



Department of Social Welfare and Development **ASSESSMENT REPORT**

CY 2016

Policy Development and Planning Bureau
Monitoring & Evaluation Division

Table of Contents

Executive Summary	i
I. Introduction	1
II. Methodology	2
III. Performance on DSWD Major Final Outputs	
▪ Major Final Output 1	3
▪ Major Final Output 2	5
▪ Major Final Output 3	18
▪ Major Final Output 4	20
III. Performance on DSWD outcomes	
▪ Dynamic organization with a culture of excellence exhibited	21
▪ Delivery of coordinated social welfare and development programs by LGUs improved	23
▪ Services of licensed private social welfare agencies improved	25
▪ Rights of the Vulnerable Sectors Promoted	28
▪ Capacities of Poor Families in Accessing Opportunities to Move their Level of Well-Being Improved	32
IV. Assessment of Important Assumptions and Risks	34
V. Overall Assessment	35
VI. Recommendations	37
Annex – URBME Form 3	

EXECUTIVE SUMMARY

The 2016 Overall Assessment Report aims to objectively assess the progress of the Department's performance for CY 2016 and provide recommendations that require necessary actions from the management, in line with the Outcome and Output indicators reflected in the Overall Results Framework.

On Major Final Outputs (MFOs)

The Department showed impressive performance in delivering the Major Final Outputs; however, implementation issues still remain. The Department successfully accomplished and even breached its targets for 29 out of the 36 MFO indicators (with available data) in CY 2016. Operational efficiency of the Department, however, can be weighed down by implementation challenges especially on those programs and services which are devolved to the Local Government Units. It was recognized that accomplishments of the Department are highly dependent on capacities of LGUs in delivering most of the results. Findings have shown that capacity of Local Government Units in implementing SWD programs and services, such as Supplementary Feeding Program and Social Pension, greatly affects DSWD's accomplishments. Still, there are considerably high number of LGUs which are lagging on program implementation due to their current capacity. The lingering effects of delayed liquidation, procurement, and report submission of LGUs are affecting the quality and timeliness of program implementation.

On Organizational Outcomes (OOs)

For CY 2016, only two out of five organizational outcomes were delivered successfully; the Department was less successful at achieving other outcomes. Based on the findings, targets for the organizational outcome "Dynamic organization with a culture of excellence exhibited" and "Rights of the vulnerable sectors promoted" were successfully achieved by the Department.

Major Challenges

Inadequate capacity of Local Government Units to deliver social protection programs and services. Issues relative to the implementation of devolved SP programs and services (e.g. SFP) and those programs which are delivered thru the LGUs (e.g. Social Pension) have been stubbornly persistent. Moreover, **lack of cooperation and convergence among LGUs, NGAs, other partners and stakeholders** affected the DSWD's performance.

The Department suffers from weak target setting. It was found out that most of the outcome accomplishments relative to accreditation of SWDAs and functionality of LSWDOs are far less

than the targets while others are deteriorating. Some of the Major Final Outputs 3 & 4 indicators, on the other hand, are undertargetted.

Human and budgetary resource constraints are affecting the results. Based on the findings, lack of staff (e.g. PDOs, disbursing officers) and budget (e.g. TARA budget, incentives) continue to undermine operational performance of the Department.

An enabling environment supporting the achievement of results is lacking. The Department needs to improve on developing and implementing (1) policies, guidelines and multi-stakeholder platforms; and (2) monitoring and functional support systems which will facilitate monitoring & evaluation of SWD programs and services for a timely and evidence-based decision-making.

Overall Recommendations

Reduce operational delays. Efficiency of the Department's operations may be raised through improving its programs' process flows and procurement processes. In addition, Human Resource Management and Organizational Development and proper budget allocation for the interventions and incentives shall be done.

Develop incentive system for intermediaries and partners. Incentive system for partners and intermediaries shall be developed to improve their cooperation in delivering positive development results.

Expand Research and Strengthen M&E. Research must be expanded to generate more knowledge and discover effective intervention models for the Department's beneficiaries and clients. In addition, M&E system of the Department must be strengthened so as to generate accurate and quality information for decision-makers.

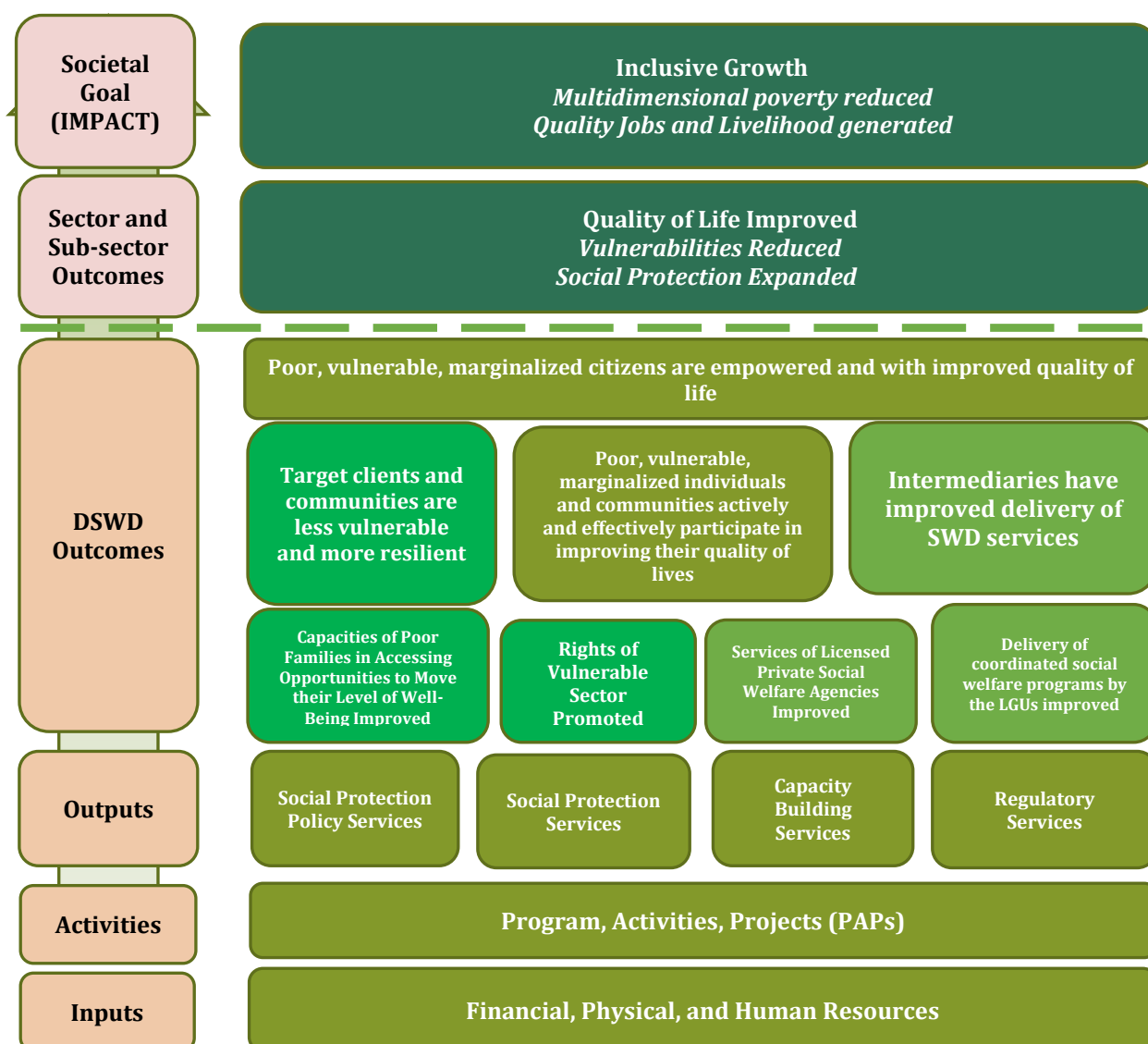
Institutionalize the DSWD Convergence Strategy. There is a need to strengthen the internal and external convergence, thus institutionalization of the DSWD Convergence Strategy would be a critically important initiative to improve synchronization and coordination within and outside the Department.

Strengthen Technical Assistance and Capability Building Activities for LGUs. As delays affect the subsequent implementation cycles, it is crucial to ensure that LGUs are efficiently implementing our programs, thus, the Department shall effectively manage LGUs' program implementation.

I. INTRODUCTION

In 2014, the Unified Results-based Monitoring and Evaluation System (URBMES) was installed through the issuance of Memorandum Circular No. 4, s. 2014. The URBME System was developed in response to the pressing need of a results-based and a Department-wide M&E System for assessing the performance of the Department of Social Welfare and Development.

Along with this, the Overall Results Framework of the Department was developed containing its medium to long-term outcomes for 2014-2016 planning horizon. These outcomes are expected to contribute to the sectoral and societal goal of the country as articulated in the Philippine Development Plan 2011-2016, particularly on improving the quality of lives and achieving inclusive growth. The figure below shows the logic of the DSWD Overall Results Framework (2014-2016).



The DSWD shall contribute to the reduction of multidimensional poverty through ensuring that the outcome - ***poor, vulnerable, marginalized citizens are empowered and with improved quality of life*** – is attained. Specific results which align to the stated ultimate outcome contains the Department’s Organizational Outcomes. In order to achieve its outcomes, the Major Final Outputs namely Social Protection Policy Services, Social Policy Services, Capacity Building Services, and Regulatory Services shall be effectively delivered to clients and intermediaries.

The Overall Assessment Report aims to objectively assess the progress of the Department’s performance and provide recommendations that require necessary actions from the management, in line with the Outcome and Output indicators reflected in the Overall Results Framework.

II. METHODOLOGY

The assessment was based on the analyses and recommendations taken from the Assessment Reports submitted by the Field Offices as well as the data provided by DSWD Central Office – Offices, Bureaus and Services. Furthermore, the report covered the following assessment questions:

- Is the Department on track to achieve its organizational outcomes? What progress and evidence had been there in achieving the outcomes?
- What were the hindering and facilitating factors for achieving the intended results? What have been the issues and/or good practices?

