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**“We never let our guard down to get ahead”**

**Exploring the wellbeing of women participating in Fundación Paraguaya’s poverty alleviation  
programme**

THESIS SUBMITTED FOR THE DEGREE OF DOCTOR OF PHILOSOPHY

Marie Claire Burt

Institute of Development Studies (IDS)

University of Sussex

Brighton

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Declaration

I hereby declare that this thesis has not been and will not be, submitted in whole or in part to another University for the award of any other degree.

Signature

## Abstract

This dissertation critically examines the concept of wellbeing, as experienced by women living in poverty in Paraguay. Despite investment and conviction behind a global project of development over the past half-century, poverty persists. What is more, although there seems to be a consensus that wellbeing is a concept and an approach that will be beneficial for the millions of families living under poverty, questions remain about practical applications of what wellbeing actually means, what it entails for people themselves, and how the wellbeing approach interacts with poverty interventions, with a corresponding need for further research.

To explore the wellbeing of women participating in a poverty intervention in Paraguay, in this research I seek to a) understand how women conceptualise their wellbeing, b) understand the temporal and dynamic nature of women's wellbeing, and c) determine how their wellbeing is impacted by anti-poverty interventions. The objective of better understanding women's wellbeing is to illuminate the complex dynamic between poverty and wellbeing in women's lives over time and draw out subtleties related to their individual contexts to have a more nuanced understanding of wellbeing.

This dissertation seeks to meet these theoretical and empirical gaps using a biographical life course approach to better understand the wellbeing of women participating in a Fundación Paraguaya's anti-poverty programme. My data collection took place in Paraguay from April 2018 to July 2019 in seven urban and semi-urban towns with 16 research participants.

My overarching argument is that wellbeing must be understood as multidimensional, interconnected, fuzzy, contextual, and subjective. Moreover, it is crucial to understand the temporal, dynamic, and relational components that have a direct impact on women's wellbeing. Further, illbeing and wellbeing must be understood as two sides of the same coin. Lastly, gender norms have a direct role in the way in which women experience wellbeing.

Key words: wellbeing, microfinance, women, Paraguay

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## Table of Contents

Chapter 1. Introduction & The Case .....	10
1.1 Introduction .....	10
1.1.1 Research Motivation .....	11
1.1.2 Research Aims .....	12
1.1.3 Significance of the Study .....	13
1.2 Country Context: Paraguay .....	14
1.3 Fundación Paraguaya .....	17
1.3.1 Microfinance .....	18
1.3.2 Poverty Stoplight .....	20
1.4 Evolution of Research Aims .....	23
1.5 Outline of the Chapters .....	24
Chapter 2. Literature Review .....	27
2.1 Introduction .....	27
2.2 Poverty and Development .....	28
2.2.1 Poverty Interventions Today .....	30
2.3 Wellbeing and Development .....	33
2.3.1 Conceptualising Wellbeing .....	33
2.3.2 Three-Dimensional Wellbeing .....	34
2.3.3 Operationalising the 3D Wellbeing Framework for Development Programming and Policy .....	39
2.4 Women, Poverty & Wellbeing .....	44
2.5 Conclusion .....	49
Chapter 3. Methodological Approach .....	51
3.1 Introduction .....	51
3.2 Positionality .....	51
3.3 Methodology .....	52
3.4 Research Design .....	56
3.4.1 Sampling & Fieldwork Sites .....	56
3.4.2 Research Participants .....	58
3.5 Data Collection Methods .....	60
3.5.1 Observation of the Poverty Stoplight .....	63
3.5.2 Life History Interviews .....	64

3.5.3 Wellbeing Charts.....	67
3.5.4 Phone Interviews .....	69
3.6 Data Analysis.....	70
3.6.1 Within and Across Cases .....	70
3.6.2 Thematic Narrative Approach.....	71
3.6.3 Memo Writing & Coding .....	72
3.7 Strengths of my Research Design .....	72
3.8 Ethical Considerations .....	73
3.8.1 Research with Vulnerable Populations & Dependency Relationship with FP.....	74
3.8.2 Informed Consent & Right to Withdraw .....	75
3.8.3 Confidentiality & Data Management .....	76
Chapter 4. Conceptualising Wellbeing.....	78
4.1 Introduction .....	78
4.2 Understanding Wellbeing .....	78
4.3 Participant Defined Wellbeing Domains.....	80
4.3.1 Wellbeing Domain 1: Health .....	81
4.3.2 Wellbeing Domain 2: Work.....	84
4.3.3 Wellbeing Domain 3: Income.....	88
4.3.4 Wellbeing Domain 4: Housing .....	92
4.3.5 Wellbeing Domain 5: Religion and Spiritual Community .....	96
4.4 Conclusion .....	98
Chapter 5. Dynamic and Temporal Wellbeing .....	101
5.1 Introduction .....	101
5.2 Education & Wellbeing Throughout Time .....	102
5.2.1 Leaving School at a Young Age .....	102
5.2.2 Finishing School .....	103
5.2.3 Post-Secondary Education .....	104
5.2.4 Summing Up: Education .....	106
5.3 Work, Income & Wellbeing Throughout Time .....	107
5.3.1 Work in Childhood .....	108
5.3.2 Migration to Work .....	109
5.3.3 Starting a Business .....	109
5.3.4 Work & Care Duties .....	111

5.3.5 International Migration for Work .....	113
5.3.6 Economic Crisis and Work.....	114
5.3.7 Aspirations for the Future & Work .....	115
5.3.8 Summing Up: Work.....	118
5.4 Housing & Wellbeing Throughout Time.....	119
5.4.1 Obtaining Secure Housing as Life Milestone .....	119
5.4.2 Shocks & Housing.....	120
5.4.3 Aspirations & Housing .....	121
5.4.4 Summing Up: Housing .....	122
5.5 Looking at the Future and Difficulty Aspiring .....	122
5.6 Conclusion .....	123
Chapter 6. Exploring the role of women as a <i>Supermadres</i> .....	125
6.1 Introduction .....	125
6.2 Motherhood & Caregiving .....	125
6.3 Care Duties & Children's Wellbeing in Different Stages of Motherhood.....	129
6.4 Positive Relationships with Family & Partners.....	135
6.5 Conclusion .....	137
Chapter 7. Women's Wellbeing & Poverty Interventions.....	139
7.1 Introduction .....	139
7.2 Dynamic Relationship with FP .....	140
7.3 Income & Work.....	142
7.3.1 Positive Experiences with Microcredit.....	142
7.3.2 Negative Experiences with Microcredit .....	144
7.3.3 Changes in Loan Groups & Leaving FP .....	147
7.3.4 Training Related to Income and Work .....	148
7.4 Housing .....	150
7.4.1 Housing Uncertainty .....	150
7.4.2 FP for Home Improvement & Neighbourhood .....	151
7.5 Health .....	152
7.5.1 Ineffective Public Health System .....	153
7.5.2 Fundación Paraguaya's Health Insurance .....	155
7.6 Experiences with the Poverty Stoplight.....	156
7.7 Poverty Stoplight Recommendations .....	158



7.8 Conclusion .....	160
Chapter 8. Conclusion.....	163
8.1 Introduction .....	163
8.2 Discussion of Empirical Findings .....	164
8.2.1 Wellbeing is multidimensional, interconnected, contextual and subjective .....	165
8.2.2 Wellbeing is Temporal .....	167
8.2.3 Wellbeing is Dynamic.....	168
8.2.4 Wellbeing is Relational .....	169
8.2.5 Wellbeing and Illbeing .....	171
8.2.6 Wellbeing is Gendered.....	172
8.3 A Reflection on Methodology and Methodological Contributions .....	173
8.4 Programme & Policy Implications.....	174
8.5 Recommendations for further research .....	177
Bibliography.....	179
Appendices .....	202
Appendix 1: Poverty Stoplight 50 Indicators and 6 Dimensions .....	202
Appendix 2: Introducing Research Participants.....	203
Appendix 3: Conventions for Quotations .....	215
Appendix 4: Additional Data Collection .....	216
Appendix 5: Wellbeing Chart Translation (presented in section 3.5.3) .....	217
Appendix 6: University of Sussex Research Ethics Committee Approval.....	219
Appendix 7: Information Sheet for Participants .....	220
Appendix 8: Informed Consent Forms .....	222
Appendix 9. Wellbeing Chart Translation (Liliana) (presented in section 4.2).....	224

## List of Figures and Tables

Figure 1. Poverty Stoplight indicator 7, “Access to Safe Drinking Water” .....	21
Figure 2. Poverty Stoplight indicator 32, ‘Communication and Social Capital’ .....	22
Figure 3. Example of a family’s Poverty Stoplight self-diagnosis results .....	23
Figure 4. Multidimensional Poverty Index .....	29
Figure 5. The Triangle of Wellbeing .....	35
Figure 6. Wellbeing in Development Framework .....	40
Figure 7. Fieldwork Sites .....	58
Figure 8. Example of Life History Interview after Session 1 .....	65
Figure 9. Example of Life History Interview after Session 2 .....	66
Figure 10. Example of Participant’s Wellbeing Chart .....	69
Figure 11. Example of Participant’s Wellbeing Chart (Liliana) .....	80
Table 1. Research Participants & Descriptions .....	59
Table 2. Data Collection Timeline .....	61
Table 3. Data Collection Carried Out per Participant .....	62
Table 4. Wellbeing Chart .....	67
Table 5. Participants’ Relationship with FP .....	141

## Chapter 1. Introduction & The Case

### *1.1 Introduction*

This dissertation critically examines the concept of wellbeing, as experienced by women living in poverty in Paraguay. Despite investment and conviction behind a global project of development over the past half-century, poverty persists. More recently, there has been a movement which recognises the limitations of equating development with monetary improvements of citizens and nations and acknowledges that these measures have misguided development policy and practice (Stiglitz, Sen and Fitoussi, 2009; McGregor, Coulthard and Camfield, 2015). This growing realisation has acknowledged that to assess whether societal development equates with progress, measures are needed that tell us whether development interventions are improving wellbeing or not (McGregor, Coulthard and Camfield, 2015). Further, different influential development agencies, such as FCDO, UNDP, and the World Bank, agree that the essence of poverty is characterised by “deprivation or insufficiency of one or more dimensions of well-being” (McGee and Brock, 2001, p. 9). As Gough and McGregor (2007b) state, “at its broadest and most utopian, the objective of international development could be described as the creation of conditions where all people in the world are able to achieve wellbeing” (p. 4).

Although there seems to be a consensus that wellbeing is a concept and an approach that will be beneficial for the millions of families living under poverty conditions, discussions remain about what wellbeing actually means, what it entails for people themselves, and how the wellbeing approach interacts with poverty interventions. The contribution of wellbeing to poverty alleviation emerged in the past decades as a concept in international development that can contribute to understanding of multidimensional poverty. Attention to wellbeing shifts the focus beyond income or narrow human development indicators and focuses instead on what people can do and be, and how they evaluate what they can do and be (McGregor, 2007). A crucial contribution of this wellbeing perspective to development research is that it aims to understand the interrelation of different aspects of people’s lives, unlike many approaches which tend to study different dimensions of people’s lives in isolation (Jones and Sumner, 2011). Specifically, a wellbeing approach contributes to the understanding of poverty because it not only considers income (material wellbeing), but also social and political connections (relational wellbeing) as well as experiences of impoverishment and how people feel about their lives (subjective wellbeing) (Gough

and McGregor, 2007a, 2007b; McGregor, Camfield and Woodcock, 2009; Rojas, 2009; White, 2010; te Lintelo *et al.*, 2018). Further, the application of wellbeing as a concept in development research not only helps understand changes in people's wellbeing outcomes (for example, changes in reported wellbeing as a result of an intervention) but sheds light on people's priorities and goals taking in consideration their contexts, which are crucial for policy and interventions (Gupte and te Lintelo, 2015). Wellbeing is a simple yet powerful concept, and as an approach it has driven much of the international development narrative for decades now. The devil, however, is in the detail. Despite the well-established arguments for a wellbeing approach to supporting people's development, there is not yet a clear answer as to what wellbeing means for people themselves in different contexts, how dynamic this concept is throughout the lives of people, and how these concepts interact with poverty intervention programmes.

### *1.1.1 Research Motivation*

Before presenting the aims of this dissertation, it is important to take a step back and present my research motivation. This dissertation is concerned with the concept of wellbeing of women living in poverty in Paraguay. For many years, I have been concerned with poverty in general, and particularly in my native country, Paraguay. What is more, I can say that most of my life has been tied to this concern. My father, Martin Burt, is the founder and executive director of Paraguay's largest anti-poverty organisation (Fundación Paraguaya) and created the organisation before I was born. Fundación Paraguaya has been a pioneer in microfinance and poverty alleviation programmes locally and internationally and works in more than 50 countries around the world. Thus, I can say that I grew up surrounded by people who were tirelessly working to improve the lives of others, and this is why I have dedicated my professional life to better understanding the causes and consequences of poverty from many angles.

To give some background, I started my professional career trying to understand how education can help lift people out of poverty. I worked in low-income public schools in the United States, observing, learning, and teaching to students from immigrant backgrounds. During these years, although I realised that although education is an important tool for development, I observed that the wellbeing of my students entailed different aspects of their life, not only education. For example, although my students were receiving quality education, their home lives were tough and difficult, so education by itself was not necessarily enough to help them get ahead. Then, I moved

back to Paraguay and worked with governmental interventions that sought to support people living in poverty. In this experience, I observed the importance of structural support from the government, but I also observed that the beneficiaries themselves were not taken into consideration as relevant actors who understand their own needs and who can do something to help themselves. In other words, during my experience working for the government, I observed the predominance of a top-down and cookie-cutter approach to development.

After this, I decided to move on and work at Fundación Paraguaya (FP), an organisation that designed and implemented a multidimensional and participatory poverty intervention that is now being implemented around the world. Besides my personal connection, I was drawn to FP organisation because its poverty alleviation programme focused on women, and took into consideration local understandings of poverty, people's priorities, and people's own evaluation of their situation. What is more, during my three years working at FP, I learned that the organisation was unusual in the way they approached the concept of poverty and its personalised approach in supporting people and improving their lives. Specifically, one of the approaches that caught my curiosity was that FP explicitly considered the concept of "being well" in the sense that they asked people themselves to define what being well means for them. This was an important motivation for me to continue my doctoral exploring the concept of being well of women who participated in this programme with the aim of collaborating with the effort of supporting thousands of Paraguayans women and people around the world.

### *1.1.2 Research Aims*

In this research, I aim to understand the wellbeing of women participating in a poverty intervention in Paraguay. Women who – in the words of the participant quoted in the title of this dissertation – never let their guard down to get ahead. Specifically, in this research I seek to a) understand how women conceptualise their wellbeing; b) understand the temporal and dynamic nature of women's wellbeing, and c) determine how their wellbeing is impacted by anti-poverty interventions. The objective of better understanding women's wellbeing is to illustrate the complex dynamic between poverty and wellbeing in women's lives over time and draw out subtleties related to their individual contexts to have a more nuanced understanding of wellbeing (Camfield, 2006; Gough, McGregor and Camfield, 2006).

The main research question that this dissertation poses is:

- What are women's lived experiences of wellbeing and how do these interact with anti-poverty programming in Paraguay?

This main research question will be investigated through the subsequent questions:

- How do participants conceptualise wellbeing?
- How does a life course perspective help understand the dynamics of wellbeing?
- How do interventions feature in women's understanding of wellbeing in their lives?

To answer my questions, this research uses a qualitative biographical approach to better understand the wellbeing of women participating in an anti-poverty programme. Specifically, Fundación Paraguaya's anti-poverty programme which provides microfinance, as well as a poverty intervention. This poverty intervention combines a multidimensional poverty measurement tool with a personalised intervention which includes mentoring, access to information, opportunities, and basic services (Fundacion Paraguaya, 2020). My data collection took place from April 2018 to July 2019 in seven urban and semi-urban towns in Paraguay with 16 female research participants.

### *1.1.3 Significance of the Study*

This research on wellbeing has both theoretical and policy-related implications. In terms of theoretical implications, this research argues that the concept of wellbeing is fuzzy, complex, and dynamic, as it changes through time. Through a critical (re)conceptualisation of wellbeing, this dissertation aims to provide a different perspective on people's lives to that usually adopted in development studies, which tend to focus on a narrow range of material concerns (Lloyd-Sherlock and Locke, 2008). This research attempts to contribute to policy and programming by offering a new perspective on the lives of vulnerable women and the complexity they have to navigate in their daily lives. Given that many times there is a disconnect between the needs and priorities of people in terms of wellbeing, and development policy and programming, the potential for misdirection efforts, but also the opportunities to contribute to people's wellbeing, is considerable (Melamed, 2011; Devereux and McGregor, 2014; McGregor, Coulthard and Camfield, 2015). In addition, it aims to contribute knowledge to strengthen anti-poverty programming for Fundación Paraguaya, and similar interventions. The hope is that with this knowledge, programmes will be

better suited to adapt to women's needs. Now I will introduce Paraguay and Fundación Paraguaya, the case for this research.

### **1.2 Country Context: Paraguay**

Paraguay is a middle-income country with over 7 million inhabitants, located in the centre of Latin America. This landlocked country has had significant economic growth in the last decades, growing above the Latin American average, with a steady growth rate of 3% between 2011-2021 (OECD, 2018; Banco Central del Paraguay (BCP), 2022). Strong macroeconomic policies and structural reforms have been key to reducing poverty rates and inequality among Paraguayans in the last years.

Despite its accomplishments, poverty and inequality remain major challenges for Paraguay (World Bank, 2017). Although poverty has decreased in the last decade (from 58% in 2002 to 27% in 2021<sup>1</sup>) poverty rates have stagnated in the past years, leaving Paraguay as the second poorest country in the region, with nearly two million of its citizens living in poverty (Ervin et al., 2017; Instituto Nacional de Estadística (INE), 2021). In addition, 70% of Paraguay's population is considered vulnerable, defined as the lack of capacity of a person or groups of people to respond to external threats or pressures over their lives and wellbeing, many closely times associated with the lack of social protection (Gomez, 2014; Ervin *et al.*, 2017; DGEEC, 2019; Serafini, 2019; UNDP, 2019). In addition, although inequality levels have reduced in nearly 14 percentage points over the last decade, the country continues to have a high GINI coefficient<sup>2</sup> of 43.5 (World Bank, 2020b). The poorest 10% of the population participated in only 1.66% of the total income in 2017, while the wealthiest 10% participated with 39.52% of the total income. What is more, income levels per person are unequal between urban and rural areas, with urban per capita income 1.8 times higher than rural income (Government of Paraguay, 2021).

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<sup>1</sup> This research was carried out before the COVID-19 pandemic. The COVID-19 pandemic, in parallel with recurrent droughts and flooding, have slowed down GDP growth, affecting efforts to reduce poverty (IMF, 2022). Although Paraguay was praised for its initial COVID response, the pandemic exacerbated the already weak living conditions of the most vulnerable and excluded (UNDP, 2020). It is predicted that poverty rates are not expected to return to pre-pandemic levels until after 2024, mainly due to high inflation caused by rising global fuel and food prices (World Bank, 2020).

<sup>2</sup> A Gini index of 0 represents perfect equality, while an index of 100 implies perfect inequality (World Bank, 2015).

Paraguayans' quality of life is far from its optimal state. Leaving aside the pressure imposed by the COVID-19 pandemic on the health care system, Paraguay's public health system is very poor. It has challenges related to universal access to basic services, affecting mainly lower-income people, especially women and children (World Health Organization, 2014). Among its main problems are infant and maternal mortality, adolescent pregnancy, road safety, access of older adults and people with disabilities to services (World Health Organization, 2014). In 2019, Paraguay only had 13 hospital beds per 10,000 citizens (World Health Organization, 2019). Moreover, it is estimated that the health system is predominantly financed out-of-pocket, with citizens having to pay high expenses themselves, placing a heavy financial burden on Paraguayan households and further deepening inequity (Caballero *et al.*, 2017).

On top of its fragile health system, Paraguay has a large housing deficit, especially in urban areas. This is due to rural-urban migration, lack of access to housing loans, and lack of sufficient government housing programmes. This has left thousands of citizens living in "*asentamientos*"<sup>3</sup>, or informal settlements or slum areas, typically in poor housing with inadequate services (SENAVITAT, 2016). "*Asentamientos*" are considered by some to be "the social catastrophe of Latin America", due to the fact that 1 in 4 citizens in Latin America lives in these informal settlements and lives in poverty (TECHO, 2015). Another aspect that adds to this problem is land ownership. Paraguay is one of the most unequal countries in the world regarding land ownership. It is estimated that 80% of the land is in the hands of 1.6% of the population, making Paraguay the Latin American country with the most unequal land distribution (Guereña, 2013).

Adding to these challenges, Paraguayans face a tough labour market, with high levels of informal employment<sup>4</sup> and little to no social security. Although the share of informal workers has decreased over time, Paraguay maintains sizable levels of informality. Approximately 70% of workers in Paraguay are informal, one of the highest rates in the region. This high informality rate can be attributed to an inefficient system of incentives and inadequate norms or rigid laws for the formalisation of businesses (World Bank, 2010). On top of that, Paraguay has a fragile social

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<sup>3</sup> *Asentamientos* are informal settlements. They considered to be places more than 8 families live, and where more than half of the people do not have land titles or regular access to at least two of the following basic services: running water, electricity with a formal connection, and or sewage system (TECHO Paraguay, 2015).

<sup>4</sup> I use the ILO's definition of informal employment which means that employment does not confer the rights of access to social security and health and can occur in both the informal and formal sectors. The informal sector encompasses small companies with low productivity operating outside of legal norms (although this sector is neither clandestine nor illegal) (ILO, 2015).



protection system. Only 32% of workers contribute to any health insurance and even fewer - 23% - contribute to any pension or retirement (Serafini, 2019). The pension system has considerable challenges in terms of coverage, funding, and governance (OECD, 2018). All these factors exacerbate the levels of vulnerability that many citizens face.

The challenges I have listed above affect all Paraguayans, but not all to the same extent. Paraguay has many challenges related to gender equality and is the lowest-ranked Latin American country in the Global Gender Gap Index (ranked 100 out of 153 countries) (World Economic Forum, 2020). Women face daily challenges due to vulnerability, lack of adequate government resources, and damaging gender norms. Further, Paraguayan women face specific barriers in many areas of their lives, including transitions to quality work and to higher education, especially in rural areas. Some factors that hinder this entry into the labour market are lack of education and childcare difficulties (World Bank, 2020a). Due to these barriers, women are often relegated to poorly paid activities, generally in informal markets (Zavattiero *et al.*, 2019). For instance, domestic service work is one of the main employment opportunities for women. This type of employment has low levels of formality, and therefore, in most cases, precarious and low-quality conditions (Kabeer, 2008). With respect to income, women's average monthly income represents 83% of men's income, revealing a gap in favour of men (Instituto Nacional de Estadística (INE), 2021). The COVID-19 shed light on just how vulnerable women are; over 50% of women lost their jobs in the first months of 2020, compared to 35% of men, with men recovering more quickly afterwards (World Bank, 2020c).

In general terms, in Paraguay, it is socially accepted that women work outside their homes, but the idea that they are responsible for taking care of the children is still very strong, even justifying the mistreatment of women for not doing so (World Bank, 2020a). Data shows that the total work time, both paid and unpaid, is similar between women and men, with an average of 461 hours per week. However, unpaid work predominates among women, which includes 61.3% of their productive work time (Zavattiero *et al.*, 2019). On top of that, close to 50% of women report not looking for a job due to care and household duties. In contrast, only 1 out of 10 men report being in the same situation (Canavire-Bacarreza *et al.*, 2021). This imbalance in the hours of unpaid work limits the opportunity for women to participate in the paid labour market, increase their hours of employment, and access the benefits and economic independence and social protection linked to such participation (Zavattiero *et al.*, 2019). The situation faced by women in the labour market

impedes women's economic autonomy, limits their rights, and undermines their freedoms (Zavattiero *et al.*, 2019). What is more, women are the head of the household in 39% of Paraguayan households (Instituto Nacional de Estadística (INE), 2021), meaning that the gap and barriers faced by women affect at least 4 out of 10 households. In addition to care duties, mothers, especially single mothers, are responsible for supporting their children financially due to lack of economic child support from the father. Further, close to 70% of separated fathers do not pay child support, which has led to the criminalisation of the non-payment of child support, changing from a civil to a criminal offence in the country (Cardenas, 2010).

In closing, Paraguay is a good site for this research because it reflects a number of interesting paradoxes. It is a middle-income country whose economy has performed reasonably well in the last two decades, yet it has also had persistently high levels of poverty, high levels of inequality, and extremely high levels of informality. In addition, there have been persistently high levels of poverty despite years of anti-poverty programming, especially for women. Lastly, to my knowledge there has been no research on how Paraguayan women conceptualise wellbeing.

### **1.3 Fundación Paraguaya**

Fundación Paraguaya (FP) is a non-profit and self-sustainable social enterprise that has been working for over 35 years to eliminate poverty in Paraguay and the world. Through its programmes, FP seeks to develop and implement practical, innovative, and sustainable solutions to activate the entrepreneurial potential of families to eliminate their multidimensional poverty and live with dignity, empowering and accompanying them on their way to improving their quality of life (Fundacion Paraguaya, 2020). This work is important in a country where high levels of poverty, lack of government support, and informality prevails, and people must create their own opportunities, many of them strengthening their small business or becoming entrepreneurs. Due to this, in addition to its microfinance and Poverty Stoplight programme (introduced later in this section), FP offers financial training, given by the loan officer, on key themes such as microenterprise, budget, and saving, among other financial tools. Also, participants access basic health insurance and burial insurance through FP programmes (Fundacion Paraguaya, 2020). In this way, FP seeks to become a mentor for families living in poverty, accompanying them in the process of activating their potential (Fundación Paraguaya, no date b, no date a). Today, FP has 26 offices across Paraguay and a team

of over 400 staff. It has over 80,000 clients, 92% of whom are women. FP's most important programmes are its microfinance and Poverty Stoplight programmes, which I will introduce in this section.

### *1.3.1 Microfinance*

Fundación Paraguaya (FP) launched its microfinance programme in 1985, the first in the country. Microfinance consists of giving people, usually poor, small loans to invest in entrepreneurial activities so they can increase their income (Pomeranz, 2014; Duvendack and Mader, 2020). The rationale behind microfinance is that with access to income, poor households will be able to increase their wellbeing through increased income and access to more opportunities to alleviate their poverty (Isserles, 2003; Beck, Demirgüç-Kunt and Levine, 2007; Krenz, Gilbert and Mandayam, 2014; Pomeranz, 2014; Duvendack and Mader, 2020). Microfinance started in Bangladesh and was created by Nobel Peace Prize winner Muhammad Yunus. Yunus started Grameen Bank as a grassroots movement in the 1970s with the aim of reducing poverty by providing small loans to the country's rural poor (Yunus, 1999; Pomeranz, 2014). Since then, organisations around the world have promoted microfinance as a poverty alleviation initiative (Brau and Woller, 2004; Pomeranz, 2014). Today, there are over 200 million microfinance borrowers worldwide, and 80% of all borrowers are women (Pomeranz, 2014; Microfinance Barometer, 2019).

At FP, credit is offered in two forms, directly to individuals and through village banking groups. Village banking group loans use the common microfinance development model where groups of women, called "committees of women entrepreneurs"<sup>5</sup> composed of 15 to 25 neighbours, jointly borrow and are responsible for loan repayment (Schuster, 2012, 2014). According to their performance in repaying loans, women become eligible for bigger loans. Loans start with small amounts and increase with each successfully completed cycle. Through this programme, 123,285 loans were disbursed to entrepreneurial women in 2020<sup>6</sup> (Fundacion Paraguaya, 2020). The distinct feature of group loans is that they are provided to groups of women, and the added benefit is that they can create new kinds of 'chosen' social networks among women, different from the ascribed networks of kin and family (Kabeer, 2008). Thus, women not only have access to loans, but also use their loan groups as a social tool where they can create social collateral (Woolcock and Narayan,

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<sup>5</sup> Comités de Mujeres Emprendedoras in Spanish

<sup>6</sup> In comparison, 13,797 individual loans were disbursed by Fundación Paraguaya in 2020 (Ramos, 2022, personal communication).

2006). Previous research on FP has found that village banking groups provide a space where women feel supported and respected which promotes empowerment (Pane Solis, 2021). Further, research in South Asia has also found positive benefits to group loans. As Kabeer (2005) notes, referring to group loans,

“the appeal of microfinance is that it can provide a very practical basis for poor women to come together on a regular basis at the same time as promoting new ideas, opportunities and social relations with the potential to address strategic gender interests” (p. 4717).

Due to the fact that village banking groups were the most prevalent form of microfinance provided by FP to women, all the participants of this research were part of a village banking group.

Although microfinance has become a central pillar of international development and has been promoted widely as an avenue to alleviate poverty, evaluations of the development potential of microfinance have had conflicting conclusions (Brau and Woller, 2004; Banerjee *et al.*, 2015; Dahal and Fiala, 2020; Duvendack and Mader, 2020). On the one hand, evidence has found that microfinance has positive results for the poor, especially women (Kabeer, 2008; Duvendack and Mader, 2020). It has been found that through microfinance, women have been able to increase income and asset ownership in contexts where they have had little or no access to capital or where there were severe restrictions on their opportunities for paid work (Kabeer, 2008; Duvendack and Mader, 2020). In addition, studies have claimed that women’s participation in microfinance has led to greater mobility in the public domain, a greater say in household decision-making (including reproductive behaviour and purchase of major assets), and renegotiation of abusive relationships (Hashemi, Schuler and Riley, 1996; Schuler *et al.*, 1996; Kabeer, 2001; Holvoet, 2005; Samanta, 2009). In other cases, microfinance has been found to give women more opportunities because it has released their husbands from exploitative forms of work or usurious debt relationships (Kabeer, 2008).

However, there have also been studies that have reported that microfinance has no impacts or negative impacts (Kabeer, 2005). In terms of negative impacts, other research has found issues such as increased levels of domestic violence and male appropriation of women’s loans (Goetz and Gupta, 1996; Rahman, 1999). Microfinance has also been criticised for evolving into a financial profit-making mechanism and moving away from its original aims (Roy, 2010; Schuster, 2012). According to different authors, the differences in organisational strategies utilised by microfinance

organisations also have a role to play in the contradicting findings regarding the impacts of microfinance (Holvoet, 2005; Kabeer, 2005, 2008).

In addition, village banking groups have also been criticised for failing to enhance the wellbeing of women because they fail to locate groups within a broader social and policy context (Torri, 2012; McIntyre and Rondeau, 2013). In the words of Lahiri-Dutt and Samanta (2006) “A group [...] thus needs to be artificially produced and handpicked, which makes it fragile and vulnerable, giving neither long-term security nor bringing real empowerment to women” (p. 293). It has also been found that groups are more likely to have challenges due to power struggles, social pressures, illiteracy, and overdependence on leaders, which ultimately lead these groups to fail in their objective (Torri, 2012). In addition, many of these programmes follow cookie-cutter/pre-determined programmes and have restrictive rules that do not consider the views and interests of female participants (McIntyre and Rondeau, 2013).

Due to some of the challenges presented, and after implementing microfinance for decades, in 2010, FP realised that, although people were able to increase their income through microfinance, a more specific approach and more support and programming were needed to help people overcome poverty to the extent they needed (Schuster, 2012; Burt, 2016). This realisation led FP to develop a tailored approach to eradicate poverty, that combined participation and research, called the Poverty Stoplight.

### *1.3.2 Poverty Stoplight<sup>7</sup>*

Fundación Paraguaya realised that the poverty of its clients was multidimensional and that approaching poverty from one dimension alone (income, through microfinance) would not help their clients overcome multidimensional poverty. In other words, credit alone was not enough to achieve FP’s mission of poverty alleviation (Schuster, 2012; Burt, 2016). Fundación Paraguaya notes that it developed the Poverty Stoplight with a participatory and research-based approach and an easy-to-use tool with 50 indicators<sup>8</sup> organised in six dimensions: (i) Income & Employment, (ii) Health & Environment, (iii) Housing & Infrastructure, (iv) Education & Culture, (v) Organization & Participation, and (vi) Interiority & Motivation (Fundación Paraguaya, no date b). Through a

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<sup>7</sup> In this section, it is important to note that I am using Fundación Paraguaya’s language, this includes “client”, “self-diagnosis”, “easy to use”, etc.

<sup>8</sup> See Appendix 1 for the full list of Poverty Stoplight’s 50 Indicators

targeted intervention, which combined mentoring, access to information, opportunities, and basic services, FP's goal evolved from increasing income alone to empowering clients and their families to overcome multidimensional poverty (Fundación Paraguaya, no date a). To date, over 45,000 people have participated in FP's Poverty Stoplight programme, and it is currently being adopted in 50 countries (Fundación Paraguaya, no date b)

The Poverty Stoplight works with a personalised strategy for each family. It has three main components: i) self-diagnosis, ii) the setting of priorities and development of a life map, and iii) one-on-one support through mentoring.

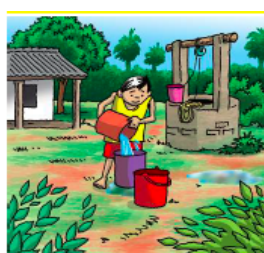
#### i) Self-Diagnosis

The first step of the Poverty Stoplight is self-diagnosis. The client self-diagnoses their family's level of multidimensional poverty over 50 indicators using a visual self-diagnosis survey on a tablet. The mentor supports the client with the self-diagnosis, talking the client through each indicator and clarifying questions or doubts. The client looks at each indicator with illustrations and determines if their family is red (extremely poor), yellow (poor), or green (non-poor) in each indicator. Within the 50 indicators, there are a combination of objective and subjective indicators. For example, Figure 1 shows an example of an objective indicator, 'Access to Drinking Water', and Figure 2 shows an example of a subjective indicator, 'Communication and Social Capital.' The unit of analysis is always the family.

Figure 1. Poverty Stoplight indicator 7, 'Access to Safe Drinking Water'



The water that the family consumes is not potable and/or the family has to haul it from unfamiliar land, river or stream.






The family has access to potable water, but:  
(a) is not constant or  
(b) does not have a tap, well or cistern within the premises of the home.



The family has constant access during most of the day to potable water within the premises of their home. They have a tap.

Source: Fundación Paraguaya, no date b

Figure 2. Poverty Stoplight indicator 32, 'Communication and Social Capital'

		
<p>Family members do not other groups other than their family.</p>	<p>At least one family member relates to the immediate surroundings, but does not have other social networks.</p>	<p>The family has a broad social network. They are part of several groups and have many contacts that they turn to in order to generate business opportunities and improve their quality of life.</p>

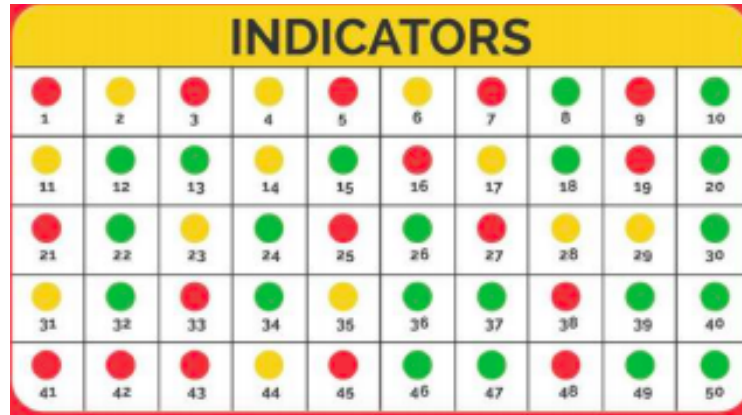
Source: Fundación Paraguaya, no date b

FP claims that the process of self-diagnosis helps each family identify where they are doing well and where they want to improve and in doing so it “breaks down the overwhelming concept of poverty into smaller manageable problems that can be solved through actions, making the invisible visible” (Fundacion Paraguaya, no date, p. 4). The organisation also claims that the process of self-diagnosis is empowering because it allows the family itself to determine their situation, and they are not evaluated by an outsider (Fundación Paraguaya, no date a). Through this process, FP claims that clients and families become the main protagonists of their poverty elimination process, from the diagnosis to the implementation of solutions (Fundación Paraguaya, no date a).

## ii) Priorities and Life Map

After the self-diagnosis, the client receives a printed version of the results of their Poverty Stoplight (see Figure 3 for a fictional example). Then, with the help of a mentor, the client and her family prioritise five indicators they would like to work on first. Then, the client works with their poverty mentor to develop a realistic strategy to overcome poverty in those indicators. FP believes that since poverty is multidimensional and affects each family differently, each family must have a personalised plan to overcome poverty (Fundación Paraguaya, no date a)

Figure 3. Example of a family's Poverty Stoplight self-diagnosis results



Source: Fundación Paraguaya, no date b

### iii) One-on-one Support through Mentoring

After the client and her family have decided which five indicators to prioritise, the mentoring, or one-on-one support, begins. During this process, mentors provide technical, emotional, and social support to develop customised strategies to help clients overcome poverty. The mentor helps each client to develop a personalised plan to work on their poverty-related problems, using tools such as microfinance, basic skills training, connections to local resources in the community, mentoring, among others (Fundación Paraguaya, no date a). FP clients have expressed that during the mentorship they feel that the mentor adopts the role of teacher or counsellor. The organisation also claims that mentorship “empowers [...] clients to become both the chief architects and protagonists of their own poverty-elimination strategy” (Burt, 2016, p. 28). Each mentor communicates with each client at least once every two weeks and meets in person at least once a month. After a year, the mentor and client re-evaluate the progress that has been made, and new indicators are selected. This process continues until the client and her family have overcome poverty in all 50 multidimensional indicators.

## 1.4 Evolution of Research Aims

Initially, this research was designed to follow women's experience of participating in Fundación Paraguaya's programming over time to better understand the implications of participation in FP for their wellbeing over time. However, this aim changed after most of my qualitative sample of



women withdrew from FP's programme during my fieldwork (discussed further in Chapter 7). Thus, I had to pivot and decided to take a holistic approach and continue working with all my original participants, even though most of them were no longer FP participants. Luckily, I was able to retain contact with all but one of the participants who had left FP, and they expressed they were still interested in participating in my research. So, rather than simply doing a study of why women dropped out of FP, I maintained my focus on understanding wellbeing over time, but broadened my aim to studying the wellbeing of women living in poverty in Paraguay. However, I was still interested in the FP's programming and whether it played a role in women's accounts of their wellbeing. Due to this situation, I decided to incorporate new participants into my sample: women who had completed the Poverty Stoplight programme.

Through this evolution of this research, I was able to turn the problem of the participant attrition rate from FP's programme into an advantage, as I was able to learn about the challenges that women face and what causes them to leave programmes. In fact, people who leave interventions or programmes are not explored enough in research and literature, and I believe there is much to learn from their experiences. Lastly, I learned that women's relationship with FP was dynamic, some of the women that had initially left FP had returned, and others who remained left FP at a later stage, as I will present further on in this dissertation.

### ***1.5 Outline of the Chapters***

The remainder of this dissertation is structured in the following way.

Chapter 2 is the literature review which brings together concepts of wellbeing, multidimensional poverty, and gender to better understand my research. The chapter identifies gaps, including that there is a lack of bottom-up research to understand what wellbeing means for people, that more research is needed to better understand wellbeing processes and people's life cycle, and that relationships are crucial to understanding people's everyday dynamics of dealing with poverty.

Chapter 3 details the research design and methods used to answer my research question. In this chapter, I justify using a biographical qualitative approach to understand wellbeing through women's life experiences. Then, I present my research design, sampling strategy, and introduce my fieldwork sites. Subsequently, I introduce my specific methods of data collection: Poverty Stoplight

observation, phone interviews, life history interviews, and wellbeing charts, and also present my data analysis strategies. To close, I discuss the strengths of my research design and the ethical considerations of this research.

Chapter 4 is the first empirical chapter and presents women's conceptualisations of wellbeing. This chapter aims to build critical insight into wellbeing by learning from the perspectives of women who participated in Fundación Paraguaya's poverty programme in Paraguay. Participants were asked to conceptualise their wellbeing, and define what they needed to have, to be able to do, to be or to feel, in order to live well in their particular contexts. In this chapter, I will present an in-depth analysis of the seven domains of wellbeing identified by study participants. This chapter will illuminate why a broader conceptualisation of wellbeing is necessary to recognise the complex and dynamic relationality of doing well, in addition to being able to develop policy and programming to support people's wellbeing.

Chapter 5 is the second empirical chapter and presents my findings regarding the temporal dynamic of wellbeing. In this chapter, I set out to further my conceptualisation of wellbeing by examining its dynamic and temporal nature throughout women's lives across time. I will present my findings from participants' accounts of wellbeing using different domains of wellbeing across time, from childhood to present time.

Chapter 6 is the third empirical chapter and presents my findings in relation to participants' experiences with motherhood, care duties, and relationships. I found that family and relationships underpin any conceptualisation of wellbeing. In participants' accounts of wellbeing, I observed that care duties are not static; they have a temporal aspect, are multidimensional, and shift and evolve through the life course (McKie, Gregory and Bowlby, 2004). In this chapter, I present why the concept of caringscapes is crucial to understanding how family and care responsibilities are not static and shift across different life stages.

Chapter 7 is the fourth and final empirical chapter and explores the relationship between women's wellbeing and poverty interventions, aiming to understand how women's life experiences interacted with FP's poverty intervention, as well as government programmes. Specifically, I look at participants' experiences in the areas of income and work, housing, and health.

Lastly, Chapter 8 is the concluding chapter which brings together the findings of the empirical chapters and critically examines them. This chapter starts with a reflection on the methodology and the methodological approach of this dissertation. I then summarise the core findings within the four empirical chapters and discuss how together they answer the core research questions by linking them to the broader literature. Further, I provide recommendations for future research that are derived from the findings and from the limitations of the empirical study conducted. I close with a general reflection on the overall significance of this study and its main contributions to knowledge.

## Chapter 2. Literature Review

### 2.1 Introduction

In this dissertation, I explore the concept of wellbeing from the point of view of women living in poverty. This topic is relevant as it might bring a revived development momentum, especially as we are getting closer to the 2030 SDG target, where it has become clear that the ambitious goals will not be achieved as expected (Sachs *et al.*, 2022). Moreover, the recent COVID pandemic has made it even more difficult for every country to support the development of their people. However, there is a broad range of global and local development initiatives that are trying to rediscover the meaning and significance of the concept of wellbeing for how we think about, measure, and practice development (McGregor and Sumner, 2009, 2010). These rediscovering efforts have involved significant scholarly contributions to debates from how we conceptualise and measure poverty to how we shift our emphasis from thinking about poverty to people's wellbeing (Gough, McGregor and Camfield, 2006; Stiglitz, Sen and Fitoussi, 2009; McGregor, Coulthard and Camfield, 2015).

At first, it might seem incongruous to discuss wellbeing in relation to people living in poverty since, most often, research related to poverty is concerned with suffering and deprivations (Gough and McGregor, 2007b; McGregor, Coulthard and Camfield, 2015). However, using a wellbeing lens to better understand the lives of people living in poverty helps us,

“acknowledge the fully rounded humanity of poor men, women and children in developing countries; recognizing that they are not completely defined by their poverty, nor can they be fully understood in its terms alone. Poor people in developing countries strive to achieve wellbeing for themselves and their children.” (Gough, McGregor and Camfield, 2006, p. 3)

Thus, a focus on wellbeing in poverty research is not incongruous and rather offers a crucial perspective in international development, as goals broaden from a focus simply on people's income or increasing GDP to creating the circumstances for wellbeing. However, there are still many challenges remaining to reach this objective.

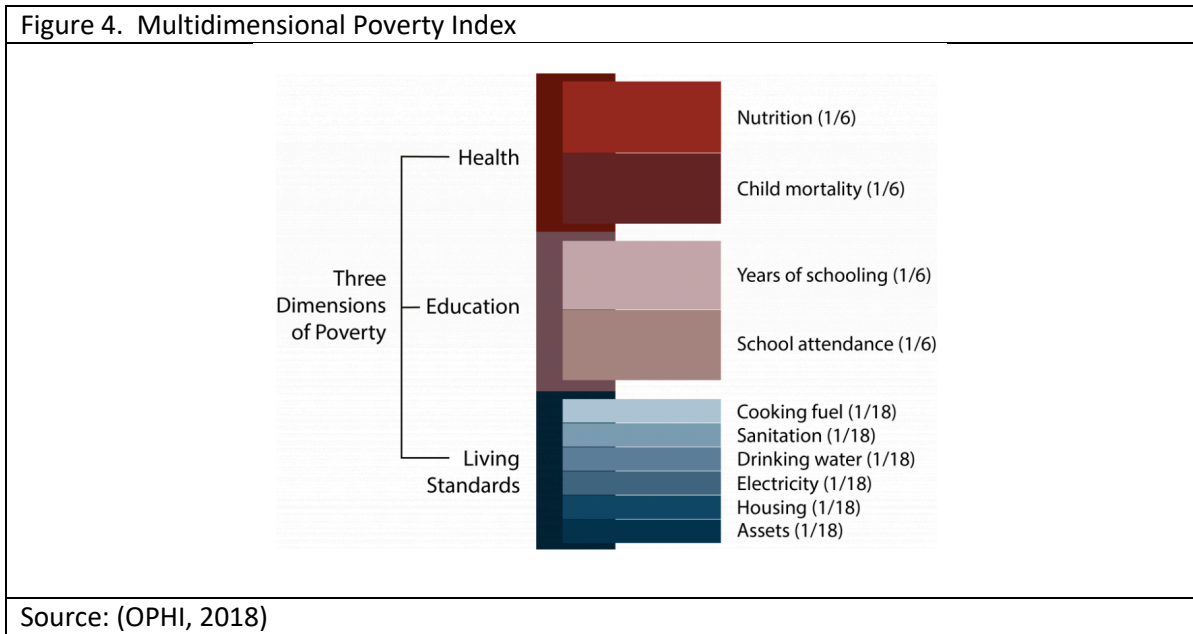
To critically discuss the concept of wellbeing for women living in poverty, section 2.2 begins by examining how mainstream poverty interventions have conceptually and empirically dealt with combatting poverty and increasing wellbeing. In this section, I argue that although multidimensional poverty has been agreed upon as the preferable way to conceptualise poverty, in reality, most governments and programmes continue to have a unidimensional or narrow view of

poverty. Then, Section 2.3 introduces the concept of wellbeing and argues that wellbeing offers a more holistic approach to understand the complexity of people's lives. In this section, I also present two frameworks for understanding wellbeing and identify the gaps and challenges of using a wellbeing approach that this dissertation aims to fill. Then, Section 2.4 discusses the challenges of women living in poverty to achieve wellbeing. Lastly, section 2.5 offers my concluding remarks.

## ***2.2 Poverty and Development***

Today, the global community has embraced the shift from unidimensional to multidimensional poverty because it has come to the realisation that only considering monetary poverty or consumption has many limitations. These include that unidimensional poverty does not take into account the complex realities of the poor, and does not consider elements such as lack of access to services and infrastructure, political choices, freedom of speech, and other crucial aspects such as powerlessness, voicelessness, dependency, shame, and humiliation (Narayan, 2000; Ul Haq, 2003; Lister, 2004; Chambers, 2006; Ludi and Bird, 2007; Kabeer, 2008). Further, having a narrow view of poverty and development is inadequate and has misguided public policy and practice in both developed and developing countries to improve quality of life and reduce poverty and illbeing (Stiglitz, Sen and Fitoussi, 2009; Curtis, 2021). Thus, understandings of poverty should consider material, physical, human, and social deprivations, and development must be seen as “a process of expanding the real freedoms that people enjoy [...] the expansion of the ‘capabilities’ of persons to lead the kind of lives they value – and have reason to value.” (Sen, 1999, p. 18; Curtis, 2021).

Due to the limitations of having a unidimensional understanding of poverty, there has been increasing demand from governments to conceptualise and design official national multidimensional measures to complement income poverty measures (Alkire and Santos, 2013a, 2013b; Santos *et al.*, 2015). Measures such as the global Multidimensional Poverty Index (MPI), for example, have emerged, where poverty is understood as a person's inability to meet minimum international standards in indicators such as health, water, sanitation, housing, basic goods and services, education, and employment (see Figure 4) (Alkire and Santos, 2013b; Santos *et al.*, 2015; Ervin *et al.*, 2017). The global MPI is an index of acute multidimensional poverty that covers over 100 countries, including Paraguay. Below, in Figure 4, I present the MPI, including its three dimensions of poverty and ten indicators.



The MPI considers three dimensions of poverty: health, education, and living standards. In education, it considers nutrition and child mortality. In education, it considers years of schooling and school attendance. Lastly, in living standards, it considers cooking fuel, sanitation, drinking water, electricity, and assets.

Although it is apparent that there has been an effort to understand poverty from a multidimensional view, I argue this tool does not accurately depict the complex and multifaceted nature of poverty with concomitant limitations for informing approaches to poverty alleviation. First, multidimensional poverty indicators do not consider subjective or non-material indicators such as stigma, shame, powerlessness, and isolation, nor do they consider power relations or structural factors (Poverty Analysis Discussion Group, 2012; United Nations, 2016; Roelen, 2017; Curtis, 2021). Second, this limited view of poverty does not capture the variety of goals and needs that poor households have, and do not account for people's aspirations or individual conceptualisations of what people need (Kabeer, 2008; Camfield, Streuli and Woodhead, 2009). Third, since universal indicators are not always aligned with locally defined necessities, they do not consider socio-cultural differences or context (Gough and McGregor, 2007a, 2007b; Ibrahim, 2011). Fourth, multidimensional poverty measures do not acknowledge people's experiences and evaluations of their lives and priorities (Gough and McGregor, 2007b; McIntyre and Rondeau, 2013). In other words, multidimensional understandings of people's lives still focus on what they should have or be

able to do, rather than what people think and feel about what they have and do. Fifth and lastly, the audience of multidimensional poverty measures are policymakers, rather than families or communities. Policymakers prefer these measures due to their universality, practicality, easily quantifiable nature, their relative “objectivity,” the large amounts of data available, and their ease of comparability (Ludi and Bird, 2007; McGregor, Coulthard and Camfield, 2015). In sum, although there have been gains in having a more comprehensive and well-rounded view of poverty, there is still much to be done. This is evidenced by the fact that today most countries in Latin America use three main tools to understand poverty: the Multidimensional Poverty Index; measuring poverty by GDP per capita; and using the poverty per capita headcount ratio (Abramo, Cecchini and Morales, 2019).

### *2.2.1 Poverty Interventions Today*

While there has been a conceptual shift to understanding poverty as a multidimensional phenomenon and new measures have emerged, policy and programming have lagged behind in this trend. The disconnect between theory and practice is reflected in how poverty interventions are developed and implemented. To illustrate, most development programmes continue to have a narrow vision of poverty, focusing mostly on income, levels of consumption, food aid, livelihoods, and wealth (Ravallion, 2016; Vakis, Rigolini and Lucchetti, 2016; Curtis, 2021). In fact, Ravallion (2016) has found that the most common feature in today’s poverty alleviation strategies are direct cash transfers to families living in poverty, which supports the argument that the monetary and material approaches remain the most prevalent in development programming.

In Latin America, the most common anti-poverty programmes are based on monetary and material interventions (Abramo, Cecchini and Morales, 2019). The prominence of conditional cash transfers illustrated this. Conditional cash transfers were developed in Latin America and have been considered one of the most important social policy innovations in the last decades (Levy, 2001, 2015). The objective of conditional cash programmes is for people to address their most basic needs, and the aim is to address material deprivation in the short term and tackle the intergenerational transmission of poverty in the long term (World Bank, 2010; Bradshaw, Chant and Linneker, 2019). Further, the cash transfer is used as an incentive (or condition) for families to adopt health and education-seeking behaviours (Cookson, 2018). The rationale is that by providing cash to people they will invest in their development to improve their wellbeing (Abramo, Cecchini

and Morales, 2019). Further, these programmes tend to target women noting that they will use the cash more efficiently to invest in children's education, health, and nutrition to improve the wellbeing of the family and reduce poverty (Molyneux, 2006, 2007; Vakis, Rigolini and Lucchetti, 2016; Martinez-Restrepo and Ramos-Jaimes, 2017; Cookson, 2018; Bradshaw, Chant and Linneker, 2019).

Another common monetary development intervention to decrease poverty in Latin America is microfinance. As mentioned in the Introduction Chapter (Ch 1), microfinance programmes provide small loans to people living in poverty so they can invest in entrepreneurial activity and increase their income (Pomeranz, 2014; Duvendack and Mader, 2020). The overarching claim of microfinance is that through financial services, poor individuals improve their wellbeing through increased opportunities, mitigate shocks, and overcome income poverty (Isserles, 2003; Beck, Demirgüç-Kunt and Levine, 2007; Duvendack and Mader, 2020). Across the globe, the focus of microfinance programmes has been placed on women (Schuster, 2012; Pomeranz, 2014), evidenced by the fact that 80% of all participants in microfinance programmes worldwide are women (Microfinance Barometer, 2019). Organisations claim that microfinance helps turn poor women into entrepreneurs by creating employment opportunities that increase wealth creation and lead to social empowerment (Pomeranz, 2014; Muhammad *et al.*, 2021). Research findings show that microfinance allows women to have home-based entrepreneurial activities, which allow them to earn a livelihood while educating their children (Muhammad *et al.*, 2021). In addition, research has found that women's increased earnings are more closely associated with family wellbeing than those of men, partly because they have different sets of responsibilities within the household and partly because men often tend to keep a higher share of their earnings for personal forms of consumption (Kabeer, 2008).

However, in my view, the most popular anti-poverty programmes in Latin America – such as conditional cash transfers and microfinance – do not accurately address people's many deprivations for many reasons. First, due to their over-emphasis on material interventions and income, programmes do not consider other factors such as individual's capacity to command and allocate resources, their state of mind, their social bases, behaviours, or their inner lives (Sweetman, 2005; Chant, 2007, 2008; McGregor and Sumner, 2010; Jones and Sumner, 2011; Sanson and Gupta, 2012; Vakis, Rigolini and Lucchetti, 2016). Second, programmes place an undue



burden on women. Development programmes tend to focus on women who are already overburdened with home and care responsibilities. Authors have argued that this has led to a “fortifying and normalizing the responsibilities of motherhood as a way to secure programme goals” (Molyneux, 2006, p. 440) or a “feminisation of responsibility and obligation” (Chant, 2008, p. 178), where women are responsible for dealing with and negotiating poverty in their homes. Specifically in cash transfer programmes, mothers are typically expected to do the work of meeting programme conditions, and this undue burden on women’s time does not challenge women’s unpaid labour but instead reinforces it (Molyneux, 2006, 2007; Bradshaw, 2008; Chant, 2008, 2016; Cookson, 2018; Bradshaw, Chant and Linneker, 2019). In addition, the conditionality aspect of transfers has been criticised due to its intense social pressure, unreasonable demands on women’s time and resources, and its possibility of leading to a coercive exercise of authority on behalf of social workers (Molyneux, 2006; Cookson, 2018). Third, and related to the points above, programmes do not focus enough on changing gender dynamics in households and societies. In some cases, programmes that have instead reinforced gendered roles within the household (Bradshaw, Chant and Linneker, 2019). Further, some studies have found that when women start contributing financially to the household, male partners may retain more of their earnings for their personal use (Chant, 2007, 2016; Bradshaw, 2013). It is crucial not only to focus on income poverty, but also to address the determinants of women’s position in society related to legal, political, cultural, and religious discrimination (Fukuda-Parr, 1999; Chant, 2008; United Nations, 2015). Fourth, programmes do not do enough to understand the contextual drivers and trajectories of people’s deprivations. Most programmes do not incorporate an understanding of the incidence and trajectories of people’s multidimensional deprivations, including how people respond to shocks and stressors (USAID, 2016). Further, programmes need to better understand the nature and extent of people’s deprivations and their contextual determinants. Fifth and lastly, programmes do not do enough to understand the interests and motivations of individuals living in poverty, and how they define being well in the context of their daily lives. Knowing what people’s interests are and what goals drive them is a challenge from the very outset of the policy process and must be incorporated into policies and programmes to improve the wellbeing of individuals living in poverty (Gough, 2004; McGregor and Sumner, 2009, 2010; Ibrahim, 2011; McIntyre and Rondeau, 2013; Devereux and McGregor, 2014; McGregor, Coulthard and Camfield, 2015).

