

Colombia

Through the establishment of a unified household vulnerability index, Colombia has channelled social assistance to those in need and reduced inequalities in the country.

The System of Identification of Social Program Beneficiaries (SISBEN) produces a household vulnerability index that is used to identify the beneficiaries of social assistance programmes in Colombia. During the 1990s, the Government shifted public subsidies from the supply side of social and health services to the demand side, making it necessary to identify target groups that would receive subsidized social protection.

Progressively implemented since 1995, SISBEN is based on data collected by the country's 1,101 municipalities and districts. In 2013, ten institutions running several social protection and employment programmes were using SISBEN to identify potential beneficiaries.

In 2014, the SISBEN database held information on more than 34 million people, more than 70 per cent of the national population.

National social protection floors (SPFs) guarantee access to essential health care and basic income security for children, persons of working-age, and older persons.

185 countries have adopted the Social Protection Floors Recommendation, 2012 (No. 202), an approach to achieve universal social protection.

This brief presents a successful country experience of expanding social protection.



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Main lessons learned

- A common system to assess vulnerabilities and identify potential beneficiaries can contribute to improve coherence across social protection programmes.
- It also helps improve the transparency and traceability of social protection system administration since entitlements are determined using a transparent methodology.
- By establishing one common mechanism to assess vulnerabilities and identify beneficiaries, social protection programmes were able to develop a more reliable identification system at a lower administrative cost.
- Local governments are invited to play an important role in collecting data that is used to develop and update SISBEN. The system has therefore fostered collaboration between national and local institutions.

1. The need for an identification tool in the context of shifting subsidies from supply to demand side

Colombia is the second most populated country in South America after Brazil. According to World Bank statistics, it counted 48.3 million inhabitants in 2013, of which 31 per cent live below the national poverty line. Income distribution is also unequal with a Gini coefficient of 53.5 in 2012, which ranks Colombia the 6th most unequal Latin American country.

Access to social protection is a constitutional right. Article 48 of the Constitution of Colombia (1991) states that “Social Security is a mandatory public service which will be delivered under the administration, coordination, and control of the State, subject to the principles of efficiency, universality, and cooperation within the limits established by law. All the population is guaranteed the irrevocable right to Social Security.”

At the beginning of the 1990s, Colombia, like many other countries in the region, reformed its social protection system and shifted public subsidies from the supply of health and social services to the demand side (e.g. cash transfers, subsidies for social protection contributions, among others). At the onset, subsidies in the health sector were allocated to public and private health-promoting entities using existing municipalities’ census lists and a socio-economic classification of households. These tools were inappropriate for identifying those most in need and contributed to the exclusion of a high proportion of people from social health protection.

In order to address this challenge, SISBEN was adopted to identify those most in need of protection, and based on each social protection programme’s eligibility criteria, link the programme to a list of potential beneficiaries.

2. An identification mechanism shared by ten institutions

SISBEN began operations in January 1995. In 1997 the National Planning Department (NPD) issued a rule instructing all municipalities and districts to adopt the system.¹ SISBEN has since become mandatory for all social programmes.

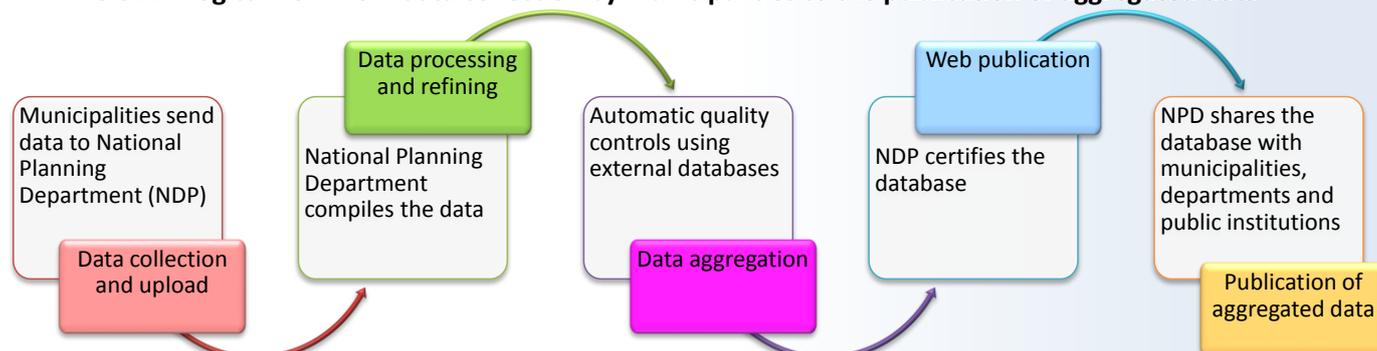
Since its creation, SISBEN has gone through three versions. The latest version (SISBEN-III) comprises three components: a socioeconomic survey to collect data, a welfare index to assess vulnerabilities, and software to estimate an index score for each household.