The following category was used in the assessment to provide an overview of the likelihood of achieving results:

Green	Target achieved or likely/highly likely to be achieved by EO 2016
Red	No progress or deterioration; highly unlikely/impossible to achieve the target
Gray	Insufficient reliable data to assess performance/progress

III. PROGRESS¹ ON DSWD OUTPUTS

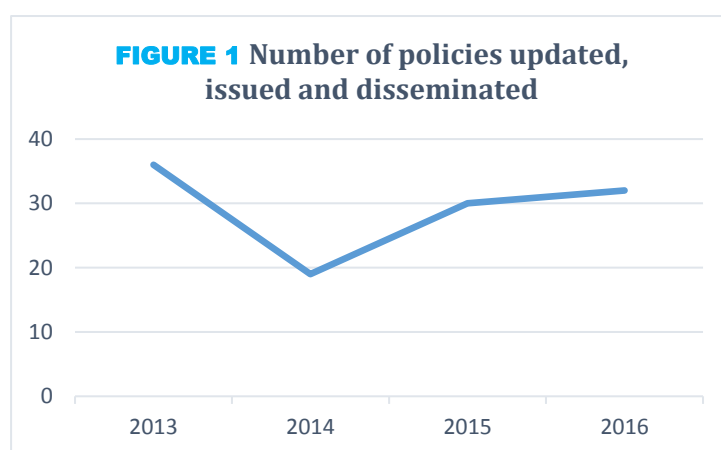
Major Final Output 1

Responsive social protection policies delivered

MFO Indicator 1 Number of policies updated, issued and disseminated

TABLE 1 Summary of Performance along MFO Indicator 1

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
36	19	30	32	28	27	14.29%	Minor deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	-47%
2015 vs 2014	58%
2016 vs 2015	7%
2016 vs 2013	-11%

Findings

Compared to the baseline year (2013), the number of policies updated, issued, and disseminated by the end of 2016 is -11% lower. Despite that, the Department has shown improvement of performance along this output since 2015 as shown in Figure 1.

Continuous advocacy and information dissemination activities conducted helped in the the accomplishment. Policies are disseminated thru various activities such as trainings, meetings, and orientations with intermediaries and stakeholders. However, the number of activities conducted relative to policy dissemination are not accounted for.

¹ Only selected indicators are reported in this Narrative Report. Refer to URBME Form 3 for further details on the MFO indicators.

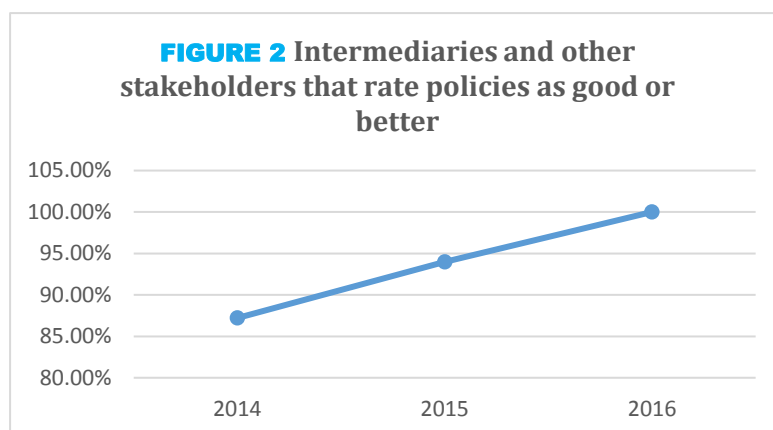
Recommendations

- ✓ **Improve policy dissemination mechanism.** Close coordination between Policy Development and Planning Bureau and the Field Offices must be sustained regarding new or updated policies. PDPB should consider releasing inventory of all policies annually and identify the priority policies to be disseminated for a specific period.
- ✓ **Standardize policy dissemination processes.** A **standardized process of disseminating policies** from Central Office to Field Offices shall be established. This would also entail a strong coordination between the Standards Bureau and PDPB particularly on the latest policies and guidelines downloaded to the Regional Offices.

MFO Indicator 2 Average % of intermediaries and other stakeholders that rate policies as good or better

TABLE 2 Summary of Performance along MFO Indicator 2

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
-	87.21%	94%	100%	90%	94%	11.11%	Minor deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	n/a
2015 vs 2014	8%
2016 vs 2015	6%
2016 vs 2013	n/a

Findings

Since 2014, the Department has been obtaining increasing percentage of intermediaries and stakeholders who perceive DSWD policies as good or better. In fact, in 2016, 100% of the respondents provided positive ratings to the policies.

Overall, the Department's policies were rated positively. Data on the indicator were gathered thru the conduct of Client Satisfaction Survey. For 2016, the survey covered 16 regions and was participated by respondents from the Local Social Welfare and Development



Offices (LSWDOs) who have been part in the implementation and/or compliance of the Department's policies². Based on the results, there were 411 LSWDOs that rated the DSWD as **better**.

Recommendations

The results of the survey highlighted the use of social media in policy dissemination and advocacy activities; involvement of regional focal persons in policy advocacy; and suggested improvements in policy service monitoring and assessment.

Major Final Output 2

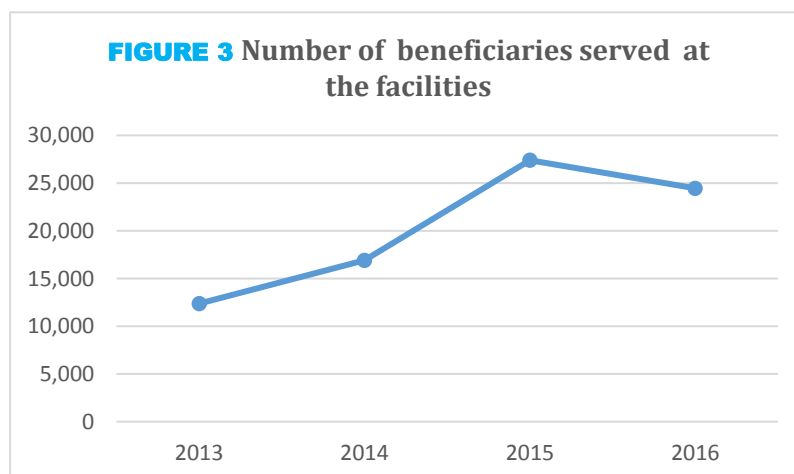
Effective social protection programs and services delivered

Centers and Institutions

MFO Indicator 3 Number of beneficiaries served at the facilities

TABLE 3 Summary of Performance along MFO Indicator 3

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
12,376	16,906	27,393	24,465	18,168	22,921	34.66%	Major deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	37%
2015 vs 2014	62%
2016 vs 2015	-11%
2016 vs 2013	98%

² CY 2016 MFO 1 Client Satisfaction Survey Results

Findings

The number of beneficiaries served in the residential care facilities almost doubled in 2016 compared to 2013. The huge increase in the number of served clients started in 2015, with 62% increase compared to the previous period.

- ✓ **Advocacy activities strengthened.** Some Field Offices experienced lower number of served clients as expected, mentioning strengthened advocacy activities and public awareness on SWD laws as factors that could have contributed to the accomplishment.
- ✓ **Surge in admission rates of PCDP.** Still, most Field Offices experienced considerably high number of served clients vis-à-vis their targets. Increasing admission rates, especially in the Processing Center for Displaced Persons (PCDP) wherein majority of clients are deportees from Malaysia, was among the main reasons of the surge. Likewise, slow discharge rate of some facilities also led to higher number of clients staying in the facilities.

Recommendations

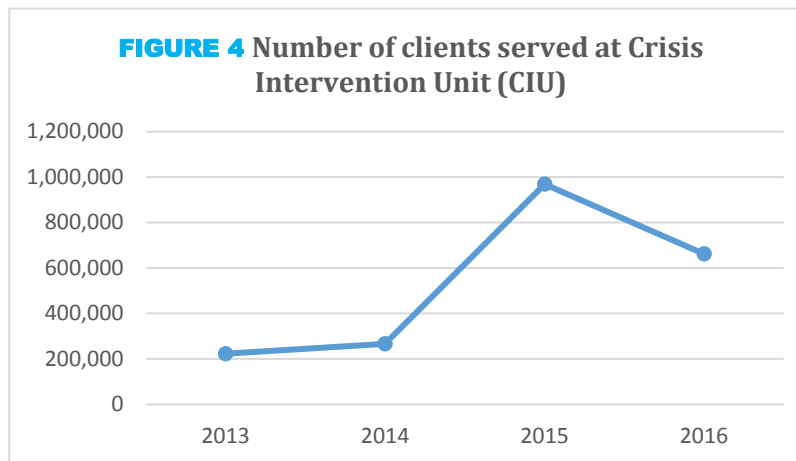
- ✓ **Ensure sufficiency of resources in the residential care facilities.** With the increasing trend of admission rates, human, and physical resource complement in residential facilities must be ensured to implement SWD services efficiently. Having appropriate client-to-staff ratio and bed capacity will facilitate faster and effective rehabilitation and reintegration of clients, and thus, would lead to faster discharge rates.
- ✓ In line with the above recommendation, **the Protective Services Bureau shall establish its strategies relative to increasing the number of facilities with “Centers of Excellence” status.**
- ✓ **Boost referral mechanisms.** To sustain/reinforce efficiency of provision of SWD services, boosting referral mechanisms with LGUs shall be done through continuous provision of technical assistance. Moreover, collaborative efforts among partners and conduct of advocacy activities shall be further strengthened as they are deemed paramount in decreasing, if not eliminating, various cases handled.

Assistance to Individuals in Crisis Situations

MFO Indicator 4 Number of clients served at Crisis Intervention Unit (CIU)

TABLE 4 Summary of Performance along MFO Indicator 3

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
223,341	266,342	968,720	662,848	103,844	632,637	538.31%	Major deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	19%
2015 vs 2014	264%
2016 vs 2015	-32%
2016 vs 2013	197%

Findings

Clients served through CIU have increased enormously compared to the baseline period. The targets on this indicator have been consistently breached since 2014. For CY 2016, the accomplishment deviated from the target by more the 500% (five times higher than the target). Record high was observed in 2015 due to the expanded AICS. Although guidelines on AICS operations was already enhanced and amended to efficiently and effectively address the needs of the increasing number of clients, targets for this indicator shall still be carefully planned/formulated.

Lack of manpower affect the operational efficiency of AICS. Partnership with different service providers nationwide facilitated the direct provision of assistance and service to clients. Still, limited manpower who will interview and assess the clients was one of the issues mentioned by the Field Offices.

