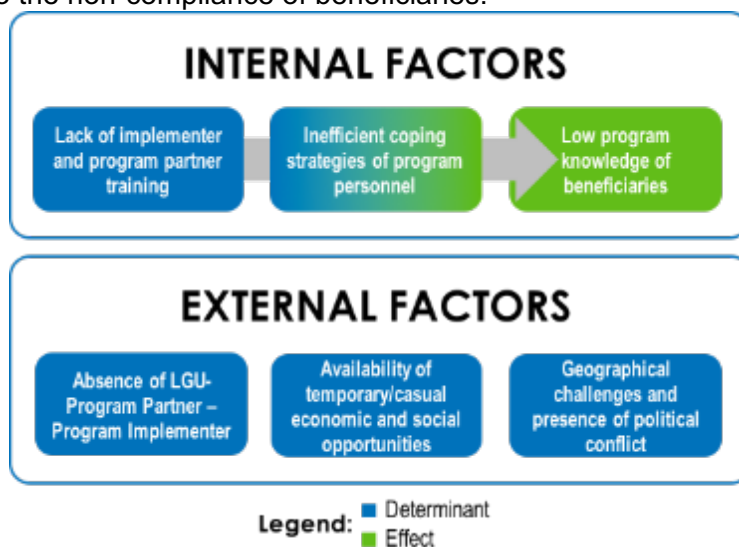


Figure 24. Summary of Internal and External Drivers of Non-Compliance

The interplay of the factors to be discussed below is largely similar to how factors in compliant regions interact. As in areas where compliance is high, there are factors in non-compliant regions that function as core determinants – factors from which other elements that drive non-compliance also arise. This is mostly evident among the internal factors observed in non-compliant areas where the lack of trainings given to program personnel and program



implementers functions as a core determinant, which then results in the insufficient coping strategies used by these personnel. This then becomes the reason as to why beneficiaries in these non-compliant areas are left with little to no knowledge of their responsibilities as Pantawid members. In the sections that follow, the manifestations of this interaction will be discussed further.

INTERNAL FACTORS

Lack of RPMO, implementer, and program partner training

A core determinant that brings about other factors that contribute to non-compliance is the absence of proper training for RPMOs, program implementers, and program partners. Interviews among these key personnel reveal that they feel as though they are not well equipped when it comes to handling their responsibilities within the program. This is a sentiment shared by personnel in varying levels and positions, and is actually acknowledged even by the regional program coordinators of both NCR and ARMM. **The insufficiency of training for program personnel often leads to scenarios wherein people who are assigned crucial duties are left to fend for themselves as they struggle to get acquainted with their often challenging jobs.**

A common consequence of the lack of proper program training for personnel is the inconsistency of implementation of certain crucial processes. This is evident in the beneficiary update system in NCR, wherein the beneficiary data management officer that was interviewed noted that she and her fellow officers do not follow the same process for data management. This causes delays in their outputs or even incorrect data management. Ultimately, this stems from the fact that they still do not have a clear grasp of how the system works. While they have received trainings for their job, there is still a need for more comprehensive orientations that would make their tasks and responsibilities clear for them.



I think it would be easier if we all had a process to follow so what's happening with us, based on my colleagues, is we have our own strategies...

Mas madali siguro kung lahat kami ay may process na sinusunod so ang nangyayari kasi sa amin base sa mga kasama ko, kanya kanya kami ng mga strategies...

We had trainings but for 3 years, there were only 2 trainings and the one training was done hastily. It was supposedly for seven days but I saw that the data management wasn't easy, it won't be taken care of if it were a one time bigtime event...I myself know that I haven't applied anything because I didn't really understand.

Nagkaroon kami ng training pero for 3 years, dalawang beses pa lang at isang mabilisang training lang yun. Pitong days yun pero kasi ang ano kasi sa data management is nakikita ko hindi madali, hindi kaya ng kumbaga one time bigtime hindi siya kakayanin...e syempre ako sa sarili ko aminado ako hindi ko pa rin na apply kasi hindi ko masyadong naiintindihan.

- Beneficiary Data Officer, NCR

Such lack of trainings is also particularly relevant for the health and education program partners who are involved in crucial aspects of the Pantawid. Interviews with these program partners consistently reveal that the people who are given such responsibilities in health and education institutions are often initially involved with no orientation whatsoever. **While they fulfill their basic functions as health workers and teachers, they are uninformed when it comes to**



their role in the Pantawid process. When asked about their basic responsibilities, they acknowledge that they themselves are quite unsure of whether or not they are part of the process itself. They are also very uncertain when they are asked to elaborate on their duties as program partners; what comes out of their elaborations are fragments of information that are mostly incomplete and, therefore, incorrect. This has impacts on the compliance recording in the region, which oftentimes ends up being inaccurate, as well as in the non-reminding of beneficiaries of their own responsibilities in the program.



It would be better if there were an orientation so we can see what is really needed. That would be better. We have no idea Sir. What are we going to do here? It's like we attended once and "you are now part of this program". So it's like what are we doing here? It seems that they are just looking at what we are receiving. We just read it so we could understand.

Mas maganda po talaga kung may orientation para makita mo kung ano talaga ang kailangan. Mas maganda yung ganun. Wala kaming idea sir. Ano bang gagawin namin dito? Parang pumunta lang sa 'yo tapos biglang "Kasama na kayo sa program na ito." So parang ano ba ang gagawin namin dito? Parang tiningnan na lang kung ano yung binibigay sa amin. Binasa na lang para maintindihan namin.

- Health Worker, ARMM

Aside from technical difficulties encountered by these program partners, their lack of training and orientation to the program also leads to a general lack of appreciation for its goals and objectives. It is common among program partners in Manila, Makati, Datu Odin Sinsuat, and Sultan Kudarat to hold opposing views toward the Pantawid, such as not being supportive of the grants given to beneficiaries. From the perspective of the beneficiaries, this manifests in the judgmental and discriminatory demeanor of some health and education workers, which often becomes a reason for them not to avail of the required services within the program.

Instances of such discrimination is particularly salient in Manila and Makati. Beneficiaries recount how health workers are very rude and would even embarrass beneficiaries in front of other patients. Hence, beneficiaries (especially from Makati who had an encounter with the mentioned rude doctor) would think about going to other health facilities, even if it means not receiving the cash grant, rather than being belittled or looked down upon.



I lose my motivation [because of the way they treat us].

Nakakawalang gana [dahil sa pag-trato nila].

- Beneficiary, Makati City, NCR



He [doctor] doesn't want to attend to a patient who is dirty especially if they know it's a pantawid member, he says that directly. So sometimes we have members that don't want to get check ups because they feel belittled, they really are belittled...sometimes when you get check ups the doctor knows you and shades you noncompliant so the member will get deductions."

Ayaw niya [doctor] ng madungis na pasyente lalo na kapag pantawid sinasabi nya direct yon kaya minsan may member kami na halos ayaw narin magpacheck up kasi parang ang tingin minamaliit sila ni doktora eh, minamaliit talaga sila nakakatikim sila ng salita...Minsan naman kahit nagpapacheck up, kilala ni doktora ishishade ni doktora na hindi nagpapacheck up so nababawasan yung nakukuha nung member namin.

- Parent Leader, Makati City, NCR



Inefficient coping strategies as a response to manpower concerns and organizational culture

One of the effects that are rooted in the insufficient program training of personnel is **the inefficient coping strategies they use, particularly by RPMOs and program implementers in non-compliant regions**. This is further aggravated by an uninspiring organizational culture prevalent in their offices.

In NCR, the need for more people in the Beneficiary Data Management Office (BDMO) of the region is particularly salient, as currently, there is only one regional officer shouldering the responsibility of the whole system. This is compared to the two officers designated for the regional departments of the Compliance Verification System (CVS) and the Grievance Redress System (GRS). According to beneficiary data management officer, it is essential to have stronger support for the beneficiary update system since it is a crucial component of the program from which other problems may arise should it be mishandled. An example of this is that late updating can result to tagging a beneficiary as non-compliant, which will then lead to grievances if the compliance recorded is incorrect. According to the officer, her heavy workload as part of the BDMO is further exacerbated by other tasks assigned to her like requirement to submit reports and doing social work as part of the Crisis Intervention Unit.



So if you look at the three systems the GRS has two people, and BDM has one person but the heavier workload is with the BDM. Because from registration, updating, what else? So for us we see from our experience now, if the BDM doesn't track the forms it will be a problem for CVS. So someone once said "we keep updating, but we never get updated".

So kapag tinignan mo yung tatlong system dalawa ang tao ng GRS, isa ang CVS, isa ang sa BDM pero ang malaking trabaho sa tatlo ay yung sa BDM. Kasi from registration, updating, what else? So sa amin ang nakikita naming experience namin ngayon, itong si BDM kapag hindi niya na-track yung forms matatamaan si CVS. Kaya may mga nagsasabi na 'update kami ng update pero hindi nauupdate'.

- **Regional Program Coordinator, NCR**



He doesn't just handle a few number, he handles a lot. So it's like what they say, the BDM is the root of all grievances but we are still the ones who have the solution, so that was my experience that was really mindblowing...the job itself is alright, it's just a lot to do.

Hindi lang naman kasi siya konti lang yung hinahawakan so sobrang dami. Ayon kumbaga sabi nila BDM is the root of all grievances pero kami pa rin yung solution so yun po yung naging experience ko na nakaka-buang talaga...Kaya yung trabaho, magagawa mo pero sobrang dami.

- **Beneficiary Data Officer, NCR**

The understaffing in this department as well as in other program systems causes various problems that manifest in the implementation of the program. In the beneficiary update system, this comes in the form of the slow processing of documents at the regional level, that would lead to inaccurate beneficiary data records. Interviewed beneficiaries report the slow pace of their request, even as they submit their forms continuously to no avail. Some, especially those in Malate, would even go straight to the DSWD office in Paco, Manila just to submit their update forms and other requirements in the hopes of a faster turnaround if they do so.



“

For example, I can compare BDM to blood because if a person runs out of blood he dies right? The grants that the beneficiaries receive, depends on the updates we receive as well. Halimbawa kasi kung sa tao maihalintulad ko ang BDM sa blood kasi pag nawalan ng dugo yung tao tigok di Ba? Kasi yung grants kasi na narereceive ng beneficiaries, naka depende sa pag uupdate namin.

- Beneficiary Date Officer, NCR

“

There is a part in the system that when you update today for example ...the ones who will pass the BUS form, every 15th of the month, it will take 2 months to update. So if example you update after the 15th, it won't get updated right away.

Kasi may part din na nasa system sya kasi when you update today halimbawa yung mga...yung mga pagpasa ng mga BUS form, every 15th of the month, after 2 months pa yun nauupdate so halimbawa nagupdate ka after 15, hindi sya agad mauupdate agad.

- City Link, Manila City, NCR

“

That's just it, it takes quite a while before they approve, even after you pass the requirements they ask for several times... it takes quite a while. It's very long, the process is long...

Yun lang po kasi medyo matagal bago nila ma aprubahan pero ilang beses ka nag pasa ng mga hinihingi nila, matagal.... Mga isang taon. Matagal din, matagal ang proseso...

- City Link, Manila City, NCR

Issues often arise in the coping strategies that these RPMOs and implementers employ in response to their overwhelming responsibilities. In NCR, city links tap parent leaders to help them in monitoring and providing assistance to the beneficiaries. However, unlike parent leaders in the city of Taguig who are simply tasked to carry out basic information dissemination or monitoring, parent leaders designated in Manila and Makati are given duties that are similar to that of the city links themselves. In the interviews, it was discovered that they are usually asked to monitor their fellow beneficiaries, update them about the latest announcements, remind them about the conditionalities that they have to follow, help collect their requirements like their proof of enrolment, assist them in different system requirements whenever needed and even distribute or hold on to forms that their fellow beneficiaries will need.

Delegating such responsibilities to parent leaders who themselves are not equipped to handle these duties is problematic and often results in negative consequences. Such a consequence is that the information relayed by these overburdened parent leaders often turn out to be inaccurate, which further perpetuates the misinformation among program beneficiaries in the area.

“

I coordinate with the school, health center, faculty and if there are problems and they know that the student is a member of the pantawid, we ask to see the parent leader. They ask us to monitor the student, ask why he doesn't want to attend school, maybe we can motivate the parent and the student to attend because it would be a waste if they don't... that's part of our job.

Ako nakikipag coordinate kami sa school, sa health center, sa faculty atsaka pag may mga problema yung ano tapos alam nila pantawid yung estudyante, pinapatawag kaming parent leader. Pinapamonitor sa amin, bakit ayaw ng pumasok, baka pwedeng imotivate si parent at tsaka si anak para pumasok kasi sayang. Kasama sa trabaho namin yun.

- Parent Leader, Makati City, NCR



Another manifestation of the negative coping strategies used by personnel in response to their overwhelming workloads is the ineffective conduct of family development sessions (FDS). Because of their own unavailability, city links in Makati and Manila are left to invite speakers from different organizations to facilitate the FDS. While city links are allowed to do this, it often becomes a cause for concern because they often end up inviting irrelevant and unqualified speakers. A few beneficiaries in Manila note being turned-off due to the overtly religious sessions that were being conducted, as well as the bank-affiliated speakers that were invited to the session. Their dissatisfaction with these speakers leave beneficiaries in these areas with no real understanding or appreciation of the benefits of attending an FDS. What further adds to this is the lack of interactive elements that encourage engagement among beneficiaries – unlike sessions in compliant areas, FDS in non-compliant regions are limited to lecture-type classes that tend to be tedious for its audience. Hence, some would rather give-up the Php500 that comes with not attending an FDS in lieu of other responsibilities or opportunities that are deemed better and more important (e.g., work, other responsibilities at home).



Not really just the things that Sir discusses with us. Repetitive, it can get a bit repetitive.

Wala naman kasi yun lang yung mga dinidiscuss nila eh ni sir sa amin eh. Paulit ulit, paulit ulit lang naman.

- Beneficiary, Makati City, NCR



Sometimes I don't get to attend, there was one time that we had na FDS but we went to Luneta...because we had to attend a rally...I had no choice but I didn't attend (I don't like those sort of things) I accept that.

Minsan hindi ako nakakapunta minsan kasi may FDS kami nagpunta kami ng Luneta..kasi parang magra-rally ka na ano... Wala akong magagawa hindi ako umattend eh (ayaw ko ng ganun) tanggap ko na yon.

- Beneficiary, Manila City, NCR

What aggravates these effects further is the lacklustre organizational culture prevalent in these areas, wherein even top program management personnel are visibly tired and overworked – as a result, they are unable to rally their staff in overcoming challenges brought about by their undermanned offices and overwhelming workloads. Their fatigue thus becomes a sentiment shared by the team, which makes coping with their challenging jobs more difficult. This is in contrast from the organizational culture of compliant areas, who have offices and officers who are generally more upbeat about their responsibilities.

Low program knowledge of beneficiaries

Stemming from the aforementioned factors is the inadequate program knowledge of beneficiaries, particularly when it comes to their responsibilities as Pantawid stakeholders. Their limited comprehension of the program covers parts of their registration as members, extending even to the amount of cash grants they are qualified to receive. Among the pieces of information that is lacking and unclear to them, **it is their vague understanding of the conditionalities of the program that truly drives non-compliance among their areas.**

The low level of program knowledge of beneficiaries from the non-compliant study areas manifests whenever they are asked to detail the processes they underwent as Pantawid members. **When asked about these processes, misconceptions commonly arise:** they remember being interviewed for registration, but they cannot recall how and what for; they know



about enrolling their children in school, but are not aware of the attendance requirements (e.g. the 85% attendance rule); they visit nearby health centers, but are not informed about the required frequency and regularity of visits. This was observed primarily in Datu Odin Sinsuat and Sultan Kudarat, ARMM – areas wherein beneficiaries have the vaguest of ideas about the conditionalities – and minimally in Manila and Makati, NCR. **As a result, recorded compliance with these conditions becomes low for the non-compliant areas.**



[When it comes to sending the kids to school,] I know that so long as they attend, it's alright already. So long as I send them to school, there will be a grant.

[Pagdating sa pagpasok ng mga bata sa eskwelahan,] ang alam ko basta pumapasok, puwede na 'yun. Basta pinapapasok ko, may makukuha pa rin.

- Beneficiary, Datu Odin Sinsuat, ARMM

This unawareness among the beneficiaries in non-compliant areas goes beyond their knowledge of processes and their responsibilities. It also extends to other important aspects of the program, including information regarding their cash grants (e.g., how much it should be, when they are supposed to be receiving it), as well as procedures that are supposed to help them out with their concerns as beneficiaries (e.g., data update system, grievance redress systems). **Their lack of knowledge thus becomes a hindrance from fully maximizing what the program has to offer, in terms of financial aid and empowerment opportunities.**



I don't know [the dates covered by the cash grant I receive]. Because of so much excitement that I have money, I don't see which months it covered. I don't get to keep [the receipts]."

Hindi ko alam [yung mga petsa ng pagkakatanggap ko ng cash grant.]. Sa sobrang excited natin dahil nagkaroon tayo ng pera hindi na natin nakita kung anong buwan na yung kinuha natin. Hindi ko na natatago [yung mga resibong binibigay].

- Beneficiary, Datu Odin Sinsuat, ARMM

As a result of their unawareness of the program's basic details, beneficiaries are not able to follow their responsibilities as Pantawid members. Beneficiaries in non-compliant areas where this is salient often miss monthly health center appointments because they do not know they are required; students in these areas incur absences beyond what is supposedly allowed for them – all because they had insufficient knowledge of these conditions and program



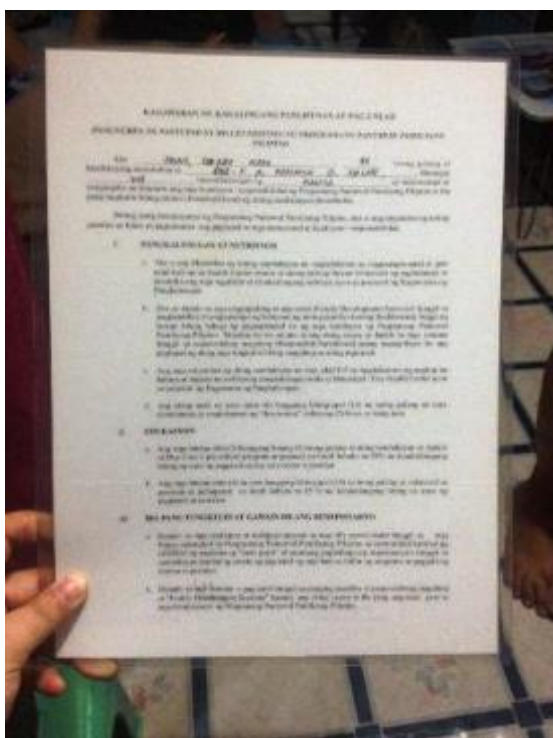


Figure 25. Sample Agreement Form given to respondents in Malate, Manila

processes. This occurs despite signing and being given a written agreement (Fig. 25) which documents set conditionalities and their responsibilities as Pantawid members.

This lack of information is rooted in the insufficient orientation the beneficiaries receive going into the program, which is a result of infrequent and ineffective orienting techniques of the program implementers. While there are efforts to explain the program's fundamental details, it often fails to translate to comprehension among the beneficiaries because of its infrequency. In Datu Odin Sinsuat and Sultan Kudarat, some beneficiaries recall being oriented and reminded of the program conditionalities only once throughout their membership in the Pantawid. This scenario is similar for some beneficiaries in Makati and Manila, wherein city links – implementers who work most closely with the beneficiaries – transfer the responsibility of reminding beneficiaries to the parent leaders, as mentioned in the previous section. As a result, beneficiaries are given inaccurate and incomplete information that is not followed through by

implementers.

“

No one explains that to us, how much we're supposed to get, when. None.

Wala namang nagpapaliwanag sa amin ng ganyan, 'yung kung magkano ang dapat naming makuha, kung kalian. Wala naman.

