



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
First Regular Session

House Bill No. **8549**



Introduced by **Representative GIRLIE E. VELOSO**

EXPLANATORY NOTE

Child stunting remains one of the most persistent and damaging challenges to the Philippines' human development. According to the Second Congressional Commission on Education (EDCOM II), one in every four Filipino children under five years old is stunted, and while national prevalence declined from 31.9 percent in 2012 to 28.8 percent in 2022¹, progress has been slow and uneven across regions and provinces². National surveys likewise confirm that the Philippines continues to carry a higher stunting burden than the global average of 22.3 percent³, with serious consequences for learning, productivity, and long-term economic growth.

The Constitution commands the State to protect and promote the right to health and to safeguard the rights of children to proper care and nutrition⁴. Congress has enacted laws that reflect this commitment, including the First One Thousand Days Act, the Universal Health Care Act, the 4Ps Act, the National Feeding Program, and the Early Childhood Care and Development System. These laws provide essential foundations for maternal, infant, and young child health and nutrition, but current evidence shows that service delivery remains fragmented, frontline capacity is uneven, convergence across sectors is weak, and the most nutritionally vulnerable families often do not receive the full package of interventions that prevent stunting. Studies also highlight persistent gaps in maternal nutrition, complementary feeding practices, growth monitoring, WASH conditions, PhilHealth benefit design, and real-time data integration⁵. These structural limitations make it difficult to sustain the intensity, coverage, and accountability required to reduce stunting at scale.

¹ Philippine Statistics Authority and DOST-FNRI. Expanded National Nutrition Survey (ENNS) 2012 and 2022.

² EDCOM II Year 2 Report. "Early Grade Learning and Development." 2024.

³ UNICEF, WHO, World Bank Joint Child Malnutrition Estimates. "Global and Regional Trends in Child Stunting," 2023 Edition.

⁴ 1987 Constitution of the Republic of the Philippines. Article II, Section 15; Article XIII, Section 11; Article XV, Section 3.

⁵ DOST-FNRI. Expanded National Nutrition Survey 2021 and National Nutrition Survey 2023; EDCOM II Technical Notes; PhilHealth UHC M&E Framework; DOH Administrative Orders on F1KD and Primary Care; DSWD 4Ps M&E Reports.

This bill proposes the establishment of the Anti-Stunting Action Plan Council to serve as the State's dedicated governance body focused solely on reducing and preventing stunting. The Council will design and oversee a long-term national action plan, strengthen convergence across agencies, align sectoral programs to shared targets, and ensure that interventions in health, nutrition, early childhood care, agriculture, social protection, and WASH systems work together to support children during the most critical periods of growth. The measure institutionalizes a unified national strategy anchored in the first one thousand days of life, supported by stronger monitoring systems, integrated service delivery, clear accountability, and evidence-based adjustments as new data emerge.

The benefits of addressing stunting are profound. International studies show that each percentage point reduction in stunting yields significant returns through higher educational attainment, stronger workforce participation, and increased national productivity⁶. For families, timely nutrition interventions improve child survival, cognitive development, and resilience. For government, reducing stunting breaks intergenerational cycles of poverty and supports long-term economic stability. The value of investing in young children is clear, and the cost of inaction will only deepen inequality and weaken the country's human capital foundation.

The measure envisions a Philippines where no child's potential is curtailed by malnutrition and where the State meets its constitutional promise to nurture and empower every Filipino child. By establishing a unified, evidence-based national strategy, the bill aims to close long-standing gaps, elevate standards of care, and ensure that all children have an equal chance to grow, learn, and thrive. This is not only a public health priority but a moral and economic imperative that the nation can no longer afford to ignore.

In view of the foregoing, support for the enactment of this measure is earnestly sought.


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⁶ World Bank. "Repositioning Nutrition as Central to Development: A Strategy for Large-Scale Action." 2006; Hoddinott et al. "The Economic Rationale for Investing in Stunting Reduction," 2013.



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**AN ACT ESTABLISHING THE ANTI-STUNTING ACTION PLAN (ASAP)
COUNCIL IN THE PHILIPPINES, DEFINING ITS POWERS AND FUNCTIONS,
APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES**

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

1 **SECTION 1. Short Title.** — This Act shall be known as the "Anti-Stunting Action Plan
2 (ASAP) Council Act."

