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Landscape of Non-contributory Cash Transfers in Latin America and the Caribbean, before and after the Covid-19 Pandemic.

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Abstract[1]

The Covid-19 pandemic altered the landscape of non-contributory cash transfer programs in Latin America and the Caribbean. Governments in the region widely utilized cash transfers to support households and individuals during the crisis. Using standardized household survey data from 13 countries, we examine changes in the share of the population covered by cash transfers between 2019 and 2022. Our findings show that, after the crisis, the percentage of individuals covered by non-contributory cash transfers was 7.6 percentage points higher compared to pre-pandemic levels, a relative increase of about 30%. The average monthly per capita transfer almost doubled, from US$33 to approximately US$62 (2017 PPP). Cash transfer programs reached 33.2% of the total population, or about 180 million individuals, up from 135 million before the pandemic. This expansion was driven by increased coverage of urban residents, targeted efforts to reach the older population, and the implementation of unconditional cash transfers instead of other program types. Despite this expansion, a significant coverage gap remains among the poorest, with 31.4% of individuals earning less than US$3.65 per day left uncovered (while cash transfer programs have expanded among higher income groups). The region still faces the challenge of developing more flexible and adaptive systems, including to address shocks. Meeting this challenge requires intensifying efforts to create comprehensive and interoperable databases to enhance coverage, especially for those most in need. It also requires creating mechanisms that allow for more seamless entry and exit from existing programs to better address the dynamic nature of poverty and vulnerability.

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1. Expansion and contraction of poverty and non-contributory cash transfers in response to the Covid-19 pandemic

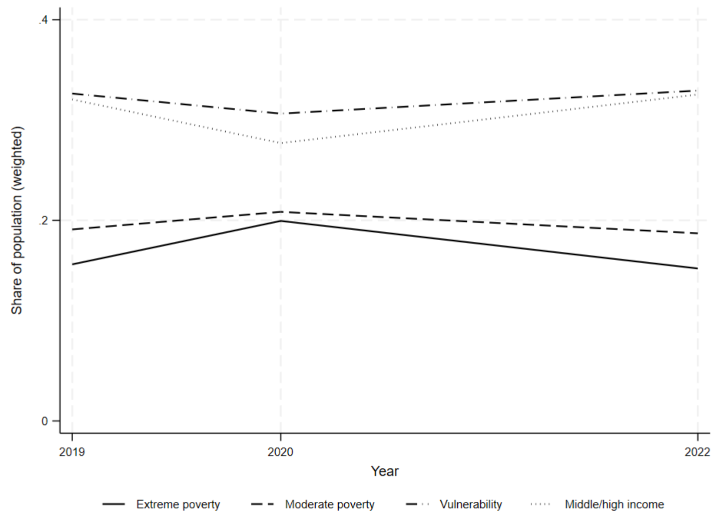
The Covid-19 pandemic posed unprecedented socioeconomic challenges to societies across the world, pushing millions of people into situations of poverty and vulnerability. To mitigate the effects of the crisis on households' wellbeing, governments in Latin America and the Caribbean extensively utilized non-contributory cash transfers (Gentilini, 2022; Cejudo et al. 2021; Stampini et al., 2021). Over the past three decades, cash transfer programs have been a mainstream policy for alleviating poverty and addressing inequality in the region and worldwide (Ibarrarán et al. 2017). The Covid-19 pandemic has once again brought these programs to the forefront of political agendas, which raises some crucial questions. How has the recent pandemic shaped the landscape of cash transfers in the region? What dynamics emerge when comparing post-crisis coverage of cash transfers among the region's population to the pre-pandemic situation?

During the recent Covid-19 crisis, the incidence of poverty[2] in the region increased but subsequently returned to its pre-crisis levels. Due to the pandemic, poverty in Latin America and the Caribbean rose from 34.7% in 2019, equivalent to 182.2 million people, to 40.8% in 2020, corresponding to 216.8 million individuals (US$6.85, 2017 PPP). By 2022, it had decreased to 33.9%, representing 183.4 million people. The rise in poverty during the pandemic was mainly driven by a contraction in the middle class and an increase in the incidence of extreme poverty, with the latter rising from 15.6% of the population in 2019 to 19.9% in 2020 (Figure 1). [3]

[2] Poverty is calculated based on household income per capita net of income from non-contributory cash transfers.

[3] Estimated averages are weighted based on the population size in each income group within each country.

Figure 1 – Share of population living in extreme poverty, moderate poverty, vulnerability, and middle-high income (net of transfers) in Latin America and the Caribbean, 2019-2022



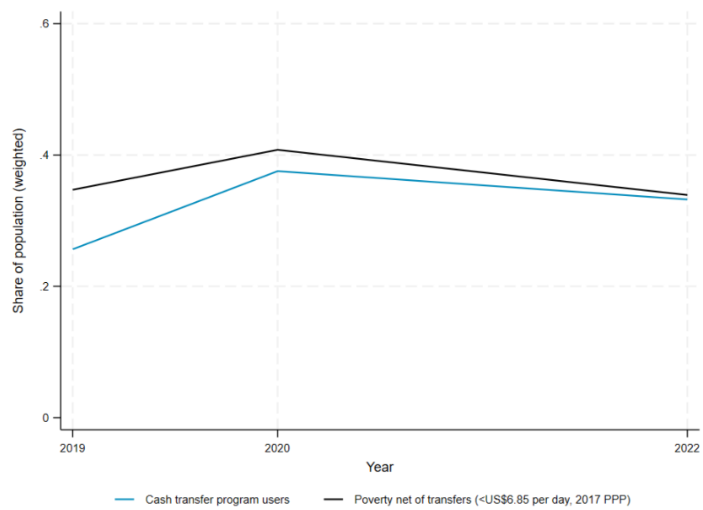
Note: Estimates are based on IDB harmonized household survey data for the following countries: Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Mexico, Paraguay, Peru, and Uruguay. Calculations are based on household income per capita net of non-contributory cash transfers and international poverty lines, US$ 2017 PPP, defined as: Extreme poverty: <US$3.65; Moderate poverty: >=US$3.65 & <US$6.85; Vulnerability: >=US$6.85 & <US$14.60; Middle/high income: >=US$14.60 (per person per day). Estimated averages are weighted based on the population size in each income group within each country. Due to data availability, 2019 averages include data from 2018 for Mexico and 2017 for Chile. The Argentina household survey is representative of urban households only. Benefit amounts of cash transfers used to calculate net income are based on reported amounts, except for Argentina where we impute values according to the regulations in force.

In response to the crisis, the region experienced a substantial expansion of cash transfers, which partially contracted afterwards. Governments increased the provision of non-contributory cash transfers by expanding existing programs to additional individuals that were not already receiving cash transfer assistance and by creating new ones. In most cases, countries did not have a pre-established strategy to trigger a cash transfer response to the crisis; instead, decisions were made ad-hoc. The question remains whether the countries of the region were able to expand and contract cash transfers with a pattern that mirrored the evolution of poverty – an implicit objective for some observers who place greater emphasis on the efficiency of the safety net than its impact on equity.

What does the data tell us? In 2019, non-contributory cash transfers reached 25.6% of the total population, covering people across all income groups, while 34.7% of the population lived in poverty. During the crisis, cash transfers expanded to benefit 37.5% of the total population, at a time when 40.8% of people were living in poverty. By 2022, as the region transitioned out of the pandemic, 33.9% of the population remained in poverty, and cash transfer programs benefited 33.2% of the total population. This is equivalent to approximately 180 million individuals.[4]

These figures suggest that it was only in the context of the pandemic that the number of cash transfer program users came to match the number of people living in poverty (Figure 2). While poverty had returned to its pre-crisis levels, the number of programs users had increased by 7.6 percentage points, a relative increase of almost 30%. This substantial increase in coverage could be seen as positive if the goal was to reach more people living in poverty and/or vulnerability. However, it might be less favorable if it is due to program inertia and lack of a shock-responsive (expansion-contraction) strategy, which would result in covering the 'wrong' people and leaving out those with the greatest need for support.

Figure 2 – Share of population living in poverty and share of population covered by cash transfers in Latin America and the Caribbean, 2019-2022



Note: See Figure 1. All persons in a household are counted as program users if a non-contributory cash transfer is received by at least one of the individuals.

While Figure 2 shows the regional pattern of the countries' cash transfer responses to the Covid-19 pandemic, the region as a whole can be divided into: (i) countries where program coverage expanded and contracted after the crisis—some more than others (Argentina, Bolivia, Brazil, Chile, Costa Rica, Ecuador, and Paraguay); (ii) countries where cash transfer coverage expanded and did not contract after the pandemic (Colombia, Dominican Republic, Mexico, and Peru); (iii) countries where cash transfer

[4] Information on the methodological approach used to identify non-contributory cash transfer program users is provided in Annex A3. Estimates in this paper differ from those in Stampini, Medellín, and Ibarrarán (2025) for two main reasons. We use different poverty lines, and we do not adjust weights to reproduce the number of program users reported in administrative data. In this paper, we use the values estimated by the household surveys, with no correction.

programs coverage did not expand substantially in response to the crisis (El Salvador, Uruguay).[5]

Countries in the region widely use information from social registries to target cash transfer programs. During the pandemic, governments expanded their social registries by promoting interoperability with administrative data in three main ways: (i) a combination of administrative data and new applications from citizens to the registry (e.g., Brazil or Chile); (ii) exclusive use of administrative data (e.g., Argentina, Colombia, Ecuador, Peru, or Uruguay); (iii) exclusive use of new applications by citizens to specific programs (e.g., El Salvador, Mexico, or Paraguay) (Berner and Van Hemelryck, 2021). Nevertheless, whether governments expanded their cash transfers during the Covid-19 crisis and contracted afterwards does not seem to be associated to how they expanded their social registries. For instance, the expansion of social registries in Ecuador, Peru, or Uruguay relied solely on interoperability with administrative data. However, our estimates suggest that these countries behaved differently in their response to cash transfer: while Ecuador expanded and then contracted its program coverage, Peru expanded without any contraction, and Uruguay did not expand the coverage of its cash transfer programs.

Programs in the region expanded not only horizontally, reaching more people, but also vertically in terms of benefit size. The average value of cash transfers rose during the crisis and remained high afterwards. In 2019, the average monthly per capita value of cash transfers in the region was US$33 (2017 PPP). During the pandemic, this amount increased by more than one and a half times to US$59. By 2022, the average per capita transfer had almost doubled, reaching US$62 (Figure 3). Our estimates are based on the value of transfers reported by the respondents at the time of the surveys. This is converted to a monthly value according to the reported payment frequency (e.g., monthly, bimonthly, one-time, etc.). Therefore, calculations do not account for the duration of any increases in the value of existing transfers.[6]

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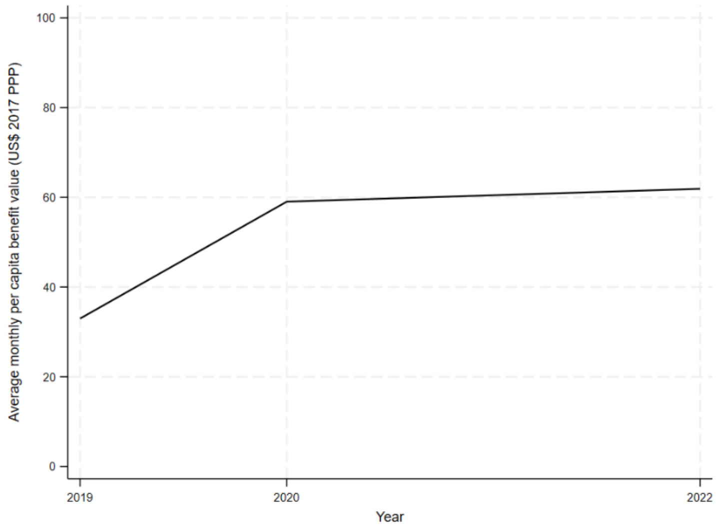
[5] In Uruguay, the main household support measures with regard to government non-contributory cash transfers consisted of expanding the benefit size of existing transfers rather than increasing program coverage (Unknown Author, 2025, paper under review).