In closing, what is needed are programmes that go beyond considering income or narrow human development indicators and consider the many factors that contribute to poverty, including material and non-material deprivations (Sanson and Gupta, 2012). As was expressed in the Stiglitz Report (2009), the main recommendation and challenge to policymakers, academics and civil society actors is to “shift emphasis from measuring economic production to measuring people’s wellbeing” (2009, p. 12).

### ***2.3 Wellbeing and Development***

Wellbeing has emerged as a popular concept in development since it might offer a more people-centred and holistic interpretation of progress, moving past focusing solely on narrow measures of deprivations to people’s wellbeing (Gough and McGregor, 2007b; White, 2009; McIntyre and Rondeau, 2013). By using a wellbeing lens, poverty interventions can better understand programme participants and their needs within their contexts, which gives an opportunity to improve these interventions (Dorward *et al.*, 2009; Camacho *et al.*, 2014; White and Jha, 2014; Coulthard and McGregor, 2015; Gupte and te Lintelo, 2015; White, 2015). Further, by drawing on the various debates around development, the concept of wellbeing provides a broader, overarching conceptual framework with which the many different notions of poverty can be considered (Camfield, 2006; Gough and McGregor, 2007b; Jones and Sumner, 2011).

#### ***2.3.1 Conceptualising Wellbeing***

The study of the wellbeing of people has a long history, and the approach to wellbeing that is outlined in this dissertation draws upon and synthesises various traditions (see McGregor, 2007 for discussion). The use of wellbeing in development studies builds upon Sen’s capability approach, which considers ‘capabilities’ – means, opportunities, or substantive freedoms – which permit the achievement of a set of ‘functionings’ – things that a human being values in terms of ‘being’ and ‘doing’ (Sen, 1999). The wellbeing approach applies a focus on ‘being’ and ‘doing’ that is derived from the human development approach but also is influenced by other disciplines and academic traditions such as social psychology, social anthropology, livelihoods frameworks, and participatory development (Gough and McGregor, 2007b; McGregor and Sumner, 2010; Watters, 2019). It has also been inspired by participatory research which has argued that the development field must listen to the voices of people living in poverty. Moreover, experiences and understandings of

wellbeing of people living in poverty has been a significant area of enquiry for participatory research since the 1980s to date (Chambers, 1993, 1994; Narayan, 2000; White and Pettit, 2007). Wellbeing, it has been argued, is the interplay of three dimensions of life: the material, the relational and the subjective (Gough, McGregor and Camfield, 2006; McGregor and Sumner, 2009; White, 2009; Fischer, 2014). If the notion of wellbeing is reversed to understand how people experience poverty, conventionally it has been understood in terms of material deprivations, in which social exclusion and social capital are important, and in which people's feelings subjective relationships are relevant (McGregor and Sumner, 2010). These three dimensions of wellbeing- material, social and relational- are called three-dimensional (3D) wellbeing.

### *2.3.2 Three-Dimensional Wellbeing*

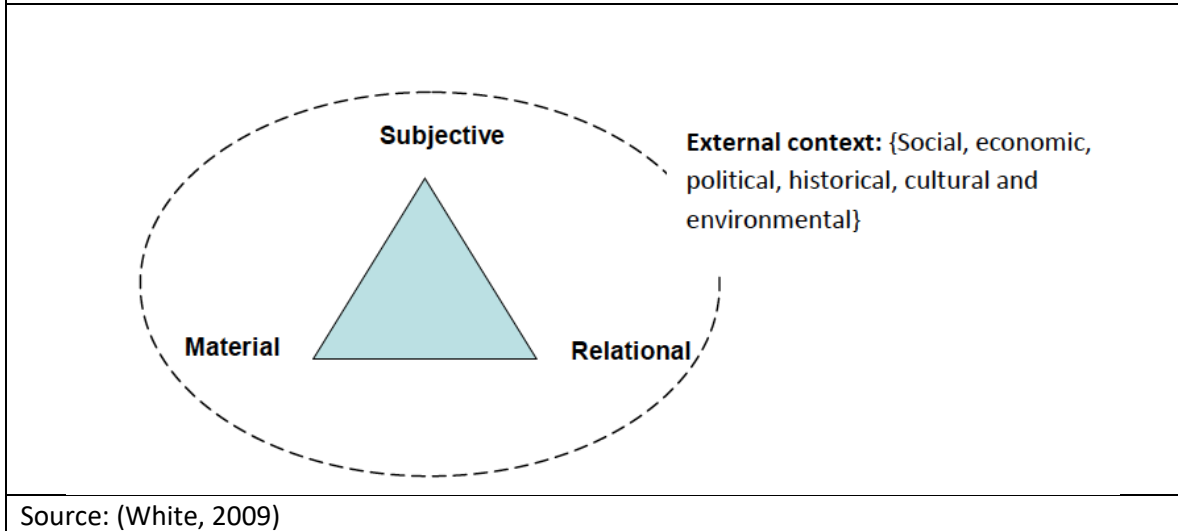
The 3D wellbeing approach considers wellbeing to be a combination of material, relational, and subjective dimensions because it combines the objective circumstances of a person, as well as a strong relational dimension, along with their subjective evaluation of their quality of life, which are essential components of a holistic vision of quality of life (Gough, McGregor and Camfield, 2006; Gough and McGregor, 2007b; White, 2008, 2010; McGregor, Camfield and Woodcock, 2009). Bringing these three dimensions together gives a more complete and multidimensional view of wellbeing and its determinants, and it is a powerful tool through which to understand what people do, what they aspire to, and how their actions and aspirations are influenced by broader societal structures (McGregor and Sumner, 2009; Coulthard and McGregor, 2015).

In the past decades, a group of researchers in development studies, most notably the Wellbeing in Developing Countries ESRC Research Group at the University of Bath<sup>9</sup>, have developed a three-dimensional (3D) approach to wellbeing. The 3D wellbeing framework (Figure 5) focuses on three dimensions: material wellbeing (what a person has and what resources a person commands), relational wellbeing (what a person can do with what they have and what they can achieve with these resources), and subjective wellbeing (what a person thinks they can do with what they have and the meanings they give to the goals they achieve) (McGregor, 2007; McGregor and Sumner, 2009; Jones and Sumner, 2011).

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<sup>9</sup> More information can be found at: <http://www.bath.ac.uk/soc-pol/welldev/wed-new/>

Figure 5. The Triangle of Wellbeing



Material wellbeing considers the tangible resources a person has such as food, income, assets, shelter, employment, access to services, environmental quality, and the extent to which her basic human needs are being met (Gough and McGregor, 2007b; McGregor, Camfield and Woodcock, 2009; White, 2009). Income is one of the most important source of material wellbeing, and employment represents the most important sources of income for most of the world's population (Lister, 2004). The lack of adequate work opportunities do not allow people living in poverty to accumulate assets, meet their basic needs, and invest in their homes and families to improve their lives (Addison *et al.*, 2008; Addison, Hulme and Kanbur, 2009). In addition, people living in poverty frequently live in insecure environments and have disproportionate levels of uninsured risk in the face of shocks, such as natural disasters, medical problems, and death in the family, among others (Lister, 2004; Chambers, 2006; Vakis, Rigolini and Lucchetti, 2016). These shocks can lead to poverty traps, slow recovery, and affect the family in the long term, contributing to the vicious cycle of poverty (Dercon, 2003; Lokshin and Ravallion, 2004; Barrientos and Hulme, 2005; Barrett and Carter, 2013; Vakis, Rigolini and Lucchetti, 2016). Lastly, it has been found that work offers people personal fulfilment as well as a way to provide for their families, showing how the three domains of wellbeing are interconnected (White, 2017; Wittmer, 2021).

Relational wellbeing relates to “the extent to which people are to engage with others in order to achieve particular needs and goals, and the nature of these engagements” (Jones and Sumner, 2011, p. 15). It is related to how social and political relationships enable, or restrict, people in their

pursuit of wellbeing (Gough and McGregor, 2007). Relational wellbeing includes interactions with others, relationships of affection, networks of support, relations with the state, social institutions, forms of collective action, cultural and political identities, and relationships of power (McGregor and Sumner, 2009). Further, research has found that women's view of wellbeing in developing country includes everyday negotiation and management of relationships (Jha and White, 2016).

Within the 3D conceptualisation of wellbeing, relationships contribute to wellbeing because they have both instrumental value and intrinsic, or experiential, value (Camfield, Streuli and Woodhead, 2009; White, 2009). The instrumental value of relationships is related to relationships that can allow people to access different resources and opportunities that can improve their wellbeing (Coleman, 1988; Narayan, 2005; Woolcock and Narayan, 2006). These relationships are vital because they can potentially lead to material benefits and higher incomes, related to the concepts of "social capital" and "social resources" (Narayan, 2005; Camfield, Streuli and Woodhead, 2009). In addition, when considering the instrumental value of relationships, there is an important focus on reciprocity and important considerations about networks, norms, obligations, and societal expectations (Coleman, 1988; Narayan, 2005). Family and kinship relations are an important source of social protection for many who live in vulnerability due to the absence of government and other support (Kabeer, 2008). As McGregor (2006) states,

"Money and material assets comprise only part of the portfolio of resources of people: relationships with others, both intimate and at further removes, are and always have been crucial components of the total resource portfolio that people apply to their struggle for wellbeing" (p. 20).

Relationships also have intrinsic, or experiential, value. Social connections and relationships are crucial to wellbeing for various reasons (White, 2009, 2016). Research in developing countries has found that relationships are central to wellbeing, especially in contexts of poverty and vulnerability (White, 2008; Camfield, Choudhury and Devine, 2009). In this understanding, relationships are not something a person has, but instead, in the words of White (2008), "rather, people become who and what they are in and through their relatedness to others" (p. 8). Moreover, women have been found to have different experiences of relational wellbeing than men because, for many, gendered concerns about their family and community impact their subjective wellbeing, which I will address further in this chapter (Lloyd-Sherlock and Locke, 2008).

Political relationships are also an essential component of relational wellbeing. People living in poverty lack effective political representation, political voice, and their governments and authorities do not recognise their most basic needs and rights (Addison *et al.*, 2008; Addison, Hulme and Kanbur, 2009). This is evidenced by the lack of government services and support, including social protection programmes and basic services, showing an overlap between relational and material wellbeing. This lack of services disproportionately affects the poorest because they have no alternative or escape route, contributing to the poverty trap (Vakis, Rigolini and Lucchetti, 2016). In Latin America, researchers have found that the primary difference between people who are able to overcome poverty and those who are not is access to services, such as access to clean water, sewage systems, and sanitation (Levy, 2001; Vakis, Rigolini and Lucchetti, 2016; Abramo, Cecchini and Morales, 2019). Finally, although relationships have been identified as crucial for wellbeing, more research is needed to understand relational wellbeing. There is also a lack of research on the effects of development interventions on relationships (Camfield, Choudhury and Devine, 2009; White, 2017). This is a gap this research will address.

Finally, the subjective wellbeing dimension deals with how people think and feel about the quality of life they achieve (McGregor, 2007; McGregor, Camfield and Woodcock, 2009). It is concerned with people's views and how they feel about their situation, their values, meanings, moral order, aspirations, hopes, fears, and achievements (Gough, McGregor and Camfield, 2006; McGregor, 2006; Camfield and Skevington, 2008; White, 2008). This is relevant because people's aspirations and life experiences matter in how they conceive of and struggle for wellbeing (Appadurai, 2004; Camfield *et al.*, 2013; Conradie and Robeyns, 2013; McIntyre and Rondeau, 2013; Dalton, Ghosal and Mani, 2016). Subjective wellbeing also includes people's feelings and emotions, such as feelings of dignity, respect, and self-worth (McGregor, 2006; Rojas, 2007; Veenhoven, 2007; Wood, 2016; Espino, 2017). The subjective dimension has been placed at the apex of the wellbeing triangle (above in Figure 5) because the meanings of material and relational wellbeing are a consequence of the interpretations and values of individuals (White, 2009; Coulthard and McGregor, 2015).

In a context of poverty, people's subjective wellbeing is negatively impacted by uncertainty and precarity. Research has found that people living in poverty experience an exaggerated sense of uncertainty, which is related to the lack of resources under the command, their inferior position in relation to others in society, and their constant vulnerability to hazards and shocks (Lister, 2004;

Chambers, 2006; Wood, 2007). Guy Standing's (2011) concept of precarity – developed in the context of European labour market insecurity – is helpful in understanding chronic insecurity and stress. This is related to the concept of “teetering on the edge” (p. 23), knowing that one shock could place a person in destitution, which accounts for chronic insecurity and stress. The critical theorist Lauren Berlant's (2011) writing on Cruel Optimism is also relevant here. She argues that for people living in precarity, “crisis is not exceptional to history or consciousness, but a process embedded in the ordinary that unfolds in stories about navigating what's overwhelming” (p. 10). Thus, for many people living with precarious vulnerability, traumatic experiences are ordinary, and part of the uncertainty is not knowing if one has the resources (mental, material, social) to cope with these challenges (Wood, 2007; Berlant, 2011). Due to this and many other challenges, psychological distress and depression are commonly present among people living in poverty, especially women (Davis and Hill, 2001; Gallie and Paugam, 2002; Gardner and Gabriel, 2004; Camfield, Guillen-Royo and Velazco, 2010; Greeley, 2015).

Furthermore, the 3D wellbeing framework (Figure 5 above) acknowledges the interconnection and dynamic and evolving interactions between the dimensions using a dotted circle (McGregor and Sumner, 2009; Jones and Sumner, 2011; White and Abeyasekera, 2014). In fact, research on wellbeing in the developing world has found that people combine their subjective, material, and relational experiences when discussing wellbeing (Gough and McGregor, 2007b; White and Jha, 2014, 2018; Blackmore and White, 2015; White, 2017). Understanding the multidimensionality of wellbeing and how these dimensions interconnect allows for a better understanding of how people construct their wellbeing, what people prioritise, and what trade-offs they make between different aspects of wellbeing, all important considerations for this research (Camfield, 2006; White, 2010; Rodriguez-Takeuchi, 2013; McGregor, Coulthard and Camfield, 2015).

The concept of 3D wellbeing is not without criticism. First, many claim that the “people-centred” focus of wellbeing may also put the blame on the individual. This could strengthen the belief that places the sole responsibility on the individual in overcoming adversity (White, 2008). This focus on the individual could, not only de-politicise adversity, but it could lead to the argument of reducing state support or considering the role of structural factors. In addition, focusing on wellbeing could potentially lead to a situation where poverty stops being the conversation and only wellbeing is considered. Second, is the criticism that wellbeing is a bourgeois concept. The critique is that

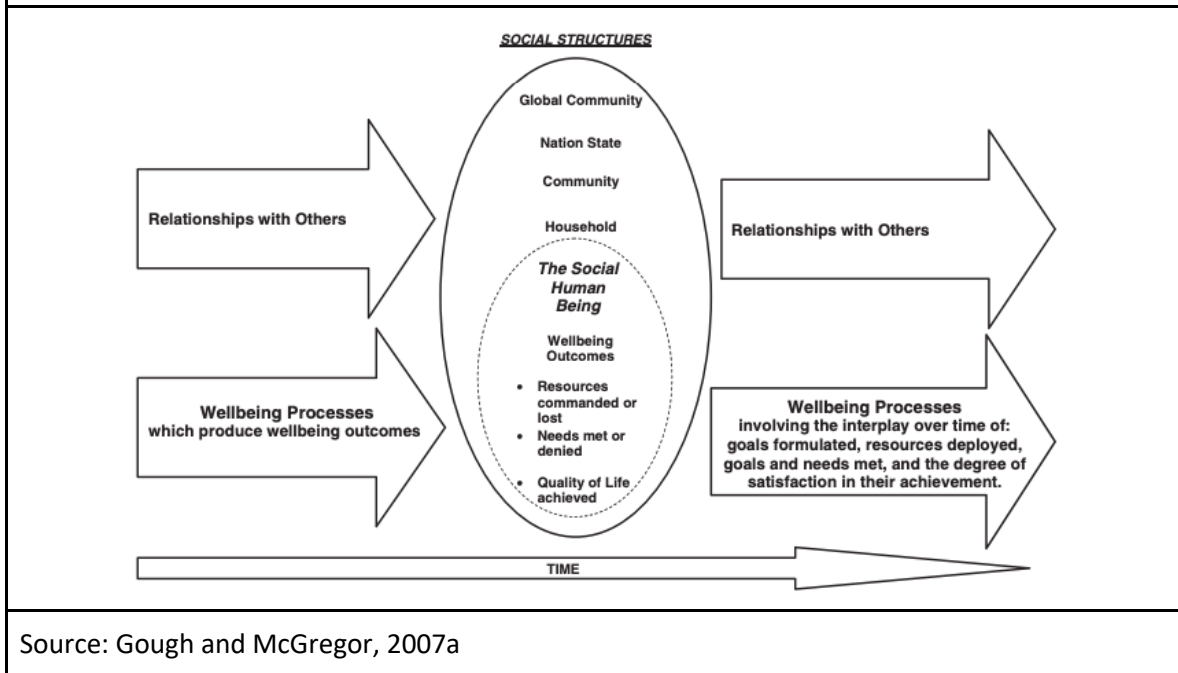
wellbeing is a preoccupation for affluent people or communities who can focus on how to be well because they have their material needs met. In the words of White (2008), “at its simplest, this would suggest that a focus on wellbeing is inappropriate for the poor: they have other, more immediate concerns to get on with” (p.11). Third, the focus on how wellbeing is a positive concept could potentially exclude negative experiences or dimensions, such that some people maintain there should be a dual focus on wellbeing and ‘ill-being’. (White, 2008). Fourth and lastly, wellbeing is also criticised as an empty or “fuzzy” notion. A common objection to its use in policy and programming is that since it is “fuzzy”, it means many things to many people, and thus it means nothing (Camfield, Streuli and Woodhead, 2009; Coulthard, Johnson and McGregor, 2011). However, as I will present in the following section, many researchers claim that the openness of the concept does not disqualify wellbeing from being a valuable concept for policy and practice. What is more, this very openness acknowledges multiple understandings and promotes conversations about the meaning of wellbeing on many levels, from households, communities, to policy circles.

### *2.3.3 Operationalising the 3D Wellbeing Framework for Development Programming and Policy*

The 3D wellbeing framework was operationalised for development policy and practice into the Wellbeing in Development Framework (see Figure 6). The framework seeks to offer a conceptual and methodological grounding for measuring and understanding wellbeing in developing countries to ensure that studies remain consistent with the overarching wellbeing perspective (Gough and McGregor, 2007b). This framework acknowledges the complex relationship and interconnection between wellbeing outcomes, wellbeing processes, relationships and social structures, and time. As an important caveat, the authors of the framework acknowledge its broad scope due to its transdisciplinary and comprehensive notion of wellbeing and acknowledge that it is unlikely that any empirical study will be able to address the entire framework (Gough and McGregor, 2007b, 2007a).



Figure 6. Wellbeing in Development Framework



Central to the framework is the fact that wellbeing is human-centred. This framework places the person at the centre of the analysis and offers an inclusive understanding of people's lives which is centred on people's own priorities and perspectives which considers complex lives (Camfield, 2006; White, 2009). A focus on wellbeing helps understand the impact of policies on people's lives and offers a holistic understanding rather than focusing on material or economic aspects (McGregor and Sumner, 2009; White, 2016). This approach gives, what White (2009) calls, a "people-centred" rather than "project-centred" view, which changes the focus on what change has happened for people and not solely focusing on whether interventions have met their objectives. Further, the concept of wellbeing is respectful in the sense that it considers self-determination and participation rather than exogenously defined notions wellbeing (Jones and Sumner, 2011). Thus, it avoids the imposition of a particular notion of what wellbeing means and allows for a range of possibilities and definitions of wellbeing (Jones and Sumner, 2011; Oman, 2016; Robeyns, 2017). This actor-oriented focus emphasises strengths rather than needs and recognises the multiplicity and complexity of people's lives (Gough, McGregor and Camfield, 2006; White, 2010).

In addition, the wellbeing framework acknowledges that people must be understood in relation to their context and culture (McGregor, 2007; Camfield, Streuli and Woodhead, 2008; White, 2017).

For people, wellbeing is grounded in a specific social and culture (White, 2008). This is relevant because culture provides a guideline as to what meanings are attached to what people perceive and do; cultures guide people's aspirations, and regardless of where individuals live, they, and their relationships, are strongly guided by social norms and expectations (McGregor, 2007; Camfield, Choudhury and Devine, 2009; White, 2016). Due to this, wellbeing promotes an understanding of local development because instead of taking a universal approach, it seeks to understand how wellbeing is lived in understood in different regions of the world (see e.g. Rojas, 2007; Corsin-Jiménez, 2008; Lavers, 2008; Mathews and Izquierdo, 2008; Woodcock *et al.*, 2009; Calestani, 2012; Loera Gonzalez, 2013; Fischer, 2014; Coulthard and McGregor, 2015; Atkinson, Fuller and Painter, 2016).

Continuing to use the basic concepts from the 3D wellbeing framework, the Wellbeing in Development Framework (Figure 6) also considers wellbeing outcomes such as "resources commanded or lost", which refers primarily to material wellbeing, "needs met or denied" which can be understood as a relational dimension, and "quality of life achieved" which refers to subjective wellbeing (McGregor, 2007; Camfield and McGregor, 2009). Further, in order to have a holistic vision of quality of life, one must look at the combination of the objective circumstances of a person, their relationships, along with their subjective evaluation of their quality of life (Gough, McGregor and Camfield, 2006; Gough and McGregor, 2007b; McGregor, Camfield and Woodcock, 2009; Coulthard and McGregor, 2015).

This framework also shows how relationships with social structures, such as the household, community, nation-state, and global community impact people's wellbeing (McGregor, 2007). Relationships help to better understand the role of context, culture, and external context in people's everyday lives and experiences (Gough and McGregor, 2007b; Wood, 2007). Due to their social nature, people frequently relate to others to pursue their wellbeing goals (Gough and McGregor, 2007a). As White (2009) notes,

"Wellbeing then becomes something that happens in relationships – between the collective and the individual; the local and the global; the people and the state. Relationships are thus at the centre of wellbeing analysis and politics" (p. 15).

People's wellbeing is also influenced by social structures such as relations with the state, social institutions, and cultural and political identities (McGregor and Sumner, 2009). This is especially

relevant in a context where around the world people living in poverty lack effective political representation, political voice, and their governments and authorities do not recognise their most basic needs and rights (Addison *et al.*, 2008; Vakis, Rigolini and Lucchetti, 2016). In addition, this view sheds light on the interconnection and interplay between different issues that affect people's lives, which are often absent in policy arenas (OECD, 2015; White, 2016).

The framework considers that wellbeing is in a permanent process of construction, thus it cannot only be conceived as an outcome (Gough, McGregor and Camfield, 2006; McGregor, 2007). Thus, it acknowledges the dynamic and non-linear relationship between wellbeing outcomes and processes and notes their constant iteration through time (Camfield, 2006; Gough and McGregor, 2007b). The authors of the framework caution against focusing too much on wellbeing outcomes, noting that it is just a "snapshot", and that wellbeing processes should not be separated from outcomes. As (Gough and McGregor, 2007a) state,

"Outcomes are abstracts and it is important for the analysis of wellbeing that they are always understood to be non-discrete, ongoing moments that are a part of an interplay of complex societal and cognitive processes" (p. 25).

A temporal notion of wellbeing sheds light on how wellbeing is in a constant process of construction and how wellbeing changes through time, including the dynamics, durations, and pathways of development (Camfield, Guillen-Royo and Velazco, 2010). This view helps better understand the non-linearity and complexity of people's lives, as well as the effects of events that are unexpected, which are frequent in the lives of vulnerable people (Baulch and Davis, 2008; Davis and Baulch, 2011; Boddy, Bakketeig and Østergaard, 2019; Bakketeig *et al.*, 2020). In addition, the literature on poverty and vulnerability has many examples of the relationship between wellbeing and certain events, such as the negative impact that death, drought, recession, and other unexpected factors have on people's lives (Baulch and Davis, 2008; Davis and Baulch, 2011; Crivello and Morrow, 2019). Moreover, a person's expectations of the future and their reflections on the past also influence how people conceive of their present (White, 2008), showing how a temporal understanding of wellbeing strengthens our understanding of people's lives.

Although the 3D wellbeing framework has been operationalised for policy and practice, there is a significant disconnect between the framework and reality. Despite the claims about wellbeing being a human-centred approach based on people's own priorities and perspectives, today most

wellbeing measures are top-down and use quantitative methods (White, 2010; McGregor, Coulthard and Camfield, 2015). Top-down approaches measure wellbeing with pre-determined conceptual, philosophical, or ideological positions (McGregor, Coulthard and Camfield, 2015). Many researchers have developed scales, for example, Diener's Satisfaction with life scale (1984), the World Values survey (Helliwell, Huang and Wang, 2019), Cummins's Quality of Life measures (2005), OECD's Better Life Initiative (Boarini, Kolev and McGregor, 2014) to measure wellbeing. Although there are important indicators of wellbeing that can be understood through top-down measures, many argue that these methodologies do not provide sufficient information about whether people are flourishing in their day to day (Jones and Sumner, 2011). Further, despite the claims about wellbeing helping to understand local realities, in these measures, respondents are not asked to generate their own wellbeing domains, and instead are provided with indicators already identified either in a different country or culture, sometimes in the developed world (Woodcock *et al.*, 2009). I argue that a bottom-up perspective should be used to understand wellbeing because it provides a fuller and more balanced view of people's lives, privileges community preferences, and sheds light on specifics such as intra-household dynamics or social processes (Jones and Sumner, 2011; Gupte and te Lintelo, 2015; White, 2016). Further, bottom-up research is needed to better understand what wellbeing means for different populations (Copestake and Camfield, 2009; McGregor, Coulthard and Camfield, 2015; White, 2016). In the words of Copestake and Camfield (2009),

“With a few notable exceptions [...] it is surprising how little effort has been made to consult poor people in low- and middle-income countries not only about immediate needs but also about their values and long-term life goals” (p. 2).

Thus, these concerns present an opportunity to explore the meaning of wellbeing from the point of view of people themselves, which in turn, is one of the most important milestones of this research.

Further, although it has been acknowledged that wellbeing must be understood as a process, most research looks at wellbeing at one point in time, and there is a paucity of life course biographical research on wellbeing (White, 2010; Huovinen and Blackmore, 2016). Thus, more research is needed to understand the process of wellbeing, as well as better understand the role of women's lifecycle in their experiences of wellbeing, which is a gap this research aims to fill.

In terms of the dimensions of wellbeing, although 3D wellbeing acknowledges the interconnection between material, relational, and subjective wellbeing, more research is needed to understand

what this interconnection looks like in practice (Jones and Sumner, 2011; Blackmore and White, 2015). Further, although the relational aspect of wellbeing is considered important, more research is needed to understand the role of relationships and how they affect people wellbeing and the everyday dynamics of dealing with poverty (Camfield, Choudhury and Devine, 2009; White, 2017). Moreover, although the wellbeing in development framework shows how relationships with social structures (such as the household, community, nation-state, and global community) have an impact on people's wellbeing, more research is needed to understand the role of structural factors and gender on wellbeing.

In addition, researchers claim that framing wellbeing rather than poverty enables a more comprehensive view of people's lives, and explores what people have and are able to do instead of focusing on their deprivations (Camfield, 2006; Camfield, Streuli and Woodhead, 2008; White, 2009, 2010, 2016; McGregor and Sumner, 2010; Jones and Sumner, 2011, 2011; Roelen and Leon-Himmelstine, 2019). However, more research is needed to understand how people conceptualise wellbeing rather than illbeing (White, 2013).

Lastly, despite the idea of how a wellbeing approach could contribute to people's development, the situation is different in policy and programmes. According to Coulthard and colleagues (2011), although

“the term wellbeing has been much used and abused in development rhetoric, policy pronouncements and in the literature but it has seldom been meaningfully put into use in development policy and practice” (p. 457).

Thus, more research is needed to understand what wellbeing means for people, and to explore how to incorporate these understandings into development policy and practice (Eyben, 2013; McGregor, Coulthard and Camfield, 2015). This dissertation aims to address these gaps.

## ***2.4 Women, Poverty & Wellbeing***

This research will explore the wellbeing of women living in poverty in Latin America, in general, and in Paraguay, in particular. A focus on women is relevant because there has been a consensus in international development that poverty and illbeing disproportionately affect women (Kabeer, 2008; Chant, 2016). The 1995 Fourth World Conference on Women in Beijing recognised for the first time that poverty has a “female face” and emphasised that women are 70% of the world's

poor and called for the eradication of the persistent and increasing burden” of poverty on women (United Nations, 1995). This challenge remains today, where women continue to experience poverty at higher rates than men (United Nations, 2015). As Nussbaum has asserted, “women, in short, lack essential support for leading lives that are fully human” (2000, p. 4). Thus, it is essential to discuss the wellbeing of women because women in poverty are more vulnerable, tend to own fewer material resources, have lower levels of subjective wellbeing, have fewer social networks, and are less likely to exercise voice in household decision-making (Kabeer, 2008; Bennett and Daly, 2014; Bradshaw, Chant and Linneker, 2019). This understanding of the feminisation of poverty has helped not only draw attention to how poverty affects women disproportionately, but also to shed light on how women’s needs and vulnerabilities must be addressed in the development process (Wennerholm, 2002).

Poverty viewed through a gender lens requires an examination of social and economic relations, as well as institutions (Razavi, 1998; Bennett and Daly, 2014; Martinez-Restrepo and Ramos-Jaimes, 2017). It is crucial to have a gendered understanding of poverty because gender has a role not only in processes leading to poverty but also in the potential routes out of it (Bennet and Daly, 2014). A gender perspective draws attention to cultural and structural factors that create or perpetuate differences and inequalities between men and women (Bennet and Daly, 2014). In addition, it is crucial to address women’s barriers not only through legal and social institutions, but also through internalised, unquestioned perceptions of their place in society, governing their behaviours (Kabeer, 2017; Homewood, Nielsen and Keane, 2020). Therefore, as Razavi (1998) states,

“the gender analysis of poverty is not so much about whether women suffer more poverty than men, but rather about how gender differentiates the social processes leading to poverty, and the escape routes out of destitution” (p. 5).

Further, it is vital to consider intersectionality – the multiple aspects of experience and identity that interact to affect the links between gender and poverty – which can include gender, socioeconomic class, race, ethnicity, location, and family structure, among others (Bennett and Daly, 2014; Martinez-Restrepo and Ramos-Jaimes, 2017).

Women and girls are more often affected and jeopardised by poverty mainly because gender exacerbates the disadvantages associated with poverty in pursuing livelihood activities, including access to work and credit (Chant, 2008; Kabeer, 2008). Women living in poverty are more likely to work in the home or self-employment rather than waged or salaried labour (International Labour

Organisation, 2008; Chopra, 2018). Although women are negatively impacted by income poverty, women also have other privations which are equally important such as time poverty, asset poverty, and power poverty, which are interrelated (Chant, 2007, 2011). Moreover, women's access to paid work is likely to be influenced by their care responsibilities and the extent to which they can successfully combine care and paid work. In many cases, working mothers from poor households face a trade-off between self-employment, which can accommodate their childcare responsibilities but offers low returns to work, and wage work, which may pay more but imposes costs in terms of their childcare responsibilities (Kabeer, 2008; Ghosh, Singh and Kayastha, 2017; Sengupta and Sachdeva, 2017). Further, evidence suggests that increases in women's paid work have done little to change gender divisions of labour within the home and have instead led to double workloads and time poverty for women (Kabeer, 2008; Ghosh, Singh and Kayastha, 2017; Sengupta and Sachdeva, 2017).

One of the driving factors of gendered disparity is the unequal distribution of care and unpaid work (Chant, 2007, 2011; Razavi, 2007). More specifically, due to gender norms, women typically must combine productive activities with unpaid work means they are increasingly "time poor" (Bradshaw, Chant and Linneker, 2019). Studies have found that women's unpaid work accounts for 66% of women's work (compared to 25% for men), and this disparity is even more significant among low-income groups (Chant, 2008). As Pineda-Ofreneo and Acosta (2001) have noted, "the poorer the household, the longer women work" (p. 3). Unpaid care work includes cooking, cleaning, washing, teaching, encouraging, and taking care of children, the elderly, and other vulnerable groups (Chopra, 2014; Cookson, 2018; Daminger, 2019; Dean, Churchill and Ruppanner, 2022). Further, it has been found that women commonly have the burden of the mental load of family life, which includes cognitive labour (thinking, planning, scheduling, organising), as well as emotional labour (feeling, caring, worrying) (Damingier, 2019; Garcia-Alonso *et al.*, 2019; Dean, Churchill and Ruppanner, 2022). Women's disproportionate responsibility for unpaid care work means their ability to choose to carry out other activities such as education, paid work, community activities, access a health clinic, or rest are constrained (Kabeer, 2008; Chopra, 2014; Ghosh, Singh and Kayastha, 2017; Sengupta and Sachdeva, 2017). Care duties are not static, they have a temporal aspect, are multidimensional, and shift and evolve through the life course (McKie, Gregory and Bowlby, 2002, 2004). A helpful concept to understand care duties better is caringscapes.

Caringscapes can be thought of as the changing and shifting multi-dimensional terrain that comprises people's caring responsibilities and obligations (McKie, Gregory and Bowlby, 2002, 2004; Evans *et al.*, 2019). The concept of caringscapes is crucial to understanding how family and care responsibilities are not static and shift across different life stages. Some authors have also added a spatial understanding onto caringscapes, which consider not only care trajectory over the life course (caringscapes), but also the broader landscape of resources relevant to care, including formal care, transport, housing and other local infrastructures provided through public and private institutions (carescapes) (Bowlby and McKie, 2019; Evans *et al.*, 2019). As Bowlby and McKie (2019) have noted,

“individual caring practices need to be envisaged as created and re-created in the context of many temporalities (such as the temporality of the life course, body, employment) and also of many spatialities – such as attachment to place, the mobilities of people, capital and finance, and the spaces of governance” (p. 533).

The caringscapes and carescapes approaches acknowledge the multiple, and sometimes contradictory, demands that come from shifting care work and paid work, which sheds light on gendered inequalities (McKie, Gregory and Bowlby, 2004).

Women's households are a key site for understanding many gender inequalities since family and kinship relationships are inherently gendered (Razavi, 2007; Chant, 2008; Kabeer, 2008). As Kabeer (2008) notes, the concept of 'the household' is a convenient term to denote one of the most significant organisational forms taken by family and kinship relationships and refers to members who share a common residential space and/or common budget. Gender norms play out in households and often constrain women's ability to have a voice, make decisions, and have agency in their own homes (Rowlands, 1997; Rakodi, 1999; Kabeer, 2003; Blackmore and White, 2015; Bradshaw, Chant and Linneker, 2019). What is more, research in the Global South has found that women prioritise their children above themselves (Dasgupta, 1995; McIntyre and Munro, 2013; McIntyre and Rondeau, 2013). Maternal sacrifice is a common theme and is driven by cultural norms which state that women should place their wellbeing after that of the family, and these cultural norms are often internalised by women. Notions of wellbeing were linked to children, and women found it challenging to discuss types of wellbeing that did not include their children or their roles as mothers (McIntyre and Rondeau, 2013). In addition, poor women endure physical and emotional hardship and sacrifice their own happiness, health, and aspirations to care for and support their children (Dasgupta, 1995; McIntyre and Munro, 2013; McIntyre and Rondeau, 2013).



In Latin America, studies generally report a positive association between female labour force participation rates and household income (Kabeer, 2008; Razavi and Turquet, 2016; Martinez-Restrepo and Ramos-Jaimes, 2017). However, women in the region are at a disadvantaged position because of their inability to find regular employment (Kabeer, 2008). This situation was exacerbated by the COVID pandemic in 2019 (Gonzalez, 2020; United Nations, 2020; United Nations Development Programme (UNDP), 2020; World Bank, 2020c; Padmore, 2021). Many times, the challenge in finding regular employment is related to women's many responsibilities within the home and family sphere. Although it has been found that women in Latin America have more liberty and autonomy than many women in the developing world, including the ability to make decisions over their lives and how to spend household income, the challenge that women in Latin America face is not access to more responsibilities or power, the problem is that they have *too many* responsibilities, and are thus overburdened by these (Martinez-Restrepo and Ramos-Jaimes, 2017; Laszlo, Renée and Majid, 2019). In the region, domestic labour is almost exclusively allotted to women (Arriagada, 2002; Chant, 2008; Salvador and Cossani, 2020; Loza, 2022). This domestic labour includes cooking, attending to the house, and tending to children's child rearing and education. In relation to government interventions and social programmes, women are typically responsible for duties outside the home, such as filling out paperwork and waiting in line. On top of that, women are the recipients of all government programmes and NGO interventions and have to manage these responsibilities. Due to this, women in Latin America have been coined "*supermadres*" ("*supermothers*"), which describes how women who already live in deprivation also need to juggle responsibilities both in the productive and social sphere, thus feeling overburdened which negatively impacts their wellbeing (Folbre, 1994; Chaney, 2014; Martinez-Restrepo and Ramos-Jaimes, 2017). The idea of "*supermadres*" is not foreign to the Paraguayan context, presented in chapter 1, where women face similar constraints and responsibilities in the home and the productive world (Schuster, 2014).

The balance that women must carry out between care duties, unpaid work, and paid work results in different trade-offs where women must make choices between different dimensions of poverty in the interests of personal and/or household wellbeing (Chant, 1997, 2003; Kabeer, 2008). This reinforces the idea that when considering poverty and wellbeing for women, it is crucial to be attuned to women's personal experiences and perceptions (Chant, 2008). Research has found that the challenges of the feminisation of poverty not only is related to women's income compared to

men, but, as Chant (2008) notes, “a feminisation of responsibility and obligation” (p. 178). What this means is that women are at the frontline of dealing with poverty in their families and in their homes.

Since women are disproportionately affected by poverty, as mentioned previously, women and female-headed households have become a target for social safety nets and other programmes around the world (Martinez-Restrepo and Ramos-Jaimes, 2017; Bradshaw, Chant and Linneker, 2019). The crucial question among researchers, development agencies, and governments is how to effectively improve women’s lives through interventions. Classic development interventions include income-generation strategies, training and education, and social programmes, which see poor women as natural candidates because they lack income, food security, health, and education (Chant, 2008; McIntyre and Munro, 2013; McIntyre and Rondeau, 2013).

## ***2.5 Conclusion***

Although there has been progress, disconnects remain in international development between what people themselves think is important for their wellbeing and what different kinds of professional stakeholders (such as policymakers, practitioners, and funders of interventions) might think is important. A 3D wellbeing perspective offers a person-centred model and allows multiple and holistic interpretations. It encompasses how people think and feel about their lives, their sense of fulfilment, their relationship with others, and their access to material resources. Due to this, it has much to contribute to how programmes and policies help people living in poverty. It is crucial to understand people’s lives on their own terms, including how people create meaning and define wellbeing for themselves (Camfield, 2006). Wellbeing offers a multidimensional view, considers complexity, and rejects the compartmentalisation of people’s lives (White, 2010). By asking people what wellbeing means, here and now, we can have definitions of wellbeing that are socially and culturally embedded in people’s lives (Camfield, 2006; White, 2009). A wellbeing approach counterbalances the narrow focus of development on income, and instead emphasises that if policy and programmes want to support people in their wellbeing, material, relational, and subjective notions of wellbeing must be considered with equal weight.

In this chapter, I have identified important gaps in theory and practice to which this dissertation aims to contribute. First, more bottom-up research is needed to understand what wellbeing means for people in different contexts and cultures (Copestake, 2009; McIntyre and Rondeau, 2013; McGregor, Coulthard and Camfield, 2015; White, 2016). As Copestake (2009) notes, “what matters is to be specific, to ground argument in real lives, wherever they may be” (p. 2). Second, it is crucial to better understand wellbeing processes and people’s life cycles using a temporal perspective rather than relying on wellbeing outcomes (White, 2010; Huovinen and Blackmore, 2016). Third, more research is needed to understand the dynamic interconnection between material, subjective, and relational wellbeing and what this looks like within women’s lives (Jones and Sumner, 2011; Blackmore and White, 2015). Fourth, more research is needed to understand the role of relationships and how they affect people’s wellbeing and the everyday dynamics of dealing with poverty (Camfield, Streuli and Woodhead, 2009; White, 2017). Fifth, there is a paucity of research into the role of structural factors and how gender influences wellbeing. Sixth, more research is needed to understand the relationship between illbeing and wellbeing, and how people conceptualise these experiences (White, 2013). Further, it is unclear whether the positive connotation of wellbeing potentially excludes negative experiences or dimensions (White, 2008). Seventh, more research is needed to understand how people’s understandings of wellbeing can be translated into development policy and practice (Eyben, 2013; McGregor, Coulthard and Camfield, 2015). Eighth and lastly, to my knowledge, no research has been carried out on the wellbeing of women in Paraguay.

In closing, Robert Chambers (2007) urges development researchers and practitioners to be “more courageous, inventive, and reflexive in the approaches they use in research to understand the illbeing of poverty and the well-being to which poor people aspire” (p. 9). In the next chapter, I will present my methodology for understanding the wellbeing of women living in poverty in Paraguay using a bottom-up approach.

## Chapter 3. Methodological Approach

### ***3.1 Introduction***

To address the conceptual and empirical gaps I identified in my literature review, and through my experience as a development practitioner, I designed a qualitative biographical study to draw out insights and experiences of 16 women who participated in Fundación Paraguaya's poverty intervention. Specifically, my aim was to capture women's conceptualisations of wellbeing and to illustrate the complex dynamic between poverty and wellbeing as well as to explore meanings, relationships, change over time, and experiences of these women. In addition, I wanted to generate local understandings of wellbeing, an understanding of the opportunities and risks that women face on a daily basis and in the long term in terms of being well, as well as their interactions with Fundación Paraguaya.

This chapter presents the methodological decisions I have taken to address my research objectives and is structured as follows. In Section 3.2, I discuss my positionality and personal experience with this research. In Section 3.3, I introduce my methodology and explain why a qualitative biographical approach was the best strategy for this research and for understanding wellbeing. In Section 3.4, I present my research design, discuss my sampling strategy, fieldwork sites, and introduce the participants of this research. Section 3.5 presents my methods of data collection, then, in section 3.6, I introduce my data analysis process. Section 3.7 includes a reflection on the strengths of my research design. Lastly, section 3.8 presents the ethical considerations for this research.

### ***3.2 Positionality***

From the conception of this research, I reflected on my years of experience learning and practising development. This means that I brought my background, experience, and attitudes toward the topic of development, in general, and wellbeing, in particular, into this dissertation. As I mentioned in the introduction chapter, what caught my curiosity about the topic of wellbeing was this novel (at least for me) idea of asking people to imagine what "being well" meant for them and then working towards that goal. This approach was very different from the traditional approach, where the idea of development is phrased and practised as something that people *do not* have or are deprived of instead of focusing on what people need to be well. Through this reflection, I

developed my epistemological and methodological stance to explore the concept of wellbeing from participants' point of view.

At the outset of this research, it is crucial to reflect on my positionality. During my fieldwork, I was aware that in many ways I was both an outsider and an insider. I am an insider in the sense that I shared many characteristics with my research participants; I am Paraguayan, Spanish is my first language, I am a woman, and I am a mother. However, I am also an outsider in many ways. Firstly, I have never lived in poverty, on the contrary, I have had access to many opportunities. I have closely observed poverty, insecurity, and vulnerability but have never lived it. Second, I am not fluent in Guarani, the native language of many participants.

Moreover, it is important to mention that this research has been shaped by my experience with motherhood. I started my doctorate studies pregnant with my first daughter, and started my fieldwork in the last months of my pregnancy and completed fieldwork while my daughter was just an infant. While analysing my data and writing my chapters, I welcomed a second daughter into the world. I believe it is no mystery that motherhood is a guiding thread in this research. Motherhood was not only a guiding thread but also a factor that connected me with research participants; in some ways, we were part of the same world. Participants would often ask how my baby was doing, if the baby was sleeping yet, and how she was getting on. My experience as a new mother impacted the way I saw participants, the ways I interacted with them, and also, I believe, the ways in which they saw and interacted with me.

Throughout, a significant challenge was creating a relationship of mutual learning with all participants. I always sought an interaction that promoted respect, while being aware of cultural and sensitive issues that could situate my participants in an uncomfortable position. Now, I will introduce the methodology I designed to understand what wellbeing meant for women living in poverty in Paraguay.

### ***3.3 Methodology***

This research aims to develop a deep understanding of the wellbeing of women living in poverty in Paraguay. As presented in my Literature Review, wellbeing is multidimensional, context-specific,

and considers temporality. To explore the lived experiences of women taking in consideration different aspects of their lives from their temporal perspectives and how poverty interventions feature these, this research set out to examine the following research question:

What are women's lived experiences of wellbeing and how do these interact with anti-poverty programming in Paraguay?

This main research question was investigated through the subsequent questions:

- How do participants conceptualise wellbeing?
- How does a life course perspective help understand the dynamics of wellbeing?
- How do interventions feature in women's understanding of wellbeing in their lives?

To answer these research questions, I designed a study to seek descriptive and in-depth knowledge on how individuals understand, conceptualise, and experience wellbeing.

Qualitative research allows the researcher to pay attention to context (such as social, political, economic, and social processes), and how specific contexts influence personal narratives (Gough and McGregor, 2007a; Lewis, 2007). Understanding context and generating local understandings are essential to capture women's everyday experiences, responsibilities, and relationships, as well as the perceived risks and opportunities women face on a daily basis and in the long term (Crivello, Camfield and Woodhead, 2009; Crivello, Morrow and Wilson, 2013). This allows insight into how women understand wellbeing and how these understandings vary according to different contexts, such as life phase, gender, socio-economic status, among others (Camfield, Streuli and Woodhead, 2008). In terms of meanings, qualitative methods allow participants to describe in detail what they think and feel as well as their experiences, attitudes, beliefs, and the meanings they bring to them (Denzin and Lincoln, 1998; Janesick, 1998; Martinez-Restrepo and Ramos-Jaimes, 2017). Qualitative methodologies can help shed light on aspects of people's lives that are often overlooked, such as the sources of meaning that enable them to sustain their wellbeing in contexts of poverty and vulnerability (Laderchi, 2001; White and Pettit, 2007; Camfield, Crivello and Woodhead, 2008; Camfield and McGregor, 2009; McGregor, Coulthard and Camfield, 2015). This offers perspectives about people's contextual understandings, attitudes and experiences, as well as uncovering how people make sense of or interpret phenomena in terms of the meanings people bring to them (Hakim, 2000; Camfield, Crivello and Woodhead, 2008; Camfield, Streuli and Woodhead, 2008;

Espino, 2017). Understanding the meanings people give to their actions and ideas reveal how they interpret the world around them, which are vital for understanding women's conceptualisations of wellbeing (Martinez-Restrepo and Ramos-Jaimes, 2017).

A wide range of studies have shown the value of qualitative tools for generating and validating subjective measures related to wellbeing within distinct populations, from quality of life (Camfield and Ruta, 2007; Roelen and Camfield, 2015), health (Bowden *et al.*, 2002), child wellbeing (Camfield, Streuli and Woodhead, 2008; Crivello, Camfield and Woodhead, 2009; Jones and Sumner, 2011), and psychosocial wellbeing (Camfield, Guillen-Royo and Velazco, 2010, 2010; White and Jha, 2014), among others. Unlike quantitative methods, qualitative methods can observe how people respond to interventions and the extent to which programs convey something significant for them. However, as mentioned in Chapter 2, most studies to date on wellbeing have used quantitative methods (White and Jha, 2014). This is a limited approach because many aspects of wellbeing cannot be reduced to a survey or a scale (White and Jha, 2014). What is more, these measures are often not adapted to context or culture (White, 2009). In addition, researchers have found discrepancies between the scores people assign to areas of their own lives and what they say in interviews, suggesting people are more willing to open up about more negative aspects in interviews when they can build rapport with researchers or feel that they can contextualise their answers (Crivello, Camfield and Woodhead, 2009; White and Jha, 2014).

Further, using a biographical life course approach adds a time dimension to qualitative research, seeking to understand process and change (Thomson and McLeod, 2015; Vogl *et al.*, 2018; Neale, 2021). This approach enables a detailed exploration of changes and continuity in women's life trajectories, and the commonalities and differences in their experiences (Crivello, Morrow and Wilson, 2013). Since wellbeing is not an outcome or an endpoint but a process (Gough, McGregor and Camfield, 2006), a biographical study life course helped me understand the dynamism in women's lives. Biographical research has been found to be useful for research with objectives of explanation, understanding process, change, and evaluation (Blaikie, 2009; Bryman, 2015; Neale, 2021). It seeks to capture critical moments of change and transition, detect change over time, explore processes associated with change or stability, and interpret the perspective of the person experiencing the change (Calman, Brunton and Molassiotis, 2013; Vogl *et al.*, 2018). Using a life course approach allows the researcher to have a more comprehensive lens and focus on women's

lives as a process and not just a snapshot (West, 2012; Vogl *et al.*, 2018; Neale, 2021). The focus on process aids in understanding dynamics and how people experiences wellbeing through subjective, socially, and culturally constructed experience of wellbeing as a whole (Camfield, 2006). Further, this approach helped me understand how women's wellbeing changes over time, understand wellbeing as a process, identify poverty shocks, and understand attrition and changes in programme participation through time.

This research is situated within a constructivist-interpretive paradigm. Due to this, it has concern for meaning, specifically the meanings that social phenomena have for the actors involved, and the value of understanding the way research subjects see the world (Bryman, 2015; White, 2016). It also follows a subjectivist epistemology, meaning that knowledge is a social product, and researchers and respondents co-create understandings (Camfield, Streuli and Woodhead, 2008; Crivello, Morrow and Wilson, 2013; Flick, 2014). Interpretivism also stresses that various meanings about the same reality can exist (Mertens, 2010; Crivello, Morrow and Wilson, 2013; Bryman, 2015). Due to this, I recognise that wellbeing is socially constructed and needs to be seen through the eyes of those whose wellbeing we are trying to understand. To illustrate, and as I will expand upon further on, participants evaluated their situation based on their own conceptualisation of wellbeing, rather than relying on outsiders' definitions of what it means to be well (McGregor and Sumner, 2010).

Using the constructivist-interpretive paradigm, I considered participants to be best placed to assess their own wellbeing (Rojas, 2007; McGregor, Coulthard and Camfield, 2015). Throughout this research, participants defined and evaluated wellbeing on their own terms, rather than relying on outsiders' definitions of what it means to live well (Rojas, 2007; Lloyd-Sherlock and Locke, 2008; McGregor and Sumner, 2010). I assumed my role as trying to understand a person's wellbeing assessment, rather than myself carry out an assessment of their wellbeing (Rojas, 2007). Following this epistemological point of view, I started this research with no hypothesis, and instead attempted to develop a deep understanding of how poor and vulnerable women conceptualised wellbeing. I recognised that wellbeing is socially constructed and needs to be seen through the eyes of those whose wellbeing we are trying to understand. Thus, to understand wellbeing from participants' experiences, I used an exploratory approach, which considers flexibility and emphasises particularity, variability and the complex inter-relations of various factors (White,



2016). Further, in trying to privilege the voices of the women who participate in this research, I have used quotations as fully as possible to exemplify their experiences<sup>10</sup>. In addition, when words in participants' quotations have no direct equivalent in English, I have left the word in Spanish in the text and added a footnote explanation.

In sum, the interconnection of the different dimensions of wellbeing gives a sound basis for my research design, considering that I will need to use qualitative methods and as a person-centred and dynamic understanding, to understand women's conceptualisations of wellbeing (Camfield, 2006). Specifically, a qualitative biographical design helped me: a) capture the highly contextual nature of women's lives and their wellbeing; b) allow me to see change and process in women's lives, and c) understand how interventions feature in women's understanding of wellbeing in their lives to shed light on the complex dynamics behind poverty and wellbeing. This research aims to create a space for people to share and reflect on their experiences, as well as aims to generate valuable outcomes for participants, policy makers, and practitioners alike (Camfield, Crivello and Woodhead, 2008).

### ***3.4 Research Design***

In this section, I will describe my research design, which includes the process of sampling, fieldwork sites, and the introduction of my research participants.

#### ***3.4.1 Sampling & Fieldwork Sites***

The main population for this research consisted of 16 participants, who were women living in poverty and vulnerability in Paraguay. I am aware that this sample is not representative of poor women in Paraguay or FP clients. However, this was not my aim, my aim was to have cases that are emblematic of different FP clients within different social and structural contexts (Alasuutari, Bickman and Brannen, 2008; Thomson, 2011; Phoenix *et al.*, 2017; Boddy, Bakketeig and Østergaard, 2019). The participants in this study were randomly selected through FP's client database of more than 80,000 women, following a stratified sample based on demographic and programmatic criteria, presented below. I aimed to obtain a varied group, including participants

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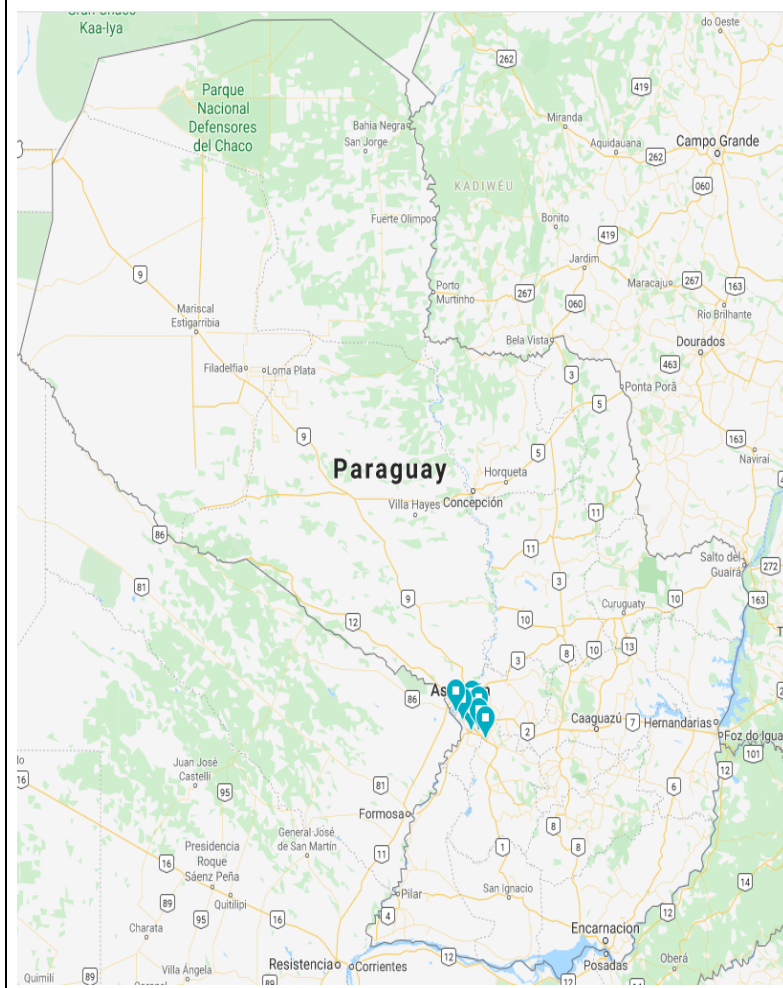
<sup>10</sup> Appendix 3 presents the conventions I have used for quotations

residing in different areas, with different professions, and different loan amounts, and who have been FP clients for different numbers of years.

As mentioned in the Introduction (section 1.4) there were two groups of participants in this study due to high attrition rates from FP's anti-poverty programme. For the first round of participants (Group A), I selected 11 women using FP's client database. The criteria to select these women was that women had started FP's Poverty Stoplight programme in a specific geographical area in the previous month. For the second round of participants (Group B), I randomly selected 6 women using FP's client database. The criteria to select these women was simply that they had completed FP's Poverty Stoplight programme in the past six months in the same geographical area as Group A. The objective was to understand their experience with the intervention retrospectively. To be clear, by adding Group B, my aim was to include the perspective of women who had persisted in FP's programming, not to carry out a comparative study between two groups (group A and B). Further, because Group B was included later in the research, these participants participated in fewer research activities than group A.

My fieldwork sites consisted of seven urban and peri-urban towns in the Central department of Paraguay (see Figure 7 below). These towns are located in a demographically dense area and represent more than 30% country's population. The urban towns have well-developed transportation and infrastructure, as well as industries and services. The peri-urban towns are farther away from the main cities, thus their transportation systems, infrastructure, and service industries are less developed. However, they are all located within a radius of 50km squared, which made it accessible for fieldwork. Further, to protect my participants' confidentiality, I will not disclose the names of these towns.

