Assessment of Family Development Session of the Pantawid Pamilyang Pilipino Program (4Ps): Content, Process, and Effects (Final Report)
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Assessment of Family Development Session of the Pantawid Pamilyang Pilipino Program (4Ps): Content, Process, and Effects

ABSTRACT

The research project is an evaluation of the Family Development Session, a conditionality of the Pantawid Pamilyang Pilipino Program that provides family life education to conditional cash beneficiaries. Using qualitative and quantitative methods (survey, interviews, focus group discussions, observations, and desk reviews), the study assessed the FDS in terms of content, process, and effects. The study reveals that the respondents perceive the FDS as significant and useful, particularly in the aspect of knowledge acquisition. They also have high regard for implementers and have a positive review of the implementers’ ability to deliver the topics and deal with beneficiaries agreeably. Concerns regarding the implementation of the attendance policy, however, surfaced as well as issues on non-conducive learning environment and venue, and some civil society organization’s approaches. Likewise, beneficiaries reported that they are able to use some of the knowledge in their families, although statistical analysis reveals that socio-behavioral change can only be gleaned on the aspects of child protection, children’s education, acceptance of FDS as conditionality, health and nutrition, and active citizenship, wherein percentage influence of FDS attendance on changes ranged from 15% to 21%. Interestingly, while beneficiaries expressed that topics on parenting and family relationship are beneficial, percentage influence of FDS attendance on these aspects was low (less than 5%), which means that they must have been greatly affected by other factors than FDS. Discussion of these findings vis-à-vis the principles of family life education and social change culminates this report as well as a series of recommendation on content, methods, and policies.

Keywords: Family Development Session, Pantawid Pamilyang Pilipino Program, Family Life Education, family, Philippines
INTRODUCTION

In the Philippines, a nationwide program addressing the issue of poverty was launched in 2008 by the Department of Social Welfare and Development. This is the Pantawid Pamilyang Pilipino Program patterned after same programs in the Latin Americas, which provides conditional cash to Filipino families in poverty (Chaudhury, Friedman, & Onishi, 2013). The Pantawid, as the program is commonly referred to, has two objectives: social assistance achieved by providing cash assistance to address families’ short-term needs and, social development attained by investing in human capital to break the intergenerational poverty cycle (Official Gazette, 2016).

Family Development Session and the Pantawid Pamilyang Pilipino Program Quintessential among the conditions that beneficiaries have to fulfill is attendance to the Family Development Session (FDS). The FDS is a monthly family life education session facilitated by trained City/Municipal Links (C/MLs) of DSWD using the Gabay sa Pagpapaunlad ng Pamilyang Pilipino manual and other modules from collaborating agencies. The sessions envision to educate parents about essential areas of family life such as child rearing, child development, marital relationships, and family dynamics. As a conditionality, the FDS is a strategy that addresses the program’s thrust on social development that desires to break “the intergenerational poverty cycle by investing in the health and education of poor children” (Official Gazette, 2016).

Family Life Education: Content, Process, and Effects

Interventions that approach family life such as the FDS is meaningful since the family is not only a unit of care but is also a learning system. The family serves as a platform for enculturation or, specifically, transfer of knowledge, beliefs, attitudes, skills, practices and values from one person to another and from one generation to the next. Family Life Education (FLE) focuses on topics pertaining to family development to individuals, parents, couples and whole families in communities (Duncan & Goddard, 2005). In principle, a FLE program should be: (a) significant in the life-span, (b) based on the needs of the clients served, (c) multidisciplinary, (d) utilizing varied content delivery, (e) focused on education, (f) honoring diversity, and (g) requiring educated professionals for the delivery of subject (Allen, 2013).

More particularly in the Philippines that takes pride in being a family-centric society, FLE becomes more relevant. Due to rapid social change, the characteristics of a Filipino family usually vary. Likewise, the Filipino family is usually faced with issues such as poverty and the slow progress in reducing poverty (Usui, 2011). This high incidence of poverty in the country usually stems from limited job opportunities that would really help in uplifting the lives of these families, and poor social security system that are often times poorly implemented and evaluated (Usui, 2011). In turn, poverty becomes a risk factor to various socio-emotional concerns. For instance, studies show how low-income, marginalized families are mentally at-risk due to their difficult and oppressive environment (Hudson, 2005; Tam, Foo & Lee, 2011; Ardington & Case, 2010).
FLE as an intervention is deemed beneficial. Firstly, it is a preventive measure, addressing problems even before they happen (Myers-Walls, et al. 2011) perhaps due to its ability to “strengthen and enrich well-being” among individual members and the family as a whole (Arcus et al., 1993, p.21 in Duncan & Goddard, 2005). Secondly, it serves as a conduit for other services that directly or indirectly supports social change or the large-scale transformation of activities, norms or other phenomena in societies (Doda, 2005). While largely focused on knowledge, family life education initiates change in attitudes, behaviors, and physical states (Gaurney & Gaurney 1981). Influencing feelings, motives, attitudes, and values is central to the change process among participants in family life education (Arcus et al., 1993; Draling, 1987; Doherty, 1995).

