



World Food Programme

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# Leaving No One Behind

## Bridging Gaps in Social Protection

August 2024 | WFP Philippines

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# Acknowledgements

This study was led by WFP in collaboration with the Department of Social Welfare and Development; National Economic and Development Authority; the Municipal Governments of Gigmoto, Catanduanes and Upi, Maguindanao del Norte; and the City Government of Manila. Specifically, we would like to thank the Persons with Disability Affairs Office of the Municipal Government of Upi, the Municipal Disaster Risk Reduction and Management Office in Gigmoto, and the City Government of Manila's Department of Social Welfare for their active participation and support.

This study was made possible thanks to the generous contributions of our donors: ADM; Australian Government's Department of Foreign Affairs and Trade; Bank of America; Earth Group; Embassy of the Philippines in Rome, Italy; Governments of Japan, New Zealand, and Republic of Korea; Japan Association for the World Food Programme; and the United States Agency for International Development's Bureau of Humanitarian Assistance.

# Foreword

**A**s the Country Director of the World Food Programme in the Philippines, it is with great pride and purpose that I introduce this pivotal study, dedicated to advancing the principle of “Leaving No One Behind” (LNOB) within our social protection efforts. At the heart of the United Nations Sustainable Development Goals lies a profound commitment to ensuring that all individuals, particularly those who are marginalized and in vulnerable situations, have equal access to opportunities, resources, and social services. This report reflects our unwavering dedication to that commitment.

The World Food Programme has a long-standing partnership with the Philippine Government, striving to alleviate poverty and achieve food and nutrition security across the nation. This collaboration is especially vital in our social protection programmes, which serve as a lifeline for many of the country’s most disadvantaged populations. Our mission aligns with the LNOB principle, and this study delves into how social protection programmes in the Philippines can be enhanced to better include and prioritize those most at risk of being left behind.

Guided by three essential research questions, this study explores which specific vulnerable groups are at heightened risk, identifies their needs concerning social protection, and suggests actionable measures to ensure their inclusion. Conducted across the three island groups in the Philippines – Mindanao, Visayas and Luzon – this research provides valuable insights into the socioeconomic, political, and geographic factors contributing to exclusion.

By focusing on farmers, fisherfolks, Indigenous Peoples, informal workers, internally displaced persons, LGBTQIA+ individuals, persons with disabilities, senior citizens, solo parents, women, and youth, we have endeavoured to capture the lived experiences of those often overlooked. This qualitative approach underscores the need for



broader data to understand the prevalence and scope of these issues on a national level.

Our gratitude extends to the national Government, particularly the Department of Social Welfare and Development (DSWD) and the National Economic and Development Authority (NEDA), for their invaluable support and partnership. Their commitment and cooperation have been instrumental in the successful execution of this study. We also extend our heartfelt gratitude to the local government units in Cotabato City/Maguindanao del Norte, Catanduanes, and the City of Manila for their active participation and support. Their insights and cooperation were crucial in providing a comprehensive understanding of the unique challenges faced by their communities.

As we move forward, let this study serve as a beacon, guiding our efforts to build a more inclusive and equitable society. I extend my deepest gratitude to all who have contributed to this research, and I call upon our partners, policymakers, and stakeholders to join us in ensuring that no one is left behind.

Sincerely,



**Regis Chapman**

**Representative and Country Director**  
World Food Programme Philippines

# Executive Summary

The concept of “Leaving No One Behind” (LNOB) is at the core of the United Nations Sustainable Development Goals (SDGs), emphasizing the commitment to ensure that all individuals, particularly those who are marginalized and in vulnerable situations, have equal access to opportunities, resources, and social services. The World Food Programme (WFP) has been working closely with the Philippine Government to alleviate poverty and achieve food security, particularly in relation to social protection programmes. Aligned with the goals of social protection programmes and the LNOB principle, the analysis focuses on areas where social protection programmes in the Philippines may further achieve inclusion and prioritization of the most disadvantaged people by highlighting the lived experiences of these communities. This study was guided by three research questions:

1. Among the vulnerable sectors, which specific groups are at a heightened risk of being left behind? If so, who are they and why are they (at risk of) being left behind?
2. What are the needs of these groups in relation to social protection?
3. What can be done to ensure the inclusion of the groups most at risk of not receiving social protection assistance?

The study was conducted in the following three locations: i) Cotabato City/Maguindanao del Norte in the Bangsamoro Administrative Region in Muslim Mindanao (BARMM), ii) Catanduanes in the Bicol Region, and iii) the City of Manila in Metro Manila. These sites were selected based on various WFP priorities and a conjecture that, combined, they would provide the study with a broad understanding of the socioeconomic, political, and geographic reasons why people were being left behind. Aside from narrowing the geographic scope of the study, research also focused on particular groups that were considered as being (or at risk of being) left behind based on the secondary data review and the UNCT Policy Note: farmers/fisherfolk, Indigenous Peoples, informal workers, internally displaced persons, LGBTQIA+, persons with disabilities, senior citizens, solo parents, women, and youth. Focusing on a small number of sites and groups allowed in-depth qualitative research on the lived experiences in the areas and their social protection contexts; however, it also presented a trade-off between depth and representativeness as more large-scale and national-level data is required to determine the prevalence of issues experienced by respondents.



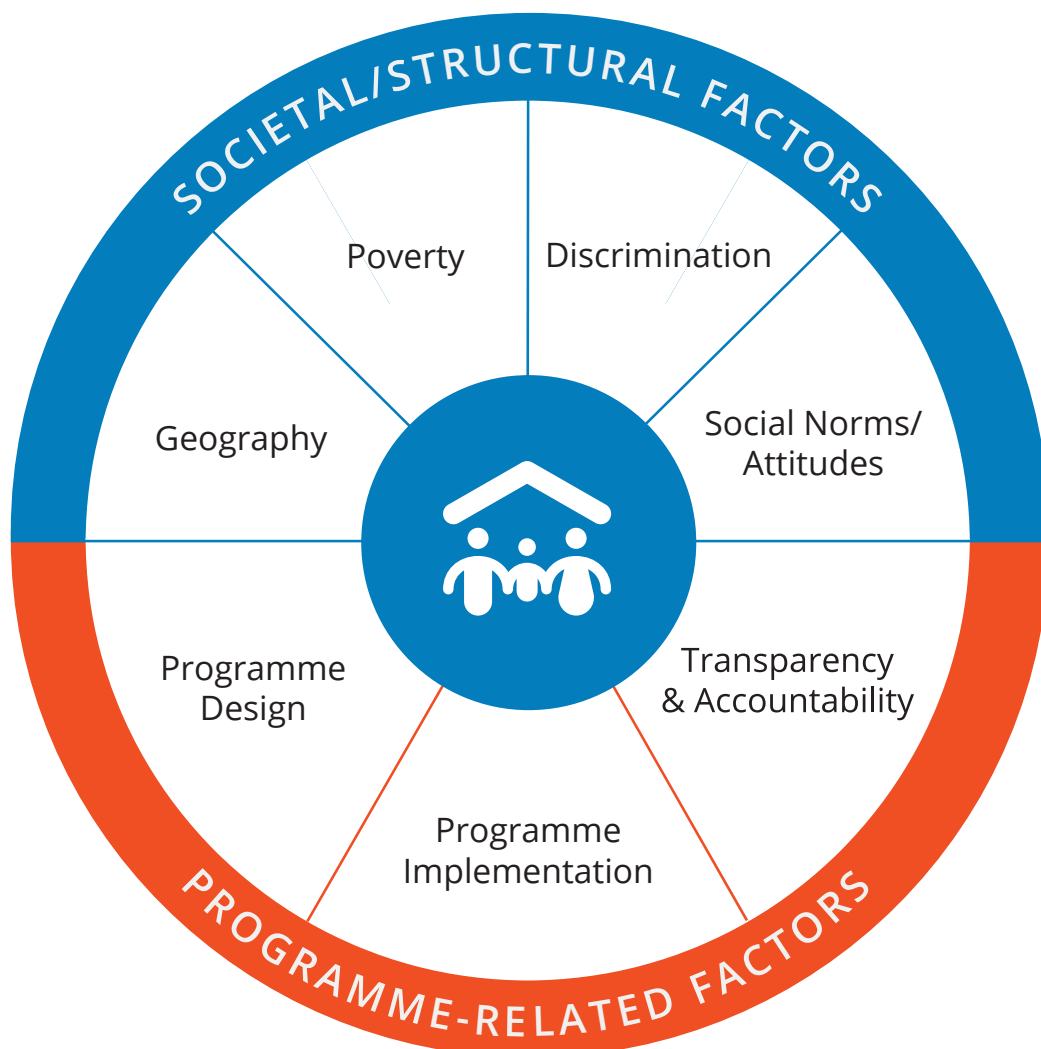
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## Key Findings

The key findings of the study aim to address the first two research questions. In identifying the factors affecting access to/coverage by social protection programmes, the study found that factors largely fell into two categories: i) societal/structural factors and ii) programme-related factors. To answer the second research question, the needs articulated by respondents and the needs that were identified based on the factors affecting access/coverage were

organized based on key social protection categories: Food security & nutrition, livelihood, education, healthcare, holistic support, and emergency response measures. It is important to note that, while the study is anchored on social protection access and coverage, deeper issues experienced by respondents were also uncovered. Adhering to the inductive nature of qualitative research, the findings also incorporate these types of issues.

### Factors Affecting Social Protection Access/Coverage



**Societal/structural factors** pertain to issues that can be attributed to the context of respondents. These factors are summarized into four categories: Geography, poverty, discrimination, and social norms & attitudes.



## GEOGRAPHY

- Respondents in geographically isolated and disadvantaged areas (GIDAs) report having less access to information as community infrastructures and effective dissemination of information by institutions must be strengthened.
- In very remote areas, there is limited availability of essential services and facilities such as health centres and schools and accessing them in neighbouring barangays can also be difficult as infrastructure must be further improved.
- Persons with disabilities in GIDAs have a higher need for accessibility options, by virtue of the remoteness of their locations, but these options or alternative solutions should be more available based on respondents' experiences.
- Although not all GIDAs are disaster-prone or climate at-risk, when a natural disaster does strike, emergency response is made more complex due to the topography of the area and/or the need for improved infrastructure.



## POVERTY

- Some respondents mentioned having financial difficulty obtaining required government documents to access social services due to income-related constraints.
- Participation of informal workers in government insurance programmes is low overall; respondents feel that they need a stable income to be able to afford monthly insurance payments.
- For some respondents, lack of property and land has made their lives and livelihoods feel less secure.
- Many poor families resort to child labour as a measure to supplement household incomes. Families rely more on male children for child labour, and it is considered the main reason why they stop schooling.



## DISCRIMINATION

- Some respondents perceived that they were not included in beneficiary lists due to community leaders/implementers discriminating against them and/or policies that could be more inclusive.
- Persons with disabilities and LGBTQIA+ respondents mentioned being affected by discriminatory hiring practices as well as having less access to different livelihood opportunities due to stereotyping.
- During discussions, respondents mentioned that discrimination towards LGBTQIA+ also extends to how they feel they are treated by the justice system as biases against them can sometimes preclude a fair investigation.





## SOCIAL NORMS & ATTITUDES

- Discussions about sexual and reproductive health are still largely seen as taboo even though there is a high level of concern regarding early pregnancy and the HIV epidemic in the country.
- Lack of financial independence prohibits women from leaving abusive situations, and those who do leave often find it difficult to rebuild their lives and livelihoods.
- Some respondents mentioned how traditional practices in their culture prevented them from exercising the same rights and/or access to services. In some Indigenous communities, women are not allowed to own land, while in traditional Muslim households, there were cases of children arranged to be married by their parents at a young age.

**Programme-related factors** pertain to issues that are largely due to aspects of the programmes themselves. The study grouped these into three: i) programme design, ii) programme implementation, and iii) transparency and accountability.



## PROGRAMME DESIGN

- Many programmes have a uniform approach in deciding the benefits for participants, which in some cases should further account for their actual needs.
- By design, limited funding for programmes is impacting coverage and benefits. Participants indicated that greater levels of financial assistance are needed given the current economic environment and their actual needs.
- Key social protection programmes, by design, must further reflect intersectional issues and compound vulnerabilities.



## PROGRAMME IMPLEMENTATION

- Based on discussions with communities, implementation on the ground could better follow guidelines in official policies. Discussions pointed to perceived challenges of convergence between national and local governments and even between local governments and barangays.
- Respondents reported having difficulties applying to programmes (for programmes requiring self-registration), while questions were raised about the reliability of community-based lists (for programmes that conduct their own targeting).
- Issues with disbursement processes and the distribution of assistance (e.g., information dissemination regarding disbursement, frequency/scheduling of disbursements, and accessibility of distribution sites) were also common among respondents.









## TRANSPARENCY AND ACCOUNTABILITY

- When asked about feedback mechanisms, respondents said that they were not aware of any. Many respondents mentioned using barangay assemblies to air out their issues and grievances, but these are not formal feedback mechanisms related to the programmes.
- Respondents raised concerns about the transparency of programme processes; selection should be more transparent and needs-based, not based on people’s connections.
- According to the communities, incidents which pointed to corruption and/or misallocation of benefits were perceived to have occurred at the barangay level.

## Needs Related to Social Protection Programmes

By synthesizing the findings, the study identifies the groups that require greater attention and inclusion in social protection programmes by the type of assistance that they need. These needs were identified by the participants of the study.

NEEDS OF KEY GROUPS IN RELATION TO SOCIAL PROTECTION		
 <p><b>FOOD SECURITY &amp; NUTRITION</b></p> <ul style="list-style-type: none"> <li>• Children</li> <li>• Young mothers</li> <li>• Persons with chronic illness</li> <li>• Seniors in rural areas</li> </ul>	 <p><b>LIVELIHOOD</b></p> <ul style="list-style-type: none"> <li>• Agricultural workers</li> <li>• Out-of-school youth</li> <li>• Persons with disabilities</li> <li>• Solo parents</li> <li>• LGBTQIA+</li> <li>• Women</li> </ul>	 <p><b>EDUCATION</b></p> <ul style="list-style-type: none"> <li>• Adolescents</li> <li>• Young mothers</li> <li>• Children with disabilities</li> </ul>
 <p><b>HEALTHCARE</b></p> <ul style="list-style-type: none"> <li>• Persons with intellectual/mental disabilities</li> <li>• Persons with chronic illness</li> <li>• Youth (particularly women and LGBTQIA+)</li> </ul>	 <p><b>HOLISTIC SUPPORT/ CASEWORK</b></p> <ul style="list-style-type: none"> <li>• CSEA victims</li> <li>• GBV survivors (particularly women)</li> <li>• Internally displaced persons</li> </ul>	 <p><b>EMERGENCY RESPONSE MEASURES</b></p> <ul style="list-style-type: none"> <li>• All groups (particularly in GIDAs)</li> <li>• Persons with disabilities</li> <li>• Senior citizens</li> <li>• Women</li> </ul>

## Recommendations

Through the recommendations, the study aims to address the third research question, to ensure the inclusion of groups being left behind. The study identifies three policy-level and six operations-level recommendations for policymakers and decision maker in WFP and the institutions it works with.



### POLICY-LEVEL RECOMMENDATIONS

- **Strengthen the evaluation framework of social protection programmes to ensure budget and investments are focused on evidence-based interventions.** Institutionalizing impact evaluations for social protection programmes helps identify and address inefficiencies and duplication, enabling more cost-effective and impactful interventions. Evaluations also provide insights into specific community needs, allowing for more tailored and comprehensive support.
- **Ensure that local implementers have strong coordination with national-level implementers and are fully capacitated, with particular focus on improving access to information.** As programmes are devolved to local governments, assessing and strengthening the capacities of local implementers and improving coordination between national and local levels is crucial. Investing in training and resources for both local and community-level officials ensures better communication, monitoring, and responsiveness to community needs.
- **Establish reliable digital infrastructure, especially in GIDAs.** Digitalization can greatly enhance social protection in GIDAs by improving access to information, services, and financial assistance. However, due to limited digital infrastructure in these areas, efforts should be focused on strengthening connectivity and encouraging telecommunications investments through public-private partnerships.



