

**The Social Investment Perspective, Conditional Cash Transfer Programs  
and the Welfare Mix: Peru and Bolivia<sup>1</sup>**

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## Introduction

Beginning in the late 1990s in Latin America, there was widespread realization that the neoliberal model had failed to generate economic growth and reduce poverty. After the second-stage economic reform of the safety-net programs, which aimed to compensate for the negative effects of market reforms, policy-makers sought a more global approach to social policy. Conditional Cash Transfers (CCT) programs were the response. The pioneer CCT were the *Progresa/Oportunidades/Prospera* program in Mexico (1997) and the *Bolsa Familia* program in Brazil (2003). Considered to be effective poverty alleviation programs, CCT have spread across Latin America. In the short-term, they aim at reducing poverty among families by increasing their cash flow. In the long, their goal is to reduce the intergenerational cycle of poverty by investing in the health and human capital of future generations. With these objectives, CCT provide subsidies to poor families, upon the respect of conditions regarding education and health. Importantly, these cash transfers are channelled through mothers, who are in charge of respecting the conditions.

The development of CCT programs as the main instrument of social assistance constitutes one of the major changes in social policy in Latin America in the last 20 years (Barrientos 2012). With CCT, social assistance ceased to be residual and became to be based on citizenship, in comparison to social assurance based on contributions via formal employment. This innovation has significantly influenced the welfare mix in many Latin American countries, that is the relation among families, state and market in the production of welfare. Introducing relied on the concept of “decommodification”, meaning the legal and institutional possibilities to maintain a decent life while being outside the labor market, Esping-Andersen (1990, 1999) identified three ideal-types of welfare regime in developed countries: liberal, corporatist and social-democratic. Liberal regimes provided the least decommodification and relied most on the market. Barrientos (2004) has adapted Esping-Andersen’s categorization of welfare regime to Latin America. Doing so, he argued that since the mid-1990s and the introduction of social assistance programs such as the CCTs, the emerging welfare regimes were ‘hyphenated liberal-informal’. Barrientos described these regimes as liberal because the market was the main producer of welfare. He qualified them as informal because the vast majority of the population remained employed in the informal sector and lacked basic social protection. Finally, “[h]yphenation reflects a downgrading of protection for workers in formal employment and the emergence of weakly institutionalized social assistance programmes” (Barrientos 2009: 103). For Barrientos, the liberalization of the labour market and the emergence of new social assistance programs, as CCT programs, reduced the segmentation between formal and informal workers but this reduction is not the product of the generalization of formal employment accompanied with its protective institutions. As a consequence, while social protection is less truncated, it is also segmented around two institutions: social insurance with better protection for formal workers and social assistance with more limited protection for those employed informally (Barrientos 2012: 77).

These changes in the Latin American welfare regime and in the welfare mix among state, families and market have certainly consequences for gender relations. Historically, social policy were based on maternalist assumptions: women have acceded to entitlements by virtue of being a mother or a spouse. Social insurance has historically supported families through a “male breadwinner” model while social assistance was “maternalistic”. Poor women were beneficiaries of hygienic, eugenic and assistance policies while upper class and whiter women were active participants by the administration and dispensation of charitable activities, as a natural extension of women’s family roles (Molyneux 2000: 48). Have the changes introduced by the CCT program in the welfare mix altered these gendered features?

In order to answer this question, this paper is divided into three parts. First, the theoretical background is described. Second, the context of adoption and development of CCT Programs in Peru and Bolivia is described. In the third and fourth section of the paper, the programs are analyzed. In the third section, the return and new role for the state is considered. In the fourth section, gender representations stemming from CCT programs are analyzed. I will conclude by discussing how these programs highlight broader changes in Latin American welfare regimes.

This paper is based on the qualitative analysis of 118 interviews with policy-makers and CCT beneficiaries carried in Lima and Ayacucho in Peru, and in La Paz and El Alto in Bolivia between 2008 and 2010.<sup>2</sup> The use of discourse analysis on these interviews – through *Atlas-ti* Software – provided access to the social representations of the state’s role and gender relations constructed by Bolivian and Peruvian CCT programs’ stakeholders.

## **Theoretical background**

Those who have long examined the welfare mix from a feminist perspective (Jenson 1986; Lewis 1992; Orloff 1993, 1996; Sainsbury 1994), correctly insist that it is necessary to take into account the gendered consequences of welfare regimes and their modifications. Not only do gender relations shape the welfare regime but the institutions of social protection also shape gender relations, and not always in favor of greater equality between sexes. One early and important contribution of the feminist critique of welfare regimes was to show that post-1945 liberal regimes were in fact “two-tier” or “two-track” regimes, in which contributory social insurance was mainly for men while means-tested social assistance programs primarily targeted women (Nelson 1990). Another contribution of feminist approaches to welfare regimes is to render visible women’s unpaid domestic and care work as well as its contribution to overall societal welfare. Lewis (1992) argued that the gender division of labour meant women had to engage in care and domestic work in addition to being employed and indeed this gender division of labour helps explain the gendered welfare mix. Because power relations in families advantage men, many feminist scholars of welfare regimes saw shifting the responsibility for care provision

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<sup>2</sup> All these interviews are analysed in Nagels (2013).

from the family to the state (defamilialization), as the way to improve gender equality (Lister 1997). Their work also claimed that commodification, via formal employment, could potentially be more emancipatory than the decommodification vaunted by Esping-Andersen (1990), since it provides independence from marriage and families (Orloff 1993, 1996).

