

Cash Transfers and Gendered Risks and Vulnerabilities: **Lessons from Latin America**

By Rebecca Holmes, Nicola Jones, Rosana Vargas and Fábio Veras Soares

I. Introduction

Poverty in Latin America is highly influenced by gendered vulnerabilities. While significant progress has been made towards gender equality in the region, including parity in education and increased levels of economic and political participation, more women than men live in poverty, gendered wage disparities persist, and women face higher burdens of domestic and caring responsibilities, as well as high levels of teenage pregnancy and domestic violence.

Social protection interventions have burgeoned across Latin America since the late 1990s, partly because of widespread dissatisfaction with the inefficiency and clientelism that plagued the older generation of social protection programmes in the region. Targeted conditional cash transfers (CCTs) have been a popular social protection response to address inequality and break the intergenerational transmission of extreme poverty. The experience of CCTs has been well documented and analysed over the last two decades, but the extent to which they address the gendered dimensions of poverty and vulnerability remains an area of debate.

Proponents of CCTs argue that the regular transfer of cash to women (in their capacity as caregivers) brings about gains in women's economic empowerment and their decision making power in the household and beyond. Other analysts caution that targeting women reinforces their traditional roles as carers, and that cash alone is not enough to ensure women's empowerment (Molyneux, 2007). This Policy Research Brief is part of a multi-country study funded by Britain's Department for International Development and carried out by the Overseas Development Institute (United Kingdom) and the International Policy Centre for Inclusive Growth (Brazil). It examines the extent to which gendered economic and social risks are addressed in CCTs in Brazil, Chile, Colombia and Peru.

II. Gendered Risks and Vulnerabilities

Many countries in Latin America have gone through major economic, political and social change in the past two decades. In many cases, there has been improved macroeconomic performance and an overall reduction in poverty, the consolidation of democracy and significant advances in gender equality. At the same time, however, extreme poverty and inequality persist, especially in comparison to countries with similar levels of development or per capita GDP. These patterns of poverty and vulnerability are influenced by sociocultural norms, with pervasive gender inequality and social discrimination reinforcing poverty and vulnerability among women and among ethnic minority and indigenous population groups.

Data from Brazil, Chile and Colombia show that disproportionately more women than men live in poverty. In Brazil and Colombia, respectively, 105.2 and 108.6 women live in poverty for every 100 men who do so. In Chile, the national rates of poverty are among the lowest in the region, but the gap between men and women in poverty is one of the highest at 123.9 (ECLAC, online). While job opportunities for women in Latin America have improved over the past two decades, gender inequalities in the labour market remain a barrier to women's economic independence. Not only is women's labour force participation lower than that of men's, but women continue to be concentrated in low-skill casual jobs and receive lower wages than men. In Brazil, for example, women are still paid less than men, even if they have the same qualifications and work in similar occupations, and despite the fact that wage discrimination is illegal. Women also spend a disproportionate amount of their time in comparison to men on unpaid care and domestic work, which affects their opportunities in the labour market (Manuela Ramos, 2008).

Recent years have seen a growing number of households headed by women, most of them poorer than male-headed households, particularly in rural areas. In rural Colombia, for example, poor female-headed households earn 40 per cent of the total income of poor male-headed households. The differential is not as extreme in Chile (58 per cent) and is more balanced in Brazil (90 per cent). But limited economic opportunities and childcare responsibilities are specific problems for female-headed households, as a life history respondent in Peru explains: "As a single mother, I have to work to support my daughter. Sometimes there is no work or the pay is little ... I have to leave my daughter with my mother, and my brothers argue with me because of this ... To be alone is difficult because a single woman cannot sow large extensions [sow seeds in large fields], she can only shepherd and sow in small extensions, so food rapidly finishes" (Lidia, 25, single mother).

Such social risks are key determinants of poverty and are intertwined with economic risks and vulnerabilities. Many countries in Latin America have made progress in gender equality indicators, such as gender parity in primary and secondary education, but important inequalities persist.

In Peru, only 39 per cent of girls in rural areas finish secondary school, compared to 51.3 per cent of boys (MINEDU, 2007), because of factors such as work and domestic responsibilities, insecurity of travel, teenage pregnancy and early marriage. Indeed, a key concern across Latin America is the high rate of teenage pregnancy among adolescent girls from poor households, a rate which is second only to that in Africa. Violence against girls and women is also high in the region. In Peru, for instance, the mobility of women, or the perceived failure of some women to comply with their traditional productive and reproductive roles, tend to exacerbate violence.

