

Attachment A

Matrix of Philippines' Commitments for the Nutrition for Growth Summit

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
Promoting Healthy Diets	The government of the Philippines commits that by 2030, there will be health-enabling environments fostered for the promotion of healthy diets among Filipino.	Health, Food	Department of Trade and Industry (DTI), Word Health Organization (WHO), Department of Science and Technology – Food and Nutrition Research Institute (DOST-FNRI)	Implementation of the Health Promotion Framework Strategy and Convening the Healthy Diet Coalition	Reduce prevalence of overweight and obesity among children under 5 years old, 6-10 years old, adolescents, and adults	National; overall population (all ages, both sexes)	2018: 3.5% (under 5 years); 10.4% (6-10 years); 10.7% (adolescents); 36.6% (adults)	December 2030; to be determined
					Reduce prevalence of elevated blood pressure among adults	National; all adults	2018: 18.3%	December 2030; to be determined
					Reduce prevalence of high fasting blood glucose among adults	National; all adults	2018: 8.1%	December 2030; to be determined
					Increase physical activity among children,	National; all children,	2018: 71.2%	December 2030; to be determined

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
Ensuring Nutrition Adequacy	The government of the Philippines commits the following goals by 2025. These goals will be achieved by increasing the utilization of nutrition-specific and nutrition-sensitive interventions, improving key nutrition behaviors known to reduce stunting in targeted regions, and implementing the proposed Philippine Multi-sectoral Nutrition Project (PMNP). The PMNP that will start in 2022 and end in 2025 will strengthen the	Health, Food, Resilience	Office of the Cabinet Secretariat (OCS), Department of Social Welfare and Development (DSWD), Department of the Interior and Local Government (DILG), DOST-FNRI, UNICEF, National Nutrition Council (NNC)	Implementation of the Philippine Multisectoral Nutrition Project	adolescents, and adults	adolescents, adults	Start date: December 2021	
					Increase prevalence (%) of pregnant women who have received complete iron-folic acid supplements	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-CIDSS participant, and HDPRC/PPAN area; 3,695,117 0-23 months old and <5 years old, and women 15 to 49 years old	2020: 50% Start date: January 2022	December 2025; 75%
					Increase prevalence (%) of pregnant women, in project areas, receiving prescribed antenatal	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-	2020: 51% Start date: January 2022	December 2025; 75%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	delivery of nutrition interventions and Primary Health Services delivery, facilitate community-based nutrition service delivery and Multisectoral nutrition convergence, and strengthen the government's monitoring, evaluation, and communication.				care services from the first trimester of pregnancy	CIDSS participant, and an HDPRC/PPAN area; pregnant women, 0-23 months old, <5 years old and women 15-49 years old		
					Increase percentage (%) of household in participating barangays with convergence of priority nutrition-specific and -sensitive interventions	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; overall population	2020: 0% Start date: January 2022	December 2025; 50%
					Increase percentage (%) of children, 6-23 months of age, in project areas who	235 municipalities: Stunting rate >17.5%,	2019: 9% Start date: January 2022	December 2025; 20%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
					meet age-appropriate minimum adequate diet (MAD)	Poverty incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; 6-23 months old children		
					Increase percentage (%) of target households with access to improved toilets	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; overall population	Start date: January 2022	December 2025; 60%
					Increase percentage (%) of primary healthcare facilities scoring at least 65% on the Quality	235 municipalities: Stunting rate >17.5%, Poverty	2021: to be determined Start date: January 2022	December 2025; 20%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
					Checklist in participating local government units (LGUs)	incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; overall population		
					Increase percentage (%) of infants, 0-5.9 months of age, in project areas who are exclusively breastfed as an age-appropriate diet	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; 0-5.8 months old children	2020: 57% Start date: January 2022	December 2025; 75%
					Increase the number of participating LGUs (municipal and barangay) with approved Local	235 municipalities: Stunting rate >17.5%, Poverty incidence	2021: 119 out of 235 Start date: January 2022	December 2025; 219 out of 234

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
					Nutrition Action Plan budgets and expenditures in accordance to plans)	>21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; overall population		
					Increase the percentage (%) of community nutrition-sensitive sub-projects completed in accordance to plan, budget and schedule	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-CIDSS participant, and an HDPRC/PPAN area; overall population	2021: 0% Start date: January 2022	December 2025; 85%
					Increase the number of barangays with updated nutrition information on the status of HHs with pregnant and lactating women	235 municipalities: Stunting rate >17.5%, Poverty incidence >21%, Kalahi-	2021: 0 out of 5936 barangays Start date: January 2022	December 2025; 3382 out of 5936 barangays