Some authors (e.g. Pribble 2006; Martinez 2008; Staab 2010, 2012) have applied these original feminist analyses and their categories to Latin American social policies and welfare regimes. For example, building on Sainsbury's (2000) analytical framework Pribble (2006), analysed social policies in Chile and Uruguay by determining the strength of the breadwinner model in each welfare regime. The analysis of three social policies provided pertinent insights on the gendered features of both welfare regime. While both countries had similar levels of social spending, "female labor force participation, the mobilizing capacity of women, and policy legacies differentiated the two countries, placing Chile on a less equitable trajectory than Uruguay" (Pribble 2006: 84). Martinez (2008) aimed at transcending the analysis of single social policies and at capturing overall welfare regimes. Following Barrientos (2004), she classified all Latin American welfare regimes as informal, due to the partial commodification of their labor forces and the consequent limited decommodification of social risks. Martinez, however, also found substantial differences among countries due to the complex relations among labour markets, families and states. Because in Latin America well-being depended primarily on families and especially on unpaid female reproductive and domestic labour, she identified three main types of welfare regimes that reflect the interactions between commodification, decommodification, and defamilialization in Latin America: 1) the protectionist state welfare regime, 2) the productivist state welfare regime and 3) the non-state familialist welfare regime.

More recent studies have moved away from this application of early feminist categories in order to analyse the gender characteristics of CCT program. Analysing various social policies reforms in Chile, Staab (2012) argued that their gendered effects were more complex and varied than expected by those who see CCT programs simply in direct continuity with the maternalist tradition of Latin American social policies (e.g. Moyneux 2007; Tabbush 2010). While some of these reforms do take the unpaid work of women for granted, others are more aware of gender inequalities and may be more promising for women even if they have to struggle with legacies of maternalism, the male breadwinner model and the centrality of the market (Staab 2012: 304).

Building on Pribble's and Staab's method of social policy analysis in order to enlighten Latin American welfare regimes, this paper focuses on one type of social assistance: the CCT programs. The analysis will document that the development of these programs alters the welfare mix, with consequences for men as well as for women. Focusing on the role of the state in the welfare mix, this paper makes two arguments. First, CCT programs demonstrate that instead of being purely liberal or even neoliberal, the action of the state in the production of welfare is now grounded in the social investment perspective. Second, in Peru and Bolivia, the gendered impact of this new state orientation nonetheless reinforces maternalistic and coercive practices.

CCT programs are at the core of the “Southern” version of the social investment perspective that currently shapes much of the cognitive structure of social policy, promoting a new approach to anti-poverty initiatives in both the South and the North (Jenson 2009; 2010). Social investment is based on a multidimensional understanding of poverty, often grounded in Sen’s (1999) capability approach to wellbeing (Barrientos and Santibáñez 2009: 13). The social investment perspective is part of a return to a more active state developed in Western Europe. These theories were conceived as a third way to respond to new social risks, between the neoliberal minimum state and the Keynesian welfare state (Jenson 2011). The social investment perspective is based on three general principles (Jenson and Saint-Martin 2006). First is the pre-eminent importance of investment in individual human capital, by the state as well as families. Second, the emphasis is on investing in future generations so as to break the intergenerational cycle of poverty rather than on ‘passive’ investments in income support or social protection in the present. Third, the idea that these changes not only benefit individuals but also contribute to society as a whole, in the present and into the future. The social investment perspective potentially involves a change in the mix of state, market and family actions in the production of welfare. Firstly, the state takes back some of the responsibilities that neoliberalism assigned to the family for its own well-being. Second, the state recognizes that the market and the labour market cannot provide adequately welfare and therefore income supports are necessary. Finally, the goal of the state is no more to ‘protect’ (that is social protection) but to ‘prevent’ social risk. It aims to distribute equal opportunities and no more to achieve equality of results (Morel et al. 2011).

Based on qualitative analysis of CCT programs in Peru and Bolivia, this paper argues that in these countries, the welfare mix has evolved toward a ‘social investment familialist welfare regime’. Two characteristics of the current welfare mix in Peru and Bolivia will suggest this characterisation.

First, the development of CCTs as a central instrument of social policy, following the social investment perspective, allows for a renewed role for the state in the production of welfare in Peru and Bolivia. As such, the welfare mix involves a renewed role for the state. Indeed, the social investment perspective assigns to the state a new role in social regulation, albeit a new role centered on the principles of conditionality (Morel, Palier and Palme 2011) translated by “co-responsibility” in Latin American context. CCT programs’ emphasis on investing in human capital also reinforces the two principles. As this paper will demonstrate, however, for the women beneficiaries of CCT programs, this new state role is sometimes coercive and does not guarantee social rights, in the classical understanding of the term.