[6] For example, if the value of a cash transfer has doubled for three months, we do not estimate a monthly increase of 25% but rather consider the doubled amount as the monthly transfer for the corresponding year, as there is no information in the survey on the duration of the increases in existing benefits. This may lead to an overestimation of the average increase in the monthly transfer if the increase is temporary and takes place at the time of the survey (or during the timeframe considered by the question in the survey). The average increase in the value of the transfer may also be underestimated if the timeframe of the question in the survey does not cover the period in which the increase took place.

Figure 3 – Average monthly per capita value of cash transfers in Latin America and the Caribbean, 2019-2022



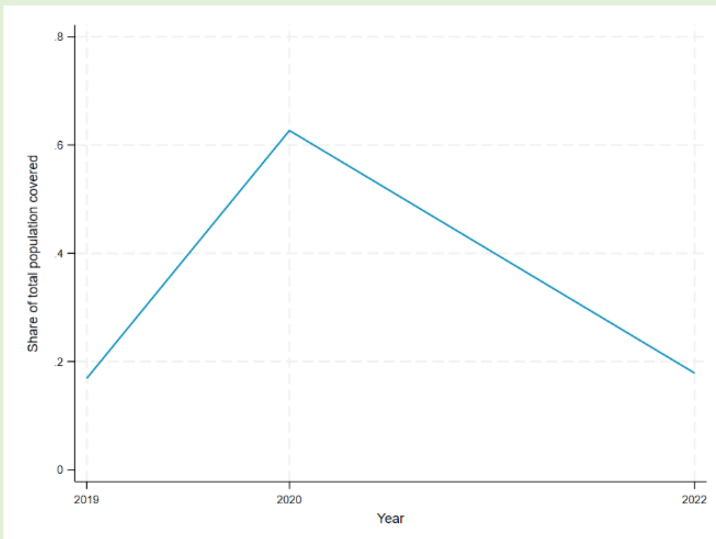
Note: See Figure 1. Estimates are based on reported benefit amounts except for Argentina. The El Salvador Household Survey only includes information on reported amounts by program for the year 2019, while the 2020 and 2022 rounds indicate the total 'amount received by the government in cash'. This information is used to calculate the household income net of cash transfers and the average amount received by cash transfer programs for these years. Weighted averages are based on the number of program users in each country.

While regional averages indicate that cash transfers expanded both horizontally and vertically during the crisis and then only partially contracted afterwards, individual countries differed in their response. In some cases, the post-crisis contraction was complete, with coverage returning to pre-Covid levels. Box 1 discusses the example of Paraguay.

Box 1. Expansion and contraction of cash transfers in Paraguay

Paraguay provides an illustrative example of a country that managed to achieve a significant expansion of cash transfer coverage during the pandemic and return to its initial levels after the crisis. Figure 4 shows that during 2020, coverage of non-contributory cash transfers reached 63% of the total population, a relative increase of 270% compared to pre-pandemic levels. Contrary to the regional trend, the country's coverage returned to its pre-crisis levels by 2022, with 18% of the total population covered.

Figure 4 – Share of total population covered by cash transfers in Paraguay, 2019-2022



Note: See Figure 1 and Figure 2.

Which measures did Paraguay implement? The country made a one-time adjustment to increase by 50% the benefit value of the *Tekoporã* conditional cash transfer, a program targeting families with school-age children, pregnant women, persons with disabilities, and indigenous people in situations of poverty (IMF, 2022; UltimaHora, 2020). The country also introduced two new programs: *Ñangareko* and *Pytyvõ*. The former was a one-off payment to provide nutritional support to vulnerable families and the latter was an emergency cash transfer for informal workers (SEN, n.d.; Velásquez Pinto, n.d.). The vertical expansion of the *Tekoporã* payment and the implementation of *Ñangareko* ended in 2021. By 2022, all payments implemented as a response to the crisis, including *Pytyvõ,* had concluded.

The main driver of coverage expansion in Paraguay was *Pytyvõ*, the largest cash transfer program the country has ever seen. The government designed this initiative rapidly and implemented it in mid-2020 (IMF, 2022). Survey estimates indicate that it covered 49.4% of the total population in 2020. However, the program's rollout was not without challenges. A key obstacle was the absence of a systematized household registry to identify who was already receiving assistance from social programs. Consequently, the country had to build a database by using administrative records, including lists of government employees, police records, and information on users of other social programs, among others, to verify information provided by individuals applying for the *Pytyvõ* cash transfer program (World Bank, 2022). Over the last few years, Paraguay has been working toward a comprehensive Household Social Registry

(Registro Social de Hogares, RSH) that contains updated information on households, individuals, and social services provided by the state, by cross-referencing different databases, including administrative records, to improve the selection of potential social program users (Díaz and Hemelryck, 2023).

The Paraguayan government delivered the *Pytyvõ* payments through electronic wallets, bank accounts, and the *Tarjeta Cédula*, a direct transfer mechanism that allowed individuals to spend money using their national identity cards (World Bank, 2022). This mechanism is similar to the one implemented in Panamá for the Vale Digital. The program leveraged the preexisting knowledge about digital platforms for managing applications and delivering benefits, including the experience gained from the *Ñangareko* program (MF 2021; Comisión Permanente MT MSE Paraguay, 2021). That is, for Paraguay's *Ñangareko* program, individuals could request enrollment by phone or by completing an online form provided by the National Emergencies Secretariat *(Secretaría de Emergencia Nacional, SEN*) (Berner and Van Hemelryck, 2021). The information received through the applications was then cross-checked with data from the Ministry of Finance, the Central Bank of Paraguay, and the Ministry of Labor, Employment and Social Security. Individuals received a code on their mobile phones that they could use to buy food or hygiene products (ibid.).

Annex A1, Table A1.12, provides information on the dynamics of coverage and benefit values for Paraguay.

2. The drivers behind the changing landscape of cash transfers

The region witnessed a substantial expansion of cash transfers in response to the pandemic, which altered the landscape of these programs even after the crisis ended. The expansion and contraction of cash transfers at the regional level was largely driven by at least three factors: the growth of unconditional programs, efforts to reach more older persons, and increased coverage in urban areas. We find no evidence of differences in the trends of coverage by gender, either at the regional or country level (see Annex A1).

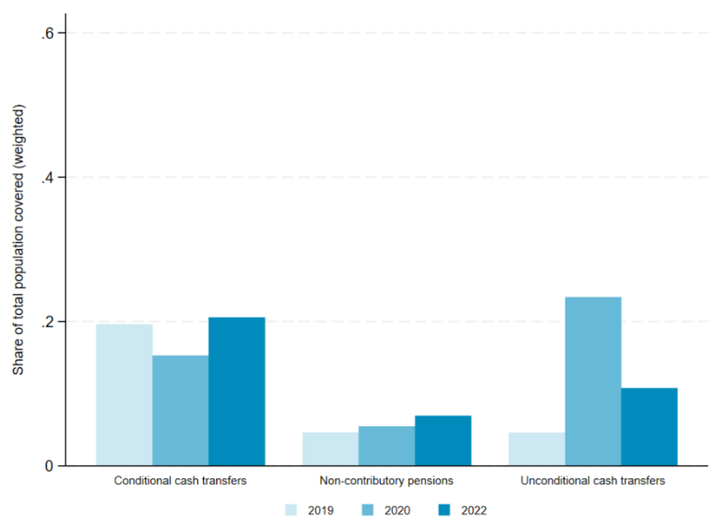
2.1 Growth of unconditional cash transfer programs

We classify non-contributory cash transfer programs into conditional cash transfers, non-contributory pensions, and unconditional cash transfers. *Conditional cash transfer* programs combine income support with measures that promote human capital development (e.g., compliance with school attendance or regular health check-ups). *Non-contributory pensions* are social pensions for older persons; they address the low coverage of contributory pensions in the region by providing income support for older persons as their income-generating ability decreases (Aranco et al., 2022). *Unconditional cash transfers* include all other non-contributory cash transfers that are no linked to old age and are unconditional; they typically include cash transfers for persons with disabilities, child allowances, or direct transfers to households to support energy-related costs.[7]

The expansion of coverage during the pandemic was greatly driven by the category of unconditional cash transfer programs (Figure 5). While in 2019 4.6% of the region's population (equivalent to 24 million persons) lived in a household with at least one user of this type of transfer, this figure grew by five times in 2020, reaching 23.4% (124.2 million persons).[8] In 2022, it contracted to 10.8% of the region's population (58.3 million people).

Non-contributory pensions also gradually expanded over time: nearly 7% of the total population (37.5 million individuals) lived in a household receiving a non-contributory pension in 2022, compared to 4.6% (24.2 million persons) in 2019. Conditional cash transfers appeared to contract in 2020, but then returned to pre-crisis levels of coverage.[9] In 2022, they reached 20.6% of the region's population (111.3 million individuals), compared to 19.6% of the population (103 million persons) in 2019. All these estimates are based on data from 13 countries in the region with available IDB Harmonized Household Survey data.

Figure 5 – Share of population covered by cash transfers in Latin America and the Caribbean, by program type, 2019-2022



[7] Subsidies such as for electricity, water, or gas are considered in the analysis only if they are cash transfers given directly to individuals or households, rather than to service providers.
[8] The raise in unconditional cash transfers would be even larger, if we consider that also conditional cash transfer programs typically suspended their conditionalities during the Covid-19 crisis (e.g., due to school closures).
[9] The drop in coverage in 2020 appears to be driven by Brazil. The number of households receiving Bolsa Família was 14,274 million in the administrative records, while the household survey estimate is only 5,180 million. This may be a problem with the data rather than a real contraction of the program. Additionally, there may be measurement error in the estimation of the program users in Brazil, since in 2022 *Bolsa Família* was replaced by *Auxílio Brasil*, yet the household survey inquired about receiving *Bolsa Família*.

Note: See Figure 1 and Figure 2. Whereas most surveys report programs separately (through specific questions), allowing for a classification into program types, in the case of Colombia and Brazil, our estimates for the category unconditional cash transfers may capture various types of programs, as categorization is based on a survey question that only indicates whether the individual receives 'other income support from the government'. More detailed information on the classification of cash transfers into the program types is provided in Annex A2. Estimated averages are weighted based on the population size within each country.

Behind the regional trend, we identify several different patterns in the dynamics of individual countries. During the pandemic, unconditional cash transfers increased in Bolivia, Brazil, Chile, Colombia, Costa Rica, the Dominican Republic, Ecuador, Paraguay and Peru. In Chile, Colombia, the Dominican Republic, and Peru, this growth in coverage persisted after the crisis, while in Bolivia, Brazil, Costa Rica, Ecuador, and Paraguay, unconditional cash transfers contracted post-pandemic. Additionally, in Brazil, Chile, and Ecuador conditional cash transfers regained coverage after the pandemic. In the Dominican Republic, this type of program was the main driver of coverage growth after the crisis. Mexico expanded non-contributory pensions, implementing a public policy that was decided prior to the pandemic, while coverage of other types of programs remained stable over time. As noted in Section 1, estimates do not suggest any substantial expansion of cash transfers in El Salvador and Uruguay in response to the pandemic.[10] Information on the countries' cash transfers identified in the surveys and their classification into the different types of program categories is provided in Annex A2, Table A2.1.