- **Beneficiary, Datu Odin Sinsuat, ARMM**

In addition to the infrequency of orientations, implementer efforts to explain the program to the beneficiaries also end up being ineffective because of how it is conducted. **Often the orientations in these non-compliant areas are not adjusted to local community nuances such as language and level of literacy.** This is particularly relevant for beneficiaries in ARMM, wherein most of the residents are speakers of the vernacular of the region (Maguindanaon) and have insufficient formal education. In their experience, their limited orientations often end up not being effective because they are not able to comprehend the details of the program given their low level of literacy and misunderstanding of the language. This becomes a hindrance for them in understanding their responsibilities as program members and in subsequently following these conditions to be compliant.





Sometimes the challenge is when there are grievances that they can't understand. My only concern is you keep explaining, example someone will come here and you explain to them, then another will go there because if you explain in generally sometimes they won't understand it [...] I'm not belittling them but they lack education, they understanding is at a lower level.

Minsan kasi ang pinakahamahirap lang naman kaya nagkakaroon ng grievance ay 'yung 'pag hindi nila maintindihan. 'Yun lang din ang pinaka ano is paulit ulit kang nage-explain kasi halimbawa pupunta yung isa dito explain mo sa kanya, pupunta na naman yung isa dito kasi pag in-explain mo yan in general minsan hindi nila nage-gets while pag pupunta sila sayo isa isa [...] Hindi ko sila minamaliit pero kulang pa rin sila sa education, kumbaga mas mababa pa ang pangunawa nila, pag-intindi nila.

- *Municipal Link, Sultan Kudarat, ARMM*

These situations are examples of how the inefficient coping strategies of program personnel in response to their workloads have a huge impact on the program knowledge of beneficiaries. It is in these scenarios that the importance of fostering strong ties between the *institution* and the *community* is made evident. Because of the absence of solid links between the implementers (representatives of the *institution*) and the beneficiaries (members of the *community*), such issues that were mentioned above typically occur, leading to concerns that affect compliance and the overall implementation of the program.

EXTERNAL FACTORS

Absence of LGU-Program Partner-RPMO/Implementer synergy

In areas wherein non-compliance is prevalent, the synergy among local government officials, health and education program partners, and Pantawid personnel is markedly absent and lacking. A key manifestation of this lack of synergy is the infrequent provincial/city/municipal advisory committee (P/C/MAC) meetings held in these areas. This becomes a barrier when it comes to discussing the program with stakeholders in order to ensure its efficient implementation.

The absence of such meetings affects the level of information of relevant local government officials who hold key positions in the community. As a result, program implementers observe that they often encounter local officials who are not entirely supportive of the program – an observation also noted by program partners in the non-compliant areas. This often proves to become a hindrance for some program personnel in implementing the program: there are those who have had experiences about not being able to invite speakers for family development sessions, as well as encountering difficulties in reserving venues and equipment for Pantawid-related activities.

The lack of synergy between the stakeholders also gives rise to problems perpetuated by local government officials as well. This is salient in the case of non-compliant areas in ARMM, wherein the absence of synergy in the region gives way for local government units in some barangays and municipalities to take advantage of the program, particularly of its beneficiaries. Reports of barangay and municipal officials requiring at least 50 percent of the total cash grant received by beneficiaries in each payout cycle are quite common in the region, as recounted by the RPMOs. They mentioned how these officials driven by corruption would ask for their cut of the cash grants immediately after the payout assembly, effectively pressuring



beneficiaries to give in to their demands. Even though these cases are prevalent in some areas, beneficiaries are left with no choice but to keep mum about this for the fear of running in conflict with powerful local figures who can make life difficult for them. As a result, grievance cases of this nature are often left unresolved, only further leaving beneficiaries taken advantaged of and afraid of the process itself.



On cash grant collection: Those who complain don't come out of the open they don't want to be confronted, they don't want to be the ones complaining so we don't have other points of actions if there was a complaint. For example, after the fact, the collection happened after the pay out. We don't have any other point of action; we can't compel them to admit because there isn't any proof.

On cash grant collection: 'Yung mga nagre-reklamo hindi rin nagco-come out in the open kasi nga ayaw nilang confrontational na ganun, ayaw nila na sila yung nag rereklamo so wala kaming ibang point of action dun pag may nag reklamong ganun. Yung halimbawa after the fact, after ng pay out nangyayari yung collection. Wala tayong ibang point of action, hindi natin sila ma compel na ganito ganyan kasi wala kang pruwaba.

- Provincial Link, ARMM



The very recent was when we received the collection of fees here. They say that the chairman was the one collecting every after payout, he takes the IDs of the beneficiaries in exchange they will give him half of the cash out that they receive. The other one said that the beneficiaries receive 1000. So our first step is to write to the local officials for example if it is addressed to the chairman or the mayor, we call in for a bid, that's what we did recentl, we called for a meeting with the chairman and mayor so we can say that there was a complaint filed against him. [...] Our problem is that, there are so many complainants, but when it comes to the resolution case no one wants to be a witness, no formal complainant. So the problem with the collection fees is rampant, and we can't resolve it because no one will validate it. They're afraid that if they were founf out to be the complainant, something bad will happen to their families.

Yung very recent yung na receive namin na collection of fees dito lang din. 'Yun nga daw si kapitan na ngongolekta every after payout, kinukuha yung mga IDs ni beneficiaries kapalit non ibibigay nyo sakín yung half ng cash out na inyong nare-receive. Yung isa naman sinasabi 1000 per beneficiary. So ang first steps namin talaga namin is susulatan namin ang local officials kung halimbawa na si kapitan yan naka address yan kay mayor so magpapatawag kami ng bid yun ang ginawa namin yung recent nagpatawag kami ng meeting kasama si chairman kasama si mayor para masabi sa kanya na may complainant tayo. [...] Ang nagiging problema lang talaga namin ang daming complainant pero pagdating sa resolution ng case walang gustong mag witness, walang formal complainant so rampant masyado ang collection ng fees hindi namin nareresolve kasi yon nga nag complain tapos kapag nagkaron kami ng validation walang umaamin. Takot kasi sasabihin nila na kapag nalaman na kami yung nagsumbong ganito yung mangyari sa family nila.

- Grievance Officer, ARMM

The absence of stakeholder synergy also impacts the supply side needs of the area as a whole. This is evident in Datu Odin Sinsuat and Sultan Kudarat – and some instances in Manila and Makati – where beneficiaries commonly encounter issues in the health centers of these areas. For example, health facilities in most areas are reported to be closed on all days of the week due to the lack of health workers assigned to the community. Their unavailability often hinders beneficiaries from availing of the services required. Medical supplies in these areas are also insufficient, including even their local provisions of medicine and other materials. Some beneficiaries, particularly those who live in remote areas, also note the difficulty to access



health centers from where they live. Even though some health workers do roving visits, it is still not enough for them to cover all the registered beneficiaries in their area.



The health center is very small. It's very small, Ma'am, like for only two people. Because the table is there, the bed. The midwife, the patient, that's it.

Maliit masiyado 'yung health center. Maliit talaga ma'am, parang pang dalawang tao lang. Kase andoon yong lamesa, yong katre. Yong midwife, yong magpacheck up, 'yun lang.

- Beneficiary, Datu Odin Sinsuat, ARMM



The facilities are inadequate as well. There is no electric fan. The facilities are very lacking. Ang only equipment there is for taking the blood pressure (BP).

Kulang din ang gamit. Katulad na walang electric fan. 'Yong mga gamit, kulang nga masyado. Ang mga gamit lang doon pang-BP.

- Beneficiary, Datu Odin Sinsuat, ARMM

All the issues outlined above could have been avoided had there been regular discussions between and among the implementers, the local government, and health and education point persons to tackle relevant program issues.

Availability of other economic and social opportunities

A common contributor to the non-compliance of beneficiaries in Manila and Makati is the presence of other temporary and casual work opportunities available in the area. As mentioned in the discussion of the regional context of NCR, residents in these areas typically juggle multiple jobs in order to survive financially. More often than not, beneficiaries who struggle with these multiple *rakets* or odd jobs sacrifice complying with Pantawid conditionalities which often run in conflict with the schedules of their work commitments. For these beneficiaries, they would rather prioritize the money they earn from their multiple jobs – money they earn right away – rather than going through requirements that would provide them with financial assistance two months later. This can also be explained by how beneficiaries in these areas perceive the cash grant they receive as one of the many sources they have for financial survival, as opposed to an enabler that can help them break the intergenerational cycle of poverty.

For other beneficiaries in Manila and Makati, the availability of other more pleasant and better equipped options when it comes to the health facilities also becomes a reason for their non-compliance. Both cities have health benefit cards (Orange and Yellow card, respectively) that entitle them to discounts to different health services in their cities. For those in Manila, church organizations and other NGOs also offer similar services – alternative options that they can go to when they need medical assistance. The presence of more options – with people who deal with them more cordially – are another factor that promotes low compliance when it comes to the health component of the program.





Figure 26. Personal health record book from a CSO



I also approach Caritas, that's why we're very excited because the medicine is free if they have stocks, you get check ups and the best thing is that their doctors are sometimes from San Juan De Dios and MaDocs...

Lumalapit din ako sa Caritas, kaya tuwang tuwa kami yon libre ang gamot doon kapag meron sila ha papa-checkup ka lang doon ang maganda pa na ang doctor nila minsan galing ng San Juan De Dios tsaka MaDocs (Manila Doctors).

- Parent Leader, Manila City, NCR

Geographical challenges and presence of political conflicts

In Datu Odin Sinsuat and Sultan Kudarat, a particularly salient external factor that affects the compliance of beneficiaries is the **geographical and political impediments that cause the infrequency of coordination between beneficiaries and program implementers**. In the experience of implementers particularly in ARMM, these factors hinder them from doing crucial tasks that affect the process of the program as a whole, particularly in terms of compliance.

An evident example of this is the experience of some municipal links who are unable to go to their beneficiaries because of these constraints, which are replete in their communities. Within the areas of coverage of these municipal links, **there are places that are still too remote to be reached because of the lack of road infrastructures in the area**. Some are not accessible by the available means of transportation (e.g., jeepney, tricycle, motorcycle), while there are those that are easily flooded during certain seasons.

There are also instances wherein they are impeded by **ongoing armed conflict in high tension areas** that are results of local clan conflicts. Oftentimes, these clan and political conflicts affect entire communities involved in the tension, commonly because the families involved also happen to be the ruling political leaders of the areas. Schools and health centers are often closed during these instances, which affect beneficiaries who would visit for their program responsibilities. These are direct manifestations of the conflicts as described in the discussion of the regional context of ARMM, as outlined by Lara⁸³ and Jocano.

The combination of these obstacles renders the municipal links unable to reach out to their beneficiaries. Even though it is not explicitly stated in their duties, these MLs feel the responsibility to coordinate closely with these beneficiaries to monitor their status. This further affects the constant reminding of MLs to their beneficiaries, as well as the continuous monitoring and validation of their compliance – even though their mindsets are focused on carrying out their tasks as program implementers.





First of all the shootout there is very frequent, they frequently have shootouts there. we can't go there. It becomes a problem because in case we get to go there, we worry about the stray bullets, I might get hit. Sometimes the datu don't get along because they sometimes have misunderstandings even families the mother and father fight also as well as the children, so sometimes we don't know when there are problems.

Unang una 'yung barilan dyan sa kwan kasi madalas kasi nagbabarilan dyan. Hindi kami makapunta doon. Nagiging problema yan kasi if ever na magpunta kami doon eh syempre naman yung mga ligaw na bala baka kako kami ang matamaan dyan. Minsan hindi magkakaisa 'yung mga datu kasi minsan na nagkakaroon din sila ng misunderstanding kahit nga sa isang pamilya yung nanay at tatay nagaway din tsaka yung mga anak so minsan kasi hindi namin alam kung kailan magano ang problema pero hindi naman madalas.

- Municipal Link, Sultan Kudarat, ARMM

The impact of these two negative factors is felt in other aspects of program implementation, particularly in the three systems central to the project: compliance verification, beneficiary data update, and grievance redress. Because these systems require the movement of forms from one end to another, most of the time the submission is halted by these geographical factors and political conflicts. This is evident throughout the entire region – in remote landlocked areas and even in non-mainland locations within ARMM that are difficult to reach. Commonly, it takes around two days and several changes of modes of transport to reach these areas, wherein conflict is also present. Because of these delays in the processes, it is common for program implementers to fail to meet system deadlines as mandated by the central office. This results in negative outcomes such as the recording of non-compliance of the region (particularly for delays in compliance verification).



A little short in time. Once the CVS forms are distributed, when retrieved – sometimes it doesn't get in in time. Especially if for example there's bad weather condition, example in the island, so when you retrieve the compliance forms, that's where the challenge is because there is a timeline to be followed. Then if it doesn't make it in time for encoding, they will be deducted meaning they will be tagged as non compliant [...] another challenge is the connectivity in 3 province [Basilan, Sulu, Tawi-Tawi], they can't connect so we put them in CDs and mail it via LBC in the provinces, so you have to think about the transition of the LBC [...] the areas are far away [...] majority of the municipalities are in islands so via motorboat, a small wooden boat, the farthest island is a 7 hour travel from capital town.

Parang short in time. Pagka distribute ng CVS form, pagka retrieve - minsan hindi na yon umaabot. Lalo pagka kunyari magkaroon ng bad weather condition halimbawa sa mga island, so yung pagka retrieve ng mga compliance form medyo doon yung challenge kasi may timeline. Tapos kapagka hindi yan nakaabot sa encoding mawawalan sila so ibig sabihin ma-tag sila as non compliant. [...] Challenge pa natin sa connectivity sa 3 province [Basilan, Sulu, Tawi-Tawi], hindi sila maka-connect so sini-CD namin, bini-burn dito ini-LBC namin yon doon sa province, so isipin mo nalang yung transition ng LBC. [...] 'Yung mga area malalayo kasi [...] majority ng municipalities ay island so by lantsa, maliit na boat kahoy, ang pinaka malayo doon 7 hours iba-biyahe mo yon from capital town.

- Regional Program Officer, ARMM



5.4 FINDINGS ON BENEFICIARIES’ ATTITUDE TOWARDS THE CASH GRANT

The cash grant plays an important role in the program as it is what is at stake for the beneficiaries. From an institutional perspective, the cash grant serves as the motivating factor for beneficiaries to comply with the conditionalities of the program for health, education, and FDS with the end goal of behaviour change among beneficiaries. From the beneficiaries’ perspective, it is meant to be an aid to enable them to provide for their children’s education and health needs. At the end of the day, they know that it is for the welfare of their children and this is manifested in the way they use the cash grant.

Upon payout, most beneficiaries immediately spend the money on food for the family, children’s school needs, e.g., school supplies, uniforms, shoes, etc., and vitamin supplements. For some beneficiaries, it is also an opportunity to somehow indulge their kids with little treats like eating in fastfood, which they otherwise cannot afford.



The grant augments the budget, after all it’s for the children. I spend it all on groceries for them. The things that they need like clothes, they get the things that they like when it’s payout time.

Pandagdag na rin ng panggastos, para sa mga bata rin yun eh. Inuubos ko sa grocery nila. Yung mga kailangan nilang damit, kaya nila nakukuha rin yung mga gusto nila kasi pindutan na.

- Beneficiary, Taguig, NCR



When they know that we will be receiving the grant, “Mom, please buy me some burgers, the Buy 1 Take 1 burger worth PhP 25 at Angel’s Burger. If something is left from the grant, I buy snack treats for them when I get home. They are really happy.

Pag alam nilang tatanggap na ng grant, ‘Nay bilhan niyo ako ng burger, yung buy 1 take 1 na tig-PhP 25 sa Angel’s Burger. Pag may natira, bigyan ko sila ng meryenda pag-uwi. Masayang-masaya sila.

- Beneficiary, San Carlos, Ilocos Region

However, since they receive the grant every two months, most beneficiaries often resort to seek ways to cover for the money they need to feed the family and send the children to school – either by working additional side jobs, borrow money from relatives or from individuals with lending business (popularly known as 5-6), or avail of goods from the neighbourhood sari-sari store via credit – in order to make ends meet. All the more that they turn to these measures when their grants get delayed or they receive a smaller amount than what they are supposed to get, often due to data update issues. In this case, the grant would serve as payment for their debts. In other cases, some beneficiaries use the grant they receive to finance their small business (e.g., selling food and other merchandise, direct selling) in order to grow it.



We allot money for debt payment and for the children’s school fees. Those are our priorities. That’s why the grant onle lasts us one day, we’re one-day millionaires.

Mag-iwan kami ng pera pambayad sa utang, pambayad sa school ng mga bata. Yan ang priority namin. Kaya naman one day lang tumatagal sa aming yung grant, one-day millionaire.

- Beneficiary, Butuan, CARAGA

Nonetheless, they recognize that the amount they get from the 4Ps is already a huge aid in providing for their children’s needs. This is why most beneficiaries we talked to in the provincial



areas do not complain when there are anomalies in the amount of grant that they receive, despite having to file data update requests repeatedly and follow-up on these every now and then.

“ It’s already a big help in our everyday and monthly expenses. That’s why I also fear that if Pantawid stops, we will no longer have the allowance intended for my children. We do not have any savings nor a stable source of livelihood for the family to survive.

Malaking bagay na yun pandagdag sa gastusin naming araw-araw tsaka sa buwanang pangangailangan namin. Kaya natatakot din ako kung mag-stop na ang Pantawid kasi mawawala na yung nailaan na allowance para sa mga bata. Wala po kasi kaming naipon o kaya pang-livelihood na pwede naming ikabuhay sa pamilya namin.

- Beneficiary, Butuan, CARAGA

In Makati and Manila, however, beneficiaries are more vocal about their dissatisfaction with the delays and inconsistencies in the amount that they receive from the 4Ps. This leads some to think that they are better off not following the conditionalities when they hear of other beneficiaries who receive the full grant despite observed non-compliance. Linking this to the relatively higher cost of living and presence of other economic opportunities by working odd side jobs to get by, these inconveniences they encounter about receiving the grant may take its toll on their compliance with the conditionalities eventually.

“ That’s why I have doubts, because I always bring my children for check-ups, I always attend the FDS. Why is it that when I claim the grant, it’s incomplete? Whereas the others get the full amount. I already doubt the system.

Kaya ako nagdududa kasi lagi naman ang pa-checkup ko sa anak ko, lagi naman din attend ko ng FDS. Bakit pag pumipindot ako kulang? Samantalang yung iba kumpleto, nagdududa ako sa ganung sistema.

- Beneficiary, Makati, NCR

“ Why do others who do not attend the FDS get the full amount? That’s why I’m already losing interest. What if I also no longer attend? Who knows, I might get the full amount as well.

Bakit yung iba na hindi uma-attend ng FDS kumpleto ang nakukuha nila? Kaya nakakatabang na eh. Ano kaya kung hindi na nga rin ako aattend? Malay mo makumpleto.

- Beneficiary, Manila, NCR

5.5 FINDINGS ON PROGRAM FIDELITY

The quality of program implementation is crucial to the success of the Pantawid, as observed in the experiences of beneficiaries and program personnel alike. That said, we will take a look at five of the key components of the program in this section – beneficiary registration, compliance verification system, beneficiary update system, grievance redress system, and payment process – in order to assess the fidelity of program implementation to the procedures stipulated in the operations manual of the Pantawid. We will closely examine the implementation practices of program personnel, the challenges they encounter in every procedure, and their responses and initiatives to these hindrances.

