

Republic of the Philippines  
House of Representatives  
Quezon City, Metro Manila

**SEVENTEENTH CONGRESS**  
First Regular Session

HOUSE BILL NO. 901



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**Introduced by: Representative Salvio B. Fortuno**

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### EXPLANATORY NOTE

This bill seeks to institutionalize the Pantawid Pamilyang Pilipino Program more popularly known as 4Ps.

The 4Ps, which is a development program designed to promote investment in human capital among poor families with 0-14 years old children, intends to address the following:

- a) Reducing extreme poverty and hunger
- b) Achieving universal primary education
- c) Reducing child mortality
- d) Improving maternal health
- e) Promoting gender equality and empowering women

The 4Ps was patterned after the conditional cash transfer programs in Latin American and African countries which have been proven successful as a poverty reduction and social development measure. It can also be safely claimed that it has gained wide support from all sectors of society in the Philippines as can be gleaned from the numerous bills filed in the House of Representatives during the 16<sup>th</sup> Congress, which were referred to the Committee on Poverty Alleviation, of which this humble representation was its Chairperson. However, due to lack of material time, this bill did not see the light of day to the detriment of the extremely poor beneficiaries.

There is an urgent need therefore to act favorably with dispatch on this important piece of legislation that will greatly benefit those in the margins of our society.

  
**SALVIO B. FORTUNO**  
Representative  
Fifth District, Camarines Sur

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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;
- (f) Reduce child mortality; and
- (g) Improve maternal health.

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

(a) **Case Management** refers to a process used by the Department of Social Welfare and Development (DSWD) to enable the household-beneficiaries improve their functioning by dealing with their difficulties specifically in complying with the conditionalities of the program;

(b) **Compliance Verification** refers to the checking and monitoring to ensure that the qualified household-beneficiaries comply with conditions for entitlement set forth by the program;

(c) **Conditional Cash Grant** refers to the amount being received by the qualified household-beneficiaries who comply with conditions for entitlement;

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

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

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

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

(h) **Health Service Providers** refer to barangay health workers, barangay nutrition scholars and midwives;

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

(j) **Preventive Health Check Up** refers to health services comprising of complete immunization, deworming, weight monitoring and management of childhood diseases;

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

(l) **Qualified Household-Beneficiaries** refer to households identified by the DSWD for entitlement of the monthly conditional cash grant;

(m) **Responsible Person** refers to the parent or guardian in the qualified household-beneficiary;

(n) **Standardized Targeting System** refers to a system for identifying who and where the poor households are through the generation of socio-economic database of poor households adopted by the national government agencies and being implemented by the DSWD.

**SEC. 4. Selection of Qualified Household-Beneficiaries.** - On a nation-wide basis, the Department shall select qualified household-beneficiaries using a standardized targeting system. The DSWD shall conduct a revalidation of targeting every three (3) years.

**SEC. 5. Local Verification Committee.** – A Local Verification Committee shall be created in every municipality or city composed of two (2) local government unit representatives, an accredited health-service provider from the barangay, a representative of an accredited civil society organization, and the school head as designated by the Department of Education (DepEd).

This Committee shall be tasked to ensure that the initial list of beneficiaries satisfies the eligibility requirements set forth under this Act.

**SEC. 6. Conditional Cash Transfer.** – Subject to certain conditions, each qualified household-beneficiary shall receive a conditional cash transfer equivalent to Five hundred pesos (Ph P500.00) per month for health and nutrition expenses or the equivalent of Six thousand pesos (PhP6,000.00) per qualified household-beneficiary per year.

A maximum of three (3) children per qualified household-beneficiary shall be given conditional cash grant for educational expenses:

(a) Three hundred pesos (P300.00) per month per child enrolled in elementary or the equivalent of Three thousand pesos (PhP3,000.00) per a 10-month school year;

(b) Five hundred pesos (P500.00) per month per child enrolled in junior high school or the equivalent of Five thousand pesos (P5,000.00) per a 10-month school year;

(c) Seven Hundred Pesos (P700.00) per month per child enrolled in senior high school or the equivalent of Seven thousand pesos (P7,000.00) per a 10-month school year;

A supplementary education grant of Three hundred pesos (P300.00) per month shall be given to the child in elementary or high school who has maintained passing grades in all subjects after the second year of avancement of the program.

**SEC. 7. Conditions for Entitlement.** – All qualified household-beneficiaries shall comply with the following conditions as a requirement for continued program eligibility:

(a) Children 0 to 5 years old must receive regular preventive health check-ups and vaccinations;

(b) Children 6 to below 14 years old must avail of de-worming pills at least twice a year;

(c) Children 3 to 5 years old must attend day care or pre-school classes at least eighty-five percent (85%) of the time;

(d) Children must attend elementary or high school classes at least eighty-five percent (85%) of the time;

(e) Pregnant women must get a pre- and post natal care and be attended by a skilled or trained health care professional during childbirth in a health facility;

(f) At least one responsible person must attend family development sessions and natural family planning sessions conducted by the DSWD, at least once a month;

