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Presenter

Rapid qualitative assessment of the impact of 4Ps on nutrition outcomes in selected municipalities

SUMMARY OF FINDINGS

Nard Huijbregts, Manila, 2 October 2019

Presentation outline

- Assessment background
- Purpose and objectives
- Findings
- Recommendations
- Concluding thoughts

Assessment background

Achieving nutritional outcomes is complex

- First 1,000 days in a child's life presents a **crucial window of opportunity** for prosperous growth and development throughout the lifetime
- Chronic malnutrition stunts children's physical growth and brain development, it can leave a child impaired for life
- Malnutrition is the result of multiple causes and a variety of interconnected economic and social risks and vulnerabilities → achieving nutritional outcomes and impacts requires a **multidimensional** effort
- Fighting malnutrition requires a combination of short-and long-term actions, curative and preventative interventions
- Cash transfers can directly help to:
 - (i) increase overall food consumption (quantity of intake);
 - (ii) improve dietary diversity (quality of intake);
 - (iii) increase utilisation of health services, by providing households with the necessary financial means.

Purpose and objective

Rapid qualitative assessment of the impact of 4Ps on nutrition outcomes

- Bridge the ***evidence gap*** and help explain the programme's mixed impact on nutrition outcomes
- Contribute to the ***evolving policy discussions*** on nutrition-sensitive social protection in the Philippines and the role of the 4Ps in achieving nutritional outcomes
- Support the ***development of a strategy*** accompanying the recently passed First 1,000 Days Bill
- Generate an understanding of the ***factors that drive nutrition*** impacts in 4Ps beneficiaries
- Identify under which ***circumstances*** impact is achieved