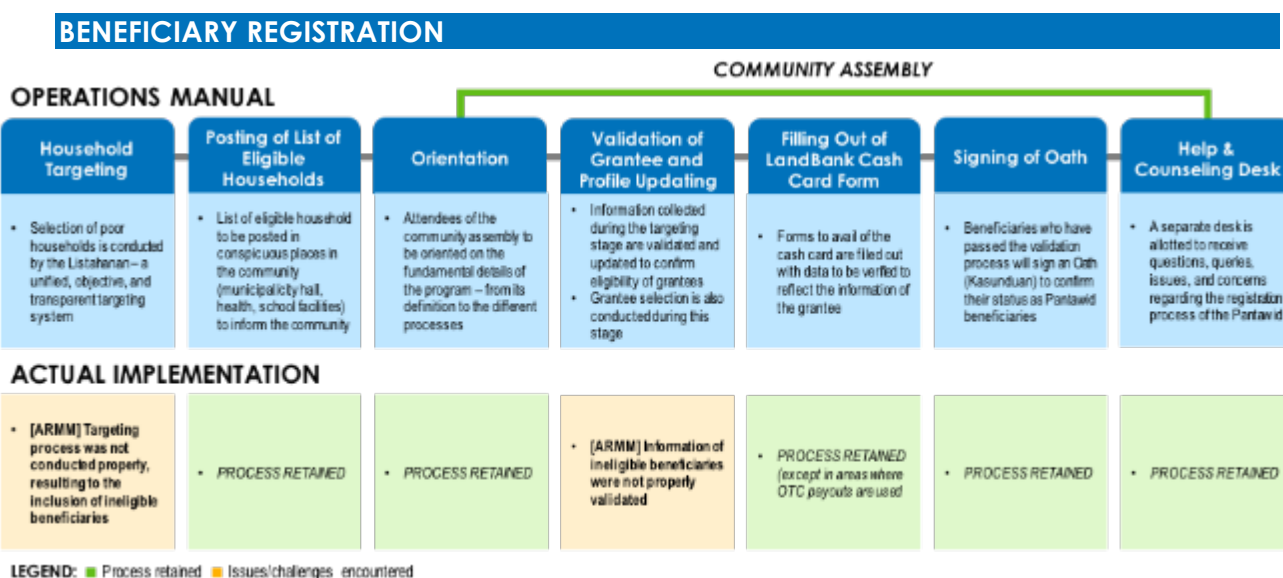


Figure 27. Process Flowchart for Beneficiary Registration, based on Operations manual vis-a-vis Actual Implementation

As per the accounts of the program implementers and program officers, beneficiary registration typically occurs similarly across regions. They generally follow the procedure as stated above (based on the Pantawid operations manual), with variations caused by area-specific concerns and deviations. Implementation of the registration process begins with the targeting of eligible households, as conducted by the Listahanan system. **In ARMM, this is typically where deviations are said to arise, particularly when it comes to the selection of target beneficiaries.** Implementers and management officers in ARMM recount experiences wherein the process of targeting the beneficiaries themselves was not properly conducted in their areas. Reports of Listahanan enumerators not actually going to the households were rampant according to these program personnel. They recall how these individuals did not go to the remote locations and instead, asked local officials and key community figures to come up with an arbitrary list of beneficiaries to be encoded in the program instead.

Apart from this, **there are also implementation challenges pertaining to the validation of beneficiary information during the community assembly itself.** In areas such as the target municipalities in ARMM, the data provided by the beneficiaries are not efficiently validated and



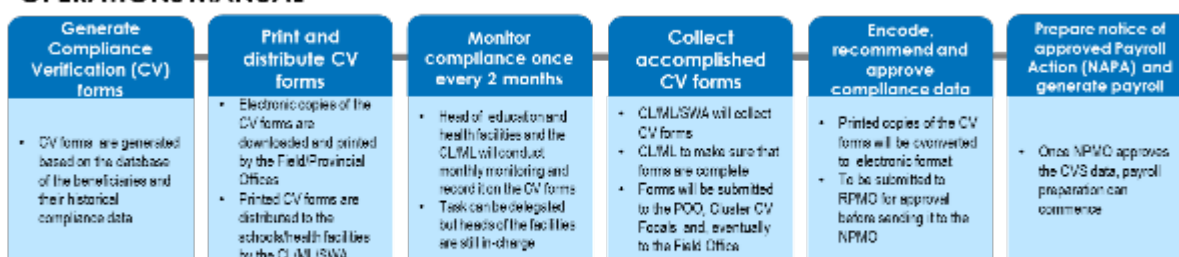
reviewed due to personnel constraints. As a result, the registration of ineligible beneficiaries are mistakenly approved, giving rise to cases of beneficiary misrepresentation and the like.

In response to these concerns, **program personnel resort to filing formal grievance cases to address the number of such situations in the program areas.** In ARMM, they incorporated biometrics registration in the registration and update process so that they could curb the number of misrepresentation cases that had once been rampant in the region.

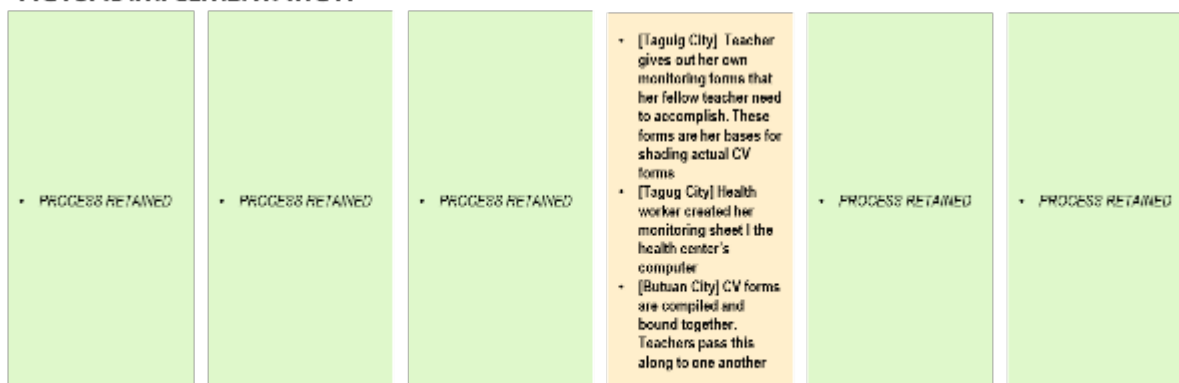
Beneficiaries across the study regions generally report similar experiences with regards to the registration process. Not knowing what the initial interviews and home visits of government personnel were about is a common sentiment shared by beneficiaries. They recount how surprised they were to find out that they were suddenly invited to become Pantawid beneficiaries following this process. For them, going through the process outlined above was not difficult and was convenient enough to follow, even the submission of documents and requirements.

COMPLIANCE VERIFICATION SYSTEM

OPERATIONS MANUAL



ACTUAL IMPLEMENTATION



LEGEND: ■ Process retained ■ Issues/challenges encountered

Figure 28. Process Flowchart for Compliance Verification System, based on Operations manual vis-a-vis Actual Implementation

Areas that were covered in the study are generally loyal to the compliance verification process. However, when it comes to filling-out the CV forms, Program Partners tend to have different strategies. In the case of Taguig City, the teacher in-charge of the CV forms created her own form that she gives out to her fellow teachers to make the whole process easier. Her fellow



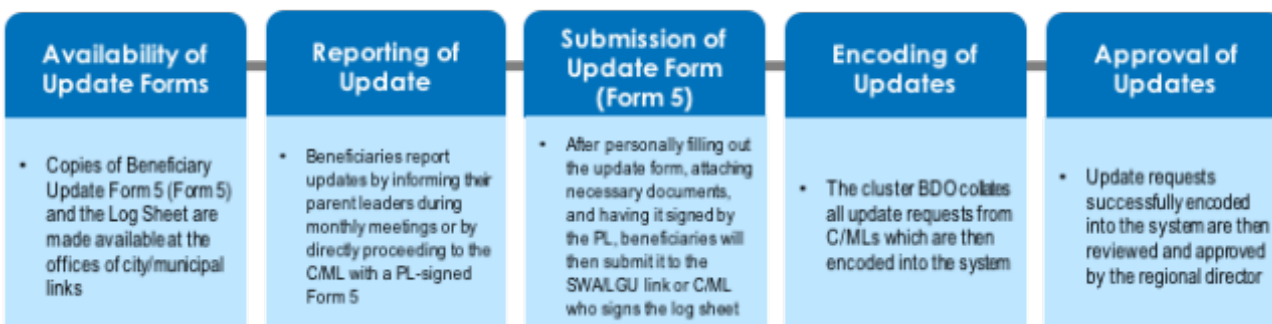
teachers would simply list down the names of the students who did not comply for that certain period then she would collect these and use it as a bases when shading the CV forms. This is in contrast with the strategy of the focal teacher in Libjo, Dinagat Islands who would just give the compiled CV forms to one teacher and then they would pass it on until all the teachers have filled it out. One health worker in Taguig City would also monitor compliance of the beneficiaries by keeping a monitoring sheet, that she created herself, using the health center's computer.

Although they tend to be loyal to the process, program implementers tend to encounter various difficulties in the responsibilities that they have to do. For the study areas in ARMM and Dinagat Islands, **geographical factors make it difficult for the program implementers (particularly the SWA) to distribute/collect CV forms and verify compliance.** In the case of Dinagat Islands, even receiving and sending the CV forms to and from the regional office is hard since the papers have to travel via ferry, bus and tricycle. For program implementers in the study areas of ARMM, particularly the municipality of Talayan, they regret not having the time to go on fieldworks to validate the compliance records from Program Partners.

According to the program implementers that were interviewed in NCR and CARAGA, another difficulty that further delays the CV process is the low quality of encoding in their areas. When there are errors in the data that is encoded it becomes an added burden to the CLs/SWAs/PLs because they would have to go back to the beneficiary and verify the accuracy of the data update. In the case of the study areas in NCR, process is further slowed down by the insufficient number of encoders in their respective offices.

BENEFICIARY UPDATE SYSTEM

OPERATIONS MANUAL



ACTUAL IMPLEMENTATION



Figure 29. Process Flowchart for Beneficiary Update System, based on Operations manual vis-a-vis Actual Implementation

The implementation of the beneficiary update system across the study areas was also observed to be consistent with how it is outlined in the operations manual. **However, challenges still arise within the process, particularly in the encoding and approval of updates – which becomes a cause for deviations in the implementation of the system.**

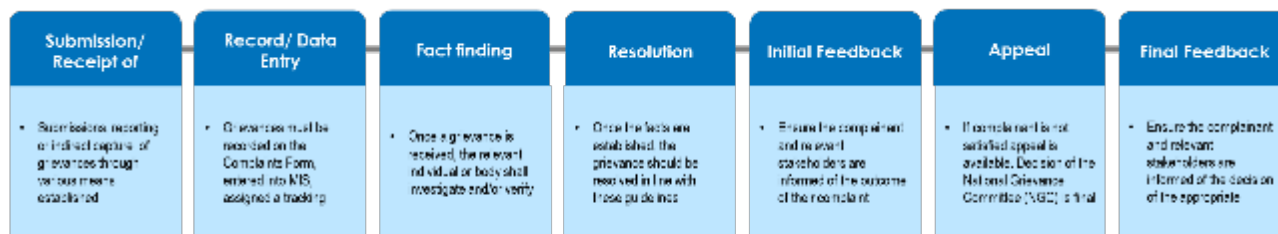
Across regions, beneficiary data management officers share stories about lapses in data encoding, which often becomes a problem for compliance monitoring and verification. Cases about wrong personal information being recorded (e.g. name, date of birth, address, year level of child, etc.) were observed to be frequent, mostly due to insufficient and ill-equipped encoders.

In areas such as CARAGA and Region I, program implementers often resort to **offline processing** in preparing the collated update requests before forwarding it to the national central office, as a response to some connectivity problems they typically encounter. This was also brought about by prior instances wherein they failed to meet BUS timelines because of such issues. This is connected with their concern with the speed of processing of update requests, which they believe gets stalled after processing it at the municipal and regional level. This is often a mystery for them as they no longer have any knowledge as to what happens to the requests beyond this stage.

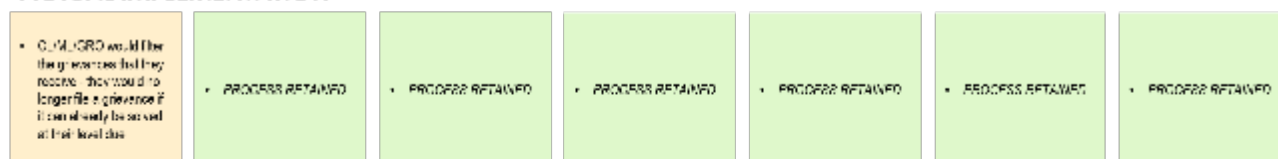
For beneficiaries, they also have similar experiences with the slow update system. They recall how long it often takes for their requests to be given feedback and results. Aside from this, some beneficiaries also recount how they are obliged to pass their documents every month in order to keep filing their update requests. However, this does not necessarily bear positive outcomes for them considering that more often than not, their requests are still not processed timely.

GRIEVANCE REDRESS SYSTEM

OPERATIONS MANUAL



ACTUAL IMPLEMENTATION



LEGEND: | Process retained | Issues/challenges encountered



Figure 30. Process Flowchart for Grievance Redress System, based on Operations manual vis-a-vis Actual Implementation

Across areas covered, grievances are usually processed faithful to the prescribed Grievance Redress System (GRS). However, according to the program implementers particularly in CARAGA and ARMM, although grievances are processed on a timely manner in their level there are still instances when resolutions take too long since they **no longer have control over how fast the grievance will be answered in the National Grievance Committee**. Delay in the solution for grievances can also be attributed to the two other systems that it works hand in hand with, the Compliance Verification System (CVS) and the Beneficiary Update System (BUS). If there are delays in the CVS and BUS, grievances will then be delayed as well.

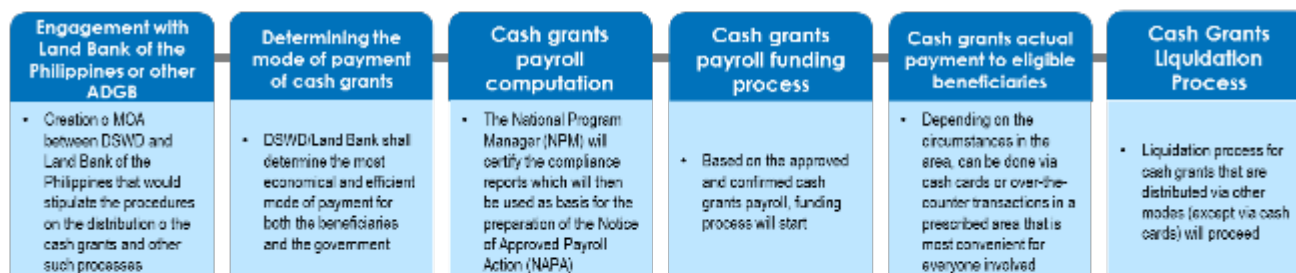
In order to make the process faster, program implementers would filter the grievances that they receive. If a beneficiary goes to them, they would immediately investigate (e.g. check compliance of the beneficiary) and check if they can solve the issue at the lowest level possible. Particularly in Butuan City, they do this to both make the process faster and at the same time avoid bringing down their grievance redress ratings. Regions have ratings when it comes to the number of grievances they receive and how many of it they are they able to solve. If they immediately solve grievances, then beneficiaries would no longer need to go through the whole long process and in effect the grievance redress ratings of the region will not be affected.

Aside from the slow process, another issue for this system takes place in ARMM wherein **external factors in the area such as the presence of political turmoil and corrupt local officials create a sense of fear among the beneficiaries**. Hence, they would choose not to report their grievances or would file grievances but would no longer follow it up. As a result, their grievances do not get addressed at the level of the RPMOs.

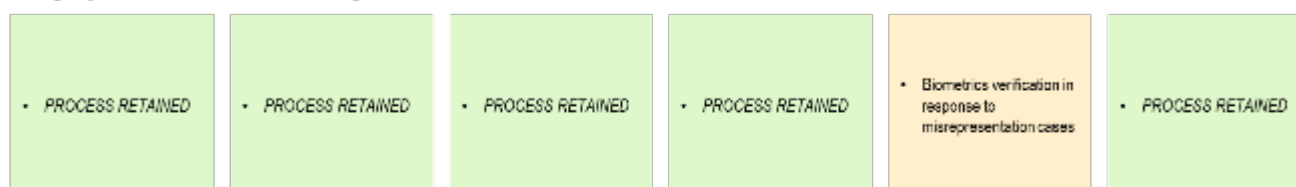
For the beneficiaries, on the other hand, most grievances they file are regarding the cash grants that they receive. Across the study areas, they are given the option to either personally file their grievances to their CLs/MLs or report it to their Parent Leaders who will then compile all the grievances and submit it to the CLs/MLs. Grievances are usually filed during the FDS. However, some beneficiaries in NCR, would opt to go to the offices of the program directly – these makes them feel that their grievances would be resolved immediately.

PAYOUTS

OPERATIONS MANUAL



ACTUAL IMPLEMENTATION



LEGEND: ■ Process retained ■ Issues/challenges encountered

Figure 31. Process Flowchart for Payouts, based on Operations manual vis-a-vis Actual Implementation

Distribution of cash grants is a system that is of major concern only to ARMM, wherein issues regarding conduit selection and cash grant distribution are rampant. One special part of the process, particularly in mainland Maguindanao and Lanao del Sur, is the additional step of **biometrics verification when claiming the cash grants**. This is a **response to the several misrepresentation cases in the region**, wherein ghost beneficiaries and doubled records were incorrectly registered to the program. While it has been an effective measure to crack down on these misrepresentation cases, it makes the payout process much more tedious for beneficiaries and RPMOs alike. Because of the biometrics verification, payouts are often massive operations that involve beneficiaries from various municipalities going to a single location to claim their cash. As a result, payouts often take up the whole day to finish. This also poses as a threat in their security.

Figure 32. Barangay grounds of Talayan where payouts are usually held

Another issue in the pay-out system in ARMM is that **cash grants are often given out every 7 to 8 months**, depending on the status of the system in the area. There are even reports of **beneficiaries claiming their grants only after a year**. Reasons for this delay are attributed to various problems related to the conduits that help conduct payment in the region. **The RPMOs and program implementers that were interviewed report that third-party conduits are often difficult to coordinate with**, starting from the bidding process all the way to the distribution of cash. It is, therefore, common for conduits to be repeatedly replaced, which further delays the whole process.

6 Analyses and Syntheses

DRIVERS OF COMPLIANCE

Compliant areas have a set of various inter-related internal and external factors that are dynamic in nature. These factors deliberately, or in some cases, unintentionally complement each other's functions – hence, results to a situation that is conducive to beneficiary compliance.

▪ Internal Factors

- Engaging program implementer culture – The existence of program heads/ supervisors who constantly promote proactiveness and innovation lead to, among other things, more empowered program implementers. This is central in improving the program process since program implementers are the people on the ground, the link between DSWD and the beneficiaries.
- Skillful and knowledgeable program implementers and partners – Having a clear understanding of the purposes and processes of the program is important to ensure beneficiary compliance. This can only be done through ensuring that the program implementers and partners are knowledgeable about the program since they are beneficiaries' main sources of information.
- Strong implementer-beneficiary relationship – The existence of this type of relationship help implementers have a better understanding of their beneficiaries' situation, hence gives them leads on how to encourage or help them comply.
- Well-informed beneficiaries – Beneficiaries need to have a clear understanding of the program and its conditionalities in order for them to understand their responsibilities to the program.
- Highly involved program partners – Program Partners that play an active role in the program serve as the implementers' 'ally' in better monitoring and verifying the compliance of the beneficiaries.

▪ External Factors

- Active local government – May the LGU be supportive or not supportive of the 4Ps, by ensuring the proper distribution of social services to its



constituents the LGU is, in effect, helping make compliance to the program easier for the beneficiaries

- *Adequate health and education services and infrastructure* – Having enough infrastructures helps makes going to schools/health centers more convenient for the beneficiaries, hence enables compliance.
- *Positive outlook of beneficiaries* – Having a positive outlook in life makes beneficiaries in Butuan City more compliant – they know that they are capable of achieving a better life in the future and so they will make use of all the opportunities presented to them.