3 **SECTION 2. Declaration of Policy.** — It is the declared policy of the State to protect
4 and promote the right to health of the people and to adopt an integrated and comprehensive
5 approach to health and nutrition development. The State shall recognize the critical importance of
6 the early years of life, particularly the first one thousand (1,000) days, in securing optimal growth,
7 cognitive development, and long-term human capital.

8 The State shall give priority to children, pregnant and lactating women, and other
9 nutritionally vulnerable groups, especially in high-poverty and high-burden communities. It shall
10 pursue national and local strategies to reduce and prevent stunting, and shall promote intersectoral
11 cooperation, policy coherence, and evidence-based action across health, nutrition, early childhood
12 care, social protection, agriculture, and water, sanitation, and hygiene (WASH) systems.

13 Towards this end, the State shall formulate, strengthen, and implement a national
14 framework for coordinated, multi-sectoral, and data-driven programs aimed at sustainably lowering
15 stunting prevalence and improving the overall well-being of Filipino children.

16 **SECTION 3. Objectives.** — The objectives of this Act are as follows:

(a) To institutionalize a strategic and long-term national action plan for the reduction and prevention of stunting, identifying clear priorities and targeted health, nutrition, and related interventions across the life cycle;

(b) To establish a high-level body mandated to lead, coordinate, and harmonize all government efforts on stunting reduction, ensuring the alignment of national and local plans, programs, and resources;

(c) To strengthen health and nutrition governance through a whole-of-government and whole-of-society approach, promoting policy coherence, reducing fragmentation, and ensuring transparency and accountability in the implementation of stunting-related programs; and

(d) To prioritize and direct national and local action toward nutritionally vulnerable populations and high-burden areas, in support of equitable human capital development.

SECTION 4. Establishment of the Anti-Stunting Action Plan Council of the Philippines; Mandate. — There is hereby established the Anti-Stunting Action Plan Council, hereinafter referred to as the ASAP Council, to be organized upon the effectivity of this Act. The ASAP Council shall be the lead government body tasked to formulate, coordinate, and oversee the implementation of a national, multi-sectoral action plan for the reduction and prevention of stunting in the country.

The ASAP Council shall have the authority to set strategic directions, issue policy guidance, and ensure convergence among national government agencies and local government units in the delivery of programs and services related to stunting reduction. It shall likewise ensure that such efforts are aligned with a long-term, evidence-based national framework for preventing stunting across all life stages, with particular focus on the first one thousand (1,000) days of life.

The ASAP Council shall be attached to the Office of the President for policy coordination and strategic oversight.

SECTION 5. Composition of the ASAP Council; Appointment of Office. — The ASAP Council shall be composed of the Secretary of the Department of Health (DOH) as Chairperson; the Secretary of the Department of Social Welfare and Development (DSWD) as Co-Chairperson; and the following as members:

- (a) Secretary of the Department of the Interior and Local Government (DILG);
- (b) Secretary of the Department of Agriculture (DA);
- (c) Secretary of the Department of Education (DepEd);
- (d) Secretary of the Department of Science and Technology (DOST);
- (e) Secretary of the Department of Economy, Planning and Development (DEPD);
- (f) Executive Director of the Early Childhood Care and Development (ECCD) Council;
- (g) Executive Director of the Council for the Welfare of Children (CWC);
- (h) Executive Director of the National Nutrition Council (NNC);

- 1 (i) Two (2) representatives from non-governmental organizations (NGOs) engaged in
2 maternal and child care and development and maternal and child health and nutrition,
3 with a proven record of involvement in the prevention and reduction of stunting and
4 malnutrition. These representatives shall be nominated by the government agency
5 representatives of the ASAP Council for appointment by the President for a term of
6 three (3) years.

7 The members of the ASAP Council may designate their permanent representatives, who
8 shall have a rank not lower than an Assistant Secretary or its equivalent, to attend meetings, and
9 who shall receive such emoluments as may be determined by the ASAP Council in accordance
10 with existing budget and accounting rules and regulations.

11 **SECTION 6. ASAP Secretariat.** — There is hereby established a Technical Secretariat,
12 hereinafter referred to as the ASAP Secretariat, which shall operate under the control and
13 supervision of the ASAP Council. The ASAP Secretariat shall provide the ASAP Council with the
14 necessary technical, administrative, and coordination support to carry out its mandate under this
15 Act.