This change process as an outcome of family life education is logical because people when provided with “opportunities to learn skills and develop a sense of control” (Zimmerman, 1990, p. 71), they are able to mitigate the concerns circumstantial to the life they live in. Through a process called learned hopefulness, knowledge and skills that people acquire brings forth a “sense of psychological empowerment.” Therefore, studies that reveal how FLE enhances parenting (Cowen 2001) and decreases abusive behaviors (Gorzka 1999) are expected. Gleaned vis-à-vis the major role that parents take in shaping children’s emotional, personal, and cognitive development (Kruk, 2008), the link between family life education and addressing intergenerational issues becomes clear.

**The Present Study: Research Objectives and Evaluation Framework**

After more than half a decade of implementation, the DSWD deemed it necessary to assess the extent to which the FDS has contributed to its overall program objectives and to their mandate on protecting the vulnerable and empowering the poor. The evaluation study was conducted by a team of experts from the University of the Philippines Los Baños, spearheaded by the Department of Human and Family Development Studies, within the College of Human Ecology.

The evaluation study is a tri-component project. Each component addresses the general aims and their corresponding specific research objectives. The study aimed to:

1. determine the effectiveness of the modules in bringing about the desired level of awareness and intended behavioral outcomes
   a. assess the content, structure, design, practicability, coherence, understandability and convenience of the FDS modules;
   b. design options to customize the FDS modules in response to the needs of the beneficiary groups; and
   c. recommend a framework for a ladderized FDS curricular program to address the beneficiaries’ needs in terms of their cognitive, skills and values.
2. assess the process of implementing the FDS across various stakeholders
   a. review and assess the FDS Framework, objectives and indicators, and assess their relevance in the current context and priorities of DSWD in general and the CCT program objectives in particular;
   b. assess the modes and methods of the FDS session delivery including record-keeping practice;
   c. identify good/best practices and innovative approaches on the conduct of the FDS;
   d. assess the methodologies being employed by the field implementers in conducting the sessions in terms of their applicability and effectiveness in inculcating the learning;
   e. recommend pointers to further strengthen the FDS design, modules and delivery; and
   f. recommend a competency framework for facilitators and formulate a framework for continuing capacity building program for the implementers.

3. assess the effects on FDS
   a. assess the effects of FDS on family life, particularly in husband-wife relationship, parent-child relationship, child protection, home and financial management, strengthening family values, and active citizenship;
   b. assess the relevance of FDS to household and community needs of the beneficiaries, and the driving force of the partner beneficiaries in attending the FDS; and
   c. identify (higher level of objective was proposed) behavioral changes and values in their perception of health, nutrition, education, protection of children from violence, exploitation, abuse and neglect, community participation, and active citizenship.

The present study made use of the Theory of Change as a framework of evaluation. This viewed the change process as a results chain. The FDS was construed as an input. The components, aspects, and activities of implementation were construed as process. The socio-behavioral outcomes (finite effects) and impacts (long-term effects) of the FDS were construed as results. In particular, the process, facilitating factors, best and innovative practices, and bottlenecks and gaps were explored vis-à-vis the change envisioned to be achieved by the FDS among family-beneficiaries.
METHODOLOGY

Quantitative and qualitative methods of analysis were utilized in this evaluation study. The three components employed data gathering strategies to address their specific research objectives. Component 1 conducted FDS observations and desk review of FDS’ guidelines and modules to review and evaluate the content of the FDS. Component 2 conducted key informant interviews and focus group discussions among various stakeholders (i.e., participants, implementers, administrators, partner agencies), FDS observations, and survey to evaluate the processes involved in FDS. Component 3 conducted focus group discussions and a large-scale survey to assess the effects (outcomes and impact).

Areas covered in the study are the NCR Second District (Pasay and San Juan), NCR Fourth District (Pasig and Pateros), Cavite (Tagaytay and Ternate), Ilocos (Marcos and Laoag), Negros (Dumaguete City and Zamboanguita), Iloilo (Lambunao and Iloilo City), Surigao (Surigao City and Malimono), and Sarangani (Alabel and Kiamba). These areas were determined using a three-stage sampling design. Prior to sampling, the whole country was stratified to four island groups namely; (1) Luzon island group, (2) Visayas island group, (3) Mindanao island group, and (4) National Capital Region. From each of these groups, a simple random sample of two provinces was obtained, then a simple random sample of one “rural-like” and one “urban-like” area (municipality or city) was drawn from each province. Probability-proportional-to-size sampling was used to determine the barangays to be sampled within the municipality/city. A total of 700 barangays were covered.

Evaluating the content of the FDS was primarily achieved through desk review of the FDS modules. Expert ratings were given by the evaluators using a set of criteria encapsulated in a rating sheet. The criteria include: content (clarity, validity relative to the objectives and FDS framework, accuracy), structure (sufficiency of information that instructs the facilitator on how to implement the activity), visual design (design, layout, visuals), relevance and practicability (local context, use of available resources), coherence (interconnectedness of content and sessions), understandability (language and content that are comprehensible to the audience), and ease of use/delivery (additional support to the facilitator).