Figure 7. Fieldwork Sites



Source: Google Maps

### 3.4.2 Research Participants

Table 1 provides an overview of the key demographic characteristics of the 16 women who participated in this research. These women's experiences form the basis of the qualitative biographical case studies put forward in this research. As mentioned previously, my sample consisted of emblematic cases which allowed for in-depth and contextualised insight (Alasuutari, Bickman and Brannen, 2008; Thomson, 2011; Phoenix *et al.*, 2017; Boddy, Bakketeig and Østergaard, 2019). All names used in this dissertation are pseudonyms.

Table 1. Research Participants & Descriptions								
	Group	Name	Location	Age	Educational Attainment (grade)	Number of Children*	Job Description	Monthly Income **
1	Group B	Paola	Urban	23	12	1	Hairdresser. Later on, she worked at a call centre.	\$167
2	Group A	Nidia	Urban	27	12	3	Food Sales. Later on, started an event planning business.	\$100
3	Group B	Jimena	Urban	33	12	2	Hairdresser.	\$500
4	Group A	Leticia	Urban	34	12	1	Sales assistant at a shopping mall.	\$333
5	Group B	Beatriz	Semi-urban	35	12	2	Maid.	\$100
6	Group A	Romina	Semi-urban	40	6	4	Has a kiosk and works in a local market. Later on, maid.	\$217
7	Group A	Elisabeth	Urban	41	6	3	Hairdresser.	\$667
8	Group A	Sandra	Semi-urban	42	4	2	Door-to-door saleswoman.	\$417
9	Group A	Ana	Semi-urban	45	11	5	Food sales.	\$667
10	Group B	Jazmin	Semi-urban	45	9	2	Sells bulk foodstuffs.	\$100
11	Group A	Rocio	Urban	47	6	4	Door-to-door saleswoman.	\$400
12	Group A	Liliana	Semi-urban	51	3	3	Maid and cook.	\$183
13	Group B	Nancy	Semi-urban	52	3	0	Glassmaking business and sells handicrafts.	\$500
14	Group B	Marina	Urban	54	6	4	Has a store which sells home items.	\$333
15	Group A	Valeria	Semi-urban	56	10	1	Food sales.	\$1,000
16	Group A	Jacinta	Urban	71	6	8	Seamstress.	\$50
		Average		40.4	8.1	2.8		\$358
* In some cases, this included dependents that lived with participants such as grandchildren ** Minimum wage in Paraguay at the time of research was approximately \$400 a month Source: Participants' responses								

Table 1 shows diversity among participants ranging from location, age, educational attainment, number of children, job description, and income. All participants lived in urban and peri-urban areas in Paraguay's central department. The average age of participants was 40, and participants' ages ranged from 23 to 71 years old. The average level of educational attainment grade was grade 8, and ranged from grade 3 to grade 12. The average number of children was 2.8 and ranged from 0

to 8. Only one participant (Nancy) did not have children. Since all participants had been Fundación Paraguaya's microfinance clients at one point or another, it is not surprising that the majority of women were micro entrepreneurs<sup>11</sup> in the informal sector<sup>12</sup>. These women lived day by day, with jobs ranging from running cooking stalls to beauty parlours, to selling clothes door to door. Some participants worked for others, for example as maids, but their employment was informal. Only two participants, Leticia, and later Paola, had formal employment<sup>13</sup>. The average self-reported income was US\$358, less than minimum wage, and income ranged from US\$100 to US\$1,000. This information closely resembles the demographics of FP clients<sup>14</sup>.

### ***3.5 Data Collection Methods***

This research used qualitative methods of data collection over a period of 16 months. The data collection process took place in six rounds of data collection, and the time interval between the rounds was approximately 6-8 weeks. My methods included observations, in-depth interviews, life history interviews, and wellbeing charts.

The objective of using these methods was to better understand conceptualisations of wellbeing for women living in poverty and throughout, I took an exploratory approach that enabled participants to define wellbeing in their own terms and to focus on life experiences that they deemed significant. With their agreement, all interviews took place in women's homes, in hopes that it was a space where they could comfortably share their life experiences.

The data collection for this dissertation took place over 16 months, from April 2018 to July 2019. Below, in Table 2, I present the summary of the different phases, data collection methods, and timeline of my data collection.

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<sup>11</sup> I use the IDB's definition of micro entrepreneur, a person who owns a microenterprise, which refers to a small business that employs less than 10 people. A microenterprise is typically financed by microcredit, a type of credit available to people who have no collateral, credit history, or employment history (Inter-American Development Bank, 1998).

<sup>12</sup> Informal employment and the informal sector includes work for small companies with low productivity operating outside of legal norms, although this sector is neither clandestine nor illegal. Employment within the informal sector does not confer the rights of access to social security and health insurance (Martinez Restrepo, 2017)

<sup>13</sup> In the Paraguayan context, this means earning at least minimum wage and being enrolled in a health insurance and pension programme.

<sup>14</sup> Ramos, N., 2022, personal communication, 14 October. Ramos is the current Manager for Methodology of the Poverty Spotlight in Paraguay.

Table 2. Data Collection Timeline						
Phases	Data Collection Methods	2018			2019	
		Apr - May	Jun	Nov - Dec	Apr - May	Jun - Jul
Phase 1 (Group A only)	Poverty Stoplight Observation	X				
	Phone Interview		X			
Phase 2 (Groups A and B <sup>15</sup> )	Life History Interview			X		
Phase 3 (Groups A and B)	Phone Interview				X	
	Wellbeing Chart & Session II Life History Interviews					X

As described in Table 2, I structured my research in three phases, each containing different data collection methods. Phase 1 (April – June 2018) focused on collecting contextual and background information from women and their families using the methods of Poverty Stoplight observation and phone interviews. It is important to note that the research activities of phase 1 were only carried out with Group A. Then, phase 2 (November – December 2018) focused on building relationships with women and learning women’s life histories using the methods of life history interviews. Lastly, phase 3 (April – July 2019) focused on continuing life history interviews, completing wellbeing charts, and validating information collected in earlier rounds (phases 2 and 3 were carried out with groups A and B).

Table 3 (below) gives more detail and shows which data collection activities were carried out with each of the 16 research participants. As mentioned previously, due to the late introduction to the participants from Group B (as described in section 1.3.2), not all participants went through the six rounds of data collection. In addition, I was unable to reach every participant for every interview due to participants’ different personal circumstances. All in all, I carried out 68 interviews with the 16 research participants.

<sup>15</sup> As a reminder, the explanation of the difference between Groups A and B can be found in section 1.3.2

Table 3. Data Collection Carried Out per Participant								
			Phase 1			Phase 2	Phase 3	
		Participant Name*	#1 P. Stoplight Observation	#2 Phone Interview	#3 Phone Interview	#4 Life History Interview	# 5 Phone Interview	# 6 Wellbeing Map & Life History
Group A	1	Romina	X	X		X	X	
	2	Rocio	X	X		X	X	X
	3	Liliana	X	X		X	X	X
	4	Nidia	X	X	X	X	X	X
	5	Leticia	X	X	X	X	X	X
	6	Elisabeth	X	X	X	X		X
	7	Jacinta	X	X	X	X	X	X
	8	Ana	X		X			X
	9	Valeria	X	X		X		X
	10	Sandra	X	X	X			
Group B	11	Jazmin				X		X
	12	Marina				X		X
	13	Paola				X	X	X
	14	Jimena				X	X	X
	15	Beatriz				X		X
	16	Nancy				X		X
* All participant names are pseudonyms								

In addition to the data collection methods mentioned above, I also carried out interviews with FP mentors (12), FP headquarters staff (5) and observed FP mentor training (2 days). Since the focus of this research moved away from a sole focus on poverty mentoring, I decided not to refer to this data directly in this dissertation (more information can be found in Appendix 4). Even though I will not refer to this data directly in this dissertation, they have played a role in framing my thoughts. Thus, in total, I carried out 85 interviews for this research.

Now, I will present my methods of data collection in detail.

### 3.5.1 Observation of the Poverty Stoplight

Participant observation is a method of social research that attempts to observe first-hand social action in its everyday setting to learn the perspectives and meanings held by people. The method is distinctive because the researcher approaches participants in their own environment, rather than having the participants come to the researcher, and it is useful for gaining an understanding of the physical, economic, social, and cultural contexts in which people live (Robson, 2002; Mack *et al.*, 2005; Alasuutari, Bickman and Brannen, 2008). My first method of data collection was observing the implementation of Fundación Paraguaya's poverty programme, the Poverty Stoplight (group A only). As described in Chapter 1, the Poverty Stoplight programme has two main components, i) the self-diagnosis of participants' level of poverty, and ii) the setting of priorities and development of a life map. Although most participants had interacted with FP staff before in microfinance activities, these were the participants' first interactions with the Poverty Stoplight. FP clients are chosen to participate in their poverty programme through a random draw. Due to this, some of the women selected were new to FP, and others were existing microfinance clients. I observed participants taking the Poverty Stoplight self-diagnosis and the development of their life maps. This allowed me to see how women self-diagnosed their poverty level over 50 poverty indicators, as well as set priorities and develop a life map with indicators of their choosing. I was also able to hear participants talk to their mentors about their issues and challenges with specific indicators.

FP mentors had asked participants previously if they were comfortable with me coming to their houses and told them about my research. All participants agreed. This allowed the FP mentors to introduce me to these clients and gave me the possibility to ask them if they would be interested in participating in my research in person. It is important to note that this was the last occasion that FP mentors were present during my research activities. I discuss procedures for consent in depth in Section 3.6.3.

In my experience, observing the Poverty Stoplight was a positive introduction to participants and made later interactions much easier. Most participants had positive interactions with FP and their mentors, so being introduced by them as gatekeepers was a good option. In addition, I had a chance to hear some participants talk about different poverty indicators and their experiences, as well as hearing them set their goals for areas they would like to improve in their lives. In terms of weaknesses, observing the implementation of the Poverty Stoplight did not necessarily give me a



full picture of women's experiences. This was especially true in various cases where the self-diagnosis was not implemented correctly and was carried out very quickly. In these cases, there was not much interaction or conversation between the FP mentor and the women, and in some cases, the FP mentors set the goals for the women, making it difficult to learn about the women's aspirations or preferences.

### *3.5.2 Life History Interviews*

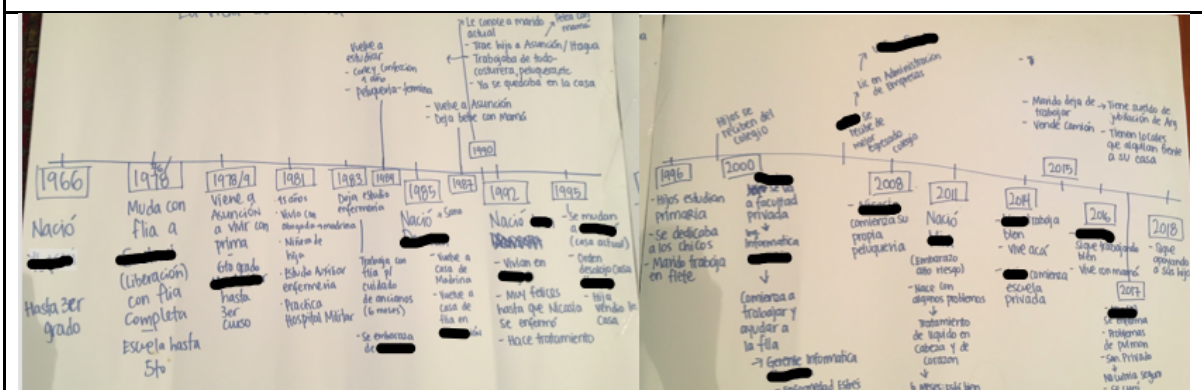
Life history interviews are in-depth individual interviews to identify the most significant events during an individual's life (Davis, 2007; Tafere, 2018). I conducted visual life history interviews to understand participants' life experiences, focusing on what participants considered to be important moments of their past, both positive and negative (Sheridan, Chamberlain and Dupuis, 2011). This method enabled the exploration of different concepts related to wellbeing, including how women felt about their current situation, their future expectations, and the extent to which their aspirations were achievable (Crivello, Camfield and Woodhead, 2009). Visual and interactive methods are helpful for allowing participants to reflect on their data (Camfield, Crivello and Woodhead, 2008; Crivello, Camfield and Woodhead, 2009). Further, using life history interviews offers insights into understanding how people's lives are constructed, how they are influenced by social relations, and shows how life events are influenced by unpredictable events or turning points (Lloyd-Sherlock and Locke, 2008).

The objective of using life history interviews was to understand how wellbeing changed over time through women's life course, as well as understanding dynamics, durations, and pathways of poverty and wellbeing (Davis, 2007; Camfield, Guillen-Royo and Velazco, 2010; Chronic Poverty Advisory Network, 2016; Tafere, 2018). Using the timeline offered a more holistic picture of influences on people's lives, including what events supported or constrained their wellbeing. This method is particularly useful for situations where there are literacy limitations (Gauntlett, 2007) or when dealing with a sensitive topic (Cornwall, 1992) - both of which were important considerations for this research.

I conducted life history interviews in two sessions, with an interval of 3-4 months between each interview. In the first session, I started by asking participants to share their most important life experiences. As participants spoke, I plotted these events down on a large piece of paper on a

timeline chronologically (see Figure 8 below for an example). Since many participants uncomfortable with writing, I would fill out the timeline as the participants told me their life histories. I would ask about different periods in their lives such as their childhood and adolescence, and important life events such as marriages, birth of children, moves, first jobs, their relationship with FP, among others. As participants would tell me their life stories, I would move back and forth on the timeline to display their stories chronologically (Sheridan, Chamberlain and Dupuis, 2011). Then, I asked participants about their future, where they saw their life in the next 5-10 years and what their goals, dreams, and aspirations were (Thomson and Holland, 2002; Appadurai, 2004). I wrote these down on a separate paper. It appeared to me that this first interview was relatively easy for most women, and they enjoyed telling me about their goals, dreams, and aspirations because they were open and expressed that they enjoyed talking about their lives. Interestingly, I thought the exercise of reflecting about the future might be difficult for older women, but that was not always the case.

Figure 8. Example of Life History Interview after Session 1



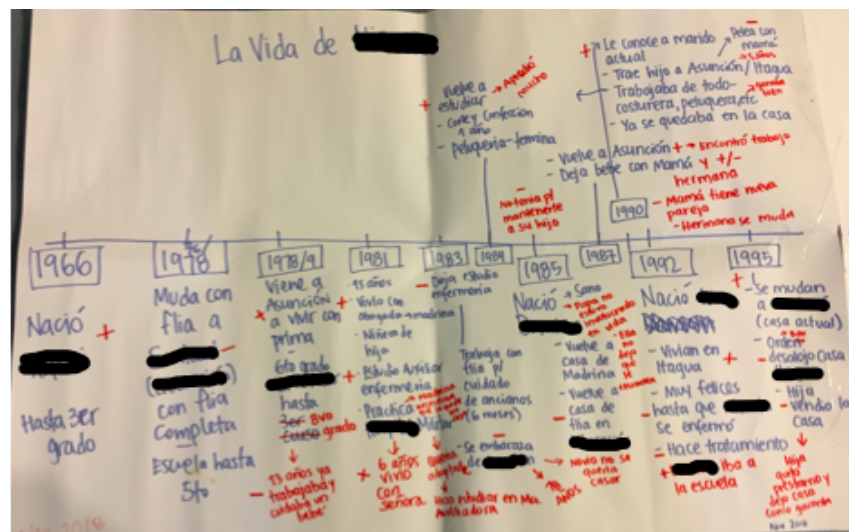
Note: Personally identifiable information has been removed. Intentionally out of focus.

After 3-4 months, I revisited the timelines with the participants for Session 2. I aimed to continue adding more details to uncover the dynamics of wellbeing perception through time, including what events supported or constrained women's perception of wellbeing. By conducting these second interviews after I had built rapport with women, many women felt more comfortable with me and opened up about their life stories, as some were very difficult and traumatic.

This second interview had two objectives: a) to make clarifying questions, fill in gaps, and go further in-depth on different life events to add more details to participants' timelines to have a more

complete picture of participants' life experiences, and b) for participants to rate each life experience on their timeline as a positive or negative experience. To do this, the participants and I went through the life events again one-by-one. Many times, participants would fill in events that were missing or add more detail. Other times, I would ask questions such as, *"There's a big gap here between year X and year Y, what happened here?"* All new information was added to the timeline in a different colour (see Figure 9). While revisiting life events, I asked participants whether they considered each event as positive or negative. The objective was to better understand each life event and how it influenced women's lives. This exercise was enlightening and gave new depth to the story since some events that women sometimes rated life events in unexpected ways. In addition, participants would often add more details to their stories when rating whether each event was positive or negative.

Figure 9. Example of Life History Interview after Session 2



Note: Personally identifiable information has been removed. Interview 1 in blue, interview 2 in red. Intentionally out of focus.

Most participants enjoyed the life history interview and told me about their life. For some participants, the exercise was cathartic, and they expressed that they enjoyed telling me about their lives. Similarly, others said it made them feel proud about their life and all they had achieved. After we were done, many looked at their life history and said, *"Wow! I have achieved a lot in my life after all!"*, and many noted that they enjoyed seeing a visual manifestation of their life. In

addition, this method was more challenging with younger participants. Many felt like they did not have much to tell and had difficulty figuring out what to say. In terms of their future life maps, this exercise was challenging for some women, especially those who were struggling and currently in a difficult situation. They were having such a hard time surviving in their day-to-day that it was hard for them to look into the future.

Further, by working on the timeline over two sessions, the discussions and representations of the women's experiences became deeper and richer. Carrying out the life history interview a second time gave an added layer of depth to interviews, and allowed me to fill in gaps. Many times, it seemed like participants were not ready to tell me some stories the first time but were the second time. However, a few participants noted they had nothing to add in the second wave, so it did not add much information to the timeline. In addition, rating life experiences as positive or negative events many times resulted in unexpected reflections from the participants, as well as adding more details and layers to women's stories.

### 3.5.3 Wellbeing Charts

The last type of interview I carried out with participants were wellbeing charts<sup>16</sup> (see Table 4), which gathered information about participants' lives to map understandings of wellbeing to illustrate what mattered to them in everyday life (Thomson and Holland, 2002; Boddy, Bakketeig and Østergaard, 2019).

Table 4. Wellbeing Chart		
What are the four most important areas in your life?	Being well [in this domain] means...	How am I doing today [in this domain]?

The interview followed three steps. First, I wanted to identify what was important for participants to live their lives well, so I asked them to list four things they needed to be well (domains of wellbeing). I decided that leaving four spaces was enough for women to think, reflect and write down different domains that they consider important in their lives. This is because to truly

<sup>16</sup> Author's term. Adapted from Thomson and Holland, 2002; Boddy, Bakketeig and Østergaard, 2019 use of life charts.

understand wellbeing one must understand what is important to people for them to live their lives well, considering their social, economic, and cultural contexts (Gough, 2004; Gough and McGregor, 2007b). Most participants listed four domains, although some listed only three, and others five. Second, I asked participants to define each of these domains. Allowing participants to define the domains in their own words and not assuming what people meant when they selected different domains of wellbeing helped reduce my bias and my own way of defining wellbeing (Biswas-Diener and Diener, 2006; Copestake, 2009; McGregor, Camfield and Woodcock, 2009). Third, I asked participants to evaluate how they were doing in the areas that they regarded as important to them (McGregor, Coulthard and Camfield, 2015). This gave important insight into their aspirations, as well as how they currently felt with respect to what mattered most to them. As Camfield (2006) notes,

“People’s perceptions of how well they are doing in the context of their values and aspirations, and the achievements of others in their community, are an important and under-recognised dimension of wellbeing” (p. 11).

Further, it sheds light on the interconnection of the important elements that people recognise, which includes understanding how people prioritise different elements as well as what trade-offs may exist (Camfield, 2006; McGregor, Coulthard and Camfield, 2015).

As I talked to participants, I wrote down their answers on a large sheet of paper (see Figure 10). Each section was folded to prevent participants from seeing what the next question was to ensure that their responses were not influenced by the next part of the interview.

Figure 10. Example of Participant's Wellbeing Chart

Áreas importantes en mi vida:	Estar bien significa:	¿Cómo estoy hoy?
Trabajo	<ul style="list-style-type: none"> <li>• Salir a trabajar</li> <li>• Ganar mucha plata</li> </ul>	<ul style="list-style-type: none"> <li>• No puedo más salir a trabajar por mi enfermedad</li> <li>• Quiero trabajar desde la casa - Merleria</li> </ul>
Ingreso	<ul style="list-style-type: none"> <li>• Que te alcance para comer, ropa, para que estudien las hijetas</li> </ul>	<ul style="list-style-type: none"> <li>• Bajoneando</li> <li>• Parientes ayudando con ropa y viveres</li> <li>• A veces pido a los políticos</li> <li>• Mi seguro no me da más remedios</li> </ul>
Tener Apoyo de Dios	<ul style="list-style-type: none"> <li>• Gracias a Dios yo recibo muchas cosas</li> <li>• Me siento tranquila</li> </ul>	<ul style="list-style-type: none"> <li>• Me habla, bendice mi casa</li> <li>• Papá viene una vez a la semana a traer comunión</li> <li>• Estoy muy bien espiritualmente</li> </ul>
Tranquilidad	<ul style="list-style-type: none"> <li>• Tengo pl comer</li> <li>• No te falta nada</li> <li>• Criaturas tienen todo</li> </ul>	<ul style="list-style-type: none"> <li>• No me falta, mucho apoyo de todos partes</li> <li>• Viveres de Iglesia</li> <li>• Hoy estoy más o menos</li> <li>• Hija está enferma y no puede trabajar</li> </ul>

Note: Transcription and translation in Appendix 5.

In terms of strengths, the wellbeing charts clarified the different ways that women conceptualised and defined wellbeing as well as to see how women evaluated their current state of wellbeing. In terms of weakness, some participants had a hard time defining domains, and other participants thought the exercise was too obvious.

### 3.5.4 Phone Interviews

I also carried out brief phone interviews with participants to get updates on how they were doing, changes in their lives, their thoughts on FP anti-poverty programming, and to explore change over time. I also asked them how they were progressing with FP and the Poverty Stoplight, what quality of life meant for them, as well as their goals and aspirations. My positive experience with phone interviews resulted in my repeated use of this method during the research process. In addition, I found that logistically it was a lot easier because participants did not have to be in their homes waiting for me, and it also allowed me to have more frequent conversations with participants. Having phone interviews allowed me to have conversations with participants more often, which I noticed improved my relationship with participants, positively impacting my posterior in-person interviews. In terms of weaknesses, many participants did not have the time to take my calls, or they preferred texting. In most cases, these calls were brief, 5-15 minutes, which limited the

amount of data I could collect. Lastly, many participants shared the telephone with different family members, so it was challenging to find participants at times.

### ***3.6 Data Analysis***

I carried out an in-depth case-based analysis of interviews and observations with 16 women over six rounds of data collection. The analysis followed a thematic case-based approach, attending to the particularity of individual experiences over time, and then looking across cases to identify cross-cutting themes (Boddy, 2018). I conducted a thematic narrative analysis and combined within-case analysis (of individual biographies) and cross-case analysis (Crivello, Morrow and Wilson, 2013). The analysis covered multiple rounds and sought to explain changes over time in their experiences, perceptions and life trajectories, and the role of poverty.

#### ***3.6.1 Within and Across Cases***

Analysis followed a case-based approach, attending to the particularity of individual biographies and then looking across cases (Thomson, 2011; Boddy, Bakketeig and Østergaard, 2019). Carrying out the analysis on case-level analysis allowed me to gain a more in-depth, context-specific appreciation of lived experiences, and the processes shaping those experiences (Crivello, Morrow and Wilson, 2013). Further, I was able to provide a detailed and biographical life course narrative for each participant which illuminated complexity and the wider social processes and structures in which lives take shape (Locke and Lloyd-Sherlock, 2011; Crivello and Morrow, 2019; Roelen and Leon-Himmelstine, 2019). With the case-based approach, I looked into themes and narratives within participant cases, and then looked thematically across cases holding cases in conversation with each other without aiming for direct comparisons across (Riessman, 2008; Phoenix *et al.*, 2017). Looking across-cases allowed me to identify wider structural factors, as well as similarities and differences among the themes that emerged. Carrying out both an 'intra-case' and 'inter-case' analysis allowed me to not only explain changes within a case over time, but also to explain changes over time across or between cases, as well as compare and contrast multiple cases (Thomson, 2007; Crivello, Morrow and Wilson, 2013). It is important to note that I did not conduct an explicit comparative analysis between Group A and Group B, but rather looked at each case to understand how different levels of participation in FP's programming was a facet of their experience of wellbeing (or not). Throughout, the challenge was to strike a balance between the

richness of individual participant narratives and obtaining a more general, systematic picture from the entire data set.

### *3.6.2 Thematic Narrative Approach*

I also used a thematic narrative approach (Shukla, Wilson and Boddy, 2014; Boddy, Bakketeig and Østergaard, 2019). I decided to use these two distinct, but complementary, methods because they provided different perspectives to my analysis. On the one hand, thematic analysis is more useful for providing a broad overview of the data, while narrative approaches help focus on particularities and set these into more general contexts (Shukla, Wilson and Boddy, 2014). Thematic analysis is helpful for looking across cases and highlighting commonalities and differences across different data sets (Shukla, Wilson and Boddy, 2014; Clarke and Braun, 2017). Further, it helps develop a broad understanding of phenomena of interest within our data and to make comparisons between cases and across contexts (Crivello, Morrow and Wilson, 2013). Thematic type of analysis is helpful for looking at participants' lived experience, their perspectives, views, behaviours, and practices, seeking to better understand participants (King, 2004; Braun and Clarke, 2006; Crivello, Morrow and Wilson, 2013; Clarke and Braun, 2017). On the other hand, narrative analysis seeks to provide insight into practices and their meanings within the social, temporal, and spatial nature (Riessman, 2008; Squire, 2008, 2013). Further, narrative analysis clarifies understanding not only how stories are structured, but also who is producing each story, and how narratives are silenced, accepted, or contested (Shukla, Wilson and Boddy, 2014; Phoenix *et al.*, 2017).

Both thematic and narrative approaches use language and meaning as part of their analytical approaches and look at both *what* is said (content) but also *how* it is said (context) (Shukla, Wilson and Boddy, 2014). In addition, both narrative and thematic analysis can be used for analysis within and across cases (Clarke and Braun, 2017; Shukla, Wilson and Boddy, 2014). Using these two strategies brings light to situated complexity and dynamic and intersectional experiences (Phoenix *et al.*, 2017). Looking at both case-based and across-case data supports my analysis by giving it a constant comparative approach, whereby I can revisit data continuously through the analysis process through the coding and analysis phases, looking within and across cases (Strauss and Corbin, 1998; Kolb, 2012; Glaser and Strauss, 2017).



### *3.6.3 Memo Writing & Coding*

Due to the longitudinal nature of this research, there were various rounds of coding and memo writing for this research. In relation to memo writing, I created a case document for each participant, and after each data collection activity I wrote down my initial thoughts, pending questions, and observations in a memo. Since the research was longitudinal, during my memo writing, I also identified follow-up questions or clarifications for the next interview.

During fieldwork, all interviews with participants were recorded, with the participants' permission. Then, interviews were transcribed by a third party. After the transcripts were completed, I read the transcripts and, in addition to the construction of case documents, I carried out open-ended coding using NVivo, a qualitative data management program. Coding was carried out as an iterative process looking for patterns, relationships, similarities, differences, generalities, and specifics across the data set both during fieldwork as well as after (Davies *et al.*, 2018). As mentioned before, since I did not have a hypothesis, I used an open-ended coding process where I did not have a predetermined set of codes (Saldaña, 2009, 2014). After I completed the fieldwork, I returned to my data. I read through all transcripts again and conducted another round of coding using NVivo. I carefully read through the in-depth interviews, trying to understand their experience based on their background, ideals, and values. First, I used eclectic coding during fieldwork to identify first impressions and patterns from the data. I also used coding strategies such as process coding to identify actions and concepts to help me identify things that changed or emerged over time (Saldaña, 2014). I used several techniques to manage the analysis of the growing amount of qualitative data, such as the application of the same coding frame across rounds, and tables and matrices to organise thematic analysis within and across cases (Crivello, Morrow and Wilson, 2013). Through this process, I developed an understanding about the nature of wellbeing for these women.

### **3.7 Strengths of my Research Design**

In terms of the strengths of my research design, first, my qualitative methodology with multiple methods over time not only helped me develop an understanding of the process of change over time in participants' lives, but also helped me build rapport with participants. This, in turn, allowed me to get in-depth data about their lives that I would not have been able to get after just one interview. I especially noted this after I included Group B, my interviews with Group B were more

superficial than those with Group A, and I attribute this to the fact that I knew them for less time, and thus had less time to build relationships and rapport.

Second, I believe this research helped participants feel important and seen, and helped participants reflect on their future goals and aspirations. Many participants told me the interviews were cathartic and they felt it was helpful to talk to someone about their struggles. Some participants said they enjoyed talking to a stranger about their lives and problems and that it helped them vent and feel better. For example, **Rocio** explained,

*“Sometimes it’s nice to talk to a stranger and vent. I don’t have that many problems [...] like I told you, but I’m not one to talk a lot about my things [...] but like I said, sometimes it’s nice to talk to someone and tell them your [problems]”*

Other participants noted the importance of talking to someone because of the negative repercussions of not keeping it all in. **Liliana** noted, *“Sometimes it’s nice to talk to someone, it’s cathartic, like a deep breath. Because keeping it all in sometimes hurts you.”* Further, when I asked **Marina** how she felt about the different interviews, she noted she liked it because *“it was like talking to a psychologist”*. For others, the research helped them feel important and seen. After our last interview, many participants said, *“don’t forget about me!”*, *“keep in touch!”*, and *“send me photos from England!”* Another participant, Jacinta, told me that she thought my visits were a blessing. Lastly, other participants said that their participation in this research helped them think more about their goals and aspirations for the future. Lastly, **Jimena** recalled that the research activities made her reflect on all she had accomplished and think about her dreams and aspirations.

### **3.8 Ethical Considerations**

Research ethics exist to ensure that principles of justice, respect, and avoiding harm are upheld (Young Lives, 2011). For this research, advice was sought from the University of Sussex Research Ethics Committee, who assessed this research project to ensure that I complied with its research ethics framework, policies, and procedures. This project was approved on April 25, 2018, by the University of Sussex Social Sciences and Arts Cross School Research Ethics Committee (Appendix 6). I committed to professional conduct and showing integrity at all times. I followed the ESRC Framework for Research Ethics Principles (2015), which states: a) Research should aim to maximise benefit for individuals and society and minimise risk and harm; b) The rights and dignity of individuals and groups should be respected; c) Wherever possible, participation should be

voluntary and appropriately informed; d) All research should be conducted with integrity and transparency; and e) Independence of research should be maintained and where conflicts of interest cannot be avoided they should be made explicit. In this section, I discuss the principal ethical considerations for this research, including participants' dependency relationship with FP, obtaining informed consent throughout the research, confidentiality, and considerations related to carrying out research in poor and vulnerable communities.

### *3.8.1 Research with Vulnerable Populations & Dependency Relationship with FP*

Research of any form involves some level of intrusion into the lives of people or a community, and, as such, ethical considerations must be taken. One of the core ethical considerations for this research was ensuring that I did not take advantage of participants' position in relation to FP, and in terms of their poverty and insecurity, might undermine freely given and fully informed consent. Moreover, there are many important considerations to take into account when conducting research with poor and vulnerable communities. First of all, it is possible that participants can have misconceptions about the purpose of the research and believe their participation to be followed by some form of assistance or material benefit or that they might understand it as a condition of their involvement in, or help from, FP. Due to this, I made sure that participants understood the research objectives and understood that this research would not help them directly and that I would not offer any material remuneration for their participation. Another consideration was that participating in the research is a time commitment on behalf of women, and the time spent on the research is time that they could have spent either working or resting, so I needed to be very respectful of their time. Although the participants of this research were not compensated financially in any way for participating in this research, I did give participants and their families a token gift of appreciation. This token gift consisted of a mug with some chocolates and some cookies for their children.

I was also aware that there is always a risk of participants reliving their trauma while discussing their life histories. Due to this, I always reminded participants that they did not need to answer any questions that they felt uncomfortable with and could stop the interview at any time. I discussed sensitive topics with participants such as their life experiences living with, self-esteem, violence, abandonment, among others. Although I did not specifically be asking information about traumatic events or experiences, these did come up if the participant raised them. I looked for signs of

distress or discomfort during the interviews and built in checks and breaks our conversations. I attempted to be sensitive, and if respondents became upset at any point during the research I offered to stop or pause the interview, and/or to discontinue the line of questioning.

Lastly, since Fundación Paraguaya offers microcredit loans to participants for their small businesses, this creates a dependency relationship between participants and FP. Due to this, I needed to ensure that participants did not feel coerced to participate in this research. It was imperative for me to clarify that my research was not part of regular FP programme operations and that their participation (or non-participation) in this study would not affect their standing with FP. Due to this, I was the person who presented the research project and obtained participants' informed consent, and not FP staff. In addition, FP staff were not present for any research activities except for Poverty Stoplight observation, and I emphasised that participants would be aware that the research was not part of FP standard programme operations and would not affect their standing with FP.

### *3.8.2 Informed Consent & Right to Withdraw*

It is imperative that informed consent by research participants is freely given and appropriately informed (Boddy *et al.*, 2010; UKRI, 2022). For this research, all participants were notified that their participation was entirely voluntary and that if they did agree to participate, they could stop participating at any time. I sought renewed consent from participants at each data collection point. As I have mentioned, FP clients who filled the selection criteria mentioned in section 3.3.1 were first asked by FP staff, who already worked with these women and therefore had a relationship, if they would be interested in participating in the research. If the women agreed, a week later, I approached the potential participants, accompanied by FP staff, typically in their homes, and I invited FP clients to participate in my research. I explained the rationale behind the research and provided them with an information sheet (Appendix 7). Participants were notified that their participation was entirely voluntary, not part of normal FP programme operations, that it would not affect their standing with FP in any way, and that that they could withdraw from the research at any point in time with no negative consequences. If they did agree to participate, I explained that they could stop participating at any time. To ensure that participants did not feel coerced to participate, I did not rely on FP to secure consent – rather they were seeking a preliminary permission to share contact details and for me to get in contact. If clients did agree to participate, they were provided with informed consent forms (Appendix 8). Participants signed the consent

form and kept a copy of the form. They were also provided with the contact details of the local project partner at Fundación Paraguaya, should they seek further clarification regarding the research.

It is important to highlight that gaining consent in longitudinal research is an ongoing process with continuous consultation throughout all phases of research (Birch and Miller, 2002). Due to this, consent was sought before each subsequent interview, and the participants were reminded of their right to withdraw. On a few occasions, participants noted that they did not want to participate in a specific round due to personal or time constraints, and in other cases, participants chose to stop participating altogether. For example, one participant stopped answering my calls early on, so she was not included in study. Another participant changed her phone number and did not notify me, so she only participated in a portion of the research project. If participants expressed that they were too busy or did not wish to participate in an interview at that time, I followed their wishes and contacted them a few months later to see if they were still interested in participating in the research. Lastly, participants were informed that they would be able to withdraw the data that is linked to them at any point during the study, and that this would no longer be possible once the data has been used in the final report. Participants were informed that they would have to inform myself or any FP staff that they would like to withdraw their data from the study.

### *3.8.3 Confidentiality & Data Management*

Another crucial ethical consideration is confidentiality. Maintaining participant confidentiality is especially challenging in longitudinal research (Neale and Hanna, 2012; Thomson *et al.*, 2014). This is because studies that collect data over time are likely to accumulate, in the words of Attah (2017), “a unique data set that acts as ‘DNA’ for identifying individuals” (p.128). I informed participants that the information they shared with me during this research would be completely confidential. I clarified that I would not share information that identified them with anyone, including Fundación Paraguaya, and that after entering their information into a database I would destroy all information such as names.

In this dissertation, I have taken steps to ensure that participants are not identifiable, including using pseudonyms. Not only did I remove names, but I have also removed other identifiable information and personal references to be sure that the information cannot be tracked back to

each participant. It was very important to minimise recognisability as much as I could to protect the research participants, to ensure that no one, not even those working at FP would be able to identify participants. Personally identifiable information was only collected when necessary to link data records but were anonymised and coded as soon as records were combined. However, the host organisation, Fundación Paraguaya, requested to be named in the dissertation. Due to this, I informed participants but reassured them that individuals would not be identifiable. In all cases, participants' data was kept confidential.

All data management and handling occurred within Paraguay and the UK. Since I was processing personal information outside the European Economic Area, I complied with the Data Protection Act 1998 and subsequent GDPR regulations. I followed all eight Data Protection Principles when processing personal information. Participants were fully informed about the use of their personal information through conversations, their information sheets, and their consent forms. I fully respected participants' expectations of confidence and privacy. All data for this research project was kept in a secure, password-protected cloud account called BOX, which is compliant with the Data Protection Act. All physical data, such as hard copies of data such as interview notes will be securely locked away in a locked filing cabinet in my home that could only be accessed by myself. Once copies of hard copies of data were digitised and placed into a password protected folder in BOX, the hard copies were destroyed. I followed anonymisation and security procedures recommended by The Research Ethics Guidebook (Boddy *et al.*, 2010). Further, I will be following the recommendation of the UK Research Council (UK Research Council, 2018), which states that research data should normally be kept for up to ten years.

## **Chapter 4. Conceptualising Wellbeing**

### ***4.1 Introduction***

Conceptualising wellbeing is challenging because it considers the complexity and multidimensionality of people's understanding and experiences of wellbeing. As White (2009) notes, "wellbeing is notoriously difficult to define because it means different things to different people. At its heart, however, is the sense of having what you need for life to be good" (White, 2009, p. 9). This first empirical chapter aims to build critical insight into wellbeing by learning from the perspectives of women who participated in Fundación Paraguaya's poverty programme in Paraguay. Participants were asked, through wellbeing charts, to conceptualise their wellbeing, specifically, to define what they needed to have, to be able to do, to be or to feel, in order to live well in their particular contexts. This chapter will present an in-depth analysis of the five most prevalent domains of wellbeing identified by study participants. The data analysis presented in this chapter shows that the concept of wellbeing is "fuzzy" as it means different things to people. It also shows that women related every domain of wellbeing through their family relationships. In other words, there are no clear boundaries between different domains of wellbeing as different aspects of women's lives are interconnected and fluid through their family ties. These findings illuminate why a broader conceptualisation of wellbeing is necessary to recognise the complex and dynamic relationality of doing well, in addition to being able to develop policy and programming to support people's wellbeing.

### ***4.2 Understanding Wellbeing***

Participants' accounts of wellbeing were composed of interconnected and highly contextual domains, including people's material standard of living, their emotional inner lives, their social relationships, and structural and external factors. In order to understand wellbeing, while taking into account this complexity, my approach was to understand what participants needed to be well, how they experienced wellbeing, and draw out subtleties related to their individual contexts to have a more nuanced understanding of wellbeing (Camfield, 2006; Camfield, Streuli and Woodhead, 2010). In other words, understanding "what matters for people" (McGregor, Coulthard and Camfield, 2015, p. 2). Throughout, my focus was on understanding wellbeing from the point of view of participants rather than relying on outsiders' definitions of what it means to live well (Lloyd-Sherlock and Locke, 2008; McGregor and Sumner, 2010).

The starting point for conversation for capturing participants' understanding of wellbeing in this chapter was wellbeing charts, introduced in Chapter 3 (Methodological Approach). Wellbeing charts were developed through a conversation between me and participants and followed three main steps. First, I asked participants to identify what was important for them to live well. Second, I asked participants to provide definitions for each of these domains. Third, I asked participants to evaluate how they were doing with respect to the things that they regarded as important to them.

While participants responded to the questions on the chart, I asked follow-up and clarifying questions. To give an example, here is an excerpt of my conversation with Liliana<sup>17</sup>:

- MCB<sup>18</sup>: *What does it mean to have quality of life and be ok in your life? What things do you need to be well in your life?*
- L<sup>19</sup>: *Work, here from my home, that's my dream, having a business, I don't know, so I can be ok, ok in my house. To pay my bills and be "tranquilo"<sup>20</sup>*
- MCB: *Ok, so that means having a business from your home?*
- L: *Yes, having my own business, in any area.*
- MCB: *And paying your bills?*
- L: *Yes, anything that comes will be ok. Working "tranquilo", because I don't want to work in other people's houses because of my health, yesterday for example I felt a little (.), my [blood] pressure went up. All those things.*
- MCB: *Ok, so an important thing in your life is work?*
- L: *Yes.*
- MCB: *What else?*
- L: *Being ok economically, of course. If you have a job, you will be ok economically*
- MCB: *Being well economically, ok, what else?*
- L: *For all my children to work, so they can get ahead, a good job.*
- MCB: *Ok, last one. So, for you, to be well in life you must have a job, be well economically, and for your children to work well.*
- L: *Yes, and to have medical insurance so I can be healthy and get ahead, because the base of everything is to have health, because without that, you can't work.*

As this excerpt shows, wellbeing domains were not easy to delineate and are interconnected, which I will continue to present throughout this chapter. While in discussion with participants, I wrote down their answers on a large sheet of paper (see Figure 11 for an example). Each section was folded to prevent participants from seeing what the next question was to ensure that the next question did not influence their responses. The charts were useful in providing a summary of our

<sup>17</sup> As a reminder, the conventions for my transcriptions can be found in Appendix 3.

<sup>18</sup> Marie Claire Burt, author

<sup>19</sup> Liliana

<sup>20</sup> Tranquilo "reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems" (Huovinen and Blackmore, 2016, p. 181).



conversation, and for participants to confirm that I had correctly understood their wellbeing domains, definitions, and current status.

Figure 11. Example of Participant's Wellbeing Chart (Liliana)

Areas Importantes en mi vida:	Estar bien significa:	¿Cómo estoy hoy?
① Trabajo	<ul style="list-style-type: none"> <li>Negocio en tu casa</li> <li>Pagar las cuotas</li> <li>Trabajar tranquila</li> </ul>	<ul style="list-style-type: none"> <li>Ya no me siento a gusto</li> <li>No soy mas como antes por problemas de salud</li> <li>Suiero tener mi propio negocio en mi casa (comida) <small>↳ inversión grande</small></li> </ul>
② Bien Económicamente	<ul style="list-style-type: none"> <li>Estar tranquila</li> <li>Vivir bien → que no falte nada en la casa</li> </ul>	<ul style="list-style-type: none"> <li>No tanto</li> <li>Todo cuesta</li> </ul>
③ Hijos trabajen Bien	<ul style="list-style-type: none"> <li>Buen trabajo</li> <li>Poder salir adelante</li> <li>Que sean independientes el día de mañana</li> <li>Si ellos están bien yo tb</li> </ul>	<ul style="list-style-type: none"> <li>No, están buscando pl trabajar bien</li> <li>Ahora trabajan pero ingreso bajo</li> </ul>
④ Salud	<ul style="list-style-type: none"> <li>Tener cobertura medica</li> <li>Estar saludable</li> <li>Importante pl otras áreas</li> </ul>	<ul style="list-style-type: none"> <li>No estoy tan bien</li> <li>Estoy con tratamiento</li> </ul>

Note: Transcription and translation in Appendix 9.

Information from wellbeing maps was also supplemented with data from observations, life history maps, and phone interviews where participants reflected on specific wellbeing domains as well as elements which supported and constrained their wellbeing.

### 4.3 Participant Defined Wellbeing Domains

I interviewed 14 participants<sup>21</sup> using wellbeing charts to understand how they conceptualised and understood wellbeing. In this chapter, I present the five most prevalent domains in women's conceptualisations of wellbeing: health, work, income, housing, and religion and spirituality. In identifying five overarching domains, I acknowledge the risk of oversimplifying. In conversations with participants, immediately, it was clear that defining domains was not a clear-cut exercise, and during the completion of wellbeing charts, women indicated that domains were interconnected and highly contextualised for each participant, as can be seen in Liliana's excerpt above. In the rest of the chapter, I will go in-depth into these domains and will explore how participants defined

<sup>21</sup> In total, there were 16 participants in this study but only 14 participants completed Wellbeing Charts.

domains of wellbeing, their current status, as well as examples of how these domains influenced their wellbeing. In addition, I will highlight the interconnection and overlap between these domains to better understand how participants conceptualised wellbeing.

#### 4.3.1 Wellbeing Domain 1: Health

For participants, being well meant being healthy. They defined being well in health as the absence of physical health ailments and noted that being healthy increased their ability to lead positive lives, showing how health was a means for them to be well. Being healthy was crucial in women's lives because it resulted in opportunities for them and their families. Specifically, participants noted the role health had on wellbeing because it had an impact on family, economy, and care duties. All these were interconnected, as evidenced participants' typical response when defining health as, *"without health you can't do anything."*

Participants frequently defined being well as enjoying good health, which allowed them to perform all their life activities. For example, **Paola**, a young mother, valued good health because it impacted all areas of her life. She explained, *"if you aren't [healthy] you won't have a good quality of life, you can't work, you can't take care of your children"*. Paola's experience shows the role of health as a means to have an active and full life. This is in line with the literature which identifies health as a core determinant of wellbeing because it facilitates participation in a whole range of life activities (Nussbaum, 2000; Gough, 2003; Camfield, Streuli and Woodhead, 2009). In addition to their own health, participants frequently explained that the health of their entire family was important. What is more, in some cases, women did not even mention themselves when defining being well in health. **Nidia**, for example, defined being well in health as, *"for my children, husband, and parents to be healthy."* In this case, it is apparent how Nidia valued her family's health as a constituent of her wellbeing. Conversely, illness within the family negatively impacted participants' wellbeing. As **Paola** explained, *"I'm not happy when my son is sick [...] if we are not healthy, we will not be (.), we will not be happy with our family."*

Participants noted how ill health required them to take off work and lose income, in addition to health problems costing money in terms of medications and treatment. Health was an essential domain of wellbeing because it was instrumental for women to be able to work and provide for their families. Participants noted that without good health it was impossible to contribute

economically to their families. As **Marina** explained, *“if you don’t have health, how are you going to work? How are you going to pay your bills?”*

At the beginning of the study, **Liliana** (51) worked two jobs, but throughout the research, her health deteriorated, leaving her unable to work. She had arthritis and said that her hands were so stiff that she was unable to move them. She believed her health problems were due to exhaustion, and she was resting and getting treatment at a public hospital. Her health problems negatively impacted her ability to work and provide for her family. She explained, *“I’m only working part-time, and not even making half of what I used to.”* This worried her because she was aware that her medical treatment would be a long-term endeavour.

Similarly, **Jacinta** (71) had been battling health issues for a few years. She explained,

*“There are days when I don’t wake up well, I have high blood pressure, that’s my problem, but I don’t stop working, because if I give in to my disease what will become of me, I have to show God that I’m strong as well, that I can do things.”*

Jacinta’s daughter also had health issues during the period of the research which left her unable to work. Jacinta explained, *“We’re not doing, [pause], like I said, my daughter is sick. I am not “tranquilo”<sup>22</sup> if they are not doing well.”* In addition to recalling how draining her illness was for her physically, it also affected her emotionally. Jacinta constantly worried about the impact of her health issues on her ability to care for her eight grandchildren who lived with her. Jacinta lamented, *“My axis fell off [...] When [my daughter] first got sick I said [to myself] what am I going to do with all these children?”* Jacinta’s experience illustrates the stresses of negotiating between economic and health shocks, and also reveals how this is exacerbated by her gendered experience of caring responsibilities as a grandmother.

Other participants mentioned having pending health issues that they needed to resolve but had not been able to due to the negative economic repercussions of treatment. Since most research participants were informal workers, they did not have sick days and other protections. **Romina**, for example, had cataracts and needed an operation, noting that her eyesight problems affected her wellbeing. She explained, *“without [my eyesight], I can’t function well.”* At the time of the research, she was saving to pay for an operation at a private hospital where the procedure would cost more

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<sup>22</sup> Tranquilo “reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems” (Huovinen and Blackmore, 2016, p. 181).

than US\$ 600. To make matters worse, Romina knew that the financial implications of the operation went beyond paying for the procedure itself. She could not find a good time for the operation because she noted that in addition to taking time off work for the operation itself, she would also need to take days off for the healing period, which would not allow her to work and generate income.

Women were also responsible for caring for family members who had health issues. Women noted how their care roles were exacerbated when family members became ill because it added to women's workload, in addition to the emotional and financial burdens. **Elisabeth**, for example, had to attend to her daughter and mother's health issues. Elisabeth's daughter (age 5) was born with health problems and constantly needed medical attention. She recounted how her daughter had been hospitalised the previous year due to the flu. She said,

*"Last year she got very sick, a normal flu started [...] we went [to the hospital], we asked for help, he hospitalised her right away. We suffered a lot because she was crying, she did not want him to put those [medical] devices, but she stayed a week and then we left. [Interviewer: This was all in a private hospital?] Private Hospital [And did the insurance cover something?] We no longer had insurance when that happened, because our insurance was for this hospital, we continued paying here but her doctor went there [to another hospital] [...] so we had to pay everything there, it cost around US\$1,200<sup>23</sup>[...] Until now we struggle with her, because if she does anything she catches a cold, she has a cough, she has a fever. Hopefully when she turns 7, all that the doctors tell me it will pass [...] But now she is stronger, hopefully next year she will be stronger and healthier, and so we are fighting."*

Whenever she needed care, Elisabeth would take her daughter to the local public hospital, resulting in her losing a day of work for just one appointment. She explained:

*"Here in our neighbourhood, we have the regional [public hospital] [...] and obviously it takes me more time, taking her there. I have to go take out a number [for an appointment], it takes a lot more time, I have to go at 11am to get a number, and we have to go back at 4 in the afternoon [for the appointment], so I lose an afternoon of work."*

In addition to caring for her daughter, Elisabeth had to care for her mother, who had a serious illness and was getting treatment. Her mother lived in the countryside but had moved in with Elisabeth during her treatment. During this research, Elisabeth had to close her beauty parlour for over a month to take care of her mother. She explained, *"my mom got sick, then she got an operation, and now she is in recovery, so that's why for a month I've been closed, because I can't work, I have to take care [of her]."*

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<sup>23</sup> Paraguayan Guaranies, Gs. 5.800.000

Similar to the experience of Elisabeth, **Sandra**<sup>24</sup> recounted the experience of her 16-year-old son, who was born with a physical disability which meant he had surgeries as a child, and – as she explained to the FP Mentor during her Stoplight interview - *‘He, for example, will not be able to work hard [in manual labour]’* because of his disability. In addition, a few months prior to the research, he had been injured in a motorcycle accident. This event impacted their family financially, in addition to the stress and emotional turmoil it caused, as Sandra explained:

*“Now I am returning to work again, I am trying to get ahead again, because we were in [public hospital] for 15 days, we had a very hard time.”*

The financial repercussions Sandra faced continued after he left the hospital. She had to take a loan and buy a car since her son was in a wheelchair, and there was no accessible public transport or other ways for him to get around. Her experience highlights how a lack of structural support – in this case, accessible public transport – exacerbates the challenges faced by people with physical disabilities and their families.

In other cases, health problems outside women’s direct family but in their communities also impacted women economically. **Valeria**, for example, lost her FP loan due to a group member’s health issues. Valeria had been an FP client for three years until a group member got sick, had stopped paying her loan, and eventually brought the whole group into debt. Although the loan was eventually paid off, Valeria was impacted financially because she lost her FP loan which she had been investing in her food stall, resulting in a loss of income for her business. Valeria’s experience shows how the effects of ill health go beyond the family, and how the role of health in wellbeing needs to be understood in the context of the complex interdependencies of women's lives.

#### 4.3.2 Wellbeing Domain 2: Work

Work could be positive and negative for participants, but it was rarely neutral for wellbeing. Participants frequently mentioned how work enabled wellbeing in some ways, but also undermined wellbeing in other ways. For example, women mentioned that being well meant having work because it gave them opportunities to work from home and spend quality time with family, as well as provided dignity which gave them a sense of self-confidence. These examples signal how the domain of work was a pathway to achieve wellbeing for participants. What is more, work was much more than just earning income, but also led to increased feelings of independence and self-worth.

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<sup>24</sup> Sandra left the research before she participated in the interview regarding her wellbeing domains.

However, women also noted their experiences of overwork, feelings of exhaustion and being mistreated. What is more, women also found that wellbeing in terms of work needed to be understood as contingent on relationality, since they had to constantly negotiate between their care duties and their work responsibilities. Thus, participants identified the tension between work's positive and negative consequences, and many times recognised the trade-offs they had to make between a successful business and quality of life.

Many participants discussed being well in work as being able to work from home. **Romina**, for example, started working from home at the beginning of the research and noted that it had improved her wellbeing. She set up her own kiosk with an FP loan and was happy that she could work from home while taking care of her family. She explained, *"With my kiosk now I can stay here at my house and I'm more 'tranquilo'<sup>25</sup>".* Many participants mentioned being able to work from home would help them achieve *"tranquilo"* or being at peace without worries.

For other participants, working from home was an aspiration. **Beatriz**, who worked outside her home as a maid, dreamt about having a business in her home and working together with her family. She explained, *"Our project is to have a business here, so we can stay home, just work from here [...] I think someday [...] So I can be at home, to work together as a family."* When I asked her why working from home was valuable to her, she responded, *"So I can stay here, do other things, and not leave my home"*. Illustrating how Beatriz aspired to be closer to her home and her family. Similarly, **Liliana** who noted she was exhausted and had health issues also aspired to work from home due to convenience and comfort. She mentioned that she would like to have some type of business, like a food stand, so that she could work from her house. She said, *"Having a job here in my house, that's my dream, having a business, something like that. To be ok, to be ok in my house. To be able to pay my bills and be 'tranquilo'."* She went on to say that she had been working her entire life as a maid and was exhausted. She said,

*"I need something to be able to provide for myself. I don't want to work that much, I can't do it, I'm tired. I want to work 'tranquilo', because I don't want to work outside my house anymore because of my health."*

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<sup>25</sup> Tranquilo "reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems" (Huovinen and Blackmore, 2016, p. 181).

These life experiences show why working from home was valuable for participants to improve their wellbeing because home-based work allowed women who had many roles in their households to better balance their commitments, which gave them a better quality of life.

Participants also expressed how every day was a struggle, and that they had to keep their head up and keep on working hard, because these are the cards that they have been dealt in life. **Rocio** discussed the importance of always looking ahead and listed “moving forward” as one of her wellbeing domains. When I asked her to elaborate, she explained it meant working hard, never falling down, and having hope. She said,

*“Moving ahead, always moving ahead, never getting down. That’s what I always tell my son. No, you have to get up, because this is our life [...] Never falling down, and keep moving forward. I expect a lot more [...] it all depends on me, right? [I hope to] continue getting ahead, continue with my work.”*

She continued to say,

*“I’m still trying to [get ahead] [...] I’m the one who has to get ahead with my husband until the last [day], when I’m not able to [...] So what I have to do is try hard, so we have to work until we can.”*

Work also triggered participants’ self-confidence, aspirations, and a sense of dignity. Many women mentioned feeling proud that they were entrepreneurs and that they started their own businesses. To illustrate, **Jimena** (33) expressed she was proud of the business she had built. She started studying to be a beautician at age 14 and worked for many years in different beauty parlours, aspiring to one day have her own business. Five years ago, she started her own beauty parlour. She told me proudly, *“I created my own source of work, my beauty parlour, that was my own.”* This was meaningful in her life because, as she stated, *“for me it was to become independent, to be able to make my own [money], be the boss of my own work.”* For Jimena, work gave her pride, self-confidence, and a sense of independence that triggered a sense of dignity. In Jimena’s experience, work was both a pathway as well as a constituent of wellbeing, showing the “fuzziness” of the concept of wellbeing.