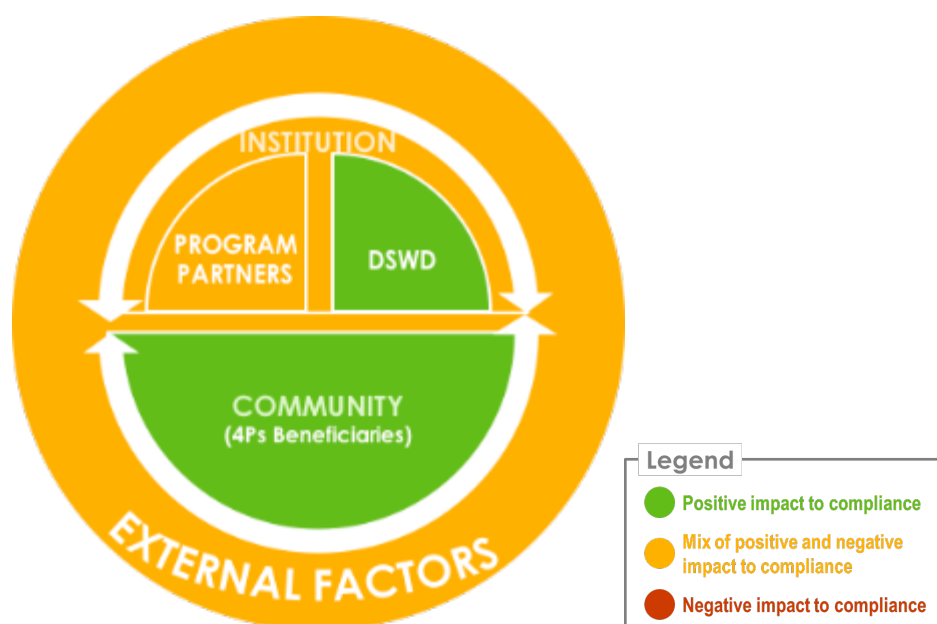


Figure 33. Summary of factors among compliant areas

The factors that contribute to high compliance rates ultimately lead to a **better resonance of the 4Ps among beneficiaries**, i.e., they have a better understanding of the program's objectives and thus, are more inclined to comply with the conditionalities. This is aligned with the importance of establishing harmony between the institution and the community in order to achieve the program's goal – in this case, breaking the intergenerational cycle of poverty via enabling the beneficiaries through health, education, and FDS.

What sets apart the compliant areas that the study covered vs. non-compliant areas is the ability and desire of the key program implementers (i.e., Provincial and City/ Municipal Links) to closely monitor and establish close relationships with the beneficiaries, **cultivating a deeper sense of appreciation of the program among the beneficiaries**. Because of this hands-on approach, information gaps are bridged, hence, both institutional and community entities work together in achieving the goal of the program.

While a solid relationship between DSWD program implementers and the beneficiary community already proves to be key in ensuring compliance, **there is still room for**

strengthening the roles and creating synergy between the 4Ps and the program partners (internally), and LGU (externally).

- Proper orientation of the program partners about 4Ps is needed to ensure that they are aligned with DSWD as regards the program objectives and the conditionalities of the program for education and health. While this is the case observed in Butuan, there may be other areas like Taguig City, San Carlos City, and Municipality of Sto. Domingo where program partners, particularly education focals who do not necessarily agree with or understand the true intent of the program. Nonetheless, they are equipped with the basic knowledge about the 4Ps conditionalities, hence are able to provide support to the program implementers in monitoring beneficiary compliance. We can potentially further harness this support from program partners once we are able to make the program resonate to them.
- LGU's efforts that are independent of the 4Ps can pave the way for beneficiaries to comply more easily with the conditionalities via complementing infrastructure projects. But with concrete synergy with the program as evidenced in Butuan, supply side needs for education and health are more quickly addressed via close coordination and regular meetings.

DRIVERS OF NON-COMPLIANCE

In the interplay of internal and external factors that contribute to the non-compliance of beneficiaries, it is the dissonance or the disjoint between what the program intends and what the beneficiaries know that drives the occurrence of low compliance performance. As observed in Makati and Manila in NCR, as well as Datu Odin Sinsuat and Sultan Kudarat in ARMM, non-compliance can be attributed to the lack of a deep understanding of the program, resulting from failure to merge the efforts of the institutional mechanism to the nuances of the local community. The factors that lead to this result are as follows:

- **Internal Factors**

- Lack of implementer and program partner training – Non-compliance is driven by the absence of adequate training given to program implementers. This is also observed among program partners, which was noted to lead to a lack of implementation knowledge and program appreciation. This factor functions as a determinant, bringing about other factors that further drive non-compliance.
- Inefficient coping strategies as a response to manpower concerns and organizational culture – Implementers in non-compliant regions are spread thin and are saddled with other administrative duties, hindering them from working on their responsibilities to the program. This is further exacerbated by the tedious organizational culture of the regional and provincial offices. This is also primarily an effect of their lack of training as key personnel of the program.
- Low program knowledge of beneficiaries – The low and inconsistent knowledge of beneficiaries regarding program goals and their responsibilities ultimately leads to their non-compliance with the conditionalities. This is due to the inadequate orientations they receive from implementers, as well as the



disjoint of techniques to local factors specific to the areas – effects of the first two determinants listed above.

▪ **External Factors**

- Absence of LGU-Program Partner-Implementer synergy – The lack of synergy between local government officials, program partners, and program personnel can lead to non-compliance and program misimplementation, including supply side concerns.
- Availability of other economic and social opportunities – Specific for NCR, the presence of other more readily available economic opportunities and social aid dissuades them from availing of services linked to their compliance in the program. As a result of their choosing these opportunities, compliance rates recorded in these areas are lower.
- Geographical challenges and presence of political conflict – Specific for ARMM, challenges arising from geographical constraints impede proper program implementation, which thus becomes a cause for non-compliance in select regions. This is worsened by tensions among political clans and conflicts in select program areas.



Figure 35. NCR Non-Compliance Summary



Figure 34. ARMM Non-Compliance Summary



In contrast with compliant regions, the **factors that drive non-compliance contribute to the dissonance of the program to the beneficiaries**. Rather than instilling a deeper sense of appreciation of the goals and intentions of the program, the factors outlined above leave beneficiaries unaware and uninformed of the opportunities the Pantawid can provide them. This is what brings about the perception of some beneficiaries from non-compliant areas regarding the cash grants they receive – that rather seeing it as a stepping stone into a future free from financial worries, it mainly functions as a temporary fix in their daily monetary struggles.

This dissonance is ultimately caused by the absence of solid relationships between program implementers and beneficiaries, as well as the lack of stakeholder synergy in non-compliant areas. Because of the lapses in linking these key elements, compliance with the conditions of the program are not encouraged and reinforced among beneficiaries in non-compliant areas. These factors are ultimately caused by the lack of trainings received by program personnel, which leads to inefficient implementation strategies in these areas.

ON PROGRAM FIDELITY

Observations on the cross-regional implementation of the program lead to the finding that **deviations in terms of actual program execution are inevitable, particularly among areas wherein barriers to efficient implementation are typically out of the spheres of influence of the RPMOs**. While they try their best to ensure that the processes and the systems under their watch are implemented as accurately and closely to the manual as possible, they are often forced by circumstance to work around the challenges they encounter by coming up with positive program deviations that resolve issues in implementation in their own way.

This trend can be explained through Jocano's explanation of the relationship of the *institution and community*, which takes a look at the interplay of institutional policies and local contexts, as well as the outcome of their relationship. In this case, it can be said that in regions where deviations in implementation are present, **the institutional is compelled by the local norms to adjust and adapt to contextual challenges**. As a result of this adaptation, initiatives that are not necessarily indicated in the operations manual of the program are implemented.

Therefore, it is crucial for programs such as the Pantawid and other projects organized by institutions like the government to **take into account community settings and challenges** when implementing policies that affect communities with unique local contexts. For implementation to be efficient and effective, institutions themselves must be flexible and adaptable in executing such programs – flexible in terms of catering policies to local stakeholders and adaptable in coming up with solutions to distinctly local concerns.



7 Conclusion and Recommendations

Learnings from the compliance and non-compliance factors identified in this study point towards the need for key reforms in crucial components of the program. Establishing strong **relationships of program implementers and program beneficiaries** and fostering **solid stakeholder synergy among program personnel, local government units, and program partners** are vital in improving the compliance of beneficiaries and the implementation of the Pantawid.

RECOMMENDATIONS FOR INTERNAL FACTORS

Learnings from determining the compliance and non-compliance stories of the study areas point towards **strengthening internal institutional factors**, both of its technical and relational aspects, in order to effectively drive beneficiary compliance. Many of the recommendations outlined below are also initiatives suggested by program implementers, most especially the ones relating to program training and case load.

- **Allow implementers to monitor beneficiaries more closely, and to constantly reiterate the program's long-term and transformative goal of breaking the intergenerational cycle of poverty**, which would also help establish solid relationships with beneficiaries. This gives implementers the opportunity to obtain a more grounded picture of the beneficiaries' surrounding context, hence would better equip them to determine ways to address non-compliance to the conditionalities and achieve the behaviour change that the program aims for. While this is currently being conducted by implementers in order to note compliance records, it is more crucial to be able to deepen the desire to foster beneficiary relationships among these people on the ground.
- **Ensure enough manpower and manageable caseload** (ideally 1 CL/ML : 200-300 beneficiaries, according to respondents) for program implementers so that they can be in the field more to establish solid relationships with beneficiaries. At their current case load of more than 700 beneficiaries under their care, they find it difficult to keep track of the progress of their designated households. Bringing this number down to 200-300 would give them an opportunity to better distribute their time and effort in keeping an eye out for Pantawid beneficiaries.
- **Equip program implementers with sufficient trainings and orientations**, particularly with regards to the proper implementation of the program, i.e., requirements on the conditionalities, proper way of processing and filling out the forms, effective coping techniques.
 - Once implementers have a good grasp of how the program should work, a clearer understanding of the program and its objectives will also trickle down to the beneficiaries and program partners
 - It will also make a difference to have clearly thought out orientations among education and health program partners since they play a key role in monitoring beneficiary compliance
 - Program implementers would also benefit from **counselling and social work training** workshops so as to equip them in terms of case management –



supposedly a separate component of their responsibilities as implementers which becomes usefully integrated in their duties in the Pantawid

RECOMMENDATIONS FOR EXTERNAL FACTORS

Ideally, **LGUs and external factors**, particularly on the infrastructure/ supply side **should also complement 4Ps implementation**, as evidenced by the synergistic approach in Butuan.

- **Close coordination with LGU** and positioning 4Ps as a complementary program to the LGU's local endeavors in addressing poverty – be clear that 4Ps does not intend to overstep on the LGU's powers. This can be done by the consistent enforcement of **Provincial/City/Municipal Advisory Committee meetings** that would lead to faster drafting of solutions to address supply side needs and concerns with regards to the program.

However, in the case of Libjo and ARMM, it may be a feat to address issues on the external factors, i.e., geographic and LGU's financial constraints in Libjo, geographic constraints and political conflict in ARMM. Hence, **it may merit to adjust requirements/ conditionalities** as well as protocols in program implementation for areas with these kinds of concerns.

Adjusting certain parts of the process can also be a way to answer specific issues in the program. By looking at the **best practices** already being implemented by certain regions, we are able to conclude that doing such innovations can really help improve the process:

- Make FDS more interactive and engaging to facilitate an informative yet enjoyable activity for the beneficiaries. This initiative, currently done in Butuan City, Taguig City and Region I, help make beneficiaries have a better appreciation of the FDS – hence, makes compliance easier
- Focal teachers are burdened with the tedious job of monitoring the attendance of all the 4Ps beneficiaries in a school. In order to make the task easier, one focal teacher in Taguig City handed out **attendance monitoring sheets** to her fellow teachers based on a format that she made herself. She collects said sheets and then proceeds to answer CV forms conveniently
- The **Systems Caravan** initiated by a Provincial Link in Butuan City, a practice Region I has already adapted as well, brings the three main systems of the program closer to the beneficiaries. Having a venue like this makes the filing of updates or grievances faster and more convenient

Issues about geographical constraints in ARMM and Dinagat Islands, on the other hand, require specific actions as well:

- **Relax timelines** when it comes to report submissions especially in areas where there is no internet connection
- Additional allowances, especially for those in ARMM, will help ensure that PLs/MLs/SWAs can really monitor/verify compliance and manage cases of the beneficiaries



BENEFICIARY-SUGGESTED RECOMMENDATIONS

Aside from these recommendations, there are also improvements to the program that beneficiaries seek to be implemented. Note that many of these improvements are points and aspects that they want to be added in the program, but are not necessarily recommendations that would further increase their compliance with the set conditions.

- **Continued program implementation** – Beneficiaries want an assurance that the program will be implemented regardless of changes in political leadership and other external scenarios. This is in light of rumors that have been going around about the program being terminated. For them, this would be a great concern considering that they view the Pantawid as one of the few government projects that actually seek to help them with their crucial financial needs.
- **Expanded program coverage** – It is also preferred by beneficiaries to expand the coverage of the program to allow them to register more of their children as program beneficiaries. This because many of the beneficiaries have children more than what is current allowed (3 child beneficiaries) who also need financial assistance. They would also like to have more scholarship and assistance opportunities for their children who are pursuing college, considering the many financial costs of enrolling them in higher education institutions.
- **Monthly distribution of cash grants** – Given the financial needs of beneficiaries which burden them on a daily basis, they would prefer to receive the cash grants every month, so as to help them with immediate financial concerns. They believe that doing so would lessen the effects of their monetary hardships and will make life more comfortable for them financially.
- **Increased cash grants** – A higher cash grant is also something that beneficiaries would like to be implemented, considering that they still feel as though the current grants they receive are not enough. Even though beneficiaries appreciate the amount they receive as it is, they reported that they will welcome any increase as it would be of greater help for them if the cash grant they will receive is made higher. This is particularly salient across all beneficiaries from compliant and non-compliant areas, where the cash grant they receive is considered as aid to their financial needs. A higher cash grant would help them in taking care of the financial costs of sending their children to school and maintaining the health of their family. For some beneficiaries, it would also help them in not being indebted to lenders and other individuals whom they loan money from in order to survive financially.
- **Additional program benefits** – Aside from the cash grants, beneficiaries would also like to receive additional benefits in kind that would be useful to them. They envision this to be in the form of additional sources of sustenance such as food and rice allowances – daily necessities that they hope would also be addressed by the program. In tandem with the increased cash grants, having these additional benefits would help lessen the financial burden they bear of having to deal with the many expenses they face in their daily lives.
- **More livelihood opportunities** – While beneficiaries have a sense of appreciation towards the financial grants they receive under the current program, they also look for benefits that would give them more livelihood opportunities as another source of financial income. They would like for livelihood seminars to be institutionalized as a



part of the program, which would provide them with a stepping stone to creating their own businesses so they can also begin generating income independently. This can be done through the strengthened convergence of existing DSWD initiatives such as the Sustainable Livelihood Program (SLP).



Appendix 1. Data reference tables from TOR

Table 1. 2010 – 2014 Average Compliance Rates of Regions

RANK	Education	2010-2014 Average	Health	2010-2014 Average	FDS	2010-2014 Average
	Region		Region		Region	
1	I	88.7%	I	90.2%	XII	95.7%
2	CARAGA	83.4%	CARAGA	89.5%	VII	95.7%
3	CAR	83.2%	XI	87.9%	VI	95.1%
4	X	83.1%	X	86.2%	III	94.9%
5	V	82.6%	II	85.6%	II	94.4%
6	IX	82.2%	CAR	85.6%	X	94.3%
7	IV-A	81.4%	VII	85.4%	XI	94.3%
8	II	81.3%	V	84.5%	V	94.2%
9	VII	81.1%	III	84.1%	IV-B	93.9%
10	IV-B	80.9%	VI	84%	I	93.5%
11	VI	80.7%	IX	81.8%	IV-A	93%
12	XI	80.4%	XII	81.6%	ARMM	92.9%
13	III	79.4%	IV-A	79.3%	CARAGA	92.6%
14	NCR	75.3%	IV-B	77.7%	CAR	91.8%
15	VIII	74%	VIII	70.3%	IX	89%
16	XII	73.2%	NCR	68.9%	NCR	88%
17	ARMM	60.4%	ARMM	65.1%	VIII	83.4%
National Average		79.5%		81.6%		92.8%



**Table 2. Poverty Incidence: 1991, 2006, 2009, and 2012 and
No. of Pantawid Households by Region**

Region/ Province	Poverty Incidence Among Families (%)				Magnitude of Poor Families (2012)	Pantawid HHs (as of 29 Apr 2015)
	Estimates (%)					
	1991a/	2006	2009	2012		
PHILIPPINES	29.7	21.0	20.5	19.7	4,214,921	4,423,628
NCR	5.3	2.9	2.4	2.6	76,530	235,305
CAR	36.7	21.1	19.2	17.5	65,516	64,483
Region I	30.6	19.9	16.8	14.0	154,712	207,123
Region II	37.3	21.7	20.2	17.0	130,965	103,480
Region III	18.1	10.3	10.7	10.1	240,079	294,466
Region IV-A	19.1	7.8	8.8	8.3	256,839	324,136
Region IV-B	36.6	32.4	23.6	23.6	150,486	199,110
Region V	48.0	35.4	32.3	32.3	375,974	380,550
Region VI	32.3	22.7	22.8	22.8	365,040	326,798
Region VII	38.2	30.7	25.7	25.7	405,694	288,692
Region VIII	42.3	33.7	37.4	37.4	337,221	289,235
Region IX	36.4	40.0	33.7	33.7	259,749	318,407
Region X	42.6	32.1	32.8	32.8	320,113	279,418
Region XI	34.1	25.4	25.0	25.0	268,957	259,014
Region XII	47.4	31.2	37.1	37.1	366,169	252,612
CARAGA	48.5	41.7	46.0	31.9	169,522	190,232
ARMM	26.9	40.5	39.9	48.7	271,355	410,567

Notes:

a/ Provincial estimates were not generated due to limitations of the sampling design of the 1991 Family Income and Expenditure Survey.