Assessment framework

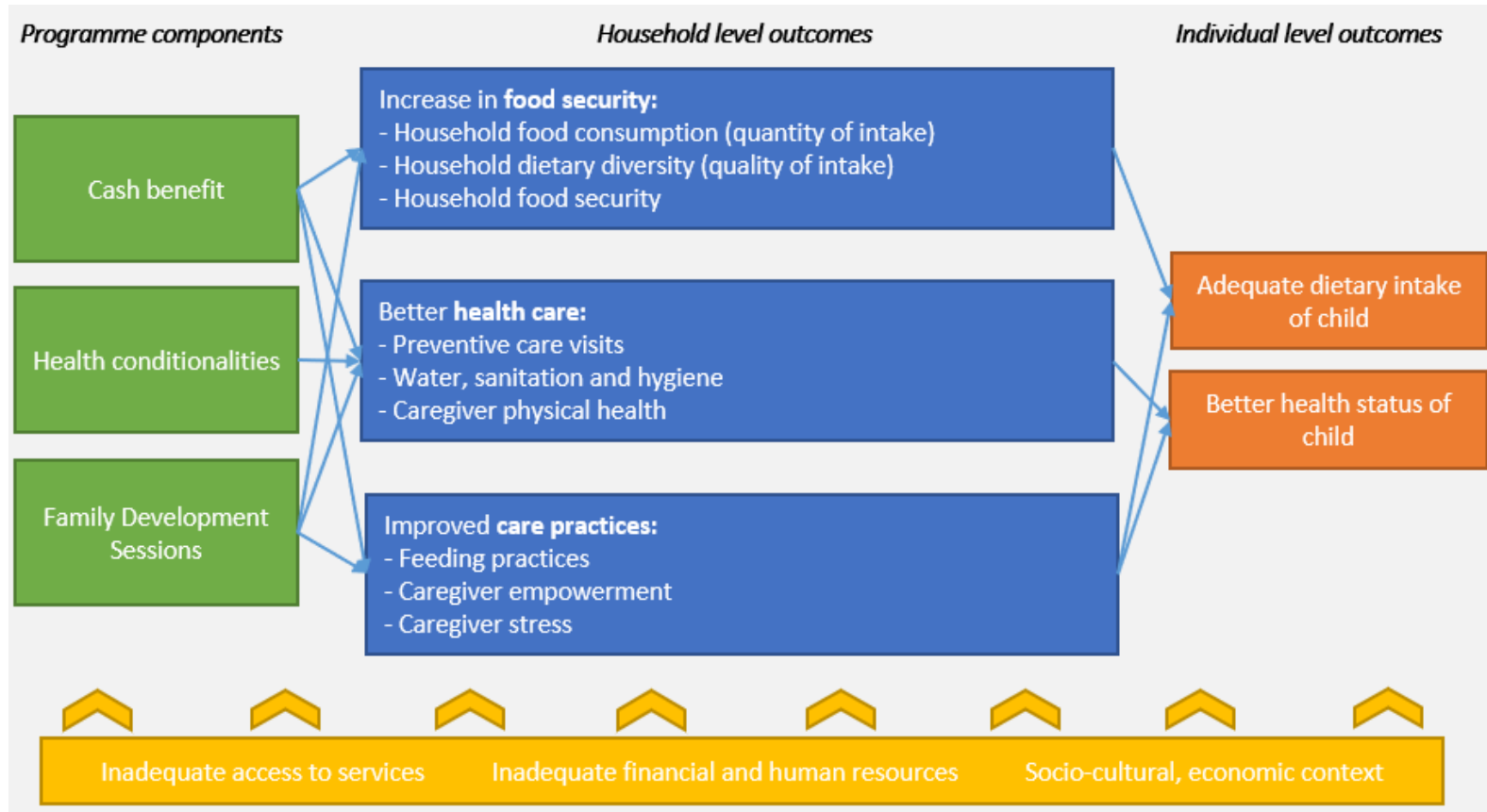


Figure 2. Assessment framework: Nutritional impacts of the 4PS

Findings

4Ps DESIGN AND IMPLEMENTATION

Health conditions

- Most beneficiary households agreed that compliance with the health conditions is not stressful
- KII say that compliance with health conditions is not properly monitored, and hence beneficiaries do not take the conditions seriously, because ultimately no benefit reduction follows
- Few beneficiaries named difficulties in complying due to accessibility of the health facilities
 - FGDs in all locations confirmed that beneficiaries often spend their health grant on transportation costs
 - These costs can constitute a barrier to accessing health care

Findings

4Ps DESIGN AND IMPLEMENTATION

Family Development Sessions

- Majority of beneficiaries indicated that they find the FDS **helpful and informative** and apply some lessons learnt in daily lives, e.g. backyard gardening, how to deal with children and how to take care of their health, disaster preparedness
- The FDS are often conducted in surroundings **not conducive for learning** and discussions among all participants; **overcrowding** and not much interaction between speaker and participants
- Quality of the session **delivery could be further improved**, for example by introducing visual aids, improving sound system, more participatory sessions
- Overall, FDS attendance associated with increased **self-confidence and self-esteem** of female caregivers

Findings

4Ps DESIGN AND IMPLEMENTATION

Cash benefit and usage

- Cash benefit primarily spent on expenses related to
 - Schooling of children
 - Transportation to health facilities
 - Medicines and food for all household members
 - To a lesser extent used for household items, including investments and improvements to housing
- Most beneficiaries agreed that the **cash benefit is too low** and that the real value of the transfer is corroding due to inflation
- Some key informants echoed the beneficiaries' view on a **need to increase the cash grant** to result in more meaningful impacts – particularly in the area of nutrition, as food prices have risen substantially in line with inflation
- Others emphasized the **supplementary** role of the 4Ps

Findings

4Ps DESIGN AND IMPLEMENTATION

Payment timeliness, frequency and delivery mechanism

- Mixed responses on timeliness of the receipt of cash, largely dependent on the payment modality and the specific location
- Less frequent pay-outs and delayed pay-outs make it more difficult for beneficiaries to ***plan their purchases and expenditures*** and monitor whether they receive the correct cash transfer amount
- Many 4Ps beneficiaries indicated to resort to ***borrowing money*** to bridge the gap between payments; as 4Ps beneficiaries, it is easier for them to borrow money from lenders, as the programme is perceived as a form of ***guarantee for payback***
- Ganassi: Beneficiaries lack awareness and understanding for the exact payment day and amounts – indicate to wait for announcements by the municipal link

Findings

4Ps DESIGN AND IMPLEMENTATION

Reaching vulnerable households

- 4Ps does not reach all poor and vulnerable households
- Listahanan does not capture any children born since 2010 → youngest children living in 4Ps beneficiary households are excluded from the programme
- KII confirm: excluded households are often young families who had no pregnant household member or children during *Listahanan 1*
 - Now they have several young children and would thus be eligible for the 4Ps
 - Average age of children excluded from 4Ps is 7.9 years while average age of beneficiary children is 13.8 years

This effectively means that the education and health conditions are not monitored for the younger children of the relevant ages!

