

# Conditional cash transfer programmes and gender vulnerabilities in Latin America

## Case studies from Brazil, Chile and Colombia<sup>1</sup>

October 2010

Fabio Veras Soares<sup>2</sup> and Elydia Silva<sup>3</sup>

---

\* Disclaimer: The views presented in this paper are those of the authors  
and do not necessarily represent the views of [name of funder]

**Overseas Development Institute**  
111 Westminster Bridge Road  
London SE1 7JD  
UK

Tel: +44 (0)20 7922 0300 Fax: +44 (0)20 7922 0399  
[www.odi.org.uk](http://www.odi.org.uk)

---

1 The authors would like to thank and acknowledge the support of Clarissa Teixeira and Paula Nonaka in this research as well as the comments of Rebecca Holmes and Rachel Slater.

2 International Policy Centre for Inclusive Growth (UNDP/SAE) and Institute for Applied Economic Research (IPEA)

3 National Bank for Social and Economic Development (BNDES)

## Abstract

*This paper analyses the Brazilian, Colombian and Chilean experiences with conditional cash transfer programmes and how they have helped to tackle gendered economic and social vulnerabilities. As components of broader social protection strategies Bolsa Familia (Brazil), Familias en Acción (Colombia) and Chile Solidario (Chile) have been analysed within the broader strategy. This approach can help to think about ways to improve the impacts of these programmes in terms of gender equality. Detailed descriptions of the programmes' design and features of implementation features are provided in order to understand both their rationale and their impacts. We conclude that the programmes do tackle a number of gendered vulnerabilities but also have clear limits with regards to a more decisive role in tackling gender inequalities.*

## Background and Acknowledgements

This report is part of a research project funded by the UK Department for International Development (DFID) (2008-2010) and the Australian Government, AusAID (under the Australian Development Research Awards 2008) (2008-2011), looking at gender and social protection effectiveness in Latin America, Sub Saharan Africa, South Asia and Southeast Asia. DFID funded the primary research in Bangladesh, Ethiopia, Ghana, India, Mexico and Peru, as well as secondary research in Brazil, Chile, Columbia and Pakistan (with a focus on cash and asset transfer and public works programmes). AusAID funded research in Indonesia and Viet Nam (with a focus on subsidies). The research was carried out by ODI in partnership with the Department of Economics, Addis Ababa University, Ethiopia; the Indian Institute of Dalit Studies; SMERU Research Institute in Indonesia; the Vietnamese Academy of Social Sciences, Institute of Family and Gender Studies; the Department of Women and Gender Studies, University of Dhaka; the International Policy Centre for Inclusive Growth (IPCIG) in Brazil; and independent consultants in Ghana, Mexico, and Peru. For more information see:

[www.odi.org.uk/work/projects/details.asp?id=1020&title=gender-vulnerability-social-protection](http://www.odi.org.uk/work/projects/details.asp?id=1020&title=gender-vulnerability-social-protection)

The following publications are available under this project series:

### Country case studies

Amuzu, C., Jones, N. and Perezniето, P. (2010) Gendered risks, poverty and vulnerability in Ghana: To what extent is the LEAP cash transfer programme making a difference?

Arif, S., Syukri, M., Holmes, R. And Febriany, V. (2010) Gendered risks, poverty and vulnerability: Case study of the *Raskin* food subsidy programme in Indonesia.

Holmes, R., Mannan, F., Dhali, H. and Parveen, S. (2010) Gendered risks, poverty and vulnerability in Bangladesh: Case study of Challenging the Frontiers of Poverty Reduction (CFPR) programme, Specially Targeted Ultra Poor II (STUP II).

Holmes, R., Sadana, N. and Rath, S. (2010) Gendered risks, poverty and vulnerability in India: Case study of the Indian Mahatma Gandhi National Rural Employment Guarantee Act (Madhya Pradesh).

Khan, S. and Qutub, S. (2010) The Benazir Income Support programme and the Zakat programme: A political economy analysis of gender in Pakistan.

Jones, N. and Tran Thi Van Anh (2010) Gendered risks, poverty and vulnerability in Viet Nam: A case study of the National Targeted Programme for Poverty Reduction.

Jones, N., Woldehanna, T. and Tafere, Y. (2010) Gendered risks, poverty and vulnerability in Ethiopia: To what extent is the Productive Safety Net Programme (PSNP) making a difference?

Pereznieto, P. and Campos, M. (2010) Gendered risks, poverty and vulnerability in Mexico: Contributions of the Childcare for Working Mothers programme.

Vargas Valente, R. (2010) Gendered risk, poverty and vulnerability in Peru: A case study of the *Juntos* programme.

Veras Soares, F. and Silva, E. (2010) Conditional cash transfer programmes and gender vulnerabilities in Latin America: Case studies from Brazil, Chile and Colombia.

### **ODI Briefing Papers and Project Briefings**

Holmes, R. and Jones, N. (2010) Social protection programming: the need for a gender lens. ODI Briefing Paper 63, London, UK

Jones, N. and Holmes, R. (2010) Gender, politics and social protection. ODI Briefing Paper, London 62, UK

Holmes, R. and Jones, N. (2010). 'Gender-sensitive social protection and the MDGs'. ODI Briefing Paper 61. ODI: London.

Jones, N. and Thi Van Anh, T. (2010) A gender lens for Viet Nam's flagship poverty reduction programme. ODI Project Briefing 50, London, UK

Arif, S., Holmes, R., Syukri, M. and Febriany, V. (2010) Gender and social protection in Indonesia: Raskin food subsidy programme. ODI Project Briefing 49, London, UK

### **ODI Working Papers and Background Notes**

Holmes, R. And Jones, N. (2010) Rethinking social protection using a gender lens. ODI Working Paper 320, London, UK

Holmes, R., Jones, N., Vargas, R. and Veras, F. (2010) Cash transfers and gendered risks and vulnerabilities: lessons from Latin America. ODI Background Note, ODI London

Holmes, R. and Jones, N. (2009) 'Putting the social back into social protection: a framework for understanding the linkages between economic and social risks for poverty reduction'. ODI Background Note, ODI London

Holmes, R., Jones, N., and Marsden, H. (2009) 'Gender vulnerabilities, food price shocks and social protection responses'. ODI Background Note, ODI, London

### **Toolkit**

Holmes, R. and Jones, N. (2010) How to design and implement gender-sensitive social protection programmes. A toolkit. ODI, London UK

## Contents

1	Introduction.....	6
1.1	Conditional cash transfers (CCTs) in Latin American countries: beyond commonalities....	6
1.2	CCTs, social protection systems and gender vulnerabilities.....	7
1.3	Paper outline .....	8
2	Gender vulnerabilities/inequalities in Brazil, Chile and Colombia .....	10
3	Brazil: Zero Hunger strategy, <i>Bolsa Familia</i> and social assistance.....	18
3.1	Zero Hunger strategy .....	18
3.2	<i>Bolsa Familia</i> : Origin, design and implementation.....	19
3.3	Impact of <i>Bolsa Familia</i> .....	23
4	Colombia: <i>Juntos</i> and <i>Familias en Acción</i> .....	25
4.1	<i>Juntos</i> – Colombia’s social protection network for overcoming extreme poverty .....	25
4.2	<i>Familias en Acción</i> : Design and implementation .....	26
4.3	Impacts of <i>Familias en Acción</i> .....	29
5	<i>Chile Solidario</i> and <i>Programa Puente</i> .....	30
5.1	<i>Chile Solidario</i> .....	30
5.2	Impacts of <i>Chile Solidario</i> .....	32
6	Conclusion.....	34
7	References .....	36

## Tables

Table 1: Labour force participation rates of urban population from 25 to 59 years of age, by level of qualification and gender, in 2007 .....	11
Table 2: Inter-gender urban salary ratio by years of education.....	12
Table 3: Proportion of employed population who contribute to social security, by sex and sector(*) .....	12
Table 4: Female- and male-headed household poverty .....	13
Table 5: Education indicators by sex.....	14
Table 6: Health conditions by sex .....	15
Table 7: Proportion of position in executive, legislative and judiciary occupied by women .....	16

## Acronyms

ATM	Automated teller machine
BANCOLDEX	Foreign trade bank, Colombia
CASEN	National household survey, Chile
CCT	Conditional cash transfer
CEDEPLAR	Brazil
CRAS	Reference centres for social assistance, Brazil
ECLAC	Economic Commission for Latin America
FOSIS	Fund for solidarity and social investment, Chile
GDP	Gross domestic product
IBGE	National statistics office, Brazil
ICBF	Colombian institute family welfare, Colombia
ICETEX	Colombian Institute of Educational Credit and Technical Studies Abroad, Colombia
IGD	Decentralised management index, Brazil
INCI	National Institute for the Blind, Colombia
INCODER	Colombian Institute for Rural Development, Colombia
MDGs	Millennium development goals
MDS	Ministry of Social Development, Brazil
MESA	Emergency ministry of food security, Brazil
PAA	Food purchase programme for family agriculture, Brazil
PAT	Promotion of health food habits among workers, Brazil
PETI	Programme for the eradication of child labour, Brazil
RPS	<i>Red de protección social, Nicaragua</i>
PRONAF	Programme for strengthening family agriculture, Brazil
RUPD	Unified Registry of Displaced Populations, Colombia
SENA	National Learning Service, Colombia
SISBEN	<i>Juntos</i> classification criteria, Colombia
SISVAN	Food and nutritional monitoring system, Brazil
UIF	Family intervention units, Chile

# 1 Introduction

## 1.1 Conditional cash transfers (CCTs) in Latin American countries: beyond commonalities

There has been a growing interest in CCTs as a result of their well documented impacts on poverty and inequality as well as on education and health indicators of beneficiaries in line with its human capital accumulation objectives.<sup>4</sup> CCTs can generally be described by four common features: 1) the adoption of a targeting mechanism; 2) cash benefit; 3) compliance with a set of conditionalities and 4) by their double objective of alleviating poverty in the short-run through the transfers and preventing the intergenerational transmission of poverty in the long-term through the required investments in human capital dimensions - education, health and nutrition - and, in some cases, also in social capital. For the latter, complementary programmes play a major role.

Despite sharing these characteristics, CCTs often differ in their implementation; to the importance attached to each one of their objectives, and to how they are linked with the broader social protection and social policy. Bastagli (2009) points out three challenges for CCTs in Latin America in order for these programmes to be considered an effective component of an inclusive social policy. The first one is to go beyond narrow concepts of risk management that would justify minimum safety nets; the second is the development of a coordinate set of policies to place CCTs as a long-term feature of the social protection system, which encompasses some thought on ways to ensure their financial sustainability; and finally, to pay attention to the details of the actual implementation of the programme in order to avoid exclusion errors and to assure long-term institutional development.

Policy options related to the design and the implementation of CCTs can lead to different paths in terms of the evolution of these programmes. The recent experience in Latin America has seen two extremes; from short-lived and small scale experiences like the *Red de Protección Social* (RPS) in Nicaragua<sup>5</sup> to structural reforms like *asignación familiar* in Uruguay. In the case of the Uruguayan reform, a transitory cash transfer scheme (*ingreso ciudadano*)<sup>6</sup> was incorporated into the mainstream social protection policy through the gradual extension of the child allowance benefit (*asignación familiar*) to non-formal sector workers, starting with the poorest. Formal sector workers were previously the sole beneficiaries of this contributory social security programme since its inception in 1942.<sup>7</sup> This more recent reform<sup>8</sup> clearly intends to undermine the so-called 'truncated welfare' state that characterizes the social protection system in Latin America. Uruguay, despite having a larger share of formal sector workers than other countries, was no exception (Fiszbein, 2005).

The different ways in which programmes are conceptualised and evolve is likely to determine its potential impact on gender vulnerabilities and inequalities. Short-term initiatives are unlikely to bring about major changes, restricting its role to consumption smoothing and avoiding depletion of human, physical and social capital during crises and hardship spells. CCT models that evolve into a permanent feature of Social Protection Systems are more likely to have long-term effects on

---

<sup>4</sup> For a review of the impact of the various programmes see Soares et al. (2010a) and Fiszbein et al. (2009)

<sup>5</sup> See Moore (2008) for a thorough review of the RPS experience.

<sup>6</sup> *Ingreso ciudadano* was the conditional cash transfer component of the PANES – Social Emergency Aid Plan – that started in 2005 with a time horizon of two years. This time limit was in line with the emergency nature of the plan.