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
Strengthening Primary Care	The government of the Philippines commits that by 2025, the Primary Care will be strengthened through the First 1000 Days Strategy.	Health	OCS, DSWD, DILG, NNC, DOST-FNRI, UNICEF	<ol style="list-style-type: none"> 1. Interoperable Information Systems for Nutrition and Primary Care 2. Expansion of PhilHealth MCP and Konsulta Package 3. Transition of Nutrition Commodities for LGU Procurement 4. Quality Assurance and Standardization of Health Human Resources, Services, and Facilities for the delivery of the F1KD Strategy 5. Development of IYCF implementation plan to strengthening 	and children under 5 years old	CIDSS participant, and an HDPRC/PPAN area; overall population		
					Increase prevalence (%) of pregnant women completing 4 or more visits to a health professional	National; pregnant women	2020: 56.7% Start date: December 2021	December 2025; 95%
					Increase prevalence (%) of nutritionally-at-risk pregnant women receiving micronutrient supplementation	National; pregnant women	2020: 50.93% Start date: December 2021	December 2025; 95%
					Increase prevalence (%) of nutritionally-at-risk mothers who are chronically energy deficient (CED) provided with dietary and micronutrient supplements	National; post-partum women	2019: 16.7% Start date: December 2021	December 2025; 5.3%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
				<p>public health activities for maternal and child services with focus on HHR and community/support groups</p> <p>6. Strengthening of EO 51 (development of national action plan for PH Milk Code), and activities to address structural barriers breastfeeding/access to maternity protection of workers in the informal economy.</p>	Increase prevalence (%) of exclusively breastfed infants in the first 6 months	National; infant 0-6 months old	2020: 55.26% Start date: December 2021	December 2025; 75%
					Increase percentage (%) of children, 6-23 months of age, in project areas who meet age-appropriate minimum adequate diet (MAD)	National; infants	2020: 9% Start date: December 2021	December 2025; 30%
					Increase percentage (%) of children, birth to 12 months, with complete immunization (as required by end of 14th week; as required by end of 12 months)	National; children	2020: 14.6% Start date: December 2021	December 2025; 95%
					Decrease prevalence (%) of infants (6-11 months) with nutritional deficiency and increase	National; children	2021: to be determined	December 2025; 60%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
					percentage (%) of MAM and SAM children (12-23 months) provided with dietary and micronutrient supplementation			
					Decrease percentage (%) of wasting among children at 2 years of age	National; children <2 years old	2019: 7% Start date: December 2021	December 2025, 3%
					Decrease percentage (%) of stunting among children at 2 years of age	National; children	2019: 21.9% Start date: December 2021	December 2025, 15%
					Decrease percentage (%) of overweight/obese among children at 2 years of age	National; children <2 years old	2019: 2.6% Start date: December 2021	December 2025, 1.3%
					Establish strategic postharvest facilities and infrastructures	Farmers engaged in rice production and post	2022: 50% of the target FY 2022 based on National	December 2024; 80% of the baseline achieved
Department of Agriculture								
Minimize post-harvest losses and food wastage	Establishment of strategic post-harvest facilities and infrastructure, and	Food	Local government units (LGUs), Department	1. Provision of mechanization and post-harvest technologies to	Establish strategic postharvest facilities and infrastructures	Farmers engaged in rice production and post	2022: 50% of the target FY 2022 based on National	December 2024; 80% of the baseline achieved

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	optimize utilization of agricultural waste through R&D.		of Agriculture (DA) Regional Field Offices, Philippine Coconut Authority (PCA)	qualified rice farmer cooperatives and associations 2. Establishment of shared processing facilities for coconut		production, and coconut processing	Expenditure Program (NEP) Start date: April 2022	
Policies and programs for food safety	Policies and programs for Addressing Food Safety Hazards	Food	DOH, DOST, WHO	Upgrading the capabilities of consumer in ensuring food safety would be done and scientific bases of the regulatory system would be strengthened. This will focus on regulations, food safety standards, GAP, GMP in the production of food from primary production, post-harvest handling, distribution and processes.	Strengthen policies and programs for addressing food safety hazards	Overall population (all ages, both sexes)	2021: to be determined Start date: January 2022	December 2026; to be determined
Institutionalize community/school garden	Institutionalize/ Establish Community and School gardens to serve as the food basket/main source	Food	Department of Agrarian Reform (DAR), DOH, Department	1. Establishment of community and school gardens 2. Provision of agricultural inputs and	Provide agricultural inputs such as vegetable seeds, planting materials,	Elementary students ages 6-11 years old	3,132 children Start date: January 2021	December 2022; 80% of the targeted number