### OPERATIONS-LEVEL RECOMMENDATIONS

- **Develop an integrated database capturing vulnerabilities and strengthening targeting system.** Developing an integrated database that consolidates data on vulnerabilities from various sources is essential for effective social protection. This unified system enhances targeting accuracy, reduces bias, and ensures aid is distributed equitably based on verified needs.
- **Tailor programmes to better consider needs and intersectional vulnerabilities related to exclusion.** To improve the effectiveness and fairness of social protection programmes, transitioning from a standardized approach to a tailored framework that addresses individual needs and intersecting vulnerabilities is crucial. Enhancing data collection, conducting community-driven assessments, and aligning strategies with long-term stability will ensure more equitable and effective support.
- **Embed anti-discrimination principles and acknowledge the influence of social norms within programming.** The findings underscore the need to address discrimination within social protection programmes and enhance inclusivity by actively preventing discrimination. Strengthening community engagement and implementing social and behavioural change interventions can transform harmful norms, promote gender equality, and support equitable development.

- **Bolster monitoring and evaluation.** To enhance programme effectiveness and implementation, it is essential to improve data collection and monitoring at the community level. This approach i) ensures timely, informed responses to community needs, ii) fosters transparency, and iii) allows for more responsive and gender-responsive interventions. Strengthening community-level feedback mechanisms, like local Grievance Redress Committees, will further enable active community engagement and improve programme adaptability.
- **Forge local partnerships.** In line with SDG 17: Partnerships for the Goals, it is critical to build formal partnerships with local civil society organizations, local government units (LGUs),

and community leaders to enhance development efforts. Strengthening these collaborations can improve programme adaptation, efficiency, and outreach to marginalized groups.

- **Strengthen capacities to support persons with disabilities during emergencies.** To improve emergency preparedness for persons with disabilities, WFP should integrate immersive simulation sessions to understand the specific barriers they face. Additionally, enhancing the accessibility of digital/online platforms and strengthening local Persons with Disabilities Affairs Offices (PDAO) are crucial for ensuring that support and information are inclusive.



# Introduction



## Background

The Philippines is a lower-middle-income country with a “medium” ranking on the human development index with aspirations to reach upper-middle-income country status by 2025. The current administration continues to work towards addressing the needs and rights of individuals with diverse gender identities, to improve persons with disabilities’ access to healthcare and nutrition services, to expand social protection initiatives, and to put in place measures to bridge gender gaps.

The social protection system in the Philippines evolved from being siloed prior to 2008 with multiple agencies responsible for different schemes/target groups. Since 2012, the national system has four pillars with the lead and coordination of relevant agencies in the sectors via the Sub-Committee on Social Protection of National Economic and Development Authority (NEDA). The Philippines continues to revise, as well as engage with the UN and other partners, Philippine national policies and laws with regards to social protection. In 2023, further to Senate Bill No. 964, No. 2029, and No. 1298, the Congressional Policy and Budget Research Department looked into the costs of raising children with disabilities (CWD) in the Philippines and pushed for disability allowance for CWD.

Social protection programmes play a crucial role in alleviating poverty, reducing inequality, and promoting inclusive development. The Department of Social Welfare and Development (DSWD) and relevant agencies have implemented various programmes and services aimed at providing assistance to populations affected by shocks and stressors. These initiatives encompass cash transfer programmes, health insurance coverage, food assistance, and livelihood support, among others.

In 2024, the Office of the President issued Memorandum Circular 47 directing all government agencies and LGUs to support the implementation of the Enhanced Partnership Against Hunger and Poverty (EPAHP) programme under the Department

of Social Welfare and Development.<sup>1</sup> The EPAHP is a convergence programme which aims to reduce hunger and poverty in urban and rural communities, including marginalized groups. There are recent efforts in EPAHP to link farmers and fisherfolks to the Government’s national feeding programmes. The Pantawid Pamilyang Pilipino Program (4Ps), launched in 2008 and institutionalized in 2019 by Republic Act No. 11310 or the 4Ps Act, is the national poverty reduction strategy and human capital investment programme that provides conditional cash transfers to poor households for a maximum period of seven years, to improve health, nutrition and education. 4Ps has a mechanism to reduce biases towards political and personal preferences in identifying beneficiary eligibility. In addition, through 4Ps, DSWD launched its pilot of Digital Financial Literacy, a groundbreaking initiative aimed at enhancing financial inclusivity and sustainability among programme participants. DSWD aims to maximize the use of digital financial services in the implementation of different social protection programs such as the 4Ps.

Despite these investments and successes in the national social protection system, the country still faces several systemic challenges including in i) targeting, ii) harnessing nutrition-sensitive approaches and iii) supporting assisted households in shifting to more sustainable livelihoods. The importance of identifying and addressing the needs of those at risk of being left behind in accessing social protection systems cannot be overstated. Thus, it is essential to understand the groups that may be excluded or disadvantaged within these systems and particularly at the provincial and LGU levels. Further work remains to be done to ensure equitable access to social protection systems across the country.

Natural disasters particularly impact vulnerable groups including rural women, coastal populations, persons with disabilities, conflict-affected population, children, and elderly. Preparedness and response must factor in the differential needs of the vulnerable groups, such as mothers, children, and persons

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<sup>1</sup> Office of the President of the Philippines, *Memorandum Circular No. 47*.

with disabilities to ensure universal access to food and nutrition. This could be made possible through a shock-, gender- and nutrition-responsive social protection system. There is an entry point for government agencies such as the Disaster Response Management Bureau to further ensure vulnerable groups are included in emergencies and disaster-prone areas through their involvement in social protection programming.

## Purpose of the Study

The World Food Programme, the leading humanitarian organization addressing hunger and food insecurity, contributes to social protection initiatives in the Philippines. Recognizing the centrality of social protection in alleviating poverty and achieving food security, WFP has actively collaborated with the DSWD and other relevant national, regional, and local government institutions. As a partner of choice, WFP provides technical assistance to its government counterparts and direct implementation of food assistance programmes in case of shocks exceeding the Government's response capacity. By implementing targeted food assistance and nutrition-sensitive programmes using the most appropriate transfer modality (in kind, cash-based transfers and/or capacity strengthening), WFP aims to reach the most marginalized and at-risk populations, including, but not limited to, urban and rural poor, Indigenous Peoples' communities, smallholder farmers and fisherfolks, pregnant and breastfeeding women and girls, children, and persons with disabilities. To this end, WFP conducted an LNOB analysis to:

1. Identify the needs of marginalized groups,
2. Understand their intersectional vulnerabilities and relevant barriers to accessing social protection support, and
3. Provide recommendations to ensure their future inclusion in social protection programmes and other actions to be taken to address the needs of those at risk of being left behind.

The LNOB analysis builds upon existing policies and frameworks, including the *Philippine Development Plan 2023–2028* and the *DSWD Strategy Map 2028*, reinforcing the commitment to equality and non-discrimination at the heart of sustainable development. Drawing from existing frameworks and guidance from the *United Nations Shared Framework on Leaving No One Behind*, the *United Nations Country Team (UNCT) Philippines Policy Note on Leaving No One Behind*, and WFP policies, including the *WFP Gender Policy 2022*, the *Protection and Accountability Policy 2020*, the *Community Engagement Strategy for Accountability to Affected Populations 2021–2026* and the *WFP Disability Inclusion Roadmap (2020–2021)*, this analysis seeks to strengthen WFP's interventions and ensure that the communities it serves, particularly marginalized groups, are central to the organization's efforts towards supporting the country towards more inclusive development and sustainable change.

The study adopted a people-centred, bottom-up approach that focuses on community perspectives. This allows for a more inclusive and participatory examination that gives voices to marginalized groups and incorporates their lived experiences and specific challenges so that the design and implementation of social protection programmes become more responsive to their needs. Moreover, recognizing intersectional vulnerabilities related to age, gender, disability, ethnicity, religion, and other variables is crucial. By embracing an intersectional perspective, this analysis aims to impartially pinpoint and understand and address the different layers of vulnerability that can lead to exclusion. This helps inform policymakers and stakeholders regarding how to develop targeted and responsive interventions that advance the country's progress towards achieving the SDGs and leaving no one behind in the pursuit of inclusive and sustainable development.

# Scope of the Study





## Theoretical Scope

### Rationale for Focusing on Social Protection

Social protection programmes are a key part of strategies to address poverty and inequalities. Broad-based social protection provides safety nets to the general public against shocks and stressors, while targeted social protection supports the most marginalized segments of the population by addressing their basic needs as well as providing them with opportunities to improve their lives. The Philippines has a wide range of social protection programmes, ranging from financial aid to healthcare; however, the depth of benefits at the individual level is still relatively low.<sup>2</sup> This means that while most of the population appears to have social protection coverage, it is unclear if it is sufficient or if everyone is benefitting meaningfully.

Given the alignment of the goals of social protection programmes and the LNOB principle, this study focuses on areas where social protection programmes may further achieve inclusion and prioritization of the most disadvantaged. This study is guided by three research questions:

1. Among the vulnerable sectors, which specific groups are at a heightened risk of being left behind? If so, who are they and why are they (at risk of) being left behind?
2. What are the needs of these groups in relation to social protection?
3. What can be done to ensure the inclusion of the groups most at risk of not receiving social protection assistance?

The first and second research questions will be addressed in the Discussion of Key Findings, while the third will be discussed in the Recommendations section, building upon the findings and proposing actionable steps forward.

## Target Groups

As a first step to rationalize the scope of the study, based on the UNCT Philippines Policy Note on Leaving No One Behind, WFP identified key groups to serve as the focus of the research. The Policy Note identified certain groups as being either the furthest behind or at risk of being left behind. While the Policy Note served as a guide for the study, there were some groups and issues that were not mentioned in the Policy Note that were included in the course of research due to the communities and respondents themselves identifying them as being relevant. The final groups and issues that the study focused on are outlined in Table 1.

**Table 1. Key groups and issues included in the study.**

Group	Key Issues
Farmers/fisherfolk	Poverty, remoteness, vulnerability to disasters/ climate-related risks
Indigenous Peoples' communities	Discrimination, remoteness, unequal rights
Informal workers	Limited livelihood, poverty
Internally displaced persons	Limited livelihood, limited support systems, poverty
LGBTQIA+	Discrimination, limited livelihood, limited support systems, unequal rights
Persons with disabilities	Discrimination, limited livelihood, poverty
Senior citizens	Limited livelihood, poverty
Solo parents	Limited livelihood, limited support systems, poverty
Women	Limited support systems, unequal rights, vulnerability to violence
Youth	Deprivation of liberty, limited support systems, vulnerability to labour exploitation, vulnerability to violence

<sup>2</sup> Asian Development Bank, The Social Protection Indicator for Asia.

While all the groups listed above were represented during data collection, WFP had better access to some and worse access to others. Because of this, there may be more issues that WFP was unable to uncover in relation to the latter. These groups include informal workers, internally displaced persons, LGBTQIA+, and youth. In addition, children and gender-based violence survivors were not interviewed, even though important findings relate to these groups due to the need for special access and protection.

In this study, WFP aimed to delve into the intricate web of social dynamics, not merely examining these groups as singular entities but to explore the intersectionalities that define individuals' lives. Acknowledging the diverse tapestry of humanity is key, including factors such as gender, age, ability, and other dimensions that shape unique identities. By scrutinizing these intersections, insights were gained into how different communities are influenced by a myriad of factors. This approach not only ensures that no one is left behind, but also illuminates the underlying complexities that impact their risk of exclusion.

## Geographic Scope

Primary data collection was conducted in Cotabato City and Maguindanao del Norte of the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), Catanduanes, and the City of Manila. These study sites were determined based on various WFP priorities and a conjecture that, combined, they would provide the study with a broad understanding of the socioeconomic, political, and geographic reasons why people are being left behind.

### 1. Cotabato City and Maguindanao del Norte

WFP has concentrated much of its operations in BARMM, particularly Cotabato City, which is the seat of the BARMM Government, and Maguindanao del Norte. These sites have a unique political and cultural context, with a Muslim majority population and smaller populations of Indigenous Peoples in GIDAs. Looking into the challenges faced in these

areas and the region as whole can allow WFP to understand how its work is being implemented.

### 2. Catanduanes

The Province of Catanduanes was selected as a study site due to its susceptibility to a range of environmental challenges and climate change- and natural hazards, including typhoons, flash floods, and landslides. The experiences of people in the rural areas of the province speak to a different set of challenges in relation to social protection services.

### 3. The City of Manila

Situated within the metropolitan expanse of Metro Manila, the City of Manila emerges as a prominent component of the regional capital. Notably, it holds the global distinction of being the most densely populated city, providing a compelling vantage point for scrutinizing intricate urban quandaries such as escalated rates of homelessness and poverty. Employing a comparative approach that contrasts the urban milieu of Manila with its rural counterparts, this study aims to highlight how the context of urban environments can influence people's access to social protection mechanisms.



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# Research Methods

This study utilized three methods of inquiry to address the research questions: i) high-level desk review, ii) interview- and discussion-based qualitative research and iii) descriptive analysis of quantitative data from secondary sources. In the first phase of the research, WFP conducted a high-level desk review of social protection programmes in the Philippines to identify pathways of inquiry for primary data collection. Following the first phase, qualitative interviews and focus group discussions were conducted with different stakeholders and respondents from key target groups. The core of the research findings was drawn and developed from this phase. The last phase of research incorporated descriptive analysis of secondary data to complement and support the qualitative research findings.

## High-Level Desk Review of Social Protection Programmes

A high-level desk review was conducted to provide an overview of some of the key existing social protection programmes, delving into various programmatic structures, target populations, and their schedule of benefits. This initial step provided a landscape of social welfare initiatives. The desk review also entailed an investigation of the issues faced by key demographic groups, to establish a foundational understanding of their distinct challenges and needs within the context of social protection. In addition, the insights from the desk review played a pivotal role in shaping the development of research instruments. By integrating the knowledge collected from the review and understanding the gaps in secondary data, the research instruments were designed to effectively capture data through primary data collection.

## Interviews and Focus Group Discussions

Interviews and focus group discussions provided the study with data on the in-depth perspectives and testimonies of respondents. WFP aimed to have a wide range of viewpoints, so respondents included national and local government implementers, UN personnel, representatives from non-government

organizations (NGOs), community leaders and members. The discussions followed a semi-structured format, with interviewers/facilitators introducing key topics of inquiry and interviewees driving the conversation based on the points that they stressed or expounded on.

Data collection was conducted through three interview methods: Focus group discussions (FGDs), key informant interview (KIIs) and in-depth interviews (IDIs). The FGDs were conducted by gathering a group of participants and guiding them through a discussion on their experiences regarding social protection programmes. The FGDs were valuable as they highlighted the shared experiences of participants while teasing out disagreements or differences between them. This group dynamic allowed for conversations where participants could build on each other's ideas and perspectives. The KIIs, by contrast, were one-on-one interviews with stakeholders who were particularly knowledgeable or experienced on a subject relevant to the study. These were valuable in providing a high-level view of issues. Lastly, IDIs were focused and personal one-on-one interviews that allowed WFP to gather follow-up and/or sensitive information. WFP conducted IDIs with respondents whose specific experiences provided more context regarding critical issues.

Primary data collection was conducted in seven locations across the three study sites. In total, there were 23 FGDs, 39 KIIs, and 5 IDIs conducted with persons (representing) groups with diverse gender, sexual orientation and gender identity and expression (SOGIE), age, ability, religion, ethnicity, livelihoods, and role in the community. Due to the sensitivity of the topics in discussions and the small number of participants, there was a higher risk to respondents' privacy/anonymity if attendance sheets were used, so it was decided to forego them. Respondent contacts were obtained through barangay officials and interviews were mostly held in public buildings. Different key groups were sampled based on the issues relevant to their locations. For example, participants in Maguindanao del Sur were better placed to address the challenges faced by Muslims and Indigenous communities due to the high density of these groups, while participants in

Catanduanes had more knowledge regarding the challenges faced by farmers and fisherfolks in areas prone to climate hazards.

In conducting data collection, WFP adopted rights-based and feminist approaches to generate insights. These approaches prioritized participants' agency, consent, and diverse perspectives while acknowledging power imbalances and structural inequalities. In relation to this, the composition of discussion groups was based on community sensitivities, which necessitated separate FGDs for men and women in some areas. WFP ensured the safe participation of girls, women, transgender and others by ensuring the informed consent of all and guaranteeing respect for strict confidentiality and privacy policies.

All the FGDs and interviews were conducted in the local language, but many FGDs were led by English-speaking WFP staff, so local translators and documenters were hired to help facilitate the discussions. Recordings of the discussions were transcribed and translated into English after data collection. These transcriptions were then coded using qualitative data analysis software. Themes were identified from the codes in relation to the study's research questions.