Findings

UNDERLYING CAUSES OF MALNUTRITION AND 4PS IMPACT

Food security

- Availability of income generating activities for caregivers and household size **main determinants of food security** – without a regular job, households are affected
- Cash transfer enables households to purchase goods in higher volumes and at lower cost linked to their ability to **better plan household expenditures**, as the cash transfer constitutes a regular and reliable income support to the household
- Cash transfer also allows households to buy **more diverse foods**
 - Nearly all households ate grains, roots or tube vegetables in their past meals, while only 3 per cent had eaten legumes or nuts. Less than 60 per cent of households' had consumed dairy products
- Beneficiaries in all municipalities explained that the cost of basic foods, including rice, fruits, fish and meats, have increased while the cash grant has not
 - They cannot afford to buy the same quantity of foods they used to

The mean average expenditure for food as reported by beneficiaries was PHP 1,745

Findings

UNDERLYING CAUSES OF MALNUTRITION AND 4PS IMPACT

Food security

- **Payment frequency** is critical for the 4P's impact on household food security as less frequent pay-outs render planning of expenditures more difficult
- Beneficiaries cannot rely on the money from the cash transfers in the planning of their daily and weekly food expenditure so they resort to lending from local shops
- FDS and backyard gardening seem to **positively influence** and contribute to household's food consumption
- $\frac{3}{4}$ of beneficiaries expressed that the **food quantity** they currently buy will be **negatively affected**, if the 4Ps stops
- **Inflation** and increasing food prices cited as **critical factors** inhibiting the cash transfer's impacts on food consumption
- Most popular preparation methods were fried foods and soup-based dishes, followed by *adobo* (stew). Less common: were grilled and/or sautéed foods,
 - Only one respondent mentioned steamed foods

Findings

UNDERLYING CAUSES OF MALNUTRITION AND 4PS IMPACT

The role of fast food

Fast food seems to play a special role within the households participating in this assessment:

- Caregivers often mentioned that on **pay-day**, they like to treat their children to fast food restaurants for **family bonding**
- Fast foods are considered a **luxury** and linked to certain status: “Food that rich people eat that we see in television.”
- Nearly all caregivers indicated to know that **fast foods are unhealthy**, but still identify it as the **main treat for family** and children to afford on pay-days.
- Lack of access to these food due to financial constraints seems to drive the appeal that is associated with eating out in fast food restaurants and the decision to overlook options
- Improved purchasing power pushes for higher spending on fast foods, especially among middle class – a trend which can be observed globally

Source: Institute for Development and Econometric Analysis, University of the Philippines, 2012

Findings

UNDERLYING CAUSES OF MALNUTRITION AND 4PS IMPACT

Health care

- All beneficiaries indicated that they **visit the barangay health centre** regularly for check-ups and for treatment of illnesses
- Even though the cash transfer facilitates access to **preventive health care** by providing resources for transportation costs and medicines, beneficiaries unanimously stated that they will continue to visit the health centre, even if the cash transfer stops, as they recognize their children's and their own health as their responsibility
- The FDS played a role in educating caregivers about **personal hygiene and hygiene practices** for their children
- 4Ps contributed to improving toilet facilities for many households as they used the grants to fund them with the necessary cash or linking beneficiaries to ongoing initiatives of free toilet bowl distribution, and also by reminding them of the crucial role that **improved sanitation** plays during the FDS