In many poor communities there are limited formal mechanisms to mitigate risks, and traditional systems of reciprocity and social solidarity are an important source of support for rural households. Some analysts warn that these mechanisms, although still in place in rural communities, are losing efficacy as a result of a more individualistic approach and limited communal cohesion, as well as the competing demands posed by the need to be involved in paid work.

III. Programme Design through a Gender Lens

CCTs have become a popular response to poverty reduction in Latin America over the past decade. They share several characteristics in different countries and contexts (Box 1), but they differ in terms of implementation and their links to broader social objectives and policies. A key feature is their aim, through programme conditionalities or “co-responsibilities” to build a sense of citizenship among social groups that have limited familiarity with their rights to services and how to exercise those rights to benefit themselves and their families. The conditional aspect of the programmes, moreover, is often critical to ensuring political support for social transfers.

Despite evidence of the links between gender inequality and poverty in Latin America, the extent to which CCTs have incorporated gender into programme design has been variable. The most explicit gender-sensitive design feature of most CCTs is targeting the cash transfer to the caregiver—normally the mother. In Brazil’s *Bolsa Familia*, for instance, 94 per cent of the recipients are women. This is intended to compensate mothers for their traditional domestic and carework role, as well as to ensure that programme co-responsibilities are met, and is in recognition of the fact that they are most likely to make certain that increased household

Box 1 Design of Conditional Cash Transfers in Latin America

CCTs tend to have four common features: (i) the adoption of a targeting mechanism; (ii) a cash benefit; (iii) compliance with requirements that are usually linked to basic service usage (variously termed “conditionalities” or “co-responsibilities”); and (iv) a double objective of alleviating poverty in the short term and preventing the intergenerational transmission of poverty in the long term through investments in human capital (education, health and nutrition) and, in some cases, social capital.

CCTs do differ, however, in the way they are implemented, in the importance attached to each of their objectives, and in how they link to broader social protection and social policy.

Brazil’s *Bolsa Familia*, part of the government’s Zero Hunger welfare programme, was created in October 2003, consolidating existing programmes for education, health and energy. By 2009 the programme was reaching 12.5 million beneficiary families. *Bolsa Familia* targets households on the basis of self-reported income, transferring a maximum of US\$112 per month to families conditional on children’s schooling and family members’ use of healthcare services.

Colombia’s *Juntos* programme, which started in 2006, brings together line ministries and social programmes in an integrated social protection network. *Familias en Acción*, created in 2001, is the entry point to the *Juntos* network, transferring income to 2.9 million families in 2009, including households displaced by political violence. Co-responsibilities focus on education and health.

The Chilean *Solidario* system takes an integrated approach to poverty eradication through three main interventions: psychosocial support (family support), monetary transfers and priority access to social programmes. Created in 2002, the programme was benefiting over 300,000 households in 2009.

The *Juntos* programme in Peru, launched in April 2005, reached almost 432,000 households in 14 regions by August 2009, with an emphasis on regions most affected by the political violence of the 1980s and 1990s. *Juntos* gives a cash subsidy (approximately US\$33 per month) to the poorest households to promote access to basic health, education and nutrition services. Targeted at households with children under 14 or pregnant women, the transfer goes to mothers on the assumption that they are more accountable for their children’s wellbeing. Families must fulfil various commitments, including obtaining civic identification documents for women and children, children’s attendance at primary school, and using various health-related services.

income benefits children. Transferring cash to women is also seen as a way to promote their control over household resources and increase their bargaining power at home.

Another important feature comprises measures to address explicitly the inequalities in education for girls and in health for women. These measures have included the provision of higher transfers for school-age girls who are more likely to drop out of school, particularly in secondary education, and the provision of free healthcare for pregnant adolescents and women.

Some authors, however, have disputed the CCTs’ “gendered empowerment effect”, arguing that the main limitation of CCTs is that they reinforce a utilitarian approach to

women's traditional roles within the household. Women are "empowered" only as guardians of children and as channels for child-centred policies, rather than being the focus of interventions to ensure wellbeing across the lifecycle (Jenson, 2009; Molyneux, 2007). In addition, there is a general assumption that economic independence will have positive spillover effects on other dimensions of social exclusion, rather than thinking through and addressing causal pathways more systematically.

Hence the extent to which gender has been incorporated, beyond the actual targeting of CCTs, is less clear and varies more by country. Some CCTs have institutional links to complementary programmes and services. This has been facilitated by the unification of beneficiaries under a single registry, which supports the integration of their households into programmes such as food security, housing, and banking, credit and judicial services.