(Source: National Statistics Coordination Board)



Appendix 2. Summary of Abbreviations

BDMD	Beneficiary Data Management Division
BDMO	Beneficiary Data Management Officer
BUS	Beneficiary Updating System
CCT	Conditional Cash Transfer
CVD	Compliance Verification Division
CVO	Compliance Verification Officer
CVS	Compliance Verification System
DepEd	Department of Education
DOH	Department of Health
DSWD	Department of Social Welfare and Development
FDS	Family Development Session
FGD	Focus Group Discussion
GRD	Grievance Redress Division
GRO	Grievance Redress Officer
GRS	Grievance Redress System
IDI	In-Depth Interview
KALAHÍ-CIDSS	Kapit-Basig Laban sa Kahirapan – Comprehensive and Integrated Delivery of Social Services Project
LBP/LandBank	Landbank of the Philippines
LGU	Local Government Unit
M/CAC	Municipal/City Advisory Committee
M/CL	Municipal/City Link
NGO	Non-Government Organization
OTC	Over the Counter
PAC	Provincial Advisory Committee
PL	Provincial Link
RAC	Regional Advisory Committee
SLP	Sustainable Livelihood Program
SWA	Social Welfare Assistant



Appendix 3. Discussion Guides

<p>Project EUDORA – RPMO IDs – BENEFICIARY DATA OFFICER Discussion Guide page 1 of 5</p> <p>I. INTRODUCTION (7 mins)</p> <p>Objective:</p> <p><i>To carefully explain the nature and objectives of the research</i></p> <p><i>Assure on the confidentiality of the discussion and their personal information</i></p> <p><i>Establish rapport with respondent to encourage open sharing of opinions</i></p> <ul style="list-style-type: none"> • Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. • Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. • There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. • Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. • To know you better, please tell me something about yourself: <ul style="list-style-type: none"> – Name – Age – Position/Designation in DSWD/4Ps 	<p>Project EUDORA – RPMO IDs – BENEFICIARY DATA OFFICER Discussion Guide page 2 of 5</p> <p><i>and tensions/ gaps to resolve in the process in relation to beneficiary compliance</i></p> <ul style="list-style-type: none"> • SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/operations manual, taking note of the aspects that he/ she highlights about the job <ul style="list-style-type: none"> ○ LIKES: What are the things that you like about your job? ○ DISLIKES: What about the things that you do not like? • DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> ○ What are the daily routine tasks in your job? ○ Aside from those activities do you still have other responsibilities that are still part of your job but you seldom do? What are those? ○ Does your work load change? Are there instances that you are busier than usual? When does this usually happen? Why? ○ Who do you usually work with? How are you connected to them? Identify dependencies of BENEFICIARY DATA OFFICER, their perceived roles in the 4Ps process, and their level of interaction with each other ○ How many beneficiaries do you handle? How has it been going so far for you in handling that amount of volume of beneficiaries? Is that enough or too much? How so? • CHALLENGES: what are the challenges that you have experienced or are currently experiencing as a BENEFICIARY DATA OFFICER? • IMPORTANCE OF ROLE/POSITION: How important is a BENEFICIARY DATA OFFICER? <ul style="list-style-type: none"> ○ What could happen if you are removed as a part of the process of 4Ps? How would it affect the process? ○ Do you have anyone to replace you if you are sick or want to go on vacation? Who are they? • ON TRAINING RECEIVED: Did you have trainings when you started serving as BENEFICIARY DATA OFFICER? <ul style="list-style-type: none"> ○ How was it? ○ Was the training helpful for you as a BENEFICIARY DATA OFFICER? In what ways? ○ Are there things that you think were missed out during the training and you felt those should have been included? Who do you consult about these missed out modules? ○ Do you have any suggestions on how to improve the trainings for BENEFICIARY DATA OFFICER like yourself? • Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> ○ Causes of these problems? ○ Effects on the process? People mostly affected? ○ What should be done to address these problems? • Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> ○ What do you like doing the most? Why?
<p>II. INFORMATION ON BENEFICIARY DATA OFFICER'S DUTIES AND RESPONSIBILITIES (60 mins)</p> <p>Objective:</p> <p><i>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p> <p><i>To uncover possible best practices that can be leveraged.</i></p> <p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe this area?</p> <ul style="list-style-type: none"> • What is the main source of income of the people living here? • Have you noticed any changes in the area for the past five years? In what aspect? How were you able to tell that there were changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> • UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> ○ When did the 4Ps start here in your municipality? • LENGTH OF SERVICE: How long have you been serving as a BENEFICIARY DATA OFFICER? How did you start as a BENEFICIARY DATA OFFICER? • HOW FEEL ABOUT JOB: How is your work? How do you feel about that? 	



- What part is the most challenging? Why?
 - How do you make sure that the 4 P's are well implemented in your province/municipality? Who helps you in implementing these strategies?
- Check on their roles in the following:*

REGISTRATION

- Does a Beneficiary Data Officer play a role in choosing the 4Ps beneficiaries?
- How are these beneficiaries selected? What are the processes involved?
- Any differences in the process in other areas that you know or heard of? In what ways? What do you think are the reasons for the differences?
- Do you know any families that should have been included in 4Ps but were not? What do you think are the reasons behind this? Suggestions on how to improve the process of choosing beneficiaries and their registration to the program?

BENEFICIARY DATA UPDATE:

- When do we update the information of the members?
- How do you know if a member's information must be updated already?
- What are the processes involved?
 - Where does the data come from? How is this data collected? Who collects these data?
 - Are there any differences on the processes involved in updating a data when the type of information being updated is different?
- Has there been any pitfalls/inconvenience when it comes to updating the information of the beneficiaries? What are the reasons for these inconvenience? What steps are you taking to solve these problems?
 - Has there been an issue regarding the accuracy of the information that you update? How do you make sure that the data is accurate?
 - If there is a case of invalid updates (e.g., issue with requirements), what do you usually do?
- Do you have any suggestions to improve the process of updating the information of the beneficiaries?

COMPLIANCE VERIFICATION

- What are your roles in compliance verification? What are we watching out for?
- Do you currently face challenges when it comes to monitoring at capturing the compliance of the beneficiaries? Where do you usually find difficulties? How do you think can these be made simpler and easier?
- **CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM BDO'S POV:** How are the beneficiaries in terms of complying on the terms and conditions of 4P's? How are these beneficiaries doing compared to other areas? Probe for health, education, and FDS
 - What are the conditions where beneficiaries find it easiest to comply? How so?
 - What are the conditions that these beneficiaries find hardest to comply? What are the sources of these difficulties?



- If not mentioned, probe for supply-side constraints:

EDUCATION

- Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc?
- Quality of teaching?
- In your opinion, how can we make and help beneficiaries in their compliance?

HEALTH

- Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc?
- How are the people in hospitals and health centers? Any feedbacks from the beneficiaries?
- In your opinion, how can we make and help beneficiaries in their compliance?

- **FDS:** what can you say about the FDS?

- What are the things that you like or dislike about the FDS? Why did you say so?
- Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS
- In your opinion, is FDS helpful to the beneficiaries? In what ways?
- Suggestions on how to improve FDS?

- **ON OTHER REQUIREMENTS/ CONDITIONS:** Other than the aforementioned, are there other requirements or conditions that you know or heard of that should be followed by the beneficiaries to stay in the program?


- What are these?
- Who implements these conditions?
- In your opinion, do they make the process better or worse? In what ways?

- When it comes to implementing 4Ps in your province/municipality, what aspects of the program do you need help most? Why?
- Do you have any suggestions in order to improve the implementation of 4P's in your province/municipality?

IMPACT OF 4Ps TO THE COMMUNITY

- Overall, have you notice any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned:
 - People in the community? I.e., daily living, attitude, mindset about health and education?
 - Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education

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	<ul style="list-style-type: none"> Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc. Roles of 4Ps in these changes? In what ways? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> Do you use any documents or forms in your work? Which of those are the important ones? What are the use of each? Can we see these documents/forms in order for us to understand deeper the process involved. <ul style="list-style-type: none"> When are these documents used? Who fills these out? Who checks these documents? (<i>Before it reaches the officer and where it goes next</i>) Are there any problems/challenges in answering and processing these documents? What are the reasons? What can we do to make the use of these documents better and make your job easier? Suggestions to make 4Ps better? If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?
III. WRAP-UP (3 mins)	<ul style="list-style-type: none"> Anything else you want to suggest to make 4Ps better for employees like you who are part of the program? Thank respondent and end

<p>Project EUDORA – RPMO IDs – CITY LINK Discussion Guide</p> <p>page 1 of 5</p>	<p>Project EUDORA – RPMO IDs – CITY LINK Discussion Guide</p> <p>page 2 of 5</p>
<p>I. INTRODUCTION (7 mins)</p> <p>Objective:</p> <p><i>To carefully explain the nature and objectives of the research</i></p> <p><i>Assure on the confidentiality of the discussion and their personal information</i></p> <p><i>Establish rapport with respondent to encourage open sharing of opinions</i></p> <ul style="list-style-type: none"> Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. To know you better, please tell me something about yourself: <ul style="list-style-type: none"> Name Age Position/Designation in DSWD/4Ps 	<p>to resolve in the process in relation to beneficiary compliance</p> <ul style="list-style-type: none"> SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/operations manual, taking note of the aspects that he/she highlights about the job <ul style="list-style-type: none"> LIKES: What are the things that you like about your job? DISLIKES: What about the things that you do not like? DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> Daily routine? Other responsibilities that are still part of your job but you seldom do? What are these? Does your work load change? Are there instances that you are busier than usual? When are these? Why? Who do you usually work with? How are you connected to them? Identify dependencies of City Link, their perceived roles in the 4Ps process, and their level of interaction with each other How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? How so? CHALLENGES: Challenges you usually experience as City Link? IMPORTANCE OF ROLE/POSITION: How important is City Link? <ul style="list-style-type: none"> What would happen if City Links are removed from the process? How would it affect the process? Do you have anyone to replace you if you are sick or want to go on vacation? Who is it? ON TRAINING RECEIVED: Did you have trainings when you started serving as City Link? <ul style="list-style-type: none"> How was it? Was it helpful? In what ways? Are there things that you think were missed out during the training that you felt should have been included? Who do you consult about these? Have you any suggestions to improve the training given to City Link like you? Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> Causes of these problems? Effects on the process? People mostly affected? What should be done to address these problems? Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> What do you like doing the most? Why? What part is the most challenging? Why? <p><i>Check on their roles in the following:</i></p>
<p>II. INFORMATION ON CITY LINK'S DUTIES AND RESPONSIBILITIES (60 mins)</p> <p>Objective:</p> <p><i>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p> <p><i>To uncover possible best practices that can be leveraged, and tensions/ gaps</i></p> <p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe the area?</p> <ul style="list-style-type: none"> What is the main source of income of the people living here? Have you noticed any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> When did the 4Ps start here in your municipality? LENGTH OF SERVICE: How long have you been serving as City Link? How did you start as City Link? HOW FEEL ABOUT JOB: How is your work? How do you feel about that? 	<p>REGISTRATION</p> <ul style="list-style-type: none"> How do you choose your beneficiaries in your area? Processes involved? Any differences in the process in other areas that you know or heard of? In what ways? Reasons? Do you know any families that should have been included in 4Ps but were not? What do you think are the reasons behind this? Suggestions on how



to improve the process of choosing beneficiaries and their registration to the program?

FORMING/ ORGANIZING PARENT GROUPS IN NEIGHBORHOODS:

- How is it organizing parent groups in the area?
- How would you describe your relationship/connection with the beneficiaries/members of 4Ps?
- Are there any challenges that you face during organization of parent groups? When are they easiest/hardest to organize?
- **ON PARENT LEADERS:** How are parent leaders chosen? Process/bases in choosing?
 - Roles in 4Ps?
 - Are there trainings given to parent leaders? Types of training? In your opinion, is it enough or can it still be improved?

COMPLIANCE VERIFICATION

- Roles in compliance verification? What do we look for?
- Do we have any connection with the teachers and health workers that are part of the compliance verification?
- Challenges in monitoring and capturing compliance for the beneficiaries? What part? What can we do to make it easier and better?
- **CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM CITY LINK'S POV:** How efficient are the beneficiaries in your area in terms of complying in the 4Ps conditions? How was it compared to other areas? Probe for health, education, and FDS

- Conditions where beneficiaries find it easiest to comply? How so?
- Conditions hardest to comply? Sources of these difficulties?
- If not mentioned, probe for supply-side constraints:

EDUCATION

- Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc?
- Quality of teaching?
- In your opinion, how can we make and help beneficiaries in their compliance?

HEALTH

- Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc?
- How are the people in hospitals and health centers? Any feedbacks from the beneficiaries?
- In your opinion, how can we make and help beneficiaries in their compliance?

- **FDS:** What can you say about FDS?
 - Likes/dislikes about FDS? Why?
 - Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS



- In your opinion, is FDS helpful to the beneficiaries? In what ways?
- Suggestions on how to improve FDS?
- **ON OTHER REQUIREMENTS/ CONDITIONS:** Other than the aforementioned, are there other requirements or conditions that you know or heard of that should be followed by the beneficiaries to stay in the program?
 - What are these?
 - Who implements these conditions?
 - In your opinion, do they make the process better or worse? In what ways?

PAYMENTS

- Role in processing of grants?
- Process in giving grants to the beneficiaries? Check different modes by which beneficiaries receive their grants
- When are these grants given?
- Any problems or delays in giving grants to the beneficiaries?
 - Causes of these delays?
 - Do these delays happen in your area? Causes?
- Has there been an instance where the beneficiary has to pay or give contributions just to get a grant?
 - What happened? Was it solved? How?
- Suggestions on how to improve the process of giving grants?

BENEFICIARY DATA UPDATE:

- When do you update member's information?
- How would you know if an information needs to be updated?
- Process?
- Any problem during updating of information? Causes of these problems? Solution?
- Suggestions on how to improve the process of updating?

GRIEVANCE MONITORING

- Role in grievance monitoring?
- Usual issues and complaints?
 - Volume of complaints per month?
 - Causes?
 - Solution?
- Who do we go to for these issues/complaints? Check relationship/dynamics with grievance officer
 - Problems/issues that you can solve as City Link?
 - Problems that you usually consult/transfer to other officials? To whom?
- As a whole, how is the grievance resolution system of 4Ps in your area? Suggestions on how to make the process more effective in dealing with issues/concerns?

- At what part of the implementation of the 4Ps in your area you need help the most? Why?



- Suggestions on how to improve the 4Ps implementation in your area?

IMPACT OF 4Ps TO THE COMMUNITY

- Overall, have you noticed any changes in your municipality after the 4Ps' implementation? For the better? Worse? *Get spontaneous answers, then probe for the following if not mentioned:*
 - People in the community? I.e., daily living, attitude, mindset about health and education?
 - Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education
 - Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc.
- Roles of 4Ps in these changes? In what ways?

SHOW AND TELL

- Documents or forms you use in your work? What are the important documents? Their uses?
- Can we see the process to understand it better?
 - When do you use these documents?
 - Who fills these out?
 - Who checks these documents? *(Before it reaches the officer and where it goes next)*
- Are there any problems/challenges in answering these documents? Reasons?
- What can we do to make the use of these documents better to make your job easier?
- Suggestions to make 4Ps better?
- If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?


III. WRAP-UP (3 mins)


- Anything else you want to suggest to make 4Ps better for employees like you who are part of the program?
- Thank respondent and end

I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p>To carefully explain the nature and objectives of the research</p> <p>Assure on the confidentiality of the discussion and their personal information</p> <p>Establish rapport with respondent to encourage open sharing of opinions</p>	<ul style="list-style-type: none"> Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. To know you better, please tell me something about yourself: <ul style="list-style-type: none"> Name Age Position/Designation in DSWD/4Ps

II. INFORMATION ON SWA'S DUTIES AND RESPONSIBILITIES (60 mins)	
<p>Objective:</p> <p>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</p> <p>To determine their knowledge and understanding of the limits and responsibilities of their position</p> <p>To uncover possible best practices that can be leveraged, and tensions/ gaps</p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe the area?</p> <ul style="list-style-type: none"> What is the main source of income of the people living here? Have you noticed any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> When did the 4Ps start here in your province? LENGTH OF SERVICE: How long have you been serving as SWA? How did you start as SWA? HOW FEEL ABOUT JOB: How is your work? How do you feel about that?


<p>to resolve in the process in relation to beneficiary compliance</p>	<ul style="list-style-type: none"> SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/operations manual, taking note of the aspects that he/she highlights about the job <ul style="list-style-type: none"> LIKES: What are the things that you like about your job? DISLIKES: What about the things that you do not like? DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> Daily routine? Other responsibilities that are still part of your job but you seldom do? What are these? Does your work load change? Are there instances that you are busier than usual? When are these? Why? Who do you usually work with? How are you connected to them? <i>Identify dependencies of SWA, their perceived roles in the 4Ps process, and their level of interaction with each other</i> How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? How so? CHALLENGES: Challenges you usually experience as SWA? IMPORTANCE OF ROLE/POSITION: How important is SWA? <ul style="list-style-type: none"> What would happen if SWA are removed from the process? How would it affect the process? Do you have anyone to replace you if you are sick or want to go on vacation? Who is it? ON TRAINING RECEIVED: Did you have trainings when you started serving as SWA? <ul style="list-style-type: none"> How was it? Was it helpful? In what ways? Are there things that you think were missed out during the training that you felt should have been included? Who do you consult about these? Have you any suggestions to improve the training given to SWA like you? Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> Causes of these problems? Effects on the process? People mostly affected? What should be done to address these problems? Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> What do you like doing the most? Why? What part is the most challenging? Why? How do you make sure that the 4Ps implementation in your region/province is efficient? Who help you to make this possible? <p><i>Check on their roles in the following:</i></p>
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<div>Project EUDORA – RPMO IDs – SOCIAL WELFARE ASSISTANT Discussion Guide</div> <div>page 3 of 5</div>	<div>  </div> <div> <p>COMPLIANCE VERIFICATION</p> <ul style="list-style-type: none"> Roles in compliance verification? What do we look for? Check role in facilitating distribution and retrieval of compliance verification forms <ul style="list-style-type: none"> When do you usually do this? Who do you usually work with? Check dynamics with school teacher/ official and health workers What do you do once CVS forms are distributed/collected? Check whether they prepare a summary, take note of issues and concerns as part of their role as SWA Challenges/difficulties in processing the compliance verification forms? Solutions to these challenges/difficulties? Problems encountered/heard of in filling-up forms? Causes of these problems? Suggestions on how to improve the process of monitoring and recording of compliance of the beneficiaries of 4Ps? <p>Challenges in monitoring and capturing compliance for the beneficiaries? What part? What can we do to make it easier and better?</p> <p>CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM SWA'S POV: How efficient are the beneficiaries in your area in terms of complying in the 4Ps conditions? How was it compared to other areas? Probe for health, education, and FDS</p> <ul style="list-style-type: none"> Conditions where beneficiaries find it easiest to comply? How so? Conditions hardest to comply? Sources of these difficulties? If not mentioned, probe for supply-side constraints: <p>EDUCATION</p> <ul style="list-style-type: none"> Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc? Quality of teaching? In your opinion, how can we make and help beneficiaries in their compliance? <p>HEALTH</p> <ul style="list-style-type: none"> Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc? How are the people in hospitals and health centers? Any feedbacks from the beneficiaries? In your opinion, how can we make and help beneficiaries in their compliance? FDS: What can you say about FDS? <ul style="list-style-type: none"> Likes/dislikes about FDS? Why? Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS In your opinion, is FDS helpful to the beneficiaries? In what ways? Suggestions on how to improve FDS? ON OTHER REQUIREMENTS/ CONDITIONS: Other than the aforementioned, are there other requirements or conditions that </div>
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	<ul style="list-style-type: none"> ▪ Aside from the CV officer and municipality links, are there other officials you usually work with? Who? What is your relation to them? What do you do for them? ▪ Which part of the implementation of 4Ps in your province/municipality, you need help the most? Why? ▪ Suggestions on how to improve the implementation of 4Ps in your province/municipality? <p>IMPACT OF 4Ps TO THE COMMUNITY</p> <ul style="list-style-type: none"> ▪ Overall, have you noticed any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned: <ul style="list-style-type: none"> ○ People in the community? I.e., daily living, attitude, mindset about health and education? ○ Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education ○ Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc. ▪ Roles of 4Ps in these changes? In what ways? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> ▪ Documents or forms you use in your work? What are the important documents? Their uses? ▪ Can we see the process to understand it better? <ul style="list-style-type: none"> ○ When do you use these documents? ○ Who fills these out? ○ Who checks these documents? <i>(Before it reaches the officer and where it goes next)</i> ▪ Are there any problems/challenges in answering these documents? Reasons? ▪ What can we do to make the use of these documents better to make your job easier? ▪ Suggestions to make 4Ps better? ▪ If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?
III. WRAP-UP (3 mins)	<ul style="list-style-type: none"> ▪ Anything else you want to suggest to make 4Ps better for employees like you who are part of the program? ▪ Thank respondent and end



I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p><i>To carefully explain the nature and objectives of the research</i></p> <p><i>Assure on the confidentiality of the discussion and their personal information</i></p> <p><i>Establish rapport with respondent to encourage open sharing of opinions</i></p>	<ul style="list-style-type: none"> • Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. • Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. • There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. • Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. • To know you better, please tell me something about yourself: <ul style="list-style-type: none"> – Name – Age – Position/Designation in DSWD/4Ps

II. INFORMATION ON REGIONAL PROGRAM COORDINATOR'S DUTIES AND RESPONSIBILITIES (40 mins)	
<p>Objective:</p> <p><i>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p> <p><i>To uncover possible best practices that can be leveraged,</i></p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe the area?</p> <ul style="list-style-type: none"> • What is the main source of income of the people living here? • Have you noticed any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> • UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> ◦ When did the 4Ps start here in your province? • LENGTH OF SERVICE: How long have you been serving as REGIONAL PROGRAM COORDINATOR? How did you start as REGIONAL PROGRAM COORDINATOR? • HOW FEEL ABOUT JOB: How is your work? How do you feel about that?