16 The ASAP Secretariat shall be headed by an Executive Director, who shall be nominated
17 by the ASAP Council and appointed by the President of the Philippines. The Executive Director
18 shall:

- 19 (a) possess at least ten (10) years of experience and practice in the field of health, nutrition,
20 or related areas relevant to stunting reduction;
21 (b) serve on a full-time basis; and
22 (c) have the rank, privileges, and emoluments equivalent to Executive Director IV (Salary
23 Grade 29).

24 **SECTION 7. Powers and Functions of the ASAP Council.** — The ASAP Council shall
25 have the following powers and functions:

- 26 (a) Develop and formulate a comprehensive and strategic national vision, action plan, and
27 roadmap for stunting reduction and prevention, including short-term and long-term
28 goals, timelines, performance indicators, and specific and effective implementation
29 strategies across all relevant sectors and agencies, with emphasis on the first one
30 thousand (1,000) days of life and other nutritionally vulnerable periods;
31 (b) Oversee, monitor, and conduct consultations with stakeholders and concerned
32 government agencies on health and nutrition policies, programs, and interventions for
33 stunting reduction and prevention, including home-visiting programs, community-
34 based nutrition services, and local service delivery mechanisms;
35 (c) Recommend the improvement and harmonization of anti-stunting policies across
36 various agencies and sectors, and facilitate the integration of multi-sectoral anti-
37 stunting programs to ensure program and policy coherence and effective
38 implementation of stunting reduction and prevention efforts, such as food security,

maternal and child health, water, sanitation and hygiene (WASH), and education, using a whole-of-government and whole-of-society approach;

- (d) Establish and maintain a centralized, interoperable, and comprehensive database system on stunting prevalence and its causes and interventions. The database shall be accessible to relevant government agencies, local government units (LGUs), and other stakeholders to show indicators and important data on stunting, track progress, and monitor implementation with a view to arriving at and implementing evidence-based and targeted solutions, and to support performance monitoring of LGUs and national agencies;
- (e) Communicate, whenever it deems necessary, the country's national action plan and roadmap, including policies, programs, and interventions for stunting reduction and prevention, to both local and international communities, including public reporting of the Anti-Stunting Action Plan;
- (f) Conduct regular monitoring and evaluation of policies, programs, and interventions, and recommend adjustments based on evidence and emerging trends and needs of the nutrition sector, including the results of LGU implementation, local compacts, and the performance of integrated community-based platforms such as Anti-Stunting Family Hubs;
- (g) Issue advisory opinions and guidelines on anti-stunting matters and submit annual and special progress reports, including plans and targets, and policy, financing, and legislative recommendations, to the President of the Philippines, the President of the Senate, and the Speaker of the House of Representatives;
- (h) Formulate the necessary rules and guidelines for the effective implementation of this Act, including guidelines on minimum service packages for the first one thousand (1,000) days, standards for community-based anti-stunting platforms, and parameters for performance-based support to LGUs; and
- (i) Perform such other duties and functions as may be assigned by the President of the Philippines to ensure the effective implementation of stunting reduction and prevention policies and programs.

The ASAP Council shall serve as the primary government agency to oversee the enforcement and administration of anti-stunting policies and programs. All relevant government agencies and regulators shall comply with its policy directions and recommendations, subject to prior consultation, and shall align their programs, budgets, and implementation activities with the Anti-Stunting Action Plan.

SECTION 8. The Anti-Stunting Action Plan, Roadmap, and Programs. — The Anti-Stunting Action Plan (ASAP) to be formulated shall establish the country's strategic vision for stunting reduction and prevention, and shall include long-term and medium-term goals, plans, priorities, strategies for coordinated and coherent implementation, and recommendations on programs and interventions to be promulgated and implemented by relevant government agencies.

The ASAP shall provide a roadmap for improving health and nutrition governance through well-defined coordination and alignment of stunting-prevention policies and programs across all sectors and stakeholders. It shall also identify areas of focus and strategies to strengthen and

1 stimulate the role of government agencies and local government units (LGUs) in achieving its
2 vision of reducing and preventing stunting using a whole-of-government and whole-of-society
3 approach.

4 The ASAP shall be formulated by the ASAP Council, in consultation with relevant
5 government agencies, LGUs, and other experts and stakeholders, and shall take into consideration
6 global best practices and evidence-based solutions. It shall be completed within six (6) months
7 from the effectivity of this Act.

8 The ASAP shall be reviewed, updated, and reissued on a regular basis, and at intervals not
9 exceeding three (3) years, to ensure responsiveness to emerging evidence, sectoral developments,
10 and national priorities.