Recommendations

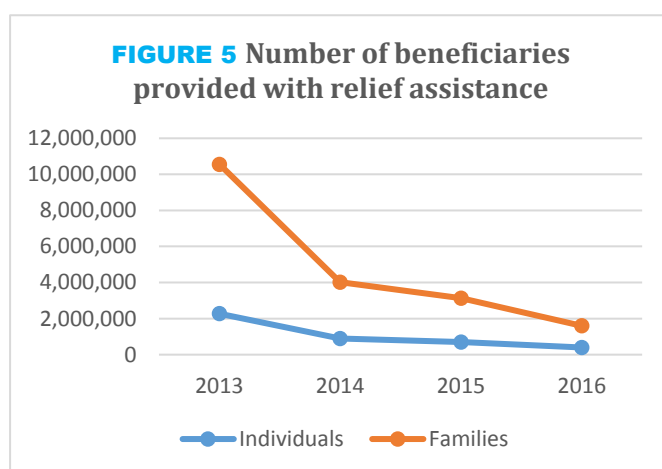
Assess the adequacy of human and physical resources. Given the increasing demand for protective services, the Protective Services Bureau together with the PDPB shall assess/study the resources (manpower, infrastructure) needed for the timely delivery of quality SWD services, especially those services delivered thru AICS operations.

Disaster Relief Operations

MFO Indicator 5 Number of beneficiaries provided with relief assistance

TABLE 5 Summary of Performance along MFO Indicator 5

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
2,270,910 families	890,311 families	696,807 families	398,074 families	ANA	661,731	-	Inconclusive
10,562,240 individuals	4,015,997 individuals	3,126,155 individuals	1,597,134 individuals	ANA	2,913,095	-	Inconclusive



Period	Comparative Decrease/ Increase	
	families	individuals
2014 vs 2013	-61%	-62%
2015 vs 2014	-22%	-22%
2016 vs 2015	-43%	-49%
2016 vs 2013	-82%	-85%

Findings

The number of beneficiaries provided with relief assistance has been constantly declining since 2014. This would suggest that lesser number of catastrophic disasters have hit the Philippines starting 2014 and hence fewer families and individuals needed relief assistance.

Most of the beneficiaries served in 2016 were victims of Typhoons Carina, Ferdie, Lawin, and Nina and those who were victims of drought brought by the El Nino phenomenon. Aside from this, disaster victims of armed conflicts, bombing incident in Davao City, and fire incidents were the disasters which needed were also provided with relief assistance.

Recommendations

- ✓ **Monitor the percentage of beneficiaries provided with assistance.** The percentage of families/individuals provided with assistance vis-à-vis the total number of individuals/families affected by disasters are not measured. Given this, the relative efficiency of disaster operations of the DSWD cannot be fully determined. With these setbacks, it is recommended to monitor not only the number, but also the percentage of

beneficiaries provided with assistance to truly determine DSWD's performance with respect to the population affected. Moreover, population-at-risk could be carefully studied to enhance/establish sophisticated targeting mechanisms for disaster operations.

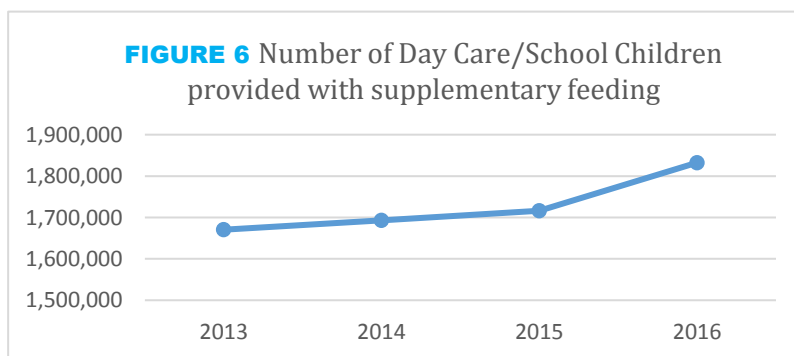
- ✓ **Engage the vulnerable families and communities in Disaster Risk and Response Management Activities.** It should also be noted that individuals who are vulnerable to disasters are likely to be poor – they live in high-risk areas, their houses are not strong enough to withstand typhoons, and will likely suffer from failed harvest and food insecurity caused by severe droughts. One way to improve their resiliency is to build or strengthen their capacity to respond to or mitigate the effects of disasters through engaging them in Disaster Risk and Response Management Activities.
- ✓ **Utilize the results of Family Risk and Vulnerability Assessment (FRVA).** The Field Offices shall encourage the LGUs to maximize the utilization of the results of FRVA in order to identify those families and communities who are prone to environment and disaster risks. Moreover, the results of the FRVA will guide the LGUs and communities in planning appropriate interventions for the vulnerable groups and in effectively executing disaster risk reduction and management activities – prevention, mitigation, preparedness, response, and recovery.

Supplementary Feeding Program

MFO Indicator 6 Number of Day Care/School Children provided with supplementary feeding

TABLE 6 Summary of Performance along MFO Indicator 6

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
1,670,466 out of 1,628,839 (102.56%)	1,692,843 out of 1,778, 274 (95.20%)	1,716,481 out of 2,006,549 (85.54%)	1,832,418 Cycle 5: SY 2015- 2016	2,053,383 Cycle 5: SY 2015- 2016	1,747,247	-10.76%	Minor deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	1.3%
2015 vs 2014	1.4%
2016 vs 2015	6.8%
2016 vs 2013	9.8%

Findings

Commencing 2013, the beneficiaries served through the SFP have been slightly increasing until 2016. This could be due to increasing population of age group served by the program. In 2016, almost 90% of the target number of beneficiaries were covered by the program.

- ✓ **Persistent operational problems challenge the implementation of SFP.** Unresolved issues experienced by the LGUs have always been affecting the implementation of the Supplementary Feeding Program. Efficiency and effectiveness of the intervention highly rely on the assumption that the Local Government Units have the capacity to implement the SFP efficiently. However, delayed implementation of some LGUs due to issues relative to liquidation of funds and challenges in procurement processes remain to be the concerns experienced by the LGUs implementers. In connection with that, lack of manpower to monitor the implementation and gather required documents at the local level also contributed to the delays.
- ✓ **Unexpected increase in enrollees magnified the accomplishments.** On the other hand, some Field Offices exceeded their targets due to increased number of enrollees in Child Development Centers.

Recommendations

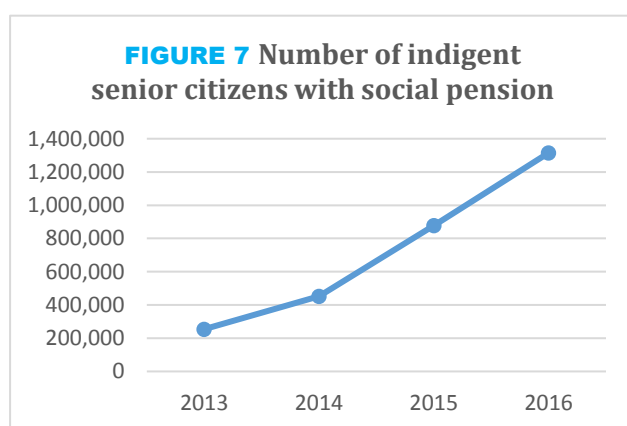
- ✓ **Deploy additional manpower at the local level to facilitate implementation monitoring.** Issues on the delays of could be resolved through intensive monitoring and provision of technical assistance to LGUs which will require additional manpower and other resources. With this, the Protective Services Bureau shall consider hiring additional manpower to be deployed at the local level.
- ✓ **Utilize results of process evaluation study on SFP for an evidence-based policy-making and planning.** With recurring implementation delays and operational issues of the Supplementary Feeding Program (SFP), the process evaluation study to be led by the PDPB is deemed important to delve deeper into the weaknesses and strengths of its design and its implementation performance. The results of the findings and recommendations of the study will aid the DSWD management in its program planning and policy-making, particularly on improving the design and implementation procedures of the program. In relation to this, the execution of the study will require strong support from the DSWD Management and important key stakeholders. The DSWD Management shall utilize the findings generated by the study to guide them in developing sound and evidence-based policies and directions on SFP.

Social Pension

MFO Indicator 7 Number of indigent senior citizens with social pension

TABLE 7 Summary of Performance along MFO Indicator 7

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
254,175	452,836	877,198	1,314,816	1,368,941	881,617	-3.95%	Minor Deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	78%
2015 vs 2014	93%
2016 vs 2015	50%
2016 vs 2013	417%

Findings

Due to expansion of coverage of the Social Pension program, the magnitude of served beneficiaries have increased tremendously compared to the baseline. In 2016, the Department was able to serve 400% more than 2013.

- ✓ **Issues caused by external factors exacerbated the challenges faced by DSWD relative to the implementation of Social Pension.** Freezing of fund releases due to election ban, issues with LGUs distributing pension through fund transfer modality (e.g. non-submission of fund utilization report), the recurring issue on the delayed/non submission of verified list which delays the processing of payrolls and other documents, and delayed pay-out at the local level were the main reasons for implementation delays.
- ✓ **Issues on program take-up was observed.** Non-appearance of social pensioners during the distribution of cash grants also affected the accomplishments.
- ✓ **Inadequate number Special Disbursing Officers impedes the operations.** Limited number of DSWD Field Office Special Disbursing Officers continue to be a challenge to cash advance the grants for pay-outs as mentioned by the Field Offices.