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	of commodities to sustain supplementary feeding and food sufficiency in the community.		of Education (DepEd), World Food Programme (WFP), UNICEF	technical assistance through conduct of training and seminars 3. Knowledge enhancement for school children on the benefits of vegetable consumption to improve nutrition	and garden tools for school gardens.			
Department of Social Welfare and Development								
<i>Pantawid Pamilya Pilipino Program</i> (4Ps)	The DSWD aims to provide conditional cash transfer (CCT) to poor, vulnerable households (with members aged 0-18 years or pregnant at the time of registration) through the national poverty reduction strategy and human capital investment program - the 4Ps (the Pantawid Pamilyang Pilipino Program); conduct of Family	Resilience	DepEd, DOH, Land Bank of the Philippines, UNICEF, World Bank, Asian Development Bank (ADB)	1. Provide conditional cash transfer to poor, vulnerable households 2. Conduct of Family Development Sessions	Increase the number of Conditional Cash Transfer (CCT) beneficiaries (households) covered to 4,400,000	All qualified 4Ps beneficiaries (poor, vulnerable households with members aged 0-18 years or pregnant at the time of registration)	2021; 4,356,914 households Start date: January 2022	December 2030; 4,400,000 households
					Increase the percentage of compliance on health and nutrition conditionality to 97%	All qualified 4Ps beneficiaries (poor, vulnerable households with members aged 0-18 years	2021; 96% Start date: January 2022	December 2030; 97%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	Development Sessions; and commit Php 107,084,000 for the provision of CCT in 2022.				Increase the percentage compliance on FDS conditionality to 97%	All qualified 4Ps beneficiaries (poor, vulnerable households with members aged 0-18 years or pregnant at the time of registration)	2021, 96% Start date: January 2022	December 2030; 97%
					Increase the percentage of qualified beneficiary provided with rice subsidy under the 4Ps to 90%	All qualified 4Ps beneficiaries (poor, vulnerable households with members aged 0-18 years or pregnant at the time of registration)	2021, 89% Start date: January 2022	December 2030; 90%
Supplementary Feeding Program	The DSWD Supplementary Feeding Program targets to reduce the	Resilience	-	Implementation of the supplementary feeding program in Child Development Centers and	Reduce the prevalence of wasting among young children 2-4	children 2-4 years old in CDCs and SNPs	2020: 6% wasting + severely wasting	January 2031; <3%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	prevalence of wasting and underweight among young children and commit Php 3,499,837,200 for supplementary feeding of wasted children in Child Development Centers (CDCs) and Supervised Neighborhood Plays (SNPs) for 2022			Supervised Neighborhood Plays	years old in CDCs and SNPs		among children in CDCs and SNPs (with weight-for-height records)	
					Reduce the prevalence of underweight among young children 2-4 years old in CDCs and SNPs	children 2-4 years old in CDCs and SNPs	Start date: January 2022 2016-2020 baseline average prevalence: 12% underweight + severely underweight among children enrolled in CDCs and SNPs (average prevalence of SUW+UW from 2016 to	January 2031; <3%

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
							2020 of children enrolled in CDCs and SNPs)	
Department of Agrarian Reform								
Buhay sa Gulay Project	In general, the Project is a response to counter the effects of the lingering global COVID-19 pandemic, specifically in minimizing the disruption to food supply due to the mobility restrictions, augmenting the daily vegetable requirement and source of income of the community, especially women agrarian	Food	-	1. Farm productivity assistance (1 farmers' organization per province shall be provided with technology transfer training coupled with agri-technology starter kits 2. Marketing assistance and facilitation of credit assistance to farmers' organization	Contribute to the increase in income of farming households	79 municipalities in 79 provinces in 15 regions with low income; 1,185 farmers/ individual	Baseline: 2020; Php 500 per individual/ farmer for 500 sqm per cropping cycle Start date: March 2022	December 2023; 10% increase per cropping cycle per individual/ farmer
					Adequate food for three meals for a family of five members	79 municipalities in 79 provinces in 15 regions with low income; 5,925 individuals	Baseline: 2020; Adequate food for two meals for a family of five members	December 2023; Adequate food for three meals for a family of five members

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	reform beneficiaries and their families, and changing the people's mindset on the productive utilization of vacant spaces (Pho 5,800,000)						Start date: March 2022	
Department of Science and Technology – Food and Nutrition Research Institute								
Conduct Food and Nutrition Research & Development (R&D) programs/projects and Science and Technology (S&T) activities to provide basis for malnutrition reduction initiatives	The DOST-FNRI plays an important role in ensuring a well-nourished nation through the provision of accurate data, correct information and innovative technologies.	Health, Food, Resilience, Data, Financing	-	The DOST-FNRI contributes in the attainment of the societal goal of a well-nourished nation through: (1) providing food and nutrition R&D and S&T as solutions to malnutrition reduction across all life stages, (2) utilizing NNS data and basic research as basis for policy action and intervention models, and (3) diffusion of knowledge and technologies.	Provide strategic solutions to malnutrition reduction across all life stages with focus among the poor, adults and children with unhealthy lifestyle and the aging through food and nutrition R&D and S&T services Provide accurate and timely nutrition survey results and utilize NNS data and basic research as prime drivers to	National; specific population group	Baseline: to be determined Start date: January 2022	December 31, 2032; to be determined