<p><i>and tensions/ gaps to resolve in the process in relation to beneficiary compliance</i></p>	<ul style="list-style-type: none"> • SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/ operations manual, taking note of the aspects that he/ she highlights about the job <ul style="list-style-type: none"> ◦ LIKES: What are the things that you like about your job? ◦ DISLIKES: What about the things that you do not like? • DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> ◦ Daily routine? ◦ Other responsibilities that are still part of your job but you seldom do? What are these? ◦ Does your work load change? Are there instances that you are busier than usual? When are these? Why? ◦ Who do you usually work with? How are you connected to them? <i>Identify dependencies of REGIONAL PROGRAM COORDINATOR, their perceived roles in the 4Ps process, and their level of interaction with each other</i> ◦ How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? How so? • CHALLENGES: Challenges you usually experience as REGIONAL PROGRAM COORDINATOR? • IMPORTANCE OF ROLE/POSITION: How important is REGIONAL PROGRAM COORDINATOR? <ul style="list-style-type: none"> ◦ What would happen if REGIONAL PROGRAM COORDINATOR are removed from the process? How would it affect the process? ◦ Do you have anyone to replace you if you are sick or want to go on vacation? Who is it? • ON TRAINING RECEIVED: Did you have trainings when you started serving as REGIONAL PROGRAM COORDINATOR? <ul style="list-style-type: none"> ◦ How was it? ◦ Was it helpful? In what ways? ◦ Are there things that you think were missed out during the training that you felt should have been included? Who do you consult about these? ◦ Have you any suggestions to improve the training given to REGIONAL PROGRAM COORDINATOR like you? • Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> ◦ Causes of these problems? ◦ Effects on the process? People mostly affected? ◦ What should be done to address these problems? • Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> ◦ What do you like doing the most? Why? ◦ What part is the most challenging? Why? ◦ Differences between regional and provincial level? Which one you do most often? ◦ How do you make sure that the 4Ps implementation in your region/province is efficient? Who help you to make this possible?
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Check on their roles in the following:

REGISTRATION

- How do you choose your beneficiaries in your area? Processes involved?
- Any differences in the process in other areas that you know or heard of? In what ways? Reasons?
- Do you know any families that should have been included in 4Ps but were not? What do you think are the reasons behind this? Suggestions on how to improve the process of choosing beneficiaries and their registration to the program?

COMPLIANCE VERIFICATION

- Roles in compliance verification? What do we look for?
- Challenges in monitoring and capturing compliance for the beneficiaries? What part? What can we do to make it easier and better?

CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM REGIONAL PROGRAM COORDINATOR'S POV: How efficient are the beneficiaries in your area in terms of complying in the 4Ps conditions? How was it compared to other areas? Probe for health, education, and FDS

- Conditions where beneficiaries find it easiest to comply? How so?
- Conditions hardest to comply? Sources of these difficulties?
- If not mentioned, probe for supply-side constraints:

EDUCATION

- Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc?
- Quality of teaching?
- In your opinion, how can we make and help beneficiaries in their compliance?

HEALTH

- Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc?
- How are the people in hospitals and health centers? Any feedbacks from the beneficiaries?
- In your opinion, how can we make and help beneficiaries in their compliance?

FDS: What can you say about FDS?

- Likes/dislikes about FDS? Why?
- Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS
- In your opinion, is FDS helpful to the beneficiaries? In what ways?
- Suggestions on how to improve FDS?

ON OTHER REQUIREMENTS/ CONDITIONS: Other than the aforementioned, are there other requirements or conditions that

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you know or heard of that should be followed by the beneficiaries to stay in the program?

- What are these?
- Who implements these conditions?
- In your opinion, do they make the process better or worse? In what ways?

PAYMENTS

- Role in processing of grants?
- Process in giving grants to the beneficiaries? Check different modes by which beneficiaries receive their grants
- When are these grants given?
- Any problems or delays in giving grants to the beneficiaries?
 - Causes of these delays?
 - Do these delays happen in your area? Causes?
- Has there been an instance where the beneficiary has to pay or give contributions just to get a grant?
 - What happened? Was it solved? How?
- Suggestions on how to improve the process of giving grants?

GRIEVANCE MONITORING


- Role in grievance monitoring?
- Usual issues and complaints?
 - Volume of complaints per month?
 - Causes?
 - Solution?
- Who do we go to for these issues/complaints? Check relationship/dynamics with grievance officer
 - Problems/issues that you can solve as REGIONAL PROGRAM COORDINATOR?
 - Problems that you usually consult/transfer to other officials? To whom?
- As a whole, how is the grievance resolution system of 4Ps in your area? Suggestions on how to make the process more effective in dealing with issues/concerns?

- Overall, how satisfied are you in the implementation of 4Ps in your region? If you are to grade it from 1-10, 10 being the highest, what grade would you give? Why?
- What are you most proud of about RPMO?
- What aspect of RPMO, you think, should be improved? Why?
- What part of the 4Ps implementation, you need help the most? Why?
- Suggestions on how to improve the implementation of 4Ps in your region/province?

IMPACT OF 4Ps TO THE COMMUNITY

- Overall, have you noticed any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned:
 - People in the community? I.e., daily living, attitude, mindset about health and education?

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	<ul style="list-style-type: none"> o Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education o Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc. ▪ Roles of 4Ps in these changes? In what ways? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> ▪ Documents or forms you use in your work? What are the important documents? Their uses? ▪ Can we see the process to understand it better? <ul style="list-style-type: none"> o When do you use these documents? o Who fills these out? o Who checks these documents? <i>(Before it reaches the officer and where it goes next)</i> ▪ Are there any problems/challenges in answering these documents? Reasons? ▪ What can we do to make the use of these documents better to make your job easier? ▪ Suggestions to make 4Ps better? ▪ If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?
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III. WRAP-UP (3 mins)	
	<ul style="list-style-type: none"> ▪ Anything else you want to suggest to make 4Ps better for employees like you who are part of the program? ▪ Thank respondent and end



I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p>To carefully explain the nature and objectives of the research</p> <p>Assure on the confidentiality of the discussion and their personal information</p> <p>Establish rapport with respondent to encourage open sharing of opinions</p>	<ul style="list-style-type: none"> Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not an NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, the people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. To know you better, please tell me something about yourself: <ul style="list-style-type: none"> Name Age Position/Designation in DSWD/4Ps

II. INFORMATION ON PROVINCIAL LINK'S DUTIES AND RESPONSIBILITIES (60 mins)	
<p>Objective:</p> <p>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</p> <p>To determine their knowledge and understanding of the limits and responsibilities of their position</p> <p>To uncover possible best practices that can be leveraged,</p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe the area?</p> <ul style="list-style-type: none"> What is the main source of income of the people living here? Have you notice any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> When did the 4Ps start here in your municipality? LENGTH OF SERVICE: How long have you been serving as a Provincial Link? How did you start as a Provincial Link? HOW FEEL ABOUT JOB: How is your work? How do you feel about your work?




<p>and tensions/ gaps to resolve in the process in relation to beneficiary compliance</p>	<ul style="list-style-type: none"> SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/ operations manual, taking note of the aspects that he/ she highlights about the job <ul style="list-style-type: none"> LIKES: What are the things that you like about your job? DISLIKES: What about the things that you do not like? DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> What are your daily roles and responsibilities? Aside from the above-mentioned, do you have other responsibilities that are still part of your job but you seldom do? What are these? Does your work load change? Are there instances that you are busier than usual? When do these happen? Why? Who do you usually work with? How are you connected with them? Identify dependencies of a Provincial Link, their perceived roles in the 4Ps process, and their level of interaction with each other How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? Why do you say so? CHALLENGES: What are the challenges that you usually experience as a Provincial Link? IMPORTANCE OF ROLE/POSITION: How important is a Provincial Link? <ul style="list-style-type: none"> What would happen if the Provincial Link is removed from the process? How would it affect the process? Do you have anyone to replace you if you need to go on a vacation or if you got sick? Who is he/she? ON TRAINING RECEIVED: When you started serving as a Provincial Link, did you receive any trainings? <ul style="list-style-type: none"> How was/were this/these trainings? Was it helpful to you in fulfilling your work as a Provincial Link? In what way? Are there things that you think were missed out during the training that you felt important to know in your work? Who do you consult about these? Do you have any suggestions to improve the training given to a Provincial Link like you? Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> What are the causes of these problems? What are the effects of these in the process? Who are the people usually affected? What do you think should be done to address these problems? Out of all your responsibilities, what is your task most needed to be given attention or what task is usually consuming most of your time? <ul style="list-style-type: none"> What do you like doing the most? Why? What part is the most challenging? Why? How do you ensure of the good implementation of 4Ps in your province/municipality? Who are the people who help you with this?
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	<p>Check on their roles in the following:</p> <p>REGISTRATION</p> <ul style="list-style-type: none"> How are the beneficiaries chosen in your area? What are the processes involved? Based from what you know and heard, are these processes different with that of other areas? In what way? What do you think are the reasons for these differences? Do you know any families that you think should have been included in 4Ps but were not chosen? What do you think are the reasons why they are not chosen as members? Do you have any suggestions on how to improve the process of choosing beneficiaries and their process of registering to the program? <p>COMPLIANCE VERIFICATION</p> <ul style="list-style-type: none"> Do you have a role in the compliance verification? In what way? Do you have collaboration with the teachers and health workers who are part of compliance verification? Do you experience challenges in monitoring and capturing compliance of the beneficiaries? What aspect do you usually have problems? How can this be made easier and better? <p>CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM MONITORING & EVALUATION OFFICER'S POV: How efficient are the beneficiaries in your area in terms of complying with the 4Ps conditions? How was it compared to other nearby areas? Probe for health, education, and FDS</p> <ul style="list-style-type: none"> In what conditions do the beneficiaries find it easiest to comply? Why do you say so? In what conditions do they find hardest to comply? What are the sources of these difficulties? If not mentioned, probe for supply-side constraints: <p>EDUCATION</p> <ul style="list-style-type: none"> What can you say about the facilities for the education of the children? Are there enough schools, rooms, teachers, books, etc? What can you say about the quality of teaching? In your opinion, how can we make and help the beneficiaries comply more with this condition? <p>HEALTH</p> <ul style="list-style-type: none"> What can you say about the facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc? What can you say about the people in the hospitals and health centers? Are there any feedback about this from the beneficiaries? In your opinion, how can we make and help the beneficiaries comply more with this condition?


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	<ul style="list-style-type: none"> FDS: What can you say about FDS? <ul style="list-style-type: none"> What are the things that you like/dislike about FDS? Why do you say so? What are the reactions of the beneficiaries in your area about FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS In your opinion, is FDS helpful to the beneficiaries? In what way? What are your suggestions on how to improve and make the FDS more beneficial? ON OTHER REQUIREMENTS/ CONDITIONS: Other than the aforementioned, are there other requirements or conditions that you know or heard that should be followed by the beneficiaries to stay as members of the 4Ps? <ul style="list-style-type: none"> If yes, what are these? Who implements these conditions? In your opinion, do these conditions make the process better or worse? In what ways? <p>PAYMENTS</p> <ul style="list-style-type: none"> Do you have a role in the process of giving grants? How is the process of giving grants to the beneficiaries? How is it being given to them? Check different modes by which beneficiaries receive their grants When are these grants given? Do you experience any problem or delay in giving grants to the beneficiaries? <ul style="list-style-type: none"> If yes, what are the causes of these delays? Do these delays happen in your municipality? What is the reason? Has there been an instance where the beneficiary has to pay or give contributions just to get a grant? <ul style="list-style-type: none"> What happened? Was it resolved? How? Do you have suggestions on how to improve the process of giving grants? <p>MONITORING AND QUALITY ASSURANCE OF SYSTEMS/ FIELD OPERATIONS</p> <ul style="list-style-type: none"> How do you ensure that field operations are properly executed every day? What aspects do you usually check in the field operations? Why? What are the usual problems encountered in this aspects? Do you have any suggestions to improve the system of monitoring/ field operations? <p>ENTRY, CONSOLIDATION AND PROCESSING OF DATA</p> <ul style="list-style-type: none"> In terms of handling the data about 4Ps, what is now your role? What is/are the type/s of these data?

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	<ul style="list-style-type: none"> Do you receive any help from anyone in handling these data? Who are they? Who are you collaborating with regarding these data? Who uses these data? In what way? What aspect of handling and processing these data do you find easy/difficult to do? What do you find most challenging in handling and processing these data? What difficulties do you usual encounter with regards to the data? How do you solve this type of problems? Do you have any suggestions to improve the system of handling and processing 4Ps data? <p>BENEFICIARY DATA UPDATE:</p> <ul style="list-style-type: none"> Do you have any role in updating the information of the members? How often do you update their information? What processes are involved? Do you encounter any problem in updating the information of the beneficiaries? What are the causes of these problems? How do you solve these problems? Do you have any suggestions on how to improve the process of updating the information of the beneficiaries? <p>ENSURING FORMULATION AND MONITORING OF IMPLEMENTATION OF INTERVENTIONS PLANS</p> <ul style="list-style-type: none"> What are the types of intervention plans that you implement for the members of 4Ps? How do you implement these plans? <p>CONVERGENCE AND ADVOCACY FOR THE SUPPLY SIDE REQUIREMENTS</p> <ul style="list-style-type: none"> How do you monitor and assure that the municipalities have the capacity to support the needs of the 4Ps beneficiaries in terms of education and health? What are your basis/measurements? What are your actions whenever supplies/infrastructures are insufficient for the 4Ps? <p>GRIEVANCE MONITORING</p> <ul style="list-style-type: none"> Do you have a role whenever there are grievances/complaints that 4Ps members are wanting to voice out? What are their usual issues and complaints? <ul style="list-style-type: none"> In an average, how many complaints do you receive every month? What is the root cause? How do you solve this? Who do we talk to for these issues/complaints? <i>Check relationship/dynamics with grievance officer</i> <ul style="list-style-type: none"> Are there problems that you can address and solve as a Provincial Link?
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	<ul style="list-style-type: none"> What are the types of problems that you usually consult/transfer to higher officials? To whom? As a whole, how is the grievance resolution system of 4Ps in your area? What are your suggestions on how to make the process more effective in dealing with issues/concerns of the beneficiaries? <ul style="list-style-type: none"> In the implementation of 4Ps in your province/municipality, in what area are you in need of great help? Why do you say so? Do you have suggestions to make the implementation of 4Ps in your province/municipality better? <p>IMPACT OF 4Ps TO THE COMMUNITY</p> <ul style="list-style-type: none"> Overall, have you noticed any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned: <ul style="list-style-type: none"> People in the community? I.e., daily living, attitude, mindset about health and education? Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc. In the changes that you have mentioned, does 4Ps have a role in this? In what way? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> Do you use any documents or forms in your work? What are the important documents? What are the uses these? Can we see these documents to better understand the process? <ul style="list-style-type: none"> When do you use these documents? Who fills these out? Who checks/approves these documents? <i>(Before it reaches the officer and where it goes next)</i> Are there any problems/challenges in answering/processing these documents? What are the reasons? What can we do to make the use of these documents better and make your job easier? Do you have suggestions to make 4Ps better? If you are given a chance to make one change in the process, what is it and why? How would it help in making the process of 4Ps better?
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III. WRAP-UP (3 mins)	
	<ul style="list-style-type: none"> Do you have anything else to suggest to make 4Ps better for employees like you who are part of the implementation of the program? Thank respondent and end

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I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p><i>To carefully explain the nature and objectives of the research</i></p> <p><i>Assure on the confidentiality of the discussion and their personal information</i></p> <p><i>Establish rapport with respondent to encourage open sharing of opinions</i></p>	<ul style="list-style-type: none"> • Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not an NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. • Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, the people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. • There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. • Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. • To know you better, please tell me something about yourself: <ul style="list-style-type: none"> - Name - Age - Position/Designation in DSWD/4Ps
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II. INFORMATION ON MONITORING & EVALUATION OFFICER'S DUTIES AND RESPONSIBILITIES (60 mins)	
<p>Objective:</p> <p><i>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe this area?</p> <ul style="list-style-type: none"> • What is the main source of income of the people living here? • Have you notice any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> • UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> ◦ When did the 4Ps start here in your municipality? • LENGTH OF SERVICE: How long have you been serving as a MONITORING & EVALUATION OFFICER? How did you start as a MONITORING & EVALUATION OFFICER?

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<p><i>To uncover possible best practices that can be leveraged, and tensions/ gaps to resolve in the process in relation to beneficiary compliance</i></p>	<ul style="list-style-type: none"> • HOW DO YOU FEEL ABOUT THE JOB: How is your work? How do you feel about your work? • SCOPE OF WORK: What does your job entail? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/operations manual, taking note of the aspects that he/she highlights about the job <ul style="list-style-type: none"> ◦ LIKES: What are the things that you like about your job? ◦ DISLIKES: What about the things that you do not like? • DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> ◦ What are your daily roles and responsibilities? ◦ Aside from the above-mentioned, do you have other responsibilities that are still part of your job but you seldom do? What are these? ◦ Does your work load change? Are there instances that you are busier than usual? When do these happen? Why? ◦ Who do you usually work with? How are you connected with them? Identify dependencies of a MONITORING & EVALUATION OFFICER, their perceived roles in the 4Ps process, and their level of interaction with each other ◦ How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? Why do you say so? • CHALLENGES: What are the challenges that you usually experience as a MONITORING & EVALUATION OFFICER? • IMPORTANCE OF ROLE/POSITION: How important is a MONITORING & EVALUATION OFFICER? <ul style="list-style-type: none"> ◦ What would happen if the MONITORING & EVALUATION OFFICER is removed from the process? How would it affect the process? ◦ Do you have anyone to replace you if you need to go on a vacation or if you got sick? Who is he/she? • ON TRAINING RECEIVED: When you started serving as a MONITORING & EVALUATION OFFICER, did you receive any trainings? <ul style="list-style-type: none"> ◦ How was/were this/these trainings? ◦ Was it helpful to you in fulfilling your work as a MONITORING & EVALUATION OFFICER? In what way? ◦ Are there things that you think were missed out during the training that you felt important to know in your work? Who do you consult about these? ◦ Do you have any suggestions to improve the training given to a MONITORING & EVALUATION OFFICER like you? • Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> ◦ What are the causes of these problems? ◦ What are the effects of these in the process? Who are the people usually affected? ◦ What do you think should be done to address these problems?
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- Out of all your responsibilities, what is your task most needed to be given attention or what task is usually consuming most of your time?
 - What do you like doing the most? Why?
 - What part is the most challenging? Why?
 - How do you ensure of the good implementation of 4Ps in your province/municipality? Who are the people who help you with this?
Check on their roles in the following:

REGISTRATION

- Do you have a role as a Monitoring and Evaluation Officer in choosing the beneficiaries? In what way?
- How are the beneficiaries chosen in your area? What are the processes involved?
- Based from what you know and heard, are these processes different with that of other areas? In what way? What do you think are the reasons for these differences?
- Do you know any families that you think should have been included in 4Ps but were not chosen? What do you think are the reasons why they are not chosen as members? Do you have any suggestions on how to improve the process of choosing beneficiaries and their process of registering to the program?

COMPLIANCE VERIFICATION

- Do you have a role as a Monitoring and Evaluation Officer in the compliance verification? In what way?
- Do you experience challenges in monitoring and capturing compliance of the beneficiaries? What aspect do you usually have problems? How can this be made easier and better?

CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM MONITORING & EVALUATION OFFICER'S POV: How efficient are the beneficiaries in your area in terms of complying with the 4Ps conditions? How was it compared to other nearby areas? *Probe for health, education, and FDS*

- In what conditions do the beneficiaries find it easiest to comply? Why do you say so?
- In what conditions do they find hardest to comply? What are the sources of these difficulties?
- If not mentioned, probe for supply-side constraints:

EDUCATION

- What can you say about the facilities for the education of the children? Are there enough schools, rooms, teachers, books, etc?
- What can you say about the quality of teaching?
- In your opinion, how can we make and help the beneficiaries comply more with this condition?