The SISBEN Welfare Index is defined by the NPD. Based on the Index, each household receives a score from 0 to 100 (from poorest to richest). The score is calculated by the software using 24 variables across four dimensions: health, education, housing, and vulnerability. Scores and variables are adjusted according to household location (main cities, urban areas, and rural areas). The vulnerability assessment takes into account two perspectives: 1) that of the individuals and households and 2) that of the context in which they live.

SISBEN is a nationally defined tool administered at the decentralized level. Municipalities/districts are responsible for the management of SISBEN in their territories through ad-hoc committees. Departmental coordinators liaise between NPD and municipalities/districts. The data collected at the local level is compiled in a national database, which is updated on a regular basis (every month). This guarantees consistency of data at any time and everywhere.

The collection of data is under the responsibility of municipalities and districts. They use two types of surveys: sweeping and on-demand. Sweeping surveys

SISBEN logical flow from data collection by municipalities to the publication of aggregated data



¹ Social CONPES (i.e. document approved by the National Council of Economic and Social Policy) 040 of September 1997

are similar to the census and are based on a door-to-door approach in the poorest geographical areas and neighbourhoods. The sweeping surveys are used to build the initial database and should be conducted every three years. People can update their data at any time through the on-demand survey when they need to correct names, add or remove household members, or to request a new assessment of their vulnerabilities.

Social programmes using SISBEN receive the national aggregated database from NPD. Based on their available budget and policy design, the programmes set the maximum eligibility score that will be applied and may choose additional eligibility criteria or qualifying conditions. By applying the score barrier, criteria, and conditions to the database, the SISBEN delivers a list of potential beneficiaries. In 2013, ten institutions running several social protection and employment programmes each used the SISBEN to identify potential beneficiaries: Ministry of Health and Social Protection, Ministry of Labour, Colombian Institute for Family Welfare (ICBF), National Ministry of Education, Department for Social Prosperity, Colombian Institute for Overseas Studies, Ministry of Agriculture, Ministry of Housing, Servicio Nacional de Aprendizaje, Registraduría Nacional del Estado Civil, and the Armed Forces.

3. This cost-effective mechanism channels social assistance to those in need and reduces inequalities

The use of a unified set of rules to assess vulnerability through the SISBEN has increased consistency and coherence across the social protection system in Colombia.

Additionally, existing programmes have saved administrative costs by sharing the burden of the development and maintenance of the SISBEN database. The average cost of a survey (sweeping and on-demand) is estimated at US\$4.41 for SISBEN-II, which is lower than similar mechanisms adopted in Chile (\$10 in 2003) and Mexico (\$12 in 2000) (NPD, 2007). Conducting the national survey once every three years under SISBEN-II cost around 2 per cent of the annual cost of the subsidized health-care package.

SISBEN uses traceable and well-founded statistical techniques. It is coherent, decentralized, and embeds continuous monitoring and evaluation into its processes.

4. Next steps

Currently there are discussions about refining the definitions of individual and contextual vulnerabilities to better reflect Colombia's diversity. Households with identical conditions in terms of health, demographic structure, education, and assets have similar scores even though they may reside in areas with different availability and quality of public services. Indeed, these households should have different vulnerability levels, which is not yet the case under the current SISBEN.

Also, SISBEN does not fully capture transitory shocks, such as job loss, that may happen between sweeping surveys and are likely to have an impact on households' vulnerabilities. It might be necessary to establish complementary mechanisms to identify households affected by temporary contingencies.

SISBEN has the potential of being an effective tool for monitoring utilization of services and measuring the impact of social protection programmes on poverty and other dimensions. These functions still remain underdeveloped.



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