Second, the analysis of cognitive structures of gender central to CCT programs in Peru and Bolivia demonstrates that the family – and especially women’s unpaid domestic and care work – remains central in the welfare mix. As Jenson argues “[...] something has been lost in the translation of egalitarian feminism into the gender awareness that infuses the social investment perspective” (2009: 472). Despite the positive impact of CCT programs in terms of reducing

poverty and especially child poverty (Barrientos and Dejong 2006), I argue that CCT programs have altered the gender division of labour because instead of being male breadwinners, men are written off. Within CCTs, women, defined as mothers, are responsible for adhering to the conditions of the program while men have no role assigned to them when it comes to the production of welfare. As a result, welfare regimes in Latin America remain largely “familialist”. Thus, CCT programs actually generate additional care work for women while not reducing gender inequalities.

### **CCT in Peru and Bolivia**

In the late 1990s and early 2000s, socio-economic and political forces in Latin American challenged neoliberal social policy instruments. In the region, policy-makers sought a more global approach for social policy than the prevalent methods, such as safety-net programs. CCT programs filled the gap they identified.

Quickly after their elaboration and implementation in each country, the *Oportunidades/Progresar/Prospera* and the *Bolsa Familia* programs benefited from very positive evaluations by international and transnational organizations, independent researchers and think tanks. This led to establishment of the general consensus according to which CCT programs were “best practices” for reducing poverty. This consensus was shared not only amongst financial institutions, particularly the World Bank, but also by United Nations organizations such as the United Nations Development Program, the International Labour Organization, the Economic Commission for Latin America and the Caribbean as well as think tanks such as the International Food Policy Research Institute or the Wilson Center (e.g. Villatoro 2004; Skoufias et al. 2001; Rawling 2004, Fiszbein et al. 2009). As Sugiyama (2011: 262) argued, national social policy technocrats could then easily identify CCT programs as the “new professional norm within the development community.” This conclusion is confirmed by our case studies.

### **Peru: *Juntos* program**

Just like other CCT program, the *Juntos* program was first conceived as a way to respond to national issues. It was elaborated and implemented in 2005 by the then president Alejandro Toledo (2001–2006), in order to address two considerable issues in Peru. The first concerned the intensification and multiplication of social conflicts throughout the territory (Tanaka 2006, Grompone 2009). These originated from the failure to distribute the fruits of the economic growth experienced by the country since its return to democracy in 2000<sup>3</sup>, after 10 years of Alberto Fujimori’s authoritarian regime (Francke and Mendoza 2006). The second issue

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<sup>3</sup> Between 2001 and 2007, the GDP increased 6.3% ([www.bcrp.gob.pe/estadisticas](http://www.bcrp.gob.pe/estadisticas)), between 2003 and 2010 the increase was of 6.5% (CEPAL 2011). However, in 2005, 50% of the population was still in poverty and 20% in extreme poverty (Herrera 2005).

was the need to implement – as recommended by the country’s Truth and Reconciliation Commission – policies to compensate the victims of political violence carried out both by the subversive forces and by the state.<sup>4</sup> Intersections between this economic growth without redistribution and the claims for compensations for the victims of internal conflict led President Toledo<sup>5</sup> to implement a CCT program. The program was primarily targeted to the victims of violence who are also the poorest segments of the population.<sup>6</sup>

In 2005, *Juntos* was conceived as following the model of the Mexican and Brazilian programs. It was developed by an inter-ministry team advised by Mexican, Brazilian and other international civil servants. The implementation of *Juntos* fully integrated Peru into the international anti-poverty agenda and aligned the country with the social investment perspective. As the 2007 Peruvian Anti-poverty Law puts it, “we have to move from a vision based on social spending to one based on social investment.”<sup>7</sup>

Until Ollanta Humala’s presidency (2011 - ), *Juntos*’ executive committee was composed of an inter-ministerial team and chaired by an elected representative from civil society. Since 2012, it operates under the umbrella of the Ministry for Development and Social Inclusion (MIDIS). In the field, *Juntos* is implemented by local managers (mostly female) assigned to each municipality. They are the backbone of the program. They collect the certificates of conditions’ respect, monitor that mothers follow the program’s conditions and organize meetings to inform recipient’s mothers.

*Juntos* operates on two principles: targeting the poorest segments of the population and co-responsibility, through the conditionality of transfers. The targeting is based on the recommendations, provided by the Reconciliation and Truth Commission, about the victims of political violence and is also based on the poverty maps established during the authoritarian administration of Fujimori (1990-2000), with the support of the World Bank (Alcázar 2009). Co-responsibility within the program is achieved via conditionality. The mothers of children under 19 may receive bimonthly cash transfer of 200 nuevos soles (US\$ 70) upon fulfilling three conditions: 1) school attendance of the children, 2) mothers’ attendance at prenatal check-ups and nutrition workshops and 3) regular health checks for children (Arroyo 2010). In 2012, *Juntos* reached almost 1.5 million in 649 municipalities, more than 8% of the total Peruvian population, 21% of the country’s poor and 60% of the country’s extreme poor.<sup>8</sup> In 2009, it represented 0.14% of Peru’s GDP and 1.68 % of its total social spending (Cecchini and Madariaga 2011).