In **Rocio’s** experience, confidence in her work abilities contributed to her self-esteem. Rocio was a saleswoman who sold clothes door-to-door. She was happy with how her business was doing and told me that sales were improving. She was proud of her skills as a saleswoman and how far she had come. She explained,

*"[I'm doing] good, getting better, growing. I have clients, I'm very hardworking, you know. I know how to connect with people, I have a lot of good clients and I go with my products [...] I adapt to people [...] if I see that a woman is not friendly, I know how to adapt, or if she's very friendly, I'm very talkative [...] I follow the person's lead."*

Rocio felt perseverant and that she was good at her job. She exclaimed proudly, *"I don't give up that easily, I'm very hard working"*. In addition, Rocio worked with her husband and felt that working together had improved their relationship. She told me she felt admired by her husband for her sales skills, which also contributed to her self-esteem. Rocio's work contributed to her wellbeing because it built her self-esteem and feeling of self-worth, in addition to strengthening her relationship with her husband, showing again how participants' experiences show the interconnection between wellbeing domains.

Lastly, **Marina's** (54) experience shows the pride women have when they are successful in their work. Marina had spent many years taking care of her children and once they were older, she opened a small store with a FP loan. She was proud that she could contribute to her family with her income. She explained,

*"Thanks to the Fundación I have this job and I can help my husband. Because he only makes minimum wage, and with one minimum wage these days you can't do anything. So, with this [business], when I take out money from [FP], I can buy things [...] so every day I get money from here for our daily bread. It all comes from here."*

Marina recognised how her work helped her support her husband, showing her gendered notion of the man being the primary breadwinner in the family, such that the woman's role is to contribute to these efforts. In addition, she also felt less worries thanks to her business. Moreover, Marina noted that having her own business had been good for her health. She explained, *"[My business] helped me with my health, because if I didn't work, what would I do? What would I do?"* Marina felt very good about her current situation and was proud of herself that she is working at her age. She said,

*"For a woman of my age, I feel good, I feel happy, I feel capable of working again, because I don't want to be doing nothing, that doesn't help at all."*

Marina's example shows how having a business impacted many areas of her wellbeing including being able to help her family financially, feeling less worried, and increasing her self-confidence.

Participants also frequently mentioned overwork, and how as a micro entrepreneurs and informal workers their income relied on how many hours a day they worked. Women expressed feeling exhausted and not having time for leisure or rest. To illustrate, **Ana** had a food stand at a local



market where she started working at 4:30am and worked until 4:30pm. She worked every day, including weekends, and had no days off. In fact, she explained that her weekends were even busier, *“We work more, because there are more people on weekends.”* In my last interview with her, Ana explained that she had increased her income since the last time I had talked to her, but this was because she had increased her working hours. She explained, *“I’m still living in my rental [home], you know, but I have more income, because I’m working more.”* Similarly, **Liliana** worked two jobs and worked every day, *“Monday to Monday”* as she said, and did not have any days off. She explained, *“I have one day off [in one job], on Sundays, but then I work here [second job] again that whole day.”* Then, she continued to say, *“I’ve worked as a housekeeper my whole life, and until now, there has been no relaxing [time].”* Due to this, Liliana did not have any time off for rest or leisure.

#### 4.3.3 Wellbeing Domain 3: Income

Participants identified work and income as separate wellbeing domains. Income contributed to participants wellbeing because with income they could financially support their children and families, gain stability, pay for expenses and bills, and be able to spend money on leisure. Clearly, income was a pathway, or means, for women to achieve wellbeing. Participants frequently mentioned the importance of stable income, showing how due to their insecure lives, having financial security was valuable, which is aligned to what has been found in the literature (Kabeer, 2008). In addition, income was never mentioned as an end in itself, but rather an instrument which allowed them to achieve wellbeing. This is consistent with other research showing that income is valuable only insofar as it supports people in succeeding in areas of life that they find important and meaningful – such as supporting one’s family (e.g., (Rojas, 2007; Camfield, Choudhury and Devine, 2009).

Women considered income to be essential to cover their day-to-day expenses, most crucially, to be able to provide for their families. As one participant, **Sandra**, noted, *“if you don’t have money, you don’t have anything.”* Similarly, **Jazmin** explained, *“you have to be economically secure because without money you really can’t do anything”*. Further, another participant, **Jimena** felt proud about being able to provide for her family. She noted, *“I feel good because I’m proud of what I have achieved since I’ve become independent, in what I’ve done, I’ve always supported my family.”* These

examples show how income allowed participants to cover their basic needs for themselves and their families.

Another basic need frequently mentioned by participants was the importance of being able to provide for their children, specifically pay for their education. **Nidia**, for example, noted that she felt she was in a stable place in her life because she had enough income to pay for her expenses and daily needs, including her children's education. She noted, *"I'm doing really well, really 'tranquilo'...With my job I can buy [things], and [paying the] Foundation, and [paying for] my children's studies."* On the other hand, **Sandra** felt she was struggling because she could not cover her basic expenses related to her children. She explained,

*"[The] children want to study but you can't pay for it. The first thing you think of is sacrificing for your children who want to study. There's no money left here, I work all day and it's not enough, and my boy wants to go to university. Education is the most important thing, and for them not to need anything."*

When asked what would allow her to achieve wellbeing, Sandra responded, *"for children to have everything they need, food, clothes, education."* These cases show the relevance of income in achieving wellbeing. Specifically, participants noted the importance of covering children's expenses and education, which, again is related to the family wellbeing domain and how participants noted the importance of their children doing well and having opportunities to get ahead.

Other participants considered income to contribute to their wellbeing because it helped them invest in their business endeavours, whether it be new businesses or existing ventures. Specifically, participants who remained FP clients were grateful for FP's microcredit loan for their businesses. **Jimena**, who had recently started a beauty parlour, noted the importance of being able to get credit and financial support to invest in growing her business. She had taken out loans from FP in order to invest in her business and was able to make a big purchase and buy furniture for her beauty parlour. In addition, Jimena was considering making new investments to continue growing her business and her income. She explained,

*"I would like to make more money to invest more [in my beauty parlour]. I used to borrow a freezer and I would sell ice cream, but I had to give it back, so now I have to buy my own freezer because people are still asking me if I'm selling ice cream."*

Jimena's experience shows how participants valued having income through FP support allowed her to invest in growing her business.

Other participants expressed their interest in investing in a business, but differently from Jimena's example, they noted that they did not have enough money to do so. This was especially relevant for participants who had left FP. **Liliana**, for example, as mentioned previously, wanted to start a fruit stand from her home. However, she did not have money to make the initial investment to start her business. She explained,

*"Money is the main thing [you need] to start something, [buy] some materials [...] the economic [support] is fundamental [...] But, it's very difficult, it's a big investment, so it's a dream, not impossible, but maybe in the future. Maybe I can start small and then get organized to see what I can [do]"*

I will continue to explore the role of Fundación Paraguaya in women's wellbeing in Chapter 8.

Participants also mentioned how income contributed to their sense of independence, made them feel like they were progressing in life, and gave them the possibility of having leisure time. For some participants, having their own income was a source of independence. **Elisabeth** explained that since she had her own money, she did not need to ask her husband for money or for permission. She explained, *"I never control him, I never ask him how much you brought or how much you have, or give me money, I make my money and he has his money"*. Having her own business and income allowed Elisabeth to make her own decisions about her money. For others, increased income allowed women to make important purchases which made them feel they were progressing in life. **Nancy**, for example, improved her income with her glass installation business and she proudly told me that she was able to buy a car. With a big smile she told me, *"Yes, I went [to buy my car], I went up, I'm coming up, I'm coming up."* For Nancy, having enough income to make material purchases made her feel like she was making improvements in her life. Lastly, for others, being well in income meant having enough to treat themselves. **Leticia**, for example, noted that when she had a little extra cash, she was able to spend more time in leisurely activities with her family, like going to the countryside for a day trip. Similarly, **Ramona** defined being well as *"being able to go to the beauty parlour once in a while, giving myself a treat"*, showing the value of leisure time for her wellbeing.

Conversely, participants identified lack of income as a source of illbeing because it caused stress and made them dependent on others, which they did not appreciate. To illustrate, **Liliana** wanted to be able to support herself and not have to depend on her children financially. She explained, *"I never got in the habit of asking others [for things] [...] because it's not nice to be depending on others, I've never done that"*. She did not want to be relying on her children for income and wanted

to be able to make it on her own. Similarly, although **Jacinta** was struggling financially. At the time of the research, she was resistant to ask her children for financial help. She explained,

*"I'm the [type of] person who does not want to ask for money. My children work but I don't want to ask them for money, they each have their home, their children, how am I going to ask them for money. I don't want to ask. I have to try."*

She continued to say,

*"I don't know, I just don't want to ask. If they want to give it [that's fine], but I don't want to ask [laughs] [...]. All my kids have their own children, their homes, how am I going to ask them for money? I need to try [to make my own money]."*

Towards the end of the research, Jacinta's eldest son, who supported her the most financially, had stopped sending Jacinta money. His own son was born prematurely, and he had many medical expenses. Jacinta explained, *"It's a negative [situation] because he can't help me that much anymore. He was the one who helped me a lot."*

In terms of income as an instrument for wellbeing, participants noted that with more income they could enjoy their family and strengthen their relationships. To illustrate, one participant noted that she wished she had more income for leisure. **Elisabeth** noted that she could not complain about her situation because she could meet her basic needs. However, she did wish that she had some extra money to go out for an outing with her family. She explained,

*"Sometimes I want to go visit my mother at her house [in the countryside] but I can't [...] or my daughter asks me for something, and I want to spoil her a little and I can't".*

Participants also noted how not having enough income to pay bills and having debt was a source of daily stress which led to emotional and physical consequences. **Nidia**, like many participants of this research had an outstanding debt and was placed on the national debtor list<sup>26</sup> due to an unpaid loan outside of FP. She explained that she tried to resolve her debt but had been unable to and was unsure of where she was supposed to go to pay off her debt. She noted,

*"I had a small debt, and I paid it, but they didn't recognise my [payment] ticket, so it was a fight. I don't know why I left it, because now the interest has gone up a bit, I think I'm going to resolve it any moment now. Maybe they'll finance [the payments] or supposedly if you pay at least half, they give you a good discount. So yeah, I definitely need to go figure it out [...] But I think another company bought [my debt], something like that, I can't remember what it was called, I have to go find out."*

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<sup>26</sup> In Paraguay, the national debtor list is called IMFORCOMF. If a person has an outstanding debt they are placed on this list and once they pay off the debt and interest, they are taken off the list. It is considered a "blacklist" because being on the list has many negative repercussions, including not being able to take out loans and in some cases not being able to access formal employment (Schuster, 2014; ABC Color, 2016).

Nidia continued to say how this situation left her stressed. She recalled, “[*Being in debt*] doesn’t [*let you*] sleep, that makes you lose sleep.” Similarly, **Liliana** told me how in the past she had been on the national debtor list after taking out a loan for her daughter’s business that did not work out. She recalled,

*“When I [took out a loan] with the [financial] cooperative I also got on [debtor list] because of [daughter], because she started selling clothes. It was going well [...] She asked for help, and I took out money to give her, and she couldn’t pay it back, so I went on [debtor list]. But then I paid it off, and it was fine, about 5-6 months ago I paid off all my debt at the cooperative and they took me off [the list]”*

Participants noted how being in debt was stressful and contributed to their illbeing. To illustrate, **Nancy** said, “if you can pay your bills, you can live in a calm way, you can at least rest, because if you can’t, you can’t even rest”. Debt was also a stressor in **Matilde’s** life. When I asked her about her goals for the future she said, “God willing, pay off my bills and be freed from all that.” Her use of the word *freedom* is striking, highlighting how constrained she felt by her debt. Lastly, **Leticia** expressed how debt was a source of stress for her family. When I asked her what she needed to be well she responded, “being free of debt, that’s the first thing.” She expressed the stress she felt by constantly being contacted by debt collectors and being harassed and “bombarded by text messages”.

Conversely, participants valued being free of debt and used words such as freedom, breathing, and being calm. Later on, Leticia was able to pay off her debt which left her feeling happy and relieved. She said, “We paid everything off in November, we’re finally able to breathe again.” Leticia’s use of the analogy of finally being able to breathe shows the emotional and physical stress and anxiety that debt caused in her life. Finally, participants’ experiences with debt and bills highlight the tension between wellbeing and illbeing in participants’ lives.

#### 4.3.4 Wellbeing Domain 4: Housing

For participants being well also meant having their own house and a safe space for their family. The reason behind this was that most participants described their past or present housing situation as precarious, insecure, unstable, which was a source of illbeing. Thus, most participants aspired to own a home or improve their house for themselves and their families. Moreover, those who had successfully been able to improve their house noted it was a source of pride and gave them a sense of accomplishment. Participants valued the idea of a house because it allowed them to feel comfortable with their families, showing how resources only have meaning in the context of

specific relationships (White and Ellison, 2007). These examples show how housing was both a pathway, as well as a constituent of wellbeing, depending on the experience and context of each participant.

Due to the context of precarious housing in which most of these participants lived, being able to improve their house was one of their biggest goals and sources of aspiration. Many participants noted how their homes were precarious and how this led to worries and illbeing. To illustrate, **Elisabeth** lived in an old and unsafe house that made her feel worried about her family. She explained,

*“The way we’re living in our house it’s not safe, at all, we always say we’re going to change it, we’re going to build it again, because this is a very old house. If there’s a big storm maybe it could fall over.”*

Elisabeth was also concerned because she felt her neighbourhood was not safe for her daughter (age 6) to play. She explained,

*“That’s what I want to change, have a safe fence for example, so my daughter can play in the yard, but right now I don’t let her go out.”*

Other participants frequently mentioned improving their homes when talking about their plans for the future. For example, **Jazmin** noted, *“My house [...] For it to be bigger...for it to improve...for it to be bigger, prettier.”* Similarly, **Liliana** expressed, *“[I want to improve] lots of things, for example improve my house [...] one wants to improve their house, one’s things.”*

Similarly, **Leticia**, the young saleswoman who lived in a rental home, aspired to buy some land and build a house for her family. She said, *“now we’re ready to get a house, even if it’s in the countryside, the important thing is to have your own house.”* When I asked her why, she explained that although it had been difficult to save due to many expenses, for her, owning a home was a priority. She said, *“well, having your house, your own house, and being able to enjoy the backyard, your family, having your own things, being independent.”* For Leticia and her family, her home was not only a space for her family. It also represented a change from living in a rented house to owning one, which, for Leticia, represented independence, progress, and making it her own.

For some participants, the aspiration of owning a home created tension with their short- and long-term planning for wellbeing. To illustrate, **Nidia’s** dream was to have her own house. When talking about housing, Nidia’s eyes sparkled. She said, *“Oh! There’s no greater satisfaction than living in your own house, with your children [...] The biggest thing one wants is a house, a place, a space.”* In

fact, she was slowly building her own house. However, although Nidia and her family were living in a precarious house, they had made the difficult decision to stop saving for her house to make an investment, in the short term, for her new business. Her hope was that her investment in her business would increase her income, in the long term, and that she would be able to finish building her house. Nidia's experience is illustrative of the complex decisions, different trade-offs and risks women make to achieve wellbeing for themselves and their families.

For other participants having a home was a physical manifestation of how far they had come in their lives and how much they had achieved. This contributed to participants' self-esteem and feelings of self-worth. During fieldwork, **Jacinta** (71), proudly showed me her home, and exclaimed,

*"[I'm a] single mother [...] this is my house, and thanks to my fighting I got all of this. I've been fighting for 27 years to get all the things that we have [...] I'll never forget, because we fought a lot."*

She explained that she moved to the "*asentamiento*"<sup>27</sup> where she lived in the early 90's and it was the first time she lived in a house made of solid material. Jacinta often mentioned her children as her biggest source of pride, and her house was a physical manifestation of a space where they were able to study, grow, and get ahead in life.

Similarly, for **Rocio**, her house was a physical manifestation of hard work and success. On repeated occasions, Rocio had told me that she worked hard to have her house and that she felt proud, she said,

*"Oh, yes! Thank God, you know, every woman wants to have her own house [...] it's important to me because, you know, it's a lot of sacrifice to have your own house, you have to work more, and like I tell you, I don't have a profession and neither does my husband and we've worked all we can until now, and now we're here thanks to that, at the age of 48 I'm in my own house."*

Moreover, the first time I visited Rocio, one of the first things her FP mentor admired was her house and said,

*"Your house is so nice! You can tell you're a hard worker [...] you have to be proud of yourself because due to your sacrifice, of your hard work you have this beautiful house, and you can tell that you got it due to fighting and hard work."*

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<sup>27</sup> *Asentamientos* are informal settlements. They considered to be places more than 8 families live, and where more than half of the people do not have land titles or regular access to at least two of the following basic services: running water, electricity with a formal connection, and or sewage system (TECHO, 2015).

Her mentor's comment shows how Rocio's house was not only a personal manifestation of success, but also functioned as an external validation of one's hard work, showing the cultural value of a house and how it represents success.

When discussing their homes, participants also mentioned their neighbourhoods and noted how external factors, such as a lack of neighbourhood safety, constrained their ability to feel safe in their homes with their families. In **Romina's** experience, her neighbourhood had become increasingly dangerous and safety issues had adversely impacted her family's wellbeing. She explained, *"you can't even walk to the corner"*. She told me that her gate had been broken into repeatedly and she complained her neighbours were not sympathetic. She recalled, *"the neighbours [say] they don't see anything, they don't say anything"*. Due to these problems, Romina explained that she could not leave her house unattended for any period of time. In one extreme case, she mentioned how she and her husband had to split up for the holidays to not leave their house,

*"For the holidays my husband is going to spend Christmas with his family, and I'll stay here, and for New Year's I'll go, and he'll stay here. We can't leave [the house] not even for a little bit."*

Romina related rising unemployment rates in her neighbourhood to the lack of security. She recalled, *"every day there's more people without a job near my house."* Due to these security issues, Romina was considering taking out a loan to build a brick wall around her house to make it safer, which would result in a financial burden for the family.

**Liliana** also noted her neighbourhood was not safe as it used to be. She explained, *"now you can't go out to the corner without having problems."* She reported that her son's cell phone had been stolen a few months back but was relieved that the theft was not violent. Similarly, **Rocio** recalled she felt unsafe in her neighbourhood. She explained, *"We're always on the lookout, especially because of the slum [nearby], but when it's getting dark, we always come back [home]."* Lastly, **Jacinta** mentioned safety issues in her neighbourhood, noting especially the high prevalence of drug use. However, she talked about it in a comedic way, possibly signalling resignation about the situation. She mentioned that although the neighbourhood was a bit dangerous, she felt safe because she had good personal relations with the drug users. She said, *"Here, for example [...] all*



the "chespiritos"<sup>28</sup> are my friends [laughs], so that's why I'm safe here [laughs]." Showing that although she felt safe, she acknowledged that she lived in an unsafe environment.

#### 4.3.5 Wellbeing Domain 5: Religion and Spiritual Community

Participants identified religion and their spiritual community as an important wellbeing domain because it provided them with support, comfort, and community. This is in line with the context of Paraguay where more than 80% of the population are Catholics. Specifically, women noted that religion affected everything in their lives, that God helped them in times of struggles, and the importance of spiritual community. This is in line with literature that acknowledges that religion is an important source of wellbeing for people in different contexts, especially in the developing world because it has to do with identity, community, and values (Camfield, 2006; White, 2010, 2012; Devine and Deneulin, 2011; Jha, 2011; te Lintelo *et al.*, 2018; Watters, 2019). Further, participants referred to both intrinsic and extrinsic religiosity. Watters (2019) differentiates between the two where intrinsic religiosity is related to prayer, meditation, and contemplation, and extrinsic religiosity has to do with the social and communal aspects of religion.

In terms of intrinsic religiosity, many participants noted how important religion was for them at an individual level and how it affected everything in their lives. To illustrate, **Rocio** considered God to be an important guiding force in her life and someone she could always turn to. She said,

*"If you are not doing well spiritually, I think nothing in your life is going to go well [...] If anything goes wrong, who is the only person you can go to? [God]. So you need to ask Him to always be around, for your day to be better. Because without Him, I think about, I don't know what our lives would be like."*

Further, **Rocio** noted that God guided her every day. She explained,

*"I am doing well because I have a lot of faith in our lord Jesus Christ, I'm doing very well. When I wake up, I pray, and when I leave my house, I leave everything in His hands."*

Similarly, **Marina's** defined being well spiritually as *"being grateful every day."* She explained that trusting God was important because it helped her feel more emotionally stable. She noted, *"Ask [God] to reinforce your self-esteem so you don't falter."* Marina positively attributed her spiritual wellbeing to other areas of her life and noted that due to her active spiritual life, she felt better and worked better, noting how it impacted other areas of her wellbeing.

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<sup>28</sup> Consumers of crack cocaine. Usually refers to children or youth (Organization of American States, 2018; ABC Color, 2019)

In another experience, when defining wellbeing, **Jacinta** noted, *“I’m always happy because I’m with God [...] He talks to me; he blesses my home.”* When I asked her to define what being well with God meant she said, *“feeling tranquila<sup>29</sup>.”* She explained,

*“Being well with God is different, because thanks to God you are (.) thanks to that you receive a lot of things. Why do I receive things? Why do you visit me? Tell me. That’s a blessing. That is why I have [so much] support.”*

Jacinta continued to say that her spiritual life gave her a sense of relief in times of struggles. She noted that although her life was challenging, she knew she was going to be fine because she had a good relationship with God. Jacinta explained,

*“Sometimes when I sit down, I get up and I can’t walk because I’m sore and I have to get up, I have to do things. I thank God for that. I have to thank God. And I get up again [...] I ask God for strength. Sometimes I can’t get up from my chair [and I say] ‘Give me strength Lord, give me strength.’”*

Jacinta’s experience shows how she relied on God and her spirituality to give her hope and strength when she was feeling ill or feeling down.

Jacinta also noted that her life was in God’s hands. She explained,

*“[Sometimes I feel] I’m going to go [die] in any minute, like what happened last time. Almost, almost, but God must have a lot of seamstresses [in heaven], that’s what I told my daughter, that’s why he doesn’t take me.”*

Jacinta seemed to be at peace with the idea of dying, noting that she was ready to go when God said it was the correct moment. For Jacinta, depending on God during difficult times was crucial to receive strength to survive the day to day.

Similarly, when **Marina** was talking about the future and her goals she explained, *“Hopefully God lets me live [10 more years] [laughs]”* She then went on to say, *“God willing we’ll be elderly [laughs] but it’s true, because time goes by, and if we’re still living, if God doesn’t say anything else, we’ll keep on fighting.”* Noting that although she planned on continuing to “fight”, her future was up to God.

To a lesser extent, participants also mentioned extrinsic religiosity, specifically their religious community. To illustrate, Marina noted how she valued her religion because it allowed her to be part of a spiritual community. She was part of a spiritual group with whom she met weekly to read

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<sup>29</sup> Tranquilo “reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems” (Huovinen and Blackmore, 2016, p. 181).

the bible and have discussions. In defining wellbeing, Marina noted how being part of a spiritual community that supported each other was important. Jacinta relied on her local parish for support in times of need. She noted that beside her parish, she also received support from the parish priest who would go to her house once a week to give her communion due to her ill health, which helped her feel supported.

#### **4.4 Conclusion**

This chapter focused on participants' own definitions and understandings of wellbeing, which allowed me to generate insights into the contextualised subjectivities of wellbeing as a construct, including the interconnected fluidity and 'fuzzy' boundaries of wellbeing domains. This is relevant to highlight because it shows that the way that women living in poverty conceptualise wellbeing is not easily captured by narrow economic approaches that have dominated poverty analysis in development studies and policymaking (Kabeer, 2008; Coulthard, Johnson and McGregor, 2011). As I will continue to develop throughout this dissertation, the data analysis presented in this chapter illuminates why a broader conceptualisation of wellbeing is necessary to recognise the complex and dynamic relationality of doing well.

Participants' accounts revealed wellbeing to be interconnected. For women, wellbeing was experienced through the process of interaction between the different domains, similar to what has been found in other studies (Gough and McGregor, 2007b; White and Jha, 2014; Huovinen and Blackmore, 2016; Jha and White, 2016). Although I presented wellbeing into five domains, other wellbeing domains that were mentioned by participants to a lesser extent were family, love (mostly related to family), happiness, education, getting ahead, and "*tranquilo*". Although I decided to not include these domains in this chapter due to the fact that they were mentioned by few participants, many of these domains were included within the discussion of the five chosen domains and others will be addressed in the forthcoming chapters.

Moreover, I noted that placing participants' conceptualisations of wellbeing within domains was challenging due to the interconnected nature and overlap between domains. Further, wellbeing domains identified by participants did not neatly fit into the wellbeing framework per se. To

illustrate, housing was related to material wellbeing (physical house), relational wellbeing (space for family), and subjective wellbeing (feeling safe).

My findings show that the concept of wellbeing is not only interconnected, but also ‘fuzzy’ as it means many things for people. What is more, my findings show how difficult it is to separate the conceptualisation of wellbeing as a constituent of wellbeing (i.e. ends) or pathways to wellbeing (i.e. means). Using the same example, for some women, the material aspect of a house was seen as an instrument and a space for strengthening their family relations. In these cases, for women, having access to a house, a material resource, was a means, and not an end in itself. While other participants noted that having a house, a physical space, was an end in itself. This was especially important when considering participants’ role as mothers, because for them, material resources only had value when they facilitated the wellbeing of their families (McGregor, 2006; Devine, Camfield and Gough, 2008; Coulthard, Johnson and McGregor, 2011).

The interconnection of domains also highlighted suggests the fluid and highly contextual nature of wellbeing. As I have shown in this chapter, women’s accounts and experiences of wellbeing were incredibly varied. The way women experienced wellbeing was contextual and different depending on their age, marital status, number of children, economic situation, shocks, among others. Further, women’s wellbeing was also bound by structural factors, such as government housing policies, the national debtor list, and a poor public health system.

Another important element to highlight was the complexity of women’s experience of wellbeing. To illustrate, women depicted their lives as lives as a constant balancing act between wellbeing and illbeing. In fact, women frequently mentioned illbeing when defining wellbeing as two sides of the same coin. This is contrary to the literature that states that wellbeing is a positive concept because it focuses on what people have and are able to do, instead of focusing on their deficits (Camfield, 2006; Camfield, Crivello and Woodhead, 2008; McGregor and Sumner, 2010; Jones and Sumner, 2011). I believe this tension between wellbeing and illbeing is not discussed enough in the wellbeing literature, and I will continue to grapple with this tension throughout this dissertation.

Finally, an overarching theme in all of women’s conceptualisations was how wellbeing was relationally and generationally contingent. Throughout all the domains, participants noted that the

wellbeing of their family, especially their children, was critical for their own wellbeing. Women's role of *supermadres* shows how family and relationships had a prominent role in women's conceptualisations of wellbeing. Women's narratives suggest that wellbeing was a relational concept for participants and went beyond themselves as individuals. The ways in which participants defined wellbeing for themselves and for their children (relational wellbeing) also highlighted the interconnection with material elements and economic prosperity (material wellbeing), as well as many intangible aspects such as "*tranquilo*", guilt, and worries (subjective wellbeing). My findings suggest that family underpins any and all conceptualisations of wellbeing. Specifically, families' understanding of wellbeing were related to health, work, income, housing, and religion and spiritual life. Moreover, in all domains, the role of caringscapes (McKie, Gregory and Bowlby, 2004) was apparent because women had to juggle care duties and work responsibilities within all domains of wellbeing. In fact, the role of family and relational wellbeing was so pervasive in the data that I decided to dedicate an entire chapter to this (Chapter 6).

## Chapter 5. Dynamic and Temporal Wellbeing

### 5.1 Introduction

In this dissertation, I set out to explore wellbeing processes and people's life cycle using a temporal perspective. In this chapter I examine the dynamic and temporal nature of wellbeing throughout women's lives across time. To do this, I bring together the 16 participant life history interviews with the objective of identifying commonalities, differences, turning points, and relationships that women identified as significant at different stages in their lives in relation to wellbeing. To illuminate the dynamic and temporal nature of wellbeing across time, I carried out visual life history interviews<sup>30</sup> to understand participants' life experiences, focusing on what participants considered to be important moments of their lives, both positive and negative (Sheridan, Chamberlain and Dupuis, 2011). Life history maps emphasised participants' narratives and allowed them to select what life events mattered to them, which put value on their explanations of different paths taken and the role of agency and structural constraints in individual trajectories (Crivello and Morrow, 2019).

Using life history maps allowed not only for deepening understanding into wellbeing through participants' past experiences and ideas about the future, and also gave new insights into wellbeing domains. The domains of work, income, and housing remained crucial for participants in the participants' narratives of the past, and ideas about the future. In addition, a new domain, education, surfaced as an important wellbeing domain that had implications in relation to obstacles, opportunities, as well as aspirations for women. Lastly, mentions of other domains such as spirituality and health were less prominent in women's life history interviews, and thus not included in this chapter as separate domains. All in all, life history interviews allowed for bringing in past experiences and ideas about the future, which gave new insights into wellbeing.

The rest of the chapter will be organised by each wellbeing domain: i) education (section 5.2); ii) work and income (section 5.3); and iii) housing (section 5.4), through time. Specifically, I will explore the role that these domains had on women's wellbeing throughout their lives using a chronological lens, from childhood to adulthood. Throughout, within each domain of wellbeing, I will present generational differences between participants under forty and over forty. Section 5.5

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<sup>30</sup> For a more complete explanation of the process of the visual life history interviews, see Chapter 3: Methodology

provides a reflection on the challenge of some women of looking at the future and difficulty aspiring. Finally, section 5.6 presents my concluding thoughts.

## ***5.2 Education & Wellbeing Throughout Time***

In their timelines, all participants identified important events in their lives related to education. Women mentioned important life events in the past, such as leaving school early, finishing school, post-secondary education, but also milestones related to education for their children in the future. This section is organised chronologically, first presenting participants' life experiences related to education as children, then as teenagers, followed by young adults, into adulthood, and also included aspirations for the future, both for themselves, as well as their children. Throughout the discussions on education, I observed generational differences between participants under 40 and above 40, which I will expand on in this section.

### ***5.2.1 Leaving School at a Young Age***

Leaving school at a young age was a common occurrence for participants of all ages, but especially for those over 40. The average level of educational attainment for participants was grade 8 (age 13), with some participants leaving as early as grade 3 (age 8)<sup>31</sup>. Leaving school early was mainly due to the inability of participants' families to pay for school and participants' need to start working to contribute to the family financially.

Participants who left school early replaced schooling duties with domestic duties and childrearing. Participant narratives revealed ambiguities and contradictions in relation to leaving school early. For some participants leaving school at a young age was negative, for others it was positive, and for others it was both positive and negative. Some, such as Rocio and Marina, were clear that leaving school early was a negative experience. To illustrate, **Rocio** explained that she left school in 6th grade due to economic hardship in the family. She recalled, "*I couldn't study anymore, our [income] wasn't enough. My mother couldn't [pay] to send me to school.*" She considered this experience as negative, noting, "*Because I had to continue with school [Interviewer: Why did you leave?] Because my parents couldn't.*" **Marina** left school in 6th grade, and as the oldest of six siblings she had to start working to help her mother. When I asked her about her childhood she responded,

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<sup>31</sup> See Table 1 (section 3.4.2) for participant's level of educational attainment

*“Negative [...] Well because (.) we were very poor, the whole family, so from a young age we started working with my mother, that’s why I didn’t even finish school, I saw my mother needed help, so (.)”*

**Nancy**, who found herself in a similar situation caring for younger siblings noted, *“my mother had so many kids that I had to leave school.”*

Other participants had more nuanced interpretation of leaving school early because it had positive and negative elements to it, showing the ambiguity of wellbeing experiences. **Jacinta**, for example, left school at age 14 and started working as a seamstress. Although starting to work at a young age gave Jacinta the opportunity to support her family financially, she also considered the experience as negative because she felt leaving school left her lacking academic knowledge. Looking back in present time she explained,

*“Sixth grade back then isn’t the same as it is now, mathematics, for example, now we don’t understand what [grandchildren are] doing [Interviewer: It’s different right?] It’s different. [Interviewer: And you feel?] I can’t even help anyone, not even help my young grandson [with homework].”*

**Nancy** left school at age 10 to help with family care duties. When asked whether she would characterise the event as positive or negative, she responded, *“Well if you look at the [good] side, it was positive because I love my brothers and I was great at taking care of them.”* Nancy also explained that in addition to having to care for her siblings, her mother kept her out of school because she was afraid of her getting pregnant. Nancy explained, *“[mother] was taking care of me, so I wouldn’t have children at an early age. She wanted to take care of me”.*

For one participant, leaving school early was considered neutral in the sense that it was taken for granted as a normative practice. **Jazmin**, who left school at age 14, did not consider leaving school early as negative because she noted that was just the way things were back then. She said, *“I would’ve liked to [finish school], but in those days, it was the countryside, you know.”*

### 5.2.2 Finishing School

For younger participants (under age 40), their experiences with education were quite different because all participants were able to finish secondary school. In addition, finishing school was also a common occurrence for the adolescent and adult children of the older participants. Four women – Paola (23), Jimena (33), Leticia (34), and Beatriz (35) – spoke about finishing school in positive or neutral terms, almost as if it were expected, and they did not consider it an important highlight in



their lives. Only for one young participant, **Nidia** (27), finishing school was considered an important accomplishment because she was proud that she was able to finish secondary school, despite becoming pregnant at age 17. She said, *“Yes, I finished secondary school, with a belly, but I did it. I left with a belly. It was positive, I feel great that I finished, [very] proud.”* In one example, an older participant (over 40) who left school early returned to school later in life. **Nancy** (52), who had left school at age 10 to take care of her siblings, returned to school at age 20 with a programme for adults to finish their education. This gave her pride, and also made her characterise leaving school early as positive because, as she noted, *“it was fine that I left [school] because I finished [later on]”*.

Throughout the research, older participants who were not able to finish school themselves were emphatic about how important it was for them that their children finish their secondary education. In fact, all but one participant noted that all their children had finished secondary school, and participants were very proud about this accomplishment. **Romina** (40), who left school in grade 6, proudly exclaimed, *“All our children finished [school], we’re just the ones who didn’t finish.”* Previously, she had defined wellbeing as, *“Being able to give your children the education they deserve.”* Only one woman, **Ana**, noted that her children did not finish secondary school in present time. Ana noted that although two of her daughters had finished secondary school, two of her sons left in grade 6 to start working, without providing more detail. Her younger son was still in school.

### 5.2.3 Post-Secondary Education

Participants discussed different types of post-secondary education, such as vocational and university education in their timelines. Vocational education was important for participants because it helped women to gain new skills and create or improve their business opportunities. Vocational education was mostly mentioned by older participants. **Nancy** (52), for example, took various vocational and professional courses in handicrafts and business administration. She was very proud of all the courses she had taken and noted, *“that’s why my business is administered so well.”* Similarly, **Elisabeth** (41) was able to attend vocational courses to become a hairdresser, which became her profession. **Jacinta** (71), who left school in grade 6, took courses for three years to become a seamstress. Vocational education was also important for younger participants, such as **Paola** (23) and **Jimena** (33), who had taken classes to become hairdressers. Both participants recalled how important these courses were because with additional skills they were both able to become hairdressers and open their own beauty parlours.

Participants also mentioned disappointments in their experiences with post-secondary education. Both **Elisabeth** and **Rocio** mentioned their unfulfilled dreams of becoming nurses as young adults. **Elisabeth** (41) had studied nursing for two years but was unable to finish because her studies were not compatible with her job at the time. She recalled,

*"I really liked [nursing] but I had to leave it, because I couldn't help [my boss] anymore. [...] [Interviewer: And leaving your studies, positive or negative?] It was extremely negative for me [interviewer: Right] Because I wanted to finish but I couldn't."*

Similarly, **Rocio** (47) regretted not going to nursing school. She explained, *"I always wanted to be a nurse, but I was never able to achieve that, and I won't anymore, because I had to study, and I didn't study, I got pregnant very young."*

Participants also discussed aspirations for university studies in the future. Some younger participants aspired to go to university, but no participant attended or had finished university studies at the time of this research. Beatriz and Leticia, for example, discussed going to university. **Beatriz** (35) discussed wanting to go to university to study pharmacy like her husband, *"I'm thinking about it, I hope it's not too late"*, she told me. **Leticia** (34) had left her university studies in her second year and was planning on returning for a degree in business administration. She explained, *"My studies, I want to take them up next year, and see the results of that, because nowadays if you don't have a degree or university studies you don't get hired."* However, Leticia struggled with finding a university programme that fit within her busy work schedule. She explained,

*"I am looking at [programmes] for next year [Interviewer: Ok] But the problem is that my work schedule doesn't help. [Interviewer: Right] I leave very late and come in very early, we are looking. I was just sending my CV to various places because it's not that I don't feel comfortable with my job, but I'm always looking for a better schedule. [Interviewer: Right] And so I'm waiting. I sent in a few [CVs] but there is a shortage of work [...] So you have to take care of what you have."*

In addition, participants discussed future plans for vocational training. **Nidia** noted how she wanted to take courses to learn more about the decorating business she was starting. **Elisabeth** wanted to continue taking courses in hairdressing to keep up with the latest trends. She noted, *"I would like to progress in my profession, and I am trying to get more and more training, and I'm investing in myself for my training and those things."*

Many participants who had older children noted that their children attended or had already graduated university. Participants, like Ana, Elisabeth, Valeria, and Marina, were very proud of their children's university studies. **Valeria** (56) noted how important it was for her that her daughter finish her university studies, as illustrated by the following excerpt:

*"[Interviewer: What else do you need to be well in your life? What else does one need?] What I want (.) what I wish for is that my daughter graduates [university], that they are doing well, everything, my family [Interviewer: Of course.] That's the most important thing."*

Participants also mentioned aspirations for their children related to university studies. Participants with younger children, such as **Nidia** (27), **Jimena** (33), and **Romina** (40), discussed how important it was for them for their children to go to university and be professionals in the future. To illustrate, **Romina** mentioned *"I want my children to study so they don't end up like us. Now without studies, you can't even be a maid"*, which was striking because she worked as a maid. Romina explained that she felt that her children would have opportunities to get ahead with education. She explained, *"Now it's not like it was before, you can do anything, you can achieve what you put your mind to."*

#### 5.2.4 Summing Up: Education

Education was mentioned often in relation to wellbeing in participants' life histories, both within their own lives, as well as their children's lives. In many ways, education was an instrument that promoted wellbeing, but also an end in itself. This included vocational education giving participants work opportunities, finishing school, and children obtaining education. Conversely, education was also mentioned in experiences of illbeing, these included leaving school early due to poverty, lack of educational opportunities, and pregnancy and care duties preventing studies.

In relation to life experiences with education, the generational differences between participants were stark. No participant over 40 had finished secondary school; all of them had left schooling early to work within or outside their homes due to economic difficulties. This observation is related to the context of Paraguay presented in section 1.2 where it was noted that many women migrated from the countryside to the cities to find a better life in the past decades because they did not have the opportunity to continue their studies (Rodriguez Vignoli, 2008; Finnis, 2017). The experiences of participants over 40 leaving school early shows how women's educational opportunities were impacted in specifically gendered ways by their family's economic situation, as well as wider

structural factors, which had implications for wellbeing. Specifically, women left schooling as girls to take responsibilities in their homes such as child rearing and house duties, which typically were not assigned to boys. In addition, there was a sense in older participant narratives about generational change, noting that it was the way things were back then, but times have changed. On the contrary, all participants under age 40 had finished secondary education, including **Nidia**, who was proud that she finished even though she was pregnant. These findings allowed me to observe the dynamic and temporal nature of wellbeing, as well as structural shifts which are observed in generational changes. Throughout, the case-based approach illuminated how biography and structure intersected in participants' lives (Brannen, 2012).

Through life maps I was also able to observe some elements of the lives of participants' children. Participants often discussed the importance of education in all stages of their children's lives. I found that participants recognised the importance of education for their children because they did not have educational opportunities themselves. All in all, children's education was a symbol of so much more and represented opportunities of getting ahead. These findings relate to the highly relational nature of wellbeing, and how participants' wellbeing was interconnected with their children's wellbeing.

Lastly, I observed how gender norms interacted with structural barriers in preventing participants and participants' children from accessing educational opportunities. In the past, older participants were not able to finish schooling due to their care responsibilities within and outside the home. More recent experiences among younger participants, such as **Leticia**, highlighted the lack of affordable university options and the challenges of balancing work and university.

### ***5.3 Work, Income & Wellbeing Throughout Time***

Participants mentioned important life events related to work and income throughout their lives. Unlike wellbeing maps, participants conflated work and income in life history interviews. Thus, in this chapter I have combined the two wellbeing domains because they could not be meaningfully disentangled. I took a similar approach to the previous section on education and organised the section chronologically through participants' life stages. Women recalled life events including starting to work in their childhood, migrating for work, and starting a business. Women also

discussed pertinent issues related to work such as the tension between work and care duties, possibilities of migrating internationally to work, as well as their aspirations and goals for the future related to work.

### 5.3.1 Work in Childhood

Many participants acknowledged that due to their family's economic necessity, they worked in their childhood. As mentioned in the previous section, older participants left school early to work both within and outside their homes. Some participants, such as **Marina, Rocio, and Nancy** left school early to help with household duties and care for younger siblings. Other participants, such as **Liliana** and **Elisabeth** worked outside their homes as children and were involved in domestic labour for other families called "*criadazgo*". "*Criadazgo*" is a practice rooted in Paraguay (and also in other Latin American countries) by which poor families give their underage children, especially daughters, to wealthy families to work as household help, or "*criada*", in exchange for food or education (Bermúdez, 2016; UNICEF, 2016). Many organisations denounce "*criadazgo*" as child slavery, and although it is a common and problematic practice in Paraguay, its prevalence has diminished significantly in the past decades (UNICEF, 2016). **Liliana** left school when she was 9 years old because she had lost both parents and her extended family made her start working in "*criadazgo*". She noted it was a very negative period in her life, and explained, "*I was working as a 'criada', and there I was mistreated a lot*".

Similarly, **Elisabeth**, started working as a "*criada*" at age 13 to pay for her studies, but it did not go to plan. She explained, "*I studied until 9<sup>th</sup> grade. Then [mother] told me that I had to work to keep [paying for] studies because she couldn't [afford it], so I started working*". Elisabeth's cousin took her to work at a stranger's house as a "*criada*". She was frequently mistreated and even beaten at times. The family had promised that they would send her to school, "*but that didn't happen*", she explained. Elisabeth said,

*"this lady sent me to do things that an adult had to do, and I was still young. I was 13 years old, and I had to do all the things for the house, and if I didn't do it right she would get upset."*

Elisabeth considered this time negative because "*many ugly things happened to me there*." She recalled how she and her mother were deceived,

*"My mother didn't know [where I was] [...] there weren't any telephones [...] My mom lived 250 km away [...] and my cousin brought me to this stranger's house and left me, I didn't even know the way back or anything."*

### 5.3.2 Migration to Work

As young women, many participants who were born in rural areas (mostly those over 40) migrated to urban centres to work. This is not surprising since in the past decades there has been a large rural to urban migration in Paraguay (Rodriguez Vignoli, 2008; Finnis, 2017). Migration was most common for participants over forty and all participants who migrated characterised migration as positive because it allowed them to have access to work opportunities. To illustrate, **Romina** (40) and **Marina** (54) left their homes in rural areas at ages 16 and 17, respectively, to work as maids in urban areas. **Liliana** (51), who started working as a “*criada*” as a child in a rural area, noted that an important event in her life was when she migrated to the city and started working for a “nice” family, as she put it, in her early adulthood. Liliana worked with this family for eight years which she characterised as positive because it gave her stability. She noted, “*[It was] positive [...] because I found a nice family where I could work.*” **Jacinta** (71) migrated to an urban area to work for a large company as a seamstress when she was 18. This move allowed her to save and after a few years she was able to bring her mother and father to the city and support them financially. She was proud that she was able to support her parents and told me, “*I told my mom, no more working for you.*” Similarly, **Elisabeth** (41), mentioned how finding a job as a seamstress in the city was an important turning point in her life. She explained,

*“I found work with a high-end seamstress, and I made good money, and every month I would send my mom that, for my son’s milk. I made it on my own for my son.”*

The experiences of both **Jacinta** and **Elisabeth**, show the highly relational aspect of work and wellbeing, showing how participants’ migration allowed them to better support their families. Further, only one participant under 40 migrated. **Jimena** (33) was born in a rural area and moved to an urban area after her husband found a better job. All other younger participants were born in urban areas.

### 5.3.3 Starting a Business

Starting a business also emerged as a significant biographical event across life histories. As mentioned in sections 1.2 and 1.3 (Country Context and Fundación Paraguaya), most participants had their own businesses because they had to create their own opportunities in the face of limited options. In other words, with the support of FP, many women strengthened or started their own businesses, which was an important life event. I will be expanding upon women’s experiences with FP in chapter 7.

Starting a business was important for participants for different reasons. **Elisabeth** identified how opening a beauty parlour at age 31 was a turning point because it allowed her to support herself and her children. She explained how thanks to her hard work both of her sons went to university and they have good, stable jobs. She said, *“I’ve had [beauty salon] for 10 years, and this is what helps me pay for my son’s university, their school, their materials, their bus passes, gas.”* **Romina**, on the other hand, appreciated that with her business, a kiosk, she could work from home while taking care of her family. She noted that with a loan from FP she could set up her kiosk and said, *“With my kiosk now I can stay here at my house and I’m more “tranquilo”.*

For other participants, starting a business was a sign of independence and made women feel capable. **Jimena** had started studying hairdressing at age 14 and started working at a young age, alongside her schooling. She had worked in various beauty parlours starting at a young age and had then started her own beauty parlour. She was very proud that she had created her own source of work and that she was independent, as shown by the following excerpt.

*MC: And then at 14, you started to study hairdressing?*

*J: Yes*

*MC: And that, positive or negative?*

*J: Positive, because thanks to that I am paying for my expenses, I help my husband, the education of my daughter, my son*

*MC: And move to [city name]?*

*J: Positive*

*MC: It was positive too. Why?*

*J: And here I created my own source of work, which is the hairdresser, my own hairdresser [...]*

*MC: Why was it important to start your own hairdresser and not work in another, for example?*

*J: Exactly, it allowed me to be independent and to be able to earn my own, be my own boss of my own work.”*

**Marina** (54) started her own business at age 51 once her children were older. She was proud of her business because after many years of raising her children she could contribute to her family financially.

Other participants appreciated being able to start business and work with their partners. **Rocio**, for example, who had defined being well with her family as having a great marriage noted that she appreciated working and collaborating with her husband and that she felt respected by him.

Various times throughout the research Rocio mentioned how much she valued working with her husband because she felt there was mutual respect and trust. She explained,

*“That’s why my husband sometimes admires me, because he’s with me [...] We didn’t used to work together, I used to work with another person, and him with another person. [We always say] Why didn’t we work together from the beginning?”*

In a subsequent interview, I asked Rocio why she valued working with her husband and she explained that she appreciated there were no power imbalances between the two of them. She noted,

*“You see we’re independent, so I work with him, because I no longer have small children, so we go together, we work, we both have the same hierarchy in sales, because he is also a salesman and all of that, and me too, so we help each other.”*

Another participant, **Nancy**, recalled how she appreciated working with her partner in her business and that they had a good working relationship. She noted, *“I have an excellent husband,”* because they worked together as a team. In both examples, Rocio and Nancy highlighted that they enjoyed working with their partners because they had a good relationship where they felt like equals, and they felt respected working together.

#### 5.3.4 Work & Care Duties

Although women noted how important work was throughout their lives, participants also shared experiences where they struggled to balance their work or running their own businesses with care duties and their roles as mothers. Participants mentioned different turning points in their timelines related to their, sometimes conflicting, responsibilities as workers, as well as carers.

Due to their roles as carers, some participants decided to leave work outside the home to raise their children. In **Marina’s** experience, she stopped working in her early twenties when she started having children to stay at home with them. She noted this was positive because she appreciated being able to stay home and raise her five children. As she noted,

*“[Interviewer: Then, you stopped working to stay with your children, was that positive or negative?] Positive [Interviewer: Why?] Because I was the one who had to take care of them.”*

Marina explained that she counted on her husband’s work to offer the family financial security and was proud that she raised her children and was able to care for them. **Jazmin’s** left work as a maid in her mid 20’s. She explained that she liked working outside the home, but her husband preferred that she work from home to care for her family, which is related to care duties and also gender norms. When I asked Jazmin about her experience working as a maid and how she characterised



that time in her life she said the following, *“Positive, because I liked it. Even today I want to work [outside the home], it's just my husband, he won't let me go out to work, he wants me to work with my money here.”* In another experience, **Nidia** worked at a supermarket for a year when she was 22, but eventually left because she felt she did not see her children enough. She noted that she was not able to successfully combine work outside the home with seeing her children enough. She explained,

*“I worked in a supermarket and then I quit. [Interviewer: Why did you quit?] Because there was no life there, I left. I worked in the [name] supermarket for one year, but I had no life, I no longer saw my children. My husband would tell me, ‘it’s better if you stay with them [children].’”*

During the period of this research, I observed some participants left or changed their jobs due to their care duties. **Romina** had to change jobs due to her care duties. At the beginning of the research, she was working at a local market in the mornings, but by the end of the research, 15 months later, she had left this job because it was too difficult to juggle alongside her care duties. Specifically, she explained how the logistics of dropping off and picking up her daughter from school conflicted with her job. This led Romina to find a job close to her daughter’s school which allowed her to walk her daughter to school and leave by the time school was over. She explained,

*“[Interviewer: Are you still working in the [local market]?] No, I left. [Interviewer: Why?] Well because (.), too much time, I mean, I had to go early, and because of my daughter's school, I didn't want to go there anymore. [Interviewer: Right, so you are only working at the kiosk now?] Yes, the kiosk and [as a maid] at a family's home near my daughter's school. [Interviewer: Oh, and how often do you go to the family home?] Every day until two in the afternoon. [Interviewer: And you told me that you take your daughter to school every morning?] Yes, I accompany her, she stays at school, and I go there where I'm working, I am working in a family's home.”*

Some participants reported feeling guilty about working outside the home because they felt that they were not giving their children enough attention, yet knew they had to work to provide income for their families. To illustrate, when **Paola** found a job working nights, she explained that she found it a bit challenging to balance her other roles such as taking care of her home and her son. She noted,

*“[Interviewer: How do you feel about your life now?] A little stressed [Interviewer: Why? Tell me] Because it is more complicated now when you leave your house. [Interviewer: Sure. Why is it complicated?] And that's what I'm telling you, my house for example is no longer tidy as it was before, my son is no longer clean as he was before [laughs]. I'm very tired, I wake up late.”*

She explained that she was ambivalent about her new job because she did not want to leave her son, but she needed the money. She recalled,

*“The truth is that it I didn’t want to leave [the house] that much, but we were not doing so well financially either, and apart from that, we, as I mentioned last time, we want a house and I also want to grow my hairdresser [business] and with my salary it wasn’t going to be enough [Interviewer: Sure] And even less at this time of year, and then that is why I decided, I am I reached an agreement with my husband, that if he was going to stay with [son] and he said yes.”*

Paola’s experience shows the interplay between care duties and gendered expectations where women are responsible for care. In this case, it is apparent how Paola and her husband reach an agreement, which is outside the norm, that he take care of her son while she works.

### 5.3.5 International Migration for Work

For two participants, the option of migrating outside the country to work was discussed. In Paraguay, in the past decades, thousands of people, mostly women, have migrated to Argentina and Spain to work (OHCHR, 2012; Yofre, 2016). To illustrate, **Sandra** mentioned that she was considering moving to Argentina to work. She noted that she wanted her children (ages 12 and 17) to have a good education, but she was unable to provide for them with her current work, as shown in the following excerpt:

*[Interviewer: If you don’t mind me asking, how do you want to improve your life, your children’s lives, in the next 5 years?] That’s exactly why I’m going, I’m going to work abroad. [Interviewer: Oh, you’re going abroad? Where are you going?] I’m going to Argentina, I have my sister, my brother, everyone is there, and I have good prospects, so I decide to go [...] The boy is staying with his father and the girl, because she is young, I am taking her with me.*

In fact, a few months after my third interview with **Sandra** I was no longer able to reach her, and I had heard from her FP mentor that she had left the country. Due to this, Sandra stopped participating in FP’s programming as well as this research before its completion.

**Elisabeth**, who I presented previously as being unsure of how to balance her work and care duties, had also mentioned that she was considering moving to Spain to work to earn more money. She was apprehensive about this move because she did not want to leave her young daughter, aged 6. She recalled,

*“What made me change [my mind] a little is my baby, because I, for example wanted, wanted to go to work in another country, to see if I could buy a house and enjoy it in my old age, with my daughter, but I realise that if I leave her now, I’m going to do a bad thing to her, she’s going to feel bad because she is so attached to me.”*

She continued to explain that she was going back and forth and was worried that leaving her daughter would “traumatise” her. **Elisabeth’s** friend tried to convince her by telling her that hairdressers earn good money in Spain, as well as commenting on how living in Spain she would have more structural support for her daughter. Elisabeth recalled,

*“[My friend] tells me, ‘After 2, 3 years you will be able to take your girl and she will study there, the school is free, they have everything for free, health is free, when you take her [to the doctor] you will leave with the medicine. She is going to eat at school, because you take her at 9 in the morning and pick her up at 4 in the afternoon and meanwhile you are going to do everything you want and you can bring her to the hairdresser, she will be older’ [Interviewer: Right] She gave me (.) All the options, but I am still not convinced, because in the meantime I have to leave her to go and start there and it’s not that I am two or three hours away, no, it is very far.”*

This section shows the different experiences of Sandra and Elisabeth in migrating for work. For Sandra, her migration is scaffolded due to her existing networks. In addition, she decides to go for her children. While Elisabeth noted that she did not have a network to move, and she decides not to go due to her daughter. This example shows how these issues are highly subjective and contextual.

### 5.3.6 Economic Crisis and Work

Participants reported being negatively impacted by the economic crisis that hit Paraguay and the region in mid-2019<sup>32</sup> (ECLAC, 2019; Abente Brun, 2020). To illustrate, **Valeria** noted her food sales had gone down, and she was feeling the economic crisis. She told me that there has been a significant decrease in clients in her food stand and that many businesses are saying the same thing around town. She recalled,

*“Right now, there’s nothing. I don’t know what happened but there’s nothing. We’ve never had anything like this [...] It’s like this everywhere, not only here. [People] are complaining [...] The situation is difficult, it’s not like it used to be [...] There’s nothing right now, you don’t know what to do, you’re stuck.”*

Similarly, **Nancy** also reported feeling affected by the economic crisis in her glass installation business. She noted,

*“Everything’s stopped, in every sector [...] You know, there’s no work. It’s difficult. Everything stopped, everything’s stuck, everything’s stuck, in every sector. It’s difficult, that’s why I can’t rest, you can’t be doing nothing in these times”.*

Nancy told me it had been difficult to pay her bills and is considering another business such as clothing sales. Moreover, **Leticia** also felt the economic crisis as well as inflation. She explained,

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<sup>32</sup> As a reminder, this research was carried out before the COVID-19 pandemic.

*“The truth is that we are now in a crisis, [prices] also go up, we feel it more now [...] now it is more noticeable and it’s like our money isn’t worth anything anymore.”*

These participants’ examples illustrate how external factors, such as a regional economic crisis, directly affected women’s ability to work and increase their income.

