

Argentina

Argentina's Constitution provides for the protection of pregnant and lactating female workers. Argentina's maternity protection policy is in coherence with the Social Protection Floors Recommendation, 2012 (No.202).

In Argentina, social protection in the case of maternity includes maternity protection in the workplace, contributory and non-contributory family allowances and pensions for mothers with seven or more children. In addition, several programmes provide universal access to basic social services. For example, the SUMAR Programme offers basic health services, including antenatal and postnatal consultations and delivery. The national legal framework also provides paid and unpaid maternity leave and paid paternity leave for registered workers.

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 note presents a successful country experience of expanding social protection.



Main lessons learned

- Maternity protection in Argentina encompasses both transfers in cash and in kind and this makes it coherent with the ILO's Recommendation No. 202. Maternity protection includes income security measures through several social transfer programmes, universal access to basic social services and provisions for maternity leave. Universal maternity protection in Argentina has had impressive results; child and maternal mortality have decreased by 34 per cent and 24 per cent respectively.
- The contributory and non-contributory programmes are administered by the National Social Security Administration (ANSES) while complementary health programmes are operated or regulated by the National Health Ministry. Therefore, good coordination among institutions is required to guarantee comprehensive maternity protection.
- The establishment of an adapted legal framework ensures the sustainability of social protection programmes.

1. Towards universal maternity protection

Maternity protection in Argentina encompasses both transfers in cash and in kind. It includes income security measures through social transfer programmes, universal access to basic social services and provisions for maternity leave. In this way, Argentina's maternity protection policy is in line with the Social Protection Floors Recommendation, 2012 (No.202).

2. How is the system organized?

Contributory programmes include maternity protection in the workplace and family allowances. To extend maternity protection to uncovered groups, two non-contributory allowances were established in 2009 and 2011, respectively: the Universal Child Allowance (Asignación Universal por Hijo) and the Pregnancy Allowance (Asignación por Embarazo).

Table 1. Social transfer programmes

Programme	Provisions	Beneficiaries
Contributory programmes		
Maternity protection in the workplace	Monthly income replacement equivalent to 100 per cent of the worker's salary	Employees covered by the Law on work-related risks and unemployment protection
Family allowances	Prenatal: between 199 and 2,084 Argentinian pesos (ARS) (US\$13-141) per month Per birth: ARS1,125 (US\$76) Per adoption: ARS6,748 (US\$456) Per child: between ARS199 and 2,084 (US\$13-141) per month School allowance: between ARS808 and 1615 (US\$55-109) per year	Same as above, plus beneficiaries of the pension system and non-contributory pension, up to a maximum monthly family income of ARS60,000 (US\$4,054), which is set by Law
Non-contributory programmes		
Universal Child Allowance	ARS966 (US\$65) per month per child, with conditions on health and education	Beneficiaries of Monotax, unemployed persons, workers in the informal economy with income below minimum wage, and domestic workers
Pregnancy Allowance	ARS966 (US\$65) per month from the 12th week of pregnancy through childbirth or interruption of pregnancy	
Pensions for mothers with seven or more children	Lifetime monthly amount equivalent to the minimum old-age pension of ARS4958.90 (US\$335) (ANSES, March 2016)	Mothers with seven or more children (own or adopted children)

Source: Decree 1141/2015-Family allowances from March 2016 onwards

The contributory and non-contributory programmes are administered by the National Social Security Administration (ANSES). Out of a total of 13 million children and teenagers below the age of 18 years, the Universal Child Allowance and Pregnancy Allowance cover 7 million, a coverage rate of 53.8 per cent. In addition, income tax reductions are applied to families with children. The combination of the two programmes and income tax deductions brings the coverage to 74.3 per cent of all children below the age of 18 years. At the same time, the National Commission for Social Pensions of the Ministry of Social Development administers the pensions for mothers with seven or more children.

As far as universal access to basic social services is concerned, female workers in the formal economy can access social health services provided by trade unions. They can also access prepaid health-care services in private clinics and sanatoriums. The SUMAR Programme plays an important role, as it provides access to basic health care to vulnerable families with the objective to reduce child and maternal mortality, strengthen access to health care for school age children and teenagers and improve the overall care provided to women through regular health check-ups.