11 Upon completion and every subsequent update of the ASAP, all concerned government
12 agencies shall strictly comply with and incorporate its pertinent policies in their respective
13 programs, activities, and projects.

14 **SECTION 9. Whole-of-Government and Whole-of-Society Approach; Monitoring**
15 **and Updating of Anti-Stunting Policies and Recommendations.** — For the effective
16 implementation of this Act, a whole-of-government and whole-of-society approach shall be
17 adopted. The ASAP Council shall ensure inter-agency coordination and integration of policies and
18 programs among relevant national government agencies and LGUs as provided in their respective
19 charters and mandates, and shall promote unified planning, synchronized resource deployment,
20 and convergence of frontline service delivery in communities with high stunting prevalence.

21 For this purpose, the ASAP Council shall continuously monitor and regularly update, as
22 may be necessary, the following programs and provide recommendations for their effective
23 implementation:

- 24 (a) (a) The National Nutrition Council's (NNC) Feeding Program for the First 1,000 Days
25 (F1KD);
- 26 (b) The Department of Health's (DOH) Disease Prevention and Control Bureau (DPCB)
27 interventions for F1KD;
- 28 (c) The Department of Social Welfare and Development's (DSWD) Supplemental
29 Feeding and Pantawid Programs;
- 30 (d) The Department of Education's (DepEd) School-Based Feeding Program; and
- 31 (e) Relevant programs of the Department of Agriculture (DA), Department of the Interior
32 and Local Government (DILG), Early Childhood Care and Development (ECCD)
33 Council, PhilHealth, and LGUs, and such other anti-stunting-related programs,
34 activities, and projects implemented by government agencies, including local
35 innovations that demonstrate measurable improvements in maternal nutrition, infant
36 and young child feeding (IYCF), child growth, or community water, sanitation, and
37 hygiene (WASH).

1 The ASAP Council shall likewise recommend minimum standards, financing requirements,
2 reporting and accountability structures, and guidelines to govern programs and policies that are
3 existing and may hereinafter be formulated by the relevant government agencies and sectors, such
4 as, but not limited to:

- 5 1. Proactive identification, early screening, and continuous monitoring of children at risk
6 of or experiencing severe or moderate stunting, including:
 - 7 1.1. standardized growth monitoring and promotion using height-for-age
8 measurements;
 - 9 1.2. home-visiting protocols for pregnant women, newborns, and children up to
10 twenty-four (24) months;
 - 11 1.3. extensive information dissemination through educational campaigns;
 - 12 1.4. establishment of local innovative measures to ensure access to nutritious and
13 affordable food; and
 - 14 1.5. improvement of the overall nutrition and care of pregnant and lactating
15 mothers and children zero (0) to five (5) years old.
- 16 2. Technical assistance and capacity-building for LGUs to promote food diversification;
17 develop sustainable community food sources; and strengthen barangay-level delivery
18 of health, nutrition, and early childhood services, including the establishment of
19 integrated service points especially in high-burden areas.
- 20 3. Allocation of a minimum budget for comprehensive anti-stunting intervention
21 packages, including maternal nutrition support, micronutrient supplementation,
22 breastfeeding and complementary feeding counselling, growth monitoring,
23 management of acute malnutrition, and essential WASH actions.
- 24 4. Expansion of the coverage and increase of cash grants under the Pantawid Pamilyang
25 Pilipino Program (4Ps) and other similar programs, in line with R.A. No. 11310 and
26 related laws, to address malnutrition and stunting, with a view to improving nutrition
27 outcomes during pregnancy and the first one thousand (1,000) days of life.
- 28 5. Mandatory health check-ups for 4Ps child beneficiaries aged zero (0) to five (5) years
29 old, every six (6) months, as a conditionality aligned with the Pantawid Pamilyang
30 Pilipino Program, to allow for regular monitoring of nutritional status and timely
31 interventions to prevent or manage stunting.
- 32 6. Access to enhanced livelihood support, food security initiatives, and other appropriate
33 programs offered by government agencies or accredited private institutions for families
34 with pregnant women, infants, or young children.
- 35 7. Integrated livelihood and anti-stunting strategies, including coordinated
36 implementation of water, sanitation, and hygiene (WASH) actions essential for
37 reducing infection-related contributors to stunting and for strengthening household-
38 level health and nutrition resilience.

39 The ASAP Council shall ensure that updates to policies and recommendations are based
40 on evidence, local data, and periodic assessments of program performance, and shall issue such
41 recommendations on a continuing basis to guarantee sustained progress in stunting reduction.