<sup>7</sup> It is interesting to note that the original benefit was conditional to both school attendance and to contribution to social security (Amarante et al, 2009). Therefore the use of conditionalities in the case of Uruguay comes from a much longer tradition than the new wave of Conditional Cash Transfers.

<sup>8</sup> The reform of the *Asignación familiar* started in the 1990's, but it was only in 2007 that the reform assumed a much more radical turn in terms of expanding coverage and incorporating families without formal sector workers.

gender inequalities, particularly when linked to/complemented by other social policies that would foster women's economic autonomy as well as policies that give incentives to a better balance in the way men and women share household chores, in particular with regard to the provision of care to children, the sick and the elderly (Ventura-Dias, 2009).

## 1.2 CCTs, social protection systems and gender vulnerabilities

The majority of the CCT programmes in Latin America target households, not individuals. However, they select a woman as the primary recipient of the transfer, in most cases the mother or the woman responsible for the children in the household. The rationale behind this policy option is based on the assumption that the money spent by women tends to be invested in goods and services more likely to positively affect the well-being of the children. Some quantitative and qualitative evaluations have claimed that these programmes have had an 'empowering' effect for women. The fact that these programmes, in principle, allow them to have control over even a relatively small amount of regular income is reported, in some cases, to have led to an increase in their bargaining power within the household<sup>9</sup> and an increase in their self-esteem.

Some CCTs have also addressed gender-specific vulnerabilities through the provision of higher transfers for school-aged girls who could be more likely to drop-out from school (particularly when they get to secondary education), and through the provision of free health care for pregnant women and breastfeeding mothers. Another important gender dimension is the potential for creating new forums for community interaction for beneficiary women through training sessions and/or community/beneficiary events.

In spite of these positive results, some authors have disputed the 'gendered empowerment effect'. They have questioned the adequacy of methodologies and indicators used to assess empowerment and the definition of 'empowerment' used in a number of these evaluations/assessments. The main limitation of the CCT programmes is that they tend to reinforce the traditional role of women within the household since they are 'empowered' only under the label of guardians of the children. They are rewarded for being 'good mothers' who, with the help of the State, can afford to comply with the responsibility (Molyneux, 2009).<sup>10</sup> In a similar vein, Jenson (2009) argues that the 'social investment perspective' in which most CCT programmes are embedded in Latin America is based on a set of child-centred policies. According to her, this approach tends to sideline the needs of adult women.

Even recognising the limitations of the programmes to tackle gender equality issues in a broader sense, it is relevant to assess how these social protection programmes can address gender-specific vulnerabilities and how they could be developed in order to address at least some of the gender inequalities that are within their reach. Based on Devereux and Sabates-Wheeler's (2004) typology of social protection measures, one can classify CCT programmes as *protective* and potentially *preventive* as long as they combine social assistance (cash transfers), social services (case-management) and some degree of social insurance (waiver of health insurance). A *promotive* dimension is quite case-specific and certainly would depend on the socio-economic environment in which the programme is implemented as well as on the existence of complementary programmes or synergies with other initiatives related to policies that foster economic autonomy of women such as inclusive production project/programmes. Indeed some evaluations have shown positive impacts on investments in production, particularly, in a rural

---

<sup>9</sup> While Schady and Rosero (2007) show some evidence of increase in bargaining power of beneficiary women within the household in the case of Ecuador, Handa et al (2009) show that in the case of Mexico's Progresa, this aspect has not appreciably increased the overall decision-making power of women, although women are reported to have more control over cash income as a result of the programme.

<sup>10</sup> Molyneux's research focuses is limited to the case of Progresa/Oportunidades in Mexico and Comedores Populares in Peru

setting,<sup>11</sup> but these evaluations do not disaggregate or analyse the impacts by gender. It could be assumed however, that CCTs *per se* would not guarantee the economic autonomy of women simply through the transfers. Here is a clear example, in which complementary programmes are necessary if one wants to incorporate a *promotive* dimension into CCT programmes.

Similarly, a *transformative* dimension can be embedded in the programmes, but in most cases it is not clearly listed among their core objectives or activities. Its achievement would depend on the existence of activities that would, for instance, promote and/or enforce legislation to guarantee equal rights and promote women's rights, awareness raise on social issues, and generate social mobilization. This is an important issue since, as emphasized by Holmes and Jones (2009), economic barriers are only one of many barriers faced by the chronically poor in moving out of poverty. In the case of the three countries analysed in this paper, indigenous, afro-descendent and displaced populations are groups likely to suffer additional barriers to overcoming poverty, and within these groups, women are particularly at risk<sup>12</sup>. Moreover, it is necessary to incorporate a gender dimension to CCT programmes, to over-reach traditional household dynamics. It is not enough to discuss matters with beneficiary women only; men, mostly their spouses/partners, should also be involved, otherwise sustainable changes within the household and even at the community level may not be achieved.

The three programmes discussed in this paper, *Bolsa Família* in Brazil, *Familias en Acción* in Colombia and *Chile Solidario* in Chile, are seen as flagship programmes in each country. For this reason they attract much of the attention of academia, of national and international media and of multilateral and bilateral organisations. However, the fact that these programmes are part of a broader (and evolving) social protection system is often forgotten. This risks the critical view that programmes are 'failures' as they are unable to wipe out poverty in the short-term.

It is important to recognise that they are key elements of a comprehensive social protection agenda that could potentially bring together initiatives in different dimensions, from other cash transfers (e.g. social pension and disability grant) to the access of social services and policies, including health, education and social assistance. This approach goes beyond a limited poverty reduction strategy, based on social safety nets and risk management approach, and puts forward a more integral vision that points toward an inclusive social development strategy. Such an inclusive approach is much more likely to address a larger set of gendered economic and social vulnerabilities than limited small scale interventions.

### 1.3 Paper outline

This paper discusses how CCT programmes in Brazil, Colombia and Chile have addressed gender vulnerabilities. Besides this introduction, this paper is comprised of other five sections. The next section presents an overview of the evolution of gender inequalities and vulnerabilities in the three countries, largely based on the data from the Gender Observatory from the Economic Commission for Latin America (ECLAC). The third, fourth and fifth sections analyse the CCT programmes for Brazil (*Bolsa Família*), Colombia (*Familias en Acción*) and Chile (*Chile Solidario*). The approach adopted in these sections, in line with the points discussed in this introduction, is to look at how these programmes fit into the social protection system of each country and then discuss its design and how it has been implemented with a view to identifying how they could contribute to tackle gender vulnerabilities. We also summarise the main findings of evaluations/assessments of these programmes with a focus on gender differences and women empowerment impacts that have been

---

<sup>11</sup> See for example Gertler (2006) for the case of Progresá, Soares (2010b) for Tekoporã, a CCT in Paraguay, and Martínez (2004) for Bonosol – a non-contributory old age pension in Bolivia.

<sup>12</sup> Lack of identification documents has been a major challenge for the programme's operations in order to be able to make the payment to women. This fact reveals the degree of social and political exclusion, on top of economic exclusion, faced by potential beneficiaries of the programmes.

identified from quantitative assessments as well as on evidence from qualitative studies (mostly based on focus group discussion) on how beneficiary women and programme managers perceive the impact of the programme on gender relations. Finally the sixth section concludes.

## 2 Gender vulnerabilities/inequalities in Brazil, Chile and Colombia

In the last two decades most countries in Latin American – including the three countries discussed here - have improved their macroeconomic performance through economic stability, consolidation of democracy, and reduction in poverty and inequality, to varying degrees of success. However, these countries still suffer from high levels of extreme poverty and particularly of inequality, in comparison to countries with similar levels of development or per capita GDP. Such inequalities are also visible with regards access to basic services and human capital as nutrition, education and health.

A combination of fiscal constraints and an attempt to make social spending more pro-poor and less unequal led to the adoption of targeted policies in Latin America. Debates in country, varied in intensity, according to the socio-economical, political and ideological environment. However, it should be noted that the so-called neoliberal reforms were not the only factor behind the adoption of targeted policies in general, and of CCTs, in particular, in the recent past of the region. The adoption of the Millennium Development Goal's (MDGs) framework also led to the adoption and/or scaling-up of anti-poverty programmes/policies with a strong focus on human and social capital as well as on gender dimensions, even if only indirectly.

Gender inequalities and women's needs and well-being became part of mainstream discussion both from a legal perspective – ensuring equal rights and curbing discrimination – and in the sphere of public policies to give real expression and meaning to implement the new body of legislation. These changes were simultaneously adopted with the social changes that modified women's social role and improved their options in an array of dimensions. In recent years there have been improvements in women's labour market participation, in their access to education (especially to tertiary education), in political participation and in many other aspects of social life. In sum, in more recent generations, Latin American women have more opportunities than the generations of women before them. However, these changes have been insufficient to both eradicate gender inequalities and discrimination. This process has not been homogeneous across social strata, with a large number of women, especially the poorest, excluded from effective access to political, social and economic rights and opportunities. Thus there remains much to do to advance the reduction of gender vulnerabilities and inequalities. Some of the needs and vulnerabilities faced by women in Chile, Brazil and Colombia are briefly highlighted in the next paragraphs.

Chile is the country with the lowest poverty rate among the three countries analysed in this paper and has one of the lowest among countries in Latin America as a whole. In 2006, around 13.7 per cent of the Chilean population was below the poverty line, while in Brazil (in 2008), it was 25.8 per cent and in Colombia (in 2005), it was 46.8 per cent - almost half of the Colombian population. The proportion of men and women living in poverty in Chile however, is much larger. The 2006 Feminisation index of indigence and poverty (*Índice de feminidad de la indigencia y de pobreza*) reveals that there were 123.9 women for each 100 men living in poverty. This index goes up to 132.2, when the extreme poverty line is used. In Brazil and Colombia the index was 105.2 and 108.6, respectively, and when the extreme poverty indicators are used, that index was 105.6 and 117.7, respectively. Low participation rate in the labour market is the main vulnerability women face in comparison with men. The participation rate has been increasing in the past decades, but there is still a high proportion of women who are unable to independently earn an income. Table 1 shows that between 32 and 40 per cent of women from the three countries are inactive (out of the labour force). These figures are much lower for women without any qualifications or skills. In addition, the gender differentials in labour force participation are substantial, the smallest differential being observed for the case of skilled workers in Brazil (95% for male and 86% for females). Many women are still engaged full time in traditional chores, such as domestic tasks and care for the others household members, especially children and the elderly members of the households and/or of their extended families. Most of them rely on their husband's and/or other

relatives' income. This lack of economic autonomy tends to reduce women's bargaining power within the household as well as limiting their livelihood opportunities.

**Table 1: Labour force participation rates of urban population<sup>13</sup> from 25 to 59 years of age, by level of qualification and gender, in 2007**

	Brazil		Chile		Colombia	
	Male	Female	Male	Female	Male	Female
<b>Without qualification</b>	90	64	93	54	93	62
<b>With technical and professional qualification</b>	95	86	93	77	95	85
<b>Total</b>	91	68	93	60	94	68

Source: ECLAC - Economic Commission for Latin America and the Caribbean

Costa et al. (2009) show that women's participation in the labour market has the highest potential in reducing poverty and inequality in these countries - more than the reduction in wage gender gap and a more balanced occupation distribution. Nonetheless, these two factors are still important elements in reducing gender inequalities and for supporting the reduction of overall poverty and inequality.

For many women taking paid work does not reduce the responsibility for domestic non-remunerated tasks. Performing unpaid work (particularly that related to domestic chores) is common among women that work outside the household - the so-called "double work shift". For this reason women are more likely to be 'time poor' than men and are more likely to accept an informal job that would allow them more flexibility than a formal sector job. Moreover, girls are more likely to share domestic tasks with other women from the household than boys, which can negatively impact their school attendance and achievement as well as on their overall human capital accumulation. Public policies that reduce women's domestic responsibilities, such as the provision of child, sick and elderly care, or improve household facilities are ways to improve female participation in the labour market.

Despite wage discrimination being illegal in Brazil, women are still paid less than men, with the same qualification and in similar occupations/jobs. This situation is no different in Chile and Colombia, as indicated in Table 2. Moreover, the wage gap increases with the levels of education, which suggests the existence of a glass ceiling even for well paid women in the formal sector.