Table 2. Health services

Sub-system	Institutions	Coverage
Public system	Public provincial and district hospitals, as well as primary health centres	Provides health services to the entire population
	SUMAR Programme	Provides health services to the vulnerable population
	Essential Public Health Functions Programme (FESP)	
	Remediar and Redes Programmes	
System of social services	National social services system	Covers health risks for salaried workers and their families
Private subsystem	Enterprises providing prepaid health packages in sanatoriums and private clinics	Provides coverage to those who pay a premium

Source: ILO, Social Protection Platform (www.social-protection.org)

The SUMAR Programme was created in 2012 in the context of the extension of coverage of the Plan Nacer (2005). The SUMAR Programme facilitated access to health care for pregnant women and children up to 6 years of age. It was then extended to children and teenagers of between 6 and 19 years of age, and consequently to men and women of 20 to 64 years of age who are without any contributory social health

protection. In 2015 the SUMAR Programme covered 13 million people. According to the 2010 national census, the population without any social health protection was 14 million. Therefore, the SUMAR Programme has contributed significantly to closing the social health protection gap in Argentina.

The programme is run by the National Health Ministry and financed from public budget. It is linked with the Universal Child Allowance and Pregnancy Allowance.

In addition, the national legal framework includes paid and unpaid maternity leave for female workers in registered or formal employment. Although there are some differences between the maternity leave policies in the public and private sectors, in both cases the benefits are set at 100 per cent of a worker's salary during the entire maternity leave period. The benefits are financed by social security.

Table 3. Maternity leave in the registered or formal sector

Selected measures	Legal protection	Maternity leave	Lactating period
Private sector	Dismissals are prohibited during pregnancy, maternity leave and 7.5 months before and after the delivery date	90 days	2 periods of 30 minutes each until the child reaches 12 months
Public sector	Same rights as permanent staff members (Law on Labour Contract does not apply during the maternity period)	100 days for the 1st and 2nd child; 110 days for the 3rd child and beyond	2 periods of 1 hour each until the child reaches 12 months; option to reach or leave the office 2 hours early or late

Source: Law No. 20.744 on the work contract and Law No. 25.164 on the regulation of the national public employment

At the end of their maternity leave, mothers can take an unpaid leave called "excedencia" to take care of their child during the first year of life. The unpaid maternity leave only applies to female workers in registered paid employment.

Men are entitled to paternity leave of between two and five days and are not entitled to unpaid leave.

3. What are the main impacts on people's lives?

Over the last ten years, maternity protection coverage was increased and reinforced by linkages and synergies between the various programmes. Due to major

affiliation efforts of the SUMAR Programme, 230,000 children have registered for the Universal Child Allowance and, in 2014, 47,000 women automatically received the Pregnancy Allowance.

The existing Universal Child Allowance and Pregnancy Allowance combined with income tax deductions for families with children benefit 74.3 per cent of all children below the age of 18 years. The SUMAR Programme also had a significant impact on Argentina's population by facilitating access to health care for 13 million people. These interventions have contributed to improving the quality of life of the most vulnerable families in Argentina and their implementation signifies substantial progress in the fight against poverty.

The linkages that exist between the Universal Child Allowance and Pregnancy Allowance contributed to an increase in the enrolment of children and pregnant women in the SUMAR Programme by 50 per cent and 14 per cent respectively, in 2014. Due to the extension of maternity protection in the past decade, child and maternal mortality have been reduced by 34 per cent and 24 per cent respectively. The SUMAR Programme has been recognized by the Geneva Health Forum and highlighted as a model and source of inspiration for other countries (Ministry of Health, 2015).

4. What are the main challenges?

One of the main challenges is including the right to care as one of the components of the social protection system (ILO, 2014). Recommendations to ensure that the right to care becomes a reality include:

- ratify ILO's Maternity Protection Convention, 2000 (No. 183), in order to extend the duration of maternity leave from 12 to 14 weeks;
- create the necessary legal framework to ensure that enterprises that employ a certain number of female workers establish maternity rooms and childcare centres, in line with ILO's Workers with Family Responsibilities Convention, 1981 (No. 156), that was ratified by Argentina in 1988;
- promote fathers' co-responsibility in childcare by extending paternity leave to uncovered groups and increasing the duration of the paternity leave;
- improve compliance with the Labour Law through prevention and inspection measures; and
- extend maternity leave to female workers in the informal economy.

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