Findings

UNDERLYING CAUSES OF MALNUTRITION AND 4PS IMPACT

Care practices

- Household chores related to **child care and food preparation** are practices that occupy most of caregivers' time
- A big source of frustration and permanent stress is **financial insecurity**
- 4Ps cash benefit contributed to **lowering stress levels** within the household, by (partially) **reducing the financial stress** and pressure that caregivers face
- Beneficiaries described the FDS as valuable and pleasant **source for information** about health and care practices
- Even though they learned about nutritious foods to feed their children, all beneficiaries agree that fast and fried foods are desirable
- Positive impact of the FDS on their **emotional well-being** and improved ability to engage with society

Findings

IMMEDIATE CAUSES OF MALNUTRITION AND 4PS IMPACT

Dietary intake of child

- Result of household's food security and care practices the child is subject to
- 4Ps cash transfer ***enhances food quantity and quality*** by providing additional income, spent on food purchases; in turn positively impacting dietary intake of all children living in the household
- FDS played a role in ***teaching caregivers*** about nutritious and healthy foods that can positively impact children's development
- Caregivers refer to ***go-grow-glow foods*** – they observe a clear link between the foods they feed their children, the children's nutritional status and overall well-being and development
- On top of buying foods, some caregivers buy ***milk, vitamins*** and other ***supplements*** for the children, with the help of the 4Ps cash transfer.

“4Ps families can buy vitamins and milk for the children. They can buy rice and have better food compared to non-4Ps. So 4Ps children are better off than non-4Ps.”

Findings

IMMEDIATE CAUSES OF MALNUTRITION AND 4PS IMPACT

Health status of child

- Results from the household's health care seeking behavior and the applied care practices the child is exposed to
 - 4Ps primarily impact the health status of the individual child by ensuring that households avail health care regularly, for **preventive care and check-ups**, as well as in cases of illness
 - FDS played a role in **strengthening awareness** on relevant care practices and how these can impact a child's well-being and health status - ,
 - Caregivers appreciate the effects that their own health has on their children's health "When we are healthy, they are healthy!"
 - Caregivers measure their children's health: "*They don't get sick easily. They are into sports.*" and "*They are energetic, have a good appetite.*"
- Nevertheless, when asked whether one of their children was sick during the past 14 days, almost half of all survey respondents answered 'yes'

Findings

IMPACT ON NUTRITION OUTCOMES IN 4PS HOUSEHOLDS

Factors promoting nutrition impacts

- **Cash to strengthen food security:** The transfer positively impacts the quantity and quality of foods households buy. Expenditure patterns of the cash transfer are largely defined by the household's economic situation and the income generating activities of adults living in the household
- **Family development sessions empower caregivers:** Providing caregivers with knowledge on a range of topics, particularly relevant are caring and feeding practice
 - FDS create a feeling of community among caregivers
 - FDS, by addressing inadequate care practices and alleviating caregiver stress, empower beneficiaries and enhance their well-being → better care practices alleviate malnutrition
- **4Ps as a platform to link beneficiaries to other initiatives:** Able to promote impacts on household's food security and also sanitary environment by linking them to other relevant services and initiatives, for example through provision of seedlings for backyard gardening and free toilet bowl initiative

Findings

IMPACT ON NUTRITION OUTCOMES IN 4PS HOUSEHOLDS

Barriers to achieving nutrition impacts

- **Benefit structure and payments:** Cash benefit level has not been adjusted to inflation since the programme roll out in 2008 → decrease in the real value of the transfer constitutes a challenge; likewise, irregularity and infrequency of payments in some locations constitutes a barrier for the cash transfer to achieve more profound impacts
- **Reaching vulnerable households and children:** Next to not reaching all poor and vulnerable households, the 4Ps currently does not cover the youngest children living in 4Ps beneficiary households → 4Ps misses a major opportunity to positively impact nutrition outcomes of beneficiary children through shortcomings in targeting approach
- **Format of family development sessions:** Spaces are overcrowded and too loud; presenters do not make use of microphones and visual aids to better engage the beneficiaries
- **Monitoring of outcomes:** Limited monitoring and follow-up as to whether beneficiaries apply knowledge acquired during the FDS also contribute to limited behavioural change at household level