Recommendations

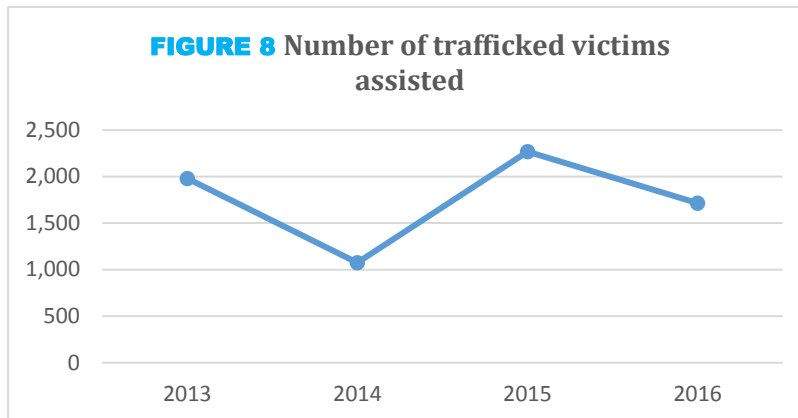
- ✓ **Intensify monitoring of LGUs implementing Social Pension.** To improve Social Pension's implementation, the Field Offices shall closely monitor LGUs which are implementing the program through fund transfer scheme. FOs shall proactively provide technical assistance to LGUs, most especially on liquidation of funds; liquidation trainings/workshops could be conducted if necessary. Coordination with LGU Office of Senior Citizens Affairs (OSCA), Federation of the Senior Citizens Association of the Philippines (FSCAP), and other associations is also recommended to improve efficiency of fund transfer scheme.
- ✓ **Improve awareness of eligible beneficiaries and mode of claiming of stipend to increase program take-up.** Ensure that information on schedules of the pay-outs are properly disseminated to improve presence of beneficiaries during pay-outs. Furthermore, other forms of conduits shall be explored and studied to improve the efficiency and take-up of benefits.
- ✓ **Ensure sufficiency of human resource.** Adequate workforce (e.g. Special Disbursing Officers) under the Field Offices shall be guaranteed by the Protective Services Bureau to deliver best results.
- ✓ **Operational gaps of the program shall be thoroughly investigated through a process evaluation study.** Based on the findings, the Social Pension suffers from numerous operational issues. The reasons emanating from operational delays as well as the facilitating factors in implementing the program shall be studied through a process evaluation study to come up with an evidence-informed reforms and policy/program enhancements.

Recovery and Reintegration Program for Trafficked Persons

MFO Indicator 8 Number of trafficked person assisted

TABLE 8 Summary of Performance along MFO Indicator 8

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
1,979	1,075	2,268	1713	1,800	1,685	-4.83%	Minor Deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	-46%
2015 vs 2014	111%
2016 vs 2015	-24%
2016 vs 2013	-13%

Findings

Based on the figure, it could be observed that the behavior of data over the years has been fluctuating, making it more difficult to forecast targets on this indicator. Although a negative deviation from the target was observed (-5%), the actual number of served clients is considered slightly close to the indicated target for CY 2016.

Advocacy activities helped to catalyze demand for RRPTP services. Field Office I attributed the higher number of clients served to the conduct of advocacy activities such as symposia and other public awareness raising activities on trafficking. Moreover, there is an increasing number of LGUs adopting RA 9208 helped in the accomplishments of the FO.

Recommendations

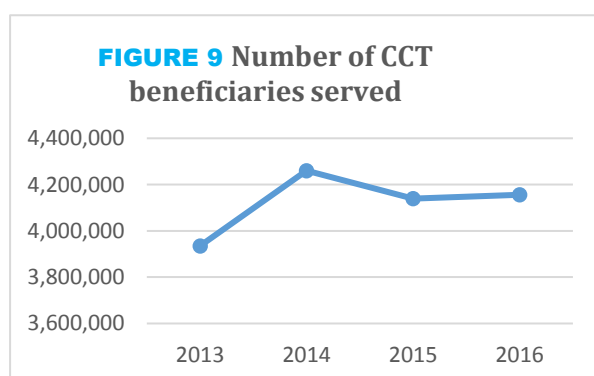
- ✓ **Improve targeting mechanisms.** As the program is a needs-based intervention, targeting the magnitude of clients to be served is challenging. A careful review of the cases over the previous years should be undertaken to establish the average number of TIPs recorded as well as the growth/decline rate in the number of cases registered to improve targeting. Common characteristics and circumstances faced by the victims should also be studied to predict the demand for the necessary interventions.
- ✓ **Strengthen advocacy activities and coordination mechanisms.** Advocacy and coordination activities should be strengthened to promote awareness not only at the local level as well as to its partner agencies through program orientation, forum, media activities, production and distribution of IEC materials to ensure target is met especially that the accomplishment rate for this indicator is decreasing. Furthermore, the number of clients served through RRPTP depends on the strength of referral mechanism and coordination with partner agencies and LGUs.

Pantawid Pamilyang Pilipino Program (Conditional Cash Transfer)

MFO Indicator 9 Number of CCT/MCCT beneficiaries served

TABLE 9 Summary of Performance along MFO Indicator 9

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
3,935,394 <i>CCT</i>	4,260,185 <i>CCT</i>	4,139,728 <i>CCT</i>	4,156,591 <i>CCT</i>	4,402,253 <i>CCT</i>	4,185,501	-5.58%	Minor deviation
	218,377 <i>MCCT</i>	238,034 <i>MCCT</i>	233,272 <i>MCCT</i>	238,377 <i>MCCT</i>	236,561	-2.14%	Minor deviation



Period	Comparative Decrease/ Increase	
	CCT	MCCT
2014 vs 2013	8%	9%
2015 vs 2014	-3%	-2%
2016 vs 2015	-0.4%	2%
2016 vs 2013	6%	9%

Findings

New directives on the program mainly caused the deviation. Based on the Secretary's pronouncement, no additional household beneficiaries (in lieu of the inactive beneficiaries) shall be included in Pantawid Pamilya for the 3rd and 4th quarter of 2016. The other reasons for the non-achievement of targets were due to the deactivation of HHs who no longer have eligible members. Other reasons include duplicates, waived, delisted, non-compliance GRS-inclusion error, and transfer of residence. Unclaimed cash grants was also among the reasons.

Recommendations

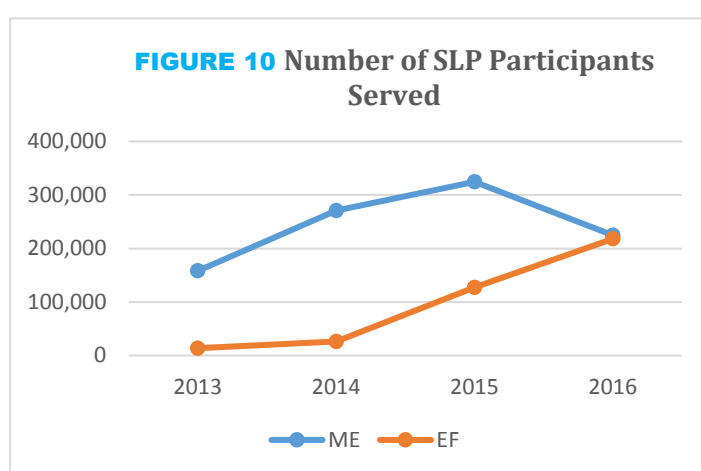
- ✓ **Directions on the Pantawid Program should be firmed up.** The management shall establish the medium-term plans and directions for the program. In connection with this, a careful evaluation of its operational consequences and impacts to Pantawid beneficiaries must be conducted prior to finalizing the plans for the program.
- ✓ **Improve monitoring of Pantawid beneficiaries.** The program must have a clear database/report on the number of HHs which were not compliant (and reasons for non-compliance) and the number of HHs which were not able to claim their grants. Constant monitoring and house visits shall be done to ensure accuracy of the list, compliance to the program, and demand for the intervention.

Sustainable Livelihood Program

MFO Indicator 10 Number of families assisted

TABLE 10 Summary of Performance along MFO Indicator 10

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
158,228 ME families	271,194	324,563	225,119	170,470	273,625	32.06%	Major deviation
13,758 EF families	26,362	127,539	218,040	208,352	123,980	4.65%	Minor deviation



Period	Comparative Decrease/ Increase	
	ME	EF
2014 vs 2013	71%	91%
2015 vs 2014	20%	384%
2016 vs 2015	-31%	71%
2016 vs 2013	42%	1485%

Findings

The figure suggests that the Sustainable Livelihood Program has been focusing more of its efforts on EF track than MD track since 2015. In fact, in 2016, the number of served participants through EF track is already statistically close to the number of those served under the MD track.

- ✓ **Data quality issues magnified the accomplishment of the program.** The higher accomplishment was mainly due to accounted beneficiaries served from other sources of funds especially disaster funds from typhoon Yolanda and Pablo wherein projects were only implemented in 2016 (Field Offices VI, VII, VIII, and XI). Further, according to FO NCR, Pantawid beneficiaries that were served under BUB fund source were also counted as accomplishment for Micro-Enterprise Development. Also, according to FO NCR, carry over cases e.g. SLP Associations organized in 2015 and were funded in the 1st semester of 2016 and the front loading of proposals in 2015 for the implementation in 2016, magnified the accomplishments of the program. FO X, on the other hand, mentioned that

livelihood/microenterprise projects that were submitted for FY 2015 were funded and realized only this year 2016, resulting to an increase of livelihood projects and overachievement of their target.

- ✓ **Various implementation challenges were observed.** Among the issues in the implementation are the inadequacy of human resource (e.g. issues on deployment of PDOs); encoding issues - some accomplishments not encoded thru the SLP-IS; insufficient demand - unavailability of jobs and companies to absorb the beneficiaries upon completion of trainings; accreditation of Civil Society Organizations before downloading of funds; and procurement issues.

Recommendations

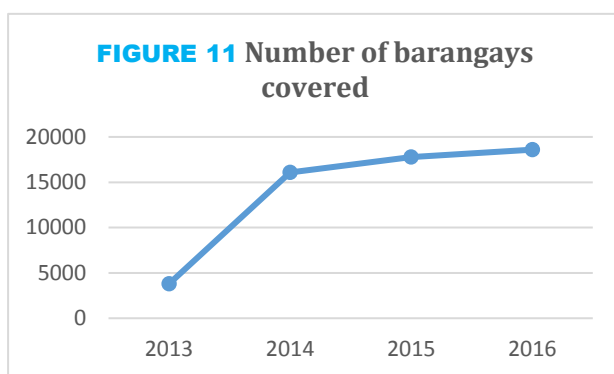
- ✓ **Improve accounting of accomplishments.** Unless issues on the data quality of accomplishments are resolved, the Department will not be able to accurately gauge the SLP's performance. Accuracy of data can be ensured through improving the program's monitoring mechanisms including, but not limited to, setting guidelines and parameters on accounting accomplishments (e.g. who will be counted as served beneficiaries in a specific period, counting carry-over cases) and improving the efficiency and utilization of SLP-IS.
- ✓ **Improve project-readiness of livelihood projects.** Delayed approval, funding, and procurement for livelihood projects affect the efficiency of project implementation. Low readiness result into late start-up of projects, hence, readiness must be ensured to pave way for smooth execution of projects.