## Descriptive Analysis of Secondary Data

The quantitative analysis was conducted using data from various sources: the 2022 National Demographic and Health Survey (NDHS), the 2020 Philippine Census, the National Disability Prevalence Survey (NDPS), and the Expanded National Nutritional Survey (ENNS). The NDHS and 2020 Census were used to provide context regarding issues prevalent among certain groups. The NDPS and ENNS were used to highlight trends regarding communities at risk of poverty, severe disability, impeded access to healthcare, and malnutrition.

The NDPS, conducted in 2016, sampled approximately 11,000 households. Of these, about 1,000 households were with persons with a disability. This was the most

recent survey on disability conducted at the national level. One limitation of the NDPS is that households with persons with disabilities were only marked if the disability was thought of as "severe", so it may have omitted health issues that could be relevant to social protection access.

The ENNS is a rolling survey with data from 2018, 2019, and 2021. When combined, data is highly validated and nationally representative; however, global confounding factors such as the COVID-19 pandemic should be considered. The ENNS is the only extensive dataset available on Indigenous Peoples, with about 50,000 surveyed households identifying as Indigenous, as compared to about 40,000 non-Indigenous households. A limitation of this dataset is that household heads were not disaggregated by gender.

## Limitations of the Study

It is important to acknowledge the constraints and contextual factors that shaped the study, as these influenced the scope, methodology, and outcomes. The study relied heavily on small-scale qualitative research. While this design allowed WFP to develop a deep understanding of complex issues related to social protection programmes, it also has the following limitations:

### **Representativeness and generalisability:**

Issues in the study may not be representative of issues in all the regions of the Philippines. Likewise, the sample of respondents was not drawn randomly and depended significantly on community referrals (snowball sampling) and self-selection. This means that the experiences of the respondents may not be generalizable to the groups that they represent.

### **Subjectivity of findings and conclusion:**

As qualitative data analysis is highly dependent on how researchers interpret subjective data shared by respondents, the personal viewpoints and biases of researchers likely influenced how the findings and the conclusion of the study were developed.



# Overview of Key Existing Social Protection Policies and Programmes

The Philippine Government has set social protection as a national priority. With a robust variety of policies and programmes, the Government iteratively assesses population needs and plans for protection systems to respond to shocks and vulnerabilities. Two key agents in this process are the DSWD and LGUs. WFP works extensively with DSWD to build government capacities to implement social protection and respond to shocks.

The need for more funding for national social protection remains a significant challenge. A report by the UN Economic and Social Commission for Asia and the Pacific (ESCAP) published in 2021 found that the country's investment in social protection was still low in comparison to its neighbours, leading to low coverage.<sup>3</sup> Data from this report reveals that the Philippines' public expenditure on social protection stands at a modest 2.6 percent of GDP, a figure starkly below the ESCAP average of 4.9 percent and less than a quarter of the global spending average of 12.9 percent of GDP. To strengthen the country's social safety nets, increasing financial commitments to social protection programmes is imperative to ensure the inclusion of the most vulnerable groups.

In 2022, WFP conducted a social protection scoping study to gain a better understanding of the key national and international social protection actors, their policies, plans, and initiatives, to improve WFP's strategic role in this space. Based on the findings from the scoping study and views from the respondents of this LNOB study, five social protection programmes emerged as having the widest coverage amongst our diverse sample: the 4Ps, the Modified Conditional Cash Transfer (MCCT), the Social Pension Program for Indigent Senior Citizens, Financial Assistance for People with Disabilities, and the Philippine Health Insurance Corporation (PhilHealth). This section will provide context on the targeting and implementation of the five social protection programmes brought up by respondents and detail the vulnerabilities of the targeted groups.

## Family- and Household-Level Programmes

### Pantawid Pamilyang Pilipino Program

Launched in 2007, the 4Ps is the flagship conditional cash transfer programme of DSWD.<sup>4</sup> The central objective of the 4Ps is to alleviate poverty in the Philippines, providing social assistance and development by "giving monetary support to extremely poor families" and "breaking the intergenerational poverty cycle by investing in the health and education of poor children".<sup>5</sup>

Through 4Ps, beneficiaries receive the following conditional cash transfers (CCTs): i) health grant of PHP 750 per month per household; ii) education grants of PHP 300 per month per child in elementary school, PHP 500 per month per child in junior high school, and PHP 700 per month per child in senior high school; and iii) rice subsidy of PHP 600 per month. Alongside these CCTs, 4Ps provides health check-ups for pregnant women and children, deworming services for children, support in enrolling children in daycare centres and schools, and family development sessions. 4Ps is implemented across all regions in the Philippines and is active in 143 cities and 1,484 municipalities.

4Ps aims to target the poorest families first and identifies beneficiaries using the Listahanan database and the National Household Targeting System for Poverty Reduction (NHTS-PR), the government mechanism for identifying eligible beneficiaries. Beneficiaries are delisted through the programme's Grievance Redress System (GRS), and DSWD reserves the right to delist any who do not meet the targeting requirements and conditions of the programme.<sup>6</sup> Ongoing assessment of beneficiaries is done alongside the Department of the Interior and Local Government (DILG) to ensure LGUs assist in identifying those in need.

3 Okada, Han, and Hu, "Readiness to Implement the Action Plan to Strengthen Regional Cooperation on Social Protection."

4 Government of the Philippines, "Pantawid Pamilyang Pilipino Program."

5 Government of the Philippines.

6 Department of Social Welfare and Development, "DSWD's Listahanan Does Not Identify, Delist 4Ps Beneficiaries."



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### Targeting Requirements of the 4Ps:

- Must be in a household that is equal to or below the provincial poverty threshold.
- Must be a resident of a poor municipality (deemed by 2003 Small Area Estimates of the National Statistical Coordination Board)
- Must be in a household with a pregnant woman or a child between ages 0 and 18, with the following conditions:
  - ◊ Pregnant women must seek pre- and post-natal care and have hospital births accompanied by a trained professional.
  - ◊ Parents and guardians must attend family development sessions.
  - ◊ 0-5-year-old children must avail preventative health check-ups and vaccines.
  - ◊ 6-14-year-old children must take deworming medicine twice a year.
- ◊ 3-18-year-old children must enrol in school and maintain an attendance rate of 85 percent at minimum each month.
- Must consent to and meet the conditions of the programme.

### Modified Conditional Cash Transfer

The Modified Conditional Cash Transfer is an extension of the 4Ps, complementing it by targeting “families in need of special protection”.<sup>7</sup> The objective of MCCT is to provide aid to poor families who are more vulnerable to risks and hazards but are not covered by the 4Ps. These groups include Homeless Street Families (HSF), Indigenous Peoples in GIDAs, and Families in Need of Special Protection (FNSP). FNSP refers to families in evacuation centres who are victims of armed conflicts, natural disasters, displacement, and crises.<sup>8</sup>

7 Government of the Philippines, “Pantawid Pamilyang Pilipino Program.”

8 Department of Social Welfare and Development, “MCCT - Frequently Asked Questions.”



The Modified Conditional Cash Transfer offers a variety of aid. In terms of direct cash grants, beneficiaries receive PHP 300 per month for each child enrolled in daycare or middle school, PHP 750 per month for each child enrolled in high school, and PHP 750 per month per household for healthcare.

Other support services of MCCT include shelter assistance for HSFs, partner families, and livelihood opportunities such as the Cash-for-Work and Sustainable Livelihood Program.<sup>9</sup>

The programme acknowledges the unrepresentativeness of Listahanan, as a database that identifies poverty only for families with registered homes and shelters, and thus has unique targeting mechanisms to control for this:

#### **Targeting requirements for MCCT<sup>10</sup>:**

- Must be in a household with a pregnant woman or child between ages 0 and 18.
- Must be willing and committed to complying with the programme conditionalities and cooperate in the helping process.
- Must be excluded from the NHTS database and 4Ps programme.
- The MCCT was conceived of as a temporary addition to the 4Ps, meant to cover excluded families for only six months up to one year, “until they are ready for mainstreaming in the regular CCT”. Succeeding assessment is conducted on a yearly basis.

#### **Conditions for MCCT beneficiaries to mainstream into 4Ps<sup>11</sup>:**

- Must meet all 4Ps targeting requirements and conditions, as listed above, for at least 6 months before succeeding assessment.
- HSFs must be residing in a safe home or residence for at least three consecutive months.

## **Individual-Level Programmes**

### **Social Pension Program for Indigent Senior Citizens**

The Social Pension Program is a financial grant scheme of DSWD targeting indigent senior citizens who are not covered by other pension programs. They are granted a monthly pension of PHP 500 for their daily and medical needs.<sup>12</sup> Started in 2011 after the Republic Act 9994, the Social Pension Program targets vulnerable senior citizens who do not have their relatives’ financial support or any private or government pensions.<sup>13</sup> Originally, this programme was only available to seniors aged 77 and above, but as of 2016, 60-year-olds can now avail the benefits. The Social Pension Program operates across 17 regions in collaboration with LGUs, the City/Municipal Social Welfare and Development Offices (C/MSWDO) and the Office of the Senior Citizens Affairs (OSCA).

#### **Targeting Requirements for the Social Pension Program<sup>14</sup>:**

- Senior citizens who are 60 years old or older
- Frail, sickly or with disability
- No pension from the Government and Private Institutions
- No permanent source of income
- No regular support from family or relatives for his/her basic needs

9 Department of Social Welfare and Development.

10 Department of Social Welfare and Development.

11 Department of Social Welfare and Development.

12 Department of Social Welfare and Development, “Social Pension - About Us.”

13 Department of Social Welfare and Development.

14 Department of Social Welfare and Development.

Several documents are required to apply for the Social Pension Program<sup>15</sup>:

- Photocopy of OSCA ID of the Beneficiary
- Photocopy of ID of the Claimant/Certificate of Existence

## Comprehensive Program for Children/ Persons with Disabilities

The Department of Social Welfare and Development has advocated for and implemented national discounts and financial allowances for persons with disabilities in the Philippines. As per the DSWD website, persons with disabilities are entitled to 20 percent discounts on public railways and bus fares, hotels and restaurants, entertainment admission fees, medicine and dental costs, and domestic air travel or sea travel fares.<sup>16</sup> The policy for persons with disabilities also mandates express lanes in retail and government institutions and grants cash assistance for private and public schooling needs such as scholarships, subsidies, books, and uniforms.<sup>17</sup>

Other DSWD programmes offer cash-for-work to persons with disabilities, as well as medical assistance, livelihood skills training, counselling, and community rehabilitation.<sup>18</sup> To access these programs, persons with disabilities must seek out the social welfare office of the LGU in their locality, which will then interview and assess their disability status and begin the registration process. From then, once a rehabilitation plan is devised by the LGU, DSWD engages government resources and NGOs to provide financial assistance, counselling, livelihood training, or any other assistance needed. Evaluations are conducted periodically, and cases are closed when the beneficiaries' needs are met.<sup>19</sup>

## Targeting Requirements for Financial Assistance for People with Disabilities<sup>20</sup>:

- **Physically Disabled:** Visually impaired, hearing impaired, orthopedically disabled, or with other physical disabilities (cleft palate, harelip which affects their speech).
- **Mentally Disabled:** Improved mental patients, mentally retarded, autistic, attention deficit disorder, attention deficit hyperactivity disorder.

## The Philippine Health Insurance Corporation (PhilHealth)

The Philippine Health Insurance Corporation is the Department of Health's (DOH's) universal healthcare provider for the Philippines. The 2019 Universal Health Care (UHC) Act separates PhilHealth membership into two categories: direct contributors and indirect contributors.<sup>21</sup> This means that every Filipino is a member of PhilHealth, whether through direct or indirect contribution, with the former covering all Filipino employees, and the latter referring to all others not included as direct contributors whose premiums are subsidized by the national Government.

The Philippine Health Insurance Corporation subsidizes medical costs and hospital bills based on the amount incurred. For direct contributors, it has a monthly contribution rate of five percent of a beneficiary's basic salary.<sup>22</sup>

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15 Department of Social Welfare and Development.

16 Department of Social Welfare and Development, "PWD Privileges."

17 Department of Social Welfare and Development.

18 Department of Social Welfare and Development, Guidelines on the Implementation of the Comprehensive Program for Children/Persons with Disabilities.

19 Department of Social Welfare and Development.

20 Department of Social Welfare and Development.

21 Congress of the Philippines, "Universal Health Care Act".

22 Philippine Health Insurance Corporation, "PhilHealth Contribution Table 2019-2025."



## Discussion of Key Findings

## Overview of Analytical Process

This section of the study aims to address two of the three key research questions:

1. Among the vulnerable sectors, which specific groups are at a heightened risk of being left behind? If so, who are they and why are they (at risk of) being left behind?
2. What are the needs of these groups in relation to social protection?

Through the thematic analysis process, WFP found that issues generally cut across different target groups. To emphasize these intersections, the findings were grouped based on the developed themes. Figure 1 shows a graphic of the study's thematic approach in addressing the first research question. The findings are categorized into two: i) societal/structural factors and ii) programme-related factors. It is important to note that, while the study is anchored on social protection access and coverage, deeper issues experienced by individuals from the groups were also uncovered. Adhering to the inductive nature of qualitative research, this section also includes an in-depth discussion of these types of issues.

In addressing the second research question, the needs articulated by respondents and the needs identified based on the factors affecting access/coverage were consolidated and organized based on key social protection categories (Figure 2). By doing this, the study aims to help direct programme implementers and policymakers towards clear action points.

Figure 1. Key factors from the thematic analysis process

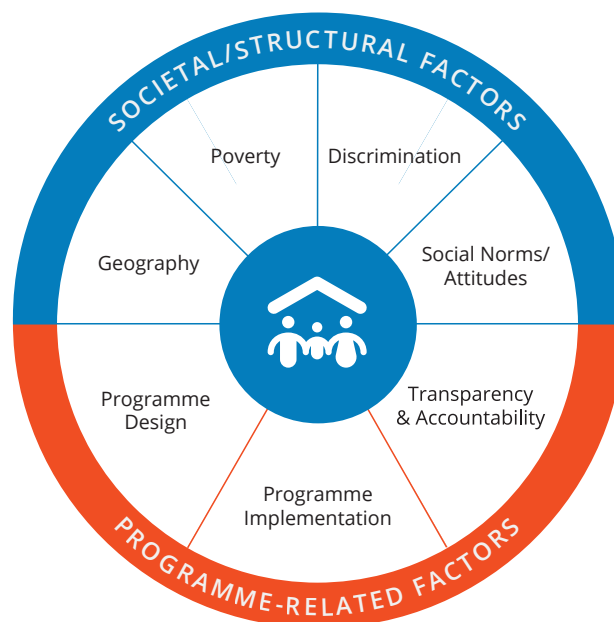


Figure 2. Themes developed in relation to the needs of key groups in relation to social protection.



## Factors Affecting Social Protection Access/Coverage

While the factors affecting social protection access/coverage may not be considered novel information, how exactly they affect people’s lives is less known/clear. In this subsection, the discussion focuses on the latter to pinpoint specific challenges encountered by the respondents of the study.



### Societal/Structural Factors

How do <b>geographic</b> disparities affect the lives of key groups in the study?				
FACTOR	GEOGRAPHY			
ISSUES UNCOVERED	Need for enhanced access to information	Need for enhanced access to essential services	Need for alternative/ accessible options	Added complexity in emergency response
GROUPS MOST IMPACTED	<b>GEOGRAPHICALLY ISOLATED AND DISADVANTAGED AREAS</b>			
	<ul style="list-style-type: none"> <li>• Farmers/ fisherfolk</li> <li>• Indigenous Peoples</li> <li>• Persons with disabilities</li> <li>• Senior citizens</li> </ul>	<ul style="list-style-type: none"> <li>• Children</li> <li>• Persons with disabilities</li> <li>• Pregnant women/ postpartum mothers</li> <li>• Senior citizens</li> </ul>	<ul style="list-style-type: none"> <li>• Persons with disabilities</li> <li>• Senior citizens</li> </ul>	<ul style="list-style-type: none"> <li>• All groups</li> <li>• Persons with disabilities</li> <li>• Senior citizens</li> </ul>

### Need for enhanced access to information

**Respondents in GIDAs report having limited access to information.** As GIDAs generally lack good cellular and internet connectivity, respondents in these areas do not always receive information disseminated through text messages or Facebook posts. In one FGD, respondents mentioned that people living in the mountainous areas of the barangay would sometimes miss information on distributions because they failed to receive the messages on time or because they were experiencing blackouts.