Evaluating the process was primarily attained through interviews, focus group discussions, and observations. For the focus group discussions, the participants were Pantawid beneficiaries selected randomly from the attendance sheet on the day when the FDS in a particular barangay was observed. For the interviews, key informants were parent leaders and implementers from DSWD and civil society organizations. For observations, expert ratings were given by evaluators on the various dimensions of FDS such as FDS Topics, Resource Persons, Schedule and Venue, Absences, Proxy attendance, Make-up sessions, Tardiness, Postponement of Scheduled FDS Activity, Clustering of Sessions, Participation Cost on FDS by Beneficiaries, Use of Talaarawan, and Code of Conduct for FDS Implementers. These dimensions were derived from the updated FDS Implementation Guidelines of DSWD.
Evaluating the socio-behavioral outcomes was done primarily through the survey conducted by Component 3. Three-stage sampling was done. The first stage involved selecting provinces using simple random sampling. The second stage was selecting the barangays within each of the enrolled “rural-like” and “urban-like” municipality or city using stratified random sampling with probability-proportional-to-size sampling. The third stage is the selection of the households to be interviewed using systematic sampling. A total of 1,050 were interviewed. After adjustments to non-response have been made, it totalled to 1,112 respondents.

Evaluating the impact of FDS was challenging since there was no baseline data available. Hence, a quasi-randomized control evaluation was done by matching the beneficiaries on a two-year phase approach. This involved cohorts who were admitted to Pantawid in 2008 (Phase 1 beneficiaries) and cohorts who were only admitted to the Pantawid program in 2012 (Phase 4 beneficiaries). Through a series of statistical procedures using Social Welfare Development Indicator (SWID) data and the current survey, knowledge status before enrolment to FDS and the estimated change in the beneficiary if not included in the 4Ps was determined, as well as knowledge status after enrollment to FDS and the estimated change on the beneficiary since they were included in the 4Ps. Approximate Z-test was done to test a series of hypotheses pertaining to the outcome variables generated through data reduction procedure. Socio-behavioral change is achieved when more than 50% of the respondents indicated high scores in a particular variable. Estimation of the attributable effect of FDS on these socio-behavioral changes was done.

**FINDINGS AND ANALYSIS**

**Content: Assessing FDS Modules and Framework**

The content delivered in the FDS is contained in a set of modules used by implementers. These modules are either developed by DSWD or are adapted from partner agencies. In this study, 10 modules were assessed; namely: 1) Guide to Filipino Family Development (Gabay), 2) Parenting the Adolescent Manual (PAM): A Training Guide, 3) Manual on Effective Parenting (MEP), 4) Appreciating Early Childhood Care and Enrichment or Early Childhood Care and Development (ECCD), 5) Family and Community Based Disaster (FCBD) Manual, 6) Active Citizenship Module (ACM), 7) Module on Disabilities (MOD), 8) eFDS on Proper Sanitation Behaviors: Modular Session Guides for City/Municipal Links and Parent Leaders (WASH), 9) Child Sexual Abuse Prevention for Parents (CSAP-P), 10) Child Sexual Abuse Prevention for Children and Youth (CSAP-CY), and 11) Strengthening Filipino Responses in the Home, School, and Community: A Training to Positive Approaches to Child Discipline (PACD).

Expert assessment of these modules were done through team workshops. Each module was scrutinized by a group of educators and development communicators, with the use of a set of criteria which include content, structure, visual design, relevance and practicability, coherence, understandability, and ease of use/delivery. Table 1 presents the result of this expert assessment.
Table 1. Ratings of the modules used in FDS based on the criteria and on the relevance to FDS goals.

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Average Rating (%)</th>
<th>Adjectival Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Childhood Care and Development (ECCD)</td>
<td>94.09</td>
<td>Excellent</td>
</tr>
<tr>
<td>Parenting the Adolescent Manual: A Training Guide (PAM)</td>
<td>87.82</td>
<td>Very Satisfactory</td>
</tr>
<tr>
<td>Modyul Ukol sa Kapansanan (Module on Disabilities)</td>
<td>87.42</td>
<td>Very Satisfactory</td>
</tr>
<tr>
<td>Strengthening Filipino Responses in the Home, School, and Community: A Trainer’s Manual on Positive Approaches to Child Discipline (PACD)</td>
<td>86.33</td>
<td>Very Satisfactory</td>
</tr>
<tr>
<td>eFDSon Proper Sanitation (WASH): Modular Session Guides</td>
<td>82.61</td>
<td>Very Satisfactory</td>
</tr>
<tr>
<td>for City/Municipal Links and Parent Leaders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gabay sa Pagpapaunlad ng Pamilyang Pilipino (Gabay)</td>
<td>81.84</td>
<td>Very Satisfactory</td>
</tr>
<tr>
<td>Manual on Effective Parenting (MEP)</td>
<td>80.04</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Active Citizenship Module (ACM)</td>
<td>74.38</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Child Sexual Abuse Prevention for Parents (CSAP-P)</td>
<td>72.42</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Child Sexual Abuse Prevention for Children and Youth (CSAP-CY)</td>
<td>71.00</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>Family and Community Based Disaster Preparedness Manual (FCBDP)</td>
<td>65.92</td>
<td>Fair</td>
</tr>
</tbody>
</table>