Findings

IMPACT ON NUTRITION OUTCOMES IN 4PS HOUSEHOLDS

Basic factors impacting nutrition impacts

- **Access to and quality of health facilities:**
 - Health grant often spent on transportation costs
 - Free medicine supplies often not available
 - Barangay health workers ‘highly knowledgeable’, caring and always approachable
- **Economic environment:**
 - Most households depend on seasonal work in fishing and farming → in off season, beneficiaries are highly dependent on 4Ps
- **Socio-cultural factors:**
 - Socio-cultural beliefs and perceptions around (mal)nutrition prevail
 - May contribute to (mal)nutrition not perceived as very ‘urgent’
- **Available resources:**
 - Municipal Nutrition Action Plans exist, described as ‘comprehensive’
 - Resource-constraints, i.e. nutrition-specific financing or limited HR deter implementation.

Recommendations

Enhance existing components

- Periodically retarget the 4Ps programme to ensure that vulnerable children and households are covered
- Revise the benefit structure and regularly adjust the benefit level to inflation
- Harmonise the pay-out schedules to be on bi-monthly basis as is already practiced in some locations
- Strengthen the quality of the family development sessions by improving the infrastructure of locations, as well as the relevance of modules

Foster integration and harmonization

- Linking the 4Ps more explicitly to nutrition-specific activities and nutrition-related outcomes
- Include nutrition-related indicators in the programme MIS
- Further formalise and structure linkages of 4Ps to other initiatives and programmes, especially in the realm of livelihoods development and income generating opportunities
- Link the 4Ps programme to a more elaborate case management mechanism to facilitate integration and coordination and effectively support and monitor outcomes at household- and child-level

Concluding thoughts

Findings suggest that the 4Ps programme positively influences beneficiary households' overall situation, food security and also mental well-being.

- Positive outcomes were observed more when the payment cycle was *frequent, timely and reliable*
- Contributes to achieving outcomes if it *supplements* an existing household income
- *Linkages* between different, mutually reinforcing interventions show improved outcomes at the household level
- *Household priorities are decisive for programme outcomes* → seeking health services in the interests of prioritising their own and their children's health
- Children's nutritional status and malnourishment are better among households where *caretakers' own well-being and self-care practices* are good
- *Financial constraints and varying willingness and ability to change behaviour* prevent households from experiencing stronger positive outcomes from the 4Ps



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Methodology

- The study employs a combination of ***different research methods*** to assess the 4Ps influence on nutritional outcomes
- Participatory research to collect and analyse ***primary, qualitative data***
- Review and analysis of ***secondary sources and information***, the assessment relied on Combination of different data sources and methods
 - Allows to ***triangulate findings*** and capture multiple dimensions of the same phenomenon
 - Contributes to safeguarding the ***robustness of findings***

Fieldwork overview

The geographic scope of fieldwork for this assessment covered **twelve barangays** in **six municipalities** in the following provinces:

Province	Municipality	Barangays
Bulacan	City of San Jose del Monte	Muzon, San Pedro
Catanduanes	Caramoran	Supang, Toytoy
Lanao del Sur	Ganassi	Tabuan, Pindolonan
Negros Occidental	Hinigaran	Barangay IV, Cambugsa
Samar	San Jorge	Lapaz, Erenas
Zamboanga del Norte	Dipolog City	Tumo, Galas

- These provinces **equally represent** the three major islands groupings of the country (Luzon, Visayas and Mindanao), with two sample provinces located in each
- Municipalities were **selected considering defined criteria**
 - two urban and four rural
 - the highest prevalent degree of stunting and wasting
 - the number of 4Ps beneficiaries
 - most indigenous people in the population

Limitations

- Overall ***generalisability and representativeness*** are limited by geographic scope of the assessment;
 - Findings are **not representative** of the 4Ps impacts on nutrition outcomes across the country
- ***Quantitative household survey not representative*** on its own
 - It serves to ***support*** and ***triangulate*** qualitative findings and to sketch key characteristics of households
- Interpretation of children's nutrition status and caregiver's health status are based on ***self-reported information***
 - This is likely affected by ***perception bias***