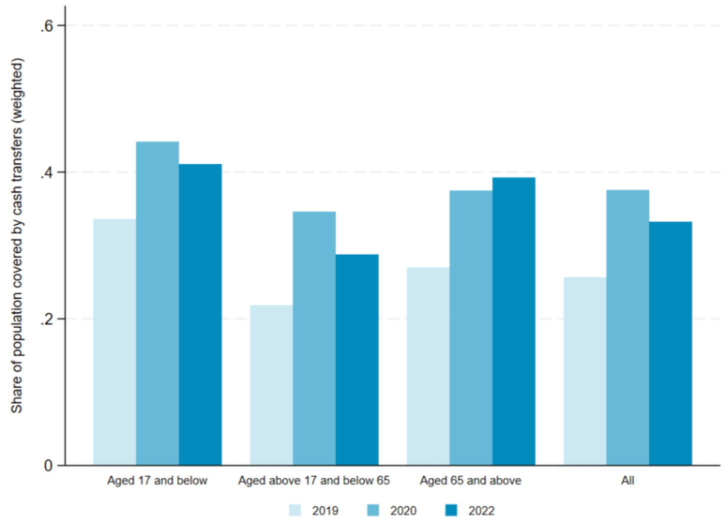
2.2 Steady expansion of coverage of older persons

While cash transfers coverage expanded in 2020 and contracted in 2022 for children and adults, it grew steadily among older persons (Figure 6). This is partly explained by the expansion of non-contributory pensions. This is the case for Mexico, as discussed in Box 2. Yet, this was not the only driver of this finding.

Most countries (Brazil, Chile, Colombia, Costa Rica, the Dominican Republic, Paraguay, and Peru) achieved increased coverage among older individuals through the growth of other unconditional cash transfers, while coverage of their non-contributory pensions remained stable over time. For example, in Chile, coverage of non-contributory pensions remained constant, whereas the percentage of the older population belonging to a household covered by a cash transfer increased by 12.5 percentage points between 2019 and 2022, a relative increase of 20% (Figure 7).

[10] The National Household Survey data for Argentina does not allow for the identification of non-contributory pensions (see Annex A1, Table A1.2).

Figure 6 – Share of population covered by cash transfers in Latin America and the Caribbean, by age group, 2019-2022



Note: See Figure 1 and Figure 2. Estimated averages are weighted based on the population size within each age group in each country.

Box 2. Expansion of non-contributory pensions in Mexico

In Mexico, the share of older persons covered by a cash transfer increased from 53% before the pandemic to 81% after the crisis, while coverage among other age groups remained stable over time (Annex A1, Table A1.11). This increase in coverage was driven by the country's expansion of the non-contributory pension. While 9% of the population lived in a household that benefited from the social pension in 2018, this figure had doubled to 18% by 2022. Looking only at older persons, in 2018, 45% lived in a household with at least one user of the non-contributory pension before the pandemic, compared to 60% in 2020 and 79% in 2022.[11]

In contrast to other countries, Mexico's national government did not expand its cash transfer programs in response to the pandemic. It only made advance payments to existing users of social pensions for older persons and people with disabilities, as well as scholarships (Lustig et al., 2020; Blofield et al., 2020). However, it must be recognized that the country made important efforts to expand cash transfers prior to the pandemic (Blofield et al., 2020). In 2019, the government reformed its existing non-contributory cash transfers: the flagship conditional cash transfer program *Prospera* was replaced by the universal non-contributory pension (*Programa Pensión para el Bienestar de Adultos Mayores)*, cash transfers for people witth permanent disabilities (*Pensión para el Bienestar por Discapacidad Permanente)*, scholarships, and programs for the unemployed youth (*Beca Universal de Educación Básica para el Bienestar Benito Juárez, Beca Universal de Educación Media Superior para el Bienestar Benito Juárez, Jóvenes Escribiendo el Futuro*, *Jóvenes Construyendo el Futuro*) (Arenas de Mesa and Robles, 2024; Programas para el Bienestar, 2024ab). These new

[11] This corresponds to 74% of older persons aged 65 and above being direct recipients of the non-contributory pension in 2022, 53% in 2020, and 38% in 2018.

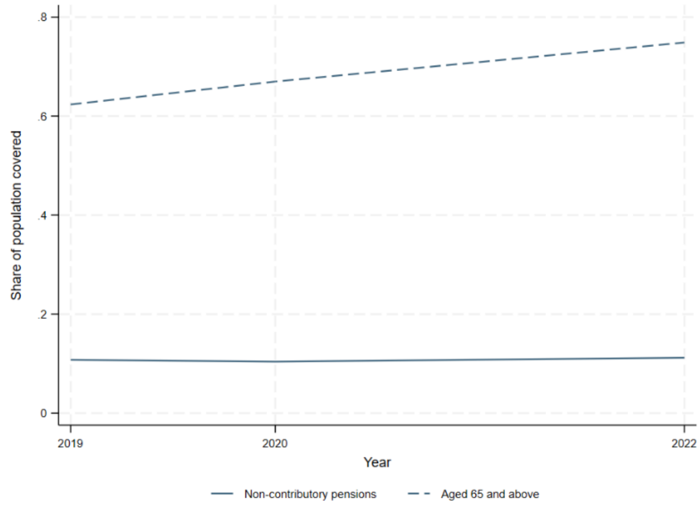
scholarships differ in their design from *Prospera* in terms of conditionalities, transfer holder, or benefit amounts (Parker and Vogl, 2024). Moreover, the government created the Support Program for the Well-being of Girls and Boys, Children of Working Mothers (*Programa de Apoyo para el Bienestar de las Niñas y Niños, Hijos de Madres Trabajadoras),* which starting from 2021 also included the preexisting Life Insurance for Female Household Heads (*Seguro de Vida para Jefas de Familia)* (Secretaría de Bienestar, 2024ab).

The universal non-contributory pension for older persons aims to improve their situation and guarantee them a dignified life. The Mexican state is obliged to enforce the delivery of this program (Programas para el Bienestar, 2024c). Between 2019 and 2021, there was a drive to expand coverage, including lowering the eligibility age from 68 to 65 for everyone (formerly, this was the age eligibility threshold for indigenous communities only). Between 2022 and 2024, the government focused on increasing the benefit amount (Arenas de Mesa and Robles, 2024; INAPAM, 2021). Household survey estimates show that the average monthly per capita transfer of the social pension rose from US$21.40 before the crisis to US$49.90 in 2020. In 2022, with US$70.60, this value is more than three times higher than before the crisis (US$ 2017 PPP).

Pensions played a crucial role in alleviating poverty among older people during the pandemic. Persons aged 65 and over were the only population group in which income poverty did not rise but even fell during the pandemic (CONEVAL, 2022a). The program already had an established budget and a country-wide structure, which allowed for quick delivery of pension advances of up to four months. Mexico utilized its registries of the Targeting System for Development *(Sistema de Focalización de Desarrollo, SIFODE)* to make these early payments (Berner and van Hemelryck, 2021). Therefore, pension expansion was part of a structural shift rather than an emergency measure that was essential for dealing with the crisis (Arenas de Mesa and Robles, 2024). The National Council for the Evaluation of Social Development Policy (CONEVAL, 2022ab; 2020) has highlighted several strengths of the Mexican social pension for older persons, including its recognition as an entitlement, its universality with age as the only eligibility criterion, the prioritization of people living in indigenous localities, the inclusion of Afro-Mexican older persons, benefit increases and inflation adjustments, and the growing use of bank accounts for delivery.

Mexico has recently announced a new initiative, the Women's Well-being Pension *(Pensión Mujeres Bienestar),* which will provide bimonthly financial support to women aged 60 to 64 starting in 2025 (Programas para el Bienestar, 2024d). This pension aims at recognizing the domestic and care work disproportionately performed by women. Upon reaching 65 years of age, program users will transition into the Pension for the Wellbeing of Older Adults (*Programa Pensión para el Bienestar de los Adultos Mayores*).

Figure 7 – Share of population covered by non-contributory pensions and share of population aged 65 and above covered by cash transfers in Chile, 2019-2022



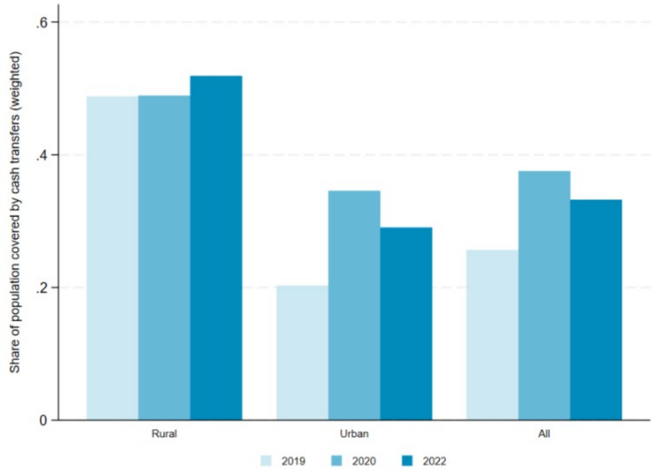
Notes: See Figure 1 and Figure 2. The non-contributory pension includes the *Pensión Básica Solidaria Vejez* (2019 and 2020) and the *Pensión Garantizada Universal* (2022).

2.3 Increased coverage in urban areas

The expansion of cash transfers was also driven by an increase in the number of urban program users. At the regional level, coverage in urban areas grew by 43.1% between 2019 and 2022—from 20.29% to 29.03% of the population (Figure 8). In contrast, the percentage of the population covered by non-contributory cash transfers in rural areas remained stable over time (at approximately 50%).

The regional trend hides considerable heterogeneity across countries. Peru achieved one of the largest growths in urban coverage in the region, with cash transfers reaching 51% of the urban population in 2022, up from just 9% in 2019 (Box 3). In Colombia, urban coverage increased in response to the pandemic in both 2020 and 2022; there was also a significant increase in rural coverage but with a delay between 2020 and 2022. In Ecuador, rural coverage expanded substantially in 2020 but then returned to its 2019 level by 2022. We present more information on the dynamics of urban and rural coverage by country over time in Annex A1.

Figure 8 – Share of population covered by cash transfers in Latin America and the Caribbean, by area of residence (urban/rural), 2019-2022



Note: See Figure 1 and Figure 2. Estimated averages are weighted based on the population size in each area within each country.

Box 3. Expansion of non-contributory cash transfers, particularly in urban areas, in Peru

Peru is an example of a country that achieved a remarkable increase in urban coverage through gradual program expansions. Household surveys estimates show that while only 9% of the urban population was covered by cash transfers before the pandemic, this figure rose to 55% during the crisis and remained at 51% in 2022.

How did Peru achieve such a large expansion in coverage of urban households? The country implemented several non-contributory cash transfer programs to help households cope with the impacts of the Covid-19 pandemic. Cash assistance to households during the crisis was initially provided through three different emergency programs, which were later combined into a single scheme. The Ministry of Social Development and Inclusion *(Ministerio de Desarrollo e Inclusión Social, MIDIS)* set up the *Bono Yo Me Quedo en Casa* to support households, mainly in urban areas, classified as poor or extremely poor in the General Household Registry *(Padrón General de Hogares, PGH)* and users of existing cash transfer programs (Roelen et al., 2021; Beazley and Irizarry, 2021).