In general, most of the modules were rated satisfactory (MEP, ACM, CSAP-P, CSAP-CY), very satisfactory (Gabay, PAM, Module on Disabilities, PACD, WASH), or excellent (ECCD). Only the FCBD Manual got a fair rating due to its low ratings on ease of use and delivery. It lacks facilitator’s notes and suggestions on how to adapt the FDS module to the local setting and participant group. It is also text heavy and lacks visuals, which make it less attractive to users. In terms of understandability, the topics are presented in a very technical manner, which might make it difficult for participants to absorb.

In terms of their scope, many of the modules address various goals of the FDS, but others such as PACD, WASH, CSAP-P, and CSAP-CY are specialized for particular concerns and do not address other goals of the FDS.

As an output of the review process, a proposed ladderized curriculum (PLC) was developed. It is basically anchored on the Gabay Manual but additional modules on Parenting the Adolescent, Community Organizing, and Livelihood and Entrepreneurship are suggested. Special modules on community and household responses to incidents of terrorism, drug abuse, and human trafficking can be developed and implemented in affected areas. Other identified topics for inclusion are spirituality, child protection, and financial management. The last three topics are already covered in the Gabay but are recommended to be strengthened.
The PLC is patterned on an individual’s system of interaction with the environment, which include the family and the community. This is aligned with the person-in-environment perspective typically used in social work practice. The PCL is designed to be implemented in five (5) years and each monthly session is good for a maximum of two hours only.

Process: Assessing Instructional and Implementation Approaches and Methods

The FDS process was evaluated by various stakeholders. Experiences and perceptions of Pantawid beneficiaries and parent leaders about the various dimensions of the FDS from the selection of topics to the implementers’ demeanors to the learning events they experience in the actual session were revealed during the focus group discussions. Other administrative and logistic matters such as scheduling, clustering, and implementation of the FGD guidelines, on the other hand, were enlightened through interviews with implementers and supervisors.

The Family Development Session starts with a prayer and other preliminary activities, which include discussion of objectives and checking of attendance. This is followed by the actual lesson for the day, where learning activities (e.g., games, lecture) and discussions ensue. Participants particularly like when they are given the chance to share. To close the session, the participants pray and the facilitator takes the time to give announcements or, seldom, evaluate learning.

While the session itself only lasts for 2 to 3 hours or even brief as 1 hour in some areas, it involves various stakeholders. The CL/ML serves as the primary facilitator of the FDS although CSO’s also provide as manpower augmentation to cover the large population of beneficiaries. The FDS implementation is enlightened by a Guideline from the National Program Management Office, stipulating rules on: attendance and absences, schedule and venue, proxy attendance (i.e., in case the beneficiary cannot attend, a replacement family member can attend the session provided that the proxy will advise the beneficiary of the day’s topic), make-up sessions, clustering of sessions (i.e., combining various clusters of beneficiaries from different barangay into a single session), among others. Table 2 presents a summary of qualitative assessment in each of the processes of the FDS.
### Table 2. Qualitative Assessment of the Processes in FDS.

<table>
<thead>
<tr>
<th>Process</th>
<th>Qualitative Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>FDS Topics</td>
<td>• Beneficiaries perceive FDS topics as satisfactory and useful.</td>
</tr>
<tr>
<td>Resource Persons</td>
<td>• Primary resource persons are MLs/CLs and representative from CSOs.</td>
</tr>
<tr>
<td></td>
<td>• Beneficiaries perceive RPs as knowledgeable and agreeable.</td>
</tr>
<tr>
<td></td>
<td>• CSOs bring in them their own organizational philosophies, which influence the delivery and content of the FDS they facilitate.</td>
</tr>
<tr>
<td>Schedule and Venue</td>
<td>• FDS schedules are followed as per guidelines.</td>
</tr>
<tr>
<td></td>
<td>• Venues are within the suggested places in the Guidelines but the learning environment is not almost always conducive (too hot, too open, too noisy, no enough sitting space)</td>
</tr>
<tr>
<td></td>
<td>• Beneficiaries manifest discomfort when environment is non-conducive for learning (i.e., yawning, irritability, chatting instead of focusing on the learning process)</td>
</tr>
<tr>
<td>Attendance and absences</td>
<td>• Beneficiaries reported that their attendance in FDS is high.</td>
</tr>
<tr>
<td></td>
<td>• The Guideline is not strictly implemented especially the need to submit medical certificate</td>
</tr>
<tr>
<td></td>
<td>• Parent leaders are the ones who attest validity of absence and this validation assumes good faith on the part of the absentee.</td>
</tr>
<tr>
<td></td>
<td>• Beneficiaries express conflict with work schedules is a valid reason for absence.</td>
</tr>
<tr>
<td>Proxy attendance</td>
<td>• Beneficiaries know who are eligible to serve as proxy (i.e., at least 18 years old)</td>
</tr>
<tr>
<td></td>
<td>• Beneficiaries utilize proxy.</td>
</tr>
<tr>
<td></td>
<td>• Transfer of knowledge from the proxy to the grantee is not always assured.</td>
</tr>
<tr>
<td>Make-up sessions</td>
<td>• Beneficiaries reported that make-up sessions are helpful especially to those who have problems with schedule.</td>
</tr>
<tr>
<td></td>
<td>• Monitoring habitual make-up sessions has not been consistent especially that it is the PLs who check on their attendance.</td>
</tr>
<tr>
<td>Tardiness</td>
<td>• Beneficiaries reported that being late is alright as long as they are present and they are able to sign attendance (at the end of the session)</td>
</tr>
<tr>
<td></td>
<td>• During the observations, some beneficiaries are late by almost 30 minutes. This is acceptable within the guidelines.</td>
</tr>
<tr>
<td>Postponement of Scheduled FDS Activity</td>
<td>• Beneficiaries reported that postponements are done because CLs/MLs are called for meeting. Sessions are to rescheduled compensate for this.</td>
</tr>
</tbody>
</table>
Sometimes, sessions get postponed because of simultaneous events called for by the BLGU or LGU.

The PLs play a significant role in communication postponements to the beneficiaries. They use their own communication resources (i.e., personal mobile phone, personal load, and personal vehicle) in this process.

Clustering of Sessions
- Clustering is seldom done.
- In certain cases, only when there are topics that concern the whole municipality (i.e., municipality-wide DRR) is clustering called for.
- There are cases too which because of postponements clustering is done to catch up.

Participation Cost on FDS by Beneficiaries
- Sometimes beneficiaries have to pay for transportation or for photocopying materials. This is voluntary.
- Sometimes, beneficiaries give money to the PL for load as an act of compassion to the parent leader.

Use of Talaarawan
- ML/CL underscores the importance of Talaarawan and beneficiaries reported understanding the need to take notes so they can check what they learned.
- Not regularly checked by the MLs/CLs
- Some beneficiaries do not have Talaarawan during the FDS

Code of Conduct for FDS Implementers
- Beneficiaries generally have positive regard to the code of ethics of the implementers
- Beneficiaries shared that sometimes they give gifts to the ML/CL as an act of appreciation.

Facilitating Factors.

Generally, the beneficiaries regard the FDS topics and implementers positively and reported their satisfaction with how the implementers impart knowledge and deal with beneficiaries interpersonally. In the whole FDS process, the study identified four factors that ensure efficient and effective delivery of the sessions:
- support from the regional and local government units;
- initiative and innovation;
- dedication and rapport of the implementers with key stakeholders; and
- implementer’s proficiency and competence.
Good and Innovative Practices.

Observations and discussions with stakeholders also enabled evaluators to identify good/best practices and innovative approaches on the conduct of FDS. Some of these notable practices and approaches are as follows:

- close coordination of key players (a strong and active coordination among the MLs/CLs, LGU links, SWOs/SWAs and other officials of the FDS which ensures that the conduct of FDS will continue amidst any unforeseen circumstances)
- values formation segment (connecting topics with valuable life lessons)
- expectation check (leveling off with what participants know and want to know)
- Purok challenge in Surigao City (gamification or the use of a point system per purok for activities conducted in FDS)
- IT application in CARAGA (a software for record keeping, monitoring, and evaluation developed by FDS Focal together with local IT team)

Bottlenecks and Gaps.

However, there were hurdles that hinder effective and efficient implementation of the program:

- inconsistencies in implementing FDS;
- lack of a strong and consistent monitoring and evaluation system in place;
- bureaucracy, and
- multiple tasks of the implementers which are more than they can handle.

Aside from these hurdles, there are other notable concerns, which might need further reflection if only to improve the FDS process. First pertains to policy on involvement of Civil Society Organizations (CSOs). Indeed, involving CSOs addresses sustainability issues in terms of the implementation of FDS. Due to the large number of beneficiaries, the CLs/MLs need support in accommodating this wide coverage of FDS participants. Likewise, CSOs are mostly from within the community, which also promote participation. On the other hand, since there are various CSOs involved, it is quite a challenge to ensure that the beneficiaries receive the same quality and kind of intervention since each CSO would often have a unique emphasis based on the organization’s thrust.

An educational philosophy must guide the content, process, and outcomes of an educative program such as the FDS. The educational philosophy must be clear to all stakeholders. Attempts to streamline content, process, and outcome based on this philosophy have to be ensured. Bringing in “add-ons” to the guiding educational philosophy (i.e., inclusion of organizational advocacies of the CSOs) have to be negotiated with the primary implementing institution. This is to ensure that even these add-on philosophies are in line with the fundamental tenets of what the educative program wishes to promote or achieve.

Second pertains to ensuring a conducive environment for learning (i.e., venue). The educative process is greatly influenced by the learning environment (temperature, noise level, availability of space, class density). While learners are adaptive organisms in such a
way that they will adjust and adapt to whatever learning environment they are in, individuals have particular learning styles which must be considered to ensure that they are getting the most amount of learning at the best possible quality. It is best to have clearer criteria in selecting the place where to conduct the FDS. While it is a common knowledge that many areas do not have facilities to accommodate the FDS, it is best to engage or collaborate with the LGU to reconsider putting up an infrastructure where the FDS and other related activities could be held.

Third pertains to the implementation of attendance policy. Presence in the learning process is necessary for the learner to benefit from the learning experience. While accommodations have to be made in excusing beneficiaries from sessions, systems have to be in place so that absentees can still benefit from the learning opportunity they missed, the rules have to be implemented fairly to avoid discord among learners (i.e., avoid the possibility of learners thinking that the ML/CL is playing favorites).

One of the strategies to ensure learning in spite of absences is allowing proxy agents. Proxy agents are in place to ensure that the transfer of learning still happens even when the presence of the learner is impossible. Hence, there has to be a mechanism to ensure that whatever the proxy agent gains from the session shall be endorsed to the beneficiary (i.e., asking the absentee to submit a brief output identifying the learning points of the session s/he missed).

Absentees need to have opportunities to benefit from the learning process they failed to experience. Make-up sessions enable this opportunity to be actualized. However, make-up sessions are only mechanisms in case the default attendance to the actual FDS is impossible. Hence, efforts have to be ensured by the implementers to encourage participants to attend the actual FDS schedule and to sparingly use make-up sessions as a means to compensate for absences. For a two-hour session, 30 minutes means that the beneficiary is missing a lot either about administrative announcements or even about the content delivered for a particular session.

**Effects: Assessing Outcome and Impact**

The culmination of this evaluation study is the assessment of the results of the FDS as conditionality to the Pantawid program. These results are framed in this study as either an outcome or an impact. Outcomes are finite effects, which pertain to the perceived improvement by the family beneficiaries who have been in the program since its inception in 2008. Impact, on the other hand, are long-term effects that pertains to the changes attributable to FDS attendance, as gleaned from comparing SWID data with the current survey data among Phase 1 (beneficiaries since 2008) and Phase 4 (beneficiaries since 2012) beneficiaries.
**Socio-Behavioral Outcomes.**

Majority of the beneficiaries pointed out the great influence of the modules related to the family on their family life, particularly on parenting, family planning, food preparation, house management, nutrition and health care and that these too helped in improving themselves. **Husband-Wife Relationship.** Majority (71.97%) perceived FDS attendance has a very positive effect on their marital relationship. Narratives manifest that beneficiaries believe that couples have better relationships now. This effect was gleaned from better communication skills, reduced fighting, lessening of vices, greater motivation to work and earn money, and new family practices such as praying and eating together and other bonding activities. Although 33% do not perceive marital relationship as a primary difficulty, there was an increase in the number of beneficiaries who regarded this as a major difficulty. This could be due to the mother’s increased knowledge on her rights and how an ideal family should be like.

**Parent-Child Relationship.** In terms of parent-child relationship, 80.46% perceived that FDS attendance has a very positive effect how parents relate with their children. This was gleaned from increased use of positive discipline practices (e.g. talking calmly to the child and explaining what is right), greater provision of child’s needs, and better personalities and improved character shown by the children. Notwithstanding this effect, beneficiaries wanted more knowledge on appropriate guidance and discipline (70.91%), health (46.79%), and childcare especially when the child is sick (35.15%).

**Child Protection.** In the aspect of child rights and protection, majority (62.19%) rated very highly the effect of FDS attendance on their perceptions about child rights and parental duties. Majority (93.79%) of the parents reported that they know about children’s rights, and the most familiar rights for them are: to be educated (79.21%), to have a home and a caring family (57.62%), and to be born, given a name and a nationality (46.29%). Majority (85.78%) reported that they have knowledge of laws related to children’s rights with the following rights as the most familiar to them: special protection of children against abuse, exploitation and discrimination (54.51%); anti-violence against women and children (45.87%); and anti-rape law (38.02%). Furthermore, majority (81.98%) reported that their child is not currently working. For the children who are working, the top three occupations they are engaged in are: construction worker, domestic helper, and as sales personnel and cleaning personnel. The children worked in order to help their family and to be able to buy their own needs.

**Family Values.** There were also some 61.71% who reported that FDS had a very high effect on the positive state of their family relationships. Majority (60.76%) answered that FDS had a very high effect on the moral and spiritual aspects of the family like praying together or going to church together. Around half of the beneficiaries did not view sibling relationship as a primary difficulty in family relations. Likewise, with FDS attendance, more work sharing between the husband and wife was reported. Even if most of the household chores are still done by the mothers, the fathers were helping out by cooking, caring for the children, marketing, cleaning the house, doing the laundry and ironing.
Health and Nutrition. In relation to health and nutrition, 66.07% said that FDS had a very high effect on the proper management of healthy food and nutrition at home. In terms of Reproductive Health and Family Planning, majority (79.14%) regarded the effect of FDS attendance on the family planning needs as mostly positive. On the other hand, 70% of the 4Ps beneficiaries practiced family planning, with the IUD, calendar method and condom and pills as the most common known family planning methods used. Attendance to FDS has very high effect on their family planning practices. For pregnancy, only 26% of the 4Ps beneficiaries who gained high score on the legitimate signs of pregnancy perceived that FDS affected their knowledge. This could be due to the first prenatal check-up being done only on the 3rd month of pregnancy. For infant care practices, 95.83% of the 4Ps beneficiaries breastfed their babies. They also bring the infant to the health center for check-ups and do complementary feeding on 6th month.

Home and Financial Management. Although majority rated their financial situation as the greatest difficulty in their lives, the percentage of beneficiaries who reported this went down from 81.51% to 66.69%. They also learned how to better budget their money, trust the spouse in handling the finances, and prepared a timetable to help manage their time.

Community Participation. Majority (59.67%) perceived the effect of FDS attendance to their contribution to the community as mostly positive. This can be supported by FGD results wherein beneficiaries expressed a change in their character, showed greater interest to participate, and exhibited better socialization skills. Some 75.89% were aware of the current community situation in terms of education, health, environment and politics. There was increased awareness in all these aspects, but the highest increase noted was on education. Likewise, majority ranked environmental concern and protection very highly as a community concern during FDS attendance (76.29%), with greater emphasis on saving energy, disposing wastes properly, and recycling. Majority ranked their preparation as a family (65.33%), and as a community (60.19%) for disasters as very high with FDS attendance.

Estimated Impact Attributable to FDS.

It is quite a challenge to measure the long-term effect of the FDS due to the absence of a baseline data to compare past and previous status. Nevertheless, by matching beneficiaries on a two-year phase approach, impact of FDS was estimated. Table 3 presents the results of the impact of FDS as gleaned from the quasi-randomized controlled evaluation as well as the estimated percent influence of behavioral changes attributed to attending FDS.
Table 3. Percent influence of behavioral changes attributed to FDS attendance.

<table>
<thead>
<tr>
<th>Outcome Variables</th>
<th>Results</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child protection</td>
<td>Above 50%</td>
<td>21% influence</td>
</tr>
<tr>
<td>Active Citizenship</td>
<td>Above 50%</td>
<td>20% influence</td>
</tr>
<tr>
<td>Health and Nutrition</td>
<td>Above 50%</td>
<td>18% influence</td>
</tr>
<tr>
<td>Education</td>
<td>Above 50%</td>
<td>15% influence</td>
</tr>
<tr>
<td>Relevance of FDS to households</td>
<td>Above 50%</td>
<td>15% influence</td>
</tr>
<tr>
<td>Husband-wife relationship</td>
<td>Below 50%</td>
<td>Less than 5%</td>
</tr>
<tr>
<td>Parent-child relationship</td>
<td>Below 50%</td>
<td>Less than 5%</td>
</tr>
<tr>
<td>Family Values</td>
<td>Below 50%</td>
<td>Less than 5%</td>
</tr>
<tr>
<td>Home and financial management</td>
<td>Below 50%</td>
<td>Less than 5%</td>
</tr>
</tbody>
</table>

Results revealed that socio-behavioral changes can be gleaned on the aspects of child protection knowledge and practices, prioritizing children’s education, acceptance of FDS as a conditionality for households, good practices in family health and nutrition, and active community participation. Percentage influence of FDS attendance on these changes ranged from 15% to 21%.

Conversely, less than 50% of the respondents reported high scores in marital relationship, parent-child relationship, family values, and home and financial management. Percentage influence of FDS attendance on these changes is less than 5%, which means that there might be inputs other than FDS that must have greatly affected the estimated changes.

General Discussion: Integrating Content, Process, and Effects

- It is notable that FDS has the highest impact on child rights and protection (21% influence). This is expected if gleaned vis-à-vis the nature of the modules used in the FDS. Child rights perspective is encapsulated in the Gabay manual, which is the primary manual used. Similarly, same topics are integrated in other manuals focused on parenting (i.e., PAM, MEP, ECCD) and in very specialized modules on child abuse (i.e., CSAP-P, CSAP-CY). Children are among the most marginalized sector in the society. But then, they are also the most valuable investment in terms of combating intergeneration cycle of poverty. An intervention that has significant impact on how children are treated in a society addresses present concerns and contributes to mitigating potential social ills in the future.

- FDS also has the next highest impact on active citizenship (20% influence). In terms of content, community participation is ingrained in the Gabay manual and is also addressed in other modules, more particularly in FCBDP, FCM, and WASH. In terms of process, the FDS provides an opportunity for community people (primarily
women) to serve as parent-leaders and be oriented to community leadership. Most importantly, the FDS serves as a platform through which the barangay and the municipal LGU are able to invite and engage the beneficiaries to community activities.

- Health and nutrition is highly influenced by FDS (18% influence). In terms of content, health and nutrition is ingrained in the Gabay manual and is also addressed in other modules, more particularly, MEP, ECCD, Module on Disabilities, and WASH. Common resource persons also come from the Municipal Health Office, which makes FDS also a conduit of public health and reproductive health services and information.

- FDS has relatively high influence on households’ recognition of FDS as conditionality to the Pantawid (15% influence). Narratives from beneficiaries indicated that FDS attendance is high. However, policy on attendance checking (e.g., seeking medical certificates when absent, checking attendance promptly) is not strictly implemented, and prolonged tardiness is not seriously looked into as long as the beneficiaries are able to sign up the attendance sheet. On a more positive note, FDS serves as a platform in discussing principles and details of Pantawid and provides an avenue where logistic and administrative issues are settled and addressed.

- The need for sustainable livelihood is revealed across components of this evaluation study. As it is now, the FDS serves as a conduit for livelihood trainings and activities (often from other units of DSWD). However, this is only true to some areas and has not been systematically integrated into the FDS Guidelines.

- Family relationships, marital relationships, and parent-child relationships are ironically among the least influenced by the FDS (less than 5%). This is despite anecdotes from beneficiaries that the FDS is useful for them because of these topics. One possible reason to explore could be that there are factors that disable beneficiaries to translate knowledge into actual behavior. Another reason could be that while family relationships are skills, FDS focuses more on knowledge transmission, just as most family life education programs.
RECOMMENDATIONS

Reviewing the findings in all three components of this evaluation study, the following recommendations were drawn in terms of content and topics, learning and instruction process, and logistical and organizational policies.

Content and Topics

To respond to the special needs of the program participants, additional topics have to be included or strengthened in the FDS such as:
- response to incidents of terrorism
- drug awareness and prevention
- livelihood education
- human trafficking
- spirituality
- appropriate guidance and discipline for children and teens
- health
- care for the sick
- family communication

A ladderized curriculum is also recommended, wherein existing topics and additional topics are harmonized into a consolidated curriculum for use in the FDS. However, this recommendation also entails a review of existing policies on the process and timing of inclusion into Pantawid beneficiaries. Some considerations are:
- ensuring that the curriculum aligns with the family life stage of family-beneficiaries (i.e., whether families are in the earlier stage and with very young children or in the peak stage where there are adolescent children)
- defining the appropriate time to initiate new beneficiaries into the program so that they can undergo the whole set of sessions for a year.

Learning and Instruction Process

In terms of the learning-teaching process, it is highly recommended to put up mechanisms for:
- monitoring behavior changes in the beneficiary (self-monitoring, monitoring by the parent leader or municipal link) to help ensure the formation of new habits
- engaging fathers and men in the community
- ensuring venues and schedules are conducive
- monitoring attendance as per guidelines
- innovating further on the instructional methodology to ensure not only that knowledge are imparted but that skills are also built among the participants
- adopting Interventionist (implementers as change agents) than Expert (implementers as knowledge source) approach
Logistical and Organizational Policies

To achieve the socio-behavioral changes directly desired by the FDS, it is suggested to also put in place the mechanisms, policies, and/or systems for:

- reliable referral for those in need of specialized services such legal, medical, and psychological services (i.e., victims of child abuse and exploitation and their family) especially that these issues might be brought up in the FDS
- livelihood seminars and activities that can help augment or sustain family income and increase financial stability, more so when the grant is terminated
- streamlining the tasks of the FDS focals and the MLs/CLs since monitoring of beneficiaries’ compliances and conducting home visits are demanding tasks already.
- Delegating FDS implementation and case monitoring to two (2) different roles

SUMMARY AND CONCLUSION

For the past years, the Family Development Session has become a forum for knowledge sharing, a conduit for auxiliary social services, and a platform for government units to enjoin family-beneficiaries into active community participation. This multi-method evaluation study investigated the various aspects of this conditionality in terms of content, process, and effects.

Generally, there is perceived satisfaction among beneficiaries in terms of the content and the way the content is delivered. There is also a prevailing perception of usefulness of these sessions especially in the aspect of acquiring knowledge on various family life variables. Nevertheless, socio-behavioral changes that are attributable to FDS have only been founded on the aspects of: child protection, children’s education, acceptance of FDS as conditionality, health and nutrition, and active citizenship. While there are good practices in the implementation of the program, there are also bottlenecks and gaps that must be transcended. Some mechanisms, systems, and policies have to be put up to enhance delivery and implementation.

By and large, if there is something meaningful this evaluation study has unearthed, it is the reality that various stakeholders positively receive the FDS as an intervention. The voices of the beneficiaries resound in this evaluation study especially their view of FDS as a worthwhile and legitimate conditionality. Hence, further action is now on the auspices of decision-makers and other stakeholders. They can make changes in the program to forward FDS not merely as a conditionality to comply with but an intervention that can certainly bring about more positive changes among Filipino families.
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