

Conditional Cash Transfers devoted to Improve Access to Maternal Services in Argentina. Impact Analysis

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In 2008, 28.6 % of mothers in urban areas were poor and 9.6 % were indigent. In addition, 75% of women assisted in public maternity hospitals were under the poverty line, and 36% under extreme poverty (Perinatal Survey 2008 in 82 public maternal hospitals, AMBA). The problem is usually associated with low educational levels and prevalence of teenage pregnancy (22.4%, according to information emerged SIP-G DINAMI, 2008). These facts challenge the public health care system, showing that 33,6% of mothers lacks five prenatal care controls, adolescent unplanned pregnancy reaches 59.1% (SIP-G DINAMI, 2008), thereby increasing the risk of hospital admissions for abortion (leading cause of maternal death -21%- 2008 DEIS). Within this framework, in 2011 the Federal Government launches a conditional cash transfer program for pregnant women, Universal Coverage for Pregnant Women (AUE in Spanish) implemented as a strategy to strengthen the link between the pregnant woman and her interaction with the health care system. Since its implementation in May 2011 to date there were no studies that evaluate the impact of AUE on the accessibility of pregnant women to health services, and the impact on the quality of care received and maternal and neonatal outcomes. The National Ministry of Health of Argentina and the Pan American Health Organization requested to generate scientific evidence about the effectiveness of the design and implementation of the Program. The objective of this research is to identify the impact of the AUE in terms of changes in health behaviors during pregnancy, especially looking for closing accessibility gaps on vulnerable populations, as well as identify the program's ability to promote early detection of risk factors, and their potential influence on health outcomes on maternal and perinatal care.