---

<sup>13</sup> Includes informal labour force

**Table 2: Inter-gender urban salary ratio by years of education**

Years of education	Brazil (2008)	Chile (2006)	Colombia (2005)
0 – 5	70	80.4	85
6 – 9	66	79.6	85.9
10 -12	65.9	78.2	81.7
13 and more	67.9	73	79.4

Source: ECLAC - Economic Commission for Latin America and the Caribbean

The flexibility of informal jobs or occupations in less productive sectors is more accessible to poor women however their participation in these sectors generates additional vulnerability with regard to a lack of access to contributory social services and health insurance, since in the three countries a considerable part of social assistance policy is linked to formal sector jobs. According to Table 3, which shows the proportion of male and female covered by social security system in each sector, there are not large gender differences among the proportion of employed people who contribute to that the social security within each sector (formal/informal).

However, there is a huge difference in the proportion of workers covered by social security in formal (medium/high productive) and informal (less productive) sectors. In Brazil and Chile, around 74.4 and 82 per cent respectively of individuals employed in medium/high productivity sectors contribute to social security, whereas only 23 and 35 per cent in the low productivity sector do the same. This indicates the importance of being included in the formal sector in terms of having access to social security.

Nonetheless, in Brazil, in 2008, the informal/less productive sector represented 42 per cent of employment: 38 per cent men and 47 per cent women. In Chile (in 2000) it encompassed around 31 per cent, 26 for men and 38 for women in 2006. Since women are over-represented in the informal sector, they contribute less to the social security system. In this context, non-contributory social security benefits, especially social pensions, can help to protect the very poor elderly citizens who are not covered by other pension schemes, among which women tend to be over-represented.

**Table 3: Proportion of employed population who contribute to social security, by sex and sector (\*)**

	Brazil (2005)			Chile (2003)		
	Total	Men	Women	Total	Men	Women
	58.2	58.7	57.6	68.1	70.1	64.9
<b>Medium/high productive (formal sector)</b>	74.4	71.8	78.8	81.9	83.6	78.8
<b>Low productive sector (informal sector)</b>	22.9	22.2	23.5	35.0	31.2	39.4

Source: ECLAC: Economic Commission for Latin America and the Caribbean

(\*) Data not available for Colombia

The number of female-headed households has also increased over recent years and these households are likely to be poorer than male-headed households because of reduced income, due to having just one earner and compounded by the labour market inequalities discussed above. Table 4 presents the distribution of male- and female- headed households by poverty status and

the distribution of total income between households headed by women and men. According to this data, the proportion of female headed households living in poverty is similar to the one observed for male headed households in urban areas. In rural areas, there is a larger proportion of female headed households living in poverty compared to male headed ones, except for Chile. Moreover, looking at the distribution of total income among the different groups, it is noticeable that female headed households are poorer than the male ones. In rural Colombia, the poor households from rural areas command 40 per cent of the total income of male headed poor households. This striking differential is not as bad in Chile (58 per cent) and presents a more balanced situation in Brazil (90 per cent).

**Table 4: Female- and male-headed household poverty**

	Distribution of the household heads by sex, area and poverty condition, 2005						Ratio of total income of female and male household heads, 2005		
	Brazil		Chile		Colombia		Brazil	Chile	Colombia
	Male	Female	Male	Female	Male	Female	Female/male		
<b>Urban</b>									
<b>Poor</b>	26.2	24.9	14.7	16.3	38.7	40.1	74.0	54.0	56.0
<b>Non poor</b>	73.8	75.1	85.3	83.7	61.3	59.9	71.0	50.0	78.0
<b>Rural</b>									
<b>Poor</b>	44.8	31.2	16.3	16.6	42.5	54.7	90.0	58.0	40.0
<b>Non poor</b>	55.2	68.8	83.7	83.4	57.5	45.3	79.0	42.0	51.0

Source: ECLAC: Economic Commission for Latin America and the Caribbean

Educational indicators reveal that women have been more successful in attending school and achieving higher education levels than their male counterpart. Table 5 shows that illiteracy rate is, in average, lower; the attendance rate is higher; the years of education are higher or similar; and the ratio of girls to boys enrolled at school shows there is no longer discrimination against women in the access to formal education. One surprising figure is the fact that in Brazil there are 129 girls to each 100 boys enrolled at Tertiary education.

Table 5: Education indicators by sex

		Brazil		Chile		Colombia	
		Men	Women	Men	Women	Men	Women
<b>literacy rate of population aged 15 years and over, by sex (2010)</b>		10	9.3	2.8	2.9	6.1	5.7
<b>Years of schooling completed by the population between 15 and 24 years of age, 2007</b>	Urban	8.6	9.3	10.9	11.1	9.5	10
	Rural	6.4	7.3	9.8	10.1	6.5	7
<b>Years of schooling completed by the population between 25 and 59 years of age, 2007</b>	Urban	8	8.3	11.3	10.9	9.4	9.3
	Rural	3.9	4.5	7.8	7.9	4.5	4.9
<b>School assistance rate for people between 13-19 years of age, 2005</b>	Urban	76.7	77	85.6	84.9	72.8	72.2
	Rural	68.8	71.7	75.8	77.4	52.9	56.5
<b>Rate of school attendance of population aged 20-24, 2005</b>	Urban	25.1	27.4	36.7	33.6	26,0	23.7
	Rural	17.6	19.2	10.9	14,0	5.8	4.9
<b>Ratio of girls to boys enrolled at school</b>	Primary	1,00		0.99		1,00	
	Secondary	1.1		1.03		1.11	
	Tertiary	1.29		1.01		1.09	

Source: ECLAC: Economic Commission for Latin America and the Caribbean

Table 6 shows some health indicators specific for women and also some indicators for both sexes. As usual girls tend to have lower infant mortality rates than boys and women tend to have higher life expectancy at birth. Overall, Brazil seems to lag behind Chile as well as Colombia in these both indicators. Fertility rate is lower in Brazil and Chile than in Colombia yet the teenage pregnancy rate - similar across all three countries – is a cause for concern. Unlike the total fertility rate, teenage maternity (15-19 years) has not decreased in the region in the last decades. This led the region to an ambiguous position at the global level. On one hand it presents levels of total fertility rate below both world and developing countries averages; but on the other hand teenage fertility rate is above the world average, lower only to those observed in Africa. It is also the region where birth to teenage mothers represents the highest proportion of overall births (ECLAC, 2007)<sup>14</sup>.

High teenage fertility rate is a worrying figure because (among other concerns) it: a) represents greater health risks for both mother and child; b) can lead to lower levels of schooling and training for teenage girls; c) tends to be higher among poorer teenagers, a factor that can contribute to the intergenerational cycle of poverty; d) reveals gender inequalities since most teenage mothers are single mothers who have to bear the responsibility for child bearing in the absence of the father and e) indicates that teenage reproductive rights are not effective, as most of these pregnancies are unwanted and girls in most cases did not have access to contraceptives. The latter three

<sup>14</sup> CCT programmes do not address directly the issue of teenage pregnancy; however, beneficiary meetings such as the *pláticas* in the case of Oportunidades, Mexico's CCT programme, can help to disseminate knowledge on basic health as well as on preventive sex education. Lamadri-Figueroa et al. (2010) show that Progresa has had a positive impact on contraceptive use among poorest beneficiaries, but they do not look at teenage pregnancy in particular.

features reveal the lower access to contraceptive methods for the girls and highlights the gender inequalities and vulnerability especially to those living in poverty (ECLAC, 2007).

The challenge in bringing down teenage pregnancy is that the factors that have contributed to it in other parts of the world seem to have failed in the region. Therefore strategies must be contextualised and involve the understanding of the psychology of maturing adolescents of both sexes as well as the cultural ambivalence represented by a more liberal attitude regarding sexuality simultaneously with a denial of the sexual autonomy of adolescents (ECLAC, 2007). Sex education in schools seems to be a natural policy recommendation. This policy has faced many barriers due to cultural traits and the resistance of religious groups and lobbies. The health system seems badly equipped to deal with this phenomenon as adolescents have much more restricted access to contraceptive methods and information and are not used to attend a health centre on their own. In such circumstances sex education has the potential to reach more adolescents than the health units. In addition, the lack of employment and career prospects for young girls can lead them to consider early motherhood as way to affirm their identity and independence before their family and society at large. This latter should be a major concern in terms of gender inequalities, social exclusion, poverty and vulnerability (ECLAC, 2007).

**Table 6: Health conditions by sex**

	Brazil		Chile		Colombia	
	Male	Female	Male	Female	Male	Female
<b>Infant Mortality rate (per 1,000 live births) - 2005-2010</b>	27	20	8.1	6.3	21.9	16.1
<b>Life expectancy at birth, by sex - 2005-2010</b>	68.9	76.1	75.5	81.5	69.2	76.6
<b>Total fertility rate - 2005-2010</b>	--	1.9	--	1.94	--	2.45
<b>Teenage maternity (%) (15-19 years old)*</b>	--	14.8	--	12.3	--	14.3

\* Brazil 2000, Chile 2002, Colombia 2004\_05

Source: ECLAC: Economic Commission for Latin America and the Caribbean

A high level of domestic violence is still a problem in Latin America countries. Although laws intended to protect women have been passed, the extent of gender-based violence is still unacceptable. Limited application of the laws to punish the perpetrators of acts of violence against women - especially partners and relatives – reflects a major failure in the implementation of these laws. In Chile, the rate of women deaths at the hands of their current or former partners reaches 52 per 100,000 women per year. In Colombia, in 2005, 39 per cent percent of women reported having experienced some type of physical or sexual violence at least once in their lifetime. In Brazil, the *Maria da Penha* Law represented an important step against domestic violence. This law has created new mechanisms to restrain domestic violence against women. However, it is necessary to work hard to deter the barriers that hinder the actual implementation of the law in daily life, including the fight against the silent acceptance of ‘some level of’ domestic violence by large segments of society.

Despite these relatively bleak figures, it should be recognised that there have been some progress over the recent years. Gender inequalities in labour market have been reduced and the debate around policies to curb gender inequality has also become integral part of government agenda. This is partly related to the fact that the presence of women has become more evident in all sectors of society, including political participation.

Women's participation in administrative, legislative and judiciary spheres is still lower than men, but there has been some progress. Table 7 presents data on women's participation in government and in the political structure. In sum, Chile seems to be in a much better position than Brazil and Colombia. It has the least unequal situation among the three countries, especially in Ministerial cabinet positions, while Brazil and Colombia have lower figures<sup>15</sup> However, taking a regional perspective, these three countries do not perform very well. Argentina, Costa Rica, Peru, Mexico and Bolivia<sup>16</sup> have a much stronger presence of women in the parliament than the three countries analysed in this paper. Chile seems to perform better in the ministerial cabinet positions due to Bachelet's government that finished in early 2010. In the incoming Piñera administration this figure will be reduced to 27 per cent (6 out of 22 ministers). This may be due to the district voting system used in Chile; if a party wants to increase the number of women in the parliament they may do so if they indicate more women to dispute safe seats. This seems to have been the case in Chile<sup>17</sup>.

**Table 7: Proportion of position in executive, legislative and judiciary occupied by women**

	<b>Brazil</b>	<b>Chile</b>	<b>Colombia</b>
<b>Ministerial cabinet positions in executive power*</b>	11.0%	48.0%	21.0%
<b>Seats in national parliament (2009)</b>	9.0%	15.0%	8.4.0%
<b>Judges in the highest court or supreme court (2008)</b>	18.0%	16.0%	17.0%
<b>Elected mayors (2008)</b>	7.3%	12.2%	9.0%
<b>Elected city council members (2008)</b>	12.6%	21.1%	14.5%

\*Brazil 2003\_2007, Chile 2006\_2009, Colombia 2006\_2009

Source: ECLAC: Economic Commission for Latin America and the Caribbean

---

<sup>15</sup> Interestingly, Chile is the country with the lowest rate of female labour market participation as seen in Table 1.

<sup>16</sup> A common feature of these countries is that all of them have quotas for women in the national parliament.

<sup>17</sup> We are grateful to Simone Cecchini from ECLAC to draw our attention to the particularities of the Chilean political system.

The snapshot of gender inequalities in Brazil, Chile and Colombia seen in this section provides the background against which CCT programmes can be assessed in terms of their potential impact in tackling inequalities. It has been seen that: poverty affects more female-headed households; women participation in the labour market is a key determinant of poverty and inequality; teenage pregnancy for the three countries is an important challenge despite the improvement in other gender sensitive health indicators, and finally, the issue of domestic violence, at the bad side, and women political representation, at the good side, still need to see more improvement in the region in general and for the three countries, in particular.

