

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

SEVENTEENTH (17th) CONGRESS
First Regular Session

HOUSE BILL NO. **399**

HOUSE OF REPRESENTATIVES	
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Introduced by REP. JOSE CHRISTOPHER Y. BELMONTE

EXPLANATORY NOTE

House Bill No. 6393 entitled "*An Act Institutionalizing the Pantawid Pamilyang Pilipino Program (4Ps) to Reduce Poverty and Promote Human Capital Development and Providing Funds Therefor*" was a substitute bill consolidating ten (10) separate proposed measures, namely: (a) House Bill No. 154 by Rep. Susan Yap, (b) House Bill No. 195 by Rep. Arthur Yap, (c) House Bill No. 1802 by Rep. Gloria Macapagal Arroyo and Rep. Diosdado Macapagal Arroyo, (d) House Bill No. 3887 by Rep. Eric Olivarez, (e) House Bill No. 4063 by Rep. Rufus Rodriguez and Rep. Maximo Rodriguez Jr., (f) House Bill No. 5390 by Rep. Marcelino Teodoro, (g) House Bill No. 5879 by Rep. IBarra Gutierrez III and Rep. Angelina Kato, (h) House Bill No. 6236 by Rep. Alfredo Vargas III, (i) House Bill No. 6247 by Rep. Winston Castelo and (j) House Bill No. 6305 by Rep. Estrelita Suansing. It passed third reading, and was transmitted to the Senate for appropriate action.

The Philippine Government has the responsibility to ensure that the Filipino people is free from the clutches of poverty. Article II, Section 9 of the 1987 Philippine Constitution provides for this government mandate:

"SECTION 9. The State shall promote a just and dynamic social order that will ensure the prosperity and independence of the nation and free the people from poverty through policies that provide adequate social services, promote full employment, a rising standard of living and an improved quality of life for all."

The introduction of the Pantawid Pamilyang Pilipino Program (4Ps) in 2008 have already helped millions of impoverished Filipino families. Since its introduction by the Department of Social Welfare and Development through an Administrative Order, 4.5 millions of households have benefited from this program that seeks to break the cycle of poverty of Filipino families by reshaping household behavior in investing in the welfare and education of their children.¹ It is envisioned to address short-term poverty through direct cash transfers while also dealing with the long-term poverty by investing in human capital.

The formulation of the 4Ps was influenced by the success of the Conditional Cash Transfer (CCT) Programs in Latin American countries. The 4Ps have already expanded from 2 original countries in 1997 to over 64 countries all over the world. And according to the

¹ <http://newsinfo.inquirer.net/724802/ph-cash-transfer-program-among-worlds-best-world-bank>

World Bank, the Philippines' CCT Program is among the largest and best social safety programs in the world that benefited mostly the bottom 40 percent of the population.² It helped in keeping children healthy and in school, while pushing for the convergence of basic and social services to benefit the beneficiaries and their communities.

The improvement of poverty reduction in the Philippines through the 4Ps cannot be overlooked. This bill proposes to institutionalize the Conditional Cash Transfer Program by establishing its basic parameters, procedures and mechanisms for its effective implementation.

In view of the foregoing, the passage of this bill is earnestly sought.

A handwritten signature in cursive script, appearing to read 'J. Belmonte', is located in the right-hand side of the page.

² Ibid

Quezon City, Metro Manila

SIXTEENTH (17th) CONGRESS
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HOUSE BILL NO. 399

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AN ACT

INSTITUTIONALIZING THE PANTAWID PAMILYANG PILIPINO PROGRAM
(4Ps) TO REDUCE POVERTY AND PROMOTE HUMAN CAPITAL
DEVELOPMENT AND PROVIDING FUNDS THEREFOR

*Be it enacted by the Senate and House of Representatives of the Philippines in Congress
assembled:*

SECTION 1. *Short Title.* – This Act shall be known as the “Pantawid Pamilyang
Pilipino Program (4Ps) Act”.

SEC. 2. *Declaration of Policy.* – The State recognizes the need to strengthen the
solidarity of the family and actively promote its total development.

The State further recognizes its obligation to promote a just and dynamic social order
that will ensure the prosperity and independence of the nation and free the people from
poverty through policies that provide adequate social services, promote full employment, a
rising standard of living, and an improved quality of life for all.

The State furthermore recognizes the need to protect the poor; thus, the State hereby
declares it a policy to:

- (a) Provide assistance to the poor to alleviate their immediate needs;
- (b) Break the intergenerational cycle of poverty through investment in human capital
and improved delivery of basic services to the poor, particularly education, health and
nutrition;
- (c) Promote gender equality and empowerment of women;
- (d) Achieve universal primary education;
- (e) Reduce child mortality; and

1 (f) Improve maternal health.

2
3 **SEC. 3. *Definition of Terms.*** – As used in this Act:

4
5 (a) *Case management* refers to a process used by the Department of Social Welfare
6 and Development (DSWD) to enable the household-beneficiaries to improve their
7 functioning by dealing with their difficulties specifically in complying with the
8 conditionalities of the Program;

9 (b) *Compliance verification* refers to the checking and monitoring done to ensure that
10 the qualified household-beneficiaries comply with conditions for entitlement set forth by the
11 Pantawid Pamilyang Pilipino Program (4Ps);

12 (c) *Conditional cash grant* refers to the amount being received by the qualified
13 household-beneficiaries who comply with the conditions for entitlement;

14 (d) *Extremely poor* refers to households, duly identified by the standardized targeting
15 system, whose income falls short of enabling them to provide even just their nutritional
16 requirements;

17 (e) *Grantee* refers to the most responsible adult member of the qualified household-
18 beneficiary authorized to receive the conditional cash transfer;

19 (f) *Grievance Redress System* refers to the mechanism of the DSWD which addresses
20 and resolves issues and concerns related to the implementation of the Program;

21 (g) *Health facility* refers to a barangay health station, rural health unit or primary
22 hospital;

23 (h) *Health service providers* refer to barangay health workers, barangay nutrition
24 scholars and midwives;

25 (i) *Poor* refers to households whose income falls below the poverty threshold as
26 defined by the National Economic and Development Authority (NEDA) and cannot afford in
27 a sustained manner to provide their minimum basic needs of food, health, education, housing
28 and other essential amenities of life;

29 (j) *Preventive health check-up* refers to health services comprising of complete
30 immunization, deworming, weight monitoring and management of childhood diseases;

31 (k) *Program* refers to the Pantawid Pamilyang Pilipino Program (4Ps) which is the
32 national poverty reduction strategy that provides conditional cash transfer to poor households
33 to improve their health, nutrition and education;

34 (l) *Qualified household-beneficiaries* refer to households identified by the DSWD for
35 entitlement of the monthly conditional cash grant;

36 (m) *Responsible person* refers to the parent or guardian in the qualified household-
37 beneficiary; and

38 (n) *Standardized Targeting System* refers to a system for identifying who and where
39 the poor households are through the generation of socioeconomic database of poor
40 households that is adopted by national government agencies and implemented by the DSWD.

41
42 **SEC. 4. *Selection of Qualified Household-Beneficiaries.*** – On a nationwide basis, the
43 DSWD shall select qualified household-beneficiaries using a standardized targeting system.
44 The DSWD shall conduct a revalidation of targeting of beneficiaries every three (3) years.

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46 **SEC. 5. *Local Verification Committee.*** – A Local Verification Committee shall be
47 created in every municipality or city composed of two (2) local government unit
48 representatives, an accredited health-service provider from the barangay, a representative of