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<sup>4</sup> From 1990 to 2000, the internal war between the Shining Path, the *Movimiento Revolucionario Tupac Amaru* (MRTA) and the state led to 69,280 victims with 30% of deaths caused by the state (CVR 2003).

<sup>5</sup> According to Barrientos and Santibáñez (2009a: 419), in all cases of lower middle-income countries, the CCT programs were established by presidential initiatives, as we will see also in the case of Bolivia.

<sup>6</sup> Interview with the president of the MCLCP (Round table to fight against poverty) 2010. 01.29.

<sup>7</sup> Decreto Supremo 029–2007-PCM, March 30, 2007.

<sup>8</sup> [www.juntos.gob.pe](http://www.juntos.gob.pe)

## Bolivia: the *Bonos*

The *Bonos* – the *Bono Dignidad*, the *Bono Juancito Pinto* (BJP) and the *Bono Juana Azurduy* (BJA) – were presented by the Bolivian President Evo Morales (2005 - ) as the pillars of a new and universalistic social policy. This paper focuses only on the BJP and BJA because they are conditional cash transfers, whereas the *Bono Dignidad* is a non-contributory pension for elderly after the age of 65.

The creation of the *Bonos* is linked to the 2006 *National Development Plan: Bolivia Worthy, Sovereign and Productive, to Live Well*<sup>9</sup> (PND) (Canavire Bacarreza 2010: 36). This Plan had a broad approach to development, including long-term social policy priorities. Only short-term programs of the plan (i.e. the *Bonos*) have materialized, however. The *Bonos* were hastily constructed in order to expedite the redistribution of resources resulting from the ‘nationalization’<sup>10</sup> of hydrocarbons. It also was a response to pressures from many social groups for visible material gains and for a direct impact in their daily lives of the new form of resource management. Both BJP and BJA are entirely funded by the additional capital generated the ‘nationalization’ of the country’s hydrocarbon sector.<sup>11</sup>

The *Bono Juancito Pinto* (BJP) was established in October 2006 with three objectives: increase school enrollment, reduce the dropout rate and diminish the intergenerational transmission of poverty (Estado Plurinacional de Bolivia, 2006). This program emerged hastily in response to a specific request from President Evo Morales. The design of this program also did not take into consideration the recommendations of the World Bank that such a program should be means-tested and targeted at the poorest regions in the country. Under the BJP, all children may receive Bolivianos 200 (around US \$30) yearly upon meeting two conditions: 1) enrolment in a public school and 2) maintenance of a minimum of 80% rate of school attendance (Unidad Ejecutora 2008: 1). Since 2006, the program has been expanded to all the grade levels of the public school system. Cechini and Madariaga (2011) estimate that in 2010 this program reached 17.5% of Bolivia’s total population, 32.4% of its poor and 59.7% of the country’s extreme poor. The BJP’s annual budget for 2010 was US\$ 54.5 million (Weisbrot et al. 2009, 16) and it represented 2.05% Bolivia’s total of social expenditure and 0.33% of its GDP (Cechini and Madariaga 2011).

The *Bono Juana Azurduy* (BJA) originated from other social policies imagined, but not realized, by the Evo Morales government. The majority of social policy projects developed under the new Constitution and the PND included among their instruments a "mother-child" stipend whose objective was to reduce maternal and child mortality and child malnutrition. The BJA was

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<sup>9</sup> *Plan Nacional de Desarrollo Bolivia Digna, Soberana Productiva Democrática y para Vivir Bien.*

<sup>10</sup> Even if it was more a negotiation of tax with transnational corporations than an expropriation of them, it provided public income to finance public policies, such as the *Bonos*.

<sup>11</sup> The sources of *funding* from Yacimientos Petrolíferos Fiscales Bolivianos (YPFB), Bolivia’s Oil Company, is made explicit in their respective Supreme Decrees.



launched in May 2009. It targets all pregnant women, those who are still breastfeeding or those with children under 2 years of age, who do not have another form of healthcare insurance. In order to receive the benefit (US\$ 260 equivalent) over a period of 33 months, mothers are required to have a formal form of identification for themselves and their children; they have to attend prenatal health check-ups, commit to giving birth in a medical institution and follow through with postnatal check-ups. In 2010, the BJA benefited 3.5% of Bolivia's total population, 6.4% of the country's poor and 10% of its extreme poor. The BJA also represented 1.41% of Bolivia's total social spending, equivalent of 0.22% of the country's GDP (Cecchini and Madariaga 2011).

Despite their differences in terms of selection criteria – a targeted approach in Peru versus a universal design in Bolivia – the Peruvian and the Bolivian CCT programs share a salient similarity: their conditionality element. This paper will analyze this similarity by focusing on two central aspects: 1) the return of the state as an actor in poverty regulation and 2) the gendered impact of CCT programs.