CCT programmes can act directly on issues of poverty, however, its impact on the labour market and how it can affect women's labour market participation (and occupational choice) is something that relies heavily on the design of the programme and is also determined by the supply of creches and the improvement of access to infant education centres. Similarly, the health component of CCTs can be improved if it also focuses on the issue of teenage pregnancy and covers the incorporation sex education in school contents. Finally, for the programmes that interact directly with the family beyond the simple payment of transfers, the "coaching" activities need to deal with issues such as domestic violence and work opportunities for women as well as the points raised above in order to try to change attitudes and behaviour that reproduce gender inequalities over generations. In the next sections, we examine in detail the main characteristics and some of the impacts of the CCT programmes of Brazil, Colombia and Chile.

### 3 Brazil: Zero Hunger strategy, *Bolsa Família* and social assistance

#### 3.1 Zero Hunger strategy

The *Fome Zero* (Zero Hunger) Strategy was initiated in early 2003 to integrate social programmes that aim to tackle food insecurity and extreme poverty. It was one of the key themes in the Lula's presidential manifesto as summarised in his promise "that all Brazilians should have at least three meals per day". For this reason much of the emphasis of the social protection policy in the past seven years, at least at the discourse level, fell under the *Fome Zero* strategy. The strategy includes a set of programmes and activities that involves the three levels of governments (Federal, State and Municipal) and almost all ministries.

The strategy was designed to protect poor and vulnerable families/individuals against hunger. Moreover, it has a goal of promoting cross sectoral coordination, bringing together government and civil society initiatives, overcoming economic, social, racial and gender inequalities, eliminating child labour, promoting income generation and human capital accumulation.

*Fome Zero* can be divided in four groups:

- Access to Food: programmes based on the distribution food and cash transfers benefits and on guaranteeing access to information and education with regards to food and nutrition: *Bolsa Família* (cash transfer), school feeding programme, food distribution to specific vulnerable groups, cistern building, budget (subsidised) restaurants, food bank, community vegetable gardens, food and nutritional monitoring system (SISVAN), distribution of vitamin A and iron supplements, food and nutritional programme for indigenous population, food and nutritional education and the promotion of healthy food habits among workers (PAT).
- Strengthening of Family-based Farming: programmes to support smallholder farmers (family agriculture) in order to generate income and increase food production: National Programme for Strengthening Family Agriculture (Pronaf), crop insurance, agriculture family insurance, food purchase programme from family agriculture (PAA).
- Income Generation: encouragement of solidarity economy, development of activities to improve the skills of poor people and to contribute to their integration into the labour market: Training, productive inclusion and solidarity economy, consortium for food security and local development (Consad), productive organisation of communities, support for cooperatives of rubbish/recycling collectors, microcredit and technical assistance.
- Coordination, Commitment and Social Accountability: stimulating partnerships between civil society and government: Reference Centres for Social Assistance (CRAS), social mobilization and citizenship education, training of social and public servants, communitarian work and donations, social accountability through social councils.

It is worth noting that given the initial food security focus of Lula's major commitment, it had not been envisaged a large scale programme that could merge and upscale the different cash transfer programmes under the responsibility of the Federal Government. Actually, one of the first measures of the Emergency Ministry of Food Security (MESA) – created in January 2003 - was to start a new cash transfer scheme - *Cartão Alimentação* – under the concept of right to food. The only conditionality of this cash transfer was that beneficiaries could only buy food with the transfer and had to show the receipts. This measure came under much criticism and was later scrapped.

However, the major reform in the cash transfer area started in October 2003 when *Bolsa Família* was created following the merger of the following programmes: *Bolsa Escola* (Ministry of Education), *Bolsa Alimentação* (Ministry of Health), *Auxílio gás* (Ministry of Mines and Energy) and the newly created *Cartão Alimentação* (Ministry of Food Security). The database of potential

beneficiaries was then unified under one single large database, the *Cadastro Único* (Single Registry)<sup>18</sup>. The programme fell under the responsibility of the new Ministry of Social Development and Fight against Hunger, made up of the former Ministry of Food Security and Ministry of Social Assistance. Besides implementing most of the *Fome Zero* strategy programmes, in which *Bolsa Família* is clearly the flagship programme, Ministry of Social Development – (MDS) - also coordinates some of the complementary programmes and activities that are actually under the responsibility of other line ministries.

### 3.2 *Bolsa Família*: Origin, design and implementation

*Bolsa Família* consolidated the CCT model that was first implemented in Brazil in the mid-1990s in the Federal District and in the municipality Campinas and later extended out to cover several municipalities and states. The first Federal level CCT programme was the Programme for the Eradication of Child Labour (PETI) created in 1996 and implemented originally only in a few municipalities where children were at risk of working in hazardous activities, such as coal production, sea fishery and sisal cultivation and processing (Soares and Sátyro, 2009).

In 1997, legislation was approved authorizing the Federal government to cover up to 50 per cent of the expenses of the poorest municipalities that were implementing any “minimum income guarantee programme linked to education”. It is interesting to note the use of “minimum income” language in this legislation. This reveals the influence of the debate around the “citizenship basic income bill” put forward by Senator Suplicy<sup>19</sup> on the CCT discussion. Apparently, Brazil is the only case in which the debate around basic income has had some influence on the CCT discussion and design.

In February 2001 under the responsibility of the Ministry of Education *Bolsa Escola* was created covering children between 6 and 15 years enrolled at school. Later that year two other cash transfer programmes were created: *Bolsa Alimentação* in the Ministry of Health, for children between 0 and 6 years and pregnant women and *Auxílio gás* to compensate poor households for the phasing-out of fuel subsidies. Whereas *Bolsa Escola* and *Bolsa Alimentação* were conditional programmes, *auxílio gás* was an unconditional transfer. *Cartão Alimentação*, as mentioned above was created in 2003 already under Lula’s administration.

Before the merger of the four programmes<sup>20</sup> under *Bolsa Família*, they relied on different implementing agencies, information systems and sources of funding. This situation led to poor communication among managers and the information systems of different programmes, which theoretically meant that a family could receive all four benefits<sup>21</sup>, while another with the same

---

<sup>18</sup> Actually the *Cadastro Único* was created in 2001 with the aim of having a common database for different programmes, but its actual consolidation only took place during the *Bolsa Família* reform.

<sup>19</sup> It is interesting to note that just after the *Bolsa Família* reform, the citizenship basic income law was sanctioned by President Lula after being approved by the Congress. The law states that the basic citizenship income is a right of all Brazilians residing in the country and all foreigners who have been living in the country for more than five years regardless of their socioeconomic situation. However, the law also states the implementation of this benefit must be done in phases, starting with the poorest segments of society and according to the budget possibilities of the government. According to Senator Suplicy’s interpretation, *Bolsa Família* is a first step toward the Citizenship Basic Income. However, other supporters of the basic income like Lavinás (2008) point out that *Bolsa Família* does not come from a rights based perspective, since it is targeted and conditional and, therefore, exclude some of the poor that fail to be selected through the targeting mechanism or who fail to comply with conditionalities. See Bastagli (2008) for an overview of the debate on conditional cash transfer in Brazil and the different views of their advocates and critics.

<sup>20</sup> Notice that PETI was not merged with *Bolsa Família* initially. It was incorporated later on and kept some of its features such as the *jornada ampliada* (extra school shift) for the children under this programme.

<sup>21</sup> The accumulation of benefits does not mean any illegality, the law allowed this type of situation, as the *Bolsa Escola* and the *Bolsa Alimentação* programmes covered different age groups and the *Cartão Alimentação* and *Auxílio Gás* were seen as complementary to other programmes, admitting, therefore, their accumulation with other benefits.

socioeconomic status, could not receive any transfers at all. Moreover, the values of benefits varied among programmes, so that the federal government could be paying different amounts to families in similar situations. The justification for such differences was that, despite being targeted to the same group of families, the programmes had different goals. This argument was also used by those opposed to the unification of the four programmes. They feared that the programme-specific objectives would be jeopardized by their removal from their respective line ministries.

*Bolsa Familia* led to the standardisation of eligibility criteria, benefit values, information systems and executing agency. It also brought in a gradual increase in the coverage from 5.1 million families in December 2002 to 11.1 million beneficiary families in October 2006. The latter was the programme target as per the estimates of the number of poor families based on the 2001 household survey.

As of October 2009, the programme had 12.5 million beneficiary families and the aim is to achieve 12.9 million families by December 2010. This latter expansion was decided on as a response to the financial crisis. However, more than reflecting a temporary measure to cushion the effects of crisis, it reveals a shift in the concept of poverty used by the programme towards a vulnerability concept. Unlike most CCTs in the region that use some proxy means indicator to determine eligibility for the programme, *Bolsa Familia* uses self-reported income. The fact that the per capita income is much more volatile than any multidimensional index (proxy means) leads to transitions in and out of the eligibility zone. For this reason *Bolsa Familia* has the highest turnover of beneficiaries among the CCT programmes, which can put its long term objectives at risk and raises concern with regard to inclusion errors due to short-term fluctuations in a family's income. In order to avoid unnecessary and recurrent exclusion, the new target of 12.9 million families was based on the estimated stock of families that could fall into poverty in a two year period, and not on the stock of poor families in a given point of time<sup>22</sup>. This timeframe is also the minimum<sup>23</sup> amount of time that a family can stay in the programme, irrespective of what happens to its income in that timeframe.

Currently, families with per capita income lower than R\$ 70<sup>24</sup> (USD 39) per month or whose per capita income is lower than R\$ 140 (USD 78) with children under 17<sup>25</sup> are eligible<sup>26</sup>. The benefit, at the time of this report is composed of two parts: a) R\$ 68 (USD 38) for families with per capita income lower than R\$ 70 (USD 39) (extreme poor) regardless of the number of children, and b) for families with children under 15 years old and per capita income lower than R\$ 140 (USD 78), there is a benefit of R\$ 22 (USD 12) per child between 0 and 15 years, up to three children and R\$ 33 (USD 18.5) for teenagers between 16-17 years, up to a maximum of two teenagers. Thus, the maximum amount a family can get from *Bolsa Familia* is R\$ 200 (USD 112) (extreme poor with three children between 0-15 years and two teenagers between 16-17 years) and the minimum is R\$ 22 (USD 12) (poor family with just one child younger than 15).

*Bolsa Familia* conditionalities are mainly related to education and health: a minimum school attendance rate of 85 per cent for those beneficiary children between 6 and 15 years and 75 per cent for those aged between 16 and 17 years is required; updating of immunization protocol and

---

<sup>22</sup> The information of a family in the Single Registry also has to be updated every two years.

<sup>23</sup> There is no maximum limit for a family to stay in the programme after the initial two years, as long as they remain eligible and comply with conditionalities.

<sup>24</sup> For the extreme poor, *Bolsa Familia* is an unconditional programme, since it is not necessary to have children to receive the benefit. In this context the programme resembles a basic income. However, the relevant unit of intervention is the family, whereas in the basic citizenship income it is the individual.

<sup>25</sup> Before January 2008, the programme only covered children between 0 – 15 years. The age extension and the higher value of the transfers (R\$ 33) was aimed at avoiding school drop-out at this crucial age bracket.

<sup>26</sup> Exchange rate 1USD – 1.79 R\$

growth and weight monitoring for those below 7 years of age and prenatal care and postnatal care for women between 14 and 44 years of age is also required.

Monitoring of adherence to conditionalities happens at the school and health unit level. The municipality transmits this information to the correspondent line ministry that then passes the information on to the Ministry of Social Development (MDS) every two months. However, it was only in 2007<sup>27</sup>, that a central database consolidating information on education and health conditionality compliance was established. This allowed for the first time the monitoring of conditionalities at the Federal level and, therefore, the activation of the non-compliance mechanism (Bastagli, 2008).

