

Effects of the Conditional Cash Transfer Program on the Socio-Economic Conditions of Beneficiaries

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Abstract. This study investigated the effects of the Conditional Cash Transfer (CCT) program on the social and economic conditions of household beneficiaries in Kabankalan, Negros Occidental. It focused on key areas such as education, health, nutrition, women's empowerment, household consumption, income, investment, and savings. A descriptive-correlational research design was utilized, with data gathered through a researcher-made questionnaire distributed to 383 women grantees from registered, clean, and active households as of January 10, 2025. Participants were selected using stratified random sampling and were categorized into lowland and upland barangays. The results indicated that the extent of the CCT program's effects on household beneficiaries' social conditions, particularly regarding education, health, nutrition, and women's empowerment, was very great. These effects were evident across different household sizes, locations, and how many years beneficiaries had participated in the program. Additionally, the program had a pronounced impact on the economic conditions of the beneficiaries, specifically concerning household consumption, income, investment, and savings. A significant difference was observed in the extent of the effects of the CCT program on the social conditions of household beneficiaries when grouped by location. Location emerged as a predictor of economic outcomes. In conclusion, the CCT program significantly enhances beneficiaries' social and financial well-being, though its effectiveness varies by location. Future enhancements to the program should incorporate additional support services tailored to the unique needs of different households to maximize the effects of the CCT program.

Keywords: Conditional cash transfer program; Socio-economic effects; Women grantees.

1.0 Introduction

Poverty represents a complex and multifaceted social issue that alienates individuals and families from essential opportunities and resources, leading to significant limitations in their quality of life (Santos et al., 2024; Crossman, 2019). Although Conditional Cash Transfer (CCT) programs have been introduced in many countries as a solution, the effectiveness of these programs in truly alleviating poverty is still in question. While CCT programs financially support low-income families, they typically require recipients to invest in education, healthcare, and nutrition (Kumakura, 2019; Barbado et al., 2024). However, there is limited research on how well these requirements are being met and whether they lead to sustainable improvements in living conditions. Understanding these gaps is crucial for enhancing the design and impact of CCT initiatives and ensuring they provide meaningful help to those in need.

One notable example of a CCT initiative is the Pantawid Pamilyang Pilipino Program (4Ps) in the Philippines,

which draws inspiration from successful models implemented in various Latin American countries. Launched officially in 2008 after a pilot project began in 2007, the 4Ps program aims to empower households by promoting human capital development, thereby addressing the cycle of intergenerational poverty affecting many Filipino families (Arcayna et al., 2021; Orbeta et al., 2023). Empirical studies have consistently demonstrated that the 4Ps program enhances beneficiaries' living standards and quality of life. For instance, Malinao et al. (2022) found that the program improves economic stability and fosters social upliftment and community empowerment, allowing beneficiaries to navigate socio-economic challenges better.

Supporting this positive narrative, Organo (2023) and Eleoran et al. (2023) highlighted significant improvements in beneficiary well-being, enhanced financial resources, and better educational and health outcomes—key factors in the ongoing battle against poverty. Furthermore, research by Talimio and Salagubang (2021) indicated that the 4Ps enhances awareness, participation, and self-confidence among Filipino beneficiaries, ultimately contributing to their empowerment within households and communities. However, the recent statistics present a paradox that raises essential questions about the effectiveness of the 4Ps program. Despite reports indicating that over four hundred thousand households experienced improvements in their circumstances—an assertion made during the July 2024 State of the Nation Address by President Ferdinand R. Marcos Jr. an alarming 90% of the 4Ps beneficiaries, amounting to 3,820,012 households, remain below the poverty line (Commission on Audit, 2022). This striking statistic highlights significant concerns regarding the program's capacity to foster lasting socio-economic changes for its beneficiaries.

This present study aimed to investigate the specific effects of the Pantawid Pamilyang Pilipino Program (4Ps) on its beneficiaries' socio-economic well-being. By carefully analyzing the strengths and weaknesses of the program, this research seeks to provide nuanced insights into the efficacy of the CCT initiative. Ultimately, this study endeavors to contribute to policy discussions that aim to enhance the development impact of such interventions, thereby fostering more effective strategies for poverty alleviation in both the Philippines and similar contexts.

2.0 Methodology

2.1 Research Design

This study employed a descriptive-correlational research design to understand the effects of the conditional cash transfer (CCT) program on the socio-economic conditions of household beneficiaries. The descriptive component of the research focused on gathering detailed data to illustrate the profiles of the participants, including factors such as household size, geographical location, and duration of participation in the program. Furthermore, the study rigorously evaluated the CCT program's effects on various social dimensions, including education, health and nutrition, and women's empowerment. By examining these areas, the research sought to illuminate how the CCT program may affect the overall well-being of households. In addition to the social implications, the study explored the economic impact of the CCT program. It assessed key indicators such as household consumption, income, investment, and savings. This thorough analysis aimed to establish a clearer picture of how the CCT program affects the economic conditions of participating households. The correlational aspect of the research played a crucial role in identifying relationships between demographic variables and the social and economic effects associated with the CCT program.

2.2 Research Locale

The study on the effects of the Conditional Cash Transfer (CCT) Program, specifically the Pantawid Pamilyang Pilipino Program (4Ps), is strategically centered in Kabankalan City, Negros Occidental. This locale is particularly significant for several reasons. Firstly, Kabankalan City represents a blend of urban and rural characteristics, allowing for exploring varied socio-economic conditions. The city is home to both lowland areas, which are often more developed, and upland barangays, where households may face more significant challenges related to accessibility and resource availability. By selecting this diverse locale, the research aims to capture a broad spectrum of experiences and outcomes related to the CCT program, providing a comprehensive view of its effects on different community segments. Moreover, the city has many beneficiaries enrolled in the 4Ps program. As of January 10, 2025, there were 9,718 registered, clean, and active household beneficiaries in Kabankalan; female grantees represented 8,627.

2.3 Research Participants

Three hundred eighty-three women grantees participated in the study, which facilitated a robust sample size,

enabling detailed statistical analysis and ensuring the findings reflect the larger population's experiences. The sample size was determined using Yamane's formula, which was applied to a total population of 8,627 registered, clean, and active 4Ps household beneficiaries with female grantees in the City of Kabankalan, Negros Occidental, as of January 10, 2025. This method ensured a statistically significant sample size, appropriate for the scope of the study. The participants were chosen using a random sampling method.