KC-NCDDP

MFO Indicator 11 Number of areas covered

TABLE 11 Summary of Performance along MFO Indicator 11

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
12 regions	14 regions	14 regions	15 regions	15 regions	15 regions	0.00%	Full target achievement
36 provinces	57 provinces	58 provinces	58 provinces	57 provinces	48 provinces	1.75%	Minor deviation
159 munis	666 munis	759 munis	794 munis	771 munis	740 munis	2.98%	Minor deviation
3,796 barangays	16,080 barangays	17,770 barangays	18,593 barangays	18,210 barangays	17,481 barangays	4.08%	Minor deviation

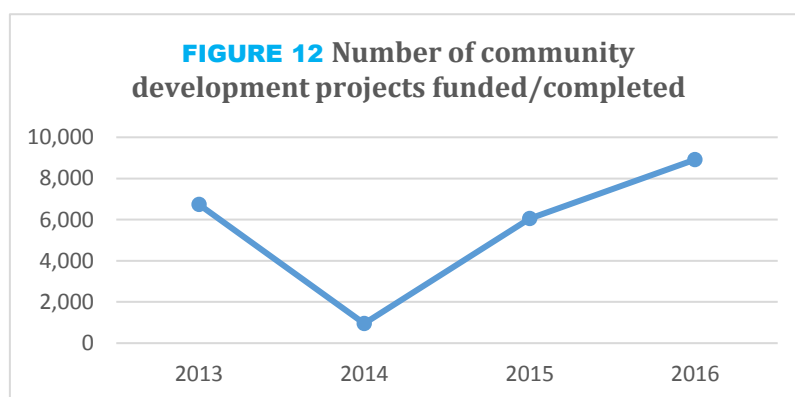


Period	Comparative Decrease/ Increase			
	regions	prov	munis	brgys
2014 vs 2013	17%	58%	319%	324%
2015 vs 2014	0%	2%	14%	11%
2016 vs 2015	7%	0%	5%	5%
2016 vs 2013	25%	61%	399%	390%

MFO Indicator 12 Number of community development projects funded/completed

TABLE 12 Summary of Performance along MFO Indicator 12

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
6,735	954	6,055	8,915	4,939	5,308	80.50%	Major deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	-46%
2015 vs 2014	111%
2016 vs 2015	-21%
2016 vs 2013	-9%

Findings

Various delays affected project completion and implementation. Implementation delays were caused by various reasons: delayed downloading of funds; outstanding unliquidated and incomplete projects of barangays; majority of the municipalities engaged are new partners/implementers of the program; incomplete staffing complement especially on the field staff; geographically challenging areas and highly-urbanized and populated barangays; unsafe and not secure barangays due to threats from non-state groups.

Recommendations

Intensify technical assistance and monitoring of projects. Technical assistance should be prioritized in areas with delayed subproject implementation. Weekly updates could be reported to actively signal potential delays in implementing sub-projects.

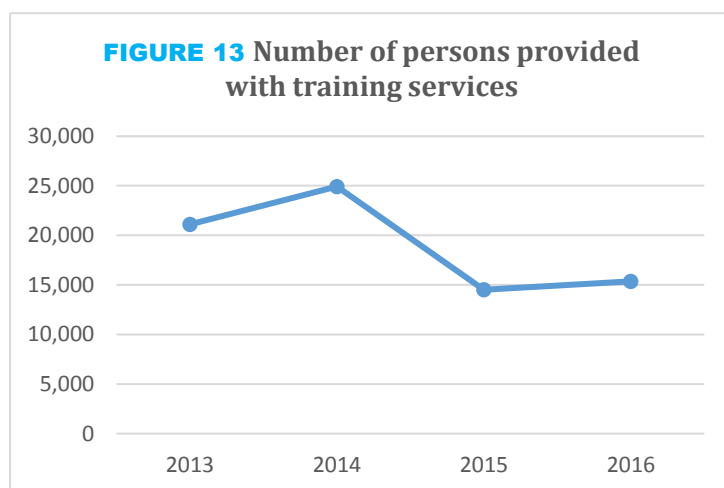
Major Final Output 3

Responsive capacity-building services to intermediaries provided

MFO Indicator 13 Number of persons provided with training services

TABLE 13 Summary of Performance along MFO Indicator 13

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
21,101	24,923	14,512	15,372	7,892	18,269	94.78%	Major deviation

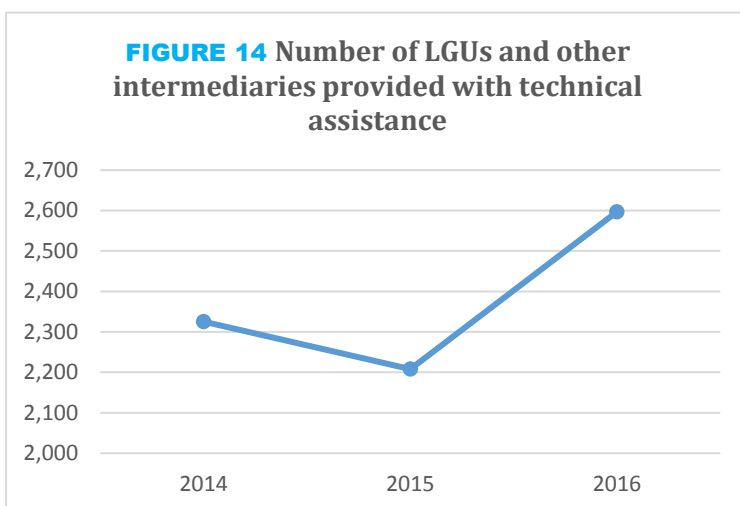


Period	Comparative Decrease/ Increase
2014 vs 2013	18%
2015 vs 2014	-42%
2016 vs 2015	6%
2016 vs 2013	-27%

MFO Indicator 14 Number of LGUs and other intermediaries provided with technical assistance

TABLE 14 Summary of Performance along MFO Indicator 14

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
-	2,325	2,208	2,597	811	2,377	220.22%	Major deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	n/a
2015 vs 2014	-5%
2016 vs 2015	18%
2016 vs 2013	n/a

Findings

15,372 persons were provided with training services this period, 95% higher than the target (Table 12). On the other hand, 2,597 LGUs were provided with TA, exceeding the target by 220%. Based on the previous accomplishments on these indicators, the targets set for 2016 are relatively too low.

- ✓ **Unplanned activities and activities conducted using other fund sources inflated the accomplishments.** Undertargetting issues arising from unplanned activities were the primary reasons for the deviation. Moreover, inclusion of those trainings conducted with fund source other than the FOs' direct release affected the accomplishments.
- ✓ **Duplication of accomplishments and carry-over activities magnify the data reported.** Aside from undertargetting, another issue to be addressed is the duplication of the reports reflected. Instances where training participants who have attended more than one (1) training service were counted more than once, hence inflating the data. In addition, conduct of carry-over capability building activities from 2015 also caused the overaccomplishment.

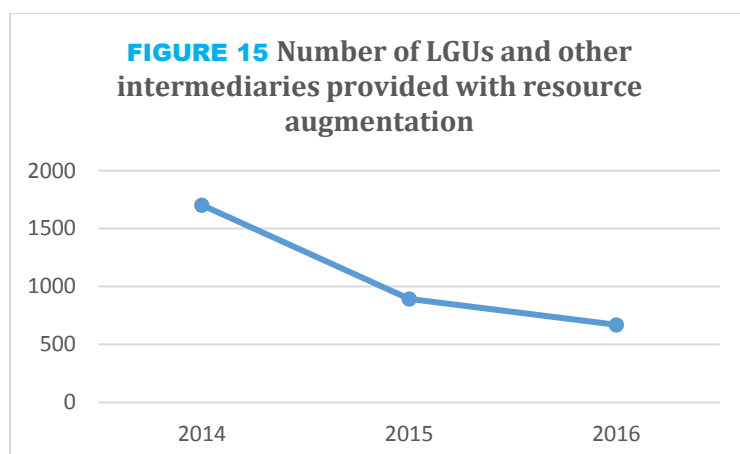
Recommendations

Improve planning and monitoring of activities. The huge deviations emanated from undertargetting could be resolved through improving planning of activities. Data quality issues, on the hand, could be lessened through establishing a standardized monitoring mechanism of participants of capacity building activities.

MFO Indicator 15 Number of LGUs and other intermediaries provided with resource augmentation

TABLE 15 Summary of Performance along MFO Indicator 15

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
-	1703	892	670	658	1088	1.82%	Minor deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	n/a
2015 vs 2014	-48%
2016 vs 2015	-25%
2016 vs 2013	n/a

Findings

This period, the Department was able to provide resource augmentation to 670 LGUs and other intermediaries, almost 2% higher than the target. Based on Figure 15, it could be observed that the indicator has been continuously decreasing since 2014. This could be associated to the decreasing number of clients served through disaster relief assistance.

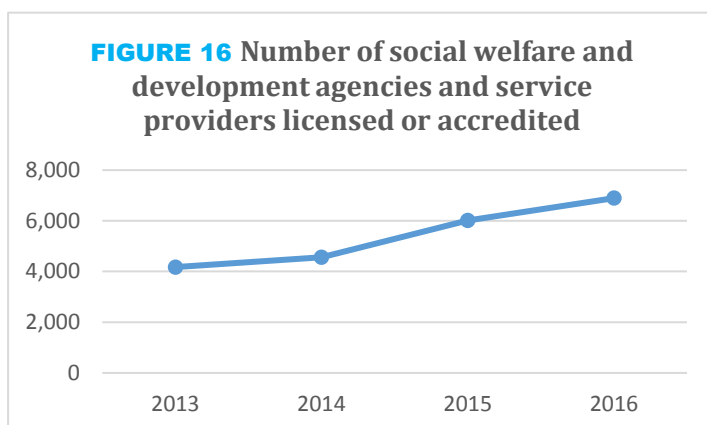
Major Final Output 4

Effective regulatory services enforced

MFO Indicator 16 Number of social welfare and development agencies and service providers licensed or accredited

TABLE 16 Summary of Performance along MFO Indicator 16

Accomplishment				Target	2014-2016 Average Accomplishment	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016			
4,176	4,568	6,013	6,894	5,794	5825	18.21%	Minor deviation



Period	Comparative Decrease/ Increase
2014 vs 2013	9%
2015 vs 2014	32%
2016 vs 2015	15%
2016 vs 2013	65%

Findings

The number of SWDA and service providers licensed or accredited by the Department have grown by more than half since 2013.

Enabling laws helped in the accomplishment. The higher number of accomplishment is attributed to the enhanced tool for the granting of recognition to Child Development Centers (CDCs) offering early childhood programs for 0 to 4 years old children based on RA 10410 otherwise known as Early Years Act. Moreover, the increased number of SWDAs and SWAs applying for accreditation was also due to RA 10847 requiring them to be accredited.

