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Discussion Paper BRIEFS

Food Consumption and Nutrition Division of the International Food Policy Research Institute

Discussion Paper 131

Does Subsidized Childcare Help Poor Working Women in Urban Areas? Evaluation of a Government-Sponsored Program in Guatemala City

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High urbanization rates in Latin America are accompanied by an increase in women's participation in the labor force and the number of households headed by single mothers. Reliable and affordable childcare alternatives are thus becoming increasingly important in urban areas. The *Hogares Comunitarios* Program (HCP), a government-sponsored program established in Guatemala City in 1991, was designed as a strategy to alleviate poverty by providing working parents with low-cost, quality childcare within their community.

Purpose

This paper presents preliminary findings from an evaluation of the HCP carried out in 1998 in urban slums of Guatemala City. The evaluation included both an operations (or process) evaluation and an impact evaluation. Key findings of the operations evaluation are summarized, and preliminary findings of the impact evaluation on children's dietary intakes are presented. Aspects related to the targeting, coverage, and cost of the program are also discussed, and the patterns of childcare use by nonbeneficiary households and their costs are described.

How the HCP Works

In the HCP model, a group of parents elects a neighborhood woman to act as a "caretaker" mother. This mother then receives and cares for up to 10 children in her home, 12 hours a day, five days a week. During their stay in the *hogar* (daycare), the children receive care and affection, hygiene, early child stimulation, and food. The program provides initial training for the caretaker mothers and furniture, cooking equipment, and supplies for 10 children. On a monthly basis the program gives approximately \$0.60 per child per day to the caretaker for food, fuel, and educational material. The program also gives the caretaker an "incentive" of \$3 per child attended per month, which is complemented by a \$5 per child contribution from the parents.

The Operational Evaluation

The operational evaluation had three objectives: (1) to review and evaluate the effectiveness of implementation; (2) to assess the quality of the services provided by the program; and (3) to evaluate the level of satisfaction and receive suggestions for improvement from beneficiary parents, and program caretakers and their field supervisors. Research approaches included semi-structured interviews with caretaker mothers, eight-hour observations in the *hogares*, and focus groups with caretakers, beneficiary parents, and field supervisors. The evaluation was carried out in 206 *hogares* from three zones of Guatemala City.

Operational Evaluation Results

Findings show that the program is generally well-designed and is operating effectively. The key operational constraints identified were delays in receiving cash transfers for food, insufficient amount of this cash transfer, and lack of participation of parents. The quality of services with respect to hygiene, safety, and caretaker-child interactions was good overall but varied significantly between *hogares*. Caretakers consistently failed to allocate the required amount of time to educational activities, largely because of time constraints, but also because they did not feel adequately trained, motivated, and remunerated. Caretakers were generally grateful to the program for the opportunity to work at home and take care of their own children (or grandchildren) at the same time. Beneficiary parents were very positive about the program; they were appreciative of the work of the caretakers and of the support received from the program. They indicated that the program was affordable. They suggested the addition of Saturday care and an increased emphasis on preventive and curative health care.

Most of the recommendations to correct some of the constraints identified by this evaluation were accepted by the new administration, which took over

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the program in 2000. Concrete actions to address and adopt the recommendations included in the new four-year plan were as follows: increase in the amount of the cash transfers, strengthening of health services, hiring of educators to ease the time constraints on caretaker mothers, and strengthening of human resources through training.

The Impact Evaluation

The impact evaluation was carried out in one zone of Guatemala City and included (1) a case-control design of approximately 250 beneficiary children individually matched with control children of the same age and neighborhood, and whose mothers worked outside the home, and (2) a random sample of 1,363 households with children 0–7 years of age. The impact of the program on children's dietary intakes is reported here, along with aspects related to the coverage and cost of the program and the patterns of use and cost of childcare alternatives used by nonbeneficiary households.

Impact Evaluation Results

The program appears to be reaching its targeted population, i.e., families of working parents with poor resources and particularly families where mothers are the main income-earner. Beneficiary mothers are more likely to have a salaried (and possibly more stable) employment than mothers who use other childcare arrangements, which results in higher wages and a larger number of employment benefits.

Among nonbeneficiary families, the most commonly used childcare arrangements involved household members or extended family members. Even compared to these informal alternatives, the HCP was one of the lowest cost alternatives, ranking second after resident household members. Nonresident rela-

tives were more costly than the HCP, as were neighbors, other private arrangements, and formal childcare.

The low coverage of the program (only 3 percent of working mothers in the random sample used the program) seems to result from lack of supply rather than low demand.

The program is having a significant and positive impact on children's nutrient intake and dietary diversity: children participating in the program consume, on average, 20 percent more energy, proteins, and iron, and 50 percent more vitamin A than do control children. Moreover, a greater proportion of the key micronutrients (iron and vitamin A) consumed by beneficiary children is from animal products, and thus are more bioavailable (more easily absorbed and used by the body). Because the home diet of beneficiary children was also slightly more nutritious compared to control children, the net nutritional impact of the program is positive and significant.

Conclusion

The government-sponsored HCP in Guatemala provides affordable and good-quality childcare for extended hours, thereby providing needed support to vulnerable urban households, namely single mothers. Expansion and continued strengthening of this type of program could significantly contribute to reducing urban poverty, food insecurity, and childhood malnutrition.

Keywords: Day care program, dietary intake, childcare, Guatemala, program evaluation, urban

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