The response to lack of compliance with conditionalities is another feature that distances *Bolsa Família* from a typical CCT. It incorporates a system of “gradual repercussion” (*repercussão gradativa*) that encompasses the following phases: 1) notification of the family; 2) benefit is blocked for 30 days; 3) benefit payment is withheld for 60 days; 4) benefit payment is withheld for other 60 days for the second time; 5) cancellation of the benefit<sup>28</sup>. This gradual repercussion according to MDS is due to the fact that the objective of the programme is not to punish families, but actually to help them to comply with the conditionalities. In fact, the design allows for the waiver of conditionalities in case it can be justified (e.g. illness of a child, threat of violence at school, etc.) and the social services at the municipal level are responsible for the case-management of non-compliance episodes.

The law and decrees that introduced and regulate *Bolsa Família* state its objectives both in terms of the parameters for the unification of pre-existing cash transfers (administrative objective) and of the beneficiary outcomes (Bastagli, 2008 and Jaccoud et al., 2009). With regard to beneficiaries the programme objectives are:

1. To promote access to the network of public services, especially health, education and social assistance;
2. To fight hunger and promote food and nutritional security (in line with hunger zero strategy);
3. To stimulate the sustained emancipation of families that live in poverty or extreme poverty;
4. To fight poverty;
5. To promote intersectorality, complementarity and synergies among policies at different government levels.

This latter point contrasts to other CCTs that are often quite centralised in their implementation. Despite having its objectives and *modus operandi* determined at the Federal level, states, and particularly municipalities, play an important role in the implementation of the programme. This management model called “shared management” (*gestão compartilhada*) is recognised as one of the key factors behind the rapid expansion of the programme and the consolidation of the Single Registry. The municipalities are responsible for registering families in the Single Registry - whose information is used to select the eligible families - and for following-up compliance with the

---

<sup>27</sup> From 2007 onwards, families started being dropped from the programme due to the noncompliance with education conditionality. As of October 2009, 88 per cent of the beneficiary students had their conditionality monitored and 97 per cent of them, complied with it. With regard to health conditionalities, which are monitored every six months, only 63 per cent of those who should be monitored were actually monitored and among them 100 per cent complied with the conditionality (MDS, 2009).

<sup>28</sup> For the benefit correspondent to teenagers between 16-17years, the process is shorter, encompassing notification; blockage; one spell 60 day suspension, and then cancelation. But the cancelation is only of the benefit of the teenager, it does not affect the rest of the family as the non-compliance among the 0-15 years old does.

conditionalities. To help the municipalities in the implementation of these activities, the federal government transfers some resources to them in a monthly basis. This financial incentive is based on the IGD (Decentralised Management Index). This index reflects the quality of the registries in the Single Registry and of the coverage of the conditionality monitoring. The higher the IGD, the higher the budget the municipality receives to for implementing the programme. While it is stated that the budget is to be used in the implementation of the programme, the municipalities are free to choose how to spend the money. For example, they can buy computers, improve the facilities where the *Bolsa Família* unit works or develop complementary programmes.

Municipalities are relatively free to make decisions about priority areas and how the registering will take place<sup>29</sup>. However, they do receive some guidelines and must adhere to quotas based on the poverty mapping elaborated by the national statistics office (IBGE). Despite not being strictly enforced, the quotas (with their confidence interval) give an idea on the performance of the municipality: whether it has been too slow in the incorporation of beneficiaries or whether it exceeds the target.

The Single Registry is a key component of the programme, but it aims to be much more than the registry of potential beneficiaries of *Bolsa Família*. Rather, it is conceived as a tool for identification and characterization of the socioeconomic situation of low income families<sup>30</sup>. It is also seen to fundamentally support the integration of different policies as well as to allow the federal government, states and municipalities to have a better knowledge of the socio-economic risks and vulnerabilities of the low income population. The analysis of the Single Registry data should allow them to design better policies and programmes for this population (Jaccoud et al., 2009).

The following Federal programmes are complementary to *Bolsa Família*: *Brazil Alfabetizado* - Adult Literacy, *Próximo Passo* – training programme in the construction sector and tourism/hotel sectors; PRONAF – microcredit for smallholder farmers; *Crediamigo* and *Agroamigo* – microfinance in the urban and rural areas, respectively; and support for former landless families. There is a clear attempt to improve the productive capacity of the beneficiary families however, the degree of commitment of these complementary programmes in adapting their content and methodology to the needs of beneficiary families are not yet clear. In particular, there is among certain groups, a well-rooted belief that the beneficiaries of *Bolsa Família* do not work, which is seldom the case. Their participation rate in the labour market is much the same as other low income people that do not receive the benefit. Time constraints are clearly one of the issues that should be taken into account when designing complementary programmes for *Bolsa Família* beneficiaries. In addition the complementary programmes intend to achieve high levels of women's participation, they have to take into account the lack of creches and education facilities for children below seven years, which is a major barrier for mothers to take-up training programmes and full-time work.

It is important to bear in mind that inclusion in the Single Registry does not imply entitlement to *Bolsa Família*. There is a quota by municipality and it is the Federal Bank (*Caixa Econômica Federal*) that runs the selection process, calculating the per capita income based on four questions: household income: earnings, pension, unemployment benefit and other incomes. The household per capita income is calculated as the sum of these incomes divided by the number of household members. Once the selection is completed, a magnetic card is sent, preferentially to the female head of the household or to the spouse of the male head. The benefit can be withdrawn at *Caixa Econômica Federal* ATM machines or through bank correspondents.

---

<sup>29</sup> They are encouraged, however, to proactively look for poor households in the poorest areas and to provide information about registry points and eligibility criteria using different forms of communication strategies (Bastagli, 2008).

<sup>30</sup> The criterion to be eligible to be registered in the Cadastro Único is to have a per capita family income below half of the minimum wage or a total family income of three minimum wages. These criteria lead to an eligibility line that is higher than the eligibility cut-off point of *Bolsa Família*. As of October 2009 there were 18 million families registered in the Single Registry roughly 36 per cent of the Brazilian families.

A recent change in the payment of the benefit has been tried on a pilot basis as a way to facilitate the financial inclusion of the beneficiaries. The original magnetic cards only allow beneficiaries to withdraw the benefit; it does not give access to a current account or other financial services of the Federal Bank. In 2008, a pilot was initiated that allowed beneficiaries to choose to receive the benefit in a simplified current account that would give them a free package of services including: four cash withdrawals per month; up to four print statements per month; use of other services of the *Caixa Econômica Federal* ATM machines; pay-in money other than the benefit in the current account; payment of debt automatically through the current account; and access to credit and insurance services. In addition, the beneficiaries will receive financial training to avoid any coercion from bank clerks in relation to fake claims or requirements to purchase any of the bank's other financial services. This change is an important step towards financial inclusion, particularly for women, since 93 per cent of the cardholders are women. The target is to include four million families in this scheme by the end of 2010<sup>31</sup>.

### 3.3 Impact of *Bolsa Família*

The fact that the programme did not start from scratch was the major challenge for the evaluation design. Several CCTs and other unconditional cash transfers were already being implemented. In any case, researchers have used quasi-experimental techniques to evaluate the programme using either the data from the large independent evaluation survey undertaken by CEDEPLAR in 2005 or data from the national household surveys and from administrative sources.

CEDEPLAR's evaluation of *Bolsa Família* found that the programme has not significantly affected the aggregate level of household consumption. However, it has affected expenditures on food, education and child clothing, and consequently the income shares spent on these items (MDS 2007). It also has had a clear positive impact on school attendance. The probability of absence in the month before the survey was 3.6 percent lower for children in the programme. Also, their probability of dropping out was 1.6 percent lower than that of children in non-beneficiary households (MDS 2007). However, children benefiting from *Bolsa Família* are almost four percent more likely than non-beneficiary children of failing to advance in school (Oliveira et al. 2007). Such adverse impacts could be attributed to the programme's effect of increasing the number of under-achieving students in school. Since such students have been out of school for a while (or have never attended), they are likely to have greater difficulty in catching up with those who have always been in school (Soares et al., 2010a)

The programme has had no impact on child immunisations or in stunting or wasting. *Bolsa Família* has created greater awareness about the need to access public-health services and obtain child immunisations. However, the absence of impact suggests supply-side constraints. The lack of health services available to beneficiaries has probably been a contributing factor. Nevertheless, this aspect was not controlled for in the evaluation<sup>32</sup>.

With regard to labour market participation, the evaluation found that the participation rate of beneficiary adults was, in fact, 2.6 percent higher than for comparable non-beneficiary ones (Oliveira et al. 2007). Interestingly, this impact was gendered since the participation rate of women was 4.3 percent higher than men. Other studies using the national household survey show some

---

<sup>31</sup> This simplified bank account will be offered to families in the Single Registry and not only to *Bolsa Família* beneficiary families.

<sup>32</sup> It is important to bear in mind that in Mexico and Colombia where evaluations show positives results with regards to malnutrition and health indicators, villages were selected to participate into the programme only when the supply conditions were in place. In addition, the benefit payment was tightly linked to the monitoring of conditionalities and food complements were integrated into the programme (Soares et al, 2010a).

different impacts. Upon studies of a number of municipalities with different coverage of beneficiaries, Foguel and Paes de Barros (2008) show that there has not been any impact on male or female participation rate or on hours worked. Tavares (2008) shows a negative impact on the hours worked by beneficiary mothers, which roughly amounts to two days less per month. Teixeira (2010) shows a negative impact on hours worked for both men and women and that the impact for women was larger (2.5 hours per week).

CEDEPLAR's evaluation also assessed the impacts on bargaining power within the household based on an indicator that synthesizes the information relative to who takes the decision about a series of good purchases and household activities. Households were classified between high female bargaining power and medium/lower bargaining power and statistics tests revealed that high female bargaining power were much more prevalent in beneficiary households than in non-beneficiary households, this result was particularly stronger in the North-eastern region, the poorest region in the country (MDS 2007).

Suarez and Libardoni (2008) summarise the findings of a qualitative survey with beneficiary women and local level programme managers. They found that beneficiary mothers see the programme as supporting them in meeting their responsibility to take care of their children. As with their "social status" in the community, a notable shift observed is that beneficiaries became 'consumers' and in some cases even 'reliable consumers', due to their new source of regular income. They now enjoy some credit for consumption in the local markets and shoppers know that they will have the cash to pay their debts. In the domestic sphere, they pointed out that women's authority has increased and they became more respected, particularly, in rural areas. The fact that they no longer depend on their husbands for some of the family's expenditures seems to have been a liberating factor. In urban areas, some women have stressed that the transfer also allows them to negotiate with their husbands and participate in the decision-making process within the household, something that would not happen before. This latter finding seems to corroborate the quantitative results reported by CEDEPLAR.

## 4 Colombia: *Juntos* and *Familias en Acción*

### 4.1 *Juntos* – Colombia’s social protection network for overcoming extreme poverty

The Colombian Social Protection Network for Overcoming Extreme Poverty, *JUNTOS*, was designed in 2006 following the guidelines of the document CONPES 102. The pilot programme began in 2006 and was scaled-up in 2007. It aims to achieve the MDGs and the targets set in the *Visión Colombia* for 2019 with regard to poverty reduction and the promotion of equity. Equality of opportunity to access a set of social services with a minimum level of quality is also stated as an objective in the National Development Plan for 2006-2010. In such a context, *Juntos* intends to promote the effective inclusion of the poorest families in accessing social services provided by the State and supporting them to overcome poverty through:

1. Integration and coordination of the supply of social services provided by the State at the local level in a manner that it corresponds to the needs of the poorest families;
2. To provide temporary family and communitarian support and preferential access to the resources needed to achieve minimum standards of living conditions;
3. To generate a set of co-responsibilities together with the beneficiary families so that they can be engaged in the process of overcoming poverty.

*Juntos* brings together line ministries and social programmes to create an integrated social protection network. The Ministry of Social Protection chairs the Intersectoral Commission and *Acción Social* – the presidential agency for social action and international cooperation - coordinates the operation of the strategy. Overall 15 national institutions are effectively part of the strategy: *Acción Social*, Ministry of Social Protection, Ministry of Agriculture and Rural Development, the National Learning Service (SENA), the Colombian Institute for Rural Development (INCODER), the National Institute for the Blind (INCI), the Colombian Institute Family Welfare (ICBF), the Colombian Institute of Educational Credit and Technical Studies Abroad (ICETEX), the Ministry of National Education, the Ministry of Interior and Justice, the Presidential Council for Gender Equality, the Foreign Trade Bank Colombia (BANCOLDEX) (through the Bank Investment Program Leads), the National Civil Status Registry Office and the Ministry of Environment, Housing and Territorial Development. It also counts on the participation of all governmental levels and of the private sector.