IV. PROGRESS ON DSWD OUTCOMES

Intermediate Outcome 1

Dynamic organization with a culture of excellence exhibited

IO Indicator 1 No. of innovations initiated and documented

The indicator counts the documentations of innovations by Field Offices and Central Offices/Bureaus/ Services which were submitted to Capacity Building Bureau (CBB), reviewed and returned to FO/OBS for enhancement, returned and packaged by CBB and shared through uploading to the Knowledge Exchange Portal and Knowledge Exchange Center YouTube account.

TABLE 16 Summary of Performance along IO Indicator 1

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
TBD	0	16	5	5	0.00%	Full Target Achievement

Findings

2016 target was fully achieved although it could be noted that the accomplishment is too low compared to the previous year's accomplishment. The innovations/potential good practices following the standards on good practice documentation are as follows:

-
- 1. Pantawid Pamilya Lecture Series 2015: Good Practice on Providing Lecture Series for the Pantawid Pamilyang Regional Program Management Office Staff (FO CAR)*
 - 2. Project Power: A Good Practice on the Automated Financial Reporting (FO V)*
 - 3. All for One, One for "Two" (FO XI)*
 - 4. Automated System Training and Technical Assistance Report Online XI (FO XI)*
 - 5. Towards a Progressive and Sustainable Healthy Community: A Good Practice in Promoting Self-Governance and Cooperation in Community Development Through Indigenous System and Practices Among Pantawid Pamilya Partner Beneficiaries of Tacadang, Kibungan, Benguet*
-

Increased awareness on good practice documentation was helped in the achievement of the objective. Raising awareness on documenting innovations was mentioned to contribute positively to the objective. As a result of technical assistance, awareness of staff on the importance of innovations and documenting them led to more creation of innovations.

Recommendations

- ✓ **Strengthen Information Dissemination.** Similar to the recommendation mentioned in the previous assessment, the need to enhance the information dissemination of these products in the whole organization is relevant for other Offices to appreciate and/or subsequently adopt such practices in their own operations. With this, the Offices will be able to assess if the developed innovations are replicable or could be considered as good practice.
- ✓ **Continuously provide technical assistance.** The Capacity Building Bureau/Capacity Building Units should continuously provide technical assistance to OBS and FOs on documenting innovations and good practices so as to sustain and/or surpass the previous accomplishments.
- ✓ **Strengthen awareness of Offices on importance of innovations and good practices.** Importance and purpose of innovations and good practices should be emphasized in order to engage and gain the support of Offices and staff in developing them.

Intermediate Outcome 2

Delivery of coordinated social welfare and development programs by LGUs improved

IO Indicator 2 Percentage of LGUs with fully-functional Local Social Welfare and Development Offices

The indicator quantifies the overall progress/improvement of performance of LSWDOs on delivery of SWD assessed through the functionality assessment tool.

TABLE 17 Summary of Performance along IO Indicator 2

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
TBD	1.41%	8.58%	15.36%	49.39%	-68.90%	Major deviation; Underaccomplished
	(15 Fully Functioning LSWDOs out of 1061 LGUs assessed)	(91 Fully Functioning LSWDOs out of 1061 LGUs assessed)	(163 Fully Functioning LSWDOs out of 1061 LGUs)	(524 Fully Functioning LSWDOs out of 1061 LGUs assessed)		

**Based on the updated SG 3 report as of May 2016*

Findings

- ✓ **Relatively few Local Social Welfare and Development Offices have reached fully-functional level by end of 2016.** Table 2 above shows that as of this period, only 163 LSWDOs were assessed as fully functional which is far from the target of 524³ fully-functioning LSWDOs. Given the huge discrepancy and the nature of challenges experienced by the Field Offices and Local Government Units along the functionality of LSWDOs, the goal of increasing the number of fully functioning LSWDOs to 524 was difficult to achieve.
- ✓ **Financial resources for the implementation of critical activities are lacking.** Still, a recurring reason behind the low accomplishment on this indicator, as mentioned by the Field Offices, was the insufficient fund support for critical activities such as TARA monitoring activities and incentive provision for fully-functional LSWDOs. Budget – a critical component for the conduct of Strategic Goal 3 activities- was deemed insufficient and delayed, thus impeding the delivery of outputs necessary for the improvement of LSWDO functionality.
- ✓ **Issues on scheduling activities was observed.** One of the major themes emerging as a hindering factor of the achievement of the outcome was the issue on scheduling activities.

³ Based on the annual targets of DSWD Planning Tool submitted by OPG/SG3 TWG as of March 2015

This includes issues on scheduling the assessment/validation and TARA activities. Functionality assessment and TARA activities of some Field Offices were delayed due to elections and conflict of schedules among the Regional Monitoring Teams (RMTs).

- ✓ **Data quality of assessment results may be affected by issues on administering the tool.** Variation on functionality scores due to different interpretation of RMTs on some indicators and means of verification was found out by FO IV-A. FO VI, on the other hand, commented that the LSWDO functionality tool is not user-friendly.
- ✓ **Some of the functionality indicators are difficult to meet given the current manpower/staffing in LSWDOs.** Another factor for the non-achievement of targets is the inadequacy of manpower in LSWDOs. Hiring of registered social workers for LSWDOs was affected due to insufficiency of Personnel Services budget of LGUs.
- ✓ **Lack of focused monitoring of SG 3 monitoring team and non-compliance to agreements affected the accomplishments.** FO IV-B mentioned failure of SG 3 monitoring to conduct regular meetings (for planning and updating) and non-compliance to agreements as factors contributing to slow progress of SG 3 in their region.
- ✓ **Institutional arrangements for SG 3 remains to be unclear.** Unclear roles of Regional Monitoring Teams and lead division/office on SG 3 negatively affects implementation of activities.

Recommendations

- ✓ **Capacity Building Plan/Program for LSWDOs shall be developed.** The Department shall develop a capacity building plan/program for LSWDOs as to clarify the process of implementation of TARA, incentive system, Monitoring & Evaluation, and other activities that would contribute to the improvement of functionality level of LSWDOs. Unless a definite plan/program is developed, issues on institutional arrangements in DSWD Central Office and Field Offices, schedule of activities, and accountabilities would still persist. Along with the program development, the theory of change and results framework of the program shall be formulated to facilitate planning and M&E. In addition to this, business process maps shall be developed to further clarify the process flow of outputs to be delivered and institutional arrangements. These tools would improve transparency and accountability mechanisms relative to TARA outcomes.
- ✓ **Adequate fund support shall be provided to the Field Offices in a timely manner.** The Central Office shall ensure timely and adequate provision of funds to the Field Offices to efficiently implement TARA Plans and relevant monitoring activities.

- ✓ **DSWD shall strengthen its efforts to forge partnership with DILG.** The Department, through the Standards Bureau, should work towards having a JMC with DILG that would require LSWDOs to comply with the functionality standards, i.e, including LSWDO functionality as a criterion for DILG's Seal of Good Governance. This, together with the incentives, would facilitate better compliance of LCEs/LGUs on LSWDO functionality.

Intermediate Outcome 3

Services of licensed private social welfare agencies improved

The following indicators of intermediate outcome 3 are used to assess the improvement in accreditation levels and increase in number of accredited agencies, both DSWD and locally-managed, since these indicate the improvement in the delivery of services of SWDAs to its target clients.

IO Indicator 3.1 Percentage of licensed private social welfare agencies with accreditation increased

TABLE 18 Summary of Performance along IO Indicator 3.1

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
TBC	23.4%	28.2%	25.3%	10 PP increase against PY*	-	Deteriorated
		4.8 PP increase against PY	2.9 PP decrease against PY		Deviation will be computed by EO 2016	
	(326 out of 1395)	(394 out of 1395)	(365 out of 1442)			

*Percentage points increase against previous year

IO Indicator 3.2 Percentage of accredited private social welfare agencies under Level 1 moved to Level 2

TABLE 19 Summary of Performance along Indicator 3.2

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	1 st Sem 2016	2016		
68 SWAs	No data	No data	1.8%	5 PP increase against PY*	Not applicable	Inconclusive
			(2 out of 11)			

IO Indicator 3.3 Percentage of accredited LGU-managed facilities increased

TABLE 20 Summary of Performance along IO Indicator 3.3

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
TBC	11.8% <i>Residential Facilities</i> (24 out of 203)	24.6% <i>Residential Facilities</i> 12.8 PP increase against PY (50 out of 203)	19.7% <i>Residential Facilities</i> 4.9 PP decrease against PY (48 out of 244)	54.6% <i>Residential Facilities</i> 30 PP increase against PY	-63.92%	Deteriorated
TBC	28.3% <i>Senior Citizens Center</i> (248 out of 876)	28.1% <i>Senior Citizens Center</i> 0.2 PP decrease against PY (246 out of 876)	25.3% <i>Senior Citizens Center</i> 2.8 PP decrease against PY (188 out of 743)	58.3% <i>Senior Citizens Center</i> 30 PP increase against PY	-56.60%	Deteriorated
TBC	4029 <i>DCCs</i>	4831 <i>DCCs</i>	No data	<i>Day Care Centers**</i> 30 PP increase against PY	Not applicable	Inconclusive

Findings

- ✓ **Most of the accomplishments along intermediate outcome 3 had deteriorated.** The decline in accomplishments for the indicators of intermediate outcome 3 were due to expiration of validity of SWDAs accreditation.
- ✓ **Existing guideline/s do not clearly mandate accredited Level 1 SWAs to comply with Level 2 or higher levels of accreditation.** There had been few Level 1 SWAs which moved to level 2 despite efforts (e.g. lobbying) since SWAs are not mandated and forced to push for level 2 accreditation. Standards Unit can only encourage SWAs to aspire for a higher level of accreditation.

Recommendations

- ✓ **Adjust the targets accordingly.** Given the current accomplishments, a scientific and evidence-based target-setting by the Standards Bureau, in coordination with PDPB, should be done to make the aforementioned targets more realistic and attainable.