### **The state is back in the welfare mix**

This section will demonstrate that the welfare mix of these countries has evolved to align with the social investment perspective and that, as a consequence, the state has gained a renewed role in the production of welfare. This role varies in each country, as demonstrated by the logic of CCT recipients' selection. In Peru, this selection is targeted whereas in Bolivia, access to CCT follows a universalistic logic. Despite these differences<sup>12</sup>, the adoption of CCT programs as a central instrument of welfare provision nonetheless reveals a return of the state.

In Peru, the *Juntos* programs is based on the social investment perspective even if it is translated in a vertical representation of state-civil society relations, as a former president of *Juntos* explained:

*In fact, they [the poor people] are like little children; you have to offer them opportunities.*

The social investment perspective is clearly present through the promotion of co-responsibility. This is made especially visible by the centrality of conditions, seen as the replacement for the “assistencialism” of “old assistance programs”, what would be termed in European policy language as ‘passive’.<sup>13</sup> The following quotation, from a *Juntos*’ regional agent, illustrates this point:

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<sup>12</sup> These differences are explored in Nagels (2014).

<sup>13</sup> During the Fujimori regime, assistance program, in particular food programs were used politically to literally buy popular votes.

*I do not see the program Juntos as assistencialist. I see it as a program that creates commitments with moms and moms know these commitments, they agree with them. They know that to be into the Juntos program is to promote practices relating to health, education, children, etc.*

This link between conditionality and the fight against assistencialism is also present in Bolivia. During an interview, a BJA's senior bureaucrat explained that, according to her, the *Bonos* remained assistencialist, because it did not impose enough conditions:

*Yes, they are assistencialists because we do not ask to them [the recipients] – in addition to fulfilling certain conditions, such as attending school or going to health centers – any personal effort to move forward, some type of effort.*

In Peru, if the market remains important for welfare production, it is accepted that it generates excluded individuals that must be protected by the state. This recognition of the role for the state is expressed in the next quote, taken from an interview with a high-ranking official from the Ministry of Women and Social Development:

*The role of the state [...] is to challenge exclusion or try to form a system of protection against exclusion.*

More precisely, CCTs demonstrate that the role of the state is to offer, in concordance with the social investment perspective, a minimal equality of opportunity threshold but not to support equality of results. A high executive of the *Juntos* programs described the objectives of this program as follow:

*We have to offer them the basic package so we can say that in this democratic country everybody has some sort of minimal equality... now... this is what the program is contributing [...] Juntos is devoted to allowing children to achieve equal opportunities towards the future.*

In Bolivia, the state makes a strong return and, even if the current role of the new plurinational state is not always clear,<sup>14</sup> the *Bonos* were part of the “process of change” engaged by Evo Morales’ administration, a process intended to create a more cohesive state that would also be inclusive of lower strata of the population and indigenous people. The next quote, from the Vice-Minister for Equal Opportunities, illustrates all the ambivalence contained in this new state:

*I believe that one of the strongest impacts of this process of change was precisely the recovery of the collective self-esteem of indigenous peoples and of the popular sectors in*

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<sup>14</sup> Ranging from a certain ecological postmodernism centered around the notion of “*buen vivir*” to a more classical Latin American national-popular ‘developmentalism’

*our country [...] I believe that a lot of work has been done precisely to recognize all Bolivians, male and female, as citizens with greater and more equal possibilities and opportunities in our country.*

Despite the nuances between Peruvian and Bolivian representation of the role of the state, these quotes highlight clearly the return of the state when it comes to social policies. That being said, further analysis demonstrates that the state is sometimes coercive and does not guarantee social rights to all citizens, in the classical sense of the term. The conditionnalities central to CCT programs are clearly oriented to modifying the behaviour of the poor in Peru and Bolivia. CCTs officials estimate that the conditions of the programs should modify recipients' mentalities and practices. A *Juntos*' local manager in San Miguel described his role in changing the lifestyle of the poor:

*In other words, what we want for them is that they change their lifestyle. Poverty is a disease that needs to be removed from their heads, right? They cannot have that feeling all their lives, right?*

This statement shows that, for this official, poverty was partially the result of mentalities, self-representations and feelings. Such a discourse disregards the material conditions and power relations in which the popular classes are embedded and makes them responsible for their situations. The same conception of the causes of poverty is also present as part of Bolivia's CCT program. While the notion of plurinational state rests on respect and support for lower and indigenous strata of the population, BJA policy-makers believe that the central aim of the CCT is to educate mothers:

*Educating the population was the hardest part. We educated them, we taught them.*

More specifically, BJA doctors feel their mission is to teach mothers how to breastfeed their children and feed them properly:

*In addition, we advised mothers on how to feed, how to breastfeed, what must be done [...]. We educated them; we met them on a regular basis to check out on any improvement and to monitor them [...]. We provided explanations, but they did not understand quickly.*

These discourses are based on the assumption that women are ignorant of the proper way to feed and care for their children. According to Bolivian and Peruvian program officials, recipients do not have sufficient knowledge to practice "good" motherhood. In Bolivia, for example, a BJA national program officer believed that the recipients did not understand the conditions concerning the *Bonos*, without questioning the information provided in the program:

*They do not understand that they must go to checkups. Many moms think that just being registered is sufficient, that mere registration is sufficient to obtain the subsidy.*

In Peru, a *Juntos*' promoter directly refers to women's lack of maturity and education as the reason preventing them from understanding the objectives of the program:

*What they lack is maturity [...], but also a level of knowledge, of education. Many [...] do not understand!"*

These quotes illustrate that CCT programs' officers consider themselves to be engaged in a fight against what they perceive as mothers' ignorance. They thereby stigmatize and deny these women's knowledge, derived from experiences and traditions. A relationship is established between, on the one hand, a "we" – policy-makers, experts and practitioners – and the "others" – poor women, mothers or future mothers who have to be educated. CCTs administrators in both countries and at all political levels – from the central government executives to the local program officers – constructed representations of female recipients as "ignorant" and as perpetuating "bad practices" when it comes to the care of their children.

The coercive nature of the state' investments is also understood by the recipients. For them, CCT conditions are too burdensome and, therefore the grounds for suspension from the program are unfair. They denounce the external imposition of criteria over which they have no control. There is also great uncertainty surrounding the implementation of the *Juntos* program. Conditions for entry into and expulsion from the program are unknown to recipients, as a non-recipient in Tambo illustrates:

*We do not know who decides. Nothing [...] no, we do not know [...] we have no information [...], they do not take us into account [...]. I'm virtually abandoned by my husband. Despite this, I still get nothing. I do not know why.*

In addition, the non-fulfillment of the program's conditions – even when the reason completely escapes recipients – officially results in punitive measures. In Peru, lack of compliance with *Juntos*' conditions results in the suspension of the subsidy for three months while in Bolivia, failure to meet a given condition limits the payment related to that condition.<sup>15</sup> In Peru, a recipient of San Miguel relates her experience of having trouble complying with conditions:

*All the health sector in Ayacucho was on strike, so the doctors did not see [us] at all since February. Many children were born during that month, but it was impossible to register them. But Juntos said "Ah, your child is three months old, and you did nothing, your baby does not have any identification, then you have not complied with the agreement". Result: punished!*

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<sup>15</sup> In the BJA, to each medical check-up correspond an amount of money.

In Bolivia also, this inability to access health monitors exists and it is especially problematic when health centers are at great distances from recipients' homes, as explained by a BJA's recipient:

*Doctors do not honor their commitments. Sometimes it's far away and they make us come for nothing.*

Faced with almost impossible conditions to meet the withdrawal from the program is seen as a punishment, as expressed by a recipient of *Juntos* who was suspended from it at the time of the interview:

*We must obey all, do not claim anything, it's like that [...]. The local manager will crack down [...] first because we require too much, and then because we said something that they did not like. They have already suspended me for that, they suspended me for three months and I did not receive anything for three months!*

This discourse about women's ignorance is not far from what Jenson stressed about British social policies at the end of the 19<sup>th</sup> century: "If the family did poorly, it was because women were ignorant, unskilled or careless" (Jenson 1986: 21). As did the British state in that time, the malnutrition of poor people is attributed to women's lack of knowledge rather than to an effect of poverty. Just as old maternalist liberal policies of assistance, they arose in a context in which infant and maternal mortality had become major public problems. Like those too, the ignorance of the mothers was seen as the cause of the maternal and infant mortality. The remedy was, therefore, education of the mothers to proper 'scientific' feeding and cleaning. Social policies taught housewives to nurture their babies better and have good hygiene practices by visiting households (Jenson 1986: 16, 17). In addition, CCT programs, as charity policies, reinforce intersectional power relations between women, since local managers are in large majority women from different social and ethnic groups than the recipients. The objective to modify the behaviour of poor women reflects power relations in which some privileged women attempt to teach to other women how to be more like them. Fearing the popular class debauchery, the reformers seek to teach mother to be more like upper class and "whiter" mothers (Jenson 1986). In particular, indigenous mothers are seen as problematic mothers, as Radcliffe (2002: 153) argued "in the Andean republics, racialization characterized different experiences of motherhood for various women".

However, CCT programs are not "classical" assistance liberal policies because they do not simply provide protection after market failure. The investment in the human capital of children central to these programs makes them productivist policies, especially when considered in the long-term. In the short-term, CCT programs – as liberal social policies – aim at limiting much poverty and avoiding the resulting social instability. In the long-term however, since these programs have children as their secondary recipients, their goal is to invest in the development of

“free” future citizens. According to Barrientos and Santibañez (2009: 20), while CCT programs aim to protect the poor from persistent poverty, “[...] they also aim to strengthen their productive capacity through facilitating investment in schooling, health, and nutrition; and to strengthen their agency”. The child-citizen-in-the-making, with the support received early on from the social investment state, will have the capabilities and opportunities to be able to break away from the inter-generational cycle of poverty. Therefore, CCT programs are more embedded in the social investment perspective than in the liberal welfare state paradigm. The coercive features of new social policies, on the other hand, are the particular “translation” of the instruments of the social investment perspective in Peru and Bolivia.