*JUNTOS* aims to integrate all Colombian social assistance programmes, supplying public services that reach 45 objectives organised across 9 dimensions<sup>33</sup>: identification, income and wages, education, health, nutrition, housing, family, access to banking and credit lines and access to the judicial system. It also coordinates and articulates private sector and NGOs initiatives. It has three components: family follow-up, identification of families’ basic needs (according to the 45 objectives) and institutional strengthening. Families remain in the programme, with individual follow-up (case management) for a maximum of five years.

*Familias en Acción* is the entry point to this social protection network and has strong links with other social programmes and public services in the areas. Among the other programmes that make up the network it is worth highlighting the flagship CCT programme *Familias en Acción* and *Gestión Habitat y Vivienda* (housing). Families participating in *JUNTOS* are also covered by the Colombian General System for Social Security (SGSS).

---

<sup>33</sup> This framework is similar to Chile Solidario’s 53 social minima grouped in seven dimensions. See next section on Chile.

As of 2009 JUNTOS covered 631,000 families who were living in extreme poverty, but it aims to reach 1.5 million families by the end of 2010. All families that were in *Familias en Acción* until December 31, 2007, classified as SISBEN 1<sup>34</sup>, and all displaced families registered in RUPD (Unified Registry of Displaced Populations), regardless of their SISBEN classification are eligible. However, with the advent of the economic crisis in 2008, the Government decided to increase the coverage of *Familias en Acción*, which led to the incorporation of 1.3 million new beneficiary families. This increase caused a mismatch between the coverage of *Juntos* and the coverage of *Familias en Acción*, as in theory *Juntos* should cover all *Familias en Acción* beneficiaries and also SISBEN 1 families without members younger than 18 years old, who are not eligible to the CCT programme, but live in extreme poverty<sup>35</sup>.

Through integrated programmes, such as *Familias en Acción*, with its 45 objectives, the programme can identify the needs of women and other vulnerable groups'. It intends to empower women as well as to protect them and children from domestic and sexual violence.

## 4.2 *Familias en Acción*: Design and implementation

Established in 2001 by the Presidential Agency for Social Action and International Cooperation of Colombia (*Acción Social*), *Familias en Acción* covered 2.9 million beneficiary families in 2009, approximately 20 per cent of the Colombian population. Between 2007 and 2009 the programme almost doubled its coverage as it expanded to larger urban areas and tried to cover all families classified as SISBEN 1 in the country (as a way to cushion the impact of the economic crisis).

*Familias en Acción* started its operations in 2001 as a component of the Network for Social Support (*Red de Apoyo Social – RAS*) that was created as an attempt to mitigate the effects of the recession. It was originally implemented in municipalities with fewer than 100,000 inhabitants with sufficient supply of schools, health centres and a bank branch. The transfers sought to protect the human capital of children of the poorest families (SISBEN 1) in these small rural communities, those most affected by this crisis. As of December 2005, the programme had reached 514,502 beneficiary families (Nuñez and Cuesta, 2006).<sup>36</sup>

The RAS had other two components that, in comparison to *Familias en Acción*, had a clear urban bias: 1) *Empleos en Acción* – a temporary public works initiative for unemployed people classified as SISBEN 1 or 2. The programme offered short-term<sup>37</sup> jobs in urban and social infrastructure projects in poor neighbourhoods, intensive in unskilled labour<sup>38</sup>; and 2) *Jóvenes en Acción* – a training and skill-development and job placement programme for youths between 18 and 25 years old living in urban areas with high unemployment rates<sup>39</sup> (Nuñez and Cuesta, 2006).

---

<sup>34</sup> SISBEN is a national database used to target different government subsidies. It compiles socioeconomic information of families with regard to housing and durable goods, access to services, demographic characteristics, occupation, human capital and social security, place of residence (urban or rural). It is a proxy means that measures quality of life based on a multidimensional index that varies from 0 to 100. The index has different weights for urban and isolated rural areas and is clustered into six groups for the urban areas and four groups for the rural areas. The first group is considered the most vulnerable (SISBEN I) and is the focus of *Familias en Acción* interventions (Villa, 2008).

<sup>35</sup> We are grateful to Fernando Sánchez – *Familias en Acción*'s coordinator for Institutional Strengthening - for clarifying the reasons for the rapid expansion of the programme and the mismatch between *Juntos* and *Familias en Acción* target population.

<sup>36</sup> This initial design of *Familias en Acción* does resemble the design of *Progresá* in Mexico: a strong focus in human capital of the rural poor, the use of multidimensional indicator to implement the targeting, and the requirement that the municipality had enough supply of services to start the programme. In the case of Colombia, that included the existence of a bank branch or facility.

<sup>37</sup> The maximum duration of the job was 5 months (Nuñez and Cuesta, 2006).

<sup>38</sup> As of 2004, 205,298 people had benefited from this programme (Nuñez and Cuesta, 2006).

<sup>39</sup> As of 2004, 41,369 youths had benefited from this programme.

*Familias en Acción* was considered very successful according to the baseline impact evaluation undertaken by an independent evaluation consortium. This finding led to the government expanding programme to other small municipalities (under 100,000 inhabitants) with adequate supply of education, health and banking services. In 2005, the coverage was extended to include displaced and indigenous populations irrespective of their SISBEN classification. From 2007 it was also extended to urban centres, which required a revision of the design and scope of the programme. From a small scale rural CCT it became a large CCT scheme, having a coverage rate comparable to the ones in Mexico and Brazil.

Since its inception, the main objectives of *Familias en Acción* has not changed. Its objective is to foster and strengthen the human capital of the children of the poorest families in order to break the intergenerational cycle of poverty. It aimed to protect households – and particularly children - from the worst impacts of an economic downturn. In the context of the crisis of the 1990s, the programme aimed to prevent households from reducing food intake (a nutrition and health dimension) and to prevent parents from taking their children out of school, in response to needing extra labour to provide income for the household. Thus, there is also a clear risk management strategy behind the rationale of the programme.

With regards to its specific objectives the programme aims to:

1. Complement the income of poor families with children under 18 years and to foster human capital accumulation through: increased food consumption, adoption of healthy eating habits, monitoring children's health and nutritional state; and keeping children in school up to the secondary education.
2. Work as one of the main axis of the JUNTOS strategy (described in the previous section).

The following are all eligible for *Familias en Acción*: 1) Families at the level 1 of SISBEN or; 2) families in the single registry of displaced families or; 3) families included in the census of the indigenous population and; 4) families residing in the selected municipalities and; 5) families with children under 18 years. However, only in municipalities with fewer than 100,000 inhabitants are all SISBEN 1 families invited to join the programme. In municipalities above this threshold there are quotas calculated on the basis of the proportion of the local population classified as SISBEN 1 and proportion of the population living in rural areas<sup>40</sup>. For municipalities above the population threshold and with less than 55% of rural population, a 'marginalisation index' is applied to select the neighbourhoods where the programme will be implemented (*Acción Social*, 2008).

The implementation of *Familias en Acción* in the selected municipalities<sup>41</sup> and its operational cycle resemble *Bolsa Familia* in terms of the involvement of the municipalities. Prior to implementation in the municipality, mayors and local representatives are informed about the programme in a series of meetings and activities that explain how it works. If there is interest from the local authorities, a formal agreement between *Acción Social* and the municipality is signed. This agreement defines the following responsibilities for the municipality: a) to provide a local focal point for the programme (*enlace*); b) to provide a venue for the programme unit; c) to provide staff to work with the local focal point; d) to guarantee that the focal point will be engaged full time with the programme activities. If the mayors of the municipalities want to increase the number of beneficiary families,

---

<sup>40</sup> If the proportion of the population classified as SISBEN 1 is above 90 per cent, all SISBEN 1 families are invited to register in the programme.

<sup>41</sup> Notice that only municipalities that have the necessary health, education and banking infrastructure are invited to take part in the programme.

they can co-finance the programme as long as they prove that they have the funds. However, they cannot change the targeting criteria of the programme or its operations (*Acción Social*, 2008).<sup>42</sup>

The conditionalities, also called co-responsibilities, are considered one of the most important elements of the programmes. Only the first payment is made without checking compliance with co-responsibilities; from the second onwards, payments are only made if it has been verified that the co-responsibility was fulfilled. The co-responsibilities encompass the following requirements: a) education – maximum of eight unjustified absences every two months (corresponding to 80 per cent attendance rate); b) health – health clinic visits according to the protocol of the Ministry of Social Protection. The protocol varies with the age of the children, from four to one visit per year; c) family health and education awareness: members of beneficiary families, but mostly mothers, should attend the programme meetings and training sessions organized at the municipal level.

The value of transfers varies between municipality and the age and grade of the children and the benefit is paid bi-monthly. The scaling-up of the programme to large urban areas is being used to test different combinations of subsidy values (nutritional for younger children and educational for older children). In the small and largely rural areas, the nutritional subsidy corresponds to a fixed amount of \$50,000 (USD 26<sup>43</sup>) per month, for families with children below 7 years (the number of children does not matter); and the education subsidy (which is per child) for primary education is \$15,000 (USD 8) and for secondary education is \$30,000 (USD 16,000). In larger cities, different combinations have been tried. There is one group (Calli, Medelin and Soacha) for which the nutritional component is the same as in the case of small rural areas, but the secondary education transfer varies with grade: 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> grades would get \$25,000 (USD 13); 9<sup>th</sup> and 10<sup>th</sup> - \$35,000 (USD 18) and 11<sup>th</sup> - \$40,000 (USD 21). For the other groups of municipalities, slightly larger values for the higher grades of secondary education have been tried. In addition, there is no transfer for primary education, but an extra fixed nutritional subsidy component (\$20,000 / USD 10) is added for children between 7 – 11 years to compensate for the loss of the primary education subsidy.

The monitoring of co-responsibilities also varies according to the size of the municipality. It encompasses: a) cross-checking databases - designed for large urban areas; b) certification cards, in which the mother is responsible for making sure her card is stamped at schools and health centres (medium cities); c) certification vouchers that are distributed to the mothers, designed for small rural and isolated areas with high cost of transport. With regards to non-compliance of the co-responsibilities, the following actions are taken: a) verbal or written admonishment; b) temporary suspension of the benefit. If after two payment cycles (four months) the non-compliance persists, then, c) the family is excluded from the programme. There is no time limit for families to stay in the programme as long as they fit into the eligibility criteria and comply with the programme's co-responsibility<sup>44</sup>.

Within the structure of the programme there is an important role: the *madres líderes* (mother leader). They are elected representatives from the group of beneficiary mothers whose responsibility is to represent them in any matter related to the programme, particularly on the issue of compliance of co-responsibilities. It is a voluntary and unpaid position and the only restriction is that she should be able to write and read, enjoy communitarian work, be a beneficiary and comply with her co-responsibilities. The *madres líderes* are elected during the first meeting of beneficiary

---

<sup>42</sup> *Bolsa familia* also allows co-funding, but more than expanding the number of beneficiaries, in most cases, it aims at supplementing the value of the benefit, particularly, in the large urban areas in which the transfer does not represent a significant amount of the family income given the higher cost-of-living.

<sup>43</sup> Exchange rate of USD 0.0052 to COP 1

<sup>44</sup> In its inception the programme had duration of three years, but given the positive evaluations, the programme became permanent and there is no maximum limit for the eligible families to stay in the programme. Villa (2008) argues that the use of a proxy means to define eligibility is one factor that explains why families do not graduate from the programme, since a proxy mean index changes slowly in comparison to any monetary poverty indicator.

mothers (*asambleas*). The plenary is also an important forum and a public space in which the women have the opportunity to discuss with the local authorities and programme managers about their needs and their views about the programme. They also take part in regional meetings in which they share their experiences with beneficiaries from other places.

The *madres líderes* receive training from the programme and have a key role in organising the care meetings (*encuentro de cuidados*) and the family meetings (*espacios familiares*). The former is a meeting in which they invite beneficiary mothers to discuss issues related to their own care and of their families with a focus on health, nutrition, education and on the improvement of their living conditions. It is also a space for socialization and mutual learning. The *espacios familiares* are large events with activities for all members of the family according to their age. It aims to strengthen the family and build stronger bond among beneficiary families.