Due to connectivity issues, respondents from GIDAs expressed a strong preference for in-person communication. In-person communication methods, however, also seemed to have poor reach. While most respondents found the use of assemblies for barangays (to disseminate information) helpful, i) ensuring people’s attendance to the assemblies and ii) addressing reasons that prevent their attendance must continue to be addressed. Barangay officials mentioned that some farmers prioritized work over attending the assemblies, while a parent of a child with disabilities said that they found it difficult to attend because they were wary about leaving their child. Those who were unable to participate in the

assemblies relied on second-hand information from other community members. In-person communication methods are also only effective when there is significant lead time before community residents are expected to act on the information that they receive. In one FGD, respondents from a remote barangay mentioned that they were only informed of programme registration during a barangay assembly the day before actual registration.

Aside from issues with disseminating information within the community, there were respondents who also mentioned how their remoteness led to a systemic lack of knowledge. One barangay implementer from a GIDA mentioned how little knowledge they had about programmes compared to others from better-connected barangays:

“Let’s say that, in the remote areas, we are not much aware, we are not much educated about the [programme] — Sometimes, it’s so embarrassing to say; [other participants] discuss a lot of things [referring to programmes and policies] which we don’t understand. Because the ideas or the things that are being discussed [in seminars or conventions] don’t reach us.”

For programme implementation to remain consistent with national policies, information about policies and programmes must reach community-level implementers.

### Need for enhanced access to essential services for people in far-flung areas

**Respondents said that accessing essential services like schools and healthcare facilities can be incredibly difficult and taxing.** Although the Government aims to provide all barangays with basic services, building facilities in very remote barangays

is often resource intensive. Because of this, for some people from remote barangays, accessing services can require significant effort and time. According to respondents from an Indigenous community, what sometimes makes this more difficult is the poor road infrastructure. One respondent said that children would have to walk to school for an hour and that they would have to leave their house by 6 am. Another respondent mentioned how children from a mountainous area had to go downhill to reach their school, but because of the poor road conditions, they would sometimes miss school when it rained.

Aside from children, it seems that people who have significant healthcare needs are also the ones most impacted by accessibility issues. Of the 6,463 certified GIDAs in 2022 listed by DOH,<sup>23</sup> about half (3,349 barangays) did not have a barangay health centre based on data from the National Health Facility Registry.<sup>24</sup> In addition to the great distance to school, the respondents also indicated that the healthcare centre was even farther requiring an hour and a half. An interviewee said that even though leaders in their Indigenous community encouraged women to give birth in health centres, their initiatives were hindered by the fact that these centres were too far for many pregnant women to travel to.

### Need for alternative/accessible options

**People with disabilities in GIDAs have an even higher need for accessibility options due to the remoteness of their locations, but these options or alternative solutions do not seem to be available based on respondents’ experiences.** Many government programmes, services, and benefits can only be accessed at a central location, usually the provincial capital. While this already creates difficulties for people without a disability due to time and costs for travel, for persons with disabilities, senior citizens, and pregnant and breastfeeding women (P/BW), who are more likely to have a vulnerable physical condition, accessing benefits can be seemingly impossible. One respondent talked about how his aunt, who had

23 Department of Health, “GIDA InfoSys.”

24 Department of Health, “Health Facility List.”

disabilities, had to either ask family members or pay other people to receive the assistance on her behalf. Another respondent mentioned how people with serious health conditions opted not to go to the hospital because the hospital was too far away:

“The biggest need for people here is the lack of access to proper hospital care for patients. Even if they say it’s free, because [location] is far away and they don’t have transportation fare, they end up just staying here.”

### Added complexity in emergency response

**Although not all GIDAs are disaster-prone or climate at-risk when a natural disaster does strike them, emergency response is made more complex due to the topography of the area and/or their lack of infrastructure.** When asked about emergency response operations, respondents from GIDAs often compared (among them) how long it took for their communities to normalize. Mountainous areas are prone to landslides during typhoons, so accessing emergency response from these locations can be virtually impossible in the immediate aftermath of a disaster. Respondents from

a particular barangay mentioned how all land travel was blocked after a major typhoon hit them and that the only way to access their municipality was through helicopters. Recovery can also be much slower since these areas, given their low population density, are less prioritized. One very remote barangay mentioned that they lived without electricity for a year after all their utility poles—which used to be located atop the mountains—were destroyed by a typhoon.

Emergency situations are even more difficult for persons with disabilities, senior citizens, and their families. When asked about how persons with disabilities and less mobile household members are evacuated, respondents mentioned that barangays were mostly not able to support them, so families had to decide on their own regarding what to do. Few evacuation centres were also designed with accessibility in mind, as respondents reported them being very dark and difficult to navigate at night.

### Summary Table of Issues Related to Geography

In Table 2, the groups most affected by the issues are outlined. These issues are specific to groups that are in GIDAs. In addition, the light blue cells also show potential intersectional vulnerabilities, while the italics identify subsets of groups that relate to the issues mentioned.

Table 2. Geography-related issues and groups most affected by them

Group	GEOGRAPHY			
	Need for enhanced access to information	Need for enhanced access to essential services	Need for alternative/ accessible options	Added complexity in emergency response
GIDAs				
Children/youth				
Farmers/fisherfolk				
Indigenous Peoples				
Persons with disabilities				
Senior citizens				
Women		<i>P/BW</i>	<i>P/BW</i>	
All groups				

## How does persistent poverty affect the lives of key groups in the study?

FACTOR	POVERTY			
ISSUES UNCOVERED	Difficulty obtaining registration documents	Perceived lack of capacity for social insurance	Limited livelihood security	Exploitation of children to support the household
GROUPS MOST IMPACTED	<ul style="list-style-type: none"> <li>• Farmers/ fisherfolk</li> <li>• GIDAs</li> <li>• Indigenous Peoples</li> <li>• Internally displaced persons</li> <li>• Persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>• Informal workers</li> <li>• Farmers/ fisherfolk</li> <li>• Internally displaced persons</li> <li>• Persons with disabilities</li> <li>• Solo parents</li> <li>• Women</li> </ul>	<ul style="list-style-type: none"> <li>• Informal settlers</li> <li>• Farmers/ fisherfolk without land/ property</li> </ul>	<ul style="list-style-type: none"> <li>• CSEA survivors</li> <li>• Male children and youth</li> </ul>

### Difficulty obtaining registration documents

**Income constraints can preclude inclusion in government registries.** Having proper identity documents is crucial to access government services and assistance, and the most basic identity document is the birth certificate. While most Filipinos have birth certificates, in 2019, the Philippine Statistics Authority (PSA) said that about 5 million Filipinos were not registered in their system.<sup>25</sup> Nationally, they represented a small proportion of the population, but in BARMM, where this issue was most prevalent, the number of people without birth certificates was estimated at 970,000, or about 22 percent of the region's population in 2020.<sup>26</sup>

Although this issue is most common among people living in GIDAs, birth registration can be a problem for anyone who was not birthed in a formal birthing centre. One respondent from an urban area shared that her daughter was unable to give birth at a hospital because they lacked the money to pay for the costs. Consequently, she was unable to register her five-year-old granddaughter's birth:

“[My daughter’s] youngest also does not have a birth certificate since she was born at home after we were rejected by the hospital. When I was trying to register my granddaughter’s birth at the city hall, they asked me for an affidavit from the midwife, but we couldn’t contact that person anymore since she moved away. Somebody told me that we can use the immunization card to register my granddaughter’s birth, but when I showed that to them, they still asked for the affidavit.”

This respondent expressed her desperation to resolve the issue soon because her granddaughter needed a birth certificate to enrol in school. This family's issues with birth certificates did not end there. Aside from the granddaughter's birth certificate, the mother (respondent's daughter) also did not have a PSA birth certificate. Although the daughter's birth had been registered in their municipality, the birth record had

<sup>25</sup> Movido, “5 Million Pinoys without Birth Certificate.”

<sup>26</sup> Movido.



not been forwarded to the PSA, so the mother was not in the national registry. Officials from the PSA told them that the only way to resolve the issue was by going back to the municipality; however, this was not a viable solution for the family as the travel would require a significant amount of money and time that they did not have. They would have to ride either a boat or a plane to return to their former municipality. Because of this situation, her daughter had been unable to register as a person with a disability, even though her disability was immediately evident.

Aside from a birth certificate, most government and private sector services would require applicants to submit a valid ID. While there are no clear figures on the number of Filipinos without a valid ID, it is estimated to be a significant proportion of the population based on reports from telecommunications companies during the mobile SIM registration period from 2022 to 2023.<sup>27</sup> The companies cited not having a valid ID as being the primary reason why half of their subscribers were unable to register their SIM cards.<sup>28</sup> Additionally, although the companies accepted barangay certificates that were printed like IDs as a form of valid ID, not all barangays were able to issue those kinds of certificates.<sup>29</sup>

Internally displaced persons have a unique problem in relation to their lack of government documents. During an FGD with evacuees of the Marawi Siege, respondents mentioned that all they could think at the time was to leave and escape. When they moved to their new communities, they had practically nothing. The evacuees said that it was a very difficult transition because IDs were a necessity in Manila, but they could not obtain one right away since these cost time and money.

For persons with a condition requiring a medical diagnosis, the compound costs of medical tests and assessments can be the main barrier to registering for social assistance. A UNICEF report on the cost of

disabilities among children highlighted how expensive some medical diagnoses can be: “One family said the cost of a single bone marrow biopsy was PHP 13,000. The costs of diagnosis were also unaffordable for some families.”<sup>30</sup> In some cases, doctors had families repeat procedures when tests were found to be inconclusive. An interviewee mentioned the additional complexity of living in a GIDA if you were a person/child with a disability requiring a medical diagnosis. Even when the cost of assessments was covered, having to travel to a far-off hospital made decision making more difficult:

“Because the category of the disability is based on a doctor’s assessment, for people in far-flung places like [barangay], we help them with transportation to get to the district hospital and to be identified as PWDs. The doctor we have here doesn’t have a license to give a medical certificate. The doctor who can do that is in the district hospital.”

For more affluent households, the bureaucratic registration/application processes may not be difficult at all; however, for low-income households, these can be significantly burdensome and can incur heavy costs.

### Perceived lack of capacity for social insurance

**Respondents feel that they need a stable income to participate in government social insurance programmes.** When asked whether they were members of PhilHealth or the Social Security System (SSS), the government’s main social insurance programme for people outside the public sector,

27 Cacho, “SIM Registration Deadline Extension.”

28 Cacho.

29 Clapano, “Government-Issued ID Requirement a Problem in SIM Registration.”

30 Carraro, Robinson, and Hakeem, “The Cost of Raising Children with Disabilities in the Philippines.”

almost all respondents working in the informal sector said that they did not become members because they could not afford to regularly contribute to the programmes.

This response was particularly unexpected in relation to PhilHealth since the programme is mandated to cover all Filipinos. Direct contributions are not required for people to be members of Philhealth, but this information was not known to most of the study's respondents. Additionally, most were also not aware of the benefits of the health insurance programme. Since respondents believed that programme membership required financial contributions and did not think PhilHealth would directly benefit them, they had not considered applying to or enquiring about it.

Among the respondents, only people who had been formally employed mentioned having SSS. Membership of self-employed individuals in the SSS is dwarfed by those employed formally: 3.36 million vs. 32.09 million in 2021.<sup>31</sup> Compared to the actual share of the informal sector in the labour force at about 38 percent,<sup>32</sup> only 8 percent<sup>33</sup> of SSS members are likely from the informal sector. This problem disproportionately affects women as they are much more likely to work in the informal sector: 39 million women in the informal sector vs. 25 million men in 2017.<sup>34</sup> As incomes from informal livelihoods are generally less stable, most respondents did not think that they had enough money to put into the SSS. The SSS contributions fund pensions, so without it, senior citizens with no family support need to either continue working or to rely on the DSWD Social Pension for Indigent Senior Citizens. However, according to FGD respondents, the DSWD pension of PHP 3,000 per semester was not sufficient to provide for their daily needs:

R1: "[Seniors] who are still able to work continue to do so as long as they can."

R2: "It's because they can't rely on the Government since they only provide

occasional assistance. If you rely on the Government, you won't have any food."

In these contexts, the decision to continue working is often a necessity for senior citizens. For seniors in rural areas, though, livelihood opportunities are few, and most involve heavy agricultural work. This creates more risks to their health and overall well-being at a period in their lives when they are already more susceptible to illness.

### Limited livelihood security

**Some respondents perceived that a lack of property had led them to have less secure livelihoods and poorer access to basic services.**

In discussions with respondents from informal settlements, they spoke at length about the challenges they faced in accessing secure housing. Many of these respondents said that their families had long occupied the land and houses that they were staying in, but officially, these were illegal settlements, so they lacked permission for even basic services like an electric connection. Poor electric cabling and a community of houses made with light materials allow house fires to spread easily. Respondents in these areas mentioned that fires were the most common hazard and that many families whose houses were destroyed by a fire would benefit from more support from the Government to rebuild their lives.

Farmers and fisherfolks provide a different example of property-related issues. Some respondents mentioned that they could not be entered into the Registry System for Basic Sectors in Agriculture (RSBSA) because they needed asset documents as proof of their livelihoods (land titles or tax documents for farmers, proof of ownership of a boat for fishermen). Due to this requirement, farmers and fisherfolks who were the poorest (with no assets) were not able to access livelihood insurance programmes.

31 Social Security System, "SSS Self-Employed, Voluntary Membership up by 20.2%."

32 Dumalaog and Mones, "Under the Radar."

33 Social Security System, "SSS Self-Employed, Voluntary Membership up by 20.2%."

34 Tabuga and Cabaero, "Towards Inclusive Social Protection Program Coverage in the Philippines."

## Exploitation of children to support the household

**According to respondents, many poor families resort to child labour as a measure to supplement household incomes. Families rely more on male children for labour, and it is considered the main reason why they stop schooling.** In rural areas, respondents mentioned poor families pulling out older male children from school to i) support the household and ii) help ensure that younger children were able to go to school instead. In depressed urban areas, respondents also said that it was common for boys to work as labourers in the market to help their families, some working even through the night. Although they said that many of these children still tried to go to school, respondents admitted that needing to work was usually the main reason why boys and male youth dropped out of school.

Table 3 below shows the differences in education outcomes between boys and girls based on data from the 2020 Census.<sup>35</sup> While boys were more likely than girls to stop schooling at younger ages, the differences become much starker beginning at age 10. At around age 15, there was an almost five percentage-point difference at the “Junior High School – Undergraduate” level, indicating that male teenagers were much more likely to not graduate

from high school than female teenagers. Although there is a dearth of data on child labour and its impacts, these results support anecdotal findings that boys were more involved in heavy physical labour than girls.

Cases of child sexual exploitation and abuse (CSEA) are often also connected to child labour. A report on online sexual abuse and exploitation in the Philippines published in 2022 stated that one of the key factors driving CSEA was poverty, with families coercing their own children into engaging in sexual activities online as an income source.<sup>36</sup> Due to the need to make money, teenagers who are looking for work can also be easily manipulated. In one community where trafficking was a significant issue, respondents talked about cases where youth were manipulated/led to by traffickers:

“A kid sought my help because they were victims of human trafficking. The abuser said they would provide them with jobs, but they didn’t say that the work would be in a sexual massage parlour that forced them to touch genitals...”

**Table 3. Comparison of educational attainment of children and youth by gender, 2020 Census.**

Grade Level	5-9			10-14			15-19		
	M	F	Diff	M	F	Diff	M	F	Diff
No Grade Completed	11.8	11.3	0.5	1.0	0.8	0.2	0.9	0.8	0.2
Early Childhood Education	22.2	21.7	0.4	0.2	0.2	0.1	0.1	0.1	0.0
Grade 1 to 6	65.0	66.3	-1.4	59.8	63.8	-3.9	7.5	7.8	-0.3
Junior High School - Undergraduate				38.3	41.9	-3.6	30.2	25.3	4.9
Junior High School - Graduate							20.7	22.4	-1.7
Senior High School - Undergraduate							13.7	16.0	-2.3
Senior High School - Graduate							13.1	15.3	-2.2
Any Post-Secondary							20.0	27.2	-7.2

\*Note: Values are in percent.

35 Philippine Statistics Authority, “Literacy Rate and Educational Attainment Census 2020.”

36 ECPAT, INTERPOL, and UNICEF, “Disrupting Harm in the Philippines.”

While, in that example, the family was not involved in the trafficking, respondents also mentioned that there were families in the community who enabled trafficking by turning a blind eye to it.