SECTION 10. Private Sector Participation. — The private sector shall be highly encouraged to partner with the government to finance and implement anti-stunting programs and projects. Government agencies tasked with implementing these programs shall be authorized to accredit development partners, which may accept donations, aid, or grants, in cash or in kind, from duly accredited sources, to meet the demands and uphold the basic rights of the poor to adequate and nutritious food and the highest attainable standard of health.

Accredited private sector organizations may support the delivery of anti-stunting interventions implemented through Rural Health Units (RHUs), Barangay Health Stations, and other designated community service points, including but not limited to home-visiting activities, nutrition counselling, and supplemental livelihood or WASH-related support, consistent with the national Anti-Stunting Action Plan.

The acceptance and utilization of such donations, aid, or grants shall be conducted with full transparency and shall comply with applicable government rules and regulations, including safeguards against conflict of interest and undue influence on public policy or program targeting.

SECTION 11. ASAP Centralized Database System. – The Department of Science and Technology–Food and Nutrition Research Institute (DOST-FNRI), in coordination with the Philippine Statistics Authority, is hereby mandated to develop, manage, and maintain a nationwide, interoperable centralized database on stunting, for the purpose of ensuring evidence-based planning, targeting, monitoring, and evaluation of the Anti-Stunting Action Plan (ASAP).

The database shall consolidate and integrate relevant data from national government agencies and Local Government Units (LGUs), including population-based nutrition surveys, routine growth monitoring, program implementation reports, household vulnerability information, and essential water, sanitation, and hygiene (WASH) indicators. It shall also support the generation of standardized stunting scorecards at national, regional, and local levels to monitor progress and guide corrective action.

DOST-FNRI shall establish a secure digital portal and reporting platform through which agencies and LGUs may submit and access timely and accurate information needed for the effective implementation of anti-stunting policies and programs. For this purpose, it shall coordinate with the Department of Health, the Department of the Interior and Local Government, the Department of Social Welfare and Development, and other relevant agencies whose mandates include community profiling, health and nutrition surveillance, and local service delivery.

All concerned agencies and LGUs shall ensure timely submission and updating of required data in accordance with standards and guidelines issued by the ASAP Council.

SECTION 12. Annual Report. – The ASAP Council shall submit an Annual Report to the President of the Philippines, the President of the Senate, and the Speaker of the House of Representatives on or before the last day of September of every year.

The Annual Report shall provide:

- (a) An assessment of the implementation of the Anti-Stunting Action Plan;
- (b) Progress on national targets and key indicators for stunting reduction;
- (c) Identified gaps and challenges, based on monitoring and consultations with agencies and LGUs; and
- (d) Strategic recommendations to strengthen policies, programs, financing, and delivery systems for stunting prevention and reduction.

The Annual Report shall be made publicly accessible through the ASAP Centralized Database System managed by the DOST-FNRI.

SECTION 13. Implementing Rules and Regulations. – Within ninety (90) days from the approval of this Act, the ASAP Council, in consultation with relevant stakeholders, shall formulate and promulgate the necessary rules and regulations to ensure the faithful and effective implementation of this Act, consistent with its declared policies and objectives.

The Council may revise such implementing rules and regulations as it deems necessary: Provided, That any amendment shall undergo appropriate consultation and shall remain aligned with the intent of this Act: Provided, further, That such revised implementing rules and regulations shall take effect fifteen (15) days following their publication in two (2) newspapers of general circulation.

SECTION 14. Appropriations. — The amount necessary for the initial implementation of this Act shall be sourced from the current appropriations of the Office of the President. Thereafter, the amount necessary for the continuous implementation of this Act, including the operations of the ASAP Council and its Secretariat, shall be included in the annual General Appropriations Act (GAA).

The funding requirements for anti-stunting programs and projects implemented under this Act shall be sourced from the existing appropriations of the departments and agencies concerned, as authorized under the GAA.

SECTION 15. Separability Clause. — If, for any reason, any section of this Act shall be deemed unconstitutional or invalid, the other sections or provisions shall not be affected and shall remain in force and in effect.

SECTION 16. Repealing Clause. — All laws, decrees, executive orders, rules and regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SECTION 17. Effectivity Clause. — This Act shall take effect after fifteen (15) days from its publication in the Official Gazette or in at least two (2) newspapers of general circulation, whichever comes earlier.

1 Approved.