HEALTH

- What can you say about the facilities that has to do with health? Are there enough hospitals, health centers, doctors/nurses, medical drugs, etc?

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- What can you say about the people in the hospitals and health centers? Are there any feedback about this from the beneficiaries?
- In your opinion, how can we make and help the beneficiaries comply more with this condition?

FDS: What can you say about FDS?

- What are the things that you like/dislike about FDS? Why do you say so?
- What are the reactions of the beneficiaries in your area about FDS? How is their attendance? What do they like/dislike about FDS? *Probe for likes and dislikes, challenges in complying with FDS*
- In your opinion, is FDS helpful to the beneficiaries? In what way?
- What are your suggestions on how to improve and make the FDS more beneficial?

ON OTHER REQUIREMENTS/ CONDITIONS: Other than the aforementioned, are there other requirements or conditions that you know or heard that should be followed by the beneficiaries to stay as members of the 4Ps?

- If yes, what are these?
- Who implements these conditions?
- In your opinion, do these conditions make the process better or worse? In what ways?

PROGRAM MONITORING AND EVALUATION + REPORT PREPARATION

- What is the process of monitoring and evaluating the implementation of 4Ps in your assigned area?
 - Are there people who report to you? Who are they?
 - Do you also report to someone superior to you? Who is she/he?
 - What are the things that you usually check in monitoring and evaluating the program?
 - Is there any difference in the process or style that you monitor and evaluate as compared to those of other areas or region? In what way? What is the reason?
 - Check whether they conduct field monitoring, spot checks, impact evaluation, organize research forums, and other research activities
- Do you write reports about the information that you gathered from monitoring and evaluating 4Ps? How often? What are the information included in your reports? Who uses these reports? *Check for the following:*
 - Quarterly, Semestral, and Annual Regional Accomplishment Reports
 - Regional Annual Thrusts and Priorities based on National Thrusts and Priorities
 - Regional Work and Financial Plan

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	<ul style="list-style-type: none"> How do you analyze the data that you gathered? Do you use a tool to make your analysis easier? Do you see any trend from the report that you have written regarding the compliance of the beneficiaries in your area? What are the usual issues or problems in their compliance? In what places/barangays do problems mostly occur? Are there any difficult or challenging part in writing reports and analysis? In what part do you have difficulties with? Why do you say so? What do you suggest to make this easier? <ul style="list-style-type: none"> In the implementation of 4Ps in your province/municipality, in what area are you in need of great help? Why do you say so? Do you have suggestions to make the implementation of 4Ps in your province/municipality better? <p>IMPACT OF 4Ps TO THE COMMUNITY</p> <ul style="list-style-type: none"> Overall, have you noticed any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned: <ul style="list-style-type: none"> People in the community? I.e., daily living, attitude, mindset about health and education? Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc. In the changes that you have mentioned, does 4Ps have a role in this? In what way? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> Do you use any documents or forms in your work? What are the important documents? What are uses of these? Can we see these documents to better understand the process? <ul style="list-style-type: none"> When do you use these documents? Who fills these out? Who checks/approves these documents? <i>(Before it reaches the officer and where it goes next)</i> Are there any problems/challenges in answering/processing these documents? What are the reasons? What can we do to make the use of these documents better and make your job easier? Do you have suggestions to make 4Ps better? If you are given a chance to make one change in the process, what is it and why? How would it help in making the process of 4Ps better?


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III. WRAP-UP (3 mins)	
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I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p>To carefully explain the nature and objectives of the research</p> <p>Assure on the confidentiality of the discussion and their personal information</p> <p>Establish rapport with respondent to encourage open sharing of opinions</p>	<ul style="list-style-type: none"> Good morning/afternoon. First of all, thank you for agreeing to be interviewed. I am (moderator's name). I am from PSRC. PSRC is an independent research agency that conducts studies about the different products or services that we use. We are not part of the government, we are not NGO and we are not selling anything. We interview different people from different places to discuss with them their experiences, opinions and feelings about various things. Today, we want to have a chat about the 4Ps program – we are not here to audit, investigate or look for errors. We just want to have a better understanding of what 4Ps is really about – the process, people involved, other ways we could help its members especially employees like you to make your job easier and make the program better. We want you to feel free to express or share all of your thoughts that is why this interview is being conducted by a private company. There are no right or wrong answers. What is important is for you to express freely your thoughts, feelings and experiences. Rest assured that all information gathered will be treated with confidentiality. We are not going to include your name or any information about you in the report. To know you better, please tell me something about yourself: <ul style="list-style-type: none"> Name Age Position/Designation in DSWO/4Ps

II. INFORMATION ON GRIEVANCE OFFICER'S DUTIES AND RESPONSIBILITIES (60 mins)	
<p>Objective:</p> <p>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</p> <p>To determine their knowledge and understanding of the limits and responsibilities of their position</p> <p>To uncover possible best practices that can be leveraged, and tensions/ gaps</p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe this area?</p> <ul style="list-style-type: none"> What is the main source of income of the people living here? Have you noticed any changes in the area for the past five years? In what aspect? How were you able to tell that there were changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/ factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> When did the 4Ps start here in your municipality? LENGTH OF SERVICE: How long have you been serving as a GRIEVANCE OFFICER? How did you start as a GRIEVANCE OFFICER? HOW FEEL ABOUT JOB: How is your work? How do you feel about that?


<p>to resolve in the process in relation to beneficiary compliance</p>	<ul style="list-style-type: none"> SCOPE OF WORK: What is the scope of your work? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/ operations manual, taking note of the aspects that he/ she highlights about the job <ul style="list-style-type: none"> LIKES: What are the things that you like about your job? DISLIKES: What about the things that you do not like? DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> What are the daily routine tasks in your job? Aside from those activities do you still have other responsibilities that are still part of your job but you seldom do? What are those? Does your work load change? Are there instances that you are busier than usual? When does this usually happen? Why? Who do you usually work with? How are you connected to them? <i>Identify dependencies of GRIEVANCE OFFICER, their perceived roles in the 4Ps process, and their level of interaction with each other</i> How many beneficiaries do you handle? How has it been going so far for you in handling that amount of volume of beneficiaries? Is that enough or too much? How so? CHALLENGES: what are the challenges that you have experienced or are currently experiencing as a GRIEVANCE OFFICER? IMPORTANCE OF ROLE/POSITION: How important is a GRIEVANCE OFFICER? <ul style="list-style-type: none"> What could happen if you are removed as a part of the process of 4Ps? How would it affect the process? Do you have anyone to replace you if you are sick or want to go on vacation? Who are they? ON TRAINING RECEIVED: Did you have trainings when you started serving as GRIEVANCE OFFICER? <ul style="list-style-type: none"> How was it? Was the training helpful for you as a GRIEVANCE OFFICER? In what ways? Are there things that you think were missed out during the training and you felt those should have been included? Who do you consult about these missed out modules? Do you have any suggestions on how to improve the trainings for GRIEVANCE OFFICER like yourself? Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> Causes of these problems? Effects on the process? People mostly affected? What should be done to address these problems? Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> What do you like doing the most? Why? What part is the most challenging? Why?
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	<ul style="list-style-type: none"> How do you make sure that the 4 P's are well implemented in your province/municipality? Who helps you in implementing these strategies? <i>Check on their roles in the following:</i> <p>GRIEVANCE MONITORING</p> <ul style="list-style-type: none"> What are the usual issues and problems that the beneficiaries relay to you? <ul style="list-style-type: none"> Where does these complaints come from? Who are usually involved in these complaints? <i>Probe for complaints coming from beneficiaries, program partners, LGU officials, etc. Also check for direct and indirect sources of complaints</i> How much complaints do you receive in a month? What are the causes of these complaints? Does these complaints have an effect on the compliance of the beneficiaries? In what way? What is the process undergone to receive and to resolve these complaints? <ul style="list-style-type: none"> Who are involved in resolving the complaints? What are the roles they play in resolving these complaints? How long does it take for the complaint to be resolved? <i>Probe for nuances depending on type of complaint</i> Does the process of resolving the complaint varies depending on the type of complaint? Does the process also vary depending on the place, say example in your province/municipality compared to other provinces? What is the reason for the differences in the process if there are any? Are there any problems that you can resolve and provide solution alone as a Grievance Officer? What are the types of complaints or problems that you turnover to higher officials? To whom do you turn these complaints to? <i>Check if they have an escalation management process in resolving serious complaints and appeals</i> What will happen if this type of complain remains unresolved? Overall, how is the grievance solution system of 4P's doing in your area? Do you have any suggestions to make the process of resolving beneficiary complaints more effective? <i>Ask for suggestions on how to further improve on resolving complaints and appeals from beneficiaries, program partners/ service providers, government officials, and other officials</i> CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM GRIEVANCE OFFICER'S POV: How are the beneficiaries in terms of complying on the terms and conditions of 4P's? How are these beneficiaries doing compared to other areas? <i>Probe for health, education, and FDS</i> <ul style="list-style-type: none"> What are the conditions where beneficiaries find it easiest to comply? How so?
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	<ul style="list-style-type: none"> What are the conditions that these beneficiaries find hardest to comply? What are the sources of these difficulties? If not mentioned, probe for supply-side constraints: <ul style="list-style-type: none"> EDUCATION <ul style="list-style-type: none"> Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc? Quality of teaching? In your opinion, how can we make and help beneficiaries in their compliance? HEALTH <ul style="list-style-type: none"> Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/SHW, medical drugs, etc? How are the people in hospitals and health centers? Any feedbacks from the beneficiaries? In your opinion, how can we make and help beneficiaries in their compliance? FDS: what can you say about the FDS? <ul style="list-style-type: none"> What are the things that you like or dislike about the FDS? Why did you say so? Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? <i>Probe for likes and dislikes, challenges in complying with FDS</i> In your opinion, is FDS helpful to the beneficiaries? In what ways? Suggestions on how to improve FDS? ON OTHER REQUIREMENTS/ CONDITIONS: Other than the aforementioned, are there other requirements or conditions that you know or heard of that should be followed by the beneficiaries to stay in the program? <ul style="list-style-type: none"> What are these? Who implements these conditions? In your opinion, do they make the process better or worse? In what ways? When it comes to implementing 4P's in your province/municipality, what aspects of the program do you need help most? Why? Do you have any suggestions in order to improve the implementation of 4P's in your province/municipality? <p>IMPACT OF 4P's TO THE COMMUNITY</p> <ul style="list-style-type: none"> Overall, have you notice any changes in your municipality after the 4P's implementation? For the better? Worse? <i>Get spontaneous answers, then probe for the following if not mentioned:</i> <ul style="list-style-type: none"> People in the community? I.e., daily living, attitude, mindset about health and education?
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<p>Project EUDORA – RPMO IDs – GRIEVANCE OFFICER Discussion Guide</p> <p>page 5 of 5</p>	 <ul style="list-style-type: none"> ○ Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education ○ Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BI+V, medical drugs, etc. ▪ Roles of 4Ps in these changes? In what ways? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> ▪ Do you use any documents or forms in your work? Which of those are the important ones? What are the use of each? ▪ Can we see these documents/forms in order for us to understand deeper the process involved. <ul style="list-style-type: none"> ○ When are these documents used? ○ Who fills these out? ○ Who checks these documents? <i>(Before it reaches the officer and where it goes next)</i> ▪ Are there any problems/challenges in answering and processing these documents? What are the reasons? ▪ What can we do to make the use of these documents better and make your job easier? ▪ Suggestions to make 4Ps better? ▪ If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?
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II. INFORMATION ON CVO'S DUTIES AND RESPONSIBILITIES (60 mins)	
<p>Objective:</p> <p><i>To understand the role of each RPMO officer in the whole 4Ps process, with focus on their impact on beneficiary compliance</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p> <p><i>To uncover possible best practices that can be leveraged, and tensions/ gaps</i></p>	<p>CONTEXTUAL INFORMATION</p> <p>How long have you been working in this area?</p> <p>How would you describe the area?</p> <ul style="list-style-type: none"> • What is the main source of income of the people living here? • Have you notice any changes in the area for the past five years? In what aspect? How were you able to tell that there are changes? What are your thoughts about these changes? <p><i>Note mention of Political, Economic, Social, Technological, Legal, Environmental changes/factors, LGU initiatives</i></p> <p>INFORMATION ON DUTIES AND RESPONSIBILITIES</p> <ul style="list-style-type: none"> • UNDERSTANDING OF 4Ps: What is 4Ps? What is it for? What are the objectives of the program? <ul style="list-style-type: none"> ◦ When did the 4Ps start here in your province / municipality? • LENGTH OF SERVICE: How long have you been serving as a CVO? How did you start as a CVO? • HOW FEEL ABOUT JOB: How is your work? How do you feel about that?

<p><i>to resolve in the process in relation to beneficiary compliance</i></p>	<ul style="list-style-type: none"> • SCOPE OF WORK: What is the scope of your work? What are your responsibilities? Check whether spontaneously his description of his job matches the one in TOR/ operations manual, taking note of the aspects that he/ she highlights about the job <ul style="list-style-type: none"> ◦ LIKES: What are the things that you like about your job? ◦ DISLIKES: What about the things that you do not like? • DAILY ROUTINE: If I am able to see you do your job as (mention position) everyday, what would I see? <ul style="list-style-type: none"> ◦ What are your day to day roles in your work? ◦ Do you have other responsibilities that are still part of your job but you seldom do? What are these? ◦ Does your work load change? Are there instances that you are busier than usual? When are these? Why? ◦ Who do you usually work with? How are you connected to them? <i>Identify dependencies of CVO, their perceived roles in the 4Ps process, and their level of interaction with each other</i> ◦ How many beneficiaries do you handle? How was it handling that volume of beneficiaries? Is that enough or too much? How so? • CHALLENGES: Challenges you usually experience as a CVO? • IMPORTANCE OF ROLE/POSITION: How important is a CVO? <ul style="list-style-type: none"> ◦ What would happen if CVOs are removed from the process? How would it affect the process? ◦ Do you have anyone to replace you if you are sick or want to go on vacation? Who is it? • ON TRAINING RECEIVED: Did you have trainings when you started serving as a CVO? <ul style="list-style-type: none"> ◦ How was it? ◦ Was the training helpful in making you meet the job responsibilities of a CVO? In what ways? ◦ Are there things that you think were missed out during the training that you felt should have been included? Who do you consult about these? ◦ Do you have any suggestions on how to improve the training given to the CVO's like yourself? • Based on your experience and understanding, what part of the process of 4Ps do problems usually occur? <ul style="list-style-type: none"> ◦ Causes of these problems? ◦ Effects on the process? People mostly affected? ◦ What should be done to address these problems? • Out of all your responsibilities, what is the most time-consuming? <ul style="list-style-type: none"> ◦ What do you like doing the most? Why? ◦ What part is the most challenging? Why? ◦ How do you make sure that the 4Ps are implemented well in your province/municipality? Who are the people who helps you in implementing these strategies?
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Check on their roles in the following:

COMPLIANCE VERIFICATION

- What are your primary concerns regarding the compliance verification system of the program?
 - Who are the people involved aside from yourself? What are their roles in the process of compliance verification?
 - How similar/dissimilar is your role as compared to the program partners (i.e., health care official, teacher) that you work with in compliance verification system?
 - In what manner do you work with your regional/provincial counterpart? How is your working relationship with one another?
 - What makes the process difficult? What makes the process easy?
 - What are the forms that we use to monitor the compliance of the beneficiaries?
 - How do we distribute/retrieve these information to and from the Provincial Operations Office (POO), schools and health center?
- When is this done? Check awareness/ compliance with CVS cycle timeline
 - Has there been a delay or snag in the schedule of the CVS cycle? What is the usual reason why these delays happen? How does it affect the process of the 4Ps?
- How do we make sure that the CVS forms are filled out properly and correctly?
- Have you experienced, noticed, or heard of any problems when it comes to filling out the Compliance Verification forms? Where does these problems come from?
- Are there any challenges that you face when it comes to monitoring and capturing the compliance of the beneficiaries? Where do we find difficulties? How can we make these better and less time consuming?
- **ON CASCADING CHANGES FROM CENTRAL OFFICE:** What are the strategies that you use to implement changes in the compliance verification system that comes from the central office, if there are any?
- **CHECK COMPLIANCE PERFORMANCE OF BENEFICIARIES FROM CVO'S POV:** How efficient are the beneficiaries in your area in terms of complying in the 4Ps conditions? How was it compared to other areas? Probe for health, education, and FDS
 - Conditions where beneficiaries find it easiest to comply? How so?
 - Conditions hardest to comply? Sources of these difficulties?
 - If not mentioned, probe for supply-side constraints:
 - EDUCATION**
 - Conditions of facilities for education? Are there enough schools, rooms, teachers, books, etc?
 - Quality of teaching?
 - In your opinion, how can we make and help beneficiaries in their compliance?

HEALTH

- Conditions of facilities that has to do with health? Are there enough hospitals, health centers, doctors/BHW, medical drugs, etc?
- How are the people in hospitals and health centers? Any feedbacks from the beneficiaries?
- In your opinion, how can we make and help beneficiaries in their compliance?
- **FDS:** What can you say about FDS?
 - Likes/dislikes about FDS? Why?
 - Reactions of the beneficiaries in your area to FDS? How is their attendance? What do they like/dislike about FDS? Probe for likes and dislikes, challenges in complying with FDS
 - In your opinion, is FDS helpful to the beneficiaries? In what ways?
 - Suggestions on how to improve FDS?
- **ON OTHER REQUIREMENTS/ CONDITIONS:** Other than the aforementioned, are there other requirements or conditions that you know or heard of that should be followed by the beneficiaries to stay in the program?
 - What are these?
 - Who implements these conditions?
 - In your opinion, do they make the process better or worse? In what ways?


REPORTS AND ANALYZING TRENDS

- Do you also create reports about the information that you obtain from the CVS forms? What information are in these reports? Who makes use of your reports?
- Do you notice any trends when it comes to the compliance of the beneficiaries under your area? What usually are the issues or problems on the beneficiaries' compliance? What areas/barangays have the most problems?

- At what part of the implementation of the 4Ps in your province/municipality you need help the most? Why?
- Suggestions on how to improve the 4Ps implementation in your province/municipality?

IMPACT OF 4Ps TO THE COMMUNITY

- Overall, have you notice any changes in your municipality after the 4Ps' implementation? For the better? Worse? Get spontaneous answers, then probe for the following if not mentioned:
 - People in the community? I.e., daily living, attitude, mindset about health and education?
 - Education and schools? I.e., Volume of students going to school, quality of teaching, facilities and infrastructures involving education
 - Health and medical services? I.e., number of hospitals and health centers, quality of the services of doctors and BHW, medical drugs, etc.
- Roles of 4Ps in these changes? In what waves?

