

Original Article

Health effects of 'Juntos', a conditional cash transfer programme in Peru

José E. Pérez-Lu^{*}, Cesar Cárcamo^{*}, Arijit Nandi^{†‡} and Jay S. Kaufman^{†‡}^{*}School of Public Health, Universidad Peruana Cayetano Heredia, Lima, Peru, [†]Department of Epidemiology, Biostatistics and Occupational Health, McGill University, Montreal, Québec, Canada, and [‡]Institute for Health and Social Policy, McGill University, Montreal, Québec, Canada

Abstract

In some countries, conditional cash transfer (CCT) programmes show an impact on maternal and child health. Juntos, the CCT programme in Peru, has been evaluated several times operationally, but seldom for maternal and child health outcomes. The objective of this study is to evaluate the impact of Juntos on children under 6 years, pregnant women and mothers of children under 17 years. Outcomes evaluated included (1) anaemia in women and children; (2) acute malnutrition in children; (3) post-partum complications in mothers; and (4) underweight and overweight in mothers. We identified Juntos eligible respondents from the Demographic and Health Surveys of Peru for years 2007 to 2013. Propensity score matching was used to identify comparable treatment and control groups, including eligible respondents enrolled in Juntos vs. those not enrolled in Juntos (individual-level analysis), as well as eligible respondents living in Juntos districts vs. those not residing in Juntos districts (district-level analysis). We then used generalized linear models to estimate prevalence ratios. Individual level analysis showed that Juntos reduced underweight in women (PR:0.39, 95%CI:0.18 – 0.85) and anaemia in children (PR:0.93, 95%CI:0.86 – 1.00). In the district level analysis, the programme was associated with a reduction of overweight in women (PR:0.94, 95%CI:0.90 – 0.98) and acute malnutrition in children (PR:0.49, 95%CI:0.32 – 0.73), but an increase in the prevalence of anaemia in children (PR:1.09, 95%CI:1.01 – 1.17). We found that Juntos had an effect on maternal and child health indicators, but further studies are required to overcome some limitations encountered here.

Keywords: propensity score matching, conditional cash transfer programmes, child care, nutritional status, malnutrition, anaemia, Health Policy.

Correspondence: José E. Pérez-Lu, School of Public Health, Universidad Peruana Cayetano Heredia, Lima, Peru. E-mail: jose.perez.l@upch.pe

Introduction

In recent years countries such as Colombia, Nicaragua, Honduras, Brazil, Argentina, Ecuador, Turkey and Peru have implemented conditional cash transfer (CCT) programmes (Baird *et al.* 2011; Owusu-Addo & Cross 2014). These programmes try to break the cycle of poverty by delivering a periodic cash payment to families in poverty in order to enhance human capital in vulnerable young people (Hidalgo 2008). In order to receive payments, beneficiary families have to comply with some requirements. CCT programmes have shown an impact on indicators of education, health and child labour (Behrman *et al.* 2009; Fiszbein *et al.* 2009; Francke & Cruzado 2009; Handa *et al.* 2009; Gaarder *et al.* 2010; Baird *et al.* 2011).

The CCT programme in Peru is called 'Juntos' (a Spanish word meaning 'together'). This programme began in 2005 in 70 districts. This number gradually grew to 1097 districts in 2013 (60.1% of the 1838 districts in Peru), and currently benefits over 500 000 households (Perova & Vakis 2009a; Sánchez & Jaramillo 2012a). The programme's goal is to reduce poverty and break its transmission from one generation to the next. To reach this goal the programme provides cash transfers of 100 Peruvian Nuevos Soles (PEN) or US\$35 per month to qualifying households (Jones *et al.* 2007; Alcázar 2009). In addition, the programme improves human capital by promoting education and access to health services (Escobal & Benites 2012; Guzmán & Bethsabé 2013).

Beneficiary districts were selected based on five criteria: (i) exposure to violence as a consequence of