### 5.3.7 Aspirations for the Future & Work

Participants mentioned different kinds of aspirations and hopes for the future in relation to work. Some participants mentioned growing existing businesses, other participants wanted to start new businesses, while others discussed aspirations in relation to work for their children. Many participants mentioned aspirations in relation to growing their existing businesses. To illustrate, when I asked **Paola**, a hairdresser, about her goals, as she envisaged her future she said, *“I’m a businesswoman! [laughs]”*. She hoped that in ten years her business would grow and that she would be in charge. **Jimena** dreamed of her beauty parlour growing and having many sites. When I asked her about her goals she told me, *“For [my beauty parlour] to come up! For it to be like [famous beauty parlour]! [laughs]. For it to come up and have a lot of sites!”* **Elisabeth**, also a hairdresser, had similar goals. She wanted to continue investing in training and growing her beauty parlour. She noted, *“I want to have a beautiful, modern beauty parlour and I want to have staff so that I can work better.”*

**Nidia** said that in the future she would be a manager running her events planning business. She also discussed plans of taking courses. She said,

*“[My goal is to] have my own business, buy my own property, and build an events space, because there’s money in that, and there’s no [money] around here, it’s a good business ...[it’s] money in hand.”*

The last time I talked to Nidia, she was already progressing towards her goals and told me she was growing her business and attending professional training for her decorating business. She said, *“I’m already doing it, I’m already making it”*. Lastly, **Rocio** (47), a door-to-door saleswoman, explained how important it was for her to keep working and to start saving for a future when she would no longer be able to work. She explained,

*“Now because of my age, I am not saying that I am old either, but I always worked on the street, I am a woman who at 15 I got married and I had my children early, and I always worked on the streets. My husband has always been with me, and now that my children are all grown up with my husband, we have our own house. I can’t complain about my luck because I have my house and I have my comforts, but I try to get ahead. Now I tell my husband that my children are all grown up, that we go forward as far as we can, because*

*afterwards an age comes that you get tired and to try to have something for the future to support myself while I'm old, well, that's what I think."*

Other participants, like Jazmin, Marina, and Leticia, wanted to start new businesses. Notably, all three participants mentioned wanting to start their new business with their partners. To illustrate, **Jazmin** wanted to start a traditional bread ("*chipa*") bakery with her husband. My conversation with Jazmin was one of the only cases where the husband also participated in part of the interview:

*MC: What are your goals with your job?*

*Jazmin: That it gets better, to have more work and get ahead.*

*MC: So, get ahead, have more work, more clients*

*Jazmin's Husband: We have a project; I hope the project works out*

*J: I hope so, I hope God hears you*

*MC: What project?*

*Husband: We're thinking (.)*

*Jazmin: A bakery*

*Husband: A "chipa" bakery*

**Marina** (54), who had a home goods store, aspired to open a new business with her husband after his retirement. She explained,

*"Well (.) in ten years I think that, you know my husband is going to retire, so in ten years and we plan to start another business, he wants a hardware store, in our house, not rented [...] [Interviewer: So, do that with your husband, and you, would you stay with this business or?] Well, I say that I will always keep this one, because it is a very light job for me. [...] [Interviewer: And do you want to grow it or change or continue like this?] Not grow it, not grow it, because it would be too much, I'm alone here [Interviewer: Right] And it's difficult, so I just want to keep it like this."*

**Leticia** was a natural born entrepreneur, she told me. Throughout our conversations she shared her different entrepreneurial plans. At the beginning of the research she explained,

*"I love sales. I live by sales [...] My husband says I have sales in my blood, I love sales. If it were up to me, if I were to get money, I would start my own business".*

A year later, she told me she was planning on making an investment with her husband to start a rental business of inflatable bounce houses for children to have some additional income on the weekends. She explained how a big motivation for starting her own business was her young son. She noted, *"Well, I always tell my husband that I want to have a business. Well, today you practically no longer think about yourself, you just think about your children, right?"* She continued to tell me the importance of not letting her guard down and always looking for opportunities. She said,

*"We are thinking about that, just like I was telling [husband], we never really let our guard down in order to get ahead, because the truth is that we are here in Paraguay and if you do*

*not move, let's say, you are not going to progress, right, because nobody comes and gives you or your children anything, [saying] 'I see that you work all day, I'm going to give you this', we make our way, as we always say with my husband."*

As mentioned in chapter 4, participants noted that they wanted to start their own businesses so they could work from home, for different reasons. Some participants, such as **Beatriz**, mentioned being able to work from home would help them be more present with their family, as well as achieve "*tranquilo*" or being more at peace without worries. Beatriz's goal for the future was to have a business in her home and work together as a family. She explained, "*Our project is to have a business here, so we can stay home, just work from here [...] I think someday [...] So I can be at home, to work together as a family.*" When I asked her why working from home was valuable, she responded, "*So I can stay here, do other things, and not leave my home*".

In other experiences, especially for older women like **Jacinta** and **Liliana**, this was related to a sort of "early retirement", where participants could still make some income, but at a slower pace working from home. Jacinta (71) aspired to open a haberdashery to be able to make income and work from home. She explained,

*If I could have that haberdashery, that would help me because I would have an income, just with that. [Interviewer: So, if someone helped set up a haberdashery, they would help you with income and with work?] Yes! That's it, because like I told you, I know where to get cheaper things, so you bring them here and you sell it. I don't want to work too much. [Interviewer: Right, just the right amount] The right amount. Sometimes people tell me why do you charge so little? Well, how am I going to charge them more if they're poor too? [Interviewer: Right.] That's why it looks like I'm never going to get ahead."*

Similarly, when I asked **Liliana** (51), about her goals for the future she told me, "*being able to be home more often and work less*". Liliana felt tired yet knew that she needed to support herself financially. Due to Liliana's health issues, she wanted to have some type of business in her house, perhaps a food stand. When I asked her why she wanted to work from home she explained,

*"[Interviewer: Why is it important to you to have a stand in your house?] Well to be able to cover something [costs], for myself, like to buy my medicine or I don't know, to help a little too, because it is not pleasant to be hung up on others, I've never been used to that."*

For participants, starting a new business represented different things. For some, it was the opportunity to get ahead, to earn more income, and to have stability. For others, it meant providing for their children or having the opportunity to work from home while caring for their families. Lastly, especially for older participants, working from home meant being able to have an income while being able to work at a slower pace.

Participants also mentioned aspirations for their children in relation to work. **Rocio**, for example, defined wellbeing as being able to give her children a better life, and for them to work and have a good life. She noted, *“Help my children get ahead, that’s essential, and show them what I do so they can work too, so they can have a foundation.”* **Elisabeth** aspired for her children to have stable jobs and good salaries so that they could support themselves in the future. She said,

*“I would like for example that my children have a good salary, they can buy their own house, have their own car. Today they have their own cars, but the car doesn’t stay the same all the time, [after] 3, 4 years it is deteriorating, you have to change it and all that. I would like, for example, that they, from time to time, change their vehicle, have a nice house, have a family and be happy, that would be the best for me.”*

**Liliana** noted that her daughters were having a hard time finding work. She noted that this was frustrating because they had a formal education, unlike her. She explained,

*“It’s hard to find a job [nowadays]. And they’re all educated, they’re not uneducated, they have their secondary degree, training [...] That’s my dream. I tell them, you need to find jobs, earn well, because you have the tools for that, my children are ready to face life. I always tell them.”*

### 5.3.8 Summing Up: Work

Work was mentioned often in participants’ life histories, both within their own lives, as well as their children's lives. Similar to what I found in education, there were also generational differences between women’s experiences with work. To illustrate, older women recalled working as young girls in relation to care responsibilities within and outside their homes. Further, such responsibilities typically were not assigned to boys, showing the strong role of gender norms. In addition, women’s contexts of poverty had an important role in women’s work in childhood. Younger women, on the other hand, did not work in their childhood and only one younger participant migrated to an urban area.

In general, work was associated with stability and *“tranquilo”*. Participants also noted how work gave them independence and how they were proud of their work. Some women noted how they appreciated working with their partners. Through work, it was apparent how participants assumed the roles of *“supermadres”*. For both older and younger participants there was a stronger relational component in relation to work. Women noted the importance of working to support their families. In their narratives, participants described the complex relationship between work, income, and care, which fit within the concept of caringscapes. Due to this, many participants noted their desire to start their own businesses and work from home. Working from home gave them flexibility and

allowed them to watch over their homes and their children. Lastly, participants' aspirations for their children showed how work represented stability, income, and getting ahead, which is what participants wanted for their children.

#### ***5.4 Housing & Wellbeing Throughout Time***

Women's homes were an important dimension of wellbeing, as already noted in the previous chapter. Unlike the previous sections, this section is not organised chronologically, and instead is organised by themes that I identified in participants' narratives. Women's timelines frequently highlighted important life events such as obtaining their own house, shocks related to housing, and aspirations for the future related to housing.

##### ***5.4.1 Obtaining Secure Housing as Life Milestone***

Rocio and Jacinta noted that having their own home was a manifestation of success, as well as an important space where they raised their children. In their timelines, these women recounted how challenging it was to obtain their own home. To illustrate, **Rocio** (47) shared the difficult journey of obtaining her own home years ago. She began,

*"A friend told me that we could get land here, it was [US\$ 50] to enter, but it was 'asentamiento'<sup>33</sup>. I told my husband and he said 'no, why are we going to suffer there?!', there was no electricity, water, nothing, but I wanted to come, so I took a chance [...] The next day [...] it was very hot, I came and it was like a jungle, it was so ugly, we had a little tent and a bed, and that's how we started."*

Rocio was very proud of what she and her husband have been able to achieve in their lifetime, especially as informal workers. For her, having a house was a physical manifestation that after so many years of hard work she had made it, a manifestation of success. As she explained,

*"We fought to have [this house [...]] we're poor and we're independent, we both work, and to have a house or some land, it's difficult [...] and with all our children [...] even with all our children, we endured, and now they're all grown up, but we have our own house and our land."*

In Rocio's accounts, it was notable how she mentioned that they were independent, in other words, she and her husband were informal workers who did not have support or stability, which made the accomplishment of having their own house even more gratifying.

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<sup>33</sup> *Asentamientos* are informal settlements. They considered to be places more than 8 families live, and where more than half of the people do not have land titles or regular access to at least two of the following basic services: running water, electricity with a formal connection, and or sewage system (TECHO, 2015).



**Jacinta** (71), shared in her narratives about how she was able to obtain housing after living in precarious conditions in makeshift houses with her young children. She explained,

*“We wouldn’t rent, we would go ask people if we could stay on their land, and would make a little [makeshift] house, and that’s how we lived. [My children] studied under candles, my children studied, I didn’t have electricity, they would study under candles.”*

After living in many precarious living situations, Jacinta received a house from the government housing agency. This was an important moment in her life because it was the first time, she lived in a house made of solid material. She said,

*“When I came here it was the first time I lived in a house made out of [bricks]. My first night here I cried. I cried a lot because I used to say, ‘one day I’ll have a house made of solid material’.”*

Jacinta recalled,

*“We have this house due to my [work]. This is from the government, this is an “asentamiento”, and we worked to have land, we came here to clean with my son to have some land.”*

She continued to say, *“Now I’ve paid for my title, I paid for it all, I paid for my house. And my children all turned out well, thank God.”* In fact, although Jacinta is not the only participant in this research to have a house granted by a government agency, she is the only one to have a land title. In the next chapter I will explore the government’s role in providing services, such as housing, as well as the issues that many participants have with home titles. In Rocio and Jacinta’s life experience, it is notable how they both associated having a house with a positive upbringing for their children. Showing how for these participants having secure housing was important because it was a safe and comfortable environment where they could raise their children.

#### 5.4.2 Shocks & Housing

In one life experience, shocks adversely impacted a participant’s ability to have a home for her family which negatively impacted her wellbeing. **Liliana** told me that years ago she used to have her own house but had to leave after one of her children died in an accident, without providing more detail. A few years after the tragedy, she obtained a house from the government housing agency. Then, her husband had an accident, and shortly afterwards he left the family, leaving Liliana as a single mother and unable to make her housing payment. She recalled,

*“We really fell behind because of an issue, I had a lot of difficult issues to resolve, because right when we were paying my husband got in an accident and couldn’t walk anymore and all those things. And that was our hardship because we couldn’t pay the house, but God’s blessing is that [the housing agency] gives you that flexibility, you go, we for example did all the paperwork of the hospital, all that, we presented it and all that gave us [some flexibility]. But then what happened, he became a coward, and he left the house and I was*

*left alone to deal with my children and I couldn't do it anymore so, it was a long time that we couldn't pay. So, it was a long time, like 5 years, that I didn't pay for my house, and that's what made me fall behind."*

Liliana's experience highlights how policy intersects with biographical experience, affording her security in spite of the challenge of her husband leaving.

At the time of the research Liliana lived with her three adult children - her son and two daughters - and two granddaughters. All family members slept in the same room of the one-bedroom house. Liliana's dream was to finish paying for her house, but she still had a way to go, which gave her stress and anxiety. She said, *"That's my dream, if it were up to me, I would go tomorrow and pay the whole thing off and I wouldn't have this headache that doesn't let me sleep"*. At the time of the research, Liliana told me she had recently refinanced the house and was paying again, yet due to all the accumulated interest she noted, *"it's almost like paying the whole thing again"*. The last time I interviewed Liliana, she told me that after many years of challenges, she was almost up to date with her payments. However, she did not know when she would be able to pay off the house nor how many payments she had left. Due to this, she considered that her children would be the ones paying off the house instead of her. She said, *"I'm currently in a state where hope is gone, my children carry all the [hope] now, they're the ones who will work hard and pay it off one day."* Liliana's experiences show how different shocks intersected and adversely impacted her ability to have a home, which negatively impacted her wellbeing. Her uncertain housing situation left Liliana in a vulnerable position where she saw no way out for herself and could only hope her children would be able to finish paying for her home.

#### 5.4.3 Aspirations & Housing

When talking about aspirations for the future, most participants mentioned either having their own home or improving their home. For **Elisabeth** (41) and **Nidia** (27), it was important to have a safe and comfortable home for their family. For **Leticia** (34), a house represented independence and progress. For **Jimena** (33), her home was not only a stable place for her children to live but also an investment for the future. She explained that by investing in a house now, she felt that she could better plan for her children's future as they get older. Jimena said,

*"Having my own house is my main dream [...] For my children to have their own home in the future, so we don't have to be moving from house to house. When they're in university, that investment that we're putting down for rent [now], we can be spending for their [tuition]."*

As we closed our conversation Jimena told me, *“when you talk to me about my own house I get goosebumps, because that’s really my biggest dream”*, showing the strong emotional value Jimena’s aspiration of having her own house has in her life. Jimena’s life experience shows the value of housing to her wellbeing by discussing how it will contribute to the stability of her family, as well as her aspirations for children’s education and future.

#### *5.4.4 Summing Up: Housing*

For participants, events related to housing were important because they were related to having a safe and comfortable place for their families. Events related to housing as a wellbeing domain for participants were interconnected with other domains such as income, work, and family. I also observed generational differences due to the fact that older women, such as **Rocio** (47) and **Jacinta** (71), were able to obtain their own homes, and younger participants, such as **Jimena** (33) and **Nidia** (27), discussed how obtaining their own home was an important dream. However, as shown in **Liliana’s** life experience, different shocks intersected and adversely impacted her ability to have a home, which negatively impacted her wellbeing. Her uncertain housing situation left Liliana in a vulnerable position where she saw no way out for herself and could only hope her children would be able to finish paying for her home. Lastly, Jimena’s experience shows the value of housing to her wellbeing by discussing how it will contribute to the stability of her family, as well as her aspirations for children’s education and future.

#### *5.5 Looking at the Future and Difficulty Aspiring*

In this chapter, I included women’s aspirations in relation to different domains of wellbeing, however, I found that in some instances, women found it difficult to think about the future. While some participants had concrete goals and specific areas that they wished to improve, for other participants, thinking about the future was too difficult, due to their state of vulnerability. For example, when I asked **Jazmin** (45) how she would like her life to look like in the next 10 years she responded, *“Oh my God, if I make it [...] I can’t imagine, I swear I can’t even imagine tomorrow.”* Then, she paused for a minute to give it some thought and told me that she hoped her children would be successful and that some areas of her life could improve such as her business and her home. Then she stopped herself and said, *“That’s all, if not my mind will [play tricks on me] [...] That’s it, I can’t ask for much, you know [laughs]”*. The excerpt shows how Jazmin felt that she

should not have too many goals or aspirations and had a difficult time thinking long-term. Similarly, **Liliana** (51) mentioned that she had a hard time setting goals because although she tried to set goals for herself, she could never quite achieve them. She explained, “*we always have goals, we try, but we can’t [reach them].*” The examples of Jazmin and Liliana’s show how difficult it is for many women who live in vulnerability to think about and plan for the future.

### 5.6 Conclusion

In this chapter, I presented how women’s narratives were diverse, complex, and showed trajectories which were dynamic and changing, and revealed ambiguities as well as contradictions. What is more, the analysis of timelines showed the fluidity between domains and the importance taking a life course perspective to understand complex pathways. The richness of the case studies shed light on the subjective understandings of wellbeing and how they were mediated by lifetime experiences. For most participants, it was difficult to identify one key turning point among the frequent changes in their lives, and instead, women revealed gradual changes. Women’s lives were unstable, unpredictable, and participants discussed constantly navigating crises. Women’s unpredictable lives included migration, changes in jobs, household structure, instability of relationships, and uncertain livelihoods. Due to this, women expressed wanting stability, and a “*tranquilo*” life for them and their children.

Moreover, by using a temporal lens, I was also able to identify generational differences amongst participants. Some common life events for participants over age 40, such as rural to urban migration and leaving school early were not experienced by participants under 40. Another advantage of using a lens of the biographical life course I was able to understand how the past and the future interconnected. Due to wellbeing’s dynamic nature, when discussing their timelines, participants interconnected events in the past (and even future aspirational) with the present. This allowed me to engage with, in the words of Østergaard and Thomson (2020) “the past-present-future relationship as a defining characteristic of lived experience” (p.434).

Lastly, women’s timelines shed light on how biographies intersect with multiple structural forces and wider social processes (Brannen, 2012). Most notably, participants’ timelines mentioned aspects such as care duties, gender norms, and patriarchy. Throughout, it was clear that gendered

expectations had an important role in women's lives. Many participants noted how, due to their role as "*supermadres*", it was their role as responsibility to raise and care for their children. Some participants mentioned that it was their partner's preference for women to stay at home, other mentioned how their children preferred the mother instead of the father, and others mentioned how crucial it was for them to work from home so that they could attend to these responsibilities. In addition, participants also discussed the tension between income, working (outside the home) and caring responsibilities, which fit within the concept of caringscapes. This tension resulted in feelings of exhaustion, as well as guilt, for many participants which negatively impacted their wellbeing. I will continue to explore women's complex and dynamic relationship with motherhood and family in the following chapter.

## Chapter 6. Exploring the role of women as a *Supermadres*

### 6.1 Introduction

From the beginning of my PhD journey, and especially during the fieldwork and data analysis stages, I realised that the boundaries between motherhood, family, relationships, and wellbeing, were fuzzy and interconnected. In addition, when I heard women's stories of overcoming adversity and juggling many responsibilities, I thought of them as heroes, characters with superpowers who fight repeatedly to improve their families' lives. This, of course, relates to the concept of "*supermadres*", introduced previously. Women in Latin America have been coined "*supermadres*" ("supermothers"), which describes how women who already live in deprivation also need to juggle responsibilities both in the productive and social sphere, thus feeling overburdened which negatively impacts their wellbeing (Folbre, 1994; Chaney, 2014; Martinez-Restrepo and Ramos-Jaimes, 2017). To make my point clear, I am referring to women as "*supermadres*" not in a romantic sense, but as women who have many responsibilities in the family and work sphere but keep fighting for a better life. In Chapters 4 and 5, above, I presented how family and relationships gave purpose to women and found that women's wellbeing was directly related to how their families were doing. Due to this, I decided to dedicate this entire chapter to exploring the many aspects of wellbeing in relation to family and relationships, using women's life experiences. Specifically, I will present the role of relationships and caringscapes, the shifting and changing multidimensional terrain that comprised women's visions of caring possibilities and obligations in women's understandings of wellbeing. What is more, I found that women's experiences were gendered and interdependent and shaped by those caringscapes. Finally, I will argue that family and relationships were overarching considerations for all aspects of wellbeing and cannot be considered as one of the three dimensions of 3D wellbeing.

### 6.2 Motherhood & Caregiving

Most women related their own wellbeing directly to the wellbeing of their family members, including children, partners, and other kin. Specifically, participants' accounts of wellbeing were related to their roles as caregivers, which is consistent with the cultural and structural context of Latin America and Paraguay, where many women's lives are dedicated to attending to their family's needs (Martinez Restrepo, 2017; Schuster, 2015). One participant, **Nancy**, was an outlier because

she was the only participant in this research who did not have children. Due to this, she told me repeatedly that her life was not very interesting because she did not have children. She noted,

*“[Interviewer: I’d like to hear more about your life history, that I’m sure is very interesting] Not really, because I didn’t even have children, so it’s like, it’s not [Interviewer: What else?] What else can I tell you? Like I said, I don’t have that much to tell because I don’t even have children, children give you a lot to talk about.”*

This excerpt shows how, culturally, women’s role in society was to be a mother, and women who did not fit that role did not feel significant. However, family was still significant to Nancy, who frequently mentioned how having positive relationships with her partner, siblings, and nephews contributed to her wellbeing.

Many participants became mothers unexpectedly, becoming pregnant at an early age. Early pregnancy<sup>34</sup> is a common phenomenon in Paraguay. In fact, Paraguay is the country with the highest level of child and teen pregnancy in the region<sup>35</sup> (UNFPA, 2017; World Bank, 2020a). Discussions about early pregnancy were ambiguous and complex, participants acknowledged that it was a positive experience when their children were born, however, they also noted it was challenging to become a mother at such a young age. Most participants did not directly mention relationships in their teenage years but did mention the lack of support. In most experiences, the biological fathers of participants’ children did not support women with pregnancy and childrearing.

Some participants attributed early pregnancy to the fact that they left their homes to work as adolescents and lacked adult guidance and education. **Marina** (54), for example, described her move to the city to start work at a young age as negative because shortly after, she became pregnant. Similarly, **Elisabeth** (41), who became pregnant in her adolescence, explained how this was a very challenging event due to her ignorance and lack of support at that time,

*“I was a little girl who didn’t know anything. No one had ever told me anything about sexual education, back then no one [talked about those things]. The nuns only talked to us about abortion, that it’s a mortal sin, that was what traumatised me a little bit [...] luckily the baby was born ok, healthy.”*

Elisabeth noted that after becoming pregnant, her boyfriend did not want to get married because he had not finished secondary school. So, Elisabeth then decided to raise the baby on her own.

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<sup>34</sup> The World Health Organisation considers early pregnancy as adolescent pregnancies (pregnancies between the age of 15-19) and child pregnancies (pregnancies between the ages of 10-14) (World Health Organization, 2022).

<sup>35</sup> In Paraguay, every day two babies are born to girls between the ages of 10 and 14 and 54 babies are born to adolescents aged 15-19 (UNFPA, 2017).

Years later, Elisabeth regretted not involving her son's biological father in her son's life. She told me,

*"I told him, I'll just have the baby myself, and that's what I did. I didn't even let him [legally] recognise [the baby]. Can you imagine? I made a mistake in the end. Because of my pride I didn't let him be recognised."*

She continued to say,

*"It was negative, I made a mistake, because I should've let him recognise him [the baby] so that I could always ask for his help. He was also very sly and did not look for me, nor did he [say], 'I need to recognise my son'. Nothing. So [...] I recognised him [her child] as a single mother."*

Moreover, Elisabeth was punished and blamed by her family members for getting pregnant.

Elisabeth recounted her experience with her mother after her son was born. She recalled,

*"We were going through a very difficult time because I didn't work, my mother was supporting us and my mother started to tell me, 'you have to do something to support your son, you're the one who wanted one.'"*

Similarly, **Rocio** (47) told me about becoming pregnant at age 17 and dealing with her mother's lack of support.

*"[Interviewer: You told me that you got pregnant at 17 and you were a single mother. How was that experience for you?] It was hard in the early days. [Interviewer: Because you were alone?] Because I was alone and my mother did not want to support me, because she got mad at me."*

Discussions of early pregnancy shed light on women's lack of education and information related to family planning, as well as the lack of support women faced from male partners and family members.

Many women who became pregnant at a young age were initially single mothers, although this often changed over time. Many participants characterised single motherhood as a challenge due to the lack of resources and the burden of responsibility and care for children. I observed that single motherhood was not static, instead, it was temporal and dynamic. To illustrate, some participants had always been single mothers, while others had been single mothers with their first children and had then gotten married. In other cases, participants became single mothers after stable relationships, while others noted they had always been single mothers. This relates to the concept of caringscapes because it shows how caring responsibilities and obligations are shifting and multidimensional during women's lives.



Some participants were single mothers for a portion of their lives (with their first children, for example) and then married. To illustrate, **Marina** (54) had two children as a single mother and then met her current partner. Similarly, **Rocio** (47) met her current partner when her eldest son was two years old and subsequently had additional children. **Elisabeth** (41) was a single mother with her first son and then had two additional children with her current partner. Although Elisabeth had a stable relationship with her partner, she continued to wrestle with guilt over 20 years later about being a single mother earlier in her life. She explained,

*"I made some mistakes that were too big, like being a single mom, but the priest told me, 'these are the circumstances that we have to deal with, it's not your fault, it's not a sin, you didn't kill anyone, you didn't do anything serious', and in the end, they're normal things, normal things that happened to me because of my innocence and my ignorance, and they happened."*

Elisabeth's excerpt also highlights the tension between normative patterns of family structure in Paraguay and Catholicism and cultural norms. In other cases, participants became single mothers after a stable relationship with their partners. **Liliana** (51), for example, had been with her partner for many years before they separated, which caused financial hardship. She recalled, *"I was in a relationship for a long time, but now I'm separated."* She continued to say, *"he [became] a coward and left the house, and I was left alone here to figure things out with my children, and I couldn't do anything else."*

Lastly, other participants recalled that they had always been single mothers. For example, **Jacinta** (71) had four children and raised them all as a single mother. She recalled, *"I suffered a lot, I suffered because I got my children ahead on my own."* She continued to say, *"I started working so they could study, because their father didn't give me anything."* She explained how her children's biological father had not supported her and how their relationship was fraught. She noted,

*"[Interviewer: Did you raise [your children] on your own?] Yes [Interviewer: So, you were a single mother?] Single mother [Interviewer: And the father never helped you?] That's why I kicked him out last time [Interviewer: He came?] He wanted to put things in order, but this is my house. I got everything thanks to my fighting. It's been 27 years, I got everything by fighting. I will never forget, we fought a lot to have this, everything we have, because I used to live in a little house, I used to ask for land and I would make a little house, that's how I lived with my children while they studied, by candle."*

During our conversations, Jacinta mentioned various times how proud she felt about all she had accomplished as a single mother. Jacinta was proud that despite their precarious living condition, she was still able to provide for her children and frequently mentioned that she supported them through all their studies and that they were able to become professionals.

*“[Interviewer: Then you had your second, third, and fourth children, were those experiences positive or negative?] Yes, with [all my children] it was positive! Like I tell my son and them, you have to be proud of your mother! I know what it is [to fight] [Interviewer: And do you feel proud of yourself?] Yes, I am proud of them.”*

Although Jacinta had a hard time saying she was proud of herself, as evidenced in this excerpt, she repeatedly mentioned how hard she worked on her own to help her children get ahead. Jacinta’s experience is also an example of the fuzzy boundaries around single motherhood. Even though Jacinta noted she had four children with the same partner, she also said she had always been a single mother, showing how, for many, there was fluidity in family structure.

### **6.3 Care Duties & Children’s Wellbeing in Different Stages of Motherhood**

Most participants related their wellbeing directly to their children and defined their own wellbeing as their children doing well. For many, being well meant giving their children opportunities and a better life than they had. Most participants’ biggest aspiration was giving their children a better life, which represented hope from breaking intergenerational cycles of poverty. This is relevant in the context of these women’s difficult lives due to poverty and lack of opportunities. Many participants shared negative experiences in their childhood and how the loss of parental support created difficulties for them. **Liliana**, for example, recounted,

*“[Interviewer: Would you say your childhood was positive or negative?] Very negative. [Interviewer: Very negative? Why?] Because I grew up without a mother or a father, I went through a lot of things.”*

Other participants, such as **Paola** and **Nancy**, had mixed feelings about their childhood because they did not grow up with their parents and instead were cared for by their grandparents.

Participants noted how their care responsibilities and relationships with their children shifted and evolved through time. In this section, I will present participants’ life experiences as mothers in three stages: young children, adolescence, and adult children. I have included participants’ reflections at the time of the research, as well as the reflections of participants’ looking back.

Participants with younger children expressed how important it was for their children to study, do well in school, and be on the “right path”. To illustrate, **Jazmin** (45) noted that she was doing well in the family domain because her children were doing well in school. She explained, *“My children are doing well, they are very happy, and I am happy because they are getting good grades.”* **Elisabeth**

(41) said that being well as a family meant, *“supporting your children, giving them everything they need, especially if they are young, leading them in the right direction.”*

Women also expressed how important it was to spend quality time with their young children, and many felt guilty for not being able to do so. For instance, **Leticia** (34) recalled feeling guilty about returning to work outside the home after staying with her son at home for two years. She was conflicted about the decision to return to work because it meant spending less time with her son at a critical age. She explained,

*“Now I’m back working, I left with him [son] on my [maternity] leave and I stayed with him two years at home, and now in 2018 I returned to my work [...] [Interviewer: How was it? Did you enjoy it at home?] Yes, very much [Interviewer: You enjoyed it?] The truth is, now I feel like I no longer spend time with him, that is what I told my husband last time, ‘damn it tires me’, and he [son] tells me ‘you’re going back to work again?’. They’re moments, they are stages that will not return.”*

**Elisabeth** also struggled with leaving her eight-year-old daughter to work at her beauty parlour. In fact, she was considering leaving her job so that she could spend more time with her daughter, as she explained in the following excerpt,

*“Every day she tells me, ‘Oh mom, Monday again, I didn’t want it to be Monday, because once again you go to work and leave me here at home alone!’ But [I tell her] ‘you are not alone, you are with your dad, your dad is there, whatever you want, you ask him’. [...] but she keeps claiming that I am the one who left her, that she doesn’t want me to work [...] that’s my constant struggle with her and that is what makes me think that the mother is indispensable.”*

In other cases, women mentioned difficult circumstances in the past which happened when their children were young. For example, **Elisabeth** (41) recounted a difficult event in her life. As noted above, Elisabeth was a single mother with her eldest son. Due to her economic responsibility to provide for her son Elisabeth left him with her mother and moved to the city to find work.

However, a few years later when she became economically stable something unexpected happen, her mother did not want to return her son. She explained,

*“When he turned 5 years old, I told my mother that I wanted to bring him [to the city] to go to school, and my mother told me ‘your son is not yours anymore, he is mine now, because you left him, you go make your own life, if you are going to get a partner just leave the child with me’. I fought with my mother, and I told her, ‘give me 15 days I’m going to take him on vacation’ and I brought him and I never took him again. My son has been with me ever since.”*

Participants' roles as mothers shifted as their children entered adolescence and adulthood. Participants discussed worrying about their teenage children with respect to discipline and concerns about them studying and finding stable jobs. To illustrate, **Elisabeth** mentioned how she spent a lot of time and energy worrying about her sons when they were teenagers. She believed that part of the reason why her sons turned out well and were successful was because she was strict and disciplined them. She proudly stated,

*"[My children] all turned out well, none of my children are drunks, drug addicts, or anything like that, because I see families that are better off than us and fell into that. Sometimes they tell me 'Mom, you are difficult' and [I say] 'Son, thanks to me being difficult you did not turn out to be drunks or drug addicts.'"*

Elisabeth also noted how she carried the burden of worrying about children and that her husband did not get involved in disciplining her sons. She explained,

*"Their father doesn't even talk, he doesn't say anything, I'm the one who fights with them, their dad sometimes says, 'oh just leave them, they're boys, they have to learn what life is'. The eldest one, I left him a little bit, and he almost went on the wayside. I had to fight a lot with him, for him to keep studying".*

This excerpt shows how, for Elisabeth, care duties went beyond time and energy spent and also entailed emotional labour (Dean, Churchill and Ruppanner, 2022).

For **Rocio**, worries about her two teenage children, a girl and a boy, were constantly on her mind during the period of this research. In relation to her daughter, she noted that she did not allow her teenage daughter to leave the house because she worried too much. She explained,

*"I'm afraid of the ugly things out there, my daughter for example doesn't go out, she's not allowed to sleep elsewhere. I'm not old school, but I try to do things as I was [raised] [...] I'm on the street a lot, and I see the way things are."*

In subsequent conversations, **Rocio** explained how she also worried that her daughter was not in tertiary education after finishing secondary school. Instead, her daughter worked with Rocio's eldest son as a nanny helping to care for her nephews. Rocio noted that although her daughter wanted to study, her brother did not want her to because he needed her to stay home to take care of the children because both he and his wife worked outside the home. She recalled,

*"Lately there's been a little problem, because I told her [daughter], 'Well, you can study something in the afternoon' I told her. She would like to study she told me [...] I told her 'Well I'll I'm going to find you a computer [course]' but the problem is that her brother started [saying] 'At what time is she going to study? Because who are [my children] going to stay with? [...] I told him 'Look, son, you also have to give your sister a little time', I tell him, 'She has to study something!' [...] [Interviewer: Right] But he wants to have his sister there, the other one is very quiet, not to say foolish."*

Although Rocio sternly told her son that he needed to allow his sister to study, she also put some of the blame on her daughter. This excerpt shows not only the double standard women face, where the teenage daughter was supposed to help her family but also needed to advocate for herself. In addition, Rocio's excerpt also shows how gender norms and patriarchy are perpetuated in families and passed down from mother to daughter.

In addition to worrying about her teenage daughter, **Rocio** also noted that she was having trouble with her teenage son. Due to this, there had been conflict in her home, which negatively impacted her wellbeing. She noted that her son had been acting rebelliously since he started a new job and had new friends, whom Rocio characterised as a bad influence. She recalled,

*"I'm feeling desperate now because of my son. I don't know what I'm going to do, because I need help [...] That's my worry now, my headache [...] What should I do? Because I do not know where to go, who to talk to. Should go to a psychologist? To be a parent, should we be studying for this? Because my husband and I feel very lost."*

Rocio noted that although she was feeling overwhelmed, she did not want to burden people with her problems and that she was the only person who could solve the problem. She continued to say,

*"I'm feeling a little, let's say a little stressed. But I know in my mind that I will get through this, because it's only up to me. Because I am the one who has to overcome this, no one else."*

In addition to the emotional stress, the incidents involving her son had financial repercussions. Rocio had been working less because she had been spending her working hours visiting her son's teachers and his place of work to figure out the problem. Moreover, Rocio noted that she was in charge of discipline in her house, and sometimes felt frustrated that her husband did not seem to worry about her son as she did. However, due to her son's rebellious phase, Rocio's husband started to lose his patience. Rocio told me that her husband said, *"if you don't discipline him, I will, because I'm getting tired of the way he's been acting."* The excerpt how the mother has burden of disciplining her children, and how if children misbehave, the fault is on the mother.

Regarding adult children, participants aspired that their children had better lives than they had, including having a university education and obtaining good jobs. When evaluating their wellbeing, some participants noted that they were doing well because their adult children had studied, had stable jobs, or were economically independent. **Valeria**, for example, noted that wellbeing meant her daughter being able to from university and having more professional opportunities than she had.

In **Elisabeth's** experience, she mentioned she would be well if her sons, "*[had] a good salary, their own home, car, they have their own families, and [are] happy*". Elisabeth was proud that her sons went to university and had good, stable jobs. She noted, "*I'm very proud of my sons because they are hard workers, they're not lazy.*" Elisabeth helped to pay for her sons' university studies and continued to support them financially after they graduated. The fact that her sons were still financially dependent on her frustrated her at times because she wished she could use this income to invest in her own business. She explained,

*"I can't grow because of them [sons] because everything is 'mom this and mom that'. Now that they have their salaries they buy their own cars, take their girlfriends out, and I'm still fighting here and I can't grow, but someday I'll grow."*

She continued to tell me that people often told her that her sons should be self-sufficient, but she explained she could not discontinue her financial support because young men are less mature. She recalled,

*"Everybody tells me, 'Your sons are older, your sons must take care of you!' But it's impossible when boys have girlfriends it's different [...] [Young men] are partiers! The youngest one doesn't have a girlfriend, but he wants to travel, he comes and says, 'I bought a trip, I'm going on vacation to Rio', 'it's ok' I said, 'after your graduation, enjoy now that you don't have a girlfriend, go explore new places'. And now I'm the one paying for [daughter] because my husband doesn't work anymore."*

Although most participants felt hopeful about their adult children and believed they would have better lives than they did, some participants, like **Jacinta** and **Liliana**, were worried about the lack of opportunities for their adult daughters, who were single mothers. **Jacinta** had four children but worried most about her adult daughter who lived with her. She noted, "*I am proud of them [children], just that they haven't all left me yet, the girl is still with me*". Jacinta's daughter was a single mother and was having a hard time getting by. She noted,

*"My daughter studied to be an accounting assistant, but she does everything because she has six children without a father. Now she is working as a maid [...] Their [grandchildren's] father helps them very little; the money is nothing."*

Although Jacinta was proud of what she has been able to achieve as a single mother, at times, it seemed she perpetuated damaging narratives of single mothers. On one occasion, she said to me, "*Yes. I was a single mother. Single mothers today are different*", with a critical tone. It was unclear whether she was referring to her daughter or other single mothers in her neighbourhood.

**Liliana's** eldest daughter had moved back into Liliana's home after separating from her partner. Although Liliana was happy she could help her daughter and see her granddaughters daily, she

acknowledged the situation was unfavourable. Liliana noted, *"She was left alone with her two daughters and came to live with us again because she can't on her own"*. Liliana continued to explain,

*"Poor girl, [she] came with her two girls, she couldn't take it anymore, she got into university [...] but she left everything, she couldn't take it anymore. Now she is alone because the girls' father doesn't do anything for the girls. As I say to them, 'My God, doesn't he feel sorry for those two beautiful girls?' If it was me, I would face the world for them, I tell them. And that's what's happening with her. She is alone. [Interviewer: And her, why did she leave university?] Because of the pregnancy, because she got pregnant at the time when she was in university, she got pregnant [...] [Interviewer: What a pity] It's difficult alone."*

Due to their adult daughters moving in with them, Liliana and Jacinta's care duties extended to their grandchildren. **Liliana** explained that she cared for her two grandchildren while her daughter looked for work. She said,

*"My hope is my children, they are my hope that they get ahead and find a good job, my girl who has two daughters, that she can work well and help me, and I help her with the girls, that's our deal now."*

Jacinta's care responsibilities were more extensive. In total, she cared for eight grandchildren, her daughter's six children as well as two additional grandchildren (ages ranging from 2-15) who lived with her. She characterised her current day to day life as full of care duties, she stated,

*"I'm here in the house [all day] cooking, and everything. I'm the housekeeper [laughs], I do everything, child rearing and everything [laughs]"*.

Jacinta explained that two of her grandchildren lived with her because they were orphans. When I asked her more for details about these children, she explained that they were her son's children and that their mother died had died. She explained,

*"So now I'm fighting for them, because two are orphans, because they don't have a mother anymore, and you know the father isn't like the mother, so [it will have to be] the grandmother [who raises them] [...] You know how it is when the father remarries, it's different."*

Jacinta noted that her biggest dream was for her grandchildren to get a good education. She explained, *"they're very intelligent and they want to study, I have to work hard for them."* Jacinta recalled that just like she had worked hard her entire life for her children, she planned to do the same for her grandchildren. Due to her financial problems, Jacinta often worried about their wellbeing. She said,

*"You see that around here there are a lot of poor people that look for food and those things, I don't want that to happen to my grandchildren, you know, that's why I try hard, I do anything with my daughter to give them food and make sure they don't need anything."*

Other participants, such as **Valeria**, also cared for their grandchildren because her daughter was still in university and her husband had passed away in an accident. Valeria's example also shows how shocks contribute to increased care responsibilities for many.

Care duties did not strictly relate to participants' children and grandchildren, participants also mentioned care responsibilities for ageing parents. To illustrate, one participant, **Jimena** (33), noted,

*"I have my father and my mother, who are [living] with me, they are 81 years old, I also must take care of them, and I have my children [as well]. I do everything for them."*

Further, **Valeria** (56) noted that in addition to her grandchildren, she also cared for her ageing mother. She noted how she took on the role of carer for her mother because she was her only daughter. Further, these care responsibilities led her to leave a stable job that she enjoyed. Valeria explained,

*"Because my brother was alone and my mother, and I had to take care of my mother and my grandson, that's why I left that job. Until now I feel sad about it. 18 years [at a job] is a long time, a lot of time together, it was a good atmosphere. I was a hard worker and they appreciated me, even now they say they want me to go at least part time, but (.)"*

In a subsequent conversation, Valeria mentioned this experience again, showing how it was an important life event for her. She recalled,

*[Interviewer: How do you feel about your situation now?] Well, "tranquilo"<sup>36</sup>, what are we going to do? [Interviewer: "Tranquilo"] What are we going to do, right? Why are we going to (. ) sometimes it is not pleasant, but (. ) I worked, then I left and sometimes I think about going back, but it's difficult to leave my mother and [grandson's name], and my daughter too."*

#### **6.4 Positive Relationships with Family & Partners**

Having quality relationships with their family was an essential component of wellbeing for participants. Participants defined quality relationships as having positive relationships that triggered a sense of love and happiness in their homes and being on good terms with family members. For participants, being well with their families meant having positive relationships that triggered a sense of love, happiness, and satisfaction. As **Paola** explained when defining wellbeing, *"you have to be happy in your home, with your family"*. When I asked her to evaluate her current state of wellbeing she responded, *"My family makes me happy [...] Good, I feel happy with what I*

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<sup>36</sup> Tranquilo "reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems" (Huovinen and Blackmore, 2016, p. 181).



*have.*" In addition, she acknowledged how having a positive relationship with her family affected other areas of wellbeing. She explained, *"If we don't have love and we're not happy, we won't have health, and we won't be happy with our family."* Paola's experience again shows the interconnection between wellbeing domains and how for many participants, relationality and their families were an overarching theme.

Many women noted that an essential part of being well with one's family was having a positive relationship with their partner, and most participants noted that they were in good relationships. Participants mentioned critical elements of positive relationships with their partners, such as good communication, mutual respect, and love. **Leticia**, for example, defined having a good family relationship as *"having daily conversations"*, she explained, *"I talk a lot to my husband, we try to teach [son] that it is important to talk about things."* Other participants noted how their marriage was the bedrock of stable family life. **Marina** explained, *"[if] you have a good marriage, with that you're ok with your family."* Similarly, **Rocio** noted when describing what she needed to be well with her family, *"First of all to have a marriage, a great marriage, with that we are already doing well for our family vicariously."* Moreover, **Nidia** mentioned that she was doing well in her family life because she had a good relationship with her partner. She appreciated being able to work with her husband and noted that this strengthened her relationship. Nidia recalled, *"He's my helper, [we're a good team], of course, that's the only way we're going to [achieve our goals]"* These experiences show how participants equated positive relationships with their partners as being well with their families.

Conversely, participants frequently mentioned that the absence of conflict in the family was important for wellbeing. To illustrate, **Paola** also identified lacking conflict as an essential tenet of being well as a family. When I asked her what being well with family meant, she said, *"Not having family conflict, for example, when I argue with my husband, I'm not very happy [laughs]"* Similarly, **Rocio** defined being well with her family as *"not fighting and loving each other. Having a lot of trust, I trust in my husband a lot, and he trusts in me, I want my children to trust in me."* In addition, some participants referred to lacking conflict as being on good terms. **Jazmin**, for example, when defining what it meant to be well with her family, said, *"being [on good terms] with them [...] with everyone, my children, my husband. With my extended family too, not being in a fight. Because any*

*discussion ruins it [...] Not fighting, disagreeing.*" These cases show how, for participants, quality relationships were also equated with lacking conflict in their family lives.

### **6.5 Conclusion**

In this chapter, I explored the role of women as "*supermadres*" and their caringscapes. It was apparent how women took upon themselves the role of solving everybody's problems, and that their care duties extended not only beyond their homes but also to various generations. One of the most frequent mentions of family in participants' lives were their roles as carers. Throughout, women expressed how care implied only time, but also the mental load, which consisted of cognitive labour (thinking, planning, organising) and also emotional labour (caring, worrying) (Daminger, 2019; Dean, Churchill and Ruppanner, 2022).

Moreover, participants noted the role of caringscapes and the shifting and changing multidimensional terrain that comprised women's vision of caring possibilities and obligations (McKie, Gregory and Bowlby, 2004). Temporality and generation both had an important role in understanding women's shifting responsibilities, as well as how different domains were important in different periods of time. Women recalled how their roles within their families shifted through their lives and their roles as mothers shifted from pregnancy, to raising younger children, adolescent children, and up to caring for adult children. Participants also identified how different shocks in their lives (or in the lives of people close to them) resulted in increased care responsibilities.

Further, women's care roles included not only children, but also grandchildren and ageing parents, which is related to the concept of pivot generation in European literature, where women over 50 have the double responsibility of care (Mooney, Statham and Simon, 2002; Brannen, 2003, 2006). In other words, they were not only "*supermadres*", but also had prominent and vital roles as grandmothers and daughters.

A common theme in this chapter was single motherhood, where women's experiences showed how fluid and fuzzy the concept was. Firstly, women defined and conceptualised the term in different ways (May, 2010; Motapanyane, 2016). To illustrate, some participants described being a single

mother as an empowering act that showed them how strong they really were and proudly discussed how they progressed on their own, and for others, single motherhood was described as a struggle and as abandonment. Moreover, single motherhood was fluid and dynamic (May, 2010; Morgan, 2011). Women's experiences of single motherhood were not static, and rather, changed throughout time.

Finally, concerning structural forces and broader social processes, I also showed how these affected women's life trajectories regarding their families and their relationships. Again, the case-based approach allowed me to observe how structure and biography intersect (Brannen, 2012). Lack of support was a prominent theme throughout women's lives. Women recalled lacking support from their childhood, into early pregnancy, single motherhood, as well as overburdened by child rearing and caring for adult children. Further, patriarchy was especially apparent, including participants themselves at times reproducing gender bias in their own homes by favouring sons, as well as carrying the burden themselves. This was seen in participants perpetuating differences between their sons and daughters (Rocio), caring for grandchildren because the father did not take responsibility (Jacinta), and fathers generally not participating in childrearing and disciplining their children (Elisabeth, Rocio). In addition, in the experiences of Jacinta and Liliana's daughters as single mothers, it is apparent how the constraints women feel as lone mothers continue to the next generation of women.

## Chapter 7. Women's Wellbeing & Poverty Interventions

### 7.1 Introduction

This fourth and final empirical chapter explores the relationship between women's wellbeing and poverty interventions, aiming to understand how poverty interventions fit within women's understandings of wellbeing. This chapter is not an evaluation of Fundación Paraguaya's work, instead, I seek to understand how FP interventions interact with women's daily lives and biographies over time, and shape women's wellbeing, from their point of view. Although the focus of this chapter is women's experiences with FP's interventions, I also include women's experiences with government programming related to the wellbeing domains that they highlighted as being important in their lives. I have included participants' life experiences in relation to government programming because FP operates within a wider structural context of government policy and programming, so I will also reflect on the government's role in areas of wellbeing where relevant. In addition, I sought to understand political and social barriers, as well as the resources on which people draw on. In this chapter, I present the wellbeing domains that were most present when women discussed their experiences with FP: income and work, housing, and health.

As presented previously in Chapter 1, Fundación Paraguaya (FP) is a large local NGO whose mission is to eliminate poverty in Paraguay. All participants of this research participated in two FP interventions: microfinance and the Poverty Stoplight. Through microfinance, women participated in village banking groups where they received small loans for their businesses. Being part of a group meant that all group members acted as guarantors for each other's loans. Participants were also part of the Poverty Stoplight programme, a poverty elimination programme that uses 50 multidimensional poverty indicators<sup>37</sup>, self-diagnosis, and support from a mentor, aiming to help families in overcoming poverty with personalised plans. When referring to Fundación Paraguaya, most participants discussed work and income. To a lesser degree, housing and health were also mentioned.

This chapter is structured in the following way. First, in section 7.2 I address participants' dynamic relationship with Fundación Paraguaya. Then, I look at three domains of wellbeing in which participants noted that FP and/or the government intersected with their wellbeing: income & work

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<sup>37</sup> A list of the Poverty Stoplight's 50 indicators can be found in Appendix 1.

(section 7.3), housing (section 7.4), and health (section 7.5). Section 7.6 shows participants' experiences with FP programming while section 7.7 offers participants' recommendations in relation to the Poverty Stoplight intervention. Lastly, section 8.7, offers the chapter's conclusion.

## ***7.2 Dynamic Relationship with FP***

My original sample consisted of 10 programme participants (Group A). During the duration of my research, eight out of ten of them left FP programming. As discussed in Chapters 1 and 3, I continued working with these participants to understand what wellbeing meant for them, in addition to understanding why participants left FP, and the ways in which FP's programming supported or constrained wellbeing.

In addition, since I was interested in understanding the lives of women who participated in FP's programming which was no longer possible with the majority of participants from Group A, I decided to include six additional participants to my sample (Group B<sup>38</sup>) who were participants who had successfully finished FP's Poverty Stoplight programme<sup>39</sup>. Nevertheless, I continued working with all 16 participants for the duration of the research. Having a biographical view allowed me to observe interesting things in both Group A and B, see Table 5, below.

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<sup>38</sup> Participants from Group B were included in this research in January 2019

<sup>39</sup> For more details refer to section 1.4 and section 3.4.1

Table 5. Participants' Relationship with FP														
		Participant Name	2018						2019					
			May	Jun	Jul	Aug-Sep	Oct-Nov	Dec	Jan	Feb	Mar	Apr-May	Jun-Jul	Aug
Group A	1	Leticia												
	2	Romina												
	3	Sandra												
	4	Nidia				*								
	5	Liliana												
	6	Jacinta												
	7	Elisabeth												
	8	Rocio							*					
	9	Valeria												
	10	Ana												
Group B	11	Jazmin												
	12	Marina												
	13	Paola												
	14	Jimena												
	15	Beatriz												
	16	Nancy												
Grey box= FP client * Changed group														

Table 5 shows that participants' engagement with FP was dynamic, portrayed by grey and white boxes, where grey means that participants were part of FP interventions, and the white boxes means they were no longer an FP client, and the asterisk means participants changed village banking groups.

As shown in the table above, some participants entered and left FP during the time of my research, while others changed their village banking groups, and other women remained, uninterrupted, as part of FP interventions. Specifically, in Group A, eight participants, out of ten, left FP during the period of this research. Two participants remained FP clients for the duration of research; other participants, such as Leticia and Rocio, left and returned; other participants, such as Nidia and Rocio, changed groups; while others left FP permanently, such as Sandra, Liliana, Jacinta, Elisabeth, Valeria, Ana, Paola, and Jimena. Moreover, I observed how in Group B, there were also changes in

status with participants who had been in FP for over a year and had a more stable relationship. Two participants out of six left FP programming during this research period.

In the following sections, I will present different women's life experiences in different wellbeing domains and in relation to FP and government programming. The objective is to show the dynamic nature of interventions in respect of how women experienced wellbeing. In addition, I present some of the reasons of why participants left FP, changed groups, and returned to FP, as well as argue for a biographical life course lens in programming and policy.

### **7.3 Income & Work**

As has been shown in the previous chapters, income and work were important domains of wellbeing for participants. In this section, I present participants' life experiences related to these domains in relation to FP. Specifically, I present experiences in relation to access to microcredit; changes in loans group and leaving FP; and training related to income and work. On one hand, in a context of precarity and unpredictability, some participants noted that FP, specifically their FP loan, gave them stability, as well as an avenue to improve their income. On the other hand, other participants had problems with their FP loans and other debt outside FP which negatively impacted their wellbeing.

#### *7.3.1 Positive Experiences with Microcredit*

The main advantage participants shared regarding working with FP was the microcredit loan to invest in their businesses, which helped them improve their income and their wellbeing. **Jimena**, for example, who used her FP loan to invest in her beauty parlour, noted that she was able to improve her income. She explained,

*"As I say, every loan that I take, for example, I invest, I invest in the store and every day I see more progress in my business [...] [It helps me] progress. To progress."*

This quote illustrates how Jimena associated her business's progress with her own personal progress.

Similarly, **Nidia** noted how the FP microfinance loan allowed her to invest in her new event planning business. She explained,

*"The money from the Foundation helps a lot, it's not much, but it helps, because you can only do things with big sums of money. For example, this round that we took out money I invested everything in mugs, cups, tea sets, little plates, and it all adds up, and I could only do it with that money."*

**Marina** also noted that FP's loan helped her with her business which sold home items,

*"[Interviewer: How does the Foundation help you?] It helps me a lot in my business, as I say, thanks to this Foundation I am like this [doing well], because each month I can stock up."*

Lastly, **Romina** told me how her group had been growing their loan amount steadily in the past years which helped her invest in her business. She explained, *"We started with a loan of only [\$100] [...] Thanks to my loan with the Foundation I could build my kiosk."*

Participants also noted that FP's loans helped them invest in their business which allowed them to contribute to their household finances and help them support their families. **Jazmin**, who sold foodstuffs in bulk, noted that her loan from FP helped her invest in her business and support her family. She said,

*[Interviewer: How does the Foundation help you?] Well, (.) to work [Interviewer: To work.] It gives me money to work and to survive. Also, so I can help my husband. Because it's for us, for us women, not for [men]."*

Jazmin's reflection pointed out how her loan allowed her to contribute financially to the household, as well as acknowledging how FP's loans targeted women. Similarly, when I asked **Marina** whether FP helped her with her wellbeing she responded,

*"Yes, and through [FP], I have this job to help my husband, because he earns a minimum salary. And you can't do anything with a minimum salary nowadays, so when I withdraw money from [FP] I already [invest it] [...] then, every day I get my daily bread from here [my store]."*

Many participants also noted that FP gave them access to credit that they would not be able to find elsewhere. This was due to many factors, including their role as informal workers, as well as many participants' status being "blacklisted" because they were on the national debtor list<sup>40</sup>. When I asked **Jazmin** about her loan, she expressed that she was grateful for the ease of credit. She explained,

*"Yes [the loan] does help me, and because [...] how am I going to explain? With giving me credit, because in other places they don't give you [credit] just like that [...] so [at FP] they give you the credit easily."*

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<sup>40</sup> In Paraguay, the national debtor list is called IMFORCOMF. If a person has an outstanding debt they are placed on this list and once they pay off the debt and interest, they are taken off the list. It is considered a "blacklist" because being on the list has many negative repercussions, including not being able to take out loans and in some cases access formal employment (Schuster, 2014; ABC Color, 2016).



**Nidia** also acknowledged that it was challenging to take out loans from other places because she was on the debtor list. When I asked Nidia about how she felt about FP she responded, *"I, for example, I like [FP] a lot because of the issue that, at least in my case, because of the issue of [debtor list] that helps you with the issue of money."* She continued to say,

*"I like it [FP], I love it, because as I say, it helps us women to work, with the money they lend us, it's great. Because nowadays, to find a large amount of money it's difficult, and with a lot of money you can work."*

Similarly, **Marina** noted that she appreciated FP's loan because she knew that, as an informal worker, it would be difficult to get a loan elsewhere. She explained,

*"There are a lot of people who need [a loan], who really need it. And who is going to give them that support? Who is going to give them that loan straight away? That's why I take care of this [money], I take care of it, because if I go to a bank to ask for [\$1,000] they will never give it to me, never. That's why we always have these meetings with the group, to take care of [the money]"*

Marina's comment acknowledges her dependency and lack of options, which is why it was important for her and her group to be careful with their FP loan. Further, **Leticia** was appreciative that FP gave out loans to hardworking informal workers, like her mother, who was a street vendor, and who could not take out loans from other places. She explained,

*"I am satisfied with what the Fundación gives. I can get loans from other places, but there are others who are on the [debtor list], for example, and the Fundación still gives them [loans]. They help women a lot, they are very good [...] In my group, they are all women who sell things in [the streets], right, and let's say they are people who are out in the cold, in the heat, selling things to be able to take some food to their homes."*

Participants also noted that another benefit of working with FP was that their loans had low interest. When I asked **Nancy** whether her FP loan helped her business she responded,

*"Of course, absolutely it helps, and I want them to help me even more. Now [the loan] is little, I want it to be larger. Yes, it helps, I don't complain. Their interest is not very high, it's all good, I couldn't think of anything to complain about."*

Similarly, when I asked **Romina** what benefits she saw from working with FP she responded that she saw many benefits, but the primary benefit was the low interest rate.