Project EUDORA – RPMO IDs – COMPLIANCE VERIFICATION OFFICER | Discussion Guide 

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	<p>SHOW AND TELL</p> <ul style="list-style-type: none"> Do you use any documents or forms in your work? Which of those are the important ones? What are the use of each? Can we see these documents/forms in order for us to understand deeper the process involved. <ul style="list-style-type: none"> When are these documents used? Who fills these out? Who checks these documents? <i>(Before it reaches the officer and where it goes next)</i> Are there any problems/challenges in answering and processing these documents? What are the reasons? What can we do to make the use of these documents better and make your job easier? Suggestions to make 4Ps better? If you are given a chance to make changes in the process, what are they and why? How would it help in making the process of 4Ps better?
III. WRAP-UP (3 mins)	
	<ul style="list-style-type: none"> Anything else you want to suggest to make 4Ps better for employees like you who are part of the program? Thank respondent and end

I. INTRODUCTION (7 mins)	
<p>Objective:</p> <p><i>To carefully explain the nature and objectives of the research</i></p> <p><i>Assure on the confidentiality of the discussion and their personal information</i></p> <p><i>Establish rapport with respondents to encourage open sharing of opinions</i></p>	<ul style="list-style-type: none"> Good day. I am from PSRC, a private third-party agency which does research studies on various products and services. We go around to talk to people who directly experience these products and services. We would just like to hear about your personal opinions and sentiments - about the things you like, do not like, and other wishes and aspirations. For today, we're interested in talking about the different education/health programs in your area- we're not here, however, to audit or investigate. We would just like to further understand about these different programs - what's the process behind it, who's involved in the process, how can we help members and employees like yourself to improve the program. This is also why a private company is conducting this study so that you can freely share or express your opinions and sentiments. There aren't any right or wrong answers in our interview today. What's important is that you are able to communicate what you are really thinking, feeling, and experiencing. Rest assured that all the information that you will be sharing today will remain between us and will be strictly confidential. When we write our report, we will not be including your names or any information that can connect to your identity. So that I can get to know you further, can you tell me about yourself? <ul style="list-style-type: none"> Name Age Hobbies

II. CONTEXTUAL INFORMATION ABOUT THEIR WORK (20 mins)	
<p>Objective:</p> <p><i>To understand their attitude and perception towards their jobs and the 4Ps program</i></p>	<p><i>Tell me about your work...</i></p> <ul style="list-style-type: none"> How long have you been a teacher/health worker? Why in this area? What inspired you to work as a teacher/health worker? What is your typical day like? What are the high points of your day? How about low points? Why those? What are the things about your job that make you feel rewarded? How about the things that frustrate you? Why say so? What are your roles and responsibilities as a teacher/health worker? Check if mentions 4Ps; if not mentioned, do not aid 4Ps yet What are the challenges with work that you encounter? How do you address these? Are there challenges that you find difficult to address? How do you cope? <p><i>Can you tell me about working as a teacher/health worker in your area...</i></p> <ul style="list-style-type: none"> What is the current education/health situation in your area like? Why do you feel it's like this? What are the programs for education/health that are implemented in your area? Check if mentions 4Ps, if not mentioned, aid <ul style="list-style-type: none"> What are these programs for? How can this program benefit the community? Why say so? Who are your partners in implementing these programs? What are the roles of each? What is your role in this? How do you feel about this?

	<ul style="list-style-type: none"> How are the current programs for education/health going in your area? How are they implemented (e.g. effectively implemented, badly implemented)? How say so? Are there any challenges when it comes to the implementation of these programs? How say so? How do you address these challenges?
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III. UNDERSTANDING THE ROLE OF PROGRAM PARTNERS (40 mins)	
<p>Objectives:</p> <p><i>To understand the role of each program partner in the whole 4Ps process</i></p> <p><i>To determine their knowledge and understanding of the limits and responsibilities of their position</i></p> <p><i>To uncover possible best practices that can be leveraged, and tensions/ gaps to resolve in the process</i></p>	<p><i>You've mentioned that one of the programs in your area is 4Ps...</i></p> <ul style="list-style-type: none"> Can you tell me about your roles and responsibilities as a teacher/health worker in implementing this program in your area? <ul style="list-style-type: none"> How do you fit this in with your other responsibilities as a teacher/health worker? Gauge their workload If you were to prioritize your workload, where does the implementation of 4Ps come in? Top priority? Least priority? Why say so? Are all teachers/health workers part of the implementation of this program in your area? If not, how were you identified as the program partner? How do you feel about it? <ul style="list-style-type: none"> How were you oriented into the program? Were there orientations/trainings at the start? How do you feel about it? Do you have any suggestions on how to go about it? Why say so? <p>TEACHERS</p> <ul style="list-style-type: none"> How many students do you have that are 4Ps beneficiaries? How do you feel about that amount? With that amount of students that you have, how do you monitor/keep track of the attendance of these students? Check for both 4Ps mandated monitoring instructions and their own "diskartes" Aside from monitoring/tracking the kids, do you have other roles towards the kids that are mandated by the 4Ps? What are these? How do you feel about this? What are the roles of the parents in these? Do you interact with them? Why/why not? What is the nature of interaction? How compliant are the kids? <ul style="list-style-type: none"> What do you feel contributed to their compliance/non-compliance? Why say so? <ul style="list-style-type: none"> When kids are non-compliant, what are the usual reasons? What do the kids do when they are non-compliant? Appeal? Why? What do you do if the kids are non-compliant? Are the parents involved in these situations? How so? Why address non-compliance this way? What do you think is needed for the kids to be more compliant? Were there any changes from the kids when they still were not beneficiaries up to now that they are beneficiaries already? What are these? How do you feel about these changes? Can you tell me how the process of submitting/reporting your students' attendance to DSWD goes? How do you feel about it? <ul style="list-style-type: none"> Check process: <ul style="list-style-type: none"> Who do they report directly to? (e.g. a head teacher who then reports to DSWD, report directly to DSWD, etc.) When do they submit attendance (e.g. weekly, quarterly, etc.) Do you have any suggestions about this process? Why say so?



	<p>HEALTH WORKERS</p> <ul style="list-style-type: none"> • What are the requirements from the beneficiaries? For pregnant women? For children? • How do you monitor the beneficiaries? Is it still part of your responsibilities? How say so? <ul style="list-style-type: none"> ◦ Is there a particular way that is mandated by DSWD to monitor (e.g. booklet)? If not, what is your technique/style in monitoring these? ◦ How do you report your monitoring to DSWD? Who do you report these to? How do you feel about this way of reporting? Check process of reporting ◦ Do you have any suggestions on how to improve this process? Why say so? • How compliant are the beneficiaries? <ul style="list-style-type: none"> ◦ What do you think contributed to their compliance/non-compliance? Why say so? <ul style="list-style-type: none"> ▪ When they are non-compliant, what are the usual reasons? ▪ When they are non-compliant, what do they do? (e.g. appeal) How do you respond to this? Why say so? ▪ What do you do if beneficiaries are non-compliant? Do you follow up on them? Why/why not? • What do you think is needed for the beneficiaries to be more compliant? <p>SHOW AND TELL</p> <ul style="list-style-type: none"> • Are there documents or forms that you use to monitor the beneficiaries? Is it okay if you show those to us – just for us to have a better understanding of how it is monitored? • Which of these are important? Which are not important? <ul style="list-style-type: none"> ◦ When do you use these documents? ◦ Who fills these out? ◦ Where does these documents go? • Are there challenges in terms of answering or processing these documents? Why say so? • How can we make these more efficient? • Do you have any suggestions to improve the 4Ps? • If there is one thing that you can change about the program, what is it and why do you want it changed? How will this improve the program?
IV. WRAP-UP [3 mins]	<ul style="list-style-type: none"> • Do you have any suggestions for the development of 4Ps for employees part of the implementation such as yourself? • Thank respondents and end.

Appendix 4. Rapid Assessment Tool

Project EUDORA
Rapid Assessment Sheet



RAPID ASSESSMENT SHEET (PESTLE Analysis for Region __ - Municipality of __)		
POLITICAL		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
Political atmosphere (e.g. internal political issues, political stability)		
National government support		
LGU performance/support		
Security/safety of the area (e.g. military presence, etc.)		

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Project EUDORA
Rapid Assessment Sheet



ECONOMIC		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
General economic status of the area		
Employment rate		
Main source of livelihood in the area		
Home economy situation and trends		

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Project EUDORA
Rapid Assessment Sheet



SOCIAL		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
General lifestyle, attitude and trends		
Living situation		
Educational level of the general population		
Health consciousness		
Religion/s in the area		
Local culture		

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Project EUDORA
Rapid Assessment Sheet



TECHNOLOGY		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
Technological trends in the area		
Awareness about technology		
Access to technology		

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Rapid Assessment Sheet



RAPID ASSESSMENT SHEET (PESTLE Analysis for Region __ - Municipality of __)		
POLITICAL		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
Political atmosphere (e.g. internal political issues, political stability)		
National government support		
LGU performance/support		
Security/safety of the area (e.g. military presence, etc.)		

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Rapid Assessment Sheet



ECONOMIC		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
General economic status of the area		
Employment rate		
Main source of livelihood in the area		
Home economy situation and trends		

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Project EUDORA
Rapid Assessment Sheet



LEGAL		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
Government policies (e.g. city ordinances, barangay memos, etc.) ▪ Check policies specifically on health and education		
Laws/policies on employment		
Laws/policies on health		
Laws/ policies on education		
Laws/policies on environmental concerns		

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Project EUDORA
Rapid Assessment Sheet



ENVIRONMENT		
ELEMENTS	SITUATION	IMPLICATIONS TO THE 4Ps (e.g. in terms of implementation, grantee compliance, etc.)
Geographical location		
Weather and climate		
Environmental issues/concerns		

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Appedix 3: Respondent Profiles

Respondent Profiles – FOCUS GROUP DISCUSSIONS

ARMM FGDs							
Municipality of Talayan							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	30	F	Housewife	Carpenter		✓
	2	49	F	Housewife	Tricycle Driver		✓
	3	35	F	Housewife	Farmer		✓
	4	42	F	Housewife	Farmer	✓	
	5	34	F	Housewife	Farmer		✓
2	1	35	F	Housewife	Business (Used clothes shop)		✓
	2	38	F	Housewife	Farmer		✓
	3	36	F	Housewife	Farmer		✓
	4	25	F	Housewife	Farmer		✓
	5	31	M	Driver	Driver	✓	
Municipality of Datu Odin Sinsuat							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	37	F	Housewife	Farmer		✓
	2	51	F	Farmer	Farmer		✓
	3	28	F	Housewife	Farmer		✓
	4	48	F	Housewife	Driver/Farmer		✓
	5	42	F	Housewife	Farmer		✓
2	1	32	F	Housewife	Teacher (Stepmother)		
	2	38	F	Housewife	Tricycle Driver	✓	
	3	30		Housewife	Farmer		✓
	4	34	F	Housewife	Farmer		✓
	5	42	F	Housewife	Farmer		✓
Sultan Kudarat							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	30	F	Housewife	Tricycle Driver		✓
	2	38	F	Business (Small store at home)	Farmer		✓
	3	23	F	Housewife	Laborer		✓
	4	36	F	Food Vendor	Laborer		✓
	5	22	F	Housewife	Construction Worker		✓
2	1	56	F	Housewife	Coconut Farmer		✓
	2	22	F	Housewife	Driver		✓

	3	49	F	Housewife	Farmer		✓
	4	37	F	Housewife	Farmer	✓	
	5	32	F	Housewife	<i>Habal-Habal</i> Driver		✓

CARAGA FGDs							
Butuan City							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	28	F	Housewife	Farmer	✓	
	2	42	F	Housewife	Farmer		✓
	3	25	F	Housewife	Farmer	✓	
	4	30	F	Farmer	Farmer	✓	✓
	5	27	F	Helper	Farmer	✓	
2	1	28	M	Driver	Driver	✓	
	2	24	F	Housewife	Single Motor Driver	✓	
	3	61	F	Housewife	Laborer		✓
	4	28	F	Housewife	Farmer	✓	
	5	38	F	Housewife	Farmer	✓	
Libjo, Dinagat Islands							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	33	M	Security Guard	Security Guard		✓
	2	42	F	Housewife	Farmer		✓
	3	26	F	Housewife	Single motor Driver	✓	
	4	29	F	Housewife	Laborer		✓
	5	29	F	Housewife	Mechanic		✓
2	1	42	F	Housewife	Single Motor Driver		✓
	2	35	F	Housewife	Fisherman		✓
	3	37	F	Housewife	Farmer	✓	✓
	4	32	F	Laundry Woman	Laborer		✓
	5	40	F	Housewife	Laborer		✓

NCR FGDs							
Makati City							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	44	F	Sari Sari Store	Dental Technician	✓	✓
	2	41	F	Housewife	Tricycle Driver		✓
	3	35	F	Housewife	Security Guard	✓	✓
	4	55	F	Free Lance - Cook (Catering)	On Call - Cook (Restaurant)	✓	✓
	5	31	F	Housewife	Carpenter	✓	✓
2	1	53	M	Tricycle Operator	OFW-Domestic Helper	✓	✓
	2	27	F	Housewife	Mason		✓
	3	31	F	Labandera	Toy Kingdom - Salesman	✓	✓
	4	40	F	Food Vendor	Respondent		✓

	5	35	F	Cigarette/Candy Vendor	Respondent		✓
District of Malate, Manila							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	50	F	Housewife	Carpenter		✓
	2	27	F	Housewife	Pedicab Driver	✓	✓
	3	42	F	Housewife / Part time Buy & Sell Silver	Restaurant Service Crew	✓	✓
	4	55	F	Food Vendor	Respondent		✓
	5	45	F	Housewife	Side Car Driver		✓
2	1	24	M	Tricycle Driver	Respondent	✓	
	2	42	F	Food Vendor	Welder	✓	
	3	33	F	Housewife	Delivery person		✓
	4	50	F	Housewife	Fast food Service Crew		✓
	5	40	F	Fishball Vendor / Laundry woman	Respondent		✓
Taguig City							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	33	F	Housewife	Construction - Painter	✓	✓
	2	40	F	Housewife	Security Guard		✓
	3	39	F	Avon Dealer	Tricycle Driver		✓
	4	37	F	Housewife	Construction - Painter		✓
	5	31	F	Housewife	Mason-Dmci	✓	✓
2	1	29	F	Housewife	Grocery Bagger		✓
	2	29	F	Housewife	Freelance Cellphone Technician		✓
	3	34	F	Housewife	Messenger	✓	✓
	4	29	F	Housekeeping Staff	Respondent	✓	✓
	5	31	F	Housewife	Company Driver		✓

REGION I (Ilocos) FGDs							
San Carlos City, Pangasinan							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	33	F	Housewife	Electrician		✓
	2	26	F	Housewife	Construction worker		✓
	3	36	F	Farmer	Farmer		✓
	4	37	F	Meat vendor	Meat vendor		✓
	5	47	F	Vegetable vendor	Respondent is the head of household	✓	✓
2	1	35	F	Laundry Woman	Carpenter		✓

	2	68	F	Fruit Vendor	Respondent is the head of household		✓
	3	45	F	Laundry Woman	Farmer		✓
	4	28	F	Housewife	Farmer		✓
	5	34	F	Housewife	Tricycle Driver		✓
Municipality of Sto. Domingo, Ilocos Sur							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
1	1	42	F	Housewife	Farmer		✓
	2	36	F	Housewife	Farmer/ Makes and sells charcoals		✓
	3	30	F	Housewife	Carpenter/Farmer		✓
	4	33	F	Housewife	Carpenter/ Makes and sells charcoals		✓
	5	43	F	Housewife	Sells charcoals		✓
2	1	35	M	Construction worker	Respondent is the head of household	✓	
	2	33	F	Housewife	Carpenter		✓
	3	43	F	Farm laborer	Tricycle driver		✓
	4	35	F	Housewife	Farmer		✓
	5	36	F	Laundry Woman / Farmer	Respondent is the head of household		✓

Respondent Profiles – HOME VISITS

ARMM Home Visits							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
Talayan	1	35	F	Housewife	Farmer		✓
	2	32	F	Housewife	Farmer		✓
	3	28	M	Delivery Boy	Delivery Boy		✓
Datu Odin Sinsuat	4	27	F	Housewife	Driver	✓	
	5	30	F	Housewife	Farmer	✓	✓
	6	32	F	Housewife	Farmer	✓	✓
Sultan Kudarat	7	56	F	Housewife	Farmer		✓
	8	23	F	Housewife	Driver		✓
	9	32	F	Housewife	Farmer	✓	

CARAGA Home Visits							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
Butuan City	1	21	F	Housewife	Farmer	✓	
	2	40	M	Farmer	Farmer	✓	

Libjo, Dinagat Islands	3	26	F	Housewife	Farmer	✓	✓
	4	36	F	Laundry Woman	Laundry Woman		✓
	5	40	F	Housewife	Farmer		✓
	6	35	F	Housewife	Farmer	✓	

REGION I (Ilocos) Home Visits							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
San Carlos, Pangasinan	1	29	F	Farmer (Parent Leader)	Farmer		✓
	2	48	F	Laundry Woman	Piggery caretaker		✓
	3	64	F	Laborer	Laborer	✓	✓
Sto. Domingo, Ilocos Sur	4	35	F	Housewife	Carpenter		✓
	5	44	F	Housewife	Sells and makes charcoal		✓
	6	32	F	Housewife	Tricycle driver	✓	

NCR Home Visits							
Area	Respondent No.	Age	Gender	Occupation	Head of household Occupation	With 0-5 years old kids (beneficiary)	With 6-18 years old kids (beneficiary)
Makati City	1	37	F	Housewife	Security Guard	✓	✓
	2	26	F	Housewife	Construction worker	✓	
	3	40	F	Housewife (Parent Leader)	Free Lance Electrician		✓
Malate, Manila	4	43	F	Food vendor	Sidecar driver		✓
	5	47	F	Buy & Sell of dry goods	Respondent		✓
	6	64	F	Housewife (Parent Leader)	Insurance assistant agent		✓
Taguig City	7	38	F	Hospital Utility Staff	Construction Worker		✓
	8	29	F	Housewife	Construction Worker	✓	
	9	35	F	Housewife (Parent Leader)	Welder		✓

Respondent Profiles – RPMO IN-DEPTH INTERVIEWS

ARMM RPMO IDIs			
ID No.	Position	Area	No. of years in position
1	Regional Program Coordinator	Maguindanao	6
2	Regional Grievance Officer	Maguindanao	2
3	Measurement & Evaluation Officer	Maguindanao	4
4	Beneficiary Data Officer	Maguindanao	6
5	Provincial Link	Maguindanao	
6	Compliance Verification Officer	Maguindanao	6
7	Municipal Link	Talayan	5
8	Municipal Link	Dati Odin Sinsuat	5
9	Municipal Link	Sultan Kudarat	5
10	Social Worker Assistant	Datu Odin Sinsuat	5
11	Teacher	Sultan Kudarat	
12	Nurse	Talayan	

CARAGA RPMO IDIs			
ID No.	Position	Area	No. of years in position
1	Regional Program Coordinator	Butuan City	5 months
2	Regional Grievance Officer	Butuan City	~2mos (in the area)
3	Measurement & Evaluation Officer	Butuan City	5*
4	Beneficiary Data Officer	Butuan City	5
5	Compliance Verification Officer	Butuan City	9*
6	Provincial Link	Libjo, Dinagat Islands	3
7	Provincial Link	Butuan City	4
8	Municipal Link	Libjo, Dinagat Islands	5
9	Municipal Link	Butuan City	4years 9 months*
10	Social Worker Assistant	Libjo, Dinagat Islands	3 *
11	Teacher	Libjo, Dinagat Islands	1year 8 months
12	Nurse	Libjo, Dinagat Islands	3

*Number of years working in DSWD or 4Ps, not specific to position

NCR RPMO IDIs			
ID No.	Position	Area	No. of years in position
1	City Link	Makati	4
2			4
3	Beneficiary Data Officer	Taguig	3
4	City Link		4
5	Social Welfare Assistant		4
6	Grievance Redress Officer		3
7	Teacher		6
8	Midwife		8
9	City Link	Malate	7

10	Compliance Verification Officer		4
11	Monitoring and Evaluation Officer		3
12	Regional Program Coordinator		3

REGION I (Ilocos) RPMO IDs			
ID No.	Position	Area	No. of years in position
1	Regional Program Coordinator	La Union	2
2	Regional Grievance Officer	La Union	1
3	Measurement & Evaluation Officer	La Union	3
4	Beneficiary Data Officer	La Union	5
5	Compliance Verification Officer	La Union	4
6	Provincial Link	Ilocos Sur	
7	Provincial Link	Dagupan, Pangasinan	2
8	Municipal Link	San Carlos, Pangasinan	4
9	Municipal Link	San Carlos, Pangasinan	4
10	Social Worker Assistant	Ilocos Sur	8 months
11	Teacher	Ilocos Sur	4
12	Nurse	Ilocos Sur	30