Aside from interfering with learning outcomes, child labour also significantly impacts the physical and mental health outcomes of children involved. A systematic review of studies by Ibrahim *et al* (2019) on child labour found that “[m]alnutrition and poor growth were reported to be highly prevalent among

working children” and that “child labo[u]r is associated with higher prevalence of mental and behavio[u]ral disorders”.<sup>37</sup>

### Summary Table of Issues Related to Poverty

The table below summarizes the findings related to poverty; this factor affects all groups in some way. For some groups, further specification is necessary, and subgroups are written in italics.

Table 4. Poverty-related issues and groups most affected by them

Group	POVERTY			
	Difficulty obtaining registration documents	Perceived lack of capacity for social insurance	Limited livelihood security	Exploitation of children to support the household
Children/youth				<i>Particularly boys (child labour)</i>
Farmers/fisherfolk				
Indigenous Peoples	<i>In GDAs</i>			
Informal workers				
Informal settlers				
Internally displaced persons				
Persons with disabilities				
Senior citizens				
Solo parents				
Women				

37 Ibrahim et al, “Child labor and health: a systematic literature review of the impacts of child labor on child’s health in low- and middle-income countries”.

## How does **discrimination** affect the lives of key groups in the study?

FACTOR	DISCRIMINATION		
ISSUES UNCOVERED	Exclusion from programmes and lists	Limited livelihood opportunities	Need for enhanced access to justice
GROUPS MOST IMPACTED	<ul style="list-style-type: none"> <li>Internally displaced persons</li> <li>LGBTQIA+</li> <li>Religious/ethnic minorities in the community</li> </ul>	<ul style="list-style-type: none"> <li>LGBTQIA+ (particularly trans persons)</li> <li>Persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>LGBTQIA+ (particularly in BARMM)</li> </ul>

### Exclusion from programmes and lists

**Some respondents perceived that they were not included in beneficiary lists due to programme implementers discriminating against them and/or policies could be more inclusive.** For the former, respondents perceived that programme implementers developing beneficiary lists had a tendency to be exclusionary or deprioritized people from certain groups.

In more close-knit communities, long-time residents and community leaders can be biased against outsiders and exclude them from lists outright. During discussions with respondents from minority groups (Muslim communities outside of BARMM, Indigenous communities), a common issue was raised regarding how biases of barangay leaders determined who would receive government benefits. One interviewee noted that there was a clear difference in her community's access to services at present due to their barangay leader's concerted effort to include her community and to provide support to them. In another discussion, respondents talked about how they perceived discrimination to be systemic:

"Especially with this Government, there is discrimination against [group]. For certain things [being given to other groups], [the minority group] don't receive the same. Their questions and needs aren't being addressed."

According to an interviewee who has worked with internally displaced persons in BARMM, some people from this group prefer not to register themselves as residents in their new communities as a safety precaution. As clan wars and clashes are still a present danger in the region, there is a possibility of triggering conflict if the internally displaced persons come from families feuding with long-time residents of the barangay.

For LGBTQIA+, the discrimination they face tends to be embedded in actual policies. In one FGD, respondents spoke about their experience being excluded from pandemic relief distribution. Although the policy for the distribution of relief goods stated that a pack should be given to each family (not household), LGBTQIA+ couples were not considered a family unit and did not receive relief packs:

“In our case, during the pandemic, they just passed you if they saw that you’re an LGBT couple. They would just pass by you. They would only give it to [the LGBTQIA+ person’s] mother, even though the Government said that relief goods should be given per family. But because we were an LGBT couple, we were not given anything. We were viewed as being under our parents, even though many of us are couples with children, and so should have been more prioritized.”

For some respondents with disabilities, the prospect of applying and re-applying for work was daunting. A few felt that they did not have enough schooling to be able to qualify for work—dropping out at a young age due to complications with their disabilities, while others had experienced rejections clearly due to their disability:

“I did not experience working for someone else because, as a [person with a disability], whenever you apply for things, regardless of whether you’re capable or not, you will always be at the end of the list. They always pick the ones who are physically complete. I also sent my résumé to employers. When we did phone interviews, I always got in, but once they saw that I had a physical disability, my application would get dismissed. That experience is painful.”

### Limited livelihood opportunities

**Some respondents mentioned being affected by discriminatory hiring practices as well as having less access to different livelihood opportunities due to stereotyping.** The reasons for discriminating against certain groups ranged from beliefs that they would not be as capable, to sociocultural biases against them.



An attractive alternative to a few was self-employment and starting their own business; however, this option was only open to those with capital. More inclusive government livelihood programmes for persons with disabilities are needed. One respondent mentioned:

“...The programme’s design is specific to stereotypes of thinking—that a person with a disability can do nothing—and is based on the question: ‘What can you do?’ It’s not fair for us because the selection of the recipients of the programme is based on a person’s disability rather than the right approach.”

Because of these forms of discrimination, many of the respondents with disabilities were not working. This left them dependent on other people in their household even though they wanted to work.

Employment issues for LGBTQIA+ respondents, by contrast, were rooted in negative sociocultural perceptions. Unlike persons with disabilities, there were few arguments about LGBTQIA+ people being less capable, but they often still had to prove themselves to their families and communities. One interviewee talked about how people from the LGBTQIA+ community felt the need to push themselves and how many carried a heavier burden for their families:

“Yes, sometimes it becomes the source of strength for gay people to excel more because that’s the only way for them to be accepted. But at some point, those who can’t keep up are left behind, although the support is still there. Most of the time, LGBT members here are forced to stop schooling. It seems to be a problem here: in a household of more than five siblings, the gay ones are the breadwinners, the ones who are forced to work. They

have more talents, so they make the sacrifice.”

Similar to the experience of the respondent with a disability who was rejected during in-person interviews, respondents also talked about how personal interviews could shift the likelihood that a transgender man would be hired for a role:

“...When you go there for an interview, and you have a homophobic interviewer— [FGD participant] was told, ‘We will hire you if you will wear skirts, if you will wear makeup.’ So, it’s kind of a first-hand experience of discrimination.”

In some local governments, although there are livelihood programmes for LGBTQIA+ people, they are often designed with stereotypes in mind, like livelihood training for LGBTQIA+ people to work in salons.

## Need for enhanced access to justice

### **Discrimination towards LGBTQIA+ even extends to how they are treated by the justice system.**

One respondent from Metro Manila talked about how reports of violence against LGBTQIA+ people tend to be ignored by barangay officials:

“So, sometimes, if they go to barangay to report a certain gender-related violence case or sexual abuse... In the barangay, there’s a desk there that caters to all the violence cases— physical, sexual abuse—but when they go there for a certain complaint, they’re getting— They’re denied assistance.”

This issue is particularly salient in BARMM, where homosexuality is widely discriminated against. Rocky Rinabor, a Board Member of Amnesty International Philippines, said more due diligence in investigating hate crimes is needed:

“What makes it more difficult is the fact that the majority of hate crimes, if not all, are not properly investigated by local authorities. It is often dealt with impunity, based on the belief that the crimes directed towards queer people are justified because it is the life we choose, thus, we must accept it and just live with the consequences it brings.”<sup>38</sup>

On its part, the Bangsamoro Government has made various commitments to protecting the rights of LGBTQIA+ citizens. In a resolution condemning the slew of hate crimes being committed in the region, the Parliament stated that the “Bangsamoro Government should develop a concrete action plan to stop violence due to prejudice and discrimination in all areas and spaces in BARMM territories.”<sup>39</sup>

**Summary Table of Issues Related to Discrimination**

Table 5 provides an overview of the key groups affected by discrimination-related issues based on the findings from the study. For some highlighted cells, specific subgroups are also mentioned when relevant.

Table 5. Discrimination-related issues and groups most affected by them

Group	DISCRIMINATION		
	Exclusion from programmes and lists	Limited livelihood opportunities	Need for enhanced access to justice
Indigenous Peoples	<i>In GIDAs</i>		
Internally displaced persons	<i>Particularly in BARMM</i>		
LGBTQIA+		<i>Particularly trans persons</i>	<i>Particularly in BARMM</i>
Persons with disabilities			

38 Amnesty Philippines, “Hate Crimes against LGBTQIA+.”

39 Bangsamoro Parliament, Resolution Condemning the Violence, Discrimination and Murder Committed against Reportedly Some Members of Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ++) Community in the Municipality of Datu Piang, Maguindanao Last September 18 and 19, 2021.



## How do social norms and attitudes affect the lives of key groups in the study?

FACTOR	SOCIAL NORMS AND ATTITUDES		
ISSUES UNCOVERED	Need for reproductive health services/education	Low level of financial independence among women	Issues with rights due to traditional practices
GROUPS MOST IMPACTED	<ul style="list-style-type: none"> <li>• LGBTQIA+ community</li> <li>• Youth</li> </ul>	<ul style="list-style-type: none"> <li>• CSEA survivors</li> <li>• GBV survivors (particularly in Muslim communities)</li> <li>• Solo parents</li> </ul>	<ul style="list-style-type: none"> <li>• Children (Muslim/indigenous communities)</li> <li>• Women (Muslim/indigenous communities)</li> </ul>

### Need for reproductive health services and reproductive health education

**Discussions about sexual and reproductive health are still largely seen as taboo even though there is a high level of concern regarding early pregnancy and the HIV epidemic in the country.** Based on the results of the 2021 Young Adult Fertility and Sexuality Study (YAFSS) that surveyed youth between the ages of 15 and 24, most youth do not have reliable sources of information about sex.<sup>40</sup> When asked about their material sources of information about sex, only 18 percent of males and 23 percent of females said that they used educational materials. The Department of Education (DepEd) has a policy on the inclusion of comprehensive sex education in the school curriculum. More works remains for standardization and operationalization of this policy.<sup>41</sup> Parents and adult family members have not filled this gap in sex education either, as less than 15 percent of youth say that they discuss sex at home.

For respondents, sex education is critical as early pregnancy is the main reason why girls drop out of school, and this issue is particularly relevant among poor families. Based on the results of the 2022 NDHS,

more than 10 percent of teenage girls aged 15 to 19 from the lowest income quintile have gotten pregnant at least once; this figure is almost six times higher than that of girls from the wealthiest income class (see Figure 3).<sup>42</sup> Some girls do continue schooling after giving birth, but this is only possible when families are fully able to support them. A baby is an extra dependent and, for the poor families, the extra costs and responsibilities associated with them are often too difficult to manage. This results in many teenage mothers from poor communities deciding to stay at home to focus on childcare instead of continuing their studies.

During interviews, respondents mentioned that a key constraint to the use of contraceptives is the requirement of consent from a parent or legal guardian. A new house bill aiming to establish “adolescent-friendly sexual and reproductive health services, as well as social protection measures for pregnant minors” addresses this issue and includes a measure that would allow teenagers aged 15 to 18 to access contraceptives and reproductive health services on their own.<sup>43</sup>

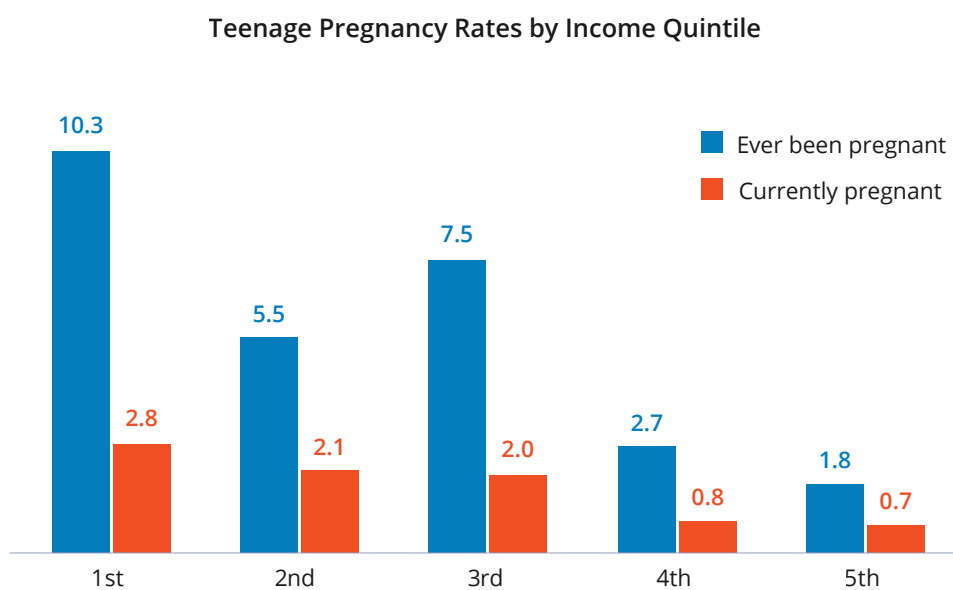
40 University of the Philippines Population Institute, “Zoom in, Zoom Out.”

41 Gregorio, “DepEd Backs Making Sex Education Compulsory, Standardized | Philstar.Com.”

42 Philippine Statistics Authority and ICF, “NDHS.”

43 Chi, “Bill Giving Pregnant Minors Better Access to Health.”

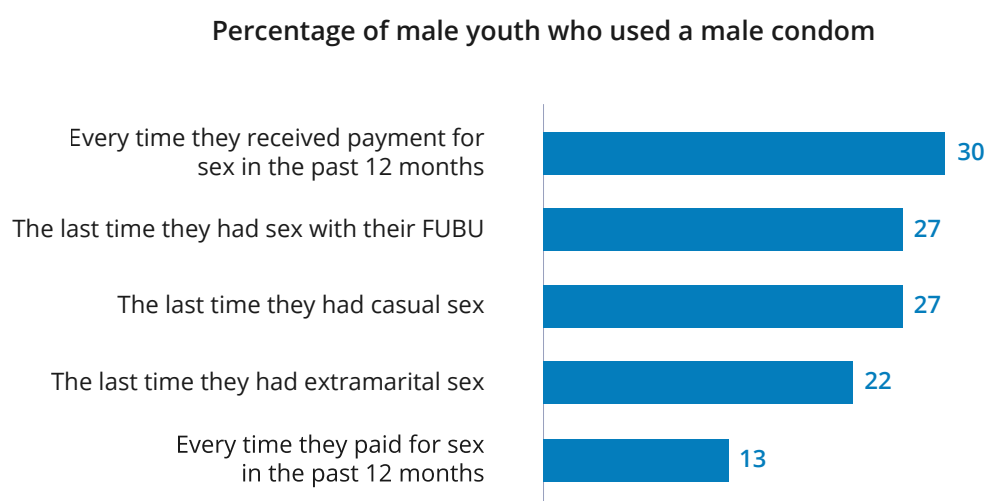
Figure 3. Percentage of women aged 15 to 19 years who have ever been pregnant and currently pregnant by household wealth, 2022 NDHS.



Aside from early pregnancies, there is also growing concern regarding the spread of HIV and other sexually transmitted diseases among young people. Based on estimates from the DOH, almost half of the 364,000 projected HIV cases by 2030 would be coming from the youth.<sup>44</sup> However, awareness of HIV prevention methods and pathways of transmission seems to be low among youth with only 19 percent

having comprehensive knowledge about the topic.<sup>45</sup> There is also a need to combat negative perceptions regarding contraceptives as only 40 percent of youth who have been sexually active reported having ever used any contraceptive method.<sup>46</sup> As shown in Figure 4, the use of condoms among male youth engaging in high-risk sexual activities is quite low.

Figure 4. Condom use among male youth during high-risk sexual activities, 2021 YAFSS.



44 de Vera, "DOH Sounds Alarm over HIV Infections."  
 45 University of the Philippines Population Institute, "Zoom in, Zoom Out."  
 46 University of the Philippines Population Institute.