### **Gender division of labour**

A general consensus prevails regarding CCT programs: they are successful at meeting their main purposes in terms of human development by improving school attendance, children’s nutrition and health, and could empowering women. Built in the late 1990s, in a post-Beijing and gender-sensitive world, which was becoming concerned with the specific problems of “women in poverty”, CCT programs are “gender aware” (Molyneux 2008, 22). They were based on the assumption that giving money to women empowered them by strengthening their bargaining power within intra-household decision-making (Sen 1990; Barrientos and Santibañez 2009a 415). Both the Bolivian and the Peruvian program developers shared this premise. One BJA’s officer in Bolivia argued that:

*There is also a form of empowerment of the mothers who receive the money. [...] It is also a way to empower the mother.*

International evidence was used to support and legitimize this argument, as explained by one of the *Juntos*’s experts in policy instruments of targeting:

*Juntos was targeted at those regions where woman are subjected to serious violence [gender violence and violence from internal conflict]. Then, by giving them 100 soles it permits us to empower them, as international institutions, such as the World Bank or the IDD, [would] say.*

By transferring income to women, CCT programs can have some positive effects on gender relations (Martinez and Voorend 2009; Molyneux 2008; Aparecido 2009; Adato et al. 2000; Escobar Latapí and Gonzalez de la Rocha 2004; Nagels 2011). These programs nonetheless rely largely on the unpaid care work of women in order to improve children’s well-being. Indeed, a single representation of gender relations strikingly dominated the discourse of every stakeholder: women are mothers. This consensus around maternalism was at the core of the social investment perspective in Peru and Bolivia. The centrality of women as mothers rests here on two underlying conceptions of gender social relations.

First, stakeholders assume the existence of a clear dichotomy of values between men and women as well as fathers and mothers. In this view, vice is associated with the former and virtue with the latter. Women are represented as better household managers, whereas men are described as likely to spend the subsidy for personal ends or on failings, such as alcohol. For example, in Peru, one agent responsible for decentralized social programs estimates that:

*The benefit should be transferred to the women because they are more responsible and because in those regions where this stipend is distributed [the Andes], men spend it on other activities, such as alcohol or other vices.*

In the Bolivian case, the BJA coordinator for La Paz shared this negative representation of men as being irresponsible:

*If they [men] receive money for their children, they say 'celebrate first': two small beers, then 4, 8, 10, 12... and at 6:00 the next morning, there is no more money for the baby [...]. Because the idiosyncrasies of our people are that the man who receives the money will [...] squander it on alcoholic beverages.*

Women CCT recipients share these negative representations of men. For example, the director of an informal workers organization in La Paz also spoke about the men's tradition to celebrate:

*Some fathers who requested Juancito Pinto Friday reappeared on Tuesday penniless. [...] If it is the man who receives it, he goes to the bar and after 6 beers, he forgets Bono Juancito Pinto.*

In Peru, one *Juntos* beneficiary also sees men as irresponsible and alcoholics:

*What would dads do? [...] There are alcoholic fathers, lazy [...] that have five or six children, they give their children way and go with another woman and with it, same thing, they have [children] and go, they are not responsible and they remain poor throughout their life, really poor.*

It should be emphasized that all actors, across every levels of all of the CCT programs share and never question this representation of men. What emerges is an overwhelming vision of men as irresponsible and selfish, focused on leisure and most often alcohol. While these representations have negative effects for men, they most importantly reinforce social norms that assign women responsibility for maintaining the household, whether they have employment or not. Moreover, because men cannot be relied on to spend the CCT well, they are stripped of their traditional role as breadwinner as well.

Second, because the program treats mothers as the key to securing improvements in the life opportunities of their children, born and unborn, in the name of effectiveness, a focus on

women's reproductive roles is prioritized, as a way to improve children's well-being. Any other dimension of their health or life is ignored. For example, as part of the *Juntos* program, the state's interest in pregnant women is limited to the child they carry, as a local manager expresses it:

*If [the mother] is well fed, then that will be a healthy baby [...] it is necessary to control the respect of health conditionality in general but even more so with pregnant women because the lives of two people are concerned!*

In the Bolivian case, the BJA operative chief explains this logic behind this instrumentalization of female reproductive roles:

*Generally in Bolivia [...] the important person for health, it is the mother more than the father. The mother has more of a relationship with the child, to go to health check-ups. This is not the case with dad. And the aim is to strengthen this aspect, that is to say, the power that the mother has in [the children's] health.*

The “proof”, stemming from international experience, is at the root of the legitimation of the argument about the “cost-effectiveness” of investments in women. One of the most prominent Peruvian academic supporters of *Juntos* explained:

*This kind of program exists in 120 countries and there are studies, which demonstrate the cost-effective results when resources pass through the women, if the money is transferred to a mother with children of school age. For example, in Bangladesh, Pakistan and elsewhere, it is an accepted truth and [thus] here too it is applied.*

The same argument is used in Bolivia by an UDAPE<sup>16</sup> researcher, who worked on the development of the *Bonos*:

*Not only here, but in different countries, [it is proved] that the person who handles better the household money is the woman [...]. The woman knows best for the child, if he is getting well or not, when he is ill.*

The international legitimacy of the CCT programs and the international evidence backing them makes them the norm when it comes to social policy. Importantly, CCTs' reliance on female reproductive, care and domestic work is based on the hypothesis that women are naturally predisposed to serve their family and others. In the case of these programs, Barrig's assertion (1992, 11) remains valid: “[...] woman, her time, her energy and her labour are converted into the most effective instrument to execute social programs”. Therefore, because CCT programs

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<sup>16</sup> *Unidad de Análisis de Políticas Sociales y Económicas* (Social and Economic Policy Analysis Unit), research center of the Development Planification Minister.



essentialize gender roles with respect to unpaid care and domestic work, “women are at the service of the state” (Molyneux 2007).

Yet participation in *Juntos*, because of the need to fulfill conditions, entails even more work for them, as is explained by one *Juntos* recipient:

*Obviously it's an overload. [With] all we have to do, Juntos adds more. For example, we have many tasks at home. And on top of that, we are given even tougher tasks: we must be in order with the school, the health papers. We should think, "My baby needs an identity card, otherwise they will withdraw it from me".*

Because CCT program discourage men from assuming care work and because their conditional feature, they overburden women (Staab 2010: 610). This extra work reinforces gender inequalities (Nagels 2011). Additionally it can even render the programs counter-productive as an anti-poverty measure. The time devoted to the program – not taken into account by CCT developers– is time potentially “stolen” from income-generating activities (Molyneux 2007: 37). Moreover, the blindness to women and their needs, all in the name of children, can be counterproductive for the well-being of those children later in life. Research also shows that women’s access to education, health and the labour market improves their children’s life conditions. This dimension of fighting poverty is ignored by the CCT.

It is important to underline the consensual nature of theses representations, which confirms that these policies are maternalistic. Women, and not men, are seen as individually responsible for social well-being. More precisely, it is the contribution of women as mothers that is valued by the social program, as a contribution to societal well-being (Jenson 2011: 31). Through CCT programs, state authorities aggrandize the status of motherhood and thereby strengthen maternalism (Molyneux 2008: 11). This is problematic for women because “investing” in children excludes women from claims of autonomy and renders invisible, “class, gender, and other structures of inequality among adults” (Dobrowolsky and Jenson 2004: 155).

## **Concluding remarks**

This paper has argued that the adoption of CCT programs in Peru and Bolivia led to changes in the welfare mix, moving these countries’ social policies toward a social investment familialist welfare regime.

CCT programs’ impact evaluations have demonstrated that they achieve their objective: poverty and extreme poverty are reduced; children’s and mothers’ health is improved; enrolment and attendance in school increases (Barrientos and Santibañez 2009a: 421). Despite these positive results, the translation of the social investment perspective in Peru and Bolivia is imbued with a

heavy legacy of previous social assistance policies, including their coercive and maternalistic characters.

In order to avoid one legacy of passive assistance policies in Latin America, that of assistencialism, social investment relied on the use of strong conditionalities. The policies aim at investing in the human capital of children by modifying their mother's behaviours. According to policy-makers, conditions are tools to educate poor women and supports to help them achieve their "civilizing" or "modernization" mission. Therefore conditions and their implementation tend to promote attitudes and behaviours closer to obedience than the exercise of rights. The analysis demonstrates that CCT programs also project the idea that recipients' behaviour and practices are at the root of their problems and, as a consequence, solutions are restricted to their education. The enforcement of the conditions is often authoritarian and arbitrary. Policy-makers and program managers and agents reproduce stereotypes and discrimination against rural and poor populations.

The distinction developed by Molyneux (1985) between practical gender interest and strategic gender interest is useful in order to understand gendered impact of CCT programs. If in the short term, cash transfers to women can improve their material situation and their bargaining power inside the household – then their practical interest – in long term, CCT programs do not in themselves fundamentally challenge gender order and women strategic interest because they do not undermine gender subordination. Maternalist policies, if they may be in favour of women practical interest, do not broaden women labour-market participation or educational options. In addition, CCT programs discourage men from assuming care-related tasks and, because of their conditional nature, overburden women. CCT programs focus on the improvement of children well-being without any concern to their mothers, who denied their female independence. Mirroring older maternalist policies, concern is more with babies than with mothers and, as a consequence, women "are encased in the family and visible only as mothers" (Jenson 1986: 41).

Finally, the silence that remains around structural poverty is surprising, since the populations that are targeted by CCTs are poor. Yet this analysis of the discourses around these CCT reveals an analysis of poverty that is explained in terms of individual or group behaviour, an interpretation that is coherent with the social investment perspective. The structural reasons for the poverty in which women live – and its realities such as of lack of time, distant health centers, difficulties in introducing protein into their diet, etc. – is never addressed. This invisibility strengthens the responsibility placed on women recipients for overall social welfare. Only individual poor women are challenged and not the social, ethnic and unequal gender relations in which they are inserted.

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