

Coupling of interventions – supporting cash transfers with other services

Introduction:

Innovative policy solutions to poverty alleviation through cash transfer programmes emerged in the early 2000. The coupling of these programmes with other services and interventions resulted from the necessity to review socioeconomic development models around the world. Chile Solidario is one of those examples; it adopted a multi-sectoral and integrated approach to poverty alleviation. The programme was designed based on the idea that poverty is a reflection of multiple and interacting dimensions; to fight that, cash transfers would need to be integrated with interventions which would enforce opportunities and rights for the targeted population. The programme strategy relied on a combination of demand and supply interventions to reach the poorest and most vulnerable in Chile.

Background:

Chile Solidario was launched in 2002 and covered multiple domains with a variety of components. It was based on a proxy-means test in health, education, income and housing. Support was given through cash transfers, additional monetary subsidies, preferential access to social programmes and psycho-social assistance². The support conditions were established in an agreement between beneficiaries and social workers together. They would define the elements of intervention based on the socioeconomic situation of households and the benefit received would be conditional to the completion of such conditions. The participation on the programme was limited to five years and their engagement was planned to slide gradually overtime, including financial transfers and support; this was an attempt to stimulate engagement of households in their own development and promote long-term independence from the programme.

Details of the Intervention:

Two components of Chile Solidario were particularly impactful. First, psychosocial support was given to beneficiaries since the first phase of their participation. Intensive interactions with social workers were conducted to build trust with beneficiaries, address the specific demands of each household, and develop a plan of support. This plan was based on 7 dimensions, which ranged from identification, health, education, family dynamics, housing conditions, work and incomes, and 53 minimum conditions to assess standards of living. Based on that, social workers

² It consisted of personalized support for beneficiaries of "Chile Solidario" by a professional or qualified technician, in order to promote the development of personal and family skills needed to meet the minimum quality of life, and an intervention strategy aimed at strengthening the effective linking of beneficiaries with social networks and access to the benefits that are available.



would evaluate the progress of each household through a total of 21 home visits along 24 months.

Another important component of this intervention was the facilitation of convergence with other government programmes and social services. Although there were previous services and programmes for the poor and vulnerable, only 4 out of 10 among eligible beneficiaries accessed them. In this context, Chile Solidario aimed at putting mechanisms in place to integrate and synchronise the existing network of social programmes and services. This way, beneficiaries would have the necessary conditions to access them.

Some of the efforts which led to the success of the intervention were:

- coordination of programmes and services in the local level according to the demands of households, ensuring localisation of needs;
- guidance of social workers in understanding and navigating the existing network independently, ensuring sustainability of interventions;
- strong capacity building of social workers, ensuring the effectiveness of human resource interaction with beneficiaries;
- legal provisions to regulate the interaction between programmes and services in the institutional level, including the combined features of implementation, management, coordination, supervision and evaluation.

Impact:

In the first 10 years of existence, Chile Solidario enjoyed high rates of coverage and participation. It reached 4,80,000 families, amounting to 20 lakh people or 11.5 percent of the population. Only 2.2 percent of potential beneficiaries refused to participate, and 5.6 percent did not complete application.

The impact of psychosocial support was noteworthy, with successful tailored interventions in the development of skills, capabilities, and information, and autonomy and self-reliance of beneficiaries. First, they assured access to the existing network of social services to the poor and vulnerable groups. Since they received preferential access to health and education services and social programmes, they were brought to the map of local governments and service providers. In turn, it allowed the programme to work in supply-side constraints by improving services. At some point, new programmes addressing labour market access, skills training and micro-finance were created as a direct result of Chile Solidario. Second, evidence shows that the activity of social workers had direct effect on children's physical and cognitive development and psycho-social well-being; and participants' subjective well-being, including high aspirations and optimism, better future expectations, positive attitudes for dealing with problems, and self-confidence. Finally, a legislative framework defining the roles and responsibilities across all sectors involved in the programme were key to assure convergence. It facilitated implementation and coordination, and reduced conflicts among functionaries. In addition, it institutionalised the programme from a simple political will to a legal mandate.

Source: Roelen, K, Devereux, S., Abdulai, A, Martorano, B, Palermo, T, Ragno, L. (2017). How to Make 'Cash Plus' Work: Linking Cash Transfers to Services and Sectors. Innocenti Working Paper 2017-10, UNICEF Office of Research, Florence.