As it became evident that certain segments of the population in need of assistance were left out, the government implemented the cash transfer *Bono Independiente* to support informal workers whose incomes were severely disrupted by the pandemic. These workers were primarily living in urban areas. Informal workers were identified through existing databases, with the General Household Registry data cross-checked with other public and private administrative records. Formal sector workers and households already benefiting from other emergency cash support were not deemed eligible for the program (Roelen et al., 2021). Additionally, Peru also established a program targeting the rural poor: the *Bono Rural*.

It then became apparent that the approach of using the General Household Registry was insufficient to reach households not captured in the existing social registry database or whose information was outdated, which were mainly urban households. This lack of up-to-date information can be partly attributed to the limited social programs in urban areas prior to the pandemic (ibid.). The country's main non-contributory social programs were designed to address rural poverty (World Bank, 2023a). Although the urbanization of poverty began before the pandemic, it accelerated with the crisis, as urban households were the most affected by the restrictive measures implemented to contain it (World Bank, 2023b).

To address the shortcomings of the three emergency programs, the Ministry of Economy and Finance *(Ministerio de Economía y Finanzas, MEF)* decided to unify them, prompting the launch of the *Bono Familiar Universal,* which combined users of the existing emergency cash transfers with individuals who had not received any of these programs and who could apply through an online on-demand registration platform, excluding those in formal employment and those with incomes above a certain threshold (Roelen et al., 2021; Beazley and Irizarry, 2021; Berner and van Hemelryck, 2021). This quasi-universal program turned into one of the highest coverage initiatives in the region, reaching more than 8 million households (Beazley and Irizarry, 2021). The last emergency program approved by the government was the *Bono 600*, which used the same targeting criteria as the *Bono Familiar Universal* but focused on extremely high-risk geographic areas (ibid.). Although the most important cash transfer programs to mitigate the consequences of the crisis were implemented in 2020, the government continued its efforts in the subsequent year. In 2021, it implemented the *Bono Yanapay* for people living in poverty and vulnerability and users of the existing programs *Juntos, Pensión 65*, and *Contigo*, aiming to reactivate the economy after the crisis (Infobae, 2022). The *Bono Yanapay* was replaced by the *Bono Alimentario* in mid-2022 (Convoca, 2023).

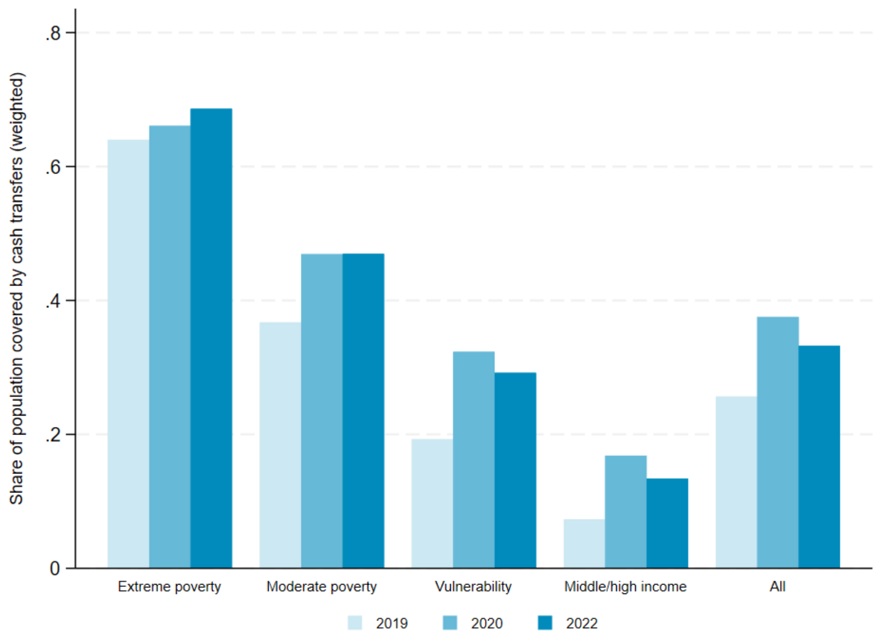
Peru's experience shows that the expansion of cash transfers in urban areas was a response to rising urban poverty rates and concerted efforts to identify vulnerable households during the pandemic. The country created a National Registry for Covid-19 interventions by combining the General Household Registry, the 2017 Population Census, the Unique Identification Registry of Natural Persons *(Registro Único de Identificación de las Personas Naturales, RUIPN)*, and the National Registry of Identification and Civil Status *(Registro Nacional de Identificación y Estado Civil, RENIEC)* (Berner and van Hemelryck, 2021; Beazley and Irizarry, 2021; World Bank, 2023a). In 2022, this registry became the National Household Registry *(Registro Nacional de Hogares, RNH)* administered by the MIDIS (Beazley and Irizarry, 2021). The process left an important legacy: an improved National Household Registry and a more adaptive social protection system. In line with this, Peru is currently working on the creation of a more inclusive, dynamic, and interoperable National Targeting System *(Sistema Nacional de Focalización, SINAFO[12]).*

[12] Supreme Decree No.° 003-2023-MIDIS (https://www.gob.pe/institucion/midis/normas-legales/4597534-003-2023-midis).

3. Persistent coverage gaps among the poorest and increased inclusion of higher-income population

In response to the pandemic, coverage of non-contributory cash transfer programs expanded across all income groups (Figure 9). However, the increase was more modest among the poorest in the region. The share of the lowest income group covered by a non-contributory cash transfers remained relatively stable over time (68.6% in 2022, compared to 64% in 2019 and 66% in 2020), while vulnerable and middle-income groups saw the largest growth in coverage.

Figure 9 – Share of population covered by cash transfers in Latin America and the Caribbean, by income group, 2019-2022



Note: See Figure 1 and Figure 2. Estimated averages are weighted based on the population size in each income group within each country.

The country-level analysis shows that although coverage rose more among higher income groups in Colombia, Peru, the Dominican Republic, and Ecuador, there was also a substantial increase in coverage among the poorest. It must also be noted that Bolivia, Brazil, Chile, and Uruguay already had a very high coverage (over 75%) of cash transfers among the poorest households before the pandemic and maintained these levels over time. More details are provided in Annex A1.

Due to the crisis, countries relaxed their poverty targeting. Before the pandemic, more than half of the program users lived in poverty, with 39% of all program users living in extreme poverty. During the pandemic, the percentage of program users living in extreme poverty dropped to 35% and 31.4% in 2020 and 2022, respectively. This represents a relative decrease of 24%. In contrast, the highest percentage increase (43%) occurred among program users in the highest income group (Figure

10). Whereas this pattern can be observed in most of the countries considered in our analysis, disaggregation shows that Chile and the Dominican Republic are two examples of countries where the share of program users belonging to the lowest income group experienced a much larger growth during the crisis (see Annex A1).

Figure 10 – Distribution of cash transfer program users in Latin America and the Caribbean, by income group, 2019-2022

Note: See Figure 1 and Figure 2. Estimated averages are weighted based on the population size of program users in each country.

While the persistent coverage gap among the lowest income groups remains a critical issue to be addressed, increased coverage among wealthier individuals should not be seen as negative per se. Some governments have started to design and introduce universal or quasi-universal cash transfer programs rather than using poverty targeting. This move toward coverage universalization indicates that countries may aim to use their safety nets to cover broader segments of the population (Box 4 discusses the example of Chile). The recent pandemic experience, which showed that crises do not affect only the lowest income groups, supports this rationale for universal access to social protection.

Box 4. Gradual steps toward program universality in Chile

Chile exemplifies the implementation of gradual steps toward program universality in at least two cases. One is the government's continuous work to improve its non-contributory pension system. In January 2022, Chile introduced the Universal Guaranteed Pension *(Pensión Garantizada Universal, PGU)*, a quasi-universal non-contributory pension for legal residents aged 65 or above.[13] It covers all individuals of the population except those in the highest 10% of the income distribution, according to the Social Household Registry *(Registro Social de Hogares, RSH)* provided they have lived in Chile for at least 20 years after reaching the age of 20. The reform replaced the country's previous schemes established after the 2008 pension reform and in place until 2022: the Solidarity Pension Supplement *(Aporte Previsional Solidario de Vejez, APS),* which targeted low-income older persons based on the level of contributory pension received, and the Basic Solidarity Old-Age Pension *(Pensión Básica Solidaria de Vejez, PBS),* which provided minimum pension guarantees to the entire population for the bottom 60% of the income distribution (ChileAtiende, 2024).[14] The Universal Guaranteed Pension (2022 to date) resulted in significantly higher levels of coverage and sufficiency compared to the previous pension programs (Arenas de Mesa and Robles, 2024; ISSA, 2023). According to the household survey estimates, 46.3% of people aged 65 and over were living in a household with at least one user of the program in 2022, covering 47.8% of women and 44.3% of men in this age group.[15] In terms of sufficiency, the flat-rate entitlement was worth 88.9% of the national poverty line in 2022 (Arenas de Mesa and Robles, 2024). A pension reform currently under discussion would extend the Universal Guaranteed Pension coverage to 100% of the population aged 65 and over (ibid.).

In transitioning to the Universal Guaranteed Pension, Chile made a substantial change to the program's targeting approach. Instead of identifying the poorest 60% of the total population, the algorithm excluded the wealthiest 10% people aged 65 and over to find the bottom 90% of the older population (Becerra et al., 2022). Later, the short law on the PGU[16], passed in January 2023, stipulated that older persons must not belong to a household in the wealthiest 10% of Chile's *total* population rather than just its 65-and-over population. Moreover, the program identifies and selects users through administrative government records, minimizing the need for individuals to engage beyond the initial application process (Arenas de Mesa and Robles, 2024).

Chile uses the Social Household Registry *(Registro Social de Hogares, RSH)* together with the Integrated Social Information System *(Sistema Integrado de Información Social, SIIS)* to identify social program users, bringing together databases from different public services and programs. There is also significant coordination to standardize data processing (Ministry of Social Development and World Bank, 2018). Households apply for inclusion in the Social Household Registry through municipalities or an online platform, where they can also update their information by inputting any new data themselves. The self-reported information is verified through home visits by municipal officials (ibid.). Household income is estimated using administrative databases of the Chilean Unemployment Fund Management Administrator

[13] Law No. 21.419 (https://www.bcn.cl/leychile/navegar?idNorma=1171923).

[14] Between 1975 and 2008, Chile implemented a non-contributory pension system in the form of the Assistance Pension (Pensiones Asistenciales, PASIS), covering very poor people not engaged in the labor market (Arenas de Mesa and Robles, 2024).

[15] According to the household survey, 38.1% of people aged 65 and above received the Universal Guaranteed Pension in 2022, corresponding to 30.2% of men and 44.1% of women of this age group.

[16] Law No. 21.538 that amended Law No. 21.419. (https://www.bcn.cl/leychile/navegar?idNorma=1188263).

(AFC Chile), the Pensions Regulator *(Superintendencia de Pensiones),* the Health Regulator *(Superintendencia de Salud),* the Internal Revenue Service *(Servicio de Impuestos Internos, SII),* and the Social Security Institute *(Instituto de Previsión Social, IPS),* in addition to information from the Civil Registry.