- ✓ **Report additional indicators that will further substantiate the improvement of delivery of services of private SWAs.** The % of private SWAs under level 1, level 2, and level 3 may be reported to be able to infer on the improvement and status of accredited private SWAs.
- ✓ **Provide incentives to SWDAs with higher levels of accreditation.** The Standards Bureau may consider establishing an incentive system to motivate the SWDAs to aspire for higher levels of accreditation.
- ✓ **Revisit the guidelines on accreditation of SWDAs.** The Standards Bureau may want to amend the guidelines on accreditation SWDAs so that they will be mandated to comply with higher levels of accreditation.
- ✓ **Database on SWDAs shall be in place in all Field Offices.** The Standards Bureau shall ensure that the Field Offices have a database of SWDAs/LGUs with valid registration/license/accreditation to aid in efficient monitoring. As much as possible, this system should be uniform across FOs. Relative to this, the data on DCCs, particularly on the universe and cumulative percentage of accreditation, should be further established and effectively monitored.
- ✓ **Rigorously monitor and regularly provide technical assistance and resource augmentation.** Field Offices shall strengthen their monitoring activities relative to accreditation of SWDAs/LGUs and provide necessary technical assistance and/or resource augmentation to encourage them towards improving their accreditation status.
- ✓ **Intensify the mobilization of ABSNets.** The ABSNets play an important role in pushing for accreditation of SWAs. With this, it is recommended that mobilization of ABSNet be continuously strengthened and monitored by the Department.

Intermediate Outcome 4

Rights of the Vulnerable Sectors Promoted

IO Indicator 4.1 Percentage of malnourished children in day care centers with improved weight

Indicator 4.1 measures the benefits gained by malnourished day care children as one of the vulnerable sectors that the Department caters to, thru the Supplementary Feeding Program. Improved weight among the malnourished day care children indicates that the right of children for food and good health is being addressed.

TABLE 21 Summary of Performance along IO Indicator 4.1

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
TBD	TBD	97.69% (218,453 out of the 223,623 severely underweight and underweight children)	80.03% (218,453 out of the 223,623 severely underweight and underweight children)	80%	0.04%	Full Target Achievement

Findings

- ✓ **Delayed program implementation of LGUs and lack of standardized timeline for starting feeding sessions affect the quality of data reported.** Computation of accomplishments of some LGUs is delayed due to delayed program implementation. Also, other LGUs are including previous cycle's accomplishments leading to inaccuracy of some data reports. Lack of standardized timeline for starting feeding sessions also affect the reporting scheme of SFP.
- ✓ **Lack of technical staff who will provide TA to implementers and who will monitor and evaluate the program outcomes hamper the accomplishments.** Issues relative to liquidation of funds and procurement processes of LGUs still remain to be the concerns in implementation of SFP. But, lack of technical staff who will provide technical assistance along the said concerns worsens the situation. Furthermore, technical staff who would be tasked to monitor the implementation and provide feedback from the ground are inadequate.

Recommendations

- ✓ **Clarify in the guidelines when should the feeding activities start.** Protective Services Bureau shall clarify in the guidelines when the feeding should start so as to aid standardization of feeding implementation. This could also simplify the reporting/monitoring scheme for the program and ease monitoring of program outcomes.
- ✓ **Intensify technical assistance on liquidation and procurement.** Issues on procurement and liquidation had long been the culprit of delayed implementation of SFP. This affected not only the delivery of the outputs, but also the accomplishment of nutritional outcomes of children beneficiaries. Given this, it is recommended to intensify the trainings/technical assistance to City/Municipal/Barangay LGUs and Child Development Centers/Supervised Neighborhood Play Parent Groups on liquidation and procurement procedures. Along with this, PSB shall ensure that there is adequate manpower who will monitor program implementation and provide technical assistance to the implementers.
- ✓ **Observe and document good practices of LGUs which were able to implement the program efficiently.** Facilitating factors should be observed as much as we want to capture issues along program implementation in order to learn and gain knowledge from what works. The Department shall reflect on lessons drawn from existing good practices of LGUs to improve management of SFP.
- ✓ **Review and strengthen the incentive measures being performed.** Current monetary incentive provided to SFP focal persons should be examined to determine if it has yielded significant influence to implementers' performance. Furthermore, whilst monetary incentives are already being provided, the PSB may also consider strengthening the incentive mechanism of SFP through performing other incentive measures such as disincentives (sanctions) and non-material incentives (awards and recognitions) to boost the performance of focal persons and the LGU implementers in general. Lack of sanctioning measures can weaken performance while reinforcing non-material incentives – recognizing and appreciating staff's efforts – can drive individual performance and bolster full cooperation in program implementation.
- ✓ **Conduct an impact evaluation study to objectively assess and quantify changes in the situation of beneficiaries.** With several years of implementation, the SFP is in dire need to be evaluated to delve deeper into the weaknesses and strengths of its design and its implementation performance. Moreover, an impact evaluation study shall be undertaken to quantify the nutritional outcomes that are attributable to the program alone.

IO Indicator 4.2 Percentage of clients in residential care facilities rehabilitated**TABLE 22** Summary of Performance along IO Indicator 4.2

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
19,510 clients	67.7% (13,324 out of 19,079)	69.39% (18,208 out of 26,240)	76.14% (27,270 out of 20,764)	30%	153.80%	Major deviation

Findings

- ✓ **Slow rehabilitation for some cases was observed due to behavior and nature of cases of clients served.** Some clients experienced prolonged rehabilitation process due to slow movement of cases with ongoing trial which was exacerbated by the behavior of some clients such as Children in Conflict with the Law (CICLs). Moreover, mentally challenged clients in Elsie Gaches Village and improved mental patients in Sanctuary Center also undergo lengthy rehabilitation due to the nature of their cases.
- ✓ **Centers with higher levels of accreditation may positively affect rehabilitation processes.** FO CARAGA associated the rapid rehabilitation of clients with the accreditation level of its center. Being a level 3-accredited center or Center of Excellence, Home for Girls has well-equipped facilities and properly trained center staff making rehabilitation processes more efficient. As mentioned by the FO, this allowed more room for clients to be rehabilitated.

Recommendations

- ✓ **Institutionalize the Social Functioning Indicators tool to improve monitoring and targeting of rehabilitation outcomes.** Rehabilitation processes have various breadth and complexity for each type of client and thus would entail differences in expected rehabilitation timeframe for various clients. Still, only a single target for the indicator - "Percentage of clients rehabilitated" - was formulated; it was not disaggregated by type of client served (and by sex).

It is recommended that different targets are set for each type of client served. Furthermore, it is suggested that formulation of targets be based on the scores of clients obtained through the Social Functioning Indicators (SFI) tool. The tool would not only facilitate monitoring rehabilitation, but would also improve the mechanism for estimating the number of rehabilitated clients for a specific timeframe.

Moreover, relative the new administration's efforts along reintegration and rehabilitation of drug dependents, the SFI tool would play a critical role in monitoring the outcomes of the aforementioned program.

Ultimately, institutionalizing the SFI tool would pave way for standardization of rehabilitation processes and assessment of rehabilitation status of clients. This would ensure that FOs and Centers will have a common understanding and concrete set of criteria in tagging a client as rehabilitated or not.

- ✓ **Ensure adherence to residential care service standards and rehabilitation plans to improve rehabilitation outcomes.** Consistent with the Thrusts and Priorities of the Department for 2017, residential care facilities must be assessed according to standards on residential care service to ensure quality services are provided to clients. In line with this, the Standards Bureau, together with the Protective Services Bureau, shall clarify/update the timelines, procedures and institutional arrangements on the upcoming assessment and validation of accreditation levels of centers.

On the other hand, assessing adherence to rehabilitation plans shall also be conducted by PSB to ensure that social workers are employing structured methods and evidence-based guidelines in rehabilitating clients. Social workers shall conform to rehabilitation practices empirically supported by evidence-based guidelines to ensure effectiveness of interventions and to fast-track rehabilitation of those clients who are relatively difficult to rehabilitate (e.g. CICLs with unacceptable behavior, mentally-challenged patients).

- ✓ **Evaluate effectiveness of rehabilitation services.** While making residential facilities as Centers of Excellence is critical to ensure that standards in providing residential care services are followed, it is equally important to evaluate whether the rehabilitation interventions given to clients are indeed effective. It is theorized that Centers of Excellence are implementing rehabilitation services as planned; however, there is no strong evidence to conclude that rehabilitation services provided by Centers of Excellence cause positive rehabilitation outcomes. A rigorous evaluation study (e.g. through *randomized controlled trials*) must be conducted to have a meaningful understanding of rehabilitation outcomes and to establish causal relationship of a specific rehabilitation intervention and rehabilitation success.

Intermediate Outcome 5

Capacities of Poor Families in Accessing Opportunities to Move their Level of Well-Being Improved

Indicator 5.1 Percentage of Pantawid Pamilya families uplifted from (1) Level 1 to Level 2; (2) Level 2 to Level 3; and (3) Level 1 to Level 3

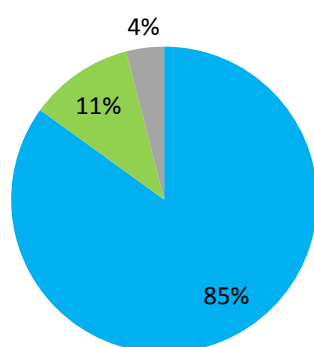
Indicator 5.1 quantifies the Pantawid Pamilya families uplifted to a higher level of well-being (determined by Social Welfare and Development Indicators Tool) and is a direct indicator that their economic and social status had improved.

TABLE 23 Summary of Performance along IO Indicator 5.1

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	1 st Sem 2016	2016		
-	-	149,729 Pantawid families at level 1	149,729 Pantawid families at level 1	Level 1 to Level 2 TBD	Not applicable	Inconclusive
-	-	3,156,829 Pantawid families at level 2	3,156,829 Pantawid families at level 2	Level 2 to Level 3 TBD	Not applicable	Inconclusive
-	-	389,327 Pantawid families at level 3	389,327 Pantawid families at level 3	Level 1 to Level 3 TBD	Not applicable	Inconclusive

FIGURE 16 Distribution of Wellbeing Levels of Pantawid Families, as of EO 2015

■ Level 2 ■ Level 3 ■ Level 1



Huge proportion of Pantawid families have SWDI index equal to level 2. It can be noticed in the figure that most of the Pantawid families' well-being level are in level 2. Furthermore, only 4% of them are at level 1. Hence, it could be also expected that a huge number of Pantawid families shall be moving to level 3.