### 7.3.2 Negative Experiences with Microcredit

Other participants had negative experiences with FP's loan which constrained their wellbeing. The most common concerns were repayment issues within women's village banking groups. I observed that participants who were first time borrowers at FP (group A) many times joined groups with strangers and faced much frustration when group members did not pay their share. In these

experiences, the entire group had responsibility to pay the collective loan, and if they were not able to, the entire group was put on the national debtor list. I noticed that participants who were first-time borrowers did not seem to fully understand or agree with the concept of being a guarantor for others and were upset at this mode of organisation. These participants did not feel it was fair that they had to find ways to pay for group members' unpaid loans. To illustrate, **Jacinta** joined FP but left within the month. She recalled her experience was negative because she paid her part, but the rest of her group did not. She said,

*"I am angry with them [FP], around here, they [group] don't pay, it's not fair [...] There are many who do not pay, I already paid all 14 instalments and many do not pay [...] They don't pay and it's not fair [...] One lady is making hamburgers to be able to pay for the others [...] I already paid her everything, that's what I have, [because] when I owe too much I worry."*

Jacinta noted that the only person she knew in the group was her daughter and that there was a lack of cooperation in the group. She continued to say that she never heard from FP or her group members again,

*"No, I never [heard anything] again, I left, I paid everything, and I left. I don't know my status [with FP], because they told me that even if you pay everything and if others don't pay, you still get on [the debtor list]. That's what I never found out. I do not want to find out later because even if they tell me that I am on the [debtor list], I paid everything up to the last instalment, I paid everything [...] But only 7 [people] paid everything from that group [...] From 13. You know it seems that you are a guarantor for the others, it's a whole issue."*

**Elisabeth** had a similar experience. She took out one loan with FP, and before they were able to repay the collective loan, her group disintegrated. She explained,

*"This whole mess happened [...] and it fell apart, I'm not at all happy with what happened, I felt ashamed about the others, because there were people who took out the loan and disappeared [...] and I just think, you don't do those things, it's a shame [...] I paid up to payment 7, I think, it was 10 or 12 payments, and I just need a bit more. Sometime when I have [money] I'll go by [FP]. I'm just so embarrassed that's why I didn't call the girl [FP mentor]"*

She explained that the group's problems started when a few members stopped paying and the group could no longer cover their debts. Due to this, a few group members started getting together to fundraise for the group members that were not paying. However, Elisabeth did not think it was fair to fundraise to pay for the members that did not pay. She recalled,

*"The girls said, 'let's sell chicken, let's make empanadas' [...] to make the payment for someone. I think she owed three or four payments, something like that. Once I called one of the girls who was in charge and I said, 'I want to make a payment' and she said, 'you have to send \$16 because you have to pay for this person and that person and that person', and I said 'why do I have to pay? I only have to pay \$13' so I didn't pay."*

Elisabeth continued to say that it had been almost six months and she had not been contacted by FP to pay off her outstanding loan. She noted,

*"[I have] to ask what happened, or what do we need to pay, or how much do I have to pay. But I never have time, and when I have money I forget, and I always remember when I don't have money and I get worried."*

The examples of Jacinta and Elisabeth are illustrative of the kinds of problems that arise with microfinance groups. In addition, both explicitly mentioned how owing FP money, as well as the lack of clarity of their situation led to uncertainty, stress, and worries, which decreased their wellbeing.

Issues with village banking groups did not only occur with new groups, participants who had been with FP for some time (group B) also noted similar issues with their groups after they had been together for over a year. To illustrate, **Jimena** also reported having problems with her group with whom she had been with for some time. The first time I interviewed Jimena she reported that everything was going well with her group and that they did not have any problems. When I asked her about her group she responded, *"Good, really good [...] When we have problems, we always try to solve them, there are no problems with the group."* However, by the second interview a few weeks later she told me she had left FP. She explained, *"A lot of us left [...] there were more new people, and there were some people who were irresponsible and that complicated everything"*. In our third interview, she delved into more detail. She explained, *"The group was difficult [...] there were people who didn't pay, and no one would [force] them."* Due to this, when I asked her to give a recommendation for FP she responded,

*"[fix] the issue with the groups, for example, to study people well, to see people's income to give them credit, because some of them tell you, 'I want it, I want it [the credit]' and then they don't pay."*

In another case, and as mentioned previously, **Valeria** had been an FP client for two years, but left after a group member got sick and brought the whole group into debt. **Ana** also left FP on a negative note after being a client for a year, due to her group's inability to back their collective loan. She recalled, *"I left the Foundation, and I want nothing to do with them, because no one from my group pays and we're having problems because of this."* She noted that she and her entire group were put on the national debtor list. Interestingly, when I asked Ana if she would ever consider returning to FP she answered, *"Yes, I would, but it would depend on our group."* Jimena, Valeria,

and Ana's life experiences show how challenges with groups and problems with re-payment happened with older groups as well.

### 7.3.3 Changes in Loan Groups & Leaving FP

Another way to show the dynamic nature of FP intervention in relation to wellbeing was in relation to how participants changed loan groups or left FP programming. There were different causes. One of them were caused by personal conflicts between group members that were not related to repayment. To illustrate, **Rocio**, decided to proactively leave her group before early signs of conflict escalated. She explained,

*"There started to be problems and my husband said to me, 'well, we are going to get out of this now because there is a problem and we do not want to have problems, because we are hard-working people, and it is not fair' and then I left before the other people. After a few days a whole problem came out, I found out, and luckily, I had already left."*

A few months later, Rocio returned to FP and joined a new group with some of the same women from her previous group. She noted,

*"Now I came back again [...] with some the same colleagues that I had [before] [...] I'm going to try again. I said I didn't want to come back, but I'm trying again. Now it's my third time, but we are doing well [...] And we are fine so far with the group. [The problem is] suddenly if one or two [stop paying] the whole group breaks down and we all sign [for each other] and if the others do not pay then we are going to have to pay for them, and it is not fair, because one sacrifices all day, we are on the street all day and it is difficult."*

Rocio's quote shows how important FP's loan was for her, yet how challenging it was to be a guarantor for others in her group. However, she acknowledged that it was worth taking the risk. Rocio's experience also shows how some participants had a dynamic relationship with FP, going back and forth, and sometimes changing groups.

Similarly, **Nidia**, who had been a FP client for six years with the same group, changed groups because of problems with the group president. After she changed her group, she had to start over with a lower loan amount due to FP rules. She explained,

*"Yes, we left because we had problems with the [group] president. We started with \$200 [...] And slowly we're growing [the amount] [...] We used to get \$1,000 [each] [...] [but] we had a problem with the president, so we decided to form a new group [...] It's going really well, it's very transparent, no fights, no complaints [...] it's very different from what it used to be like."*

Although she had a smaller loan amount, Nidia seemed satisfied with her new group. This excerpt shows how for Nidia having a group that she trusted and enjoyed being around was more important than the high loan amount she received.

Lastly, in a few cases, participants left FP because they did not need the loan any longer or did not want to be in debt. **Paola**, for example, decided to leave FP because she started a new job and did not need the loan any longer. She also explained that she did not want to miss meetings or commitments with the group. She noted, *"I didn't want to fail them, so I decided to just leave."* Similarly, **Leticia** told me that she had a flexible relationship with FP and would leave and then return to FP depending on her personal need. She recalled,

*"I came in, and then I left, this time it was, my second, no, my third loan with the Fundación [...] It seems that I come back once a year [...] Always with my mom's group."*

In other cases, participants discussed leaving, or considering leaving FP, because they did not want to be in debt. To illustrate, when I asked Lilita why she left FP she explained, *"You know, because of my bills and all that, it's difficult, so I'm leaving for the moment, I don't want to get into debt anymore."* Similarly, **Rocio** noted that at times she considered leaving FP because she did not want to have debt. She explained,

*"We are doing very well, sometimes I think of leaving, I don't want to be at the Foundation because, you know that I have my [other loan], then I have my payments and, like, I said, I don't want to owe that much, because my [loan amount] is already enough for what I am doing [...] But, I continue. I have no problem [...] No problems, I don't have any complaints."*

In these cases, it was apparent how although these participants appreciated their FP loan, they also valued not having worries related to their collective loan or being overindebted, showing the tension between FP's loan and worries.

### 7.3.4 Training Related to Income and Work

Participants also mentioned how FP provided different kinds of training related to income and work. These were related to entrepreneurship training, budget training, and promotion of savings accounts. For instance, participants noted that through the FP's programmes they received training to support participants' business. **Paola** noted that thanks to FP's entrepreneurship training, she got the idea and support to start her own beauty parlour. She noted,

*"[FP] helps economically, not only with expenses but also with their classes. I remember they had a course [...] about entrepreneurship. And that's where I got the idea to open my beauty parlour [...] I think [FP] does help a lot with quality of life."*

Showing how for Paola, her relationship with FP not only gave her income, but also gave her concrete skills that allowed her to start her own business which improved her wellbeing. **Marina** also recalled that FP helped her with entrepreneurial training to make sure she was taking advantage of her loan and investing it appropriately in her business.

Participants also acknowledged that they improved their ability to plan a family budget and have savings, due to their work with FP's Poverty Stoplight. In terms of budget, many participants worked with FP on being able to develop a budget of their weekly or monthly expenses to have a better management of their income. **Jimena** recalled,

*"I never wrote down, you know, money going in and out and other things, that was my only yellow [indicator] and the rest was all green [...] [My mentor] came to train me [...] It helped me."*

Similarly, **Paola** recalled that the Poverty Stoplight taught her to budget. She explained,

*"[I felt] good, because it really helped me to write down [my budget], because before I did not have that information, I did not know. When people asked me, 'how much is your weekly income?' I didn't know, and now I know."*

However, in a subsequent conversation a few weeks later, I asked Paola if she was still writing down her budget and she responded,

*"I no longer use the little notebook, because I ran out of sheets, but yes, I used it [...] now I know [how to], before I didn't."*

These excerpts show that although Paola learned how to create a budget with her mentor, her practice of writing down her monthly budget stopped when her notebook pages ran out, and thus perhaps did not lead to a new habit.

Most participants also worked on improving their savings through the Poverty Stoplight. FP's requirement is that all clients have a formal savings account in a bank or financial cooperative (not within FP). A few participants mentioned that after they opened a savings account with FP's support, they started saving for the first time. To illustrate, **Nancy** noted how she was able to learn about the benefits of saving and was able to open a savings account with the help of FP. She said,

*"The savings issue, I didn't know about it [...] And with [mentor] we solved it, and now I have my savings [...] Yes, I continue [contributing], I continue, I have my savings now."*

Similarly, when I asked **Beatriz** whether working with FP influenced her wellbeing, she replied that she was grateful that she was able to start saving. In another example, **Leticia** recalled,

*"The truth is [P.S. helped], with, for example, the saving issue, I didn't save anything, and now we [opened a bank account] [...] the truth is that I ignored my savings because I thought, I don't know (.) but then I realised, and I had my savings again, right, let's say I think about it more, so it helped me a lot. Because you are controlling your pace of life, let's say."*

A few months later, Leticia proudly told me she was able to purchase a car with her savings, noting the concrete impact that it had on her life.

## 7.4 Housing

As shown in the previous chapters, housing was important wellbeing dimension to women because it was a safe space where they could be with their families. This section highlights how issues related to housing in relation to FP, as well as government, such as housing uncertainty, home improvement, and neighbourhood improvement, supported or constrained women's wellbeing.

### 7.4.1 Housing Uncertainty

As has been presented in chapters 4 and 5, home ownership was an important goal shared by participants which influenced their wellbeing; however, informal and insecure housing arrangements were common in participants' experiences. Housing was the only area in which women recognised positive intervention on behalf of the government. Four participants had received their homes from the government housing agency. Yet there many were issues with correct implementation which led most beneficiaries with the physical house, but without the land titles for their homes, which also left them in a precarious situation. In fact, only one participant, Jacinta, out of the four that received land from the government had a land title. **Jacinta** clarified that the reason why they had land titles was because they demanded the government. She said,

*"This [house] is from the government [...] and now I'm fighting with the [neighbourhood] commission, we already have a lot of people with land titles, but we're fighting for them [...] Noo [it's not easy]! We fought for a lot of things."*

Jacinta's experience shows that although she has been able to get her land title, there has been a lot of fighting and struggling to get this from the government. Jacinta continued to participate in her neighbourhood commission and noted that fellow members valued her contribution. It was noticeable that Jacinta is also the only participant in this research who was actively involved and had a leadership role in her community.

What is more, more than half of participants who owned their homes<sup>41</sup> did not have land titles, which signals a serious problem of informality and lack of formalisation in homeownership in Paraguay. This is problematic because the lack of a land title left families in a vulnerable situation where they could be evicted at any moment. When I asked women about their land titles, most of them told me their land title was "in the pipeline" or "in process", though it was unclear what this

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<sup>41</sup> Out of 16 participants: 11 participants owned their own homes, 6/11 did not have titles, 5/11 did have titles. 5 rented.

meant, and if they would ever obtain theirs. To illustrate, **Romina** lived in an “*asentamiento*<sup>42</sup>” with her husband and her three children and had been there for 10 years. She had tried to get a house through the government programme but was not successful, so she bought land from an individual. She had already paid off the land but noted, “*[the land] is our own, but the title is on its way, it's not in our hands yet.*” A year later, during our final interview **Romina** she told me she was finally progressing towards getting her land title. She explained, “*[I'm feeling] really good, because I'll be able to calm down about that [title], because we were always worried, but now it's progressing [...] we're very happy.*” Romina's excerpt shows how the lack of the land title left her and her family in a vulnerable situation in which they were constantly worried. In addition, it also shows how status of home ownership were not static.

#### 7.4.2 FP for Home Improvement & Neighbourhood

Some participants noted that through the Poverty Stoplight and with FP's loan they were able to improve some aspects of their homes and neighbourhoods. To illustrate, **Beatriz** used her FP loan to fix her house to improve her quality of life. She explained, “*Last time I took it [a loan] out to finish our bathroom, which was missing, I had a lot of expenses with the bathroom.*” **Romina** also used her loan for home improvement. She recalled,

*"I always take a little bit [of loan] to stock my kiosk, and then I'm fixing my house too, in instalments. This time I took some [money] out and put some floors in two rooms."*

She continued to explain, “*There's a lot of things to improve, for example our home which is not completed, we've only been here for five years, and we're improving it bit by bit.*” In addition, Romina, who I presented previously as noting her neighbourhood was unsafe and was afraid of burglary, was planning on using her FP loan to build a wall around her house. However, she clarified that she would not tell FP that she was planning on using the loan for a housing project because she thought it was not allowed. Yet, according to FP protocol women can use a portion of FP loan to improve aspects of their housing which are related to the Poverty Stoplight indicators (Ramos, 2021), showing that in some cases there was misinformation about possibilities of use of FP's loan.

Some participants worked with FP to make improvements in their neighbourhood. These issues were identified during the Poverty Stoplight self-diagnosis, and they were worked on with

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<sup>42</sup> *Asentamientos* are informal settlements. They considered to be places more than 8 families live, and where more than half of the people do not have land titles or regular access to at least two of the following basic services: running water, electricity with a formal connection, and or sewage system (TECHO, 2015).



participants' FP mentors. To illustrate, **Beatriz's** noted how she advocated her local government to fix her road with support of her mentor. After carrying out the Poverty Stoplight self-diagnosis, she noted she wanted to work on the road indicator. Beatriz explained, *"it's impossible to pass through here when it rains [...] hopefully one day it improves or changes."* Then, she got together with her mentor, wrote a letter, and took it to city hall together. At city hall they told Beatriz that they would work on it, but at first nothing changed. However, after a few weeks the city fixed her road. Beatriz felt proud that she advocated her local government and saw the impact of her letter. When I asked her about her perception of the Poverty Stoplight, she told me that she was appreciative of her road being fixed. She said, *"I think [it will help others], because we went with [mentor] to take the papers [...] it was worth it because then [the municipality] came [...] I think it could work."* She continued to say, *"It was good because there were improvements here in the community."*

Another participant, **Nancy**, recalled how the Poverty Stoplight helped her learn how to recycle, after working on the garbage distribution indicator on the Poverty Stoplight. Lastly, **Leticia** worked on the contaminated environment indicator fixing a dirty lot next to her house. Her mentor helped Leticia get the lot cleaned which Leticia appreciated. She explained,

*"[Mentor name] helped me with a note to the municipality and all that, to make an intervention. Now the [owner] has already had it cleaned. It was practically cleaned on its own, the municipality ignored us [...] I guess that he got the fine or sent it to get cleaned, I don't know."*

However, a few months later, I asked Leticia about the dirty lot, and she responded, *"It got dirty again, it's dirty again."* Although in Leticia's experience the changes did not seem to be long term, the cases of Beatriz and Nancy show how the Poverty Stoplight helped participants improve in specific areas to improve their wellbeing.

### **7.5 Health**

Throughout this research, I have identified that health was an important domain of wellbeing for participants. In the previous chapters, especially chapter 4, participants repeatedly mentioned how important their physical and mental health was for their and their family's wellbeing. The lack of a comprehensive public health system and government support was apparent throughout the research. Participants reported a poor public health and how health problems resulted in shocks which affected their families and left them in a vulnerable situation. In this section I will discuss

how the government and Fundación Paraguaya influenced the health of participants and their families.

### 7.5.1 Ineffective Public Health System

Participants had to rely on Paraguay's ineffective public health system when they had an illness. Participants complained about how the public hospitals were not free as well as the poor quality. To illustrate **Nancy** noted,

*"Yes, we buy everything, you even have to buy gloves now. Now you must buy everything in the health clinics. That's the problem in Paraguay, we have deficits everywhere."*

Similarly, **Sandra** noted that she had a public hospital close to her home, but the service was so disappointing that she explained, *"it would be the same to not have one"*. **Liliana**, as mentioned previously, was battling various health ailments, and was getting treated at a local public hospital at the time of this research. She told me that she had to pay for all her medicine and that the hospital only covered the "basic things". She was feeling financial strain because she was spending a lot of money. She remarked, *"nothing is free in those public hospitals."* In addition, she was also having a difficult time getting appointments, usually waiting months between each one.

**Elisabeth**, who had a daughter with many health issues as presented previously, noted how when she tried to get an appointment for her daughter at the public hospital, she would lose a half day of work due to its inefficient appointment system. She explained,

*"In our neighbourhood there is a large [public] hospital [...] and there she [daughter] has her paediatrician and obviously it takes me longer to take her there. If I am going to get a number to make an appointment, it takes much longer. I have to go at eleven o'clock to go to get a number and we return at four in the afternoon, so I miss an afternoon of work."*

Similarly, **Sandra** also complained about the difficulty of getting appointments at the local hospital. She noted, *"To go the public hospital you must be there at dawn, and who takes [my children] to school? So that's why I haven't been going [to the hospital]"*.

**Jacinta's** experience shows another weakness of the public health system, clientelism and corruption. Jacinta noted she had to rely on politicians or contacts to help her get medical care or medicine for herself or her daughter. This was surprising since she attended public hospitals where everything should be free, regardless of one's contacts. Jacinta mentioned how lucky she felt that she had these contacts. To illustrate, when I asked her how her daughter was doing after having health problems she responded, *"[it's been] good actually because if she needs some diagnostic*

*tests, luckily, we have a lot of friends, so I call my friends so we can get it for free."* Jacinta also noted that she had to rely on politicians to get the medicine she needed for her high blood pressure. She explained, *"I ask the politicians, because I have a lot of friends, what am I to do? That's how I get things done. Because my medicine [is expensive]"*. Jacinta's case shows how women must navigate the highly politicised health system to get treatment for themselves and their families.

Due to the lack of a comprehensive public health system in Paraguay, some participants noted it was common for neighbourhoods to come together to help those in need. Some participants noted how they had *"polladas"* or chicken dinners to fundraise money for a neighbour in need, which is a common practice in Paraguay. To illustrate, **Rocio** explained, *"if there's a sick person here in the neighbourhood, we get together with the neighbours and we go out to ask [for donations], and we sell tickets to "polladas"*. In addition, **Jacinta** noted how she regularly relied on the support of neighbours and other family members to cover her basic needs. She explained, *"Sometimes when I'm not doing well people bring me groceries, when they see I'm doing very poorly."* In addition, she mentioned members of her extended family purchased medicine for her. Showing how she had to rely on social support to deal with shocks and cover their basic needs.

Moreover, some participants had employer-provided health insurance (IPS) through their work or through family members. In Paraguay by law all workers in the formal sector must receive employer-provided health insurance, which is a public-private partnership. Only three participants had IPS, Jacinta, Leticia, and Norma. They all noted that although it had its problems, IPS insurance gave them security and peace of mind. Jacinta had the insurance through her son's job, Leticia through her job, and Norma through her husband's job. **Jacinta** noted that she used a combination of public health and IPS to deal with her health issues. She explained, *"This time around IPS saved me, but I bought a very expensive medicine, with that I was able to be well."* Although there were many complaints about long waiting times and difficulty of getting appointments at IPS, most participants said it was useful to have coverage. **Leticia** recalled, *"although IPS is kind of a mess [...] it is still useful"*. Lastly, **Norma** explained that IPS was so difficult to use that sometimes she used the public hospital instead. She explained,

*"It's just very difficult to use IPS, it's as if you don't have it, because now they completely changed the system to take an appointment, at 6:00 p.m. you have to go to take an appointment, at six I am still downtown. I was never able to use IPS again. It's hard."*

However, since most participants of this study were entrepreneurs in the informal sector, they did not have access to employer-provided insurance.

### 7.5.2 Fundación Paraguaya's Health Insurance

FP provided free private health insurance for all its clients. The insurance was basic but covered a few medical appointments each month. Participants who were aware of and used FP's insurance were satisfied with the service and commented how it allowed them to access medical treatment more frequently, which improved their wellbeing. For example, **Rocio** used FP's medical insurance to get all her medical check-ups. She noted that she appreciated FP's health insurance because of the difficulty of going to a public hospital. She said, *"Yes, I'm getting my check-ups at [private hospital]. I'm always getting the [vouchers] from FP"*. She continued to say that she wanted to use FP's insurance to change her method of birth control. **Nidia** also used FP's insurance and noted she had her gynaecological check-up recently in a nearby hospital using FP's insurance. When I asked her what she appreciated about working with FP, she recalled,

*"[FP] also has its benefits, hospitals, insurance, it's very good. [Interviewer: Do you use FP's insurance?]* Yes, just recently they gave us that service, the insurance and all those things, it's super. Super, super, super."

Similarly, **Jimena** also noted she appreciated FP's medical insurance. She noted, *"it's helpful [...] for health [issues] we can go to appointments at the [private] hospital"*. Lastly, when I asked **Beatriz** if FP contributed to her wellbeing, she mentioned FP's health insurance and explained, *"Yes, it helps us, because it gives us (.) for example in health, it gives us the possibility to go to [hospital name]"*

There were a few participants who were aware of FP's insurance but had not used it yet for different reasons. To illustrate, **Leticia** noted that she had not used the insurance, but wanted to use it for gynaecological check-ups. In one conversation between Leticia and her mentor, the mentor reminded her of FP's insurance,

*[FP Mentor: You know FP also has insurance?] Really? The truth is I don't really use it, only if I'm really sick [...] but actually now I have to go get my annual women's check-up."*

Similarly, **Sandra** also asked her mentor about FP's health insurance, *"I want to change my IUD<sup>43</sup> [...] do you think I could do it there?"* Leticia and Sandra's excerpts shows how they were open to talking to their mentors about birth control and sexual health and how they were able to cover these needs due to FP's insurance.

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<sup>43</sup> An intrauterine device (IUD) is a small birth control device that is inserted into the uterus to prevent pregnancy.

In other cases, participants had not used FP's health insurance because they did not understand how it worked. To illustrate, when I asked **Jimena** if she had ever used FP's insurance, she responded,

*"No. Nothing, I never used it [...] The health insurance thing I knew [existed], but I didn't understand [how it worked] very well, so I never used it."*

For a few participants, FP's insurance was too inconvenient. **Jazmin** noted that she had not used FP's insurance because she had to go to FP's office to get the health care voucher and she had to pay for a bus ticket to get there. Lastly, **Jimena** complained that FP's health insurance did not provide coverage their children, only the FP client.

In one case, a participant, **Jazmin**, recalled that she did not agree with one indicator on the Poverty Stoplight related to sexual health. She explained,

*[Interviewer: What did you think of the Stoplight process, of working with your indicators, did you like it, you don't like it?] It was fine, and as I told you, the things that came out! [Interviewer: Did they take the survey too many times? You probably know everything by heart by now] Yes! [laughter] There was a part that I did not like so much that (.) part about the pap [smear], it kind of made you do it, I didn't like that [Interviewer: Right] I mean, it's okay but (.) I did it."*

This excerpt shows an interesting tension between women's personal agency and bodily autonomy, and public health. Jazmin noted that she did not agree with this Poverty Stoplight indicator, and she felt that she was consequently pressured to get a medical test that she did not want.

### **7.6 Experiences with the Poverty Stoplight**

Participants' experiences with the Poverty Stoplight also adds to understanding of the dynamic nature of poverty interventions and their relationship with how participants experienced wellbeing. Participants mentioned how the Poverty Stoplight helped them become aware of different areas of their life and made them feel that FP cared about them. Discussions of mentors were more nuanced, with some participants noting that mentors were supportive and helpful and others mentioning that they did not have a relationship with their mentors.

Many participants appreciated the educational nature of the Poverty Stoplight because they noted it helped them raise awareness of some topics. As **Leticia** explained when I asked her about her impressions of the Poverty Stoplight,

*"The truth is that it's good, because there are things that I did not realise I had, the good [things], I saw that, because you never think about what I do well, what I do wrong, we only do things now, and the truth is I thought that was good."*

Similarly, **Nancy** noted, *"In this life you need to know things, for example savings, I don't know, go to the doctor, you know [...] knowing how to manage your trash, because people don't know."* In a similar fashion, **Paola** recalled,

*"Sometimes people do not want to tell what happens to them at home or the problems they have at home, they do not know that they really need help [...] Sometimes we think that [issues] will just pass, but really, afterwards it helps you [...] Yes, that's why it is good to do, because there are some who live in poverty and nobody knows, and with the Stoplight, it's all there."*

It was interesting how participants noted how the Poverty Stoplight helped them gain awareness about their situation in different areas of their lives, in the positive as well as the negative. In addition, it was striking how some participants noted that it was a positive tool for *them* to self-reflect, and other participants talked about how important it was for *others* to learn and reflect. These observations from participants are aligned to FP's claims that the Poverty Stoplight self-diagnosis helps people gain awareness of their needs to make changes to improve their lives (Fundación Paraguaya, 2019).

Other participants noted that the Poverty Stoplight made them feel that FP cared about them.

When I asked **Marina** how she felt after she finished the Poverty Stoplight programme she recalled, *"I felt more at peace, because with [the Poverty Stoplight] the Foundation is also constantly with us [...] yes [supported], more at ease, because I know that the Foundation also cares about its people."*

Lastly, **Jimena** noted she felt proud after completing the Poverty Stoplight programme,

*[Interviewer: How did you feel when you finished the Stoplight?] I don't know, like some pride because you can achieve everything that [you set out to]. [Interviewer: Would you recommend the Stoplight to others?] Yes."*

Mentors were crucial to the Poverty Stoplight programme because they not only conducted the self-diagnosis, but also carried out the subsequent training and mentorship. In general, participants' description of relationships with their mentors were neutral to positive. During my observations of the self-diagnosis, I could see that mentors were reassuring and supportive, and many took it as a chance to get to know participants better. Many participants spoke of their mentors in a positive way. **Nidia**, for example noted, *"she's very kind, very knowledgeable, very cool."* Similarly, **Beatriz** said, *"she [mentor] always asks if we need anything."*

However, I also observed that there was high turnover of FP mentors, and thus, most participants did not have a strong relationship with their mentor. This was evidenced by the fact that most participants did not know their mentor's name. Participants noted they only saw mentors every few months in village banking meetings. I also noticed that FP mentors were overburdened with their responsibilities of simultaneously being loan officers as well as carrying out the Poverty Stoplight programme. The high turnover rate exacerbated implementation issues because there were always new people who had to learn FP policies and programmes. This caused frustration for some participants who always saw new people. To illustrate, when I asked **Jazmin** whether she remembered taking the Poverty Stoplight self-diagnosis she responded, *"Yes, I did it with [mentor name], and then the other one, and then the other one [laughs]"* Noting how she had many changes in mentors she has had during her time with FP. I also observed that this staff rotation resulted in incomplete Poverty Stoplight mentoring for some participants in Group A. **Jacinta** told me that after one meeting with her FP mentor she did not hear from her again. She noted, *"She said she was going to come again because she still had a lot of questions to ask, and she didn't come back anymore."* Similarly, although **Romina** remained a FP client for the period of this research, she was unable to complete the Poverty Stoplight programme due to staff turnover. In addition, most participants were not informed when their mentor left the institution. These findings were striking given that the mentorship was meant to be a relationship-based support, in addition to the fact that wellbeing was so relationally framed for participants.

### **7.7 Poverty Stoplight Recommendations**

In this section, I reflect on some of my observations as well as participants' recommendations related to the Poverty Stoplight implementation. In general, participants were not very critical when I asked them to make recommendations about the Poverty Stoplight, even those who had left on a bad note. A few participants (mostly from group A) recalled problems with the Poverty Stoplight programme. I had also observed that the Poverty Stoplight self-diagnosis was carried out very quickly and there was a lack of consistent implementation: some mentors led the 50-question self-diagnosis in less than 15 minutes, rushing by each indicator, while others led it in 30-40 minutes. When I interviewed participants a few weeks later, most could not recall which indicators they got red or yellow, or which indicators of the Poverty Stoplight they had chosen to work on. Lastly, in its efforts to continue adjusting the tool, I observed that FP made many changes to the

Poverty Stoplight programme during my 15-month research period. This led to a lot of frustration on the hands of both mentors, who noted their job was changing constantly, but also by participants who felt that FP was asking them different things all the time. Due to frequent changes in internal policies, some participants noted that they had taken the Poverty Stoplight self-diagnosis various times. **Nidia**, for example noted,

*“The Stoplight, they made me do it when I started at the Fundación, then they made me do it again for the next period that I was going to take out my loan, and they will have made me (.) 4 (.) No, 3 times, and now the last time it was with [mentor name] [...] Because I had moved from my mother-in-law’s house and I came to live here and they told me that I had to do another Stoplight”.*

In various cases, it was apparent how inconsistency on behalf of FP led to frustration and lack of correct implementation of FP’s poverty intervention.

I asked participants whether they felt pressure to participate in the Poverty Stoplight programme due to their financial obligations with FP. Participants from both Group A and Group B responded they did not mind participating in the Poverty Stoplight. **Romina**, for example, responded, *“No. not at all. We were all asked if we were willing to participate.”* Similarly, **Nidia** responded, *“No, nothing. Well, I didn’t feel like that.”* When I asked **Paola** if she felt pressured to participate, she responded, *“No, no. It was more for them to know how they could work with me and help me at least in the things that I was doing wrong.”* Lastly, **Jimena** explained, *“I did it without a problem.”*

However, two participants from Group B perceived that their participation in the Poverty Stoplight was not fair. Specifically, these participants noted they did not agree with FP’s policy of randomly selecting participants to participate in the Poverty Stoplight programme. To illustrate, **Jazmin’s** noted that her only criticism related to FP was that she had to do the Poverty Stoplight and others in her group did not. She explained,

*“Why me? [...] I am always the one who is [randomly selected] [...] It’s always me, we are 33 people [in my group] [...] Why is it always me? Now I don’t know if I should be afraid [...] Yes of course, everybody should do it. Why just one person? That’s what I’m saying, because there’s 33 [of us]”*

Jazmin’s case shows how she not only felt it was unfair that she was being singled out, but also how she was unsure whether this selection meant that she was being observed or reprimanded by FP. In another case, **Ana** felt a bit deceived with FP’s strategy of randomly selecting women to participate in the Poverty Stoplight programme. As participants mentioned, and as I observed myself, FP mentors told women that they have been drawn or chosen to participate in the programme. This



led some women to think that they won some sort of prize and were disillusioned when they realised that was not the case. Ana explained,

*"[They told me] you won; I don't know what. [Interviewer: They didn't tell you that you were drawn?] Drawn. And what do you mean being drawn? [Interviewer: And that's their system, they choose who is going to do the Stoplight and all that.] Yes, yes. [Interviewer: And do you remember what things came out?] Nothing, and that's what surprised me, [FP mentor] for example told me, 'You won, you were the winner' I was happy, 'are they going to bring me something or what?' I said, and nothing happened and, 'what is that', I said."*

These cases show how FP's messaging could be confusing for participants and causes a lack of trust between participants and FP, which negatively impacts its ability to work collaboratively with women towards poverty alleviation.

All in all, I observed that participants noted some positive aspects of participating in the Poverty Stoplight programme, but also offered some criticism. Not surprisingly, I observed that participants from Group B, those who had successfully finished the Poverty Stoplight programme, were mostly positive about the Poverty Stoplight intervention. Participants from Group A, where most participants left the programme before they finished, had more negative experiences with the programme.

### **7.8 Conclusion**

In this chapter I showed how participants had a dynamic relationship with FP. By maintaining engagement with women who withdrew from FP's programming, I was able to observe issues with Fundación Paraguaya's intervention. My methods not only allowed me to capture women's life stories and how their wellbeing changed through time, but I was also able to capture impacts in these women's lives during their participation with the Poverty Stoplight, and after the programme. Further, this research showed how looking at people who withdraw from programmes allow us to have a more comprehensive view of why and how participants leave and then re-enter interventions.

The objective of this chapter was to explore women's experiences with poverty interventions related to FP and the government, from participant's point of view. Specifically, my aim was to understand how interventions fit within women's understandings of wellbeing in relation to specific domains that were important to women. This chapter highlighted the dynamic connection between

individual lives, interventions, and the wider setting. Women discussed how their lives were supported *and* disrupted by external factors such as FP and the government, and how this impacted their wellbeing over time. Throughout, the absence of government and government interventions was striking, and in many ways, FP's programmes attempt to compensate for the government's absence.

On the one hand, FP's interventions were recognised by participants as a possible way to mitigate structural barriers and vulnerability by providing a stable income stream, improvements in their homes and neighbourhoods, and health insurance to protect against shocks. In relation to income and work, participants especially appreciated FP's support in relation to income where, as entrepreneurs, they were able to access credit, increase their income and savings, and learn skills, even though they were informal workers or on the national debtor list. Women were appreciative of how FP offered ease of credit, low interest, and loans targeted at women. Participants noted how in a context of precarity and unpredictability, being able to count on FP's income for their business gave them stability. In addition, many times participants noted how their positive experiences with their loan groups were less about the sums involved, and more about reliability and smooth running of the group. Moreover, some women noted how they learned how to advocate their government to make improvements in their neighbourhood and were able to make improvements in their homes. Furthermore, FP's health insurance was mentioned by many as an important protection as well as an asset for everyday health needs. Lastly, women noted that FP's insurance as well as the Poverty Stoplight, helped them access family planning and reproductive health services.

However, it is also important to note that in some cases, women's engagement with FP was negative for wellbeing due to the group loans and issues with collective repayment. Participants noted how this resulted in worries, frustration, negative impact on work, and financial pressures. Specifically, participants mentioned issues with their microfinance groups and there were cases where women lost their access to their FP loan, increased their debt, or entered the national debtor list due to problems with their group or their inability to pay back their loan (Torri, 2012; McIntyre and Rondeau, 2013). Participants especially noted the risk of trusting in women they did not know and then learning that they were not committed to paying back the loan, and the repercussions this had on participant's lives. Women also expressed a lack of understanding of the

implications of a collective loan, and that FP did not provide sufficient information or follow up. Although housing was the only area in which women recognised positive intervention on behalf of the government, there were also issues with correct implementation which led most beneficiaries without land titles, which also left them in a vulnerable situation. Furthermore, the lack of a comprehensive health system, as well as corruption and clientelism, led women to rely on their social networks and communities to cover costs in the face of illness and health problems. Lastly, this chapter also shows how although Fundación Paraguaya created the Poverty Stoplight and works with 50 multidimensional poverty indicators, it seemed their focus of poverty alleviation was unidimensional and material because it focused on income and work, and housing and health to a lesser degree.

## Chapter 8. Conclusion

### *8.1 Introduction*

This dissertation set out to explore understandings of wellbeing of women participating in an anti-poverty programme in Paraguay. This chapter provides conclusions based on research findings from the data collected, as well as a discussion and recommendations for future research. This chapter will review the purpose of the study, research questions, literature review, and findings of the study. It will then present conclusions, discussion of the conclusions, and recommendations for practice and further research.

The chapters in this dissertation identify various ways in which the dominant approaches to wellbeing need to be challenged in order to understand lived experience in the context of Paraguay. There is a lack of qualitative research on wellbeing, as well as a lack of wellbeing research in Paraguay, hence, this dissertation sought to meet these theoretical and empirical gaps by conducting a qualitative study. This research on wellbeing has both theoretical and policy-related implications. In terms of theoretical implications, this research seeks to further the understanding of the wellbeing of women living in poverty. This research attempts to contribute to policy and programming by offering a new perspective on the lives of vulnerable women and the complexity they have to navigate in their daily lives. The hope is that with this knowledge, programmes will be better suited to adapt to women's needs.

This dissertation specifically answered the following research question:

- What are women's lived experiences of wellbeing and how do these interact with anti-poverty programming in Paraguay?

This main research question was investigated through the subsequent questions:

- How do participants conceptualise wellbeing?
- How does a life course perspective help understand the dynamics of wellbeing?
- How do interventions feature in women's understanding of wellbeing in their lives?

To answer these questions, Chapter 1 offered a general introduction and introduced the context of Paraguay, as well Fundación Paraguaya's anti-poverty programming to describe the general

characteristics and processes of implementation. Chapter 2 brought together the literature on wellbeing. The chapter identified a need to i) understand what wellbeing means for people in different contexts; ii) understand wellbeing using a temporal perspective; and iii) comprehend the role of relationships in understanding wellbeing. Chapter 3 presented my methodology and justified the choice of a qualitative biographical study to understand wellbeing through women's life experiences. Chapter 4 was the first empirical chapter and presented women's conceptualisations of wellbeing. Chapter 5 presented my findings regarding the temporal dynamic of wellbeing. Chapter 6 presented my findings in relation to motherhood, relationships, and caringscapes through the lens of "*supermadres*". Lastly, chapter 7 presented how women's life experiences interacted with FP's poverty intervention as well as government agencies. Therefore, this concluding chapter brings together the findings of the empirical chapters and critically examines them in relation to the literature.

This chapter is composed of four sections. The first section, section 8.2, summarises the core findings within the four empirical chapters and discusses how together they answer the core research questions by linking them to the broader literature. Then section 8.3, offers a reflection on my methodology and my methodological contributions. Section 8.4 discusses the policy-related implications of this research. Finally, Section 8.5 then provides some recommendations for future research that are derived from the findings of the empirical study conducted.

### ***8.2 Discussion of Empirical Findings***

This dissertation focuses on participants' own definitions and understandings of wellbeing. This allowed me to generate insights into the contextualised subjectivities of wellbeing as a construct, including the interconnected fluidity and 'fuzzy boundaries' of wellbeing domains. Further, I identified that wellbeing is temporal and dynamic, and conceptualisations of wellbeing must consider these two aspects. Moreover, participants' experiences showed how wellbeing was highly relational, and that care and collective wellbeing was crucial in participants' understandings of wellbeing. I also observed that wellbeing and illbeing are a false dichotomy and must be understood as two sides of the same coin. Lastly, it is crucial to understand how wellbeing is gendered and how gender influences women's experiences of wellbeing.

### *8.2.1 Wellbeing is multidimensional, interconnected, contextual and subjective*

Participants' accounts revealed wellbeing to be multidimensional, fluid, contextual, fuzzy, and subjective. This dissertation argues for a multidimensional conceptualisation of wellbeing because women identified different domains of wellbeing: family, health, work, income, housing, and spiritual life. For the women who took part in my study, wellbeing was experienced through a process of interaction between the different domains, similar to what has been found in other research (Gough and McGregor, 2007b; White and Jha, 2014; Huovinen and Blackmore, 2016; Jha and White, 2016).

Although I presented wellbeing in relation to specific domains in the empirical chapters, this was challenging due to the interconnected nature and overlap between domains. I found that the wellbeing domains identified by participants did not neatly fit into the categories of wellbeing frameworks, and instead, there was interconnected fluidity and fuzzy boundaries between domains. Each wellbeing domain identified by participants had elements of relational, material, and subjective wellbeing. To give an example, having work was related to material wellbeing (having income), relational wellbeing (a way to provide for children), as well as subjective wellbeing (gave women pride, dignity). Thus, I cannot say that work is considered material wellbeing, due to its important connection to subjective, as well as relational, wellbeing. This is similar to what others have found that when people are asked about their experiences of wellbeing, people persistently mix objective and subjective dimensions, which are treated as quite distinct in the literature (McGregor, Camfield and Woodcock, 2009; White, 2015).

What is more, my findings also show how difficult it is to separate the conceptualisation of wellbeing as a constituent of wellbeing (i.e., ends) or pathways to wellbeing (i.e., means). To illustrate, for some women, the material aspect of a house was seen as an instrument and a space for strengthening their family relations. In these cases, for women, having access to a house, a material resource, was a means, and not an end in itself. In contrast, other participants noted that having a house, a physical space, was an end in itself. Thus, it is not easy to identify whether housing was a constituent or a pathway to wellbeing.

I also found that wellbeing domains were contingent on each other. For example, in the domain of health, I found that having children with health issues increased not only participants' care duties

since they took responsibility for taking care of them while they were ill, but also impacted their work patterns and emotional wellbeing. To illustrate, Elisabeth's experience with her daughter's health showed how health issues in their family impacted the wellbeing domains of family, work, and income, and had structural challenges. Elisabeth noted how her daughter's health issues not only caused her stress and worries, but also adversely impacted her ability to work and generate an income due to the lack of accessible health care. Women's experiences highlighted how identities as mothers, as well as culture and gender norms had an essential role in women's experiences of wellbeing. In addition, this confirmed the importance of having greater fluidity among domains helps us understand the messiness of wellbeing.

The interconnection of domains also highlighted the highly contextual and subjective nature of wellbeing. Similar to other authors (Calestani, 2012; Atkinson, Fuller and Painter, 2016; White, 2016; Bakketeig *et al.*, 2020), I confirmed the importance of recognising that wellbeing is contextually situated and produced through social and cultural practice. By asking women their own definitions and understandings of wellbeing, I was able to generate insights into the contextualised subjectivities of wellbeing as a construct. I found that each woman's needs and experiences were different, that women defined wellbeing in different ways, and that I could not assume what people's experiences would be. I found that, like Lloyd-Sherlock and Locke (2008), subjective understandings of wellbeing were mediated by lifetime experiences. Women's accounts and experiences of wellbeing were incredibly varied. The way women experienced wellbeing was contextual and different depending on their age, marital status, number of children, economic situation, shocks, among other factors.

Women's experience also showed that there was not a simple relationship between family structure and wellbeing. Women's experiences of single motherhood were not static, but changed throughout time, showing how there was fluidity in family structure (Morgan, 2011). Some women were single mothers with their first children and then married, others were married and then became single mothers, and others had always been single mothers. In addition, women defined and conceptualised the term in different ways (May, 2010; Motapanyane, 2016). To illustrate, some participants described being a single mother as an empowering act that showed them how strong they really were and proudly discussed how they progressed on their own. For others, single motherhood was described as a struggle and as abandonment. Thus, due to the multidimensional,

interconnected, contingent, contextual, and subjective nature of wellbeing, it is imperative not to assume a universal approach to wellbeing, but rather to investigate how wellbeing is understood by the people who are the subjects of research.

### *8.2.2 Wellbeing is Temporal*

In relation to the temporal nature of wellbeing, I observed that time had an important role in women's understanding of wellbeing. First, women's wellbeing changed substantially over time, which was evidenced by women's life histories. Their timelines were diverse and complex, and the richness of the case studies shed light on the subjective understandings of wellbeing and how they were mediated by lifetime experiences.

Second, I found that wellbeing had different meanings depending on women's life stages (childhood, adolescence, adulthood). Temporality had an important role in understanding fluidity and women's shifting identities and responsibilities which impacted which domains were important in different periods of time. Due to this, some wellbeing domains, like income and spirituality, were more important in the present, while others, like education, were more important in the past. In addition, having a temporal lens also allowed me to understand how, due to caringscapes, women's responsibilities, as well as meanings, shifted in different stages of motherhood, from pregnancy, to raising younger children, adolescent children, and up to adult children.

Third, and related to the previous point, I found that there were stark generational distinctions which influenced women's wellbeing (i.e., being a child in the 1970s vs being a child in the 2000s). This was related to Paraguay's economic growth and progress seen in the past decades, presented in section 1.3.1. Using a temporal lens, I was able to identify generational differences among participants. Perhaps most strikingly, no participant over the age of 40 had finished secondary school because women left schooling early to work within or outside their homes due to economic difficulties. On the contrary, all participants under age 40 finished secondary education. These younger women are the daughters of the previous generation of women who did not have educational opportunities but wanted these opportunities for their children. These findings allowed me to understand the dynamic and temporal nature of wellbeing, as well as structural shifts which are observed in generational changes. Moreover, having a temporal lens also allowed me to



identify how some life events, such as early pregnancy, single motherhood, and the type of work women participated in, did not change between older and younger participants.

Fourth, when reflecting on their lives, women's understandings of wellbeing were engaged with the past, present, and future (similar to findings in Østergaard and Thomson, 2020). My biographical life course approach allowed me to have a more well-rounded view of wellbeing because for participants, past, present, and future interconnected. This is related to the idea that wellbeing is a process, which although it remains to be fully explored, has been explored in the ways that understandings of wellbeing incorporate both reflections on the past and expectations of the future (Lloyd-Sherlock and Locke, 2008; White, 2010; Huovinen and Blackmore, 2016). In addition, I observed the importance of observing the multiple temporalities of wellbeing, drawing a distinction between wellbeing in participants' everyday lives, as well as the past and the future. This is connected to the idea of how looking at everyday lives illuminates how both relationships and subjective understandings of wellbeing are fluid and shift over time (Bakketeig *et al.*, 2020).

### 8.2.3 Wellbeing is Dynamic

Women's wellbeing was dynamic, and no timeline was linear. Taking a life course perspective helped me understand women's complex pathways and how they relate to wellbeing. For most participants, it was challenging to identify one critical turning point among the frequent changes in their lives. Women depicted their lives as a constant balancing act between wellbeing and illbeing (or enablers and constraints of wellbeing). For many participants, their lives were unstable, unpredictable, and participants discussed constantly navigating crises (Wood, 2007; Berlant, 2011; Standing, 2011). This instability included migration, changes in jobs, household structure, instability of relationships, uncertain livelihoods, and even changes in their status with Fundación Paraguaya.

I also observed that part of the reason why women's wellbeing was dynamic was because it was contingent on external factors which were outside their control. Due to this instability, women frequently noted how they aspired to have stability and "*tranquilo*"<sup>44</sup>. A common thread among all women was their constant worries about problems in their lives concerning their families, health, job, income, housing, debt, among others. These issues left them with a lack of "*tranquilo*" and left

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<sup>44</sup> Tranquilo "reflects a sense of emotional wellbeing, characterised by calmness, peace of mind, a feeling of contentment and of being without problems" (Huovinen and Blackmore, 2016, p. 181).

them feeling worried and unstable. Due to this, the concept of “*tranquilo*” was often mentioned by participants, showing how they wanted a break from their unstable and unpredictable lives and instead wanted a stable life for themselves and their children. Throughout, women expressed how being able to work from home, have a steady income, and being able to cover their expenses left them “*tranquilo*”. Moreover, many participants defined wellbeing as *not* feeling stressed and overwhelmed, due to their highly volatile and dynamic lives.

#### 8.2.4 Wellbeing is Relational

Relationality was the most important factor in the way participants viewed and experienced wellbeing. This finding coincides with other research which found that the most important area in life for most people was close relationships (Camfield, Choudhury and Devine, 2009; White, 2009, 2015; McGregor, Coulthard and Camfield, 2015; White and Ramirez, 2016; White and Jha, 2018). This research confirms what Camfield, and colleagues (2009) found that there is a need for more research on relationships in the wellbeing literature. As presented in Chapter 6, I was unable to consider family as a separate wellbeing domain due to its overarching nature. I found that women’s relationships and families were so meaningful that I dedicated an entire chapter to exploring this. What is more, relationships helped explain how social and cultural contexts centrally influenced the way women understood and experienced wellbeing.

There was a strong relational layer in women’s narratives, and most women related their wellbeing directly to the wellbeing of their nuclear family, especially their children. In fact, participants rarely referred to themselves alone when defining wellbeing (similar findings in White and Ellison, 2007; White and Ramirez, 2016). Most wellbeing domains selected by participants were related to the wellbeing of their children and their family. This is related to what has been found elsewhere, that people rarely refer to themselves alone in their expression of wellbeing (White & Ramirez, 2016). For many participants, wellbeing was not the property of individuals, but rather something that belonged to and emerged through relationships with others (similar findings in (Christopher, 1999; White, 2016). These findings coincide with White (2016) who found that wellbeing emerged through relationships with others, especially in cultures where people tended to have greater emphasis on collective identities.

Due to the importance of relationships, I confirmed that, for women in my study, material resources only had meaning in the context of specific relationships. Specifically, they described a strong interconnection between affective and economic dimensions of wellbeing in the household. Participants sought out material resources, such as income and housing, for example, to provide and support their families, especially their children (similar findings (White and Ellison, 2007; Camfield, Choudhury and Devine, 2009; Jha and White, 2016; White and Ramirez, 2016). As White and Ramirez (2016) articulated it, “the purpose of wealth was not to accumulate as an individual, but to provide for and share with others” (p. 135).

Women’s collective and relational view of wellbeing was aligned with their identity as carers, and more specifically as mothers – and as daughters and grandmothers. Women included their children in their definitions of wellbeing, which disrupts assumptions that it is possible to understand wellbeing in terms of autonomous individuals. For these women, their identities were configured relationally, and so, therefore, was their wellbeing. In other words, as *“supermadres”*, what women did and what they valued in terms of wellbeing was shaped by caringscapes of relational responsibilities (Folbre, 1994; McKie, Gregory and Bowlby, 2004; Chaney, 2014; Martinez-Restrepo and Ramos-Jaimes, 2017). The vital role that women gave to relationships added to their household, care, and work responsibilities, which consisted of cognitive labour (thinking, planning, organising), but also emotional labour (caring, worrying) (Damingier, 2019; Dean, Churchill and Ruppanner, 2022). Participants noted the role of caringscapes and the shifting and changing multidimensional terrain that comprised women’s vision of caring possibilities and obligations (McKie, Gregory and Bowlby, 2002, 2004). Throughout their lives, participants exercised their role as carers in this stage, which included taking care of children, grandchildren, and in some cases, even their elderly parents. In addition, intergenerational connections were also mentioned frequently - participants were interdependent on others and others were interdependent on participants. Women discussed their multiple roles as mothers, grandmothers, daughters, wives, and sisters.

Wellbeing research elsewhere has found that the importance of families is related to the concept of generalised reciprocity, in other words, participants keep close relationships because these are important sources of material support for the future, which is related to the concept of social capital (Devine, Camfield and Gough, 2008; Camfield, Choudhury and Devine, 2009; Huovinen and

Blackmore, 2016; White and Ramirez, 2016). However, my analysis did not find that people emphasised relationships of reciprocity. Rather, participants rarely mentioned the reciprocal nature of their relationships. To use the examples of Jacinta and Liliana, although they did everything for their children, they mentioned not wanting to ask children for anything in return, including financial support in their old age. Jacinta explained how she did not want to rely on her children for income because she noted *“they already have their own families”*.

Lastly, it is important to note that participants’ notions of relational wellbeing mainly considered their families and rarely referred to relationships in the community; only two participants mentioned being involved in her community (one in community activism and one in her church group).

#### *8.2.5 Wellbeing and Illbeing*

Women frequently mentioned illbeing when defining wellbeing as two sides of the same coin, but equally, their accounts show that positive and negative aspects of wellbeing often coincide. Thus, I found that there was no straightforward binary between well and illbeing. This is contrary to the literature that states that wellbeing is a positive concept because it focuses on what people have and are able to do, instead of focusing on their deficits (Camfield, 2006; Camfield, Crivello and Woodhead, 2008; McGregor and Sumner, 2010; Jones and Sumner, 2011; Roelen and Leon-Himmelstine, 2019). One of the reasons why wellbeing emerged as a new trend in development was due to the recommendation that programming transition from a focus on poverty, claiming that it is a deficit model focusing on what people do not have, to wellbeing approaches which, as White (2013) states, “focus on what is positive and desirable, rather than what is lacking or negative” (p. 3).

Wellbeing as a positive notion did not always play out in women’s accounts. When women defined what wellbeing was in this research, they did not always talk in a positive sense. Women depicted their lives as a constant balancing act between wellbeing and illbeing. This is contrary to the literature that states that wellbeing is a positive concept because it focuses on what people have and are able to do, instead of focusing on their deficits (Camfield, 2006; Camfield, Crivello and Woodhead, 2008; McGregor and Sumner, 2010; Jones and Sumner, 2011). I believe this tension between wellbeing and illbeing is not discussed enough in the wellbeing literature. In many

conversations, participants used negative language to define wellbeing. To illustrate, health was defined as the absence of illness and income was defined as not being destitute. This is not surprising considering women's lives which consisted of navigating constant risks and pressures, along with unpredictable threats to their wellbeing. These findings illustrate that for many, wellbeing is not a positive notion nor is it benign. Moreover, this is aligned to what White (2008) has claimed, that only focusing on wellbeing could potentially exclude negative experiences or dimensions. I believe there should be a dual focus on wellbeing and illbeing, and this tension between wellbeing and illbeing is not discussed enough in the wellbeing literature. In other words, when discussing wellbeing we should not only consider the antagonistic relationship of wellbeing versus illbeing, but rather consider the natural relationship between wellbeing and illbeing.

#### *8.2.6 Wellbeing is Gendered*

Women's experiences of wellbeing were gendered, and cultural norms, structural forces, and wider social processes affected women's life trajectories in relation to their families and their relationships. Participants' narratives illuminated how gender norms interacted with structural barriers starting in their childhoods. Women noted their responsibilities in working to take care of siblings and to care for their homes, which was not expected of their brothers. In many cases, this meant leaving school early due to their care responsibilities within and outside the home.

The role of *supermadres* was apparent when women discussed their care duties concerning their children and their families. Women reported feeling overburdened by their responsibilities both within and outside the home. For some women, these responsibilities resulted in changing jobs, as well as the desire to start their own businesses and work from home. Single mothers were especially overburdened by their responsibilities. In addition, I would argue that the concept of *supermadres* extends from women caring to their children, to women caring for extended family, such as their older parents, as well as their grandchildren. Participants also frequently discussed the negative impact of emotional labour, constantly worrying about their children, and how the burden of participating in childrearing and disciplining their children was not shared with their partners (Daming, 2019; Dean, Churchill and Ruppanner, 2022). The need for more egalitarian involvement not only in household chores and childcare (Bolzendahl and Myers, 2004; Martinez-Restrepo and Ramos-Jaimes, 2017) but in broader aspects of child rearing was apparent. Taking

care of children was an area that caused stress in participants' lives, and the burden could be lessened if shared.

Women also noted how their daughter's experiences of wellbeing were gendered. In some cases, participants recalled that their daughters were single mothers themselves and that the lack of support constrained their wellbeing. In other cases, participants noted how their daughters could not access higher education due to care work and a lack of support and income to study. In one experience, Jacinta noted that she was caring for her grandchildren because the father (her son) could not be expected to take responsibility. Lastly, in some cases, it was apparent how women themselves perpetuated patriarchy in their homes, such as Rocio who had different expectations for her male and female children.

### ***8.3 A Reflection on Methodology and Methodological Contributions***

This dissertation illustrated the contribution of qualitative methods to the study of wellbeing. Often, so-called "soft" factors are not paid enough attention to because they are not readily measurable or quantifiable using standardised approaches. My qualitative methodology allowed me to understand and observe aspects that I would not have been able to see otherwise, allowing me to see what wellbeing meant for women in particular contexts in Paraguay - contributing to a fuller and more nuanced understanding of wellbeing. What is more, I found that a combination of methods, such as observations, life history interviews, wellbeing maps, and phone interviews, were effective tools for obtaining these insights into definitions and experiences of wellbeing, showing the importance of a multi-method qualitative approach. In addition, and as mentioned previously, I started this research with a challenge when most FP programme participants left FP's intervention. Nevertheless, I continued to follow women who left FP programming to understand their lived experiences through time to understand wellbeing. In other words, due to my flexible qualitative research design, my study evolved from understanding women's wellbeing from the point of view of a specific poverty intervention, to understanding wellbeing more generally and to comprehend causal pathways in context.

The biographical life course perspective of this research allowed me to understand the role of temporality in women's wellbeing. This has given me unique insights into how programming fits

into family lives. This methodology also allowed me to understand things I could not have understood without a qualitative biographical approach; I was able to have a deeper understanding of the complexity of women's lives and was able to make the invisible visible. For example, the temporal lens of wellbeing showed how the past experiences and the aspirational future of women's life experiences affected how women made decisions in the present. To be more specific, many women who did not have access to education now work very hard to provide resources for their children so they can have access to education. In this way, using qualitative biographical methods, I was able to understand the contingencies of complex pathways.