In Peru, for example, where beneficiaries must attend weekly training sessions, women highlight the fact that they have learned to sign their names, and can now recognise their civic identification number and name in the register of the *Juntos* programme, matters that are highly valued and diminish their sense of exclusion.

There are also efforts to link to complementary NGO programmes and services to address gender equality and empowerment—for instance, through initiatives that offer legal advice and develop consciousness-raising activities on women's rights and violence against women.

Several programmes also include a focus on the promotion of women in programme decision making and governance structures. In Colombia, for example, women are elected as community facilitators (*madres líderes* or *presidentas*), serving as links between the programme and beneficiaries. While this can also increase their time poverty, it does give them the chance to participate and to strengthen their leadership at the community level.

IV. Programme Impacts through a Gender Lens

Most impact evaluations of CCT programmes have centred on traditional outcomes: food consumption, school attendance and nutrition indicators. They have placed less emphasis on the gendered effects of the programme, including the opportunity costs involved in programme participation and the impacts on family dynamics, time use and women's empowerment.

There is, however, some gender-specific evaluation evidence, including data on the impacts of programme participation on women's labour supply. Evaluations suggest that the impact of CCTs on women's labour-market participation is mixed. While one evaluation has indicated that beneficiary women in *Bolsa Familia* were more likely to participate in the labour market than others (MDS, 2007), other evidence shows that they also tend to reduce their working hours (Teixeira, 2010; Tavares, 2008). *Familias en Acción* in Colombia was found to have increased the number of women working in urban areas, but did not affect the number of hours those employed already worked (IFS et al., 2006). *Chile Solidario* also seems to have a positive

impact on adult labour overall: women participate more in the market, especially those in male-headed households and those living in rural areas (Galasso et al., 2009).

Other evaluations have looked at women's bargaining power on the basis of an index regarding who takes decisions about a series of household purchases, household activities and reproductive health. The evaluation of *Bolsa Familia* showed that female beneficiaries were more likely to have a higher bargaining-power index than those outside the programme (MDS, 2007). An evaluation of Colombia's *Familias en Acción*, however, found no such impact (IFS et al., 2006).

Qualitative evidence for Brazil, Chile and Peru points to a significant impact on the empowerment of beneficiary women. In Brazil this stems from their new power as "consumers", whereby they no longer depend on their husbands for family expenditures and feel increasingly confident to negotiate with their husbands on decisions affecting the household (Suarez and Libardoni, 2008).

In Chile, such identity shifts have resulted from the family-support component. Beneficiaries report having become confident to see themselves as individuals, not only as wives or mothers, though this does not mean that their husbands are now sharing domestic work responsibilities.

Evaluation evidence suggests, however, that men are missing from programme design and that no major changes will be made unless family-support approaches include methodologies to involve them (Larrañaga, 2009).

In Peru (Box 2, next page), training and links to complementary programmes have promoted a greater involvement of men in domestic activities and changes in women's perceptions of their bargaining power in the household. But there is room for more sustainable changes in notions of gender relations and the design of activities targeted specifically at men (Vargas, 2010).

V. Political Economy Challenges

There is a growing recognition that the politics of social protection matter in shaping programme coverage (targeted or universal), the type of intervention undertaken, attitudes towards programme beneficiaries, and programme sustainability (Hickey, 2007).

In many ways, the four South American CCTs reviewed are examples of good practice, initiated to strengthen the social contract between the state and its citizens, and all have survived changing regimes. Programme champions were committed to overthrowing traditional ways of relating to the poor and marginalised, and in promoting a more rights-based approach to social policy. While social protection programming often suffers from weak coordination across sectors, there is an explicit commitment to inter-sectoral working in all of these CCTs, facilitated by a single-registry system tracking all services and programmes with which an individual interacts, as well as to strengthening links between different levels of government.

Partly because of the income focus of CCTs, however, the gendered dimensions of programme design have been quite

narrow, and the gendered impacts of the income transfers have often been more unintended than not. Only Colombia's *Familias en Acción* articulates a general commitment to women's empowerment by meeting the Millennium Development Goals (MDGs), empowering women, and protecting them from domestic and sexual violence.

The others seek to address a more limited range of gender-specific vulnerabilities. *Bolsa Familia* includes support for pre- and post-natal care but has no specific programme objective related to gender equality. Chile's *Solidario* pillar on psychosocial support includes tackling intra-household violence. And Peru's *Juntos* aims to provide pre- and post-natal support, as well as awareness-raising in the area of women's reproductive and sexual health rights.