### 4.3 Impacts of *Familias en Acción*

*Familias en Acción* had an impact evaluation with a baseline and two follow-up surveys. The main results of the evaluation are reported in *Econometría* (2006) and show positive impacts of the programme via a series of dimensions. Some of the results are summarised below and focus on impacts on the “empowerment of the beneficiary women”.

The Programme has increased the basic consumption of beneficiaries by 15 to 19 per cent. The bulk of this increase was concentrated in food and education-related items. Stunting among young children (0 – 2 years) was reduced by 10 per cent in rural areas. There has been an increase in school attendance for all levels and areas, but it was stronger for secondary education in rural areas, 12.1 per cent. There was an increase in progression and a decrease in drop-out rates. Girls are more likely than boys to attend school, at least 3.6 per cent, but it is important to note that this was already the trend before the programme. There was also a decrease of six per cent in child labour. In urban areas, the programme reduced the working hours of children between 14 and 17 years old. Interestingly, it has had an effect of increasing employment among women in urban areas and men in the rural areas, possibly, as an effect of the reduction in child labour.

To understand the potential impact of the programme, in terms of empowerment of the beneficiary women, *Econometría* (2006) assessed five aspects: a) participation in the decision-making process within households with regard to health and education of the children; b) autonomy in deciding how to invest her own resources and participation in the decision on how to use the household resources; c) knowledge of healthy habits; d) use of contraceptive methods; e) social life beyond the opportunities offered by the programme. However, the analysis does not show any change on the way decisions are taken in the household or even behavioural changes with respect to social participation and the adoption of healthy habits that could be attributable to the programme<sup>45</sup>.

---

<sup>45</sup> The results available only cover rural areas as its baseline was built before the expansion of the programme to larger municipalities.

## 5 Chile Solidario and Programa Puente

### 5.1 Chile Solidario

*Chile Solidario* is a social protection system with an objective to eradicate extreme poverty in Chile. It constitutes what Barrientos and Santibáñez (2009) define as an “integrated anti-poverty programme” in the sense that it tries to coordinate a series of interventions under the assumption that (extreme) poverty is a multidimensional problem that can be characterized by low income and lack of social, economic, human and psychosocial assets. To address all these dimensions, *Chile Solidario* combines its intervention under three main areas: psychosocial support (family support), monetary transfers and priority access to social programmes.

The programme was created in 2002<sup>46</sup> as an attempt to recreate the decline in poverty observed during the 1980's and most of 1990's that had come to a halt in the late 1990's. The idea is that there was a core residual poverty that was insensitive to growth and a population that did not have access to social services. Isolation and disconnect from public policies were key factors behind the persistence and reproduction of this residual poverty (Cohen and Villatoro, 2006). In sum, the programme relies on three basic premises: a) the existence of a set of families that are not able to benefit from the growth in the economy and do not have access to the social protection network; b) that there is enough supply of social services to develop the roles of protection and promotion of the extreme poor population; and c) the need to build a bridge (*Puente*) between these families and the supply of public services, so that they can be informed and motivated to access this network and acquire the necessary competencies to overcome poverty (Larrañaga et al, 2009b).

With regard to its institutional organisation, Mideplan (Ministry of Planning) is the main Ministry responsible for the programme. FOSIS (Fund for Solidarity and Social Investment) and Dipres (Budget Management Office) are part of the Social Cabinet. FOSIS and the municipalities' UIF (Family Intervention Units) are in charge of assigning the benefit. The *Chile Solidario* Executive Secretary manages the programme. To assure beneficiaries priority access to social programmes, Mideplan counts on the support of other ministries, institutions and organisations from health, education, employment, housing, and justice areas.

*Chile Solidario* has strong interactions and linkages with other social programmes and monetary subsidies. The programmes under Chile Solidario are: *Puente* (entrance door of the programme and family support phase), *Vínculos* (for the elderly), *Calle* (for the homeless) and *Caminos* (for children with one parent in jail); *Programa de Habitabilidad* (housing) and *Programa de Producción Familiar para el Autoconsumo* (food security).

Subsidies/cash transfers that are part of the *Chile Solidario* are: *Bono de Protección para familias del Chile Solidario* (cash transfer for the two first years in the programme) and, *Bono de Egreso para familias del Chile Solidario* (cash transfer for those leaving the programme, who have completed two years). Subsidies are paid to female-heads of households (or spouse of the head). In addition, beneficiaries are eligible to the following transfers: *Subsidio a la Cédula de Identidad* (ID subsidy), *Subsidio al Pago del Consumo de Agua Potable* (water subsidy) y *Servicio de Alcantarillado de Aguas Servidas-SAP* (sewage subsidy), *Subsidio Único Familiar* (SUF), which is a family allowance for families with children below 18, and PASIS (non contributory pension and disability grant),

*Puente* Programme is the first step in *Chile Solidario*. It lasts for two years and consists of psychosocial support to beneficiary families<sup>47</sup>. A social worker visits the family 21 times over that

---

<sup>46</sup> An increase of the IVA (value added tax) has helped to finance the programme.

<sup>47</sup> Overall *Chile Solidario* lasts for five years. The first two years correspond to the *Puente* programme and consist of the phase of intensive care with periodic visits of the social worker.

period. During the first visits, he/she works with the family and jointly they draft a work plan to achieve a set of 53 minimum conditions<sup>48</sup> related to quality of life. The conditions are grouped into seven dimensions: health, education, housing conditions, employment, income, family dynamics, and identification. This case-management approach is implemented by the municipalities, but it is technically supported and monitored by FOSIS. The social programmes under the *Chile Solidario* strategy can also be grouped using the following dimensions:

1. Health: Access to a family health insurance plan and treatment for depression. They also have preferential access to dentists, elderly person care, mental health programmes and prevention and rehabilitation in case of drug abuse.
2. Education: preferential access to nursery and child early education facilities as well as to programmes that help children progress at school.
3. Housing: preferential access to *Chile Solidario* housing programme and property titling.
4. Employment and Income: preferential access to training and skill-building, job placement programmes, income generation programmes and rural development. There are some special income-generating programmes for women in rural areas.
5. Family dynamics: preferential access to social development programmes, programmes to curb domestic violence; strengthening of the bond between parents and children in situation of risk.
6. Identification: partial exemption of the costs of the ID card and total exemption of the costs of other two important documents for the adult population, namely, the certification for the military service and certification for previous criminal offences

*Chile Solidario* is not a typical CCT programme; in fact some authors (such as Larrañaga 2009a, 2009 b) reject this classification. Even managers of the programme that participate in the network of Latin American CCTs have pointed out that the Chilean scheme is very different from other CCT programmes. This can be partially explained by the fact that Chilean social protection policies have for a long time relied on cash transfers/subsidies. However, unlike the case of *Bolsa Familia* reform that unified the cash transfers, *Chile Solidario* reform did not intend to unify them, it aimed at facilitating the access to these subsidies (cash transfers) for those who had been for one reason or another excluded. In fact, the cash transfer attached to *Chile Solidario* (*Bono Solidario*) is quite low and its objective is to compensate beneficiaries for the time and activities that they have to undertake under the Puente programme.

The selection of beneficiary families is undertaken by reviewing the information collected in the *Ficha de Protección Social* (FPS)<sup>49</sup>, which has replaced the *Fichas de Caracterización Social* (Ficha CAS) in 2006. Both forms (fichas) collect socioeconomic information of the potential beneficiary families of social programmes and are used to calculate a proxy means (multidimensional) index that ranks families according to their level of vulnerability. Beneficiaries of *Chile Solidario* are those below a certain cut-off point that approximates the level of extreme poverty. Whereas Ficha CAS had different cut-off points for different regions (comunas), according

---

<sup>48</sup> It is important to bear in mind that not always the 53 conditions apply to one family. They may have already met some of them and others may not be applicable to their situation.

<sup>49</sup> The introduction of FPS also coincides with the possibility of updating its information in a web-based system whenever any socio-economic conditions of the beneficiary family change. (Larrañaga, 2009a).

to the estimated extreme poverty headcount, FPS has just one cut-off point for the entire country. As of 2009, the programme had benefited 304,598 households, among them, 146,247 (48 per cent) were female headed households. This figure roughly corresponds to six per cent of the population of Chile, a much lower proportion than *Bolsa Familia* and even *Familias en Acción*.

## 5.2 Impacts of *Chile Solidario*

There are not many evaluations of *Chile Solidario* and most of them use non-experimental methods. This section summarises the results of two sets of quantitative evaluations based on administrative data and/or on the national household survey (CASEN) and one summary of qualitative evaluations with beneficiaries.

Galasso et al. (2009) use a panel of CASEN (2003, 2004, 2006 and 2007) to identify the impact of *Chile Solidario* from several dimensions. This study updates the results of first impact evaluations using the earlier waves of the same panel. Unlike the other CCT programmes discussed in this paper, it does not show robust results in school attendance with the exception of the year of 2004. For that year there was a 10 percent increase in school attendance for children aged 3-4 years. However, with regard to employment, they find an increase in the share of employed adults and in the number of households with at least one adult employed. This increase in the labour supply of the adults is largely explained by the behaviour of the spouses. This effect is stronger in biparental households, in rural areas and for heads of households with low levels of education. Monetary poverty has also fallen in rural areas as a result of the programme. The programme also shows an impact on the attitude of the beneficiaries, especially in their optimism in relation to the future. In line with the programme objectives *Chile Solidario* beneficiaries were more likely to access cash/subsidies (like SUF, PASIS and SAP): this positive impact was stronger in younger families (head between 18-35 years) with an impact of 20 percent, for households with a female head, biparental households and households whose head has a low level of education and in rural areas.

Larranaga et al. (2009a) use an administrative data base (Ficha Cas dataset) to assess the impact of the programme on the first cohort of beneficiaries. Using propensity score matching and taking advantage of the fact that the late-entrant cohort of beneficiaries could act as a comparison group for the first cohort and also of the variability in the eligibility cut-off point among comunas (before its unification under the new Ficha FPS), they were able to identify the impact of the programme. As they used administrative data, they could only evaluate a limited number of outcomes: autonomous income, number of employed adults per household, and a housing index. They find positive impacts on employment and housing quality index, but negative impact on earned income<sup>50</sup>. The positive impacts on employment and housing are larger for younger households (head of households between 25-34 or 35-44 years). The results also suggest that the positive results are concentrated in the short-run and tend to decline in the longer run. Therefore, it seems that some of the positive impacts are only sustainable during the family support phase of Puente programme and are harder to be sustained afterwards<sup>51</sup>.

As with the impact of *Chile Solidario* on gender aspects, Larragaña et al. (2009b) review some of the results of qualitative evaluations of the programme. They point out three potential “woman empowerment” shifts that could be attributed to the family support (through the social workers, who in general are also women). The first one is the confidence to perceive herself as an individual and not only as a wife and/or a mother. The second one is the possibility to go to public spaces and not spend the whole day in the domestic sphere. The third one is her self-image as a protagonist that can change the circumstances of her life. However, the fact that they feel more confident and empowered does not mean that their husbands are now sharing with her some of the domestic

---

<sup>50</sup> Earned income is used in this context as the household income net of the benefit

<sup>51</sup> The authors are cautious to generalize these results to all cohorts, since they are only based on the analysis of the first cohort of beneficiaries.

chores. Actually, whereas 60 per cent of the surveyed beneficiaries said that they felt more empowered, only 15 per cent said that their partners helped them with domestic chores. The research suggests that the 'male' is the missing part of the programme in regard to its gender dimension. Major changes will not be achieved if the family support only helps the women. Programme design features have to be developed to work with the man, so that changes within the household can be sustainable.

## 6 Conclusion

CCT programmes and integrated social protection systems have expanded throughout Latin America in the past decade. Social programmes have been created and expanded and some of them embedded in more holistic strategies, particularly illustrated by the three countries analysed in this paper. The use of national registries; the shared responsibilities with local administration; the recognition of social assistance as a public policy based on rights rather than on the sporadic charity from private agents or of *clientelistic* nature; the synergies between supply (of services) and demand side incentives (cash transfers); the recognition that poverty is multidimensional; and the transfer of the benefit preferentially to women, especially in environments in which they rarely had access to cash besides the petty money given by their husband, represent a great development when compared to the past.