## Low level of financial independence among women

**Lack of financial independence prohibits many women from leaving abusive situations, and those who do leave often find it difficult to establish their lives and livelihoods.** Although the Philippines is often lauded in the Asia-Pacific Region for performing well in relation to gender equality assessments, there is a clear gender gap in relation to labour force participation: 76 percent for men but 49 percent for women.<sup>47</sup> Based on a study conducted by the National Economic and Development Authority (NEDA) in 2019, the persistence of gender norms and stereotypes is a key reason for these gaps: women are still expected to stay at home to care for the household and children, while men earn an income and provide for the household.<sup>48</sup> This is corroborated by a report published by the Philippine Institute for Development Studies (PIDS) in 2019, “About one-third of women of working age are economically inactive because of their household or family duties while only 2 percent of men are in similar circumstances.”<sup>49</sup>

At the barangay level, the effects of these stereotypes were clear. Based on accounts from interviewees, many women in poor communities become highly financially dependent on their partners once they live together and have children. This becomes a serious problem when women find themselves in abusive households but fear leaving because of their perceived inability to meet their and their children’s needs. About 20 percent of women in the lowest income quintile reported having experienced some form of emotional, physical, or sexual violence from their most recent partner.<sup>50</sup> This group also has the lowest rates of labour force participation.<sup>51</sup>

A woman’s decision to stay in an abusive situation, however, does not only affect them but also their children. Interviewees from one barangay talked about a case that particularly frustrated them:

“We actually have a new case where a child was being abused by the father. The mother knows since the child told her about it. Whenever she and her husband fought, she would leave the house and her child at home. At first, she didn’t believe that her child was being abused, but then she saw the actual harm to her child. Now, the case is being handled by the DSWD and [the Barangay Council for the Protection of Children].

The problem is that since the mother does not have financial independence, they continue to stay with the father. The only thing we can do is to continuously monitor the situation and give advice. We told them to push through with the case since [the barangay] and DSWD will help them financially, but the wife still didn’t want to.”

The fear of not being able to meet daily needs is a legitimate one, though, as respondents working with women who had left abusive situations said that community resources and support systems were limited. While there were groups that provided food assistance in the short term, they emphasized that what women needed most was livelihood support so that they could sustain themselves in the long run.

Limited community support systems were echoed by solo parent respondents, many of whom were women who had separated from their partners. Their main concern was balancing work and childcare, so they felt that starting a business at home was a good

47 Buchhave and Belghith, “Overcoming Barriers to Women’s Work in the Philippines.”

48 Cabegin and Gaddi, “Determinants of Female Labor Force Participation.”

49 Tabuga and Cabaero, “Towards Inclusive Social Protection Program Coverage in the Philippines.”

50 Philippine Statistics Authority and ICF, “NDHS.”

51 Cabegin and Gaddi, “Determinants of Female Labor Force Participation.”

option. Almost all solo parent respondents expressed a strong preference for taking care of their children themselves and said that they could only leave their children with trusted family members. While this is a sociocultural constraint that may inhibit women from pursuing more stable employment, limited reliable daycare options may also reinforce this viewpoint. Although all barangays are mandated to have daycare centres by law, more have yet to employ full-time workers with permanent positions: in 2021, DSWD reported that only 11 percent of daycare workers held such positions.<sup>52</sup> As such, many daycare centres do not have consistent or structured operations.

## Impacts of traditional practices on rights

**Traditional practices prevented respondents from some groups from having the same rights and/or access to services.** In selected communities, the incompatibility of traditional practices with modern institutions was often highlighted. These conflicting perspectives were most common among Muslim and Indigenous communities.

For Indigenous communities, the requirements of the MCCT—which includes Indigenous communities as one of its specific target populations—can be incompatible with their community traditions. These include traditional birthing practices, which are not conducted in formal birthing centres, and traditional marriages. Both practices often lead to complications in obtaining a birth certificate or a marriage certificate, both of which are important documents to apply to the MCCT. For some without birth certificates, the band-aid solution that they implemented was to have their children baptized since baptismal certificates were easier to obtain than birth certificates (and considered alternate documents to birth certificates).

While the previous case directly showed how social protection access can be limited due to issues between programme requirements and community practices, traditional gender norms can have broader and more detrimental impacts. For women in some Indigenous communities, land ownership is a

contentious topic, as their practices only allow men to own land. This makes it difficult for women to be economically independent and can impact their decision making power within the household and the larger community.

Women in Muslim communities may also face certain challenges in relation to their ability to report issues of abuse/violence in the household. As religious doctrine specifies that men have ultimate authority in the household, women may not feel comfortable reporting incidents of violence or feel allowed to do so. One interviewee was candid about how Muslim women in her community reported incidents of domestic violence to her, but she advised them to accept their situation and to prioritize protecting the family. If these situations are common in the Muslim community, it may be associated with the reason why the rate of intimate partner violence in the BARMM region was an outlier compared to the rest of the Philippines based on the 2022 National Demographic and Health Survey (NDHS). In BARMM, only 6 percent of coupled women reported having experienced intimate partner violence; this was half of the next lowest rate, which was 13 percent in NCR.<sup>53</sup> While it is possible that the rate of intimate partner violence in BARMM accurately reflects the reality, it is highly unlikely as sensitive issues like this are often underreported. This is evident in other statistics from the 2022 NDHS, which show that separated women were much more likely to report having experienced intimate partner violence (45 percent) than currently partnered women (17 percent).<sup>54</sup>

Aside from shaping the role of women in a household/marriage, traditional and cultural practices can also influence perceptions around early marriage, which is/was practiced in both Muslim and Indigenous communities. These societal norms and attitudes may inadvertently restrict the decision making power of children—both girls and boys—resulting in instances where they enter into early marriages without the ability to provide full consent.

52 Bachelonia, “DILG, Daycare Workers’ Input Sought in Senate Hearing.”

53 Philippine Statistics Authority and ICF, “NDHS.”

54 Philippine Statistics Authority and ICF.

### Summary Table of Issues Related to Social Norms and Attitudes

In relation to issues due to social norms and attitudes, women, youth, and LGBTQIA+ groups are the ones

that appear most affected. Table 6 summarizes the findings and specific subgroups are identified in italics.

Table 6. Issues related to social norms/attitudes and groups most affected by them

Group	SOCIAL NORMS AND ATTITUDES		
	Limited reproductive health services / education	Low level of financial independence among women	Issues with rights due to traditional practices
LGBTQIA+			
Women		<i>GBV survivors</i> <i>Solo parents</i>	<i>In Indigenous/Muslim communities</i>
Children/ youth		<i>CSEA survivors</i>	<i>In Indigenous/Muslim communities</i>

### Programme-Related Factors

Are there aspects of programme design that could be improved to enhance access to/coverage of social protection programmes?			
FACTOR	PROGRAMME DESIGN		
ISSUES UNCOVERED	Uniform approach to address different needs	Limited funding impacting coverage/benefits	Need for integration of intersectional lens

#### Uniform approach to address different needs

**Many programmes have a uniform approach in deciding what benefits to provide recipients. These programmes should further account for recipients' actual needs.** While all respondents who received cash transfers from their programmes thought that the financial assistance was helpful to them, a few admitted that they did not really need it. One respondent who had a disability said

that they did not have issues that required regular medication or hospitalization and neither did they have significant issues in finding a job. By contrast, in the same group, another respondent talked about how much of a burden the cost of maintenance medication was for her. The two had very different levels of need, but they received the same support from the Government. Ideally, support would be provided using a needs-based assessment, so that people who do need more medical assistance, for example, could have better access. This uniformity in

approach can be seen as a symptom of fragmentation in programme design, where insufficient coordination leads to generic solutions that fail to address individual needs effectively.

When asked about what their needs were in terms of social protection and assistance, although many respondents still answered cash assistance, about the same number shared that they needed better livelihood opportunities. They saw monetary assistance as a stopgap measure to address immediate needs, but they wanted more long-term stability. Although there are several livelihood programmes being implemented that target different groups, respondents indicated that they have yet to earn a sustainable income. For newly single parents who are women, livelihood support is particularly critical because many of them used to be stay-at-home mothers, relying on the income of their partners. However, they also face a unique challenge in that their children make it difficult for them to pursue full-time work outside unless they are staying with family or friends who can take care of their child. In this regard, reliable childcare is a significant constraint that prevents these mothers from pursuing more stable work. Greater alignment between programmes that support childcare, employment, and financial assistance could further enhance the overall impact of these efforts.

### Limited funding impacting coverage/benefits

**Although there are a wide range of social protection programmes being implemented in the Philippines, many are focused on the same groups/sectors. At the same time, the depth of support provided by these programmes still appears to be insufficient to meaningfully address needs.** In 2022, the Asian Development Bank published a report assessing the social protection landscape of different member countries. For the Philippines, it found that “the overall breadth of coverage increased from about 32 percent [of target beneficiaries] in 2009 to about 119 percent in 2018”;

however, when measuring the depth of coverage, it found that only 2.5 percent of the country’s gross domestic product (GDP) per capita was being spent on social protection. This indicates that the country’s social protection programmes are likely targeting the same beneficiaries but still not providing enough support to address their needs.

The need for deeper support was echoed by focus group respondents, particularly by those who received 4Ps benefits. Considering that inflation rose rapidly in 2022, reaching decade highs, the decrease in the real value of 4Ps benefits and financial assistance from other programmes is likely to be significant. One respondent said that the education assistance they received was inadequate to cover the miscellaneous expenses required by the school:

“[A] student has a lot of requirements in school. For example, the students need to have their own uniform, costing PHP 3,500, which we should pay for within half a month. I can’t afford that. I tried to ask the teachers if my son could just quit the activity because I could not afford to pay for the uniform, but the teachers didn’t allow it and demanded that I buy the uniform.”

The 4Ps respondents’ perception that their benefits were not enough is supported by the analysis done by researchers from the Philippine Institute of Development Studies in 2023.<sup>55</sup> The authors show that the real value of the maximum cash grant of PHP 31,200 in 2021 was only PHP 26,422, using 2016 as the base year for comparison. This represents a 15 percent reduction in the value of the cash grant from 2016 to 2021.

In general, the analysis revealed a significant shortfall in the financing of social protection programmes,

55 Abrigo and Melad, “Comments on House Bill No. 8040.”

leading to inadequate coverage and insufficient support for vulnerable populations. Despite the presence of numerous programmes, the dispersion of limited funds across various initiatives results in a dilution of their effectiveness. This financial fragmentation contributes to overlapping efforts and inefficiencies, where resources are not optimally allocated to the most impactful interventions. Consequently, many social protection initiatives fail to achieve their intended outcomes, leaving gaps in support for those in need.

For persons with disabilities, the gap in social protection is not only an issue of depth but also of actual coverage since there is no law that institutionalizes an allowance for them. A report published by the UN Economic and Social Commission for Asia and the Pacific (UNESCAP) states that only 3 percent of persons with severe disabilities have access to the social protection programmes in the Philippines in comparison to 21 percent in the Asia-Pacific region. Currently, the only policy that exists at the national level provides a registered person with disability a 20-percent discount from stores; however, for those in rural areas, it is not often impactful since few stores honour the discount. In comparison, a person with a disability who lives in a city like Manila, whose local government provides a monthly allowance of PHP 500 to persons with disabilities, receives significantly more support, albeit still relatively small.

Limited coverage and the need for enhanced social assistance points to a need for a unified database for social protection programmes. As social protection programmes are managed disparately, it is difficult for administrators to understand meaningfully, whether the assistance they are providing is sufficient or not. This is important for making decisions that require trade-offs, e.g., providing more assistance to ultra-poor household vs. providing less assistance

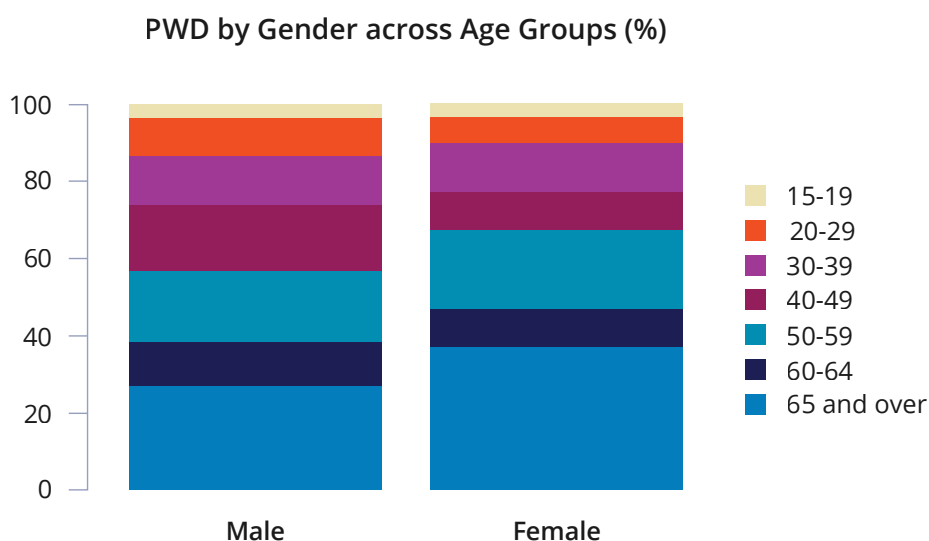
to a larger group of near-poor households. A unified database could support better coordination, allowing for a more tailored and effective distribution of resources.

## Need for integration of intersectional lens

**Key social protection programmes, by design, should reflect intersectional issues and compound vulnerabilities.** The prime example for this issue is the implementation of the programmes for senior citizens and persons with disabilities. Figure 5 shows that the largest proportion of persons with disabilities are 60 years of age or above, when comparing across age groups based on data from the ENNS. This is unsurprising since seniors tend to be more vulnerable to chronic illnesses and conditions. One could also expect this group to have much higher medical expenses because of their compound vulnerabilities. At present, however, seniors who have disabilities are required to “pick” between accessing either senior citizen benefits or benefits for persons with disabilities. While this is understandable for making use of discounts, considering low-income seniors with disabilities, they are prevented from receiving a larger amount of money that could significantly aid in their medical expenses.

To understand compound vulnerabilities, it would be ideal to have a unified database of social protection programmes beneficiaries. Currently, however, the social protection programmes in the Philippines are mostly designed to be separate and the systems could be further integrated. Social protection programmes at the national level are independently managed and the agencies leading them create separate databases of their beneficiaries. Sharing beneficiary data between agencies to integrate the databases is also difficult given strict data protection and data sharing laws.

Figure 5. Population percentages of persons with disabilities by age group and gender, ENNS 2018/2019/2021



Are there aspects of programme implementation that limit access to/coverage of social protection programmes?

FACTOR	IMPLEMENTATION		
ISSUES UNCOVERED	Need for more coordination between implementers	Issues with selection/ registration processes	Difficulties with disbursement processes

Need for more coordination between implementers

Based on discussions with communities, implementation on the ground often does not follow guidelines in official policies. There could be strengthened convergence between national and local governments and even between local governments and barangays for enhanced implementation at local level aligned with national programme design and objectives. Most social protection programmes are institutionalized at the national level but are designed to be implemented by local governments under the Mandanas-Garcia Ruling. This separation of responsibilities requires not

only close coordination between the different levels of government, but also the capacity/capability of local governments to serve its constituents. However, many local governments face significant resource constraints. One example is how the social protection programme for solo parents has been implemented. Among the study sites, none were able to meet the required monthly schedule of pay-outs to registered solo parents, even though this was specified by the law. The main reason for this was the need for more budget to provide the subsidy.

At the community level, these challenges in implementation sometimes result in limited guidance or misinformation about social protection



programmes and avenues for assistance. Successful programme implementation relies on barangays that are fully knowledgeable about programme processes, especially for programmes requiring application/ registration like those for solo parents or persons with disabilities. In one barangay, a solo parent told us that they had been asking about the application process for assistance, but they had consistently been informed that there was no programme:

“We have been asking the [barangay official] about it as well. But he keeps on telling us that there is no assistance for solo parents in our barangay.”

Testimonies pointed to the need for further knowledge about programmes amongst barangay officials. Depending on the level of knowledge barangay officials demonstrate, people may be hindered from accessing social protection programmes. People’s access to social protection programmes may become highly dependent on knowing which person to ask. In one barangay, a respondent mentioned that their health centre provided them with good guidance about applying for PhilHealth. Because of this, the costs of hospitalization for their pregnancy were fully covered. However, in an FGD with a few health workers from the same barangay, the group appeared to be unaware about PhilHealth and its benefits:

R1: “Usually, only 4Ps members or senior citizens [in the barangay] have PhilHealth membership.”

R2: “Not all senior citizens have PhilHealth membership.”

F\*: “Is it not automatic for senior citizens to have PhilHealth?”

R2: “No.”

F: “Do you advise people to get PhilHealth?”

R2: “No. Even we don’t have PhilHealth.”

...

F: “In your opinion, is it important to register for PhilHealth even if you don’t pay for it?”

R2: “In my opinion, PhilHealth has no use if it’s not active and if you don’t pay the monthly fee.”

R1: “It’s really important that you pay for it. Otherwise, you won’t be able to use it.”