The criteria for selecting women grantees as participants in this study are equally important. First, the majority of the CCT program grantees are women. Furthermore, women are often the primary recipients of the CCT benefits due to their roles as caregivers and decision-makers within their households. Targeting female grantees allows the research to emphasize their unique experiences and challenges, particularly in poverty alleviation and family welfare. Additionally, examining the experiences of women grantees can provide valuable insights into the effectiveness of the CCT program in empowering women and enhancing their socio-economic status. By understanding how these women navigate the program's requirements and benefits, the study can evaluate the program's effects on promoting gender equity and social inclusion. Ultimately, the focus on women grantees enhances the research's depth and aligns with broader objectives of promoting gender-sensitive policies and programs within the framework of social welfare initiatives.

2.4 Research Instrument

This study utilized a researcher-developed questionnaire as its primary data collection instrument, which was divided into three parts. The first part gathered participant information, including the household status in the program as of January 10, 2025, barangay address, household set, year of registration, and household size. Each element of the first part was defined as follows: Household status in the program describes the current status of the household's participation in the Conditional Cash Transfer (CCT) program as of January 10, 2025. The barangay address indicates the specific barangay where the participant is registered as a beneficiary of the 4Ps program. The household set refers to the batch number assigned to the household at the time of registration. The year of registration is when the household first joined the program and began receiving cash grants. Lastly, the household size refers to the number of individuals living together as one family at the time of data collection.

The second and third parts of the questionnaire aimed to determine the extent of the CCT program's effects on the social and economic conditions of the household beneficiaries. Part 2 included items assessing the program's impact on social conditions, featuring five items related to education, nine items for health and nutrition, and ten items addressing women's empowerment, making a total of 24 items. Part 3 focused on the economic effects, including 15 items for household consumption, five items for income, ten for investment, and twelve for savings, totaling 42 items.

The items in the questionnaire were developed based on relevant studies and literature. The responses were interpreted using a 4-point Likert scale. To ensure validity, the researcher-made questionnaire underwent testing using Lawshe's Content Validity Ratio (CVR). Ten social work, health, education, and economics experts evaluated the items. The results showed that all 24 items in the social conditions were kept after the validation. In the economic conditions, the number of items dropped from 42 to 34. The overall CVR for the questionnaire was 82.94%, meaning most items were considered essential and valid by the panelists. A reliability test was conducted with 30 identified 4Ps grantees not involved in the study, using Cronbach's Alpha to evaluate reliability. The reliability test results showed a Cronbach's Alpha value of 0.942 for social and economic conditions. This indicates excellent internal consistency and reliability for the scale used to measure the variables in the study. The Cronbach's Alpha value significantly exceeds the 0.70 threshold, which is considered acceptable for this research. This confirms that the questionnaire reliably measures the effects of the CCT program on beneficiaries' socio-economic conditions.

2.5 Data Gathering Procedure

This research involved several steps to collect the necessary data for the study. Before beginning the data collection process, a formal request letter was submitted to the Regional Director of the DSWD Field Office VI. The DSWD Field Office VI responded by requesting the submission of a completed Research Request Form and a Research Brief Form. The request then underwent an ethical review by the DSWD. Once the research request was approved, a copy of the endorsement was emailed to the Negros Occidental Provincial Operations Office 2, Cluster 2 Operations Office, and Kabankalan City Operations Office of the Pantawid Pamilyang Pilipino Program before starting the data collection. Printed copies of the research instrument were distributed to the City Links assigned

to various barangays in Kabankalan City. This distribution was proportionate to the number of households in each barangay, using data provided by the DSWD. Informed consent was obtained from all participants, who signed a consent form available in English and Hiligaynon before the questionnaire was administered. All participants approached initially agreed to take part in the study.

After signing the Informed Consent Form, participants were given the research instrument and asked to respond based on how much the Conditional Cash Transfer (CCT) program had affected their socio-economic conditions. The research questionnaire was available in both English and Hiligaynon, allowing participants to respond at their convenience with no time limit. Once the completed survey questionnaires were collected, they were compiled, organized, statistically analyzed, and treated.

2.6 Ethical Considerations

The research ethics were prioritized at every study stage, demonstrating a deep commitment to participant welfare and ethical standards. Prior to the onset of data collection, a formal written request was submitted to the Department of Social Welfare and Development Field Office VI, seeking their authorization to research the Pantawid Pamilyang Pilipino Program (4Ps). The acquisition of approval from the agency's regional director signaled the readiness to commence the data-gathering phase. To uphold ethical standards during the administration of the research instrument, the researcher and the enumerators presented a detailed Informed Consent Form to each potential participant. This process ensured that participation was entirely voluntary, with participants giving informed consent by signing the form. The study's purpose, methodologies, potential benefits, confidentiality measures, and detailed participation information were thoroughly explained in both English and Hiligaynon, ensuring clarity and understanding among participants. It was made explicitly clear that participants had the right to withdraw from the study at any point without any repercussions. This open communication fostered a trusting environment where participants felt comfortable seeking clarification and were well-informed before participating. The questionnaire was intentionally structured to exclude identifying information, safeguarding respondent anonymity.

Additional precautions were made to ensure that participants were protected from adverse consequences arising from their involvement in the study. The researcher mitigated potential risks by considering participants' vulnerabilities and needs, safeguarding their well-being. Implementing a coding system for anonymizing personal information ensured participant confidentiality was maintained throughout the research process, including data analysis and reporting. The significance of Republic Act No. 10173, commonly referred to as the Data Privacy Act, which outlines essential provisions for safeguarding individuals' privacy rights and personal information within the Philippines, was emphasized in this study. The handling of all participant information is in adherence to its guidelines. This compliance added an essential layer of protection to participant confidentiality, aligning with the established legal framework for data privacy in the Philippines. All completed questionnaires are stored securely in a locked cabinet for one (1) year. After this period, the questionnaires will be securely shredded or permanently destroyed to enhance confidentiality further.

Post-data collection, all survey results were securely stored and accessed solely by the researchers, ensuring data integrity throughout the analysis process. Employing standardized data entry and coding methods contributed to the reliability and accuracy of the findings. The participant selection process was executed relatively and without bias, striving for a representative sample from the target population of Pantawid Pamilyang Pilipino Program household beneficiaries in Kabankalan City, Negros Occidental. By rigorously adhering to these ethical principles, this research endeavor not only honored the rights and well-being of its participants but also upheld the credibility and integrity of its research findings. Committing to ethical research practices is a vital foundation for fostering trust and respect within the community. It contributes to the overarching goal of responsible and impactful research in the field of social welfare.