The pandemic experience reveals another shift toward a universality approach. The Chilean government implemented a series of policies to mitigate the negative impacts of the Covid-19 crisis. In terms of cash transfer programs, initial measures included the Covid-19 Emergency Program *(Bono de Emergencia Covid-19),* a cash transfer to support the most vulnerable households already registered in social programs, along with initiatives to support persons in formal employment (J-PAL, 2021). However, these policies did not include people without a formal job or those outside the Household Social Registry. To address this issue, the government created the Emergency Family Income *(Ingreso Familiar de Emergencia)*, which provided cash transfers for up to six months to the 60% of the most vulnerable households with informal income or formal income below a certain threshold, based on data from the Household Social Registry. Additionally, potential program users not identified through administrative data could apply. To allocate the benefits, Chile modified its targeting instrument by developing a new mechanism to measure the short-term situation of households, called Socioeconomic Emergency Indicator *(ISE).* Although this indicator is no longer used as it faced problems regarding its calculation method and exclusion errors (CIPER, 2020), it highlights the importance of recognizing and finding a way to track the changing circumstances of households during crises.

The Emergency Family Income program expanded vertically and horizontally over the months following its inception. It was first expanded to provide support to all households belonging to the most vulnerable 80% of the population, as identified by the Household Social Registry. It then turned into the Universal Emergency Family Income program *(Ingreso Familiar de Emergencia Universal)*, which only excluded those in the 10% of lowest socioeconomic vulnerability and had a monthly income above a specified threshold (Subsecretaría de Evaluación Social, 2021).

4. Way forward

The response to the Covid-19 pandemic crisis points out three key elements to be considered in developing more adaptive cash transfer systems moving forward.

First, readily available and comprehensive databases are critical for identifying persons in structural poverty, transient poverty, and economic vulnerability. The pandemic revealed that certain population groups were underrepresented in the databases used to identify persons in need of cash transfer assistance. These were mainly individuals just above the poverty line, not traditionally prioritized by cash transfer programs, such as informal workers living in urban areas. Enhancing interoperability across relevant information sources, including damage assessment data, is essential for building more inclusive social registries and cash transfer systems with higher response capabilities. Available up-to-date information also helps the recertification of program users, allowing for low-cost reassessment of eligibility.

Moreover, modern poverty mapping data built using non-traditional information sources (e.g., satellite images, electricity consumption information, or telephone consumption data) can be integrated with other social registry data to guide both recertification efforts and active search by social workers on the ground (Stampini, Medellín, and Ibarrarán 2023; Acon Monge and Tejerina, 2023). Countries in the region are increasingly investing in improving their social registries by incorporating lessons learned from the pandemic. For example, several countries are shifting toward hybrid models that combine self-reported information with administrative data, making record updating more dynamic.

Second, implementing programs with a quasi-universal focus appears relevant in view of frequent shocks or systemic crises (e.g., climate-related events, pandemics). A narrow focus on poverty-targeting may leave the vulnerable population without social protection if the process to include new program users or the targeting system do not address the dynamic nature of vulnerability. Historical gaps in coverage among people living in extreme poverty highlight the limitations of strict poverty targeting (Robles et al., 2019). Certain trends in some countries reveal an increased emphasis on addressing structural gaps and acknowledging the potential of quasi-universal protection. For example, through the implementation of a quasi-universal program like Pase-U / Beca Universal in Panama, the country has achieved high coverage among the poorest.

Third, in the case of non-contributory programs with a clear contributory counterpart, like pensions, the expansion of non-contributory programs makes the integration of contributory and non-contributory pillars more important than ever. To design a non-contributory pension with the best possible labor incentives, a universal non-contributory pension would be optimal. To extend pension coverage with the lowest possible fiscal cost, non-contributory benefits would only be given to those without a contributory pension.

Finally, socioeconomic data in the region is currently used primarily for response rather than anticipatory action. There is an opportunity to use data proactively to enhance system resilience and explore how cash transfers can be used as a tool to increase preparedness.

5. Limitations

Our study is subject to certain limitations. First, the analysis covers the period from 2019 to 2022, considering the year 2022 as post-pandemic. While this is accurate for many countries, some 2022 surveys may still report on cash transfer programs initiated in response to the Covid-19 crisis. For instance, Colombia's 2022 survey data include the *Ingreso Solidario* program under 'Other government support in cash' *(Otras ayudas del gobierno en dinero)* (Annex A2, Table A2.1). Such inclusion may partly explain the post-crisis increase in unconditional cash transfers (see Annex A1, Table A1.6 for the example on Colombia). It is therefore crucial to continue analyzing potential changes in the years following 2022, to better understand the post-pandemic landscape of cash transfer programs.

Second, our calculations of the monthly benefit amount received through non-contributory cash transfers do not account for the duration of any increases in the value of existing transfers (as explained in Section 1). This may lead to an overestimation of the amount received through the programs. For more accurate estimates of the changes in benefit size, more detailed information on program execution and regulations would need to be considered.

Third, household survey data in the region tends to underestimate the number of cash transfer program users due to underreporting (Villatoro y Cecchini, 2018; Cecchini, Villatoro, and Mancero, 2021; Stampini, Medellin, and Ibarrarán, 2025) and the fact that countries' household surveys do not include questions on all cash transfer programs. Furthermore, renaming existing programs can cause measurement errors when distinguishing between conditional and unconditional cash transfers. This occurs when survey respondents report receiving the program under its previous name, potentially misclassifying the type of transfer received. In line with this, the underestimation is likely to be higher during the pandemic than pre- and post-crisis (as exemplified by Brazil's *Bolsa Família* program in Section 2 and in Annex A3). This implies that the overall increase in non-contributory cash transfer coverage during the pandemic might be even higher and even more largely driven by *unconditional cash transfers* than estimated. In this paper, we do not adjust survey weights to correct for this underestimation. Additional information on the methodological considerations of this study is provided in Annex 3.

Finally, the study uses only a monetary poverty measure, which is based on reported income as opposed to consumption. This is because all countries include survey questions on individual and household income rather than on consumption. Additionally, poverty is defined in terms of per capita household income, and all individuals within a household where at least one person receives a cash transfer program are considered program users. These definitions do not account for potential imbalances in resource allocation to individuals within the household.

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Annex

A1. Coverage indicators, regional and by country, 2019-2022

Table A1.1: Regional averages (weighted)

	2019	2020	2022
Coverage of total population	0.26	0.38	0.33
Coverage, by income group			
Extreme poverty:	0.64	0.66	0.69
Moderate poverty:	0.37	0.47	0.47
Vulnerability:	0.19	0.32	0.29
Middle/high income:	0.07	0.17	0.13
Distribution of program users among income groups			
Extreme poverty:	0.39	0.35	0.31
Moderate poverty:	0.27	0.26	0.26
Vulnerability:	0.25	0.26	0.29
Middle/high income:	0.09	0.12	0.13
Population coverage, by program type			
Conditional cash transfers	0.20	0.15	0.21
Non-contributory pensions	0.05	0.05	0.07
Unconditional cash transfers	0.05	0.23	0.11
Coverage, by age group			
0-17	0.34	0.44	0.41
18-64	0.22	0.35	0.29
65 and over	0.27	0.37	0.39
Coverage, by area			
Urban	0.20	0.35	0.29
Rural	0.49	0.49	0.52
Coverage, by gender			
Females	0.26	0.38	0.34
Males	0.25	0.37	0.33
Average per-capita transfer per month			
US$ 2017 PPP	32.98	59.04	61.89

Table A1.2: Argentina

	2019	2020	2022
Coverage of total population	0.14	0.20	0.14
Coverage, by income group			
Extreme poverty:	0.35	0.43	0.28
Moderate poverty:	0.33	0.39	0.31
Vulnerability:	0.12	0.16	0.12
Middle/high income:	0.01	0.03	0.02
Distribution of program users among income groups			
Extreme poverty:	0.47	0.50	0.45
Moderate poverty:	0.25	0.24	0.25
Vulnerability:	0.23	0.21	0.25
Middle/high income:	0.04	0.05	0.05
Population coverage, by program type			
Conditional cash transfers	0.14	0.20	0.13
Non-contributory pensions	n/a	n/a	n/a
Unconditional cash transfers	<0.00	<0.00	<0.00
Coverage, by age group			
0-17	0.27	0.35	0.25
18-64	0.11	0.17	0.11
65 and over	0.01	0.01	0.01
Coverage, by area			
Urban	0.14	0.20	0.14
Rural	n/a	n/a	n/a
Coverage, by gender			
Females	0.14	0.20	0.14
Males	0.14	0.21	0.14
Average per-capita transfer per month			
US$ 2017 PPP	177.33	196.34	572.53
Local currency (nominal)	1300.28	2175.90	6344.85
US$ (nominal)	27.01	30.85	48.58

Note: The Argentina Permanent Household Survey (Encuesta Permanente de Hogares, EPH) is representative of urban households only. As the survey does not include a specific question on the country's cash transfer programs, an approximation is used to identify users of the conditional cash transfer program Asignación Universal por Hijo (AUH) and the unconditional cash transfer AUH por Hijo con discapacidad. The Tarjeta Alimentar (TA) is counted as part of the AUH since all AUH program users with children below age 14 (in the year 2022) and children under the age of 6 (in the year 2020) receive this program. The TA started in December 2019/early 2020. Users of the AUH program are identified as those who are eligible and report receiving a subsidy, regardless of the reported amount. Benefit amounts are imputed according to the regulations in force. The survey does not allow the identification of non-contributory pensions.

Table A1.3: Bolivia

	2019	2020	2022
Coverage of total population	0.72	0.98	0.74
Coverage, by income group			
Extreme poverty:	0.87	1.00	0.88
Moderate poverty:	0.83	0.99	0.86
Vulnerability:	0.78	0.99	0.81
Middle/high income:	0.62	0.96	0.63
Distribution of program users among income groups			
Extreme poverty:	0.12	0.14	0.14
Moderate poverty:	0.13	0.14	0.14
Vulnerability:	0.35	0.32	0.36
Middle/high income:	0.40	0.41	0.36
Population coverage, by program type			
Conditional cash transfers	0.57	0.54	0.58
Non-contributory pensions	0.21	0.25	0.23
Unconditional cash transfers	0.02	0.96	0.02
Coverage, by age group			
0-17	0.81	0.99	0.84
18-64	0.62	0.97	0.65
65 and over	0.98	0.99	0.98
Coverage, by area			
Urban	0.69	0.97	0.71
Rural	0.78	0.99	0.83
Coverage, by gender			
Females	0.73	0.98	0.75
Males	0.71	0.97	0.74
Average per-capita transfer per month			
US$ 2017 PPP	19.93	17.85	21.20
Local currency (nominal)	50.34	45.08	53.54
US$ (nominal)	7.29	6.52	7.75

Table A1.4: Brazil

	2019	2020	2022
Coverage of total population	0.22	0.37	0.27
Coverage, by income group			
Extreme poverty:	0.76	0.84	0.82
Moderate poverty:	0.34	0.51	0.43
Vulnerability:	0.11	0.27	0.16
Middle/high income:	0.02	0.09	0.03
Distribution of program users among income groups			
Extreme poverty:	0.56	0.46	0.50
Moderate poverty:	0.27	0.25	0.28
Vulnerability:	0.15	0.21	0.18
Middle/high income:	0.02	0.08	0.04
Population coverage, by program type			
Conditional cash transfers	0.18	0.10	0.23
Non-contributory pensions	0.01	0.01	0.02
Unconditional cash transfers	0.04	0.29	0.05
Coverage, by age group			
0-17	0.34	0.46	0.40
18-64	0.19	0.36	0.24
65 and over	0.12	0.20	0.14
Coverage, by area			
Urban	0.18	0.33	0.23
Rural	0.46	0.57	0.49
Coverage, by gender			
Females	0.22	0.37	0.27
Males	0.22	0.36	0.26
Average per-capita transfer per month			
US$ 2017 PPP	44.29	90.37	78.15
Local currency (nominal)	105.37	215.04	185.96
US$ (nominal)	26.71	41.71	36.01

Note: *Unconditional cash transfers* include 'BPC (PwD)' and 'Outro programa social do governo' (see Annex A2, Table A2.1).