\* R: Respondent | F: Facilitator/interviewer

## Issues with selection and/or registration processes

**Respondents shared their difficulties applying to programmes (for programmes requiring self-registration), while questions were raised about the reliability of community-based lists (for programmes that conduct their own targeting).**

Different groups mentioned various issues ranging from the cost of obtaining the required documents, the long wait for a response, and biases of programme implementers that caused exclusion.

For some respondents, the difficulty of getting the required documents to apply for a programme can be a heavy burden. Some communities hired middlemen to facilitate their applications. In FGDs with Indigenous communities, some respondents said that the complexity of obtaining a birth certificate for their children had pushed them to hire a lawyer to handle the issue. Similar coping mechanisms were seen among solo parents: One respondent mentioned that because the solo parents in their barangay had no knowledge of the application process, a group of

them agreed to pay PHP 100 each to someone who would facilitate the processing of their applications.

There were also respondents who said that hard-set registration periods restricted their access to social protection. For the RSBSA, both respondents and officials mentioned that strict schedules were implemented: “Those who attended got the RSBSA, and those who did not were deemed ineligible.” This shows the rigidity of certain government processes. While it is important for farmers to prioritize the RSBSA, registration of farmers was limited due to strict registration periods.

Even after applications are submitted, there are still issues with the process, given the variable lengths of waiting times for confirmation/approval. There were respondents who mentioned that they received their IDs affirming their inclusion in their respective programmes within days of applying, while others were still waiting for feedback on their applications even though they had submitted their documents months before.

Some social protection programmes, rely on community lists instead of self-registration systems. In using community-based profiling for targeting, three critical assumptions need to be met to deem the list reliable that: i) the lists were made in an unbiased manner, ii) all families/households in the community participated in the profiling, and iii) the profiling was done recently. When WFP spoke with respondents, for each assumption, there was at least one case where it did not hold true.

Several respondents mentioned how lists often favour and prioritize political allies and/or family members of local leaders, while others mentioned that the lists can sometimes exclude people who are deemed outsiders by key community members. Because of these issues, many respondents expressed distrust of profiling conducted by community leaders.

Even when there is a high degree of social cohesion and community leaders are well-intentioned, community profiling can still fail if not all households

choose to participate in the exercise. In one case, a respondent talked about the reluctance of senior citizens and persons with disabilities to respond to visitors conducting the profiling:

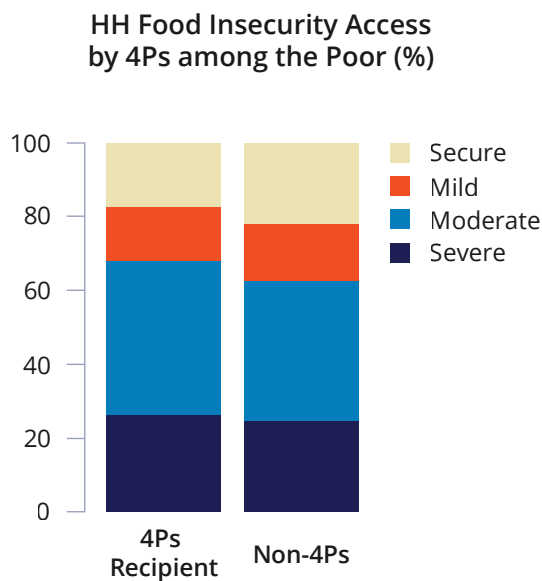
“...What we do—especially when [calamity] happened—we base our activities on the [Records of Barangay Inhabitants]. There are people who get left behind because they have this idea that the people going to them will get their data; they don’t like that and ask what it’s for. But when the government assistance was being distributed, they complained.”

Because they opted out of the profiling, they were not included in the provision of emergency relief after the calamity:

“So, we tried to explain, ‘Tatay, when our workers came to visit you—maybe a [Barangay Health Worker], a zone president, our barangay midwife, or [Barangay Nutrition Scholar]—did you give them your data? What was your situation at that time? When was this? Who was with you at that time?’ [They answer], ‘No one.’ So, we explain, ‘You didn’t want to register through the barangay. We weren’t asking you to register for votes. What we check is the list of inhabitants, where you’re located, so that if there’s assistance from the national government or municipality, we can disburse it quickly.’”

Community lists are also only reliable if they provide a good reflection of the demographics and income status of the current population. This means that if profiling was done years before, then it may not provide a good basis for targeting today. This is usually the argument against using Listahanan or 4Ps lists as a basis for targeting the most disadvantaged during emergencies. Although the lists may be readily available, they may not necessarily identify the people most in need at present since the lists were developed years before. Figure 6 compares the food security of low-income households who receive 4Ps benefits and those who do not based on data from the ENNS. It shows that, although members of the 4Ps are more likely to be food-insecure, the proportion of food-insecure non-4Ps households is also significant.

**Figure 6. Comparison of household food security between 4Ps and non-4Ps, ENNS 2018/2019/2021**



Poor = Poorest + Poor Wealth Quintiles

Aside from potential issues regarding demographic/ income changes, new migrants to the community and internally displaced persons are not included in outdated community lists. This is especially concerning in BARMM where internal displacement is a significant issue. In this situation, usage of an old community list would lead to excluding internally displaced families who were likely to be in more need of support.

### Difficulties with disbursement process

**Issues with disbursement processes and the distribution of assistance were also common among respondents.** There are three aspects to consider in the distribution process: i) information dissemination, ii) frequency/scheduling, and iii) accessibility of distribution sites. These issues are particularly prominent in GIDAs. In far-flung areas, information not only arrives later compared to other barangays, but travel to distribution sites is also more time-consuming and costly. A few respondents mentioned that this has led them to not being able to collect their assistance since people from other barangays were able to get there first.

Aside from the issues above, respondents also indicated the need for more consistency of disbursement schedules. Several respondents mentioned that they sometimes had to wait for months to receive cash assistance from the government programmes; more said that the lack of schedule or clarity regarding the frequency of distribution frustrated them. One respondent even said that their payment for a cash-for-work programme was delayed by three months.

## Are there challenges related to transparency and accountability that limit access to/coverage of social protection programmes?

FACTOR	TRANSPARENCY AND ACCOUNTABILITY		
ISSUES UNCOVERED	Need for enhanced community-level feedback mechanisms	Need for more transparency and objective monitoring	Instances pointing to corruption and misallocation of benefits

### Need for enhanced community-level feedback mechanisms

**When asked about feedback mechanisms, respondents said that they were not aware of any.** At the community level, the only avenue for feedback known to most respondents were barangay assemblies/consultations facilitated by community or local officials. These community consultations tended to be the same meetings as the barangay assemblies where programme information was disseminated. While these meetings were called consultations, getting feedback from community members did not seem to be their main purpose. In fact, when we asked respondents whether they had ever been consulted about programmes before, they often said that the FGDs that we were conducting were the first time they had been able to express their issues and experiences about social protection programmes.

While there are barangays where community consultations are well-attended, these meetings are facilitated by community and local officials. Some testimonies from community members shared their discomfort with being completely honest about their feedback. Community members mentioned that they were not able to discuss issues like corruption, which significantly affects programme processes, in this setting. In fact, many respondents told us that they were afraid of raising issues because of fear of retaliation:

“One of the reasons people there don’t say anything is because there are threats. Every time someone complains, you have to choose between your life or what you know is illegal.”

Respondents who were open to reporting issues about programmes felt that there were no clear pathways where they could be raised. They encouraged feedback to be channelled through associations and organizations. Many communities believed that officials would not listen to them if approached directly:

“[My mother] wants to talk about [her issue], but it’s like she doesn’t have the right to complain to anyone since the leaders hold the authority in the community. We have no power at all.”

### Need for more transparency and objective monitoring

**Respondents raised concerns about the transparency of programme processes.** For both programmes that require people to apply/register and programmes for which the government initiates

profiling/identification, respondents perceived that processes were neither fair nor transparent. People across the study sites mentioned feeling that selection was biased, based on people's connections and not their needs:

"I don't usually apply for assistance but, from my perspective... if you hadn't supported the politician, or you didn't vote for the person who won, you won't get any assistance."

"We don't know how they create the list [of beneficiaries] because each agency has a different list. DSWD, for example, will have a different list and then the local government may have a different list as well. I don't know how they coordinate to address the variance—which they should."

This negative perception towards implementation processes may foment distrust in government social services. When there is high distrust, people vulnerable to exclusion who need social protection may decide to disqualify themselves from programmes by not applying due to the belief that they would have no chance of being selected.

These critical issues at the barangay level may not be visible to implementers at higher government levels or local government officials, as they both depend on the reports and lists from barangay officials/ implementers. From the interviews, there did not seem to be auditors or monitors at the barangay level who would be able to check that community officials were keeping with implementing policies. To address this issue, one respondent recommended having someone completely removed from the community to conduct beneficiary validation instead since they were likely to be more objective about the process of selection/identification.

***Instances pointing to corruption and misallocation of benefits: Respondents reported instances of perceived corruption and/or misallocation of benefits at the barangay level.***

Respondents reported that barangay leaders not only selected allies to be part of programmes but also took directly from disbursements. Although the use of ATM cards for disbursements of cash transfers was supposed to prevent corruption in the 4Ps, it did not appear to hinder corrupt leaders in at least one barangay:

"Another serious problem with the 4Ps— They have the ATM card, right? The cards are being kept by the barangay leaders, and it seems like the owner of the cards doesn't have any right to them."

"Out of, for example, 50,000 allocated to barangay beneficiaries, only 30,000 is disbursed because 20,000 is pocketed by barangay officials or the captain who's the municipal link."

This abuse of power by leaders did not only happen at the barangay level but was also mentioned by farmers and fisherfolks who were part of agricultural associations. These associations are leveraged by the Government to distribute support for agricultural workers, but respondents reported powerplays even within these groups:

R1: "For us fisherfolks, what happens is that only one or two people [from the association] get the benefits. That's what happens."

R2: "That's why my spouse left the fisherfolk association. Every time they have something to distribute — Every

Table 7. Summary of programme-related factors

Group	PROGRAMME-RELATED FACTORS		
	Programme Design	Implementation	Transparency and Accountability
All	<ul style="list-style-type: none"> <li>• Uniform approach to address different needs</li> <li>• Limited funding impacting coverage/ benefits</li> <li>• Need for integration of intersectional lens</li> </ul>	<ul style="list-style-type: none"> <li>• Need for more coordination between implementers</li> <li>• Issues with selection/ registration processes</li> <li>• Difficulties with disbursement processes</li> </ul>	<ul style="list-style-type: none"> <li>• Need for enhanced community-level feedback mechanisms</li> <li>• Need for more transparency and objective monitoring</li> <li>• Instances of perceived corruption and misallocation of benefits</li> </ul>

time they have a meeting, they'll ask him to attend it. But when it was time to distribute things like nets and nylon, he never got anything."

R1: "That's why I don't like associations. You have to compete for influence."

### Summary Table of Programme-Related Factors

The table above provides an overview of the programme-related factors that shape the participation and reach of social protection initiatives.



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## Needs Related to Social Protection Programmes

This subsection addresses the second research question and focuses on the needs that can be addressed by social protection programmes and the groups that would benefit most from programming. The discussion here synthesizes the results from

the previous subsection which stated needs of respondents, to determine what can be done to support those left behind. One important point of clarification is that a key criterion for all groups mentioned here is low-income status.



### Food Security and Nutrition

- Children
- Young mothers
- Persons with chronic illness
- Seniors in rural areas



### Livelihood

- Agricultural workers
- Out-of-school youth
- Persons with disabilities
- Solo parents
- LGBTQIA+
- Women



### Education

- Adolescents
- Young mothers
- Children with disabilities



### Healthcare

- People in GIDAs
- Persons with intellectual/mental disabilities
- Persons with chronic illness
- Youth (particularly women and LGBTQIA+)



### Holistic Support/ Casework

- CSEA victims
- GBV survivors (particularly women)
- Internally displaced persons



### Emergency Response Measures

- All groups (particularly in GIDAs)
- Persons with disabilities
- Senior citizens
- Women

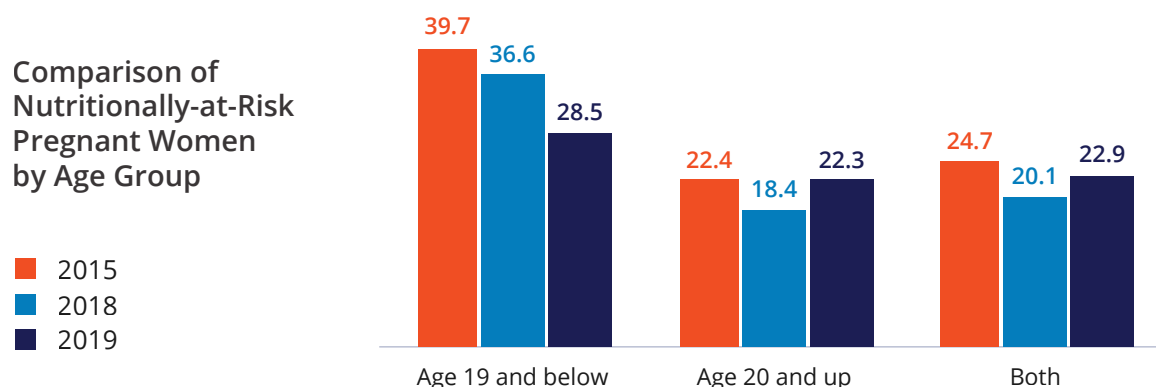
## Food Security and Nutrition

In relation to food security and nutrition, the following four groups appeared to have more pressing needs:

- Children (in and out of school);
- Young mothers;
- Persons with medical disabilities; and
- Senior citizens in rural areas.

Given the findings that children are most at risk of leaving school due to poverty and inability of families to provide sufficient and nutritious food for their children, expanding school meals programmes is essential for their physical and cognitive development. This also serves as an incentive for families to keep or return their children to school. Through school meals programmes, children not only receive the vital nutrients they need for healthy growth but also gain access to education, empowering them with the knowledge and skills necessary for a better future.

Figure 7. Prevalence of nutritionally-at-risk among pregnant women by age group, ENNS 2015/2018/2019



As mentioned earlier, girls and young women from the poorest income quintiles are more likely to get pregnant early. According to the ENNS, the most nutritionally-at-risk pregnant women are aged 19 and below (see Figure 7). Given this context, and in view of high nutrition needs of mothers and infants, there is a need to prioritize young mothers.

Similarly, persons with disabilities relating to a medical condition are likely to need more focused nutrition support. To meet their needs, their families would have to spend significantly on both food and healthcare. However, many poor families already struggle with daily expenses, so specialized needs like this may be less prioritized. By providing direct food assistance to persons with medical disabilities, programmes need to further ensure that their health needs are addressed.

Senior citizens in rural areas are a unique group in that, while they may not necessarily have specific nutrition needs, they are a group highly vulnerable to hunger. To address their day-to-day food needs, most senior citizens continue working well after retirement age. However, the available work in most rural areas involves heavy agricultural labour and wages tend to be low and unstable as well. Senior citizens also tend to have significant health issues and physical limitations due to age. Providing food assistance to them can help lessen the daily burden of work on them.

## Livelihood

During discussions with respondents, many emphasized the need for income support. While all respondents said that they wanted cash assistance, livelihood support was also considered integral for long-term sustainability. Many of the issues shared with were about how difficult it was to find work and how their work was unstable. Below, the groups needing livelihood support are grouped based on the type of support that would best address their issues:

- **Training/work placement**
  - ◊ Out-of-school youth (OSY)
  - ◊ Persons with disabilities
  - ◊ Solo parents (particularly women)
  - ◊ Married/cohabitating women
- **Agricultural support**
  - ◊ Smallholder farmers
  - ◊ Fisherfolk
- **Anti-discrimination policies**
  - ◊ LGBTQIA+
  - ◊ Persons with disabilities

Livelihood training and work placement can greatly benefit OSY, persons with disabilities, solo parents (particularly women), and married/cohabitating women since these groups often lack work experience and have insufficient schooling. Programmes that encourage them to develop skills would make them more attractive to employers.



For people working in the agricultural sector, although there are several government programmes that focus on supporting smallholder farmers and fisherfolks, these are usually only accessible to those registered in the RSBSA. However, registering can be a difficult process for those without proper documents. Thus, supporting agricultural workers through the application process is critical to ensure that the registry is inclusive.