Overall, in targeting women as caregivers, these programmes represent what Jenson (2009) terms a "social investment perspective": the state rewards "good mothers" to support a set of child-centred policies, rather than tackling culturally engrained gender inequalities (see Box 2).

In Peru, for instance, innovative links have been established in some districts between *Juntos* and women's NGOs involved in reproductive health and gender-based violence programming, but these are ad hoc and are not embedded within programme implementation.

None of these programmes has assessed the extent to which programme resources are being channelled to tackle gender inequalities. Gender-disaggregated monitoring and evaluation indicators are also limited, failing to capture issues of time use among girls and boys, and men and women; patterns of compliance with programme conditions for girls compared to boys; changes in intra-household violence over time; or impacts of programme conditionalities on childcare options for women.

VI. Conclusions and Policy Implications

Available evaluation evidence suggests that CCTs, especially those embedded in more multi-pronged social-protection programming strategies (as in the four cases reviewed here), constitute important advances in addressing traditional weaknesses of social policy programming in the region, as well as in meeting some of the practical gender needs of women in particular.

The latter include financial support to meet women's carework responsibilities, opportunities to participate in community activities and enhance awareness of their rights and self-esteem, better access to information and services related to reproductive and sexual health rights, and support for adolescent girls to continue their education.

There is, however, a disconnect between our collective understanding of the gendered patterning of poverty and

Box 2 Engaging with Men to Tackle Gendered Vulnerabilities

Engaging with men to tackle gender vulnerabilities and promote female empowerment is an approach that is gaining currency internationally, but is not yet embedded adequately in CCTs, especially as awareness-raising components typically target women only. Because of this, programmes risk isolating efforts to tackle gender inequality from mainstream development and/or creating new gaps by failing to include men in the design. One partial exception is Peru's *Juntos* programme, which aims to change male attitudes about care and domestic work responsibilities.

The Overseas Development Institute's evaluation of the programme in Peru's highlands found that many men were initially opposed to women attending frequent meetings and training sessions, and accused them of neglecting their domestic obligations, but that greater space for negotiation is opening up gradually, even if this remains a source of some tension. The following views from focus groups suggest shifting attitudes:

"Before, only men were the boss, 'this we have to do' [we would say] ... Now it is different, we are changing ... Previously, my wife did what I said, she didn't give her opinion. Now she does, one can tell, and we reach a solution. Women's opinions were less important. Now she gives her opinion regarding how to progress in life" (male, Liriopata).

"We now have reached an agreement, we go alone to the bank. [Previously] men did not understand, they got annoyed even when we attended meetings. We were afraid and even had to miss meetings" (female, Motoy).

"Out of jealousy, sometimes they asked us 'why do you go? You leave your house unattended' ... Now they don't" (female, Chanquill).

vulnerability, CCT programme objectives, and programme implementation and resourcing.

First, although all of these CCTs have linkages with complementary programmes, this integrated programme approach has not been designed to evaluate which types of programme complementarities are most effective and why. This is a critical area for further analysis and evaluation if we are to understand the importance of cash relative to better linkages to complementary programmes.

Second, children's human-capital development remains the primary focus of monitoring and evaluation activities, and only limited attention is paid to the potential tensions between the promotion of children's wellbeing and the empowerment of women. There have been no systematic assessments of the time-use implications of programme conditionalities on women and girls, men and boys, and there is an absence of links to subsidised childcare facilities.

Finally, although the "co-responsibility" approach to poverty alleviation has merits, and empowers programme participants to become involved in supporting themselves and their families to escape poverty and extreme vulnerability over time, existing CCTs place the main responsibility for this co-responsibility on the shoulders of women.

The Colombian and Peruvian programmes include an awareness-raising component on intra-household

responsibilities for male partners, but regular interaction with the programme is largely through female caregivers, truncating the scope for a more transformative agenda.

There is therefore an urgent need for programmes to target men and boys in a more strategic way, so as to complement and reinforce progress in supporting women's individual and community-level empowerment. ■

Rebecca Holmes, **Overseas Development Institute**;
Nicola Jones, **Overseas Development Institute**; Rosana Vargas,
independent consultant; Fábio Veras Soares, **International Policy Centre
for Inclusive Growth**.

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International Policy Centre for Inclusive Growth

Esplanada dos Ministérios, Bloco O, 7º andar

70052-900 Brasília, DF - Brazil

Telephone +55 61 2105 5000

E-mail: ipc@ipc-undp.org ■ URL: www.ipc-undp.org

Policy International
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