#### ***8.4 Programme & Policy Implications***

The empirical findings I have presented have important implications for poverty policy and programming. First, this research confirms the value of a wellbeing lens in public policy and practice. Due to the multidimensional, interconnected, contextual, and subjective nature of wellbeing, it is imperative for interventions not to assume a universal approach to wellbeing, but rather to investigate how wellbeing is understood by the people who are the subjects of research. An important finding here is that it is crucial to understand what wellbeing means for each person, and that an appreciation of local realities is key because wellbeing meant different things to each person. Due to this, it is imperative for poverty interventions and programmes to be personalised to the needs of each person.

Second, this research has shown how important it is to have a temporal lens in interventions. Specifically, this research showed how looking at people who withdrew from programmes (whose experiences are typically not studied over time) allowed us to have a more comprehensive view of why and how participants leave and then re-enter interventions. By maintaining engagement with women who left FP programming, I was able to observe issues with Fundación Paraguaya's intervention. To illustrate, I was able to better observe how dynamic participants' relationships with FP were; some participants who left returned, and others who had been in FP for an extended period of time (like Valeria and Jimena), left during the period of the research. My methods not only allow me to capture their life story and how their wellbeing has fluctuated, but I also captured impacts in these women's lives during their participation in the Poverty Stoplight, and after the programme. For example, I have one case where a woman successfully "graduated" from the

Poverty Stoplight programme but a few months later was in debt with FP. If I had only looked at monitoring data at one point in time, I would not be able to observe these factors.

Third, it is important for interventions to have a relational view. It is crucial that programmes and policies shift from focusing on enhancing resources for individuals, to focus on improving material, subjective, and relational wellbeing of families and communities. Specifically, when working with women, it is imperative to understand their roles as mothers and carers and how these responsibilities affect their daily lives. What is more, understanding women's care responsibilities through time using a caringscapes perspective supports a multidimensional and dynamic view of how complex needs are and how care responsibilities change over time (McKie, Gregory and Bowlby, 2004). Moreover, since one significant finding was that women's wellbeing was directly connected to the wellbeing of their children and close family, it is important that interventions that seek to improve the lives of women have a collective approach and also focus on the lives of their children and close family, and not take an individual approach.

Fourth, this research has also shown the importance of a biographical life course lens in development work and interventions. This perspective offers a comprehensive and critical perspective which focuses on women's lives over time. This helps us understand the process rather than focus on the outcome. I suggest that qualitative research should be carried out before programme design to better understand the needs and constraints of program participants and how programme comes in and out of women's lives. In addition, it is important for research to look at women's lives outside the intervention. Currently, most research and evaluations on interventions only look at the specific programme. Due to this, very little research looks at the "big picture" of women's lives and whether interventions relate to women's lives.

In relation to Fundación Paraguaya, and although this research is not intended to be an evaluation of FP's services, I observed that FP's poverty intervention has the potential to improve participants' wellbeing but must also adjust some elements of the implementation of its intervention. Regarding the positive aspects, I observed FP's intervention was context-specific, personalised, and that the Poverty Stoplight indicators were aligned to what participants identified as important elements of wellbeing. Most indicators were aligned to participants' lives and needs, although I wonder if a "*tranquilo*" indicator might be needed. Further, due to the highly relational conception women had



of wellbeing, using the family as a unit of analysis is also promising. Moreover, women valued that FP gave them loans even though they were informal workers and on the national debtor list, and women also appreciated FP's health insurance.

In terms of recommendations, I suggest FP be more explicit with the rules regarding the village banking groups, especially with new clients. It is crucial that participants understand what participating in a group loan implies and that the programme recommend that participants' take out loans with people they know and trust. I also observed that more communication with participants in groups was needed. Regarding the national debtor list, I recommend that FP consider other alternatives rather than putting clients who do not repay their loans automatically on the national debtor list. In terms of the application of the Poverty Stoplight self-diagnosis, I observed that there were many discrepancies in implementation between different mentors. I also noted that the tool was applied in haste, and due to this, it did not meet its aim of inspiring, motivating, or helping women gain consciousness of their needs. Moreover, most participants did not remember the indicators they needed to work on, and there was also a lack of follow through from FP mentors after women completed their Poverty Stoplight self-diagnosis. Further, I think the role of mentor in the Poverty Stoplight programme could be strengthened, especially considering the importance of relationships in women's understandings of wellbeing, and work towards coaching and accompanying women to reach their goals.

In addition, I also observed a lack of knowledge on behalf of participants of FP's programmes. When I asked participants who had left FP's programme what they needed to improve their wellbeing, many participants mentioned needing programmes that were already part of FP's intervention. For example, participants mentioned the need for health care coverage, assistance with starting a business, someone to talk to, and guidance to overcome particular challenges- all elements that are hypothetically part of FP's intervention. However, women did not access these services and supports because they left FP or due to the lack of correct programme implementation.

Lastly, in relation to the government, I observed that it was mostly absent from women's lives and that there are many opportunities for the local and national government to be more involved in women's lives. The only area where the government had an important role was in housing policy,

but it was incomplete due to the fact that most women did not have their land title. Women also recalled using the government's public health system but noted that this service had poor quality. Currently, most of the Paraguayan government's social policy refers to providing material resources to people living in poverty. However, I found that although women participants did mention material resources as being necessary for their wellbeing, material elements were mainly seen as instruments for covering other wellbeing domains, especially in terms of their relationships. This is important to highlight because it shows that the way women living in poverty conceptualise wellbeing is not easily captured by narrow economic approaches that have dominated poverty analysis and interventions (Kabeer, 2008; Coulthard, 2011).

### ***8.5 Recommendations for further research***

This research clarified important questions regarding the wellbeing of women living in poverty, however, it also raised some additional issues that can illuminate further research. First, it would be interesting to explore the conceptualisations of wellbeing of women in Paraguay from other social strata (women not living in poverty, women living in extreme poverty), as well as women from different geographical areas. Further, it would be interesting to explore the conceptualisations of wellbeing of participants of other programmes, such as collective loan schemes, as well as government interventions such as conditional cash transfers, to better understand their role in promoting wellbeing. Second, in continuing with the family focus, it would be interesting to carry out research with other family members of families, such as spouses and children, among others, to understand different perspectives on wellbeing, as well as explore the role of gender in conceptualising wellbeing to offer complementary perspectives. Third, and in line with the second point, I suggest further exploring the concept of "family wellbeing" instead of individual wellbeing. This suggestion is because most interventions focus on individuals, and my research found that people, specifically women, have collective experiences and understanding of what being well means. This suggestion would also apply to poverty interventions which mostly focus on the individual, and not on the family. Fourth, my findings show that positive and negative aspects of wellbeing often coincide, and that there is no straightforward binary between well and illbeing. Thus, more research is needed to understand the tension between wellbeing and illbeing in women's conceptualisations of wellbeing. Fifth and lastly, it would be interesting to continue the longitudinal work with the same participants to continue mapping how their wellbeing continues to

change over time. This could contribute to further understanding the biographical life course approach and explore how the longitudinal aspect of programme participation continue over a longer period.

Finally, in this research, my objective was to understand the wellbeing of women participating in a poverty intervention in Paraguay. All in all, focusing on participants' own definitions and understandings of wellbeing I found that wellbeing must be understood as multidimensional, interconnected, fuzzy, contextual, and subjective. To do this, it is crucial to understand the biographical, temporal, dynamic, and relational components that directly impact women's wellbeing. Moreover, women's voices should be at the forefront of our understandings of wellbeing. I was fortunate enough to listen to the voices of women who – in the words of the participant quoted in the title of this dissertation – *never let their guard down to get ahead*. I hope we can continue listening to be better suited to support and accompany these women in their journey to being well.

### Bibliography

- ABC Color (2016) 'Informconf, paradoja laboral'. Available at: <https://www.abc.com.py/nacionales/informconf-paradoja-laboral-1517553.html>
- ABC Color (2019) 'Crack: barato y mortal'. Available at: <https://www.abc.com.py/nacionales/paco-barata-masiva-y-mortal-1685235.html>
- Abente Brun, D. (2020) 'Paraguay 2019: The Unusual Beginning of a Government Without a Honeymoon', *Revista de Ciencia Politica*, 40(2), pp. 457–481.
- Abramo, L., Cecchini, S. and Morales, B. (2019) 'Social Programmes, Poverty Eradication and Labour Inclusion. Lessons from Latin America and the Caribbean'. Rochester, NY. Available at: <https://papers.ssrn.com/abstract=3398664>
- Addison, T. et al. (2008) 'The Chronic Poverty Report 2008-09: Escaping Poverty Traps', Manchester: Chronic Poverty Research Centre, Brooks World Poverty Institute [Preprint].
- Addison, T., Hulme, D. and Kanbur, R. (2009) *Poverty Dynamics: Interdisciplinary Perspectives*. OUP Oxford.
- Alasuutari, P., Bickman, L. and Brannen, J. (2008) 'The SAGE handbook of social research methods', *Handbook of social research methods* [Preprint].
- Alkire, S. and Santos, M.E. (2013a) 'A Multidimensional Approach: Poverty Measurement & Beyond', *Social Indicators Research*, 112(2), pp. 239–257.
- Alkire, S. and Santos, M.E. (2013b) 'Measuring Acute Poverty in the Developing World: Robustness and Scope of the Multidimensional Poverty Index', *Oxford Poverty & Human Development Initiative (OPHI)* [Preprint]. Available at: [http://www.ophi.org.uk/wp-content/uploads/OPHI-wp38\\_with\\_note.pdf](http://www.ophi.org.uk/wp-content/uploads/OPHI-wp38_with_note.pdf).
- Appadurai, A. (2004) 'The Capacity to Aspire: Culture and the Terms of Recognition', in V. Rao and M. Walton (eds) *Culture and Public Action*. Stanford, CA: Stanford University Press, pp. 59–84.
- Arriagada, I. (2002) 'Cambios y desigualdad en las familias latinoamericanas'.
- Atkinson, S., Fuller, S. and Painter, J. (2016) *Wellbeing and place*. Routledge London/New-York.
- Attah, R. (2017) *Significant others: the influence of support relationships and the Livelihood Empowerment Against Poverty (LEAP) cash transfer programme on the wellbeing of vulnerable urban people in Ghana*. University of Bath.
- Bakketeig, E. et al. (2020) 'Deconstructing doing well; what can we learn from care experienced young people in England, Denmark and Norway?', *Children and Youth Services Review*, 118.

- Banco Central del Paraguay (BCP) (2022) Anexo Estadístico del Informe Económico. Asuncion, Paraguay: Banco Central del Paraguay. Available at: <https://www.bcp.gov.py/anexo-estadistico-del-informe-economico-i365>.
- Banerjee, A. et al. (2015) 'A multifaceted program causes lasting progress for the very poor: Evidence from six countries'. Available at: <https://doi.org/10.1126/science.1260799>.
- Barrett, Christopherb. and Carter, Michaelr. (2013) 'The Economics of Poverty Traps and Persistent Poverty: Empirical and Policy Implications', *The Journal of Development Studies*, 49(7), pp. 976–990. Available at: <https://doi.org/10.1080/00220388.2013.785527>.
- Barrientos, A. and Hulme, D. (2005) 'Chronic Poverty and Social Protection: Introduction', *The European Journal of Development Research*, 17(1), pp. 1–7. Available at: <https://doi.org/10.1080/09578810500066423>.
- Baulch, B. and Davis, P. (2008) 'Poverty dynamics and life trajectories in rural Bangladesh', *International Journal of Multiple Research Approaches*, 2(2), pp. 176–190. Available at: <https://doi.org/10.5172/mra.455.2.2.176>.
- Beck, T., Demirgüç-Kunt, A. and Levine, R. (2007) 'Finance, inequality and the poor', *Journal of economic growth*, 12(1), pp. 27–49.
- Bennett, F. and Daly, M. (2014) *Poverty through a Gender Lens: Evidence and Policy Review on Gender and Poverty*. University of Oxford, p. 149.
- Berlant, L. (2011) *Cruel Optimism*. North Carolina, UNITED STATES: Duke University Press. Available at: <http://ebookcentral.proquest.com/lib/suss/detail.action?docID=1172993> (Accessed: 15 November 2021).
- Bermúdez, Á. (2016) 'Criadazgo, la cuestionada práctica de los paraguayos que “adoptan” niños como empleados domésticos', *BBC News Mundo*, 16 June. Available at: <https://www.bbc.com/mundo/noticias-america-latina-36544713> (Accessed: 16 May 2020).
- Birch, M. and Miller, T. (2002) 'Encouraging participation: Ethics and responsibilities', *Ethics in qualitative research*, pp. 91–106.
- Biswas-Diener, R. and Diener, E.D. (2006) 'The subjective well-being of the homeless, and lessons for happiness', *Social Indicators Research*, 76(2), pp. 185–205.
- Blackmore, C. and White, S. (2015) *Cultures of Wellbeing: Method, Place, Policy*. London, UNITED KINGDOM: Palgrave Macmillan UK. Available at: <http://ebookcentral.proquest.com/lib/suss/detail.action?docID=4082296>
- Blaikie, N. (2009) *Designing social research*. Polity.
- Boarini, R., Kolev, A. and McGregor, A. (2014) 'Measuring Well-being and Progress in Countries at Different Stages of Development: Towards a More Universal Conceptual Framework'. Available at: <https://doi.org/10.1787/5jxss4hv2d8n-en>.

- Boddy, J. et al. (2010) 'The research ethics guidebook: a resource for social scientists', The research ethics guidebook: a resource for social scientists [Preprint]. Available at: <http://www.ethicsguidebook.ac.uk>
- Boddy, J. (2018) 'Troubling meanings of "family" for young people who have been in care: From policy to lived experience', p. 32.
- Boddy, J., Bakketeig, E. and Østergaard, J. (2019) 'Navigating precarious times? The experience of young adults who have been in care in Norway, Denmark and England', *Journal of Youth Studies*, pp. 1–16. Available at: <https://doi.org/10.1080/13676261.2019.1599102>.
- Bolzendahl, C.I. and Myers, D.J. (2004) 'Feminist attitudes and support for gender equality: Opinion change in women and men, 1974–1998', *Social forces*, 83(2), pp. 759–789.
- Bowden, A. et al. (2002) 'Methods for pre-testing and piloting survey questions: illustrations from the KENQOL survey of health-related quality of life', *Health policy and planning*, 17(3), pp. 322–330.
- Bowlby, S. and McKie, L. (2019) 'Care and caring: An ecological framework', *Area*, 51(3), pp. 532–539. Available at: <https://doi.org/10.1111/area.12511>.
- Bradshaw, S. (2008) 'From structural adjustment to social adjustment: a gendered analysis of conditional cash transfer programmes in Mexico and Nicaragua', *Global Social Policy*, 8(2), pp. 188–207.
- Bradshaw, S. (2013) 'Women's decision-making in rural and urban households in Nicaragua: the influence of income and ideology', *Environment and Urbanization*, 25(1), pp. 81–94.
- Bradshaw, S., Chant, S. and Linneker, B. (2019) 'Challenges and Changes in Gendered Poverty: The Feminization, De-Feminization, and Re-Feminization of Poverty in Latin America', *Feminist Economics*, 25(1), pp. 119–144. Available at: <https://doi.org/10.1080/13545701.2018.1529417>.
- Brannen, J. (2003) 'Towards a Typology of Intergenerational Relations: Continuities and Change in Families', *Sociological Research Online*, 8(2), pp. 50–60. Available at: <https://doi.org/10.5153/sro.800>.
- Brannen, J. (2006) 'Cultures of Intergenerational Transmission in Four-Generation Families', *The Sociological Review*, 54(1), pp. 133–154. Available at: <https://doi.org/10.1111/j.1467-954X.2006.00605.x>.
- Brannen, J. (2012) 'Life Story Talk: Some Reflections on Narrative in Qualitative Interviews', *Sociological Research Online*, 18(2), p. 15.
- Brau, J.C. and Woller, G.M. (2004) 'Microfinance: A comprehensive review of the existing literature', *The Journal of Entrepreneurial Finance*, 9(1), pp. 1–28.
- Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3(2), pp. 77–101. Available at: <https://doi.org/10.1191/1478088706qp063oa>.

- Bryman, A. (2015) *Social research methods*. Oxford university press.
- Burt, M. (2016) *The Poverty Stoplight: A New Metric for Microfinance*. Doctor of Philosophy (PhD). Tulane University.
- Caballero, E.G. et al. (2017) 'Composition of out-of-pocket health spending in the health system of Paraguay', *Memorias del Instituto de Investigaciones en Ciencias de la Salud*, 15(3), pp. 64–72.
- Calestani, M. (2012) *An anthropological journey into well-being: insights from Bolivia*. Springer Science & Business Media.
- Calman, L., Brunton, L. and Molassiotis, A. (2013) 'Developing longitudinal qualitative designs: lessons learned and recommendations for health services research', *BMC medical research methodology*, 13(1), p. 14.
- Camacho, A. et al. (2014) 'Addressing access and behavioral constraints through social intermediation services: a review of Chile Solidario and Red Unidos'.
- Camfield, L. (2006) 'Why and How of Understanding "Subjective" Well-being: Exploratory work by the WeD group in four developing countries.'
- Camfield, L. et al. (2013) 'Cultures of Aspiration and Poverty? Aspirational Inequalities in Northeast and Southern Thailand', *Social Indicators Research*, 114. Available at: <https://doi.org/10.1007/s11205-012-0189-3>.
- Camfield, L., Choudhury, K. and Devine, J. (2009) 'Well-being, Happiness and Why Relationships Matter: Evidence from Bangladesh', *Journal of Happiness Studies*, 10(1), pp. 71–91. Available at: <https://doi.org/10.1007/s10902-007-9062-5>.
- Camfield, L., Crivello, G. and Woodhead, M. (2008) 'Wellbeing Research in Developing Countries: Reviewing the Role of Qualitative Methods', *Social Indicators Research*, 90(1), p. 5. Available at: <https://doi.org/10.1007/s11205-008-9310-z>.
- Camfield, L., Guillen-Royo, M. and Velazco, J. (2010) 'Does Needs Satisfaction Matter for Psychological and Subjective Wellbeing in Developing Countries: A Mixed-Methods Illustration from Bangladesh and Thailand', *Journal of Happiness Studies*, 11(4), pp. 497–516. Available at: <https://doi.org/10.1007/s10902-009-9154-5>.
- Camfield, L. and McGregor, J.A. (2009) 'Editorial', *Applied Research in Quality of Life*, 4(2), pp. 129–134. Available at: <https://doi.org/10.1007/s11482-009-9078-6>.
- Camfield, L. and Ruta, D. (2007) "'Translation is not enough": using the Global Person Generated Index (GPGI) to assess individual quality of life in Bangladesh, Thailand, and Ethiopia', *Quality of Life Research*, 16(6), pp. 1039–1051.
- Camfield, L. and Skevington, S.M. (2008) 'On Subjective Well-being and Quality of Life', *Journal of Health Psychology*, 13(6), pp. 764–775. Available at: <https://doi.org/10.1177/1359105308093860>.

- Camfield, L., Streuli, N. and Woodhead, M. (2008) Children's Well-being in Contexts of Poverty: Approaches to Research, Monitoring and Participation. Young Lives Technical Note 12. Available at: [https://ora.ox.ac.uk/objects/uuid:5ee9c898-eb2e-430c-a378-e5b94752fa4f/download\\_file?file\\_format=pdf&safe\\_filename=TN12-ChildWellBeing.pdf&type\\_of\\_work=Working+paper](https://ora.ox.ac.uk/objects/uuid:5ee9c898-eb2e-430c-a378-e5b94752fa4f/download_file?file_format=pdf&safe_filename=TN12-ChildWellBeing.pdf&type_of_work=Working+paper)
- Camfield, L., Streuli, N. and Woodhead, M. (2009) 'What's the Use of "Well-Being" in Contexts of Child Poverty? Approaches to Research, Monitoring and Children's Participation', *The International Journal of Children's Rights*, 17(1), pp. 65–109. Available at: <https://doi.org/10.1163/157181808X357330>.
- Camfield, L., Streuli, N. and Woodhead, M. (2010) 'Children's Well-being in Developing Countries: A Conceptual and Methodological Review', *European Journal of Development Research*, 22, pp. 398–416. Available at: <https://doi.org/doi:10.1057/ejdr.2010.11>.
- Canavire-Bacarreza, G. et al. (2021) A closer look at the gender gaps in Paraguay during the pandemic, World Bank. Available at: <https://blogs.worldbank.org/latinamerica/closer-look-gender-gaps-paraguay-during-pandemic>
- Cardenas, T. (2010) Incumplimiento del deber alimentario. Encuadre legal como hecho punible. Críticas y propuestas. Asuncion, Paraguay: Universidad Catolica de Asuncion, pp. 435–453. Available at: <https://www.pj.gov.py/ebook/monografias/nacional/penal/Tomas-Cardenas-Incumplimiento-del-Deber.pdf>.
- Chambers, R. (1993) *Challenging the professions: frontiers for rural development*. Intermediate Technology Publications Ltd (ITP).
- Chambers, R. (1994) 'The origins and practice of participatory rural appraisal', *World Development*, 22(7), pp. 953–969. Available at: [https://doi.org/10.1016/0305-750X\(94\)90141-4](https://doi.org/10.1016/0305-750X(94)90141-4).
- Chambers, R. (2006) *Poverty Unperceived: Traps, Biases and Agenda*. Institute of Development Studies. Available at: <http://www.ids.ac.uk/files/Wp270.pdf>
- Chambers, R. (2007) 'Poverty research: methodologies, mindsets and a quiet revolution', in. Paper for the SANPAD Conference The Poverty Challenge 2007, Durban, South Africa. Available at: <https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/568>
- Chaney, E.M. (2014) *Supermadre: women in politics in Latin America*. University of Texas Press.
- Chant, S. (1997) 'Women-Headed Households: Poorest of the Poor?: Perspectives from Mexico, Costa Rica and the Philippines 1', *IDS bulletin*, 28(3), pp. 26–48.
- Chant, S. (2003) 'Female household headship and the feminisation of poverty: facts, fictions and forward strategies'.
- Chant, S. (2008) 'The 'feminisation of poverty' and the 'feminisation' of anti-poverty programmes: Room for revision?', *The Journal of Development Studies*, 44(2), pp. 165–197.



- Chant, S. (2016) 'Women, girls and world poverty: empowerment, equality or essentialism?', *International Development Planning Review*, 38(1), pp. 1–25.
- Chant, S.H. (2007) *Gender, Generation and Poverty: Exploring the Feminisation of Poverty In Africa, Asia and Latin America*. Edward Elgar Publishing.
- Chant, S.H. (2011) *The international handbook of gender and poverty: concepts, research, policy*. Edward Elgar Publishing.
- Chopra, D. (2014) 'Towards Gender Equality with Care-sensitive Social Protection'. Available at: <https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/3349>
- Chopra, D. (2018) *Initiating women's empowerment; achieving gender equality: Interlinkages amongst Social Protection, Infrastructure and Public Services*. New York, New York: UN Women. Available at: <https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/CSW/63/EGM/Chopra%20Dbackground%20paperdraftEGMSPSP1.pdf>
- Christopher, J.C. (1999) 'Situating psychological well-being: Exploring the cultural roots of its theory and research', *Journal of Counseling & Development*, 77(2), pp. 141–152.
- Chronic Poverty Advisory Network (2016) *New CPAN Infographics on Life-history interviews*, Chronic Poverty Advisory Network. Available at: <http://www.chronicpovertynetwork.org/blog/2016/5/24/new-cpan-infographics-on-life-history-interviews>
- Clarke, V. and Braun, V. (2017) 'Thematic analysis', *The Journal of Positive Psychology*, 12(3), pp. 297–298. Available at: <https://doi.org/10.1080/17439760.2016.1262613>.
- Coleman, J.S. (1988) 'Social capital in the creation of human capital', *American journal of sociology*, 94, pp. S95–S120.
- Conradie, I. and Robeyns, I. (2013) 'Aspirations and Human Development Interventions', *Journal of Human Development and Capabilities*, 14(4), pp. 559–580. Available at: <https://doi.org/10.1080/19452829.2013.827637>.
- Cookson, T. (2018) *Unjust Conditions: Women's Work and the Hidden Cost of Cash Transfer Programs*. University of California Press. Available at: <https://www.ucpress.edu/book/9780520296992/unjust-conditions>
- Copestake, J. (2009) 'Conclusions and Implications for Development Policy and Practice', in J. Copestake (ed.) *Wellbeing and Development in Peru*. New York: Palgrave Macmillan US, pp. 211–230. Available at: [https://doi.org/10.1057/9780230616998\\_8](https://doi.org/10.1057/9780230616998_8).
- Copestake, J. and Camfield, L. (2009) *Measuring subjective wellbeing in Bangladesh, Ethiopia, Peru and Thailand using a personal life goal satisfaction approach*. WeD Working Paper09/45, p. 31.
- Cornwall, A. (1992) 'Body mapping in health RRA/PRA', *RRA Notes*, 16, pp. 69–76.

- Corsin-Jiménez, A. (2008) *Culture and Well-Being: Anthropological Approaches to Freedom and Political Ethics*. Pluto Press.
- Coulthard, S., Johnson, D. and McGregor, J.A. (2011) 'Poverty, sustainability and human wellbeing: A social wellbeing approach to the global fisheries crisis', *Global Environmental Change*, 21(2), pp. 453–463. Available at: <https://doi.org/10.1016/j.gloenvcha.2011.01.003>.
- Coulthard, S. and McGregor, J.A. (2015) 'Exploring wellbeing in fishing communities', p. 37.
- Crivello, G., Camfield, L. and Woodhead, M. (2009) 'How Can Children Tell Us About Their Wellbeing? Exploring the Potential of Participatory Research Approaches within Young Lives', *Social Indicators Research*, 90(1), pp. 51–72. Available at: <https://doi.org/10.1007/s11205-008-9312-x>.
- Crivello, G. and Morrow, V. (2019) 'Against the Odds: Why Some Children Fare Well in the Face of Adversity', *The Journal of Development Studies*, pp. 1–18. Available at: <https://doi.org/10.1080/00220388.2019.1626837>.
- Crivello, G., Morrow, V. and Wilson, E. (2013) *Young Lives Longitudinal Qualitative Research: A Guide for Researchers*. Technical Note 26. Young Lives. Available at: <https://www.younglives.org.uk/sites/www.younglives.org.uk/files/TN26-qualitative-guide-for-researchers.pdf>
- Cummins, R.A. (2005) 'The domains of life satisfaction: An attempt to order chaos', in *Citation classics from social indicators research*. Springer, pp. 559–584.
- Curtis, B. (2021) 'Multidimensional measurements of poverty and wellbeing', in S. Cosgrove and B. Curtis (eds) *Understanding Global Poverty*. 2nd edn. London: Routledge.
- Dahal, M. and Fiala, N. (2020) 'What do we know about the impact of microfinance? The problems of statistical power and precision', *World Development*, 128, p. 104773.
- Dalton, P.S., Ghosal, S. and Mani, A. (2016) 'Poverty and Aspirations Failure', *The Economic Journal*, 126(590), pp. 165–188. Available at: <https://doi.org/10.1111/econj.12210>.
- Daminger, A. (2019) 'The cognitive dimension of household labor', *American Sociological Review*, 84(4), pp. 609–633.
- Dasgupta, P. (1995) *An Inquiry into Well-Being and Destitution*. Oxford: Oxford University Press. Available at: <https://doi.org/10.1093/0198288352.001.0001>.
- Davies, J. et al. (2018) *Conducting Life History Interviews: A How-to Guide*. ASSAR. Available at: <http://www.assar.uct.ac.za/news/conducting-life-history-interviews-how-guide>.
- Davis, A. and Hill, P. (2001) *Poverty, Social Exclusion, and Mental Health*. London: Mental Health Foundation.

- Davis, P. (2007) Discussions Among the Poor: Exploring Poverty Dynamics with Focus Groups in Bangladesh. SSRN Scholarly Paper ID 1653340. Rochester, NY: Social Science Research Network. Available at: <https://doi.org/10.2139/ssrn.1653340>.
- Davis, P. and Baulch, B. (2011) 'Parallel Realities: Exploring Poverty Dynamics Using Mixed Methods in Rural Bangladesh', *Journal of Development Studies*, 47(1), pp. 118–142. Available at: <https://doi.org/10.1080/00220388.2010.492860>.
- Dean, L., Churchill, B. and Ruppanner, L. (2022) 'The mental load: building a deeper theoretical understanding of how cognitive and emotional labor overload women and mothers', *Community, Work & Family*, 25(1), pp. 13–29. Available at: <https://doi.org/10.1080/13668803.2021.2002813>.
- Denzin, N.K. and Lincoln, Y.S. (1998) 'The landscape of qualitative research: Theory and issues'.
- Dercon, S. (2003) 'Growth and Shocks: evidence from rural Ethiopia', IDEAS Working Paper Series from RePEc [Preprint].
- Devereux, S. and McGregor, J.A. (2014) Transforming social protection: Human wellbeing and social justice. Springer.
- Devine, J., Camfield, L. and Gough, I. (2008) 'Autonomy or Dependence – or Both?: Perspectives from Bangladesh', *Journal of Happiness Studies*, 9(1), pp. 105–138. Available at: <https://doi.org/10.1007/s10902-006-9022-5>.
- Devine, J. and Deneulin, S. (2011) 'Negotiating religion in everyday life: A critical exploration of the relationship between religion, choices and behaviour', *Culture and Religion*, 12(1), pp. 59–76. Available at: <https://doi.org/10.1080/14755610.2011.557014>.
- DGEEC (2019) 'Principales Resultados de Pobreza Monetaria Y Distribución De Ingreso – 2019'. Available at: <https://www.dgeec.gov.py/publication-single.php?codec=MTEEx>.
- Diener, E. (1984) 'Subjective well-being', *Psychological Bulletin*, 95(3), pp. 542–575.
- Dorward, A. et al. (2009) 'Hanging in, stepping up and stepping out: livelihood aspirations and strategies of the poor', *Development in Practice*, 19(2), pp. 240–247. Available at: <https://doi.org/10.1080/09614520802689535>.
- Duvendack, M. and Mader, P. (2020) 'Impact of Financial Inclusion in Low- and Middle-Income Countries: A Systematic Review of Reviews', *Journal of Economic Surveys*, 34(3), pp. 594–629. Available at: <https://doi.org/10.1111/joes.12367>.
- ECLAC (2019) Preliminary Overview of the Economies of Latin America and the Caribbean 2019. Economic Commission for Latin America and the Caribbean (CEPAL). Santiago, Chile: United Nations. Available at: <https://www.cepal.org/en/publications/45001-preliminary-overview-economies-latin-america-and-caribbean-2019>
- Ervin, P.A. et al. (2017) 'Multidimensional Poverty in Paraguay: Trends from 2000 to 2015', *Social Indicators Research* [Preprint]. Available at: <https://doi.org/10.1007/s11205-017-1795-x>.

- Espino, A. (2017) 'Subjective Definitions of Work: The Use of Discussion Groups to Measure Subjective Dimensions of Women's Economic Empowerment in Uruguay', in *Measuring Women's Economic Empowerment: Critical Lessons from South America*.
- Evans, R. et al. (2019) 'Unpacking "family troubles", care and relationality across time and space', *Children's Geographies*, 17(5), pp. 501–513. Available at: <https://doi.org/10.1080/14733285.2019.1655139>.
- Eyben, R. (2013) 'Uncovering the politics of 'evidence' and "results": A framing paper for development practitioners', in *Prepared for the Politics of Evidence Conference in Brighton, UK*.
- Finnis, E. (2017) 'They go to the city, and sometimes they come back: Conceptualising rural and urban spaces through experiences of circular migration in Paraguay', *Critique of Anthropology*, 37(4), pp. 383–400.
- Fischer, E.F. (2014) *The good life: Aspiration, dignity, and the anthropology of wellbeing*. Stanford University Press.
- Flick, U. (2014) 'Mapping the field', *The SAGE handbook of qualitative data analysis*, 1, pp. 3–18.
- Folbre, N. (1994) *Who pays for the kids?: Gender and the structures of constraint*. Taylor & Francis US.
- Fukuda-Parr, S. (1999) 'What does feminization of poverty mean? It isn't just lack of income', *Feminist economics*, 5(2), pp. 99–103.
- Fundacion Paraguaya (2020) *Memoria 2020*. Asuncion, Paraguay.
- Fundación Paraguaya (no date a) *Poverty Stoplight Application Manual*. Available at: [http://www.fundacionparaguaya.org.py/upload//documentos\\_contenidos/1402337758.pdf](http://www.fundacionparaguaya.org.py/upload//documentos_contenidos/1402337758.pdf).
- Fundacion Paraguaya (no date) 'Poverty Stoplight Brochure'.
- Fundación Paraguaya (no date b) 'Poverty Stoplight Strategic Plan', pp. 1–12.
- Gallie, D. and Paugam, S. (2002) *Social precarity and social integration*. Office for official publications of the European communities Luxembourg (Report for the European Commission Based on Eurobarometer 56.1, 1).
- Garcia-Alonso, J. et al. (2019) *Lightening the Mental Load that Holds Women Back*. Boston Consulting Group.
- Gardner, W. and Gabriel, S. (2004) 'Gender Differences in Relational and Collective Interdependence: Implications for Self-Views, Social Behavior, and Subjective Well-Being.', *The psychology of gender [Preprint]*.
- Gauntlett, D. (2007) *Creative explorations: New approaches to identities and audiences*. Routledge.

- Ghosh, A., Singh, A. and Kayastha, B. (2017) *A Trapeze Act: Balancing Unpaid Care Work and Paid Work by Women in Nepal*. Brighton: Institute of Development Studies. Available at: <https://www.ids.ac.uk/publications/balancing-unpaid-care-work-and-paid-work-by-women-in-nepal-a-trapeze-act/>
- Glaser, B.G. and Strauss, A.L. (2017) *The discovery of grounded theory: Strategies for qualitative research*. Routledge.
- Goetz, A.M. and Gupta, R.S. (1996) 'Who takes the credit? Gender, power, and control over loan use in rural credit programs in Bangladesh', *World development*, 24(1), pp. 45–63.
- Gomez, J.M. (2014) *Pobreza y Vulnerabilidad Social en Paraguay*. Nota de Política 21. CADEP, p. 24.
- Gonzalez, D. (2020) *Respuesta de los Hogares al Shock del COVID-19 en Paraguay*. World Bank. Available at: <https://pubdocs.worldbank.org/en/157471606746438035/HFS-Paraguay-Presentacion.pdf>
- Gough, I. (2003) 'Lists and Thresholds: Comparing the Doyal-Gough Theory of Human Need with Nussbaum's Capabilities Approach'.
- Gough, I. (2004) 'Human well-being and social structures: Relating the universal and the local', *Global social policy*, 4(3), pp. 289–311.
- Gough, I. and McGregor, J.A. (eds) (2007a) 'Researching wellbeing across the disciplines: some key intellectual problems and ways forward', in Bevan, P., *Wellbeing in Developing Countries: from theory to research*. Cambridge: Cambridge University Press, pp. 283–315. Available at: <https://doi.org/10.1017/CBO9780511488986.014>.
- Gough, I. and McGregor, J.A. (2007b) *Wellbeing in developing countries: from theory to research*. Cambridge, UK: Cambridge University Press. Available at: <https://doi.org/10.1017/CBO9780511488986>
- Gough, I., McGregor, J.A. and Camfield, L. (2006) 'Wellbeing in Developing Countries: Conceptual Foundations of the WeD programme'. Available at: <http://www.welldev.org.uk/research/workingpaperpdf/wed19.pdf> (Accessed: 20 November 2017).
- Government of Paraguay (2021) *Plan Nacional de Desarrollo Paraguay 2030 - Updated*.
- Greeley, M. (2015) *Addressing psychological wellbeing*. Institute of Development Studies. Available at: <https://www.mixcloud.com/ids/martin-greeley-addressing-psychological-wellbeing/?play=fb>
- Guereña, A. (2013) 'The Soy Mirage: The limits of corporate social responsibility – the case of the company Desarrollo Agrícola del Paraguay', p. 52.
- Gupte, J. and te Lintelo, D. (2015) *Informal Work and Wellbeing in Urban South Asia: Who Succeeds, Who Fails and Under What Conditions? Final Report*. Institute of Development Studies, p. 216.

- Hakim, C. (2000) *Research design: Successful designs for social and economic research*. Psychology Press.
- Hashemi, S.M., Schuler, S.R. and Riley, A.P. (1996) 'Rural credit programs and women's empowerment in Bangladesh', *World development*, 24(4), pp. 635–653.
- Helliwell, J.F., Huang, H. and Wang, S. (2019) 'Changing world happiness', *World happiness report*, 2019, pp. 11–46.
- Holvoet, N. (2005) 'The impact of microfinance on decision-making agency: evidence from South India', *Development and change*, 36(1), pp. 75–102.
- Homewood, K., Nielsen, M.R. and Keane, A. (2020) 'Women, wellbeing and Wildlife Management Areas in Tanzania', *The Journal of Peasant Studies*, 0(0), pp. 1–28. Available at: <https://doi.org/10.1080/03066150.2020.1726323>.
- Huovinen, R. and Blackmore, C. (2016) 'The Dynamics of Relational Wellbeing in the Context of Mobility in Peru', in S.C. White and C. Blackmore (eds) *Cultures of Wellbeing*. London: Palgrave Macmillan UK, pp. 175–197. Available at: [https://doi.org/10.1057/9781137536457\\_7](https://doi.org/10.1057/9781137536457_7).
- Ibrahim, S. (2011) 'Poverty, aspirations and well-being: Afraid to aspire and unable to reach a better life—voices from Egypt', *Brooks World Poverty Institute Working Paper [Preprint]*, (141).
- ILO (2015) *Formalization of the informal economy: Area of critical importance*, p. 9.
- Instituto Nacional de Estadística (INE) (2021) *Encuesta Permanente de Hogares Continua*. Available at: <https://www.ine.gov.py>.
- Instituto Nacional de Estadística (INE) (2021) *Situaciones Adversas (efectos del COVID – 19). Encuesta Permanente de Hogares Continua (EPHC) 2° Trimestre 2020*. Available at: <https://www.ine.gov.py/covid-19/>.
- International Labour Organisation (2008) *Global Employment Trends for Women*. Geneva: ILO.
- Isserles, R.G. (2003) 'Microcredit: The rhetoric of empowerment, the reality of "development as usual"', *Women's Studies Quarterly*, 31(3/4), pp. 38–57.
- Janesick, V.J. (1998) 'Stretching', *Exercises for Qualitative Researchers*, p. 271.
- Jha, S. (2011) *Well-being and religion in India: a preliminary literature review*. Working Paper 68. Centre for Development Studies, University of Bath.
- Jha, S. and White, S.C. (2016) '"The Weight Falls on My Shoulders": Close Relationships and Women's Wellbeing in India', in S.C. White and C. Blackmore (eds) *Cultures of Wellbeing*. London: Palgrave Macmillan UK, pp. 144–171. Available at: [https://doi.org/10.1057/9781137536457\\_6](https://doi.org/10.1057/9781137536457_6).

- Jones, N.A. and Sumner, A. (2011) Child poverty, evidence and policy: Mainstreaming children in international development. Policy Press. Available at: <https://doi.org/10.1332/policypress/9781847424464.001.0001>.
- Kabeer, N. (2001) 'Conflicts over credit: Re-evaluating the empowerment potential of loans to women in rural Bangladesh', *World development*, 29(1), pp. 63–84.
- Kabeer, N. (2003) 'Gender equality, poverty eradication and the millennium development goals: Promoting women's capabilities and participation', *Women in Development Discussion Paper Series*, 1, p. 26.
- Kabeer, N. (2005) 'Is Microfinance a "Magic Bullet" for Women's Empowerment? Analysis of Findings from South Asia', *Economic and Political Weekly*, pp. 4709–4718.
- Kabeer, N. (2008) 'Paid work, women's empowerment and gender justice: critical pathways of social change'.
- Kabeer, N. (2017) 'Economic Pathways to Women's Empowerment and Active Citizenship: What Does The Evidence From Bangladesh Tell Us?', *Journal of Development Studies*, 53(5), pp. 649–663. Available at: <https://doi.org/10.1080/00220388.2016.1205730>.
- King, N. (2004) 'Using templates in the thematic analysis of text', in C. Cassell and G. Symon (eds) *Essential guide to qualitative methods in organizational research*. London, UK: Sage, pp. 257–270.
- Kolb, S.M. (2012) 'Grounded theory and the constant comparative method: Valid research strategies for educators', *Journal of emerging trends in educational research and policy studies*, 3(1), pp. 83–86.
- Krenz, K., Gilbert, D.J. and Mandayam, G. (2014) 'Exploring women's empowerment through "credit-plus" microfinance in India', *Affilia*, 29(3), pp. 310–325.
- Laderchi, C.R. (2001) *Participatory methods in the analysis of poverty: a critical review*. Queen Elizabeth House Oxford.
- Lahiri-Dutt, K. and Samanta, G. (2006) 'Constructing Social Capital: Self-Help Groups and Rural Women's Development in India', *Geographical Research*, 44(3), pp. 285–295. Available at: <https://doi.org/10.1111/j.1745-5871.2006.00390.x>.
- Laszlo, S., Renée, L. and Majid, M.F. (2019) *Conditional Cash Transfers, Women's Empowerment and Reproductive Choices*. GROW Working Paper Series.
- Lavers, T. (2008) 'Reconciling the needs and wants of respondents in two rural Ethiopian communities', *Social Indicators Research*, 86(1), pp. 129–147.
- Levy, S. (2001) 'Poverty in Latin America: Where do we come from, where are we going?', *Brookings*. Available at: <https://www.brookings.edu/opinions/poverty-in-latin-america-where-do-we-come-from-where-are-we-going/>

- Levy, S. (2015) 'Is social policy in Latin America heading in the right direction? Beyond conditional cash transfer programs', Op-ed. Brookings Institution, 21.
- Lewis, J. (2007) 'Analysing Qualitative Longitudinal Research in Evaluations', *Social Policy and Society*, Volume 6(Issue 4), pp. 545–556.
- te Lintelo, D.J.H. et al. (2018) 'Wellbeing and urban governance: Who fails, survives or thrives in informal settlements in Bangladeshi cities?', *Cities*, 72, pp. 391–402. Available at: <https://doi.org/10.1016/j.cities.2017.10.002>.
- Lister, R. (2004) *Poverty. Polity*.
- Lloyd-Sherlock, P. and Locke, C. (2008) 'Vulnerable relations: lifecourse, wellbeing and social exclusion in Buenos Aires, Argentina', *Ageing & Society*, 28(8), pp. 1177–1201. Available at: <https://doi.org/10.1017/S0144686X08007794>.
- Locke, C. and Lloyd-Sherlock, P. (2011) 'Qualitative Life Course Methodologies: Critical Reflections from Development Studies', *Development and Change*, 42(5), pp. 1131–1152. Available at: <https://doi.org/10.1111/j.1467-7660.2011.01728.x>.
- Loera Gonzalez, J.J. (2013) *Conflicting Paths to Wellbeing: Raramuri and Mestizo Inter-Ethnic Relations in Northern Mexico*. University of Sussex.
- Lokshin, M. and Ravallion, M. (2004) 'Household Income Dynamics in Two Transition Economies', *Studies in Nonlinear Dynamics and Econometrics*, 8(3), p. 1. Available at: <https://doi.org/10.2202/1558-3708.1182>.
- Loza, J. (2022) 'Latin American domestic workers' momentum in the aftermath of Covid-19 | LSE Latin America and Caribbean', LSE Latin America and Caribbean blog, 12 May. Available at: <https://blogs.lse.ac.uk/latamcaribbean/2022/05/12/latin-american-domestic-workers-covid-19/>
- Ludi, E. and Bird, K. (2007) *Brief No 1 – Understanding Poverty*.
- Mack, N. et al. (2005) *Qualitative Research Methods: A Data Collector's Field Guide*. Family Health International. Available at: [https://guides.library.duke.edu/ld.php?content\\_id=11691400](https://guides.library.duke.edu/ld.php?content_id=11691400)
- Martinez-Restrepo, S. and Ramos-Jaimes, L. (2017) *Measuring Women's Economic Empowerment: Critical Lessons from South America*. Available at: [http://www.repository.fedesarrollo.org.co/bitstream/handle/11445/3482/LIB\\_2017\\_Measuring\\_2\\_Ed.pdf?sequence=9&isAllowed=y](http://www.repository.fedesarrollo.org.co/bitstream/handle/11445/3482/LIB_2017_Measuring_2_Ed.pdf?sequence=9&isAllowed=y)
- Mathews, G. and Izquierdo, C. (2008) *Pursuits of happiness: Well-being in anthropological perspective*. Berghahn books.
- May, V. (2010) 'Lone motherhood as a category of practice', *The Sociological Review*, 58(3), pp. 429–443. Available at: <https://doi.org/10.1111/j.1467-954X.2010.01925.x>.



- McGee, R. and Brock, K. (2001) 'From poverty assessment to policy change: processes, actors and data'.
- McGregor, A., Coulthard, S. and Camfield, L. (2015) *Measuring What Matters: The role of well-being methods in development policy and practice*. Project Note 04. ODI, p. 20.
- McGregor, A. and Sumner, A. (2010) 'Beyond Business as Usual: What Might 3-D Wellbeing Contribute to MDG Momentum?', *IDS Bulletin*, 41(1), pp. 104–112.
- McGregor, J.A. (2006) *Researching Wellbeing: From Concepts to Methodology*. WeD Working Paper 20. University of Bath. Available at: <http://www.welldev.org.uk/research/workingpaperpdf/wed20.pdf>
- McGregor, J.A. (2007) 'Researching wellbeing: from concepts to methodology', in I. Gough and J.A. McGregor (eds) *Wellbeing in Developing Countries: from theory to research*. Cambridge: Cambridge University Press, pp. 316–350. Available at: <https://doi.org/10.1017/CBO9780511488986.015>.
- McGregor, J.A., Camfield, L. and Woodcock, A. (2009) 'Needs, Wants and Goals: Wellbeing, Quality of Life and Public Policy', *Applied Research in Quality of Life*, 4(2), pp. 135–154. Available at: <https://doi.org/10.1007/s11482-009-9069-7>.
- McGregor, J.A. and Sumner, A. (2009) 'After 2015: "3D human wellbeing"', *IDS In Focus Policy Briefing*, 9.
- McIntyre, L. and Munro, J. (2013) "'Nobody helps us": insights from ultra-poor Bangladeshi women on being beyond reach', *Development in Practice*, 23(2), pp. 157–168.
- McIntyre, L. and Rondeau, K. (2013) 'Understanding the aspirations of ultra-poor women in Bangladesh can enhance wellbeing and target development efforts', *International Journal of Wellbeing*, 3(1). Available at: <https://www.internationaljournalofwellbeing.org/index.php/ijow/article/view/90>
- McKie, L., Gregory, S. and Bowlby, S. (2002) 'Shadow times: the temporal and spatial frameworks and experiences of caring and working', *Sociology*, 36(4), pp. 897–924.
- McKie, L., Gregory, S. and Bowlby, S. (2004) *Caringscapes: experiences of caring and working*. CRFR RESEARCH BRIEFING Number 13. Centre for Research on Families and Relationships: University of Edinburgh. Available at: <https://era.ed.ac.uk/bitstream/handle/1842/2807/rb13caringscapes.pdf?sequence=1&isAllowed=y>
- Melamed, C. (2011) *Does development give poor people what they want?* ODI Background note. London: Overseas Development Institute, p. 4. Available at: <http://www.odi.org.uk/sites/odi.org.uk/files/odi-assets/publications-opinion-files/6606.pdf>.
- Mertens, D.M. (2010) 'Transformative mixed methods research', *Qualitative inquiry*, 16(6), pp. 469–474.

- Microfinance Barometer (2019) Microfinance Barometer. Convergences. Available at: [https://www.convergences.org/wp-content/uploads/2019/09/Microfinance-Barometer-2019\\_web-1.pdf](https://www.convergences.org/wp-content/uploads/2019/09/Microfinance-Barometer-2019_web-1.pdf)
- Molyneux, M. (2006) 'Mothers at the Service of the New Poverty Agenda: Progres/Oportunidades, Mexico's Conditional Transfer Programme', *Social Policy & Administration*, 40(4), pp. 425–449. Available at: <https://doi.org/10.1111/j.1467-9515.2006.00497.x>.
- Molyneux, M. (2007) Change and Continuity in Social Protection in Latin America: Mothers at the Service of the State? United Nations Research Institute for Social Development, p. 60. Available at: [http://www.unrisd.org/80256B3C005BCCF9/\(httpAuxPages\)/BF80E0A84BE41896C12573240033C541/\\$file/Molyneux-paper.pdf](http://www.unrisd.org/80256B3C005BCCF9/(httpAuxPages)/BF80E0A84BE41896C12573240033C541/$file/Molyneux-paper.pdf).
- Mooney, A., Statham, J. and Simon, A. (2002) *The pivot generation: Informal care and work after fifty*. Policy Press.
- Morgan, D. (2011) *Rethinking Family Practices*. Springer.
- Motapanyane, M. (2016) 'Introduction: Motherhood, Mothering, and Single-Lone Parenting in Contemporary Perspective', in M. Motapanyane (ed.) *Motherhood and Single-Lone Parenting*. Demeter Press (A Twenty-First Century Perspective), pp. 1–16. Available at: <https://www.jstor.org/stable/j.ctt1rrd8wd.4>
- Muhammad, S. et al. (2021) 'Entrepreneurial Income and Wellbeing: Women's Informal Entrepreneurship in a Developing Context', *Sustainability*, 13(18), p. 10262. Available at: <https://doi.org/10.3390/su131810262>.
- Narayan, D. (2000) *Voices of The Poor: Can Anyone Hear Us?* World Bank.
- Narayan, D. (2005) *Measuring Empowerment*. World Bank. Available at: <https://www.alnap.org/system/files/content/resource/files/main/344100paper0me101official0use0only1.pdf#page=147>
- Neale, B. (2021) 'Fluid Enquiry, Complex Causality, Policy Processes: Making a Difference with Qualitative Longitudinal Research', *Social Policy and Society*, 20(4), pp. 653–669. Available at: <https://doi.org/10.1017/S1474746421000142>
- Neale, B. and Hanna, E. (2012) 'The ethics of researching lives qualitatively through time', *Timescapes methods guide series Guide No, 11*.
- Nussbaum, M.C. (2000) *Women and Human Development: The Capabilities Approach*. Cambridge: University Press (The Seeley Lectures), pp. xxi–xxi. Available at: <https://doi.org/10.1017/CBO9780511841286>.
- OECD (2015) 'How's life in Latin America?'
- OECD (2018) *Estudio Multidimensional de Paraguay: Volumen 2. Análisis detallado y recomendaciones*, p. 40.

- OHCHR (2012) Committee on Protection of Migrant Workers and their families considers report of Paraguay. United Nations Committee on Rights of Migrant Workers. New York: United Nations. Available at: <https://newsarchive.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=12066&LangID=E>
- Oman, S. (2016) 'Measuring National Wellbeing: What Matters to You? What Matters to Whom?', in S.C. White and C. Blackmore (eds) *Cultures of Wellbeing*. London: Palgrave Macmillan UK, pp. 66–94. Available at: [https://doi.org/10.1057/9781137536457\\_3](https://doi.org/10.1057/9781137536457_3).
- OPHI (2018) Global Multidimensional Poverty Index 2018: The Most Detailed Picture to Date of the World's Poorest People. University of Oxford: Oxford Poverty and Human Development Initiative (OPHI). Available at: <https://ophi.org.uk/gmpi-2018/>
- Organization of American States (2018) Análisis de seguimiento de usuarios de cocaínas fumables en programas de atención y tratamiento a dos años del ingreso. Available at: <http://www.cicad.oas.org/oid/pubs/AnalisisdeSeguimiento.pdf>
- Østergaard, J. and Thomson, R. (2020) 'Thinking through cases: articulating variable and narrative logics on a longitudinal analysis of drug use and school drop out', *International Journal of Social Research Methodology*, 23(4), pp. 423–436. Available at: <https://doi.org/10.1080/13645579.2020.1719616>.
- Padmore, T. (2021) Summary Status of Women and Men Report - The Impacts of COVID-19. UN Women. Available at: <https://caribbean.unwomen.org/en/materials/publications/2021/3/summary-report---status-of-women-and-men-in-covid-19>
- Pane Solis, J.C. (2021) How does empowerment happen? Exploring the Process of Empowerment through Narratives of Women Who Participated in Microfinance-Plus Programmes in Paraguay. Institute of Development Studies, University of Sussex.
- Phoenix, A. et al. (2017) *Environment in the lives of children and families*.
- Pineda-Ofreneo, R. and Acosta, M.L. (2001) 'Integrating gender concerns in anti-poverty strategies', *Public Policy*, 5(2), pp. 1–41.
- Pomeranz, D. (2014) The promise of microfinance and women's empowerment: What does the evidence say? EY. Available at: [https://www.hbs.edu/ris/Publication%20Files/EY-The%20promise-of-microfinance-and-womens-empowerment\\_14123436-7f3a-4a87-a76f-94e931c9ed5e.pdf](https://www.hbs.edu/ris/Publication%20Files/EY-The%20promise-of-microfinance-and-womens-empowerment_14123436-7f3a-4a87-a76f-94e931c9ed5e.pdf)
- Poverty Analysis Discussion Group (2012) *Understanding Poverty and Wellbeing: A note with implications for research and policy*. Available at: <https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/7654.pdf>
- Rahman, A. (1999) 'Micro-credit initiatives for equitable and sustainable development: who pays?', *World development*, 27(1), pp. 67–82.

- Rakodi, C. (1999) 'A capital assets framework for analysing household livelihood strategies: Implications for policy', *Development policy review*, 17(3), pp. 315–342.
- Ravallion, M. (2016) *The Economics of Poverty*. Oxford University Press.
- Razavi, S. (1998) *Gendered poverty and social change: an issues paper*. UNRISD Discussion Paper 94. Geneva: United Nations Research Institute for Social Development Geneva.
- Razavi, S. (2007) *The Political and Social Economy of Care in a Development Context: Conceptual Issues, Research Questions and Policy Options*. Paper Number 3. Geneva: United Nations Research Institute for Social Development, p. 50.
- Razavi, S. and Turquet, L. (2016) 'Progress of the world's women 2015–2016: Transforming economies, realizing rights.', *Global Social Policy*, 16(1), pp. 86–93.
- Riessman, C.K. (2008) *Narrative Methods for the Human Sciences*. SAGE.
- Robeyns, I. (2017) *Wellbeing, Freedom and Social Justice: The Capability Approach Re-Examined*. Open Book Publishers. Available at: <https://doi.org/10.11647/OBP.0130>.
- Robson, C. (2002) 'Real world research (Vol. 2)', Malden, MA: Blackwell [Preprint].
- Rodriguez Vignoli, J. (2008) *Spatial distribution, internal migration and development in Latin America and the Caribbean*. Chile: United Nations.
- Rodriguez-Takeuchi, L. (2013) *Incorporating people's values in development: Weighting alternatives*. ODI Methodological Background Note, p. 16.
- Roelen, K. (2017) 'Shame, poverty and social protection'.
- Roelen, K. and Camfield, L. (2015) *Mixed methods research in poverty and vulnerability: sharing ideas and learning lessons*. Springer.
- Roelen, K. and Leon-Himmelstine, C. (2019) 'Graduating Out of Poverty Across Generations: Unpacking Children's Well-being Trajectories in Burundi', *Children & Society* [Preprint]. Available at: <https://doi.org/10.1111/chso.12346>.
- Rojas, M. (2007) 'The complexity of wellbeing: a life-satisfaction conception and a domains-of-life approach', in I. Gough and J.A. McGregor (eds) *Wellbeing in Developing Countries: from theory to research*. Cambridge: Cambridge University Press, pp. 259–280. Available at: <https://doi.org/10.1017/CBO9780511488986.013>.
- Rojas, M. (2009) 'Measuring the progress of societies', p. 208.
- Rowlands, J. (1997) *Questioning empowerment: Working with women in Honduras*. Oxfam.
- Roy, A. (2010) *Poverty capital: Microfinance and the making of development*. Routledge.
- Sachs, J. et al. (2022) *Sustainable development report 2022*. Cambridge University Press.