3.0 Results and Discussion

3.1 Extent of the Effects of the CCT Program on the Social Condition

In terms of Education

The findings presented in Table 1 underscore the significant impact of the Conditional Cash Transfer (CCT) program on the educational outcomes of household beneficiaries. With a mean score of $M = 3.70$ ($SD = 0.44$), participants perceive the effects of the program on their social conditions, specifically education, as very

significant. This suggests a profound transformation in educational attainment and engagement among beneficiaries, with the low standard deviation indicating consistent perceptions across the sample. Most participants' views are closely aligned, with a slight variation of 0.44 units from the average, signaling a unified recognition of the program's positive influence.

Table 1. *Extent of the Effects of the CCT Program on the Social Condition of the Household Beneficiaries in terms of Education*

Indicators	Mean	Interpretation	SD
Overall	3.70	Very Great Effect	0.44
1. School-age children are enrolled in school.	3.79	Very Great Effect	0.52
2. Attending school child/children is/are persistently attending classes and has/have obtained at least 85% attendance in school.	3.68	Very Great Effect	0.55
3. Attending school child/children is/are doing well academically.	3.67	Very Great Effect	0.58
4. Attending school child/children is/are actively participating in school academic and non-academic activities.	3.66	Very Great Effect	0.60
5. Attending school child/children/are eager to progress to a higher level of education towards completion of his/her/their studies.	3.68	Very Great Effect	0.59

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

Among the items evaluated, the item related to school enrollment of school-age children received the highest mean score ($M = 3.79$, $SD = 0.52$). This indicates strong agreement on the effectiveness of the CCT program in facilitating school enrollment. Conversely, the item's lowest mean score was observed concerning active participation in academic and non-academic school activities ($M = 3.66$, $SD = 0.60$). This discrepancy highlights an area for further enhancement, suggesting that while the program has successfully secured school attendance and promoted academic performance, there may be challenges in fostering a more robust level of engagement in school activities beyond attendance.

These findings are consistent with the work of Aldaba et al. (2023) and Capulong and Cuevas (2024), who also noted that CCT initiatives, such as the Pantawid Pamilyang Pilipino Program, have brought about significant improvements in educational outcomes for beneficiaries. In addition, Barbado et al. (2024) corroborated these findings, emphasizing the CCT program's positive effects on children's school attendance and academic performance. The study by Flores et al. (2019) further supports these conclusions, demonstrating a significant positive correlation between participation in the CCT program and the academic success of beneficiaries. Moreover, the research conducted by Parreno and Eramis-Eslabon (2022) provides additional context, indicating that the CCT program has not only enhanced educational outcomes but has also improved retention rates, academic performance, and overall attitudes toward learning. These improvements suggest a long-term positive trajectory facilitated by the CCT program, corroborated by Millán et al. (2020), who highlighted similar outcomes in their analysis.

In terms of Health and Nutrition

Table 2 shows the extent of the CCT program's effects on the household beneficiaries' social condition in terms of health and nutrition. The result suggests that the importance of the impact of the CCT program on the social condition of the household beneficiaries in terms of health and nutrition ($M = 3.64$, $SD = 0.39$) is perceived as having a very great effect, which means that the program has had a profound or intense impact on the health and nutrition of the household beneficiaries. It also suggests that most household beneficiaries acknowledge a substantial and long-term difference in health and food due to the program. The relatively low standard deviation indicates consistent responses across the sample. This means that most data points deviated by only 0.39 units from the average value, reflecting consistency within the dataset.

Most of the items obtained very great results. And some items got great results. Among the results, the highest mean score was found in the item, Have enhanced participation in deworming initiatives for children aged 1 to 12, leading to improved health outcomes and nutritional status among young beneficiaries ($M = 3.76$, $SD = 0.54$). In contrast, the item's lowest mean score was identified: Have less likely to have family members with chronic illnesses requiring constant medical attention ($M = 3.26$, $SD = 0.91$). The health and nutrition indicators that garnered high marginal scores include participation in deworming initiatives, access to clean drinking water, and improved hygiene and sanitation behaviors, indicating that the CCT program has been highly effective in promoting and advocating precautionary measures to reduce disease occurrence, improving child development, and promoting overall health. Also, the CCT program favorably influences the increase of vaccination and immunization rates among household beneficiaries, reflecting the program's positive attributes in strengthening

family health against vaccine-preventable diseases. The CCT program has made a difference in every household, as families can eat at least three meals daily. Household beneficiaries also have access to better food choices to uphold their nutrition.

Table 2. *Extent of the Effects of the CCT Program on the Social Condition of the Household Beneficiaries in terms of Health and Nutrition*

Indicators	Mean	Interpretation	SD
Overall	3.64	Very Great Effect	0.39
1. Have more access to free health services, resulting in improved overall health outcomes for the household.	3.69	Very Great Effect	0.56
2. Have less likely to have family members with chronic illnesses requiring constant medical attention.	3.26	Great Effect	0.91
3. Have regular health checkups to prevent illnesses for better long-term health and well-being.	3.52	Very Great Effect	0.78
4. Have more participation in free vaccinations and immunization programs offered by the Department of Health which increase family members' immunity and reduce the prevalence of vaccine-preventable diseases.	3.73	Very Great Effect	0.58
5. Have enhanced participation in deworming initiatives for children aged 1 to 12, leading to improved health outcomes and nutritional status among young beneficiaries.	3.76	Very Great Effect	0.54
6. Have more consistent access to three nutritious meals a day, contributing to better physical development and cognitive function in children.	3.72	Very Great Effect	0.56
7. Have better healthy eating choices, resulting in fewer family members experiencing underweight, overweight, or nutritional imbalances.	3.60	Very Great Effect	0.61
8. Have improved access to clean drinking water, thereby reducing the risk of waterborne illnesses and promoting better health.	3.74	Very Great Effect	0.53
9. Have improved hygiene and sanitation behaviors, such as regular handwashing and safe food handling, which lead to reduced instances of gastrointestinal and other infectious diseases.	3.74	Very Great Effect	0.56

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

Moreover, household beneficiaries are utilizing free health services even more as the CCT program has influenced the establishment of the accessibility of these services through a collaborative effort of the partner government agencies. The findings imply that the CCT program has lessened the financial strain associated with medical treatment and preventive healthcare the household beneficiaries face. Favorable outcomes on the health and nutrition of the household beneficiaries are attributed to the CCT program, exhibited by the invariably high responses across all health and nutrition indicators, which are also consistent with findings from other research studies (Ngamasana & Moxie, 2024; Chico et al., 2020). The findings note the significance of the CCT program in facilitating ease of availment of essential health services, preventive medical interventions, and better sanitation practices, resulting in enhanced health and nutrition outcomes, which are aligned with existing literature (Ahmed et al., 2022; De Souza et al., 2021).

It was also reinforced by Sánchez et al. (2018) and Jain and Mittal (2018) that the CCT program contributes to better physical and cognitive development in children towards long-term socio-economic benefits, as the program addresses malnutrition through deworming and dietary improvements. In addition, enhanced accessibility of safe drinking water and improved sanitation practices have likely reduced the incidence of waterborne diseases and gastrointestinal infections, as supported by the World Health Organization (2023). Aligning with Chandir et al. (2022), high vaccination and immunization uptake among household beneficiaries suggests that the CCT program effectively bridges health gaps and addresses inequalities in disadvantaged areas. Nevertheless, there is still a need for growth and improvement in managing chronic conditions and persistent preventative health checkups of the household beneficiaries. To further boost the long-term benefits for beneficiaries, the CCT program could enhance health monitoring services, strengthen nutritional education, and offer more support for chronic diseases.

In terms of Women Empowerment

Table 3 shows the extent of the CCT program's effects on the social condition of household beneficiaries regarding women's empowerment. The result suggests that the importance of the impact of the CCT program on the social condition of the household beneficiaries in terms of women empowerment ($M = 3.61$, $SD = 0.40$) is perceived as having a very great effect, which means that the program has had a profound or intense impact on women empowerment of the household beneficiaries. It also suggests that most household beneficiaries acknowledge a substantial and long-term difference in women's empowerment and overwhelmingly credit it to the CCT program. The relatively low standard deviation indicates consistent responses across the sample. This means that

most data points deviated by only 0.40 units from the average value, reflecting consistency within the dataset. Many of the items obtained very great results. And some items got great results. Among the results, the highest mean score was found in the item, Become a positive role model for my children, demonstrating the importance of education, hard work, and personal growth ($M = 3.78$, $SD = 0.48$). In contrast, the lowest mean score result was identified in the item, have encouraged and supported to prioritize my self-care and well-being ($M = 3.40$, $SD = 0.79$).

Table 3. *Extent of the Effects of the CCT Program on the Social Condition in terms of Women Empowerment*

Indicators	Mean	Interpretation	SD
Overall	3.61	Very Great Effect	0.40
1. Have an equal voice in managing household financial decision-making.	3.56	Very Great Effect	0.63
2. Have involved in making important decisions about future well-being of my family.	3.74	Very Great Effect	0.49
3. Have the freedom to make my own choices about personal advancement in life.	3.65	Very Great Effect	0.59
4. Have control over my own finances.	3.62	Very Great Effect	0.55
5. Have access to education and training opportunities to enhance my skills and career prospects.	3.49	Great Effect	0.67
6. My opinions and ideas are respected and valued by my family members.	3.67	Very Great Effect	0.57
7. Free from domestic violence and abuse.	3.52	Very Great Effect	0.77
8. Household responsibilities are shared equally among family members, reducing my workload and burden.	3.63	Very Great Effect	0.58
9. Have encouraged and supported to prioritize my own self-care and well-being.	3.40	Great Effect	0.79
10. Become positive role model for my children, demonstrating the importance of education, hard work, and personal growth.	3.78	Very Great Effect	0.48

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

The result reveals that the CCT program has significantly empowered women in household decision-making and personal development. Women in the program report a strong voice in financial decisions and involvement in important family decisions. The results suggest a notable autonomy in the individual development of women within the household and economic control, though some variability is present depending on household dynamics. Women feel their opinions are highly valued, indicating strong respect and recognition. However, while most women report freedom from domestic violence, some still face significant challenges. The CCT program also encourages shared household responsibilities, reducing the workloads of women, especially the mothers in the household, though cultural factors may still influence distribution. Women report feeling supported to prioritize self-care, though this effect varies. Women perceived themselves as positive role models for their children, consistently promoting education and hard work. The results suggest the program has a broad positive impact, with slight variations in specific areas like self-care and domestic violence, indicating opportunities for further improvements.

The CCT program has more likely empowered women, particularly in household decision-making, financial control, and involvement in family planning, in agreement with previous research (Almås et al., 2018; Sugiyama & Hunter, 2020; Laszlo et al., 2023). The CCT program's effectiveness is apparent in education and personal growth. Also, the program has empowered women to become role models. This shows enhanced women empowerment and independence. Despite this, notable gaps remain in ensuring that all women benefit equally. As argued by Hagen-Zanker et al. (2017), the variability in the influence of the program over household decisions participation of women, challenges in accessing education due to economic or geographical constraints, and significant disparities in experiences of domestic violence highlight areas where further intervention is needed. Additionally, the struggle to prioritize self-care and unequal sharing of household responsibilities suggest that cultural norms and family structures continue to influence the extent of empowerment.

3.2 Extent of the Effects of the CCT Program on the Economic Condition

In terms of Household Consumption

Table 4 shows the extent of the CCT program's effects on the household beneficiaries' economic condition in terms of household consumption. The result suggests that the importance of the impact of the CCT program on the financial condition of the household beneficiaries in terms of household consumption ($M = 2.98$, $SD = 0.70$) is perceived as having a great effect, which means that the program has had a considerable or essential effect on the household consumption of the household beneficiaries. It also suggests that most household beneficiaries acknowledge a noticeable difference in household consumption due to the program. The moderate standard deviation indicates some variation in the responses. This means that most data points deviated by only 0.70 units from the average value, reflecting moderate variability within the dataset.

Table 4. *Extent of the Effects of the CCT Program on the Economic Condition in terms of Household Consumption*

Indicators	Mean	Interpretation	SD
Overall	2.98	Great Effect	0.70
1. The household allocates more budget for food, improving the quality and quantity of meals.	3.56	Very Great Effect	0.64
2. The household consumes a balanced diet.	3.44	Great Effect	0.70
3. The household experiences reduced hunger and malnutrition.	3.37	Great Effect	0.86
4. The household can afford healthcare services, including hospitalization and medication.	3.42	Great Effect	0.70
5. The household allocates budget for vitamins, supplements, and/or other wellness products.	3.54	Very Great Effect	0.68
6. The household allocates more budget for education.	3.55	Very Great Effect	0.62
7. The household allocates budget on utilities such as but not limited to electricity, water, and internet.	3.33	Great Effect	0.85
8. The household allocates budget for other food and nonfood groceries/items.	3.33	Great Effect	0.78
9. The household allocates budget for improving living or housing condition.	3.38	Great Effect	0.71

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

Three items achieved a great effect, while six scored a great effect. Among the results, the highest mean score was found in the item, The household allocates more budget for food, improving the quality and quantity of meals ($M = 3.56$, $SD = 0.64$). In contrast, the lowest mean score result was identified in the items, The household allocates budget on utilities such as but not limited to electricity, water, and internet and The household allocates budget for other food and nonfood groceries/items ($M = 3.33$, $SD = 0.85$, $M = 3.33$, $SD = 0.78$, respectively). The results suggest that the household beneficiaries have experienced the effects of the CCT program on their household consumption aspect of economic condition. The highest scores were observed in indicators such as household allocation for food, vitamins, wellness products, and education, with a great effect rating. The findings also showed a moderate response variability, highlighting the most significant deviations in household consumption indicators, such as the household beneficiaries' incidence of reduced hunger and their practices towards fund allocation for utilities. This suggests that some household beneficiaries may have distinct experiences in these aspects.

In general, the CCT program has a positive effect on household consumption. The CCT program has effectively educated households through program interventions like the monthly family development session to improve their consumption patterns, prioritize their needs to improve their quality of life, and reduce hunger and health issues to achieve better overall economic conditions. While the CCT program has shown significant effects, some areas, such as hunger reduction, utility budgeting, and living conditions, exhibit more varied effects across household beneficiaries. While the CCT program effects vary across households, the overall trend positively affects household economic conditions. Recent studies support or align with the findings regarding the impact of the CCT program on household consumption, especially in areas such as food allocation, healthcare, and education. The CCT program significantly increased consumption expenditures among beneficiaries (Hadna et al., 2022). Hudang et al. (2024) reinforced that the CCT program significantly positively affects food consumption expenditure. Capulong and Cuevas (2024) found that the 4Ps have substantially enhanced the consumption patterns of household beneficiaries, especially in food and healthcare. A study suggests expanding the program to reach more vulnerable groups and families nationwide to address malnutrition and its long-term adverse effects (Eluwa et al., 2023).

In terms of Income

Table 5 shows the extent of the CCT program's effects on the household beneficiaries' economic condition in terms of income. The result suggests that the importance of the impact of the CCT program on the financial condition of the household beneficiaries in terms of income ($M = 2.98$, $SD = 0.70$) is perceived as having a great effect, which means that the program has had a considerable or essential impact on the income of the household beneficiaries. The result shows that most household beneficiaries recognize a noticeable difference in their income due to the program. The moderate SD suggests some variation in the responses, highlighting that most data points deviated by only 0.70 units from the average value, reflecting moderate variability within the dataset.

Table 5. *Extent of the Effects of the CCT Program on the Economic Condition in terms of Income*

Indicators	Mean	Interpretation	SD
Overall	2.98	Great Effect	0.70
1. The household receives regular cash transfers, which increase their household income.	3.62	Great Effect	0.69
2. The household engages in livelihood projects, such as but not limited farming, fishing, or small businesses, which generate additional income.	3.16	Great Effect	0.88
3. The household has household member/s with better-paying jobs or experience increased earnings from their existing jobs.	2.60	Great Effect	1.10
4. The household has income-generating assets, such as livestock, farming equipment, or small businesses.	2.81	Great Effect	1.01
5. The household has household member/s who is/are employed and receiving wage/salary.	2.68	Great Effect	1.09

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

One item achieved a very great effect," while four scored a great effect. Among the results, the highest mean score was found in the item, The household receives regular cash transfers, which increase their household income ($M = 3.62$, $SD = 0.69$), while the lowest mean score result was identified in the item, The household has household member/s with better-paying jobs or experience increased earnings from their existing jobs ($M = 2.60$, $SD = 1.10$). The findings emphasize that the CCT program increases household income, with the most pronounced effect on the regular receipt of cash grants by the household beneficiaries every two months through their cash cards, significantly boosting income levels. The results also indicate that the CCT program has influenced the household beneficiaries' engagement in livelihood programs and projects like farming and retail merchandising, in addition to their source of income.

Additionally, while the program invests in human capital development to land better-paying jobs or increase earnings, this effect is less pronounced than other variables. The results also noted that the households with income-generating assets, like livestock and farming equipment, and those with employed family members have a significant increase in income, credited to the program's effect. Emphasis on the impact of the CCT program in improving the economic condition of the household beneficiaries in terms of income is placed on direct financial assistance and the promotion of income-generating activities. While the program's effect is generally positive across all aspects, further strengthening livelihood initiatives and enhancing job opportunities could increase the overall income benefits for households. There is a clear opportunity to focus on improving employment and wage outcomes for CCT household beneficiaries.

The key findings also aligned with recent literature. The CCT programs can enhance the beneficiaries' financial capability, as explored by Eleoran et al. (2023). As also corroborated by Organo (2023), the CCT program has improved the overall lifestyle of beneficiaries and increased household income. Talimio and Salagubang (2022) found that some beneficiaries have alternative sources of income and do not rely solely on the cash grant, supporting the findings of this study as household beneficiaries venture into livelihood projects such as farming, fishing, and small businesses, contributing to income growth. Evidence of longer-term gains of the CCT program in employment and income is mixed (Özler, 2020). Baird et al. (2018) noted that CCT programs may lead to increased employment, earnings, consumption, and wealth among participants, attributed to the combination of interventions, aside from cash grants, leading to occupational changes among beneficiaries.

In terms of Investment

Table 6 shows the extent of the CCT program's effects on the household beneficiaries' economic condition in terms of investment. The result suggests that the extent of the impact of the CCT program on the economic condition of the household beneficiaries in terms of investment ($M = 3.06$, $SD = 0.65$) is perceived as having a great effect, which means that the program has had a considerable or essential effect on the investment of the household beneficiaries. It also suggests that most household beneficiaries acknowledge a noticeable difference in their investment due to the program. The moderate standard deviation indicates some variation in the responses. This means that most data points deviated by only 0.65 units from the average value, reflecting moderate variability within the dataset.

Table 6. *Extent of the Effects of the CCT Program on the Economic Condition in terms of Investment*

Indicators	Mean	Interpretation	SD
Overall	3.06	Great Effect	0.65
1. The household invests more in their children's education.	3.35	Great Effect	0.84
2. The household invests more in healthcare, including medical consultations, hospitalization, and medication.	3.29	Great Effect	0.78
3. The household invests in skills training and vocational education to enhance the household working member/s' employability.	3.18	Great Effect	0.86
4. The household invests more in housing, including construction, renovation, and repair of their homes.	3.31	Great Effect	0.78
5. The household invests more in livestock and agriculture, including purchase of farm animals, seeds, and fertilizers.	3.11	Great Effect	0.87
6. The household invests more in small businesses, including purchase of equipment, inventory, and rent.	2.62	Great Effect	1.06
7. The household invests more in insurance products, protecting themselves against financial risks.	2.81	Great Effect	1.07
8. The household invests more in microfinance services, enabling them to start or expand small businesses.	2.71	Great Effect	1.09
9. The household invests in social capital through participation in community activities.	3.23	Great Effect	0.89
10. The household invests in social networks by building stronger relationships with family, friends, and neighbors.	3.03	Great Effect	1.02

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

All items obtained a great effect result. Among the results, the highest mean score was found in the item, The household invests more in their children's education ($M = 3.35$, $SD = 0.84$). In contrast, the lowest mean score result was identified in the item, The household invests more in small businesses, including purchase of equipment, inventory, and rent ($M = 2.62$, $SD = 1.06$). The findings imply that the CCT program has encouraged household beneficiaries to invest in viable endeavors or projects that will improve their economic conditions in the long term. Investment indicators perceived by the household beneficiaries to have been influenced more positively by the program were their behavior toward investing in children's education and housing, both of which show a strong commitment to improving the quality of life for household members. The CCT program also positively affects the behavior of the household beneficiaries when it comes to investment in healthcare, including medical services, emphasizing the health improvements experienced by beneficiaries. The CCT household beneficiaries ventured to enhance employability and entrepreneurship through investment in skills training and entrepreneurial ventures.

The CCT program has also promoted social capital development, with beneficiaries engaging in community activities and strengthening social networks. The findings provide a foundation to establish additional support to further empower beneficiaries in areas such as investment in small businesses and utilization of microfinance services as a jumpstart for a livelihood undertaking, which would provide more sustainable income-generating opportunities. The CCT program could further enhance the beneficiaries' long-term economic stability and resilience by improving support in these areas. Recent studies exhibit similar findings on the CCT program's effect on investment. Beneficiaries invested heavily in children's education and housing. Chico et al. (2020) concluded that the CCT programs can have lasting, positive effects on children's education outcomes. The key findings of Evans et al. (2022) are the effect of the CCT program on economic outcomes, specifically in increased investments in livestock, insurance, and children's shoes. CCT programs positively impact social capital, attributed to household beneficiaries' change in behavior towards building social networks (Mesfin & Cecchi, 2023). Assistance to access training related to business and financial literacy, which can be done through referrals to program partners and stakeholders such as LGUs and other government agencies with a focus on skills training and enhancement, can further empower beneficiaries, leading to improved economic stability and resilience, as supported by Fischer et al. (2016).

In terms of Savings

Table 7 shows the extent of the CCT program's effects on the household beneficiaries' economic condition in terms of savings. The result suggests that the extent of the impact of the CCT program on the economic condition of the household beneficiaries in terms of savings ($M = 3.20$, $SD = 0.55$) is perceived as having a great effect, which means that the program has had a considerable or essential impact on the savings of the household beneficiaries. It also suggests that most household beneficiaries acknowledge a noticeable difference in savings behavior due to the

program. The moderate standard deviation indicates some variation in the responses. This means that most data points deviated by only 0.65 units from the average value, reflecting moderate variability within the dataset.

Table 7. *Extent of the Effects of the CCT Program on the Economic Condition in terms of Savings*

Indicators	Mean	Interpretation	SD
Overall	3.20	Great Effect	0.55
1. The household develops a habit of regular savings, setting aside a portion of their income each month.	3.15	Great Effect	0.87
2. The household saves for emergency and other unforeseen disasters/calamities.	3.23	Great Effect	0.83
3. The household learns to budget well, leading to better savings habits.	3.50	Very Great Effect	0.70
4. The household reduces their debt burden, freeing up more income for savings.	3.19	Great Effect	0.85
5. The household avoids unnecessary expenses, such as excessive spending on luxuries or vices.	3.36	Great Effect	0.87
6. The household opens and maintains bank accounts, increasing their access to formal savings services.	2.51	Great Effect	1.15
7. The household utilizes microfinance services, including savings and loan products.	2.56	Great Effect	1.15
8. The household saves for their children's education.	3.63	Very Great Effect	0.60
9. The household saves for healthcare expenses.	3.53	Very Great Effect	0.65
10. The household saves to start or expand a business or livelihood, increasing their income and economic stability.	3.33	Great Effect	0.77

Note: 3.50-4.0 (Very Great); 2.50-3.49 (Great); 1.50-2.49 (Low); 1.00-1.49 Very Low

Three items achieved a very great effect, while six scored a great effect. For the result of the extent of the impact of the CCT program on the economic condition of the household beneficiaries in terms of savings, the highest mean score was found in the item, The household saves for their children's education ($M = 3.63$, $SD = 0.60$), while the lowest mean score result was identified in the item, The household opens and maintains bank accounts, increasing their access to formal savings services ($M = 2.51$, $SD = 1.15$). The findings suggest that the CCT program has fostered the development of regular savings habits, with households setting aside funds for emergencies, debt reduction, and other sudden setbacks. The CCT program provides financial education intervention through family development sessions, which implies that the intervention has effectively influenced the behavior of the beneficiaries when it comes to savings. The effects are mirrored in their habit of allocating more of their income for deferred use, enhancing their economic stability. While the program has led to positive changes in savings and financial habits, some challenges exist, such as accessing formal financial services and maintaining a bank account. The results suggest barriers to fully integrating the household beneficiaries into utilizing formal savings systems offered by banks and other reliable financial institutions.

Findings on the effect of the CCT program on the savings outcomes reinforced by Nesbitt-Ahmed et al. (2018), reporting the beneficiaries' reduced reliance on borrowing from neighbors or others. Siu et al. (2022) and Schjoedt (2016) showed that cash transfers enabled people to reduce their debts. Capulong and Cuevas (2024) concluded that the CCT program improved savings among the poorest households. As supported by multiple recent studies, the results also highlight obstacles to reaching complete financial inclusion. According to Calma (2023), traditional banking institutions are not primarily found in rural and isolated areas, which may be a significant barrier to beneficiaries' access to formal savings in upland or mountainous regions. It is essential to keep in mind that the program has limitations. The Philippine government launched a CCT program to address immediate needs for education and health and break the intergenerational cycle of poverty (David & Maroma, 2025). The program's focus on immediate needs may overshadow long-term savings goals.

3.3 Difference in Social Condition

Table 8 shows the significant difference in the extent of the effects of the CCT program on the social condition of the household beneficiaries when grouped according to household size, location, and number of years availed of the CCT program. The result revealed no significant difference in the extent of the effects of the CCT program on the social condition of the household beneficiaries when grouped according to household size ($t = 0.35$; $p = .995$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the effects of the CCT program on the social condition of the household beneficiaries when grouped according to household size is not rejected.

Table 8. *Difference in Social Condition according to Profile Variables*

Variables	t	df	p
Household Size	0.35	381	.995
Number of Years Availed of	0.80	381	.465

The independent t-test result suggests that the extent of the effects of the CCT program on the social conditions of beneficiaries does not significantly vary whether they are from small to medium-sized households (2-5 members) or large households (6-11 members). The result shows that the CCT program has a uniform effect across different household sizes in improving social conditions. This result suggests that, within the variables examined, small to medium household size (2-5 members) versus large household size (6-11 members), household size has no bearing on the program's efficacy. Regardless of the size of the households - small, medium, or large - the CCT program consistently improves social conditions. This result could be important for program stakeholders since household size does not significantly affect the success of the CCT program; it indicates that interventions based on household size may not be necessary. The program could be effective for households of various sizes, and its benefits are equally distributed between small and large households.

The results do not conform to the findings of Blaabæk et al. (2019), which state that household size has an adverse causal effect on educational attainment, suggesting that children from larger families tend to have lower educational attainment, on average, compared to children from smaller families. Parada (2022) and Onsay and Rabajante (2024) suggested the necessity for targeted interventions for large households to address poverty and health dynamics, suggesting that household size matters in crafting responses to identified social problems. Also, the study results are not aligned with Bhattacharjee (2019), highlighting a clear link between family size and poverty. Additionally, the result revealed no significant difference in the extent of the CCT program's effects on the household beneficiaries' social condition when grouped according to the number of years availed of ($t = 0.803$; $p = 0.465$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the effects of the CCT program on the social condition of the household beneficiaries when grouped according to the number of years availed of is not rejected.

The independent t-test result suggests that the CCT program's effect on the social conditions of the beneficiaries is not significantly affected by the number of years the program has been in effect. Whether the beneficiaries are within the program's limit (7 years or less) or beyond (more than 7 years), the program's impact on social conditions seems similar. This suggests that, for the duration studied (within 7 years and beyond), longer participation in the program does not necessarily result in greater improvement in social conditions. The program's benefits may plateau after a certain number of years, or there may be other factors beyond the duration of the program that influence the social conditions. Further exploration of different influencing factors and program adjustments could enhance its effectiveness. Section 4 of the Republic Act 11310 states that the 4Ps will provide conditional cash transfers to qualified household beneficiaries for seven (7) years to improve their health, nutrition, and education. The study's findings suggest that the duration of program availment has no significant difference in the extent of the program's effects on the social condition of the household beneficiaries; it is prudent that beneficiaries utilize the program within the prescribed 7-year period under Republic Act 11310.

Table 9 revealed a significant difference in the extent of the CCT program's effects on the social condition of the household beneficiaries when grouped according to location ($\chi^2 = -1.25$; $p = .001$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the CCT program's effects on the social condition of the household beneficiaries when grouped according to location is rejected.

Table 9. *Difference in Social Condition according to Location*

Variables	χ^2	df	p
Location	-1.25*	224.50	.001

*Significant at $p \leq .05$

The Kruskal-Wallis test result showed that the extent of the effects of the CCT program on the social conditions of beneficiaries significantly varies depending on the location of the household beneficiaries living in lowland or upland barangays. The result shows that the CCT program has varied effects on improving social conditions across different locations. The difference might indicate that upland barangays are more likely to gain from the CCT program because of the social circumstances of the household beneficiaries, which call for the program's intervention. While the location has been identified as a factor affecting the CCT program's outcomes, it is

important to dive deeper into what specific factors cause the difference. The findings of the study on the program's significant effect on rural areas, supported by Capulong and Cuevas (2024), emphasize that the CCT program significantly affects social conditions like education for household beneficiaries in rural areas or areas outside towns or cities. Flores et al. (2019) concluded that it had a significant effect on the educational outcomes of the beneficiaries, which is inconsistent with the result of this study.

3.4 Difference in Economic Condition

Table 10 shows the significant difference in the extent of the effects of the CCT program on the economic condition of the household beneficiaries when grouped according to household size. The result revealed no significant difference in the extent of the CCT program's effects on the household beneficiaries' economic condition when grouped according to household size ($t = 1.65$; $p = .663$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the effects of the CCT program on the economic condition of the household beneficiaries when grouped according to household size is not rejected. The independent t-test result suggests that the CCT program's effects on economic conditions do not differ significantly between small to medium-sized households (2-5 members) and large households (6-11 members). While there is a slight difference in the means (as indicated by the t-value), the difference is not enough to be considered statistically significant. Beneficiaries of the CCT program experience consistent improvements in their financial circumstances regardless of the size of their households.

Table 10. *Difference in Economic Condition according to Household Size and Number of Years Availed of*

Variables	t	df	p
Household Size	1.65	381	.663
Number of Years Availed of	0.72	381	.877

The study's findings differ from those of Bitana et al. (2024), who concluded the significant differences in economic conditions regarding savings and consumption between household size groups, implying that large household size groups had lower average yearly savings and higher consumption expenses. Also, it is not supported by the data of Esteve et al. (2024), implying that smaller households may have different consumption patterns that influence their household needs—under Republic Act 11310, also known as the 4Ps Act, the cash grant amount is determined by the number of children monitored in education, a maximum of three, and their corresponding grade level. Consequently, households with more children enrolled in higher education levels tend to receive larger cash grants, potentially increasing their overall household income, yet in this study, the household beneficiaries with more monitored children do not take the greater cash grants as significant than those of its counterpart group in evaluating the effect of the CCT program on their economic condition.

Furthermore, the result revealed no significant difference in the extent of the CCT program's effects on the household beneficiaries' economic condition when grouped according to the years availed of ($t=0.72$; $p = .877$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the CCT program's effects on the household beneficiaries' economic condition when grouped according to the number of years availed of is not rejected. The independent t-test result suggests that the number of years a household has been in the CCT program (within or beyond the 7-year program period) does not significantly affect the household beneficiaries' economic condition. This could suggest that economic gains from the CCT program plateau over time or its effect decreases regardless of how long a household stays in it. These results imply that longer program duration does not translate into more substantial economic gains.

As the findings of the study suggest, the effect of the CCT program on the economic condition of the household beneficiaries, though beneficial, does not significantly differ regardless of the number of years availed, and while the program is not necessarily for the purpose of improving the present economic condition of the households, it is recommended that beneficiaries make use of the program within the allotted 7-year period. The 4Ps mainly enhance the health, nutrition, and education of children aged 0-18 (DSWD, 2025), implying that the program is not designed to address the family's immediate financial needs directly. However, it aims to break the intergenerational cycle of poverty, which the program is eyeing for growth in the socio-economic condition of the beneficiaries in the long run. Section 4 of the Republic Act 11310 highlights the duration of the program's availability to the beneficiaries.

In Table 11, the result revealed no significant difference in the extent of the CCT program's effects on the household beneficiaries' economic condition when grouped according to location ($\chi^2 = 3.55$; $p = .305$). Therefore, the null hypothesis stating that there is no significant difference in the extent of the CCT program's effects on the economic condition of the household beneficiaries when grouped according to location is not rejected.

Table 11. *Difference in Economic Condition according to Location*

Variables	χ^2	p
Location	3.55	.305

The Kruskal-Wallis' result suggests the CCT program's effect on economic conditions is similar across locations because the economic conditions of the household beneficiaries in the lowland and upland barangays have improved to comparable degrees. The results conclude that program effectiveness in terms of economic condition is not significantly influenced by location. Since the findings indicate that the program's effect is constant across various geographic locations, this could help formulate and implement policies across barangays without requiring major adjustments for geographic differences. The findings fail to align with Capulong and Cuevas (2024), indicating that in urban areas, the CCT program has improved the household beneficiaries' saving behavior and the quality of food consumed by household beneficiaries, which suggests that location has significance in the effect of the program on economic condition in terms of household consumption and savings. Physical access to services and employment opportunities is essential for economic growth and development (Cattaneo et al., 2022). Reinforced by Litsardopoulos et al. (2020), urban areas provide better access to goods and services and offer a wider range of jobs and higher earning potential. The study's findings exclude the potential advantage of those beneficiaries living near the city, undermining the idea that it could also be an advantage of the program in influencing those households economically.

3.5 Location as Predictor of Economic Condition

Table 12 determines whether the location variable acts as a predictor of the extent of the effects of the CCT program on the economic condition of the household beneficiaries. The data analysis revealed that the location variable ($p = .001$) was a predictor of the extent of the CCT program's effects on the household beneficiaries' economic condition. The study's finding indicates that the economic condition of household beneficiaries of the CCT program can be predicted by their location or the place where the households live, whether near or far from the city proper, with some location groups experiencing more significant difficulties than others. The results show how important it is to consider location-specific factors when developing and implementing poverty alleviation programs like CCTs, even though location only accounts for a small percentage of the variation in economic outcomes. The results also suggest that location has a statistically significant effect on the economic condition of CCT beneficiaries, with an adverse effect observed for households in specific locations.

Table 12. *Influence of Location as a Predictor on the Economic Condition of the Household Beneficiaries*

Variable	R	R ²	Unstandardized Coefficient		Standardized Coefficient	t	p
			B	Std. Error	Beta		
Location	0.175a	0.03	-0.21	0.06	-0.17	-3.47	.001

The findings are consistent with Capulong (2022), which implies that the CCT program is more effective in rural areas, particularly in increasing education expenditure and fostering human capital investment, and less effective in urban areas in terms of per capita total expenditures in urban areas, driven by an increase in per capita savings. The prevalence of children living in poverty is higher in rural areas, according to the Philippine Statistics Authority (2025), which suggests that poverty alleviation efforts should be concentrated in those areas to reduce the poverty incidence rate.

4.0 Conclusion

The study's findings indicate that the Conditional Cash Transfer (CCT) program has profound positive effects on the social conditions of household beneficiaries, especially in areas such as education, health, nutrition, and women's empowerment. This effect remains significant when analyzing the beneficiaries according to household size, location, and duration of program participation. Additionally, the economic conditions of the beneficiaries also improved in terms of household consumption, income, investment, and savings. However, the impact was

slightly less pronounced compared to social conditions. The study highlights that while location plays a critical role in influencing the effects of the CCT program on economic conditions, the variations in impact based on household size and duration of participation were not significant. This suggests that demographic factors alone may not be sufficient to explain differences in program effectiveness, pointing to the importance of contextual factors related to location. Several recommendations are given to help enhance the socio-economic effects of the CCT program. First, improving the program's features is essential by integrating additional support services that promote education, health, nutrition, and women's empowerment. Tailoring interventions to account for household size, location, and the duration of program participation will further increase relevance and effectiveness, as specific needs vary significantly across different groups.

Moreover, strengthening economic empowerment through initiatives to increase household income, encourage investment, and foster savings is crucial; this could involve offering skills training, access to microloans, and financial literacy programs. Community engagement is another key recommendation, as involving local communities in implementing and evaluating the program can ensure it remains responsive to their needs. In terms of future research directions, conducting longitudinal studies to explore the long-term impacts of the CCT program on beneficiaries will provide insights into its lasting effects. Comparative studies between beneficiaries from different locations can help identify how local context influences program effectiveness. Examining the spillover effects of the CCT program on non-beneficiaries within the same communities can offer a broader perspective on its impacts. Evaluating specific components of the CCT program to determine which elements are most effective would also be beneficial.

5.0 Contributions of Authors

The first author conceptualized the research topic. The second author collaborated on data design and analysis, while the first author reviewed the manuscript.

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7.0 Conflict of Interests

The authors declare that they have no conflict of interest.

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