Table A1.5: Chile

	2019*	2020	2022
Coverage of total population	0.52	0.62	0.57
Coverage, by income group			
Extreme poverty:	0.81	0.91	0.77
Moderate poverty:	0.75	0.84	0.76
Vulnerability:	0.62	0.70	0.70
Middle/high income:	0.32	0.39	0.42
Distribution of program users among income groups			
Extreme poverty:	0.11	0.21	0.10
Moderate poverty:	0.20	0.19	0.13
Vulnerability:	0.42	0.34	0.38
Middle/high income:	0.27	0.25	0.39
Population coverage, by program type			
Conditional cash transfers	0.16	0.11	0.15
Non-contributory pensions	0.11	0.10	0.11
Unconditional cash transfers	0.46	0.59	0.51
Coverage, by age group			
0-17	0.62	0.69	0.63
18-64	0.46	0.58	0.51
65 and over	0.62	0.67	0.75
Coverage, by area			
Urban	0.50	0.60	0.55
Rural	0.68	0.77	0.67
Coverage, by gender			
Females	0.53	0.63	0.59
Males	0.51	0.61	0.54
Average per-capita transfer per month			
US$ 2017 PPP	36.25	55.84	66.63
Local currency (nominal)	16794.04	25868.13	30866.21
US$ (nominal)	25.88	32.63	35.34

Note: *Refers to data from the 2017 household survey *(Encuesta de Caracterización Socioeconómica Nacional, CASEN)*, due to data availability.

Table A1.6: Colombia

	2019	2020	2022
Coverage of total population	0.21	0.23	0.32
Coverage, by income group			
Extreme poverty:	0.44	0.36	0.60
Moderate poverty:	0.29	0.28	0.45
Vulnerability:	0.14	0.17	0.27
Middle/high income:	0.03	0.04	0.06
Distribution of program users among income groups			
Extreme poverty:	0.45	0.48	0.41
Moderate poverty:	0.31	0.29	0.29
Vulnerability:	0.20	0.19	0.24
Middle/high income:	0.04	0.04	0.06
Population coverage, by program type			
Conditional cash transfers	0.14	0.12	0.12
Non-contributory pensions	0.07	0.06	0.07
Unconditional cash transfers	0.02	0.08	0.20
Coverage, by age group			
0-17	0.26	0.27	0.39
18-64	0.16	0.20	0.28
65 and over	0.31	0.29	0.37
Coverage, by area			
Urban	0.15	0.24	0.26
Rural	0.39	0.22	0.52
Coverage, by gender			
Females	0.21	0.23	0.32
Males	0.20	0.23	0.32
Average per-capita transfer per month			
US$ 2017 PPP	14.09	15.40	23.62
Local currency (nominal)	20679.22	22600.93	34652.45
US$ (nominal)	6.30	6.12	8.14

Note: Unconditional cash transfers include all programs captured under 'Otras ayudas en dinero del gobierno' (see Annex A2, Table A2.1).

Table A1.7: Costa Rica

	2019	2020	2022
Coverage of total population	0.30	0.46	0.27
Coverage, by income group			
Extreme poverty:	0.70	0.79	0.70
Moderate poverty:	0.54	0.62	0.49
Vulnerability:	0.36	0.49	0.28
Middle/high income:	0.09	0.20	0.07
Distribution of program users among income groups			
Extreme poverty:	0.25	0.29	0.29
Moderate poverty:	0.26	0.24	0.28
Vulnerability:	0.35	0.30	0.31
Middle/high income:	0.14	0.17	0.12
Population coverage, by program type			
Conditional cash transfers	0.23	0.23	0.19
Non-contributory pensions	0.05	0.06	0.06
Unconditional cash transfers	0.08	0.29	0.06
Coverage, by age group			
0-17	0.43	0.57	0.40
18-64	0.25	0.43	0.22
65 and over	0.28	0.37	0.27
Coverage, by area			
Urban	0.25	0.42	0.22
Rural	0.44	0.57	0.39
Coverage, by gender			
Females	0.31	0.46	0.27
Males	0.30	0.45	0.26
Average per-capita transfer per month			
US$ 2017 PPP	43.65	80.59	59.77
Local currency (nominal)	15761.01	29102.44	21583.45
US$ (nominal)	26.84	49.76	33.35

Note: The household survey *(Encuesta Nacional de Hogares, ENAHO)* does not include information on the amount received from the *Red de Cuido* program.

Table A1.8: Dominican Republic

	2019	2020	2022
Coverage of total population	0.29	0.44	0.39
Coverage, by income group			
Extreme poverty:	0.50	0.64	0.60
Moderate poverty:	0.35	0.53	0.50
Vulnerability:	0.32	0.44	0.40
Middle/high income:	0.17	0.24	0.23
Distribution of program users among income groups			
Extreme poverty:	0.15	0.20	0.15
Moderate poverty:	0.24	0.31	0.26
Vulnerability:	0.42	0.36	0.42
Middle/high income:	0.19	0.13	0.17
Population coverage, by program type			
Conditional cash transfers	0.26	0.23	0.38
Non-contributory pensions	0.02	0.01	0.01
Unconditional cash transfers	0.29	0.44	0.33
Coverage, by age group			
0-17	0.28	0.42	0.37
18-64	0.28	0.42	0.37
65 and over	0.40	0.61	0.54
Coverage, by area			
Urban	0.27	0.42	0.37
Rural	0.39	0.54	0.48
Coverage, by gender			
Females	0.29	0.44	0.39
Males	0.29	0.44	0.39
Average per-capita transfer per month			
US$ 2017 PPP	15.57	78.54	30.64
Local currency (nominal)	373.47	1883.21	734.89
US$ (nominal)	7.28	33.32	13.33

Table A1.9: Ecuador

	2019	2020	2022
Coverage of total population	0.21	0.35	0.28
Coverage, by income group			
Extreme poverty:	0.55	0.60	0.65
Moderate poverty:	0.26	0.47	0.39
Vulnerability:	0.12	0.25	0.19
Middle/high income:	0.02	0.05	0.02
Distribution of program users among income groups			
Extreme poverty:	0.50	0.41	0.44
Moderate poverty:	0.28	0.33	0.32
Vulnerability:	0.19	0.23	0.22
Middle/high income:	0.03	0.03	0.02
Population coverage, by program type			
Conditional cash transfers	0.20	0.25	0.27
Non-contributory pensions	n/a	n/a	n/a
Unconditional cash transfers	0.01	0.13	0.01
Coverage, by age group			
0-17	0.25	0.42	0.35
18-64	0.17	0.30	0.25
65 and over	0.27	0.33	0.23
Coverage, by area			
Urban	0.09	0.23	0.20
Rural	0.45	0.59	0.45
Coverage, by gender			
Females	0.21	0.34	0.27
Males	0.21	0.35	0.29
Average per-capita transfer per month			
US$ 2017 PPP	33.90	26.06	33.67
Local currency (nominal)	19.50	14.99	19.37
US$ (nominal)	19.50	14.99	19.37

Note: The household survey *(Encuesta Nacional de Empleo, Desempleo y Subempleo, ENEMDU*) does not report on the country's non-contributory pensions.

Table A1.10: El Salvador

	2019	2020	2022
Coverage of total population	0.03	0.02	0.03
Coverage, by income group			
Extreme poverty:	0.08	0.04	0.04
Moderate poverty:	0.03	0.02	0.04
Vulnerability:	0.01	0.01	0.02
Middle/high income:	0.01	0.00	0.02
Distribution of program users among income groups			
Extreme poverty:	0.45	0.53	0.32
Moderate poverty:	0.32	0.20	0.31
Vulnerability:	0.20	0.23	0.25
Middle/high income:	0.04	0.03	0.13
Population coverage, by program type			
Conditional cash transfers	0.01	0.01	0.02
Non-contributory pensions	0.01	0.01	0.00
Unconditional cash transfers	n/a	n/a	n/a
Coverage, by age group			
0-17	0.03	0.02	0.04
18-64	0.02	0.01	0.02
65 and over	0.05	0.04	0.03
Coverage, by area			
Urban	0.01	0.01	0.03
Rural	0.04	0.04	0.03
Coverage, by gender			
Females	0.03	0.02	0.03
Males	0.03	0.02	0.03
Average per-capita transfer per month			
US$ 2017 PPP	20.39	17.24	3.18
Local currency (nominal)	10.70	9.05	1.67
US$ (nominal)	10.70	9.05	1.67

Note: The household survey *(Encuesta de Hogares de Propósitos Múltiples, EHPM)* only includes information on reported amounts by program for 2019. For 2020 and 2022, surveys indicate the total 'amount received by the government in cash'. This information is considered to calculate household income net of cash transfers and the average amount received from cash transfer programs for these years. There is no information on the amount received from scholarships. The household survey does not report on any unconditional cash transfers.

Table A1.11: Mexico

	2019*	2020	2022
Coverage of total population	0.32	0.33	0.38
Coverage, by income group			
Extreme poverty:	0.67	0.50	0.63
Moderate poverty:	0.43	0.38	0.46
Vulnerability:	0.26	0.30	0.36
Middle/high income:	0.11	0.21	0.24
Distribution of program users among income groups			
Extreme poverty:	0.30	0.23	0.17
Moderate poverty:	0.32	0.30	0.26
Vulnerability:	0.29	0.32	0.38
Middle/high income:	0.09	0.15	0.19
Population coverage, by program type			
Conditional cash transfers	0.25	0.21	0.21
Non-contributory pensions	0.09	0.13	0.18
Unconditional cash transfers	0.01	0.02	0.03
Coverage, by age group			
0-17	0.36	0.35	0.39
18-64	0.27	0.27	0.30
65 and over	0.53	0.63	0.81
Coverage, by area			
Urban	0.24	0.29	0.34
Rural	0.56	0.44	0.50
Coverage, by gender			
Females	0.33	0.33	0.39
Males	0.31	0.32	0.36
Average per-capita transfer per month			
US$ 2017 PPP	20.84	33.04	45.96
Local currency (nominal)	221.24	334.85	465.82
US$ (nominal)	10.98	15.58	23.14

Note: *Refers to data from the 2018 household survey (*Encuesta Nacional de Ingresos y Gastos de los Hogares, ENIGH)*, due to data availability.

Table A1.12: Paraguay

	2019	2020	2022
Coverage of total population	0.17	0.63	0.18
Coverage, by income group			
Extreme poverty:	0.45	0.79	0.40
Moderate poverty:	0.28	0.80	0.31
Vulnerability:	0.14	0.68	0.15
Middle/high income:	0.03	0.40	0.04
Distribution of program users among income groups			
Extreme poverty:	0.39	0.16	0.32
Moderate poverty:	0.28	0.25	0.32
Vulnerability:	0.26	0.40	0.29
Middle/high income:	0.07	0.20	0.08
Population coverage, by program type			
Conditional cash transfers	0.10	0.10	0.09
Non-contributory pensions	0.08	0.09	0.10
Unconditional cash transfers	0.00	0.56	0.00
Coverage, by age group			
0-17	0.18	0.65	0.19
18-64	0.13	0.61	0.14
65 and over	0.43	0.67	0.49
Coverage, by area			
Urban	0.09	0.60	0.12
Rural	0.31	0.67	0.28
Coverage, by gender			
Females	0.17	0.63	0.18
Males	0.17	0.63	0.18
Average per-capita transfer per month			
US$ 2017 PPP	37.96	12.99	48.78
Local currency (nominal)	95071.14	32525.14	122186.98
US$ (nominal)	15.23	4.80	17.50

Table A1.13: Peru

	2019	2020	2022
Coverage of total population	0.19	0.63	0.58
Coverage, by income group			
Extreme poverty:	0.60	0.81	0.84
Moderate poverty:	0.31	0.72	0.74
Vulnerability:	0.11	0.57	0.55
Middle/high income:	0.02	0.31	0.31
Distribution of program users among income groups			
Extreme poverty:	0.42	0.36	0.22
Moderate poverty:	0.34	0.28	0.31
Vulnerability:	0.22	0.28	0.36
Middle/high income:	0.03	0.08	0.12
Population coverage, by program type			
Conditional cash transfers	0.12	0.15	0.12
Non-contributory pensions	0.05	0.05	0.05
Unconditional cash transfers	0.08	0.62	0.55
Coverage, by age group			
0-17	0.23	0.69	0.62
18-64	0.15	0.60	0.56
65 and over	0.27	0.57	0.62
Coverage, by area			
Urban	0.09	0.55	0.51
Rural	0.56	0.93	0.88
Coverage, by gender			
Females	0.19	0.63	0.58
Males	0.19	0.62	0.58
Average per-capita transfer per month			
US$ 2017 PPP	17.84	17.55	13.65
Local currency (nominal)	34.14	33.58	26.13
US$ (nominal)	10.23	9.61	6.81

Table A1.14: Uruguay

	2019	2020	2022
Coverage of total population	0.25	0.23	0.23
Coverage, by income group			
Extreme poverty:	0.96	0.91	0.93
Moderate poverty:	0.76	0.68	0.70
Vulnerability:	0.34	0.29	0.32
Middle/high income:	0.05	0.04	0.04
Distribution of program users among income groups			
Extreme poverty:	0.25	0.24	0.21
Moderate poverty:	0.28	0.33	0.32
Vulnerability:	0.36	0.34	0.38
Middle/high income:	0.12	0.10	0.10
Population coverage, by program type			
Conditional cash transfers	0.19	0.18	0.19
Non-contributory pensions	0.02	0.01	0.01
Unconditional cash transfers	0.13	0.13	0.12
Coverage, by age group			
0-17	0.39	0.38	0.38
18-64	0.21	0.20	0.20
65 and over	0.16	0.13	0.12
Coverage, by area			
Urban	0.24	0.22	0.23
Rural	0.31	0.30	0.28
Coverage, by gender			
Females	0.26	0.24	0.24
Males	0.24	0.23	0.23
Average per-capita transfer per month			
US$ 2017 PPP	71.21	69.12	80.36
Local currency (nominal)	1825.72	1772.27	2060.46
US$ (nominal)	51.79	42.18	50.05

Note: While the Uruguay Household Survey *(Encuesta Continua de Hogares, ECH)* for 2019 reports the amounts received for the *Asignaciones Familiares* and *Tarjeta Uruguay Social* programs, it does not include questions on the specific 'pensions' (listed in Annex A2, Table A2.1, Uruguay) but only on whether a person is receiving support ('pensionista') and the source of the funds received as pensions. In our analysis, an approximation is used to identify program users and to calculate the amounts received.

A2. Non-contributory cash transfer programs identified in surveys

Table A2.1: Programs identified in surveys, by country and year

Program name	Program type	2019*	2020	2022
Argentina *Encuesta Permanente de Hogares Continua (EPHC), s2*				
Asignación Universal por Hijo (incluye Tarjeta Alimentar –a partir de 2020– y Ayuda Escolar)	Conditional cash transfer	✓	✓	✓
Asignación Universal por Hijo con discapacidad (incluye Tarjeta Alimentar –a partir de 2020– y Ayuda Escolar)	Unconditional cash transfer	✓	✓	✓
Bolivia *Encuesta de Hogares (ECH), m11*				
Bono Juancito Pinto	Conditional cash transfer	✓	✓	✓
Bono Juana Azurduy	Conditional cash transfer	✓	✓	✓
Renta Dignidad	Non-contributory pension	✓	✓	✓
Bono de Indigencia por Ceguera o Bono mensual para Personas con Discapacidad	Unconditional cash transfer	✓	✓	✓
Bono de Natalidad	Unconditional cash transfer	✓	✓	✓
Bono Canasta Familiar	Unconditional cash transfer		✓	
Bono Familia	Unconditional cash transfer		✓	
Bono Universal	Unconditional cash transfer		✓	
Brazil *Pesquisa Nacional por Amostra de Domicílios Contínua (PNADC), a*				
Bolsa Família	Conditional cash transfer	✓	✓	✓
Benefício Asistencial de Prestação Continuada (pension for older persons)	Non-contributory pension	✓	✓	✓
Benefício Asistencial de Prestação Continuada (allowance for persons with disabilities)	Unconditional cash transfer	✓	✓	✓
Outro programa social do governo	Unconditional cash transfer	✓	✓	✓
Chile* *Encuesta de Caracterización Socioeconómica Nacional (CASEN), m11/m12/m1*				
Bono Base Familiar	Conditional cash transfer	✓	✓	✓
Bono Control Niño Sano	Conditional cash transfer	✓	✓	✓
Bono de Protección Familiar	Conditional cash transfer	✓	✓	✓
Bono Deberes por Asistencia Escolar	Conditional cash transfer	✓	✓	✓
Bono por Logro Escolar	Conditional cash transfer	✓	✓	✓
Subsidio familiar al menor o recién nacido	Conditional cash transfer	✓	✓	✓

Aporte Familiar Permanente (ex Bono Marzo)	Unconditional cash transfer	✓	✓	✓
Aporte para la Canasta de Alimentos	Unconditional cash transfer	✓	✓	✓
Asignación Familiar	Unconditional cash transfer	✓	✓	✓
Bono al Trabajo de la Mujer	Unconditional cash transfer	✓	✓	✓
Bono Bodas de Oro	Unconditional cash transfer	✓	✓	✓
Bono de Invierno	Unconditional cash transfer	✓	✓	✓
Pensión Básica Solidaria Invalidez	Unconditional cash transfer	✓	✓	✓
Subsidio a la discapacidad mental, física o sensorial severa	Unconditional cash transfer	✓	✓	✓
Subsidio de Empleo Joven	Unconditional cash transfer	✓	✓	✓
Subsidio familiar a la madre	Unconditional cash transfer	✓	✓	✓
Subsidio familiar de asistencia maternal	Unconditional cash transfer	✓	✓	✓
Subsidio familiar por invalidez	Unconditional cash transfer	✓	✓	✓
Pensión Básica Solidaria Vejez	Non-contributory pension	✓	✓	
Becas estatales	Conditional cash transfer	✓		✓
IFE Universal	Unconditional cash transfer		✓	✓
Bono Ayuda Familiar	Unconditional cash transfer		✓	
Bono Clase Media	Unconditional cash transfer		✓	
Bono de Emergencia Covid-19	Unconditional cash transfer		✓	
Pensión Garantizada Universal No Contributiva	Non-contributory pension			✓
Bono Chile Apoya de Invierno	Unconditional cash transfer			✓
IFE Laboral	Unconditional cash transfer			✓
Subsidio Protege	Unconditional cash transfer			✓
Colombia *Gran Encuesta Integrada de Hogares (GEIH), t3*				
Jóvenes en Acción	Conditional cash transfer	✓	✓	✓
Más Familias en Acción	Conditional cash transfer	✓	✓	✓
Colombia Mayor	Non-contributory pension	✓	✓	✓
Otras ayudas en dinero del gobierno	Unconditional cash transfer	✓	✓	✓

Costa Rica *Encuesta Nacional de Hogares (ENAHO), m7*				
Avancemos	Conditional cash transfer	✓	✓	✓
Becas (públicas)	Conditional cash transfer	✓	✓	✓
Régimen no contributivo de pensiones por monto básico (personas adultas mayores)	Non-contributory pension	✓	✓	✓
Otras ayudas en dinero (del IMAS)	Unconditional cash transfer	✓	✓	✓
Régimen no contributivo de pensiones por monto básico (personas inválidas, viudas desamparadas, huérfanos indigentes)	Unconditional cash transfer	✓	✓	✓
Crecemos	Conditional cash transfer	✓	✓	
Ayudas económicas del gobierno por la pandemia	Unconditional cash transfer		✓	
Bono Proteger	Unconditional cash transfer		✓	
Red de Cuido	Unconditional cash transfer	✓	✓	✓
Dominican Republic *Encuesta Nacional Continua de Fuerza de Trabajo (ENCFT), t4*				
Incentivo a la Educación Superior	Conditional cash transfer	✓	✓	✓
Incentivo Asistencia Escolar	Conditional cash transfer	✓	✓	✓
Programa Protección a la Vejez	Non-contributory pension	✓	✓	✓
Bono Gas hogar	Unconditional cash transfer	✓	✓	✓
Bono Luz	Unconditional cash transfer	✓	✓	✓
Comer es primero	Conditional cash transfer	✓	✓	
Bono Escolar Estudiante Progreso	Conditional cash transfer	✓		✓
Programa de apoyo a trabajadores informales (Pa'Ti)	Unconditional cash transfer		✓	
Quédate en Casa	Unconditional cash transfer		✓	
Supérate	Conditional cash transfer			✓
Ecuador *Encuesta Nacional de Empleo, Desempleo y Subempleo (ENEMDU), m12*				
Bono de Desarrollo Humano	Conditional cash transfer	✓	✓	✓
Bono Joaquín Gallegos Lara	Unconditional cash transfer	✓	✓	✓
Bono de Apoyo Nutricional	Unconditional cash transfer		✓	
Bono de Protección Familiar	Unconditional cash transfer		✓	
El Salvador				

Encuesta de Hogares de Propósitos Múltiples (EHPM), a				
Becas (Beca de cuota escolar y Beca para matrícula)	Conditional cash transfer	✓	✓	✓
Bono para Comunidades Solidarias (rurales y urbanas)	Conditional cash transfer	✓	✓	✓
Pensión Básica Universal	Non-contributory pension	✓	✓	✓
Mexico* *Encuesta Nacional de Ingresos y Gastos de los Hogares (ENIGH), m8-m12*				
Becas provenientes del gobierno	Conditional cash transfer	✓	✓	✓
Pensión para el Bienestar de las Personas Adultas Mayores (antes Programa 65 y más)	Non-contributory pension	✓	✓	✓
Prospera (Oportunidades, Progresa)	Conditional cash transfer	✓		
Programa Empleo Temporal	Unconditional cash transfer	✓		
Tarjeta SinHambre (PAL)	Unconditional cash transfer	✓		
Beca Universal de Educación Básica para el Bienestar Benito Juárez (antes PROSPERA)	Conditional cash transfer		✓	✓
Beca Universal de Educación Media Superior para el Bienestar Benito Juárez (antes PROSPERA)	Conditional cash transfer		✓	✓
Jóvenes Construyendo el Futuro	Conditional cash transfer		✓	✓
Jóvenes Escribiendo el Futuro (Educación Superior)	Conditional cash transfer		✓	✓
Pensión para el Bienestar por Discapacidad Permanente	Unconditional cash transfer		✓	✓
Programa de Apoyo para el Bienestar de las Niñas y Niños, Hijos de Madres Trabajadoras (antes Estancias infantiles)	Unconditional cash transfer		✓	✓
Seguro de Vida para Jefas de Familia	Unconditional cash transfer		✓	✓
Peru *Encuesta Nacional de Hogares (ENAHO), a*				
Juntos	Conditional cash transfer	✓	✓	✓
Programa Beca 18	Conditional cash transfer	✓	✓	✓
Pensión 65	Non-contributory pension	✓	✓	✓
Bono gas (FISE)	Unconditional cash transfer	✓	✓	✓
Bono Familiar Universal	Unconditional cash transfer		✓	
Bono Independiente	Unconditional cash transfer		✓	
Bono Yo me quedo en casa	Unconditional cash transfer		✓	
Bono Rural	Unconditional cash transfer		✓	
Bono Niño universal	Unconditional cash transfer			✓

Bono Yanapay	Unconditional cash transfer			✓
Bono alimentario	Unconditional cash transfer			✓
Programa social Contigo	Unconditional cash transfer			✓
Paraguay *Encuesta Permanente de Hogares Continua (EPHC), t4*				
Tekoporã	Conditional cash transfer	✓	✓	✓
Adulto Mayor	Non-contributory pension	✓	✓	✓
Pytyvõ	Unconditional cash transfer		✓	
Ñangareko	Unconditional cash transfer		✓	
Tekoporã Adicional (Covid)	Unconditional cash transfer		✓	
Uruguay *Encuesta Continua de Hogares (ECH), a*				
Asignaciones familiares - Plan de Equidad del MIDES	Conditional cash transfer	✓	✓	✓
Pensión por vejez	Non-contributory pension	✓	✓	✓
Otras pensiones no contributivas (invalidez y otras)	Unconditional cash transfer	✓		
Pensión Especial Reparatoria	Unconditional cash transfer		✓	✓
Pensión para hijos de fallecidos por violencia doméstica	Unconditional cash transfer		✓	✓
Pensión por invalidez	Unconditional cash transfer		✓	✓
Pensión Reparatoria Ley Integral para Personas Trans	Unconditional cash transfer		✓	✓
Pensión a las víctimas de delitos violentos	Unconditional cash transfer			✓
Tarjeta Uruguay Social (TUS)	Unconditional cash transfer	✓	✓	✓

Note: a= annual; s2= second semester; t4= fourth trimester; t3= third trimester; m= month. *Due to data availability, data for Mexico and Chile refer to surveys from 2018 and 2017, respectively. *Additional notes:* In the case of Argentina, an approximation is used, based in part on Gasparini et al. (2024). Program users are identified as those who are eligible and report receiving a subsidy, regardless of the reported amount. ‘Outro programa social do governo’ in Brazil, ‘Otras ayudas en dinero del gobierno’ in Colombia, and ‘*Otras ayudas en dinero (del IMAS)*’ in Costa Rica may include various types of programs.

A3. Data and methodological considerations

We identify users of non-contributory cash transfer programs using the Inter-American Development Bank's Harmonized Household Survey data for Latin America and the Caribbean between 2019 and 2022. The surveys are nationally representative, except in Argentina, where only urban areas are covered. The original databases were published or delivered by the National Statistics Offices of the countries. Annex A2, Table A2.1 lists the national surveys that are processed for the harmonization. These surveys are either household income and expenditure surveys or labor force surveys, depending on the country's survey availability. We include countries with available information for the years 2019, 2020, and 2022, which allows for an analysis of a total of 13 countries with data for all three years. Including 2021 would have reduced our sample to 11 countries by excluding Mexico and Chile. Additionally, due to data availability, the 2019 estimates include information from 2018 and 2017 for Mexico and Chile, respectively. In total, we identify 110 non-contributory cash transfers in 13 countries.

We classify non-contributory cash transfers into three categories: conditional cash transfers, non-contributory pensions, and unconditional cash transfers. More details on the definition of these program types are provided in Section 2. We do not consider in our analysis subsidies that are not delivered directly to individuals or households, nor do we include housing programs. In contrast to Stampini, Medellín, and Ibarrarán (2025) and Stampini et al. (2021) we include public scholarships as part of conditional cash transfers and make a few corrections to the identified programs (e.g., consideration of additional variables, exclusion/inclusion of certain programs).

For instance, in the case of Bolivia, a correction is made to the *Bono Juana Azurduy* program to include all three modalities of the cash transfer—prenatal check-ups, delivery and first postpartum check-ups, comprehensive health check-ups—compared to the previous studies that included only the first two. In Paraguay, we include the *Ñangareko* program, a one-time food assistance provided by the government in the context of the Covid-19 pandemic, which was usually delivered as a cash transfer rather than in-kind. Another example is that the previous papers have classified the *Bono de Desarrollo Humano* in Ecuador as including a non-contributory pension for older persons (in addition to its conditional cash transfer nature). This paper corrects this definition, noting that the program does not include a pension for older persons and categorizing it solely as conditional cash transfer.

We estimate the number of non-contributory cash transfer program users by considering all individuals living in a household where at least one person receives such a program. This definition implies, for instance, that in a household where one individual receives a non-contributory pension, all other members in the household are also considered to be program users, rather than limiting it to the older person receiving the cash transfer. This definition allows for a broader understanding of the reach of cash transfers in response to systemic shocks.

Most household surveys include direct questions about whether an individual received a specific cash transfer program, and the amount received. If a person reports not being a be program user but still receiving an amount from a non-contributory cash transfer program, we count the person as a program user, assuming an error in data preparation. In Argentina, the survey does not include questions on specific programs. We use an approximation to identify program users, based in part on Gasparini et al. (2024). That is, we identify program users of the conditional cash transfer *Asignación Universal por Hijo (AUH)* and the unconditional cash transfer *AUH por Hijo con Discapacidad*, and the *Tarjeta Alimentar (TA)*, as those individuals who are eligible according to regulations in force and who report receiving a subsidy, regardless of the amount reported. In Uruguay, while the 2019 survey indicates amounts received from *Asignaciones Familiares* and the *Tarjeta Uruguay Social*, it does not include questions about specific ‘pensions’ but only a question on whether the person is a pensioner, as well as information on the source of the funds received. We identify users of these programs and the amounts received based on an approximation following (i) the methodology used by Stampini, Medellín, and Ibarrarán (2025) in combination with (ii) the methodology used in this paper for identification in the 2020 and 2022 surveys, which considers the amount received through all ‘Cajas’ from the Social Security Bank *(Banco de Previsión Social, BPS)* as opposed to only the ‘Caja Escolar y Civil’ as in Stampini, Medellín, and Ibarrarán (2025).

For poverty estimates, we use per-capita household income net of non-contributory cash transfers and the international poverty lines (US$2017 PPP) defined as: Extreme poverty: <US$3.65 per person per day; Moderate poverty: >=US$3.65 & <US$6.85 per person per day.[17] That is, we subtract the observed value of non-contributory cash transfers from total household income prior to calculating the daily per-capita household income. We do not impute benefit amounts for identified program users who do not report a transfer value, as this would cause distortion in poverty estimates. More specifically, the overall household income calculated is based on information collected through household surveys. If an individual reports being a program user but does not report any value received through a certain cash transfer program, this income is excluded from the individual’s overall income. Therefore, imputing the cash transfer value would lead to a double subtraction when calculating the income net of cash transfers and would result in an underestimation of income.

This approach differs from previous methods applied by Stampini, Medellín, and Ibarrarán (2025) and Stampini et al. (2021), who impute cash transfer amounts based on program administrative rules for users who do not report any value. The only exception is Argentina, where we impute amounts for identified program users according to the regulations in force due to the absence of specific questions on non-contributory cash transfers (as explained above). All non-contributory cash transfer benefits are calculated to reflect monthly income received, based on the frequency reported (e.g., monthly, bimonthly, one time, a certain number of times, etc.).

[17] Poverty lines are defined as follows: Monthly value of the extreme (moderate) poverty line US$3.65 (US$6.58) per capita per day in local currency, adjusted to 2017 PPP and accounting for inflation.

Therefore, calculations do not account for the duration of any increases in the value of existing transfers. For example, if the value of a cash transfer doubled for three months, we do not estimate a monthly increase of 25%, but consider the doubled amount as the monthly transfer for the corresponding year, due to the surveys' lack of information on the duration of increases in existing benefits. This may lead to some overestimation of the estimated monthly benefit size if the increase was temporary and took place during the timeframe considered by the survey question. The monthly benefit size may also be underestimated if that timeframe does not cover the period in which the increase occurred.

If the monthly calculation of the reported amount depends on the frequency of its receipt, and this information is not available, the amount is not considered. For instance, in Costa Rica, the survey includes a question on the total amount received through 'other support in cash from the IMAS' *(Otras ayudas en dinero del IMAS)* and how often this amount was received (monthly, biannually, annually, etc.). If the survey respondent did not report the frequency, the amount received is not assigned as the monthly amount cannot be defined. Similarly, in Chile (2022), the question on the *Subsidio Protege* program asks about the number of payments the respondent received in the last 12 months. For respondents who report not to know the number of payments, no amount is assigned.

In El Salvador, surveys for 2020 and 2022 do not report amounts received by program but rather a total amount received in cash from the government. This information is used for estimating per capita household income net of cash transfers as well as average benefit amounts. Furthermore, in some cases, errors in income calculations within the harmonized database due to mistakenly excluding certain income received through non-contributory cash transfers have been corrected.[18]

Our methodological approach is not without its shortcomings. Household survey data in the region tend to underestimate the number of cash transfer program users due to underreporting (Villatoro y Cecchini, 2018; Cecchini, Villatoro, and Mancero, 2021) and the exclusion of questions on all cash transfer programs. Stampini, Medellín, and Ibarrarán (2025) find that 60% of the household surveys used in their analysis underestimate the number of non-contributory cash transfer program users.

According to our survey estimates, the largest non-contributory cash transfer program in the region, Brazil's *Bolsa Família,* covered 9,760,955 households in 2019, compared to 13,170,607 households reported in administrative data, accounting for an underestimation gap of 26%.[19] In 2020, the survey estimates that 5,180,289 households were covered, compared to 14,274,021 as indicated in administrative records. This

[18] Corrections were made for the harmonized data of the following survey waves: Bolivia 2019, 2020, and 2022; Brazil 2019, 2020, and 202; Costa Rica 2020; Dominican Republic 2020 and 2022; Ecuador 2020; Mexico 2020 and 2022; Paraguay 2020; Uruguay 2019, 2020, and 2022.

[19] Administrative data from the *Secretaria de Avaliacão, Gestão da Informacão e Cadastro Único (SAGICAD)* as of December of the corresponding year. Accessible here: https://aplicacoes.cidadania.gov.br/vis/data3/data-explorer.php.

represents an underestimation of 63.7%. In 2022, the survey estimates show a total of 13,098,586 recipient households of *Bolsa Família*; however, administrative data indicates that in that year the program under this name counted no users, while there were 21,601,182 households receiving the new *Auxílio Brasil* program. As explained in Section 2, *Bolsa Família* program was renamed to *Auxílio Brasil* which may lead to measurement error in survey data if individuals report receiving the program under its former name (i.e., *Bolsa Família*) and are therefore erroneously counted as program users of *Bolsa Família* instead of *Other Government Social Programs*, even though *Bolsa Família* did not exist in that year. Comparing the estimated number of households that reported receiving *Bolsa Família* with the administrative records on the number of households covered by the *Auxílio Brasil* leads to an underestimation of 39.4%. Recipient of *Auxílio Brasil* reported in administrative data may be partly captured in the survey data under *Bolsa Família* and partly under *Other Government Social Programs*. We do not adjust survey weights to correct for this underestimation.