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
					policy actions, interventions and intervention models Strengthen the development of innovative technologies, and promote transformative information on food and nutrition Promote & delivered globally-recognized food & nutrition S&T services Upgrade human resources and build a strong R&D and STI culture to deliver quality service			
National Nutrition Council								
Develop and operationalize PPAN 2023-2028	Develop and operationalize the successor Philippine Plan of Action for Nutrition (PPAN) 2023-2028 that will	Health, Food, Resilience, Data, Financing	NNC Technical Committee and Governing Board, UNICEF, WFP,	1. Conduct multistakeholder consultation/planning workshops at various level	Formulate and operationalize national and regional plans of action for nutrition	Overall population	2020: PPAN 2017-2022, 17 RPANs 2017-2022	December 2028; 1 national plan formulated and operationalized, 100% regional

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	define impact targets, programs and projects, and budgetary requirements with inputs from various stakeholders. Facilitate preparation of regional level and LGU level nutrition action plans anchored on the national PPLAN. Pursue more vigorous multistakeholder nutrition planning.		Food and Agriculture Organization (FAO), civil society organizations (CSOs), other non-government organization (NGOs), Food and Nutrition Technology Adoptors, SUN Business Network	2. Secure high-level approval and support of the NNC Governing Board, Regional Nutrition Committee, or Regional Development Council 3. Conduct advocacy, provide technical assistance, and monitor and evaluate local nutrition action plans	Provide technical assistance in the formulation of local nutrition action plans	Local	2020: 67 (84%) provinces, 1190 (80%) municipalities, 117 (80%) cities, and 25227 (60%) barangays with LNAPs Start date: January 2022	December 2028; 100% of provinces, municipalities, cities, and 100% barangays with LNAPs
Creation of LGU Nutrition Offices	Undertake policy actions at the national level to increase the number of LGUs with nutrition offices and accompanying staff complement and	Health, Food, Resilience, Data, Financing	NNC Technical Committee and Governing Board, UNICEF, WFP, FAO, and other	1. Facilitate the formulation of a joint memorandum circular enjoining local government units to create nutrition offices and passage of law for	Increased number of LGUs with nutrition offices and full-time staff	Local; overall population	2021: 48% (55) provinces and HUCs with nutrition offices, 19% (301) component cities and	December 2028; 90% provinces and HUCs with nutrition offices, 70% component cities and

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
	conduct advocacy activities among local government units for the creation of nutrition offices with staff complement		development partners, civil society organizations (CSOs), other non-government organization (NGOs), Regional Nutrition Committees and Development Councils, Associations of nutrition workers	the creation of LGU nutrition offices. 2. Conduct of advocacy activities among local government units for the creation of nutrition offices and hiring of full-time staff			municipalities with nutrition offices , 8% (121) component cities and municipalities with full time nutrition action officers, 24% (27) provinces and HUCs with full time nutrition action officers , 35% (40) provinces and HUCs with full-time nutrition coordinators, 4% (69) cities and municipalities with full-time	municipalities with nutrition offices, 70% component cities and municipalities with full time nutrition action officers, 70%provinces and HUCs with full time nutrition action officers, 70% provinces and HUCs with full-time nutrition coordinators, 70% cities and municipalities with full-time support staff for nutrition

Short title of commitment/Main Agency	Full commitment	Core Area	Supporting agencies	Action Plans	Goals	Coverage	Baseline year, level and unit	Level to be achieved by end date
Scale Up Implementation of RA 11148	Development and coordination of the implementation of the comprehensive and sustainable strategy on the Republic Act 11148 or "Kalusugan at Nutrisyon ng Magnanay Act"; provision of technical assistance towards the implementation of the dietary supplementation for pregnant women, and complementary feeding for 6-23 months old children	Health, Food, Resilience, Data	NINC Technical Committee and Governing Board, Office of the Cabinet Secretariat, local government units, UNICEF, WFP, FAO, WHO, FNRI Technology Adoptors, SUN Business Network, Pilipinas Kontra Gutom Movement	1. Pilot implementation of dietary supplementation program in selected priority provinces 2. Advocacy to local government units (LGUs) for adoption of dietary supplementation program as regular LGU program	Increase number of local government units (LGUs) implementing dietary supplementation for pregnant women and 6-23 months old children	Local; All pregnant women, 6-23 months old children	2021: to be determined Start date: January 2022	December 2028; to be determined
							support staff for nutrition Start date: January 2022	