The LGBTQIA+ community and persons with disabilities still face significant issues with discrimination. For both, anti-discrimination legislation is crucial to ensure that employment practices are fair and that applicants are assessed based on their qualifications and ability to do the required work rather than factors unrelated to their ability to perform a job.

Two key initiatives that would benefit all groups are childcare services and social insurance. Although both are currently available to everyone, they are still significantly underutilized. With better and more reliable daycare centres, more women may be encouraged to participate in the labour force. For low-income families, having a second income earner can significantly bolster the household income. As for social insurance, currently, enrolment is highly dependent on employment in the formal sector, with informal workers largely opting out, due to a lack of i) capacity to pay the contributions or ii) an understanding of the value of membership. Developing strategies to encourage enrolment would help ensure that people have a safety net when they are older and are less capable of working.

## Education

Most respondents intend to prioritize their children's education; however, many are unable to do so. Among the groups in this study, three groups had clear education needs:

- Adolescents;
- Young mothers; and
- Children with disabilities.

For both OSY and children at risk of being OSY, poverty and financial struggles are most often the cause of their schooling issues. Their parents are forced to decide between investments in their children's future and the present urgent needs of their household. Teenage mothers, by contrast, stop schooling, usually due to issues with their pregnancy or to the stigma they could face in school. Many students who pause their schooling hope to return but have few resources to support them. On the other hand, children who stay in school but have other responsibilities may find it challenging to balance their lives. For these groups, more flexible schooling options or support for continuation through DepEd's Alternative Learning System should be offered.

For some children with disabilities, special education programmes or specialized schools may be necessary. However, not all parents may be comfortable or knowledgeable about how to address those needs. Along with ensuring that schooling resources are available to children with special needs, parents should be guided on how to better support their children.

## Healthcare

In relation to healthcare, the most impactful initiative may simply be raising awareness of PhilHealth eligibility among the poor, elderly, and persons with disabilities. These groups are considered members of PhilHealth even without paying monthly contributions. To raise uptake, a campaign on the benefits provided by PhilHealth can also be helpful.

Regarding more specific needs, based on the findings, these four groups can benefit significantly from healthcare-related programmes and assistance:

- People in GIDAs;
- Persons with medical disabilities or chronic medical conditions;
- Persons with intellectual or mental disabilities; and
- Youth.

Based on the study's findings, people in GIDAs encounter significant difficulty in accessing essential health resources. They are at higher risk of being left behind in terms of healthcare due to having less access to information and the limited availability of essential services and facilities in remote areas.

Although not all persons with disabilities have significant healthcare costs, those who have medical, intellectual, or mental disabilities are much more likely to need specialized care. For both, accessibility (both in terms of cost and distance) of testing and diagnostic services is critical as poor families would likely not have the capacity to spend for multiple assessments. Once a diagnosis is obtained, for many with conditions of this kind, maintenance medication, therapy, or other regular medical services may be necessary and, consequently, regular and long-term support for health expenses as well.

For youth, to mitigate health risks related to sexual activities, access to sexual and reproductive health services needs to be expanded. The requirement to obtain contraceptives, which stipulates minors to have the consent of a parent/legal guardian, is a highly prohibitive factor in youth practicing safe sex.

## Holistic Support

For some groups, holistic support involving different levels of assistance is necessary. These groups face the issue of having to rebuild their lives and livelihoods. Based on the findings from the study, three groups should be prioritized for holistic support:

- CSEA victims/survivors;
- GBV survivors; and
- Internally displaced persons.

While all three groups would likely need cash assistance, housing, food, and counselling, CSEA victims/survivors (usually minors) need more focused

support for a long period of time, likely until they become adults. For GBV survivors, the timeline for support depends on the support systems the person has. Those who have been isolated and separated from other family members for an extended period would need significantly more time to learn to be independent.

Currently, there are programmes for CSEA victims/survivors and GBV survivors, but there are none that are focused on internally displaced persons. This group has a high need for holistic support since their transition to a new community required them to uproot their lives. Unlike for CSEA victims/survivors and GBV survivors, though, the support is more transitional.

## Emergency Response Measures

Important improvements to emergency response measures were also mentioned during data collection. Respondents said that there was a need to ensure that evacuation policies and centres accounted for the different needs of community members. To name a few examples of issues with emergency response measures: the needs of persons with disabilities were usually overlooked in relation to the design of evacuation centres; women sometimes feared for their safety and security being in a facility with improper lighting; and material resources like adult diapers and medication were rarely available to community members.

Although the examples provided above focus on immediate emergency response measures, the recovery period after an emergency can be extensive. According to respondents, farmers would need about half a year to return to normalcy if their crops were completely wiped out. In this scenario, cash-for-work programmes can serve as a stopgap measure to ensure that families are able to weather the damages caused by an environmental emergency.



# Recommendations

Based on the findings from the LNOB analysis, WFP presents a series of targeted recommendations designed to strengthen efforts to support groups at risk of being left behind in social protection programs. These recommendations are divided into two categories: i) policy-focused strategies and ii) operational implementation measures. This section addresses the third research question: “What actions can be taken to ensure the inclusion of the most at-risk groups in social protection assistance?”

## Policy-Level Recommendations

### **Strengthen the evaluation framework of social protection programmes to ensure budget and investments are focused on evidence-based interventions.**

Institutionalizing impact evaluations for all social protection programmes supports rationalizing government interventions. One of the key issues uncovered in this study is the adequacy of social protection coverage: Although there are many existing programmes, efforts are often duplicated and support is insufficient, as funding is spread too thinly. To deepen coverage, difficult funding choices need to be made. Evaluations provide evidence on the most cost-effective and impactful programmes and can be the basis for comparing programmes and deciding which to continue and strengthen.

Aside from providing evidence on impact, evaluations can better inform the Government about the specific needs of different sectors/communities to ensure appropriate interventions with the right amount of support. This enables the development of more comprehensive initiatives tailored to the unique challenges faced by diverse groups.

### **Ensure that local implementers have strong coordination with national-level implementers and are fully capacitated, with particular focus on improving access to information.**

As programmes are being devolved to local governments, there is a clear need to assess the capacities of local-level implementers to ensure effective programme implementation. Based on the study's findings, coordination between national and local implementers needs to be strengthened to address information gaps and implementation issues.

Recognizing the evolving landscape of devolved services and the pivotal role of LGUs in programme implementation, there is an opportunity to enhance support and foster consistency at the LGU level. Strengthening the capacity of LGUs in information

dissemination is imperative to ensure the successful delivery of social protection programmes to all communities. This entails providing targeted training and resources to empower LGUs to effectively communicate programme details and benefits to their constituents while strengthening their ability to implement and monitor programmes.

However, efforts should not stop at the local government level as there is a high degree of variance in the capacities of barangay-level implementers as well. Based on the study's findings, there is a strong preference for in-person communication and information dissemination, so ensuring that community-level focal persons are fully equipped to inform and guide community members is crucial. To this end, as the Government continues to strengthen local government implementers, there should be a more concerted effort to train and capacitate community-level implementers like barangay officials and barangay health workers who are often the most trusted resources of community members.

By focusing on the capacities of local implementers, programme implementation may also be better contextualized. For example, in a municipality that has strong barangay-level implementers, distribution of food packs and rice may be further devolved to the barangay level, which would address access issues of persons with disabilities and senior citizens. Investing in the capacities of communities themselves can create a more inclusive and responsive environment that ensures no community is left behind in accessing vital social protection services.

To ensure effective collaboration, establishing a clear system of communication between national and local implementers would also be critical. This system would define the roles, responsibilities, and reporting mechanisms between different implementers, which would allow them to work efficiently together while keeping one another accountable.

### **Establish reliable digital infrastructure, especially in GIDAs.**

Digitalization opens up significant opportunities to improve access and implementation of social



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protection programmes in GIDAs. The internet and online messaging platforms allow people to learn about programmes, raise issues, and provide feedback with little to no hassle; there are telehealth and learning programmes that provide health and education services that reduce the need for travel; and financial assistance and payments can be more safely transferred through digital financial services. Many of these opportunities are already being used by even the poorest in urban areas, but in GIDAs where the digital infrastructure is much less established and reliable, it is difficult for people to fully adopt them. This presents a paradox as digital services are most beneficial to people in GIDAs but they are also the least accessible to them.

Considering this, while the Government has a plan for strengthening the digital infrastructure of the Philippines as a whole, more effort should be given to GIDAs. Telecommunications companies already prioritize urban and peri-urban areas since these are secure markets, while they tend to neglect GIDAs since there is not a strong profit incentive there. To address this gap, the Government could explore solutions that would encourage telecommunications companies to build infrastructure in GIDAs, through public-private partnerships.

## Operations-Level Recommendations

### **Develop an integrated database capturing vulnerabilities and strengthening targeting system.**

To enhance the effectiveness of social protection programmes, it is critical to develop an integrated database that captures various vulnerabilities faced by marginalized groups. This database should make programme-specific targeting easier and help ensure that assistance is directed to those most in need. By consolidating data from different sources, such as national government agencies, LGUs, and NGOs, the database can provide a comprehensive view of the socioeconomic conditions and specific vulnerabilities of individuals and households within communities. This entails harmonizing i) data collection methods and ii) criteria, to create a system that accurately reflects the needs of diverse groups. This also helps to avoid arbitrary targeting at the local level by ensuring that all decisions are based on consistent, objective criteria rather than subjective judgments. This centralized system can help provide clear guidelines and reliable data, reducing the potential for bias or favoritism in identifying beneficiaries, and ensuring that aid is distributed equitably based on verified needs and vulnerabilities.

## Tailor programmes to better consider needs and intersectional vulnerabilities related to exclusion.

To enhance both the effectiveness and fairness of social protection programmes, a transition from a standardized approach to a more tailored framework based on individual needs and the recognition of intersecting vulnerabilities is recommended.

The current practice of providing uniform benefits, as highlighted by this study, could be further strengthened to better account for the diverse needs and circumstances of individuals. It is imperative to address these intersecting vulnerabilities. This could start with enhancements to data collection efforts by ensuring data is disaggregated by relevant demographic variables including age, gender, disability status, ethnicity, socioeconomic background, and geographical location.

Conducting community-driven assessments before formulating programme targeting criteria is vital to ensure that those with distinct challenges (linked to their vulnerabilities) receive suitable assistance. Furthermore, it is essential to align social protection strategies with long-term stability. Numerous participants articulated a preference for improved livelihood prospects over solely depending on immediate cash aid. The Government's and WFP's ongoing implementation of comprehensive livelihood initiatives in the Philippines offers a promising avenue, where a deeper understanding

of intersecting vulnerabilities, encompassing specific limitations and requirements, could greatly benefit programme beneficiaries. For instance, targeted support is crucial for newly single parents, predominantly women, who grapple with domestic work responsibilities.

## Embed anti-discrimination principles and acknowledge the influence of social norms within programming.

The findings highlight the significance of addressing discrimination within social protection initiatives. While WFP is already working to tackle this issue, there's an opportunity to strengthen these efforts. To ensure inclusivity irrespective of background, it is recommended to proactively implement measures that prevent discrimination. Recognizing the influence of societal expectations and cultural norms on individual experiences, WFP's programme design considers local contexts. Elevating these ongoing endeavours requires deeper engagement with community leaders, influencers, and stakeholders to foster productive dialogues and challenge detrimental norms that perpetuate inequalities.

Conducting social and behavioural change interventions on social norms is essential to effectively challenge and transform these deep-seated beliefs. Such interventions can promote more inclusive attitudes and behaviours, contributing to long-term societal change. Examples of social and behaviour change (SBC) interventions include



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radio shows that promote health and education, school programmes that teach gender equality, and campaigns that encourage positive parenting practices. In addition, interpersonal dialogues, social networks or local cooperatives, and advocacy for better local policies can enable changes in social norms. Finally, SBC can complement longer-term efforts by strengthening the capacity of local partners, including the Government, to implement and manage SBC interventions.

The study's findings underscore the importance of integrating gender equality as a fundamental element of programme design and implementation. Adopting a gender-transformative approach can address harmful social and gender norms to advance equitable opportunities, dismantle systemic barriers, and foster sustainable development. In addition, capacity strengthening initiatives should equip staff, especially those working for local governments, with the skills to mainstream gender equality and adopt a people-centered approach.

### **Bolster monitoring of programme implementation.**

To ensure that programmes are working well and are being implemented as intended, it is integral to bolster data collection and monitoring efforts at the community level. Having more frequent and up-to-date information on programme processes will ensure that implementers are well-informed to respond to the needs of the communities they serve and will allow them to better address key issues. A strong emphasis on a data-driven approach will not only facilitate the refinement of policies and strategies but also cultivate a culture of transparency and accountability. Through continuous monitoring and evaluation, governments can track progress, measure the effectiveness of interventions and, most importantly, tailor their initiatives to best address the specific needs of marginalized communities.

It is also important to develop and integrate gender-sensitive indicators into the monitoring frameworks of all programmes. These can help capture various impacts of programmes on different groups. The collection and analysis of disaggregated data would

help implementers and policymakers to identify groups that may need more support or that are more responsive to certain programming. In turn, this can help make programme interventions more tailored to their target populations.

It is imperative to strengthen the coverage, effectiveness, and accessibility of community-level feedback mechanisms, such as local Grievance Redress Committees. These committees serve as a platform where community members can voice their concerns, complaints, and suggestions about the programmes. Local Grievance Redress Committees should include community representatives from diverse backgrounds (considering age, gender, ethnicity, religion, etc.) to ensure a comprehensive and inclusive approach to problem-solving. By bridging the gap between communities and implementers, programmes can better address the needs of the communities. Implementing strong and reliable feedback mechanisms at the community level can empower communities to actively engage in shaping the programmes designed to support them. Programme designers and implementers, in turn, would have easier access to information regarding issues and needed changes to their programmes.

### **Forge local partnerships.**

Aligned with Sustainable Development Goal 17 – Partnership for the Goals – WFP places a significant emphasis on fostering partnerships to pave the way for lasting development solutions. Central to this commitment is the imperative to establish formalized collaborations with local civil society organizations, LGUs, communities and their leaders. Leveraging their grassroots presence, these partners play a vital role in recognizing and encompassing marginalized groups that may otherwise remain unnoticed. Strengthening community consultation efforts is pivotal to continue adapted programmes based on the needs of communities. By actively involving these stakeholders in targeting exercises, programmes can be tailored to better serve the diverse needs of these often-overlooked communities.

Moreover, by exploring beneficiary-focused disbursement modalities with local partners, such as

direct cash transfers, WFP can enhance the efficiency and effectiveness of its aid delivery, ensuring that resources are directly channelled to those in need. These partnerships also extend their reach to locations where governmental capacity may be augmented with additional aid and support.

### **Strengthen capacities to support persons with disabilities during emergencies.**

While the Philippines boasts a diverse array of Organizations of Persons with Disabilities and local government focal points offering support to families with a person with a disability, it is precisely these families that encounter significant barriers during emergencies. Challenges range from difficulties in evacuating and accessing vital information, to inadequate medical assistance and ill-equipped evacuation centres. To strengthen its emergency

preparedness and anticipatory action initiatives, WFP could consider incorporating immersive sessions within its simulation exercises. In this way, participating agencies, including government counterparts, can experience first-hand the hurdles faced by individuals with disabilities. This approach has the potential to cultivate empathy and a heightened comprehension of the essential adaptations required for inclusivity.

As governments and organizations like WFP prioritize accessibility of information about social protection programmes through digital/online platforms, they should also pursue initiatives to ensure that these platforms cater to the needs of persons with visual, auditory, and other disabilities. Strengthening the capacities of local Persons with Disabilities Affairs Offices would be vital to achieve this.



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# Glossary of Acronyms and Abbreviations

4Ps	Pantawid Pamilyang Pilipino Program
AAP	Accountability to Affected Populations
BARMM	Bangsamoro Autonomous Region in Muslim Mindanao
BHW	Barangay Health Worker
C/MSWDO	City/Municipal Social Welfare and Development Offices
CCT	Conditional Cash Transfer
CE4AAP	Community Engagement for Accountability to Affected Populations
CSEA	Child Sexual Exploitation and Abuse
CSO	Civil Society Organization
DepEd	Department of Education
DILG	Department of the Interior and Local Government
DOH	Department of Health
DSWD	Department of Social Welfare and Development
ENNS	Expanded National Nutritional Survey
ESCAP	Economic and Social Commission for Asia and the Pacific
FNSP	Families in Need of Special Protection
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GIDA	Geographically Isolated and Disadvantaged Area
GRS	Grievance Redress System



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