- Saldaña, J. (2009) *The Coding Manual for Qualitative Researchers*. Sage. Available at: [http://stevescollection.weebly.com/uploads/1/3/8/6/13866629/saldana\\_2009\\_the-coding-manual-for-qualitative-researchers.pdf](http://stevescollection.weebly.com/uploads/1/3/8/6/13866629/saldana_2009_the-coding-manual-for-qualitative-researchers.pdf)
- Saldaña, J. (2014) 'Coding and analysis strategies', *The Oxford handbook of qualitative research*, pp. 581–605.
- Salvador, S. and Cossani, P. (2020) *Trabajadoras remuneradas del hogar en América Latina y el Caribe frente a la crisis del COVID-19*. UN Women. Available at: <https://www.cepal.org/es/documentos/trabajadoras-remuneradas-hogar-america-latina-caribe-frente-la-crisis-covid-19>
- Samanta, G. (2009) 'Microfinance and Women: Gender Issues of poverty alleviation and empowerment', *The Microfinance Review*, 1(1), pp. 100–120.
- Sanson, J. and Gupta, J. (2012) *When a Single Path Diverges: Learning from Trickle Up's Livelihood Program*.
- Santos, M.E. et al. (2015) *A Multidimensional Poverty Index for Latin America*. Oxford Poverty & Human Development Initiative. Available at: <http://www.ophi.org.uk/wp-content/uploads/OPHIWP079.pdf>
- Schuler, S.R. et al. (1996) 'Credit programs, patriarchy and men's violence against women in rural Bangladesh', *Social science & medicine*, 43(12), pp. 1729–1742.
- Schuster, C. (2012) *Social Collateral: Microcredit Development and the Politics of Interdependency in Paraguay*. University of Chicago.
- Schuster, C.E. (2014) 'The social unit of debt: Gender and creditworthiness in Paraguayan microfinance', *American Ethnologist*, 41(3), pp. 563–578. Available at: <https://doi.org/10.1111/amet.12095>.
- Sen, A. (1999) *Development as Freedom*. Oxford: Oxford University Press.
- SENAVITAT (2016) *Tercera Conferencia de las Naciones Unidas sobre la Vivienda y el Desarrollo Urbano Sostenible Habitat III: Informe Nacional del Paraguay*. Available at: <https://www.senavitat.gov.py/minurvi-py/wp-content/uploads/sites/8/2016/05/INFORME-PY-HA%cc%81BITAT-III.pdf>.
- Sengupta, S. and Sachdeva, S. (2017) *From Double Burden of Women to a "Double Boon": Balancing Unpaid Care Work and Paid Work*. Brighton: Institute of Development Studies. Available at: <https://www.ids.ac.uk/publications/from-double-burden-of-women-to-a-double-boon-balancing-unpaid-care-work-and-paid-work/>
- Serafini, V. (2019) *Pobreza en Paraguay: crecimiento económico y conflicto redistributivo*. Asuncion, Paraguay: CADEP. Available at: <http://www.cadep.org.py/2019/06/pobreza-en-paraguay-crecimiento-economico-y-conflicto-redistributivo/>.

- Sheridan, J., Chamberlain, K. and Dupuis, A. (2011) 'Timelining: visualizing experience', *Qualitative Research*, 11(5), pp. 552–569. Available at: <https://doi.org/10.1177/1468794111413235>.
- Shukla, N., Wilson, E. and Boddy, J. (2014) Combining thematic and narrative analysis of qualitative interviews to understand children's spatialities in Andhra Pradesh, India. Available at: [http://eprints.ncrm.ac.uk/3269/1/NOVELLA\\_NCRM\\_narrative\\_and\\_thematic\\_paper%28030114%29\\_Formatted\\_final.pdf](http://eprints.ncrm.ac.uk/3269/1/NOVELLA_NCRM_narrative_and_thematic_paper%28030114%29_Formatted_final.pdf) (Accessed: 27 April 2018).
- Sointu, E. (2005) 'The rise of an ideal: tracing changing discourses of wellbeing', *The sociological review*, 53(2), pp. 255–274.
- Squire, C. (2008) *Approaches to Narrative Research*. NCRM/009. National Centre for Research Methods. Available at: <http://eprints.ncrm.ac.uk/419/1/MethodsReviewPaperNCRM-009.pdf>
- Squire, C. (2013) 'From experience-centred to socioculturally-oriented approaches to narrative', *Doing narrative research*, pp. 47–71.
- Standing, G. (2011) *The Precariat: The New Dangerous Class*. Bloomsbury Academic. Available at: <https://doi.org/10.5040/9781849664554>.
- Stiglitz, J.E., Sen, A. and Fitoussi, J.-P. (2009) Report by the commission on the measurement of economic performance and social progress.
- Strauss, A.L. and Corbin, J. (1998) *Basics of Qualitative Research: Grounded Theory Procedures and Techniques*. 2nd edn. London: Sage.
- Sweetman, C. (2005) 'Editorial', in C. Sweetman (ed.) *Gender and the Millenium Development Goals*. Oxford: Oxfram, pp. 2–8.
- Tafere, Y. (2018) 'Understanding and supporting sustained pathways out of extreme poverty and deprivation in Ethiopia: Qualitative evidence', p. 33.
- TECHO (2015) *Plataforma de Asentamientos | Paraguay*. Available at: <https://www.techo.org/paraguay/plataforma-asentamientos/>
- TECHO Paraguay (2015) *Relevamiento de Asentamientos Precarios: Area Metropolitana de Asunción*. Available at: <https://www.mapadeasentamientos.org.py/static/informe-RAP.pdf>.
- Thomson, R. (2007) 'The qualitative longitudinal case history: Practical, methodological and ethical reflections', *Social Policy and Society*, 6(4), pp. 571–582.
- Thomson, R. (2011) *Unfolding Lives: Youth, Gender and Change*. Policy Press.
- Thomson, R. et al. (2014) *New frontiers in QLR: definition, design and display*. National Centre for Research Methods. Available at: [http://eprints.ncrm.ac.uk/3297/1/new\\_frontiers\\_in\\_QLR.pdf](http://eprints.ncrm.ac.uk/3297/1/new_frontiers_in_QLR.pdf).

- Thomson, R. and Holland, J. (2002) 'Imagined Adulthood: Resources, plans and contradictions', *Gender and Education*, 14(4), pp. 337–350. Available at: <https://doi.org/10.1080/0954025022000020072>.
- Thomson, R. and McLeod, J. (2015) 'New frontiers in qualitative longitudinal research: an agenda for research', *International Journal of Social Research Methodology*, 18(3), pp. 243–250. Available at: <https://doi.org/10.1080/13645579.2015.1017900>.
- Torri, M.C. (2012) 'Community gender entrepreneurship and self-help groups: a way forward to foster social capital and truly effective forms of participation among rural poor women?', *Community Development Journal*, 47(1), pp. 58–76.
- UK Research Council (2018) Code of Conduct. Available at: <https://www.ukri.org/files/termsconditions/rcukukriterms/code-of-conduct-pdf/>
- UKRI (2022) Framework for research ethics. UK Research and Innovation Economic and Social Research Council. Available at: <https://www.ukri.org/councils/esrc/guidance-for-applicants/research-ethics-guidance/framework-for-research-ethics/> (Accessed: 17 January 2023).
- UI Haq, M. (2003) 'The birth of the human development index', *BIRTH*, 2, p. 1.
- UNDP (2019) 'Country Program Document: Paraguay'.
- UNFPA (2017) Adolescent Pregnancy: A Reality that Poses a Challenge to Governments in the Southern Cone. Available at: <https://lac.unfpa.org/es/news/adolescent-pregnancy-reality-poses-challenge-governments-southern-cone> (Accessed: 18 October 2022).
- UNICEF (2016) UNICEF lamenta muerte de niña y pide erradicar práctica de criadazgo. Available at: <https://www.unicef.org/paraguay/comunicados-prensa/unicef-lamenta-muerte-de-ni%C3%B1a-y-pide-erradicar-pr%C3%A1ctica-de-criadazgo> (Accessed: 16 May 2020).
- United Nations (1995) Report of the Fourth World Conference on Women. Beijing: United Nations. Available at: [http://www.5wwc.org/downloads/Report\\_of\\_WCW-1995.pdf](http://www.5wwc.org/downloads/Report_of_WCW-1995.pdf).
- United Nations (2015) The World's Women 2015: Trends and Statistics. New York: United Nations Department of Economic and Social Affairs. Available at: <https://unstats.un.org/unsd/gender/worldswomen.html>.
- United Nations (2016) Multidimensional Poverty and its Measurement: Guide on Poverty Measurement. Geneva, Switzerland: UN. Available at: <https://doi.org/10.18356/b6557c18-en>.
- United Nations (2020) Policy Brief: The Impact of COVID-19 on Latin America and the Caribbean. Available at: <https://unsdg.un.org/resources/policy-brief-impact-covid-19-latin-america-and-caribbean>, <https://unsdg.un.org/resources/policy-brief-impact-covid-19-latin-america-and-caribbean>

- United Nations Development Programme (UNDP) (2020) Promoting socio-economic recovery in Paraguay Report – Economic Reactivation strategies during COVID-19.
- USAID (2016) Sustainable Poverty Escapes: Applying a Multi-Dimensional Poverty Lens. Leveraging Economic Opportunities Report #50. Available at: <https://dl.orangedox.com/Multidimensional-LEO-2016>.
- Vakis, R., Rigolini, J. and Lucchetti, L. (2016) Left Behind: Chronic Poverty in Latin America and the Caribbean. The World Bank. Available at: <https://doi.org/10.1596/978-1-4648-0660-5>.
- Veenhoven, R. (2007) 'Subjective measures of well-being', in Human well-being. Springer, pp. 214–239.
- Vogl, S. et al. (2018) 'Developing an analytical framework for multiple perspective, qualitative longitudinal interviews (MPQLI)', International Journal of Social Research Methodology, 21(2), pp. 177–190. Available at: <https://doi.org/10.1080/13645579.2017.1345149>.
- Watters, C. (2019) Mental Health and Wellbeing : Intercultural Perspectives. Bloomsbury Publishing Plc.
- Wennerholm, C.J. (2002) 'The "Feminisation of Poverty"', The Use of a Concept [Preprint].
- West, N. (2012) Becoming a parent: Negotiating the practice of parenthood. School of Social Sciences: Cardiff University.
- White, S. and Abeyasekera, A. (2014) Wellbeing and quality of life assessment: a practical guide. Practical Action Publishing.
- White, S. and Ellison, M. (2007) 'Wellbeing, livelihoods and resources in social practice', in I. Gough and J.A. McGregor (eds) Wellbeing in Developing Countries: from theory to research. Cambridge: Cambridge University Press, pp. 157–175. Available at: <https://doi.org/10.1017/CBO9780511488986.008>.
- White, S. and Pettit, J. (2007) 'Participatory Approaches and the Measurement of Human Well-being', in M. McGillivray (ed.) Human well-being: concept and measurement. Houndmills, Basingstoke, Hampshire ; New York: Palgrave Macmillan in association with the United Nations University-World Institute for Development Economics Research (Studies in development economics and policy).
- White, S.C. (2008) But What is Wellbeing? A Framework for Analysis and Development Policy and Practice, p. 18.
- White, S.C. (2009) 'Bringing Wellbeing into Development Practice', WeD Working Paper(09/50), p. 31.
- White, S.C. (2010) 'Analysing wellbeing: a framework for development practice', Development in Practice, 20(2), pp. 158–172.



- White, S.C. (2012) 'Beyond the Paradox: Religion, Family and Modernity in Contemporary Bangladesh', *Modern Asian Studies*, 46(5), pp. 1429–1458. Available at: <https://doi.org/10.1017/S0026749X12000133>.
- White, S.C. (2013) *An Integrated Approach to Assessing Wellbeing. Wellbeing and Poverty Pathways*, vol. No. 1. Centre for Development Studies: University of Bath. Available at: [https://purehost.bath.ac.uk/ws/portalfiles/portal/24781420/BP1rev\\_web.pdf](https://purehost.bath.ac.uk/ws/portalfiles/portal/24781420/BP1rev_web.pdf)
- White, S.C. (2015) *Relational wellbeing : a theoretical and operational approach*. Working Paper 43.
- White, S.C. (2016) 'Introduction: The Many Faces of Wellbeing', in S.C. White and C. Blackmore (eds) *Cultures of Wellbeing*. London: Palgrave Macmillan UK, pp. 1–44. Available at: [https://doi.org/10.1057/9781137536457\\_1](https://doi.org/10.1057/9781137536457_1).
- White, S.C. (2017) 'Relational wellbeing: re-centring the politics of happiness, policy and the self', *Policy & Politics*, 45(2), pp. 121–136. Available at: <https://doi.org/10.1332/030557317X14866576265970>.
- White, S.C. and Jha, S. (2014) 'The Ethical Imperative of Qualitative Methods: Developing Measures of Subjective Dimensions of Well-Being in Zambia and India', *Ethics and Social Welfare*, 8(3), pp. 262–276. Available at: <https://doi.org/10.1080/17496535.2014.932416>.
- White, S.C. and Jha, S. (2018) 'Towards an interdisciplinary approach to wellbeing: Life histories and Self-Determination Theory in rural Zambia', *Social Science & Medicine*, 212, pp. 153–160. Available at: <https://doi.org/10.1016/j.socscimed.2018.07.026>.
- White, S.C. and Ramirez, V. (2016) 'Economics and Subjectivities of Wellbeing in Rural Zambia', in S.C. White and C. Blackmore (eds) *Cultures of Wellbeing*. London: Palgrave Macmillan UK, pp. 118–143. Available at: [https://doi.org/10.1057/9781137536457\\_5](https://doi.org/10.1057/9781137536457_5).
- Wittmer, J. (2021) "'We live and we do this work": Women waste pickers' experiences of wellbeing in Ahmedabad, India', *World Development*, 140, p. 105253. Available at: <https://doi.org/10.1016/j.worlddev.2020.105253>.
- Wood, G. (2007) 'Using security to indicate wellbeing', in I. Gough and J.A. McGregor (eds) *Wellbeing in Developing Countries: New approaches and research strategies*. Cambridge: Cambridge University Press, pp. 109–132. Available at: <https://doi.org/10.1017/CBO9780511488986.006>.
- Wood, R.G. (2016) *An Ethnographic Study of the Relationship Between the Renta Dignidad and Wellbeing in the Bolivian Altiplano*. University of Sussex.
- Woodcock, A. et al. (2009) 'Validation of the WeDQoL-Goals-Thailand Measure: Culture-Specific Individualised Quality of Life', *Social Indicators Research*, 94(1), pp. 135–171.
- Woolcock, M. and Narayan, D. (2006) 'Social capital: Implications for development theory, research, and policy revisited', *The search for empowerment: Social capital as idea and practice at the World Bank*, pp. 31–62.

- World Bank (2010) Paraguay Poverty Assessment: Determinants and Challenges for Poverty Reduction. Available at:  
<http://documents.worldbank.org/curated/en/292191468057267811/pdf/586380ESWOP1010201200FINAL0mayo2012.pdf>
- World Bank (2020a) Diagnostico de Genero en Paraguay: Brechas y Barreras para las Mujeres. Available at:  
<http://documents1.worldbank.org/curated/en/328641612339913207/pdf/Resumen-Brechas-y-Barreras-para-las-Mujeres.pdf>
- World Bank (2020b) GINI index: Paraguay. Available at:  
<https://data.worldbank.org/indicator/SI.POV.GINI?locations=PY>
- World Bank (2020c) Webinar: Encuestas de alta frecuencia - impacto COVID-19 en Paraguay. Available at: <https://www.bancomundial.org/es/news/video/2020/11/26/paraguay-encuestas-alta-frecuencia>.
- World Economic Forum (2020) Global Gender Gap Report 2020. Available at:  
[http://www3.weforum.org/docs/WEF\\_GGGR\\_2020.pdf](http://www3.weforum.org/docs/WEF_GGGR_2020.pdf)
- World Health Organization (2014) Country Cooperation Strategy: Paraguay. Available at:  
[https://apps.who.int/iris/bitstream/handle/10665/136824/ccsbrief\\_pry\\_en.pdf;jsessionid=6F54C28E2EB89F4DBE98E14C3B5F7701?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/136824/ccsbrief_pry_en.pdf;jsessionid=6F54C28E2EB89F4DBE98E14C3B5F7701?sequence=1)
- World Health Organization (2019) Global Health Observatory country views: Paraguay statistics summary (2002 - present), WHO. Available at:  
<http://apps.who.int/gho/data/node.country.country-PRY>
- World Health Organization (2022) Adolescent pregnancy: Fact Sheet. Available at:  
<https://www.who.int/news-room/fact-sheets/detail/adolescent-pregnancy>
- Yofre, F. (2016) 'Challenges for Migrant Women in Argentina', Women Across Frontiers. Available at: <https://wafmag.org/2016/06/challenges-women-migrants-argentina/>
- Yunus, M. (1999) Banker to the poor: the autobiography of Muhammad Yunus, founder of Grameen Bank. Aurum Press.
- Zavattiero, C. et al. (2019) Usos del tiempo y desigualdades en Paraguay. Centro de Documentacion y Estudios. Available at: <https://www.cde.org.py/publicacion/usos-del-tiempo-y-desigualdades-en-paraguay/>

## Appendices

### ***Appendix 1: Poverty Stoplight 50 Indicators and 6 Dimensions***

<b>INCOME &amp; EMPLOYMENT</b>	26. Security
1. Income above Poverty Line	27. Sufficient and Appropriate Clothing
2. Stable Income	<b>EDUCATION &amp; CULTURE</b>
3. Credit	28. Know How to Read and Write
4. Family Savings	29. Children with Schooling up to 12 <sup>th</sup> Grade
5. Diversified Source of Income	30. Expertise and Skills to Generate Income
6. Documentation: Identity Card	31. Capacity to Plan and Budget
<b>HEALTH &amp; ENVIRONMENT</b>	32. Communication and Social Capital
7. Access to Drinking Water	33. School Supplies and Books
8. Nearby Health Post	34. Access to Information (Radio & TV)
9. Nutritious Food	35. Entertainment & Recreation
10. Personal Hygiene and Sexual Health	36. Values Cultural Traditions
11. Healthy Teeth and Eyesight	37. Respects other Cultures
12. Vaccines	38. Awareness of Human Rights
13. Garbage Disposal	<b>ORGANIZATION &amp; PARTICIPATION</b>
14. Unpolluted Environment	39. Are Part of a Self-Help Group
15. Insurance	40. Influence on the Public Sector
<b>HOUSING &amp; INFRASTRUCTURE</b>	41. Problem and Conflict-Solving Ability
16. Safe Home	42. Registered Voters & Votes in Elections
17. Sanitary Latrines and Sewage	<b>SELF-AWARENESS &amp; MOTIVATION</b>
18. Electricity	43. Self-Confidence (Self-Esteem)
19. Refrigerator and Other Appliances	44. Awareness of their Needs ( <i>Mapa de Vida</i> )
20. Separate Bedrooms	45. Moral Conscience
21. Elevated and Ventilated Cook Stove	46. Emotional-Affective Capacity
22. Comfort of the Home	47. Aesthetic Self-Expression, Art and Beauty
23. Regular Means of Transportation	48. Family Violence
24. All-weather access road	49. Entrepreneurship
25. Fixed Line or Cellular Telephone	50. Autonomy & Decision-Making Capabilities

Source: (Fundación Paraguaya, no date a)

## ***Appendix 2: Introducing Research Participants***

In keeping with my person-centred approach to this research, this appendix introduces the participants who contributed to this study in order to humanise and ground their experiences. Specifically, I will introduce women within the context of their family dynamics, employment, care duties, relationship with FP group members, and aspirations and goals for the future.

### **Paola**

Paola, aged 23, was the youngest participant in my study. She lived with her partner and young son, aged 3, in a rental home. During the duration of the research, we spoke three times<sup>45</sup>, and she was extremely outgoing, had a sense of humour, and seemed to enjoy talking with me. She had been married for three years and her partner had two part-time jobs, one in the morning and another in the afternoon. Paola had been an FP client for 5 years and had joined her mother-in-law's group. However, she only opened her business 1 year back, and had previously used the loan for personal expenses. Paola had used FP's loans to set up her beauty parlour, and at the time of the research used the loan to purchase products and merchandise. When Paola started participating in the research (February 2019) she was taking out loans from FP and working in her own beauty parlour. Paola worked in the afternoons and would take her son with her to her beauty parlour while she worked. She noted that FP helped her not only with loans, but also with financial education, and claimed that thanks to FP's training she had the idea to start her own beauty parlour. A few months later (June 2019), Paola informed me that she had temporarily closed her beauty parlour because she did not have a place to leave her son while she worked. Her husband could not help out. She told me that although she enjoyed being able to spend more time with her son, she acknowledged that her loss of income has been a financial burden for their family. A few weeks later, (July 2019), Paola got hired to work at a call centre. Due to this, she decided to leave FP. She worked the night shift and said that this worked out well because she could take care of her son during the day and her husband could do so at night, noting that she had to convince her husband to do so, so that she could take the job. However, the decision had not been easy, and she reported that she was often tired because would work all night and had to take care of her son during the day. Her new job offered her many benefits such as payment above minimum wage, and private health insurance, in addition to public health insurance coverage, which she valued. Paola enjoyed participating in my

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<sup>45</sup> February 2019, June 2019, July 2019

research and told me that she enjoyed the talks we had. She said that the research made her feel like someone cared about her. She routinely laughed while we talked about her life, and she said that she liked talking about her future and her goals. Paola's goals for the future were for her son to be doing well, to be happy in her marriage, and to have her own home.

### **Nidia**

Nidia, aged 27, lived with her husband, and three children, aged 9, 7, and 6 months. During the duration of the research, I interviewed Nidia five times<sup>46</sup>, in addition to short check in conversations via text message. Nidia was friendly, affable, and open, and enjoyed participating in the research. At the beginning of the research (May 2018), Nidia worked with her husband on his school bus route and also sold fast food from her house. She noted that these were the only jobs that she was able to do while caring for an infant. A few months later (November 2018), she used her FP loan to start a party decorating and planning business for social events in her neighbourhood. Throughout the research, Nidia's business grew, and she was able to employ her husband, sister, sister-in-law, and mother. Nidia was happy that she was able to cover her family's basic needs and that her children were doing well in school. She also had a positive relationship with her partner and her family. Nidia had been an FP client for 6 years, and she had initially joined her mother's group, and she found it useful to have credit for her fast-food business. During my first conversation with Nidia (May 2018), she had told her FP mentor that she was having problems with her FP group and wanted to change groups. By our third conversation (November 2018), Nidia told me that she had started a new group, and although their loan amount had been decreased, she was satisfied with the new group. Throughout our conversations, Nidia seemed satisfied with FP and noted that she was grateful to FP for her loan, health insurance and other benefits, and mentioned she had a good relationship with her mentor. Nidia's goals were to finish building her own home for her family, for her children to be doing well and have everything they need, and to continue growing her new business.

### **Jimena**

Jimena, aged 33, lived with her husband, two school aged children, and her parents who were in their 80's. She had her own beauty parlour, and her husband had a stable job. During the duration

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<sup>46</sup> May 2018, June 2018, November 2018, April 2019, July 2019

of the research, I interviewed Jazmin three times<sup>47</sup>, once in her home, once on the phone, and once in her beauty parlour. Jimena had studied to be a beautician since she was a teenager and opened her own beauty parlour five years back. She was proud that she had her own business, and that she was able to contribute to her family and pay for her children's education. Jimena noted how in order for her to be well, her children and parents needed to be healthy, and her and her husband had job stability. The first time I interviewed Jimena (February 2019), she noted she was very satisfied with FP. She had joined a year prior after a friend invited her to join her group. Jimena had used loans to invest in her beauty parlour, and also noted that she was able to get financial training. A few months later (June 2019), Jimena mentioned that she had left FP 2-3 months prior. Although at first, she noted that she no longer needed the loan, as the conversation continued, she clarified that she was having issues with her group because new members had joined and were not paying back their loan. A few weeks later (July 2019), Jimena noted that she was taking out a loan from a traditional bank to buy furniture for her beauty parlour, and said that it was easier and that she got the money sooner, compared to FP. Jimena's were to have her own house, for her children to have a good future, finish school, and have a profession, and for her business to continue to grow and flourish.

### **Leticia**

Leticia, aged 34, lived with her partner, and young son, aged 2. They lived in a bustling urban area near the capital city, with lots of facilities nearby, in a small rental home. During the duration of the research, we spoke six times<sup>48</sup>, and she was always friendly and open. At the time of our first interview (May 2018) Leticia worked at a high-end shopping mall. In addition, she would occasionally sell homemade furniture at a local park on the weekends but found it increasingly difficult because she wanted to spend more time with her son on weekends. Childcare was a challenge for Leticia, and she often struggled to find a place to leave her son while she worked. At the beginning of the research (May 2018), she would leave her son with a neighbour, while she worked. A few months later Leticia mentioned that her neighbour was no longer able to watch her son, so he then stayed with Leticia's mother or her mother-in-law, but it was often challenging to manage everyone's changing schedules. In our last interview (May 2019) Leticia told me she had found a better job at the same shopping mall but at another store, which gave her better pay and

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<sup>47</sup> February 2019, June 2019, July 2019

<sup>48</sup> May 2018, June 2018, November 2018, April 2019, May 2019

more benefits, including health insurance and more flexibility with her schedule and her childcare arrangements, which she valued. Leticia joined FP in May of 2018 because her mother recommended she get involved so she could use the loan to buy merchandise for her furniture business. However, shortly after joining FP she got a stable job working at a shopping mall, so she used her loan to pay for some outstanding bills she had. In December 2018 Leticia's group left FP, and in April 2019 they decided to return again. Leticia noted that she no longer needed FP's loan because she could get a loan from a traditional bank if needed, but her mother's group needed an additional member, and she was happy to help. Leticia also noted that she was appreciative that FP helped women who did not have many opportunities, like her mother. Towards the end of the research, Leticia told me her aspirations were to go to university and save enough to buy some land for her own home.

### **Beatriz**

Beatriz, aged 35, lived with her husband, and two children, aged 15 and 17. During the duration of the research, I interviewed Beatriz twice<sup>49</sup>, both times in her home. She lived in the outskirts of a semi-urban area on a dirt road. Beatriz was a bit reserved, and I had a hard time connecting with her during the research. Beatriz had a stable job working as a maid for a local family where she had been working for the past four years. Her husband had a stable job working at a local pharmacy. She noted that her children were happy and doing well in school, and that she felt she had economic stability in her home. Beatriz had been an FP client for 5 years. She had started with a group loan committee with 12 members and had then transitioned to a smaller group with just three women. Although Beatriz did not have a small business, she noted that thanks to FP's support she had been able to make small improvements in her home, and her FP mentor had also helped her petition the local authorities to improve her road. In addition to her loan, Beatriz noted that FP also helped her wellbeing by providing her with health insurance. Beatriz aspired to go to university and have a similar job as her husband, as well as opening a store from her home so she could work from home and work with her family.

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<sup>49</sup> February 2019, July 2019

### **Romina**

Romina, aged 40, lived with her partner, and three children, aged 14, 18, and 20. During the duration of the research, we spoke four times<sup>50</sup>. Romina was open and friendly, but at times a bit wary about my research, frequently asking questions about the purpose of the research. At the beginning of the research (May 2018), Romina worked selling foodstuffs at a large public market in the mornings and worked in her kiosk from her home in the afternoons and evenings. She had started her kiosk with the help of a FP loan. She earned less than minimum wage with her two jobs. In our last interview (May 2019) Romina told me she had left her job at the local market because she was unable to work and take her daughter to school, so she was working as a maid for a local family and continued working at her kiosk. Romina remained a FP client for the duration of the research and noted that being an FP client gave her financial security. She was satisfied with FP and used her FP loans to stock her kiosk, as well as making improvements to her home. Her main goals were to continue supporting her children, for them to get good education and good jobs, and to continue growing her kiosk. Unfortunately, Romina changed her cell phone number towards the end of my fieldwork, so I was unable to carry out my last interview with her.

### **Elisabeth**

Elisabeth, aged 53, lived with her husband, and three children, two sons (32 and 26) and one daughter (6). She lived in a large city in an urban area. During the duration of the research, I interviewed Elisabeth four times<sup>51</sup>. Elisabeth was friendly and open and seemed to enjoy participating in the research. Our interviews frequently lasted a few hours, and she noted that the research was cathartic for her. Elisabeth was a hairdresser and had her own beauty parlour. Her husband was retired and lived off a pension provided by the government of a neighbouring country, of which he was a citizen of. Elisabeth's sons both had stable jobs, and Elisabeth had helped them attend private universities to get their degrees. Although they had stable income, Elisabeth still helped them financially, and she mentioned that at times this was straining for her personal finances. In addition, Elisabeth frequently was conflicted about working and spending time away from her young daughter. She noted that she wanted to spend more quality time with her and "spoil" her. At times, Elisabeth mentioned she considered moving to Spain to find work (a common practice for many Paraguayan women), but she found it difficult to leave her family.

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<sup>50</sup> May 2018, June 2018, November 2018, May 2019

<sup>51</sup> May 2018, June 2018, November 2018, July 2019



Elisabeth joined FP after a neighbour invited her, used the loan to buy products for her beauty parlour. However, after a few months her group was having a lot of problems with a few group members not paying, which meant the rest of the group had to pay. Due to this, the group started having fundraisers to pay for the members who were not paying. After a few weeks, Elisabeth said she didn't want to pay for others bills anymore and never heard back from her group or FP. Elisabeth noted that she knew that she still owed money to FP but had never heard from them. In terms of goals and aspirations, Elisabeth hoped to grow her business and continue getting training for her profession, she also hoped her children had good, stable jobs, and could become independent.

### **Sandra**

Sandra, aged 42, lived with her husband, and two children, one son (17) and one daughter (12). She was a door-to-door saleswoman and mostly sold clothes. Her husband had a stable job at a local company and earned minimum wage. During the duration of the research, Sandra and I spoke twice<sup>52</sup> and had additional text message exchanges<sup>53</sup>. Sandra used to live near the capital city but had recently moved with her family to a small town 2 hours from the capital city because she could afford to pay for housing there. However, Sandra would frequently travel long hours on the bus to the capital city to sell clothes because it was better for business. In our second interview (June 2018), Sandra reported having problems with income and making ends meet, as well as some family problems. Due to this, she was considering migrating to a neighbouring country to find work. She noted that she wanted her children to have a good education, but she was unable to provide for them with her current work. She also told me that she was on medication because she was on the brink of depression. In my last conversations with Sandra via text message conversations (October, November 2018), Sandra told me that she was having health problems and was having difficulty getting out of bed. I had a hard time scheduling phone interviews with her because she noted she had many doctor's appointments as was behind on her work duties. Later on (March 2019), I talked to Sandra's FP mentor, and she had told me that Sandra had left the country with her daughter and that she had gotten separated from her husband, and he had stayed in Paraguay

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<sup>52</sup> May 2018, June 2018

<sup>53</sup> October 2018, November 2018

with her son. Due to this, Sandra stopped participating in FP's programming as well as this research before its completion.

### **Ana**

Ana, aged 45, was a single mother and lived with her six children, aged 25, 23, 22, 19, 15, and 11. During the duration of the research, I interviewed Ana three times<sup>54</sup>. She seemed weary of my research and did not seem convinced about my intentions. In fact, almost a year went by between our second and third conversations, and I was surprised that she agreed to talk for our third conversation after ignoring my calls for various months. Ana worked 7 days a week selling food at a local market, and had 12-hour workdays. In our first conversation (May 2018), she expressed that she was planning on opening a second food stall on the highway. Almost a year later (July 2019) Ana told me that she had been able to set up a stand on the highway and that she had been able to improve her income. For Ana, one of the most important aspects for her wellbeing was for her children to be doing well. Her business was also a way to financially support and involve her children. In fact, during our last interview (July 2019), Ana mentioned that all her adult children were working with her in her food business. Ana had been a FP client for a year when I first interviewed her (May 2018), but by our second conversation (June 2018) she had left FP and was upset. She told me that no one in her group paid and that they were having problems. Almost a year later (July 2019), Ana noted that she would be open to returning to FP if she found a better group that would be more responsible in repaying their loan. In addition, Ana did not consider that FP gave her any additional support or benefits besides the loan. It was unclear if this was because she was not aware of the additional benefits FP provided, or if she did not find them valuable. Towards the end of the research, Ana mentioned her biggest goals were to stop living in a rental and to have her own house and to continue having work and a steady income to support her family.

### **Jazmin**

Jazmin, aged 45, lived with her partner, and two children, aged 15 and 12. During the duration of the research, I interviewed Jazmin twice<sup>55</sup>, both times in her home. At first, Jazmin was not sure why she had been chosen to participate in my research and asked me many questions, but in the end, she seemed comfortable with me and agreed to participate in the research. Jazmin worked

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<sup>54</sup> May 2018, June 2018, July 2019

<sup>55</sup> February 2019, July 2019

from home selling foodstuffs and appreciated being able to work from home because she could care for her children. However, she also explained that before having children she worked as a housekeeper, and sometimes she considered getting a job outside her house, but that her husband did not like that idea. Jazmin frequently noted how important it was for her for her family to have economic stability, for her children to be doing well, that her family had health, and that her family got along. Jazmin had been an FP client for 5 years and had joined after a neighbour invited her. Jazmin had a good relationship with her FP group and her mentor and noted that thanks to FP she was able to open her business from home. At the time of the research, she used her FP loan to purchase foodstuffs in bulk for her business. Jazmin's aspirations were to open a new business, a bakery, with her husband and continue working to be able to support her children.

### **Rocio**

Rocio, aged 47, lived with her husband, son (17), and daughter (15). She had two additional sons who had their own families and lived outside her home. During the duration of the research, I interviewed Rocio five times<sup>56</sup>. At first, Rocio was a bit reserved, but throughout the research our relationship blossomed. She expressed that participating in this research project was cathartic for her and she enjoyed talking to me during some difficult times in her life. Rocio worked in sales, selling clothes door to door. In the afternoons, her husband would join her, and they would work together, which she valued. Rocio was proud of herself for her growing business and noted that it allowed her to have a steady income and support her family. Rocio based much of her wellbeing on how her children were doing. For her older children, this meant having good, stable jobs, and for her younger children this meant doing well in school and staying out of trouble. Towards the end of my research (July 2019), Rocio reported she was going through a difficult moment in her life because her son was being very rebellious. He was hanging out with the "wrong crowd", and this worried Rocio tremendously. Rocio felt the burden of worrying about her son and commented that her husband did not worry like she did. In addition, her young daughter had finished secondary school, but was taking care of her older brother's children instead of going to university, which also worried Rocio. When I first interviewed Rocio (May 2018), she had been an FP client for over a year. She was invited to join by neighbours and used FP's loan to buy merchandise for her business. In April 2019, Rocio informed me that she had left FP because there was conflict in her group, and she did not want to get involved. A few months later (July 2019), Rocio returned to FP to another

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<sup>56</sup> May 2018, June 2018, November 2018, June 2019, July 2019

group, and was not having any problems. She noted that she was taking advantage of FP's medical insurance and continued to use the loan to purchase merchandise for her business. In terms of goals for the future, Rocio aspired to continue growing her business, and hoped that her children would be independent and have stable jobs.

### **Liliana**

Liliana, aged 51, was a single mother and lived with her son (25), two daughters (22, 20), and two granddaughters (3, 1), in a one-bedroom house. During the duration of the research, I interviewed Liliana five times<sup>57</sup>. Liliana was friendly and open, and enjoyed participating in the research. At the beginning of the research (May 2018), Liliana worked as a housekeeper in the mornings and as a cook for a neighbourhood food stall in the afternoons. Despite having two jobs and working seven days a week, she earned less than minimum wage. In December 2018, Liliana started having health problems and lost her job as a maid. She was still working as a cook at the food stall but was having a hard time due to her arthritis. Liliana frequently worried about her children. Her son was able to obtain a stable job, but her daughters had a hard time finding stable and well-paying jobs. In addition, her daughter, the mother of her grandchildren, was a single mother and Liliana also helped to take care of her young granddaughters. Liliana joined FP in May 2018 after being asked by neighbours to join. A few months later (November 2018), she had left FP after her group did not pay off its first loan. Liliana's goal was to start a business so she could work from home, but she did not have the money required to start a business.

### **Nancy**

Nancy, aged 52, lived with her husband. She lived in the outskirts of a peri-urban area, but her house was on a main highway, which was helpful for her business. Out of the 16 participants of this study, Nancy was the only participant without children. Due to this, Nancy told me repeatedly that her life was not very interesting. During the duration of the research, I interviewed Nancy twice<sup>58</sup>. Nancy was a character, with a big personality, and was always open to talking to me and answering my questions. For Nancy, it seemed that her wellbeing was tied to her work. She had a prosperous glass installation and handicrafts business with her husband and mentioned that having a stable income and having work was important. She also mentioned feeling proud of her business and of

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<sup>57</sup> May 2018, June 2018, November 2018, April 2019, July 2019

<sup>58</sup> February 2019, July 2019

the fact that she was the boss. In terms of her family and her relationships, Nancy mentioned that she had a good relationship with her husband and that she enjoyed working with him. Although she did not have children, she talked frequently about her extended family and her nieces and nephews. Nancy had been an FP client off and on for about ten years. She had left her original group because she had issues with people in her group who weren't paying their loans. A few years later, she returned to FP with a group composed of her family members, which she noted was better because there was more trust. Nancy mentioned feeling grateful to FP for giving her a loan which she used to grow her business. Towards the end of the research (July 2019), Nancy was able to purchase a truck for her business, which made her feel like she was progressing in life. In terms of goals, Nancy aspired to continue growing her business and to have a stable income and to be able to save for her retirement.

### **Marina**

Marina, aged 54, lived with her partner, and five children, aged 35, 34, 27, 23, and 16. During the duration of the research, I interviewed Marina twice<sup>59</sup>, both times in her small business, and she was always friendly and open. Marina spent many years taking care of her children, and about three years prior, once her children were older, she opened a small business where she sold clothes, toys, and other home goods using a loan from FP. Marina was grateful that she could contribute to her family with her income and reported that her business was doing well. She noted specifically that her business allowed her to supplement her husband's minimum wage income, which was no longer enough to sustain the family. For Marina, one of the most important elements for her wellbeing was that her children, both adult and younger, were doing well, and to be able to support them financially and emotionally. Marina also mentioned the importance of having positive relationships in her life, such as with her husband and her spiritual group. When I first interviewed Marina, she had been an FP client for two years. She was satisfied with FP and noted that she had a good relationship with her group, and that she had opened a savings account thanks to FP. She also mentioned how helpful FP's loan was to establish her business and to help her stock up on goods. In terms of goals and aspirations, Marina talked about sustaining her business, possibly opening another business with her husband, and being able to support her children as long as she could.

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<sup>59</sup> February 2019, July 2019

### Valeria

Valeria, aged 56, lived with her husband, brother, elderly mother, and young grandson. During the duration of the research, I interviewed Valeria four times<sup>60</sup>. Valeria lived in the centre of a semi-urban town on a busy road. She worked in her family restaurant with her siblings, which was close to a local market. Previously, she had worked at a large company as a bookkeeper for many years but had to leave to take care of mother and grandson. She sometimes regretted making the decision and at times considered going back to her old job but was conflicted due to her multiple care duties. Valeria's wellbeing was heavily influenced by the wellbeing of her family members, especially her daughter (who lived outside her home), her grandchildren, and her ageing mother. She frequently mentioned that she worried too much about them and that sometimes she had a hard time putting herself before others. At the beginning of the research (May 2018), Valeria had been an FP client for 4 years and used her loan for her food business, to buy food in bulk as well as materials for the kitchen. In our third interview (December 2018) Valeria had left FP due to problems in her group. One group member had fallen ill and the entire group had gotten into debt. She clarified that she did not have any problems with FP *per se*, and considered returning to FP. In terms of goals and aspirations, Valeria frequently talked about having stable work to be able to contribute to her family. Valeria also mentioned wanting to work less because she wanted to spend more time with her daughter and grandchildren.

### Jacinta

Jacinta, aged 71, had four children, and was a single mother. I interviewed Jacinta five times during the duration of this research<sup>61</sup>. Jacinta was jovial, open, and seemed to enjoy my visits. My interviews with her lasted a few hours and she seemed to enjoy talking about her life and frequently told me that my visits to her home were a blessing. Jacinta lived with her youngest daughter, aged 34, and her eight grandchildren, ages ranging from 2 to 15. Her daughter was a single mother and had six children. The additional two grandchildren were her son's daughters, which Jacinta called orphans, because their mother had died. For Jacinta, her wellbeing was very closely tied to her family's wellbeing, specifically, her daughter's and grandchildren's wellbeing. Jacinta worked as a seamstress, although she was finding it harder to work due to her declining health. Throughout the research, her daughter worked off and on as a maid, but also had health

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<sup>60</sup> May 2019, June 2018, December 2018, July 2019

<sup>61</sup> May 2018, June 2018, October 2019, November 2018, July 2019

issues which disrupted her work. Both Jacinta and her daughter's health issues resulted in economic stress for the entire family. Jacinta joined FP in May 2018 but had left FP by June 2018. She had joined FP after a neighbour's invitation but dropped out due to issues with her group. Jacinta's goal was to open a haberdashery to be able to work from her home but lacked the funds to start a business. In my last interview with Jacinta, I asked her how she was feeling about her current situation, she responded, *"I'm feeling down, trying to move along day by day."* She felt resigned about her current state and felt a lack of control over her own life, she explained, *"What are we to do, this is our life, we didn't buy it."*

***Appendix 3: Conventions for Quotations***

[...] the quote has been edited for length or confidentiality.

[word] word in brackets inserted for clarity

(.) pause

*Italics* – participant quotes

Non-italics in quotes – quotes from academic literature

Indented quotes – more than 35 words



#### ***Appendix 4: Additional Data Collection***

In addition to data collection with research participants who participated in FP's anti-poverty programme, I also carried out interviews with FP mentors, FP staff, and observed FP mentor training. Even though I have not referred to this data directly in this dissertation, they have played a role in framing my thoughts and formed part of my contextual understanding of FP.

##### FP Mentors

In my interviews with FP mentors, I explored their educational background, training, and what incentives FP provides for poverty mentors. I also discussed the process of the Poverty Stoplight programme, programme characteristics, relational dynamics, and which indicators each mentor believes are the easiest and most difficult to work on with FP programme participants. Lastly, I asked mentors about their opinions on best practices, areas of improvement, and thoughts on perceived impact of the Poverty Stoplight programme.

##### Observations of FP Mentor Training

I also observed FP's training of mentors who carried out the Poverty Stoplight programme. My rationale was to understand how FP presented its programme objectives in an institutional way, as well as seeing how mentors interacted with these.

##### FP Staff

I also carried out interviews with FP staff who oversaw developing and implementing FP's anti-poverty programme at the management level. My objective was to better understand what strengths and weaknesses they saw in the Poverty Stoplight programme and to learn more about their experiences. I interviewed both staff both at FP's national headquarters as well as regional staff, to capture different perspectives. In addition, I wanted to better understand the institutional rationale behind using mentoring in their poverty programmes and to determine what benefits staff saw at an operational level.

**Appendix 5: Wellbeing Chart Translation (presented in section 3.5.3)**

Areas Importantes en mi vida:	Estar bien significa:	Cómo estoy hoy?
Trabajo	<ul style="list-style-type: none"> <li>- Salir a trabajar</li> <li>- Ganar mucha plata</li> </ul>	<ul style="list-style-type: none"> <li>- No puedo más salir a trabajar por mi enfermedad</li> <li>- Quiero trabajar desde la casa - mercería</li> </ul>
Ingreso	<ul style="list-style-type: none"> <li>- Que te alcance para comer, ropa, para que estudien las nietas</li> </ul>	<ul style="list-style-type: none"> <li>- Bajoneando</li> <li>- Parientes ayudando con ropa y víveres</li> <li>- A veces pido a los políticos</li> <li>- Mi Seguro no me da más remedios</li> </ul>
Tener apoyo de Dios	<ul style="list-style-type: none"> <li>- Gracias a Dios yo recibo muchas cosas</li> <li>- Me siento tranquila</li> </ul>	<ul style="list-style-type: none"> <li>- [Dios] me habla, bendice mi casa</li> <li>- Pai [sacerdote] viene una vez a la semana a traer comunión</li> <li>- Estoy muy bien espiritualmente</li> </ul>
Tranquilidad	<ul style="list-style-type: none"> <li>- Tener p/ [para] comer</li> <li>- [Que] no te falte nada</li> <li>- Criaturas [niños] tienen todo</li> </ul>	<ul style="list-style-type: none"> <li>- No me falta [nada], mucho apoyo de todas partes</li> <li>- [Recibo] víveres de la iglesia</li> <li>- Hoy estoy más o menos</li> <li>- Hija está enferma y no puede trabajar</li> </ul>

Important Areas in My Life:	Being Well means:	How Am I Doing Today?
Work	<ul style="list-style-type: none"> <li>- Having a job</li> <li>- Earning well</li> </ul>	<ul style="list-style-type: none"> <li>- I can't leave my house to work because of my medical problems</li> <li>- I want to work from home (haberdashery store)</li> </ul>
Income	<ul style="list-style-type: none"> <li>- Having enough income for food, clothes, for my grandchildren's studies</li> </ul>	<ul style="list-style-type: none"> <li>- Not well</li> <li>- Some family members are helping with clothes and food</li> <li>- Sometimes politicians help</li> <li>- My insurance doesn't cover my medicine costs</li> </ul>
Having God's support	<ul style="list-style-type: none"> <li>- Thanks to God I get a lot of things</li> <li>- I feel at peace</li> </ul>	<ul style="list-style-type: none"> <li>- He talks to me, blesses my home</li> <li>- Priest comes once a week and brings me communion to my home</li> <li>- I'm doing very well spiritually</li> </ul>

Being at Peace	<ul style="list-style-type: none"><li>- You have enough to eat</li><li>- Nothing lacking</li><li>- Kids have what they need</li></ul>	<ul style="list-style-type: none"><li>- I'm ok, I have support from many areas</li><li>- I get food donations from the church</li><li>- Today I am so-so</li><li>- My daughter is sick and can't work</li></ul>
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## Appendix 6: University of Sussex Research Ethics Committee Approval



Social Sciences & Arts C-REC  
c-recss@admin.susx.ac.uk

Certificate of Approval	
<b>Reference Number</b>	ER/MB747/2
<b>Title Of Project</b>	Mentorship in Poverty Alleviation Programs: Evidence from Paraguay
<b>Principal Investigator (PI):</b>	Marie Claire Burt Wolf
<b>Student</b>	Marie Claire Burt Wolf
<b>Collaborators</b>	
<b>Duration Of Approval</b>	1 year and 3 months
<b>Expected Start Date</b>	16-Apr-2018
<b>Date Of Approval</b>	25-Apr-2018
<b>Approval Expiry Date</b>	15-Jul-2019
<b>Approved By</b>	Ana Pereira
<b>Name of Authorised Signatory</b>	Ana Pereira
<b>Date</b>	25-Apr-2018

\*NB. If the actual project start date is delayed beyond 12 months of the expected start date, this Certificate of Approval will lapse and the project will need to be reviewed again to take account of changed circumstances such as legislation, sponsor requirements and University procedures.

**Please note and follow the requirements for approved submissions:**

**Amendments to protocol**

- \* Any changes or amendments to approved protocols must be submitted to the C-REC for authorisation prior to implementation.

**Feedback regarding the status and conduct of approved projects**

- \* Any incidents with ethical implications that occur during the implementation of the project must be reported immediately to the Chair of the C-REC.

**Feedback regarding any adverse(1) and unexpected events(2)**

- \* Any adverse (undesirable and unintended) and unexpected events that occur during the implementation of the project must be reported to the Chair of the Social Sciences and Arts C-REC. In the event of a serious adverse event, research must be stopped immediately and the Chair alerted within 24 hours of the occurrence.

**Monitoring of Approved studies**

The University may undertake periodic monitoring of approved studies. Researchers will be requested to report on the outcomes of research activity in relation to approvals that were granted (full applications and amendments).

**Research Standards**

Failure to conduct University research in alignment with the Code of Practice for Research may be investigated under the Procedure for the Investigation of Allegations of Misconduct in Research or other appropriate internal mechanisms (3). Any queries can be addressed to the Research Governance Office: rgoffice@sussex.ac.uk

(1) An "adverse event" is one that occurs during the course of a research protocol that either causes physical or psychological harm, or increases the risk of physical or psychological harm, or results in a loss of privacy and/or confidentiality to research participant or others.

(2) An "unexpected event" is an occurrence or situation during the course of a research project that was a) harmful to a participant taking part in the research, or b) increased the probability of harm to participants taking part in the research.

(3) <http://www.sussex.ac.uk/staff/research/rqi/policy/research-policy>

**Appendix 7: Information Sheet for Participants**



**PARTICIPANT INFORMATION SHEET**

*Mentorship in Poverty Alleviation Programs: Evidence from Paraguay*

You are being invited to take part in a study about mentoring in poverty alleviation programs. Before you decide if you would like to take part, it is important for you to understand why the research is being done and what this stage will involve.

**WHAT IS THE PURPOSE OF THE STUDY?**

The purpose of my research is to find out more about how mentoring contributes to poverty alleviation programs. Specifically, I am looking at the mentoring component in Fundación Paraguaya's "Poverty Stoplight" program. My fieldwork will run over a period of 15 months.

**WHY HAVE I BEEN INVITED TO PARTICIPATE?**

You have been invited to participate because you are starting the mentoring component of Fundación Paraguaya's "Poverty Stoplight" program, and we would like to learn about your experience with the program.

**DO I HAVE TO TAKE PART?**

No – it is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and asked to give consent, and will still be free to withdraw at any time without giving a reason. Whether or not you decide to take part will not affect your standing with Fundación Paraguaya in any way.

**WHAT WILL HAPPEN TO ME IF I TAKE PART?**

I will be interviewing you three times over a period of 15 months as I am interested in your experience with the mentoring program at Fundación Paraguaya. The interviews will take up to one hour, in your home if possible. Your consent will be sought for each before it takes place, and you are free to refuse to participate or withdraw at any time.

During our interview, I will be asking you questions about your life and your experience with the mentoring in Fundación Paraguaya's program. In addition, I will also ask you to draw a map together of your life and different important moments. I will be accompanied by a research assistant and translator.

**WHAT ARE THE POSSIBLE DISADVANTAGES AND RISKS OF TAKING PART?**

Interviews may take up to an hour. I hope to meet you whenever you are free and is most convenient for you.

**WHAT ARE THE POSSIBLE BENEFITS OF TAKING PART?**

You will not benefit directly from this study. We will use the information you provide better understand how mentoring works in poverty alleviation programs and to help Fundación Paraguaya improve its programs.

**WILL MY INFORMATION IN THIS STUDY BE KEPT CONFIDENTIAL?**

All information collected about you and your family will be confidential (unless a researcher thinks that you or someone else may be at risk of harm) and stored safely and securely, so that only the research team have access to it. If it is used in the final report, your names and identifying details will be removed. Fundación Paraguaya has been asked to be named in the final report, but no individuals will be identifiable.

**WHAT SHOULD I DO IF I WANT TO TAKE PART?**

You may telephone me, Marie Claire Burt, on the following number: 0981-344-774 or tell Fundación Paraguaya staff from your local office that you are interested in taking part of this research.

**WHAT WILL HAPPEN TO THE RESULTS OF THIS STAGE OF THE STUDY?**

The results of these interviews will help me better understand how mentoring works in poverty alleviation programs and to help Fundación Paraguaya improve its programs.

**WHO IS ORGANISING AND FUNDING THE RESEARCH?**

I, Marie Claire Burt, am conducting the research as a postgraduate research student in the Institute of Development Studies, University of Sussex, UK, for my degree, a PhD in Development Studies. My research is funded by Government of Paraguay (Becas Carlos Antonio Lopez).

**WHO HAS APPROVED THIS STUDY?**

This research has been approved by the Social Sciences & Arts Cross-Schools Research Ethics Committee (C-REC) at the University of Sussex.

**Contact for Further Information:**

Researcher – Marie Claire Burt  
 Contact number: 0981-344-774  
 Email contact: [m.burtwolf@sussex.ac.uk](mailto:m.burtwolf@sussex.ac.uk)  
 Fundación Paraguaya: 021-609-277

For further information about the study or if you have concerns about the way the study has been conducted, you may contact my supervisors, Professor Janet Boddy ([j.m.boddy@sussex.ac.uk](mailto:j.m.boddy@sussex.ac.uk)), Dr. Keetie Roelen ([k.roelen@ids.ac.uk](mailto:k.roelen@ids.ac.uk)), or the Chair of the Social Sciences, Arts and Humanities Cross-School Research Ethics Committee, Dr. Liz McDonnell ([E.J.Mcdonnell@sussex.ac.uk](mailto:E.J.Mcdonnell@sussex.ac.uk)).

The University of Sussex has insurance in place to cover its legal liabilities in respect of this study.

***Thank you for reading this information  
 Please keep a copy of this sheet you can refer to***

**Appendix 8: Informed Consent Forms****CONSENT FORM FOR PROJECT PARTICIPANTS**

*This form will be translated into Spanish for research participants. Verbal consent may be taken and recorded in an audio-file. Participants will be given a copy of this consent form to keep.*

**PROJECT TITLE:** **Mentoring in Poverty Alleviation Programs: Evidence from Paraguay**

**Project Approval**

**Reference:**

Marie Claire Burt

**Researcher:**

I agree to take part in the above University of Sussex research project.

☐

I have had the research explained to me, been given a copy of the Information Sheet, and had the opportunity to ask the research team questions.

☐

I understand that agreeing to take part means that I am willing to:

- Be interviewed/observed by the researcher and an interpreter if one is required.
- Allow the interview to be audio taped and written about in the study report.
- Allow the researcher to keep in touch over the coming year to arrange further interviews or to check things with me.

☐

I understand that I do not have to take part in the interview and that whether I decide or not to participate in this study will not affect my standing with Fundación Paraguaya.

☐

I know that:

- I can change my mind about taking part in the research and stop at any moment.
- I can refuse to answer any questions.
- If I decide not to continue, this will not affect my access to any services I receive.

☐

If there is not time to finish the interview/observation today for any reason, there may be another

interview at a convenient date, and asked if I want to take part again before it takes place. Giving consent for this interview does not mean giving consent for any future interviews.

I understand that any information I provide is confidential to the study and will not be used or shared for any other purpose, unless the researcher thinks that I or someone else might not be safe.

☐  
☐

I understand that no information which could identify me (such as names, photographs which show people or identifying places, or other recognisable details) will be used in the final report.

☐

I understand that I can say if I do not want my information to be used in the write up of the research at any point until July 30, 2019.

☐

I understand that my name, address, contact details, etc. will be kept safely and securely away from the audio recordings and write-ups of interviews, which will also be held securely in password-protected files.

☐

I consent to the processing of my personal information for the purposes of this research study. I understand that such information will be treated as strictly confidential and handled in accordance with the UK Data Protection Act 1998.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_



**Appendix 9. Wellbeing Chart Translation (Liliana) (presented in section 4.2)**

Areas importantes en mi vida	Estar bien significa	Cómo estoy hoy?
Trabajo	<ul style="list-style-type: none"> <li>- Negocio en tu casa</li> <li>- Pagar las cuotas</li> <li>- Trabajar tranquila</li> </ul>	<ul style="list-style-type: none"> <li>- Yo no me siento a gusto</li> <li>- No soy más como antes por problemas de salud</li> <li>- Quiero tener mi propio negocio en mi casa (comida)</li> <li>-&gt; Inversión grande</li> </ul>
Bien Economicamente	<ul style="list-style-type: none"> <li>- Estoy tranquila</li> <li>- Vivir bien -&gt; que no te falte nada en la casa</li> </ul>	<ul style="list-style-type: none"> <li>- No tanto</li> <li>- Todo cuesta</li> </ul>
Hijos Trabajen Bien	<ul style="list-style-type: none"> <li>- Buen trabajo</li> <li>- Poder salir Adelante</li> <li>- Que sean independientes el día de mañana</li> <li>- Si ellos están bien yo también</li> </ul>	<ul style="list-style-type: none"> <li>- No, están buscando p/ trabajar bien</li> <li>- Ahora trabajan pero ingreso bajo</li> </ul>
Salud	<ul style="list-style-type: none"> <li>- Tener cobertura médica</li> <li>- Estar saