

# Women's Empowerment among the Extremely Poor: Evidence from the Impact Evaluation of *Red UNIDOS* in Colombia<sup>1</sup>

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Currently, 9.1 per cent of Colombia's population lives in extreme poverty. Poverty is more prevalent in rural areas, where it reaches 19.1 per cent (DANE 2012). In Colombia women are more affected by extreme poverty than men, which can be explained by gender gaps in the labour market. While female labour force participation in urban areas is 57.8 per cent, male labour force participation is almost 17 percentage points higher at 74.5 per cent. Among the extremely poor population, only 31.9 per cent of women in urban areas participate in the labour market. Job informality among extremely poor women can reach as high as 90 per cent (DANE 2013).

How then can we help women living in extreme poverty achieve greater economic empowerment? A diagnostic study revealed that the most vulnerable population was not benefiting from government services created to improve their socio-economic conditions. This was due to a lack of information, a lack of identification and a lack of empowerment, as well as distance to the supply of services (Nunez and Cuesta 2006). Furthermore, evidence from *Chile Solidario* also suggests that extremely poor families lack the fundamental organisational skills for their own development; therefore, more than financial support, they also need psychosocial support (Galasso 2011). Armed with this evidence, Colombia created *Red UNIDOS* (previously *Red JUNTOS*) in 2009 as the government strategy to alleviate extreme poverty.

## **Red UNIDOS strategy to eradicate extreme poverty**

The *Red UNIDOS* strategy includes three components: psychosocial support for families and the community; supply management and preferential access to social services provided by the State; and programmes for strengthening government institutions that provide such services.

Psychosocial support is provided by a *Cogestor Social* (social worker), who visits the families between two and eight times per year and helps them recognise their own strengths and weaknesses, to develop strategies adapted to their specific situation. Each family commits to a work plan across nine dimensions, namely: identification; income and employment; education and training; health; nutrition; housing; family dynamics; banking and savings; and access to justice.

## **Empowerment**

Empowerment is often defined as the increase in the capacity of individuals or groups to transform choices into actions, acquiring the necessary capabilities to achieve autonomy, voice and influence over decisions that affect their lives (Molyneux 2008).

Typically, the dimensions that have been used across contexts to measure empowerment have been education, employment and the ability to negotiate or bargain to make household decisions. Indeed, evidence shows that employment is a good proxy for empowerment, since it allows women to earn an income, with a resulting positive impact on their social standing, their agency, and their bargaining power within the household and society (Sen 1999).

Greater education is seen to improve women's capacity to question, reflect on and gain access to information, to effect changes and improve their lives (Kabeer 2005). The capabilities approach developed by Sen suggests that health, education, income, psychological well-being and affiliation are crucial for developing agency (Sen 1999; Nussbaum 2011), which is the multidimensional approach to poverty and is used by programmes such as *Chile Solidario* and, more recently, *Red UNIDOS* in Colombia.

In this article we consider that employment, its quality and the bargaining power of women at home are resources that empower them to improve their lives.

## **Methodology**

Using mixed methods, our study evaluates the impact of the *Red UNIDOS* strategy on women's empowerment. This evaluation uses original and experimental designs randomly assigned to control and treatment groups within 77 municipalities that are representative of the entire country, and a cluster randomisation (each municipality being divided into several neighbourhoods or clusters). The treatment consisted of eight family visits made by the social workers, not counting the initial assessment visit. The sample used for this analysis includes 2311 households, and contains a baseline collected in 2009 and a follow-up survey collected in 2011.

Due to operational and political constraints, by the time of the follow-up survey, 11 per cent of the households that had been randomly assigned to the treatment group had not received an official (self-reported) visit, and 70 per cent of the control group had received official (self-reported) visits. In this context, Instrumental Variable (IV) methods were considered the best alternatives to control for selection bias due to the contamination of the control group. The instrument found to be valid is whether the household was assigned to the 'classic' (0–1 visits) or 'intense' treatment (2+ visits). This variable explains the exogenous part of the real treatment and allows us to remove the endogenous part of it.

The qualitative part of this impact evaluation was performed on 30 focus groups of three members in urban and rural settings among extremely poor and displaced female beneficiaries. This work was conducted on a total of

TABLE 1

## Regression Results for each Indicator of Women's Empowerment

	Economic empowerment					Household decision-making	
	Employed	Informality	Labour income	Earnings	Self-employment	Children-related decision-making	New income-related decision-making
<b>Rural</b>							
Targeting score	-0.0687 (0.138)	0.110 (0.222)	133,499 (162,701)	110,856 (201,030)	0.0577 (0.180)	-0.213 (0.155)	0.0397 (0.0437)
Treatment* Woman	-0.106 (0.124)	-0.0760 (0.188)	-122,353 (155,944)	-2,430 (127,833)	-0.0549 (0.161)	0.392 (0.291)	-0.00406 (0.00680)
<b>Urban</b>							
Treatment	-0.0254 (0.0779)	-0.250* (0.137)	-73,760 (114,176)	13,642 (82,523)	0.0693 (0.0875)	-0.120 (0.0972)	-0.0179 (0.0170)
Treatment* Woman	0.0442 (0.0580)	0.0929 (0.109)	24,739 (103,875)	6,997 (71,440)	-0.00250 (0.0689)	0.0867 (0.130)	0.000269 (0.00367)
<b>Displaced</b>							
Treatment	-0.0921 (0.163)	0.231 (0.319)	60,431 (118,512)	70,208 (112,346)	0.0962 (0.140)	0.0216 (0.133)	0.0597 (0.0492)
Treatment* Woman	0.0488 (0.163)	-0.0242 (0.319)	-128,479 (118,512)	-86,007 (70,208)	-0.0136 (0.140)	0.0923 (0.193)	-0.0329 (0.0230)

Source: Authors' elaboration.

Note: \* Significant at the 10 per cent level. Standard errors in parentheses.

90 women in Bogota, Cali, Medellin and two rural municipalities, Dagua (Valle) and Angostura (Antioquia).

## Results

Using instrumental variable methods, we found that *Red UNIDOS* reduced by 25 per cent the probability of programme beneficiaries living in urban areas having an informal job. When analysing the data by gender, no significant effects were found for women. The programme was found to have had no effect on increasing women's economic empowerment, as measured by labour force participation rates, entrepreneurship rates and women's household decision-making (see Table 1).

How can these results be explained?

First, *Red UNIDOS* had implementation failures that affected the functioning of the programme and the work of the *Cogestores*; and, second, the programme did not shift the structural barriers that limit women's economic empowerment.

## Programme implementation concerns

The large number of families allocated to each *Cogestor Social*, their low wages and the quality of local operators might explain the overall impact of *Red UNIDOS* on women's empowerment. The number of families per *Cogestor Social* increased from 80 to 160 with the 2010 scale-up of the programme. Due to this rapid scale-up, the *Cogestores* did not receive adequate training; neither did they have the adequate experience and education to perform the job.

It was also documented that operators implementing the programme locally vary across regions, which suggests that the impact of the programme varies according to local operations.

Finally, *Red UNIDOS* cannot fully operate in rural areas due to the lack of infrastructure (e.g. roads, schools), jobs and government social services. Indeed, women had less information about the programme in rural areas more broadly.

## Structural and cultural barriers to women's empowerment

Evidence from the qualitative methods suggests that women face complex barriers to participating in the labour market. The first barrier found was the availability and quality of care services for young children and women's lack of trust in these services:

*"When I am working, I have to pay too much for childcare, and not everybody can take good care of my daughter."*

surveyed beneficiary from Medellin, in the urban group

Furthermore, street violence can affect women's decision to work. This is particularly true in Cali and Medellin, where the current highest rates of violent youth deaths in Colombia can be found (DANE 2014). Adolescents are highly exposed to gang activities, harassment and drug use. According to the women interviewed, no one can take better care of their children than they can—which is why they feel they need to be at home:

*"I watch out for my children because we live in a high-risk area. In my case, I have already lost two of my children here. They were killed by gangs, so I always watch out for my 17-year-old kid."*

surveyed beneficiary from Cali,  
in the urban group

The second barrier faced by women in Colombia discovered in this undertaking is that their husbands or partners do not like that they work. The belief that husbands think that women working outside the home are more likely to cheat on them and that taking care of the children is the sole responsibility of women were also elements that emerged from the survey:

*"There are husbands who don't like you to work... money gives you freedom. If you don't like something, you can leave, and nothing happens."* surveyed beneficiary  
from Cali, in the urban group

*"My husband doesn't allow me to work. He only allows me to work here at home because I can take care of the children."*  
surveyed beneficiary from Bogota,  
in the urban group

The third barrier is the cost, time and access to transportation. This is true for rural areas and for women living at the peripheries of urban areas. Even when there are jobs available, the high cost of buses in urban areas or 'taxi-motorbikes' in rural ones, combined with their lack of availability during certain times of the day, discourages women from taking jobs in such areas.

Finally, with regards to women's perception of empowerment and household decision-making, women of our study expressed that they feel more independent and confident when they work. Being able to generate income gives them more power in the household decision-making process regarding expenditures on food, education and anything else that they or their children might need.

Additionally, some of them stated that they felt empowered in other dimensions, since their work allows them to learn, interact with other people, to be useful in their communities, and gain more access to information about their rights:

*"To have a job is very important because you feel useful, for yourself, your family and your community, because you have more opportunities to learn. When you have a job you can progress, study and learn more, have friends and be more open to the world."* surveyed beneficiary  
from Cali, in the urban group

### Conclusions and policy implications

Red UNIDOS did not present significant impacts on any of the empowerment measures used, except for a reduction in job informality rates in urban areas. Several changes are necessary to improve the programme.

The number and quality of *Cogestores* needs to improve; otherwise, a lot of resources will have been invested in vain. Improved access to care services and transportation subsidies must be priorities for the programme, which does not currently include them. They represent some of the major obstacles to the participation of women in the labour market and disincentives to find formal jobs, not allowing for job flexibility. It is also crucial for the programme to incentivise changes in attitudes within the household, so that husbands understand the economic and social benefits of work for women and that they can help with childcare and various domestic duties.

Finally, it is crucial to strengthen the coverage and delivery of social services in rural areas, particularly to develop income generation strategies for women. Due to the lack of employment opportunities in rural areas, this could be achieved by offering access to financial services which include strong financial planning and financial education components to help women develop their own entrepreneurial activities.

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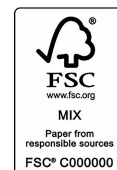
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