It represents a break from the truncated welfare state, as the programmes expand and offer some sort of protection to groups of the population that have never been covered by previous policies. With regards specific vulnerabilities experienced by women it has also provided preventive and protective tool. In some cases, it has even had a promotive dimension in terms of engaging women in the labour market or granting them preferential access to microcredit programmes. This has happened, particularly, when they are part of a broader strategy like *Chile Solidario* or when some effort is made to integrate the cash transfer programme with other complementary programmes like in *Bolsa Familia* and *Familias en Acción*. However, more research is necessary to understand which types of complementary programmes can potentially lead to better results particularly in fostering women's economic autonomy. From the design of the programmes it is possible to point out that the programmes have not always addressed time poverty issues, which are critical to women's inclusion in the labour market (as well as for their quality of life), nor the quality of participation, particularly in the case of training and skill-acquisition programmes or rural extension, which have been recognised as important needs of the beneficiaries.

As usual in public policies, CCTs are not gender neutral, even if they do not consider gender relations in their design. The evaluations of *Bolsa Familia*, *Familias en Acción* and *Chile Solidario* have revealed some potential for women's empowerment through the increase in their bargaining power within the household and an improvement in their social status in their communities, as a result of a positive impact in their self-esteem, self-confidence and self-perception.

However, these programmes are not primarily meant to address women needs. Thus in some contexts they reveal a trade-off between these needs and the wellbeing of children - as perceived by the CCT programme rationale, which is actually a main objective. This may happen for instance when mothers who already suffer time poverty are required to attend talks and to go to schools and health centres to certify that their children have complied with conditionalities. In implementation of some programmes, the monitoring of conditionalities does not require much time and effort from the mother's side, but in others they are expected to spend extra time having forms stamped in order to prove that their children are complying with conditionalities. Small changes in design and better use of information technology and innovative service provision can lessen the time burden imposed on them by the programme.

In addition, most programmes' demands towards enhancing child well-being are not presented as family's duties or obligations, but rather as mother's responsibility. Such messages can indeed reinforce traditional gender roles. Programmes should revise language and create the opportunity to trigger some discussion within the household with a view to questioning traditional gender roles of men and women with regard to their responsibility towards their children's health and education. The language used by the programme should also suggest a more balanced division of responsibilities between mothers and fathers and also among other members of the household.

Another limitation in our knowledge about gendered impacts of CCT programmes is due to the fact that the evaluations to date have not untangled which components were more important for them. This may be partially a result of the fact that evaluations have focused much more on narrow indicators, without paying much attention to the mechanisms that lead to a specific result, such as the empowerment of women. Such information could help in the design of changes in the programme or its integration with other programmes, that could minimise the negative impacts pointed out by the feminist literature while boosting some of the positive impacts in terms of addressing gendered vulnerabilities.

In addition, it is important to recognise, that at least for the three programmes analysed here, there is room for positive changes. As programmes that are meant to be more integrated with other programmes and policies, they could benefit from the addition of new components or the rethinking of some design features. In particular family support schemes could assume a stronger gender perspective. In this regard, the inclusion of men in the activities of the programmes is something that should be considered as has been suggested in one of the evaluations of *Chile Solidario*.

To date monitoring and evaluation procedures have focused on traditional programme's expected impact but in order to boost some of the gender dimensions of the programme and curb some unintended effects, new evaluations should also aim to use improved gender-sensitive indicators, such as assessing and analysing the extent to which gendered economic and social risks are addressed, including time poverty and changes in women's empowerment and autonomy. Both qualitative and quantitative evaluations could help the programme to monitor the impact on traditional outcomes, family dynamics and women's empowerment<sup>52</sup>.

---

<sup>52</sup> Another important shortcoming that should be overcome is the tendency to evaluate the impact of specific programmes isolated from the overall social protection strategies. Very little is known about the added-value of the integration of different programme (or strategy) components. Even the evaluation of *Chile Solidario* – which is an integrated programme since its inception – did not bring much evidence with regards to the importance of the individual components and their combined impact.

## 7 References

- Acción Social (2006) "Manual Operativo Programa Familias en Acción"
- Amarante, V., Arim, R., De Melo, G. and Vigoritto, A. (2009) "Family Allowances and Child School Attendance – An Ex-ante Evaluation of Alternative Schemes in Uruguay". Working Paper Instituto de Economía, Facultad de Ciencias Económicas, Universidad de la República.
- Barrientos, A. and Santibáñez, C. (2009) "New Forms of Social Assistance and the Evolution of Social Protection in Latin America" *Journal of Latin American Studies*, 41, pp. 1-26.
- Bastagli, F. A. (2008) "The Design, Implementation and Impact of Conditional Cash Transfer Targeted on the Poor: An Evaluation of Brazil's Bolsa Familia". PhD Thesis. London School of Economics and Political Science. London.
- Bastagli, F. A. (2009) "From Social Safety Net to Social Policy? – The Role of Conditional Cash Transfers in Welfare State Development in Latin America. Working Paper N. 60. IPC-IG. Brasília-DF.
- ECLAC (2007) "Teenage Motherhood in Latin America and the Caribbean: Trends, problems and challenges". In *Challenges Newsletter on progress towards the Millennium Development Goals from a child's rights perspective*. Number 4. January. [http://www.cepal.org/dds/noticias/desafios/0/27920/desafios\\_4\\_eng\\_Final.pdf](http://www.cepal.org/dds/noticias/desafios/0/27920/desafios_4_eng_Final.pdf)
- Cohen, E. And Violator, P. (2006) "Chile: Puente-Chile Solitaire" In Cohen, E. and Franco, R. (org.) "Transference con Corresponsabilidad: Unna Mirada Lationamericana" . FLACSO. México-DF.
- Costa, Joana; Silva, Elydia; Vaz, Fabio. (2009) "The Role of Gender Inequalities in Explaining Income Growth, Poverty and Inequality: Evidence from Latin American Countries". Working Paper N. 52. International Policy Centre for Inclusive Growth. Brasília-DF
- Devereux, S. And Sabates-Wheeler, R. (2004) "Transformative Social Protection" IDS Working Paper 232 Brighton, Sussex.
- ECONOMETRÍA (2006) "Informe Final de la Evaluación de Impacto de Familias en Acción". Bogotá.
- Fizsbein, A. (2005) "Beyond Truncated Welfare States: Quo Vadis Latin America?" Mimeo. World Bank. Washington, D.C.
- Fizsbein, A., Schady, N., Ferreira, F. H. G., Grosh, M., Kelleher, N., Olinto, P., Skoufias, E., (2009) *Conditional Cash Transfers: Reducing Present and Future Poverty*. World Bank Policy Research Report. The World Bank. Washington, D.C.
- Gallaso, E., Carneiro, P., Ginja, R. (2009) "El Impacto de Proveer Apoyo Psico-Social a Familias en Extrema Pobreza y Aumentar su Acceso a Servicios Sociales: Evaluando Chile Solidario". Power point presentation. Santiago, Chile.
- Gertler, P.J., Martinez, S., Rubio-Codina, M. (2006) "Investing cash transfer to raise long term living standards" Working Paper Series 3994. Policy Research. The World Bank.
- Handa, S.; Peterman, A.; Davis, Benjamin; Stampini, M. (2009) "Opening up Pandora's Box: The Effect of Gender Targeting and Conditionality on Household Spending Behavior in Mexico's Progresa Program" *World Development*, Vol. 37, pp. 1129-1142.

Holmes, R. and Jones, Nicola (2009) "Putting the social back into social protection". ODI Background Note.

Jaccoud, L.; Hadjab, P. D. E and Chaibub, J. R. (2009) "Assistência Social e Segurança Alimentar: Entre novas Trajetórias, Velhas Agendas e Recentes Desafios (1988-2008)" In Políticas Sociais: Acompanhamento e Análise. IPEA. N. 17 Vol. 1 pp. 175-250.

Jenson, J. (2009) "Lost in Translation: The Social Investment Perspective and Gender Equality" pp. 446-483.

Lamadrid-Figueroa, H., Ángeles, G., Mroz, T., Urquieta-Salomón, J. Hernández-Prado, B., Cruz-Valdez, A., Téllez-Rojo, M. M. (2010) "Heterogeneous Impact of Social Programme Opportunities on Use of Contraceptive Methods by Young Adult Women Living in Rural Areas". Journal of Development Effectiveness. Vol. 2 N. 1.

Larrañaga, O., Contreras, D., and Tagle, J. R. (2009a) "Evaluación de Impacto de Chile Solidario para la Primera Cohorte de Participantes. Mimeo. UNDP. Chile.

Larrañaga, O., Huepe, R. F. M. and Marinho, M. L. (2009b) "Chile Solidario y Género, Mimeo" UNDP, Chile.

Lavinas, L. (2008) "Inclusão e Progressividade: Os Desafios da Seguridade Social Brasileira. In Tonneli Vaz, F., Musse, J. And Santos, R. F. (org.). 20 anos de Constituição Cidadã: Avaliação e Desafios da Seguridade Social. ANFIP, pp. 89-96. Brasília.

Martinez, S. (2004) "Pensions, Poverty and Household Investments" in Bolívia. [http://emlab.berkeley.edu/users/webfac/bardhan/e271\\_f04/martinez.pdf](http://emlab.berkeley.edu/users/webfac/bardhan/e271_f04/martinez.pdf)

MDS (2007) "Sumário Executivo: Avaliação de Impacto do Programa Bolsa Família." SAGI/MDS, Brasília.

Molyneux, M. (2009) "Conditional Cash Transfers: A 'Pathway to Women's Empowerment'?" Mimeo. London.

Moore, Charity (2009) "Nicaragua's Red de Protección Social: An exemplary but short-lived conditional cash transfer programme", Country Study N. 17, IPC-IG, Brasilia

Nuñez, J. M. and Cuesta, L. (2006) "Colombia: Familias en Acción" In Cohen, E. and Franco, R. (org.) "Transferencia con Corresponsabilidad: Una Mirada Lationamericana". FLACSO. México-DF.

Oliveira, A. M. H. et alii (2007) "The First Results of the Baseline Impact Evaluation of Bolsa Família". In J. Vaitsman and R. Paes-Souza (eds.), Evaluation of MDS' Programs and Policies – Results, v. 2, SAGI/MDS, Brasília, pp. 19-66.

Paes de Barros, R. and Foguel, M. N. (2008) "The Effects of Conditional Cash Transfer Programs on Adult Labor Supply: an Empirical Analysis Using a Time-Series-Cross-Section Sample of Brazilian Municipalities." Anais do XXXVI Encontro nacional de Economia, ANPEC, Salvador.

Schady, N. and Rosero, J. (2007) "Are Cash Transfers Made to Women Spent Like other Sources of Income?" Policy Research Working Paper 4382. The World Bank. Washington, D.C.

Soares, F. V., Ribas, R. P., Osorio, R. G. (2010a) "Evaluation the Impact of Brazil's Bolsa Família: Cash Transfer Programmes in a Comparative Perspective" Latin American Research Review, Vol. 45, N. 2. (forthcoming). Soares, F. V., Ribas, R. P., Hirata, G. I. (2010b) "The Impact

Evaluation of a Rural CCT Programme on Outcomes Beyond Health and Education” Journal of Development Effectiveness (forthcoming).

Soares, S. and Sátyro, N. (2009) “O Programa Bolsa Família: Desenho Institucional, Impactos e Possibilidades Futuras”. Texto para Discussão 1424. IPEA. Brasília-DF.

Suarez, M. and Libardoni, M. (2008) “The Impact of the Bolsa Família Program: Changes and Continuities in the Social Status of Women” In Vaitsman, J. and Paes-Sousa, R. Evaluation of MDS policies and Programs – Results. Vol.2 Ministry of Social Development and Fight Against Hunger. Brasília – DF.

Tavares, P. A. (2008). “Efeito do Programa Bolsa Família sobre o Trabalho das Mães”. Anais do XVI Encontro Nacional de Estudos Populacionais, ABEP, Caxambú- MG.

Teixeira, C. (2010) “Impact Analysis of the Bolsa Família Program Effect on Men and Women’s Work Supply”. International Policy Centre for Inclusive Growth Working Paper. No. 61. Brasilia-DF.

Ventura-Dias, V. (2009) “Market Forces, State Action and Social Institutions in the Dynamics of Gender (In)Equality in Latin America”, Research for Public Policy, Inclusive Development, ID-03-2009, RBLAC-UNDP, New York

Villa, J. M. (2008) “Qué Familias están en condiciones de salir del Programa Familias en Acción”. Notas de Evaluación 4. IPC-IG. UNDP. Brasília, DF.