IO Indicator 5.2 Percentage of poor families [HHs] benefitting from two (2) or more SWD services

TABLE 24 Summary of Performance along IO Indicator 5.2

Accomplishment				Target	% Deviation from 2016 Target	Assessment
2013	2014	2015	2016	2016		
3.9 million families enrolled in Pantawid Program	86.29% (4,534,870 out of 5,255,118)	79.05% (4,154,159 out of 5,255,118)	92.14% (4,842,095 out of 5,255,118)	100% Increase the no. of NHTS-PR identified poor families covered by at least two SWD Programs from 3.9 M to 5.2 M by 2016	-7.86%	Minor Deviation

Findings

- ✓ **Non-submission of monitoring reports affected the data quality.** Some FOs were not able to compute for the accomplishments on this indicator because programs, especially those without Information Systems (KC-NCDDP, SFP, E-AICS) do not always submit monitoring reports.
- ✓ **Issues on reporting and non-utilization of NHTS-PR in identification of beneficiaries still arise.** Issues on non-prioritization of NHTS-PR database of National Government Agencies and Local Government Units still pose a major challenge on provision of SWD services to the target households. Furthermore, accounting of SWD services received from partners was also a main struggle in determining the accomplishments.
- ✓ **Some intended beneficiaries were not provided with any social welfare and development programs/services.** Indeed, the Department was able to reach huge number of beneficiaries but there are still households who do not receive at least one (1) SWD program/service.
- ✓ **Changes in location/residences beneficiaries and difficult terrains in the regions with Geographically Isolated and Disadvantaged Areas (GIDAs) hinder the provision of SWD services.** Difficulty of locating and providing SWD services were experienced due to transfer of location/residence of some beneficiaries. Added to the challenges in provision of services was the difficulty of terrain in GIDAs.

Recommendations

- ✓ **Tap the regional sub-committee on Social Protection.** The regional sub-committee on SP under the Regional Development Committee is a good venue to facilitate monitoring and accounting of all services provided to the NHTS identified poor. The committee can also be used as venue to advocate the use of NHTS-PR database along the provision of various SWD services by other agencies.
- ✓ **Strengthen the promotion and utilization of NHTS-PR database.** The NHTS-PR identified poor list should be utilized by all programs, LGUs, NGAs and other stakeholders in identification and provision of SWD programs/services. The Department shall engage and monitor its partners and stakeholders to comply with the Memorandum of Agreement relative to data utilization of Listahanan poor list.
- ✓ **Establish a reliable database system.** The Policy and Plans Group shall develop a reliable database system for the indicator in order to immediately address the issues encountered by the Field Offices, particularly on recording and accounting the SWD services received by the target clients from partners as well as from the DSWD.
- ✓ **Monitor accomplishments of DSWD ARMM.** The Department shall immediately request DSWD ARMM for their accomplishments to be able to accurately monitor and assess DSWD's progress on this outcome.

IV. Assessment of Important Assumptions and Risks

Achieving positive development outcomes is contingent on satisfying several assumptions identified in the Overall Results Framework. Based on the findings, assumptions on the following areas affected the achievement of the Department's intended results:

Local Government Units' capacity to deliver social protection programs and services. As observed above, one of the major factors affecting several development outcomes were the implementation delays caused by the inadequate capacity of LGUs in delivering SP programs and services. Issues relative to the implementation of devolved SP programs and services (e.g. SFP) and those programs which are delivered thru the LGUs (e.g. Social Pension) have been stubbornly persistent.

Cooperation and convergence among LGUs, NGAs, other partners and stakeholders. Lack of cooperation from the LGUs/Local Chief Executives are frustrating the Department's aspirations of realizing the outcomes, especially on improving the functionality of the Local Social Welfare and Development Offices. As observed, unwillingness and lack of support of LGUs in complying with the set functionality standards hamper DSWD's targets.

Reaching the outcomes will also require convergence with partners and stakeholders. Despite efforts made to pursue external convergence, familiar issues still persist which negatively affected the attainment of the Department's goals, particularly on increasing the no. of NHTSPR-identified poor families covered by at least two SWD Programs to 5.2 Million by 2016, as reflected in the findings above.

Monitoring of these critical assumptions is extremely important to ensure the attainment of the organizational outcomes. While qualitative findings and observations are indicative of whether or not the assumptions in the ORF hold true, a more comprehensive tool – such as a risk monitoring tool – shall be developed to gather adequate evidence on the extent of satisfying the assumptions.

IV. Overall Assessment

For CY 2016, only two (2) organizational outcomes were delivered successfully; the Department was less successful at achieving other outcomes. Based on the findings, targets for the organizational outcome “Dynamic organization with a culture of excellence exhibited” and “Rights of the vulnerable sectors promoted” were successfully achieved by the Department.

On the other hand, performance was lackluster on the outcomes namely “*Delivery of coordinated social welfare and development programs by LGUs improved*” and “*Services of licensed private social welfare agencies improved.*” These outcomes will be highly unlikely to be achieved unless extraordinary efforts and strategies will be done in 2016. However, the recommendations made per outcome in the earlier section may be considered to improve the Department's accomplishments by the end of the year.

Lastly, data on the indicator of “*Capacities of Poor Families in Accessing Opportunities to Move their Level of Well-Being Improved*” are insufficient to conclude about the performance of the Department for this period.

The Department showed impressive performance in delivering the Major Final Outputs; however, implementation issues still remain. The Department successfully accomplished and even breached its targets for 29 out of the 36 MFO indicators (with available data) in CY 2016. Operational efficiency of the Department, however, can be weighed down by implementation challenges especially on those programs and services which are devolved to the Local Government Units. It was recognized that accomplishments of the Department are

highly dependent on capacities of LGUs in delivering most of the results. Findings have shown that capacity of Local Government Units in implementing SWD programs and services, such as Supplementary Feeding Program and Social Pension, greatly affects DSWD's accomplishments. Still, there are considerably high number of LGUs which are lagging on program implementation due to their current capacity. The lingering effects of delayed liquidation, procurement, and report submission of LGUs are affecting the quality and timeliness of program implementation.

The Department suffers from weak target setting. It was found out that most of the intermediate outcome accomplishments relative to accreditation of SWDAs and functionality of LSWDOs are far less than the targets while others are deteriorating. Some of the Major Final Outputs 3 & 4 indicators, on the other hand, are undertargetted. The over and underperformance on these indicators are indicative of the Department's weakness on target setting. Aside from other factors mentioned earlier, target gaps could be attributed to lack of strong monitoring and evaluation in the Department.

Human and budgetary resource constraints are affecting the results. Achieving the results is highly dependent on the adequacy of human and budgetary requirements for the implementation of the Department's interventions. But, based on the findings, lack of staff (e.g. PDOs, disbursing officers) and budget (e.g. TARA budget, incentives) continue to undermine operational performance of the Department.

An enabling environment supporting the achievement of results should be attained. As observed in the findings, the Department needs to improve on developing and implementing **(1) policies, guidelines, and multi-stakeholder platforms that will enforce external convergence** and will promote dialogue, cooperation and coordination with intermediaries and partners in achieving the intended outcomes; and **(2) monitoring and functional support systems** which will facilitate monitoring & evaluation of SWD programs and services for a timely and evidence-based decision-making.

On policies and guidelines

There were policies/guidelines that will need enhancement in order to support following outcomes: "Services of licensed private social welfare agencies improved" – no provision in existing guidelines that mandates intermediaries to improve their accreditation status; and "Delivery of coordinated social welfare and development programs by LGUs improved" – joint JMC with DILG that will enforce LSWDOs to achieve fully-functional level not created. On the other hand, lack of monitoring mechanism in the implementation of Executive Order 867,

Series of 2010 affects the cooperation and convergence with the Department accomplishing the outcome “Well-being of the poor families improved.”

On monitoring and functional support systems

The findings were indicative that monitoring of the Department’s goals and initiatives still needs improvement. As stated in the above findings, focused monitoring of outcome progress, amidst the enormous number of activities, at the level of the Field Offices needs attention. Another issue on monitoring was the lack of common understanding on the definitions on some indicators or data being collected, resulting to incorrect data collection and interpretations. Furthermore, reliability of mechanism for monitoring and gauging quality and timeliness indicators, especially on Major Final Outputs, is not ensured.

Recurring issues on monitoring and data quality also resulted from the lack of reliable and functional support systems (e.g. information systems) for the outcomes. Although the information system for monitoring SG 1, SWDI-IS, was already in place in 2015, data systems for monitoring the other outcomes are yet to be established.

V. Overall Recommendations

Reduce operational delays. Efficiency of the Department’s operations may be raised through improving its programs’ process flows and project readiness. In addition, Human Resource Management and Organizational Development that will ensure adequacy and quality of the Department’s workforce will improve program implementation. Lastly, proper budget allocation for the interventions and incentives shall be ensured by the Department to avoid delays in implementation of plans and programs.

Develop incentive system for intermediaries and partners. Incentive system for partners and intermediaries needs to be developed to improve their cooperation in delivering positive development results. Strengthening incentive measures such as provision of monetary incentives, dis-incentives (sanctions) and non-material incentives (awards and recognitions) will boost the performance of LGU implementers and other partners.

Expand Research and Strengthen M&E. Research must be expanded to generate more knowledge and discover effective intervention models for the Department’s beneficiaries and clients. Moreover, findings from M&E reports/studies shall be optimized to guide the management in improving program implementation and development effectiveness.

In addition, M&E system of the Department must be strengthened so as to generate accurate and quality information for decision-makers. Specifically, M&E tools (i.e. Results Frameworks) for all Offices and programs/projects/interventions shall be developed; standardization of data collection and uniform understanding of the indicators must be ensured; and targeting mechanisms and approaches shall be improved (e.g. matching of FO and CO-OBS targets).

Institutionalize the DSWD Convergence Strategy. Based on the findings, synchronization and rationalization of systems, processes and implementation of the DSWD'S programs and interventions in partnership with intermediaries and stakeholders are paramount to achieving the Department's objectives. There is a need to strengthen the internal and external convergence, thus institutionalization of the DSWD Convergence Strategy would be a critically important initiative to improve synchronization and coordination within and outside the Department.

Strengthen Technical Assistance and Capability Building Activities for LGUs. As shown above, issues experienced by LGUs specifically on liquidation, procurement, and report submission were a drag on a timely and quality implementation of devolved programs. As delays affect the subsequent implementation cycles, it is crucial to ensure that LGUs are efficiently implementing our programs – the Department shall effectively manage LGUs' program implementation. Ensuring this would require constant monitoring and support from the Department through conduct of regular technical assistance and capability building activities for LGUs (e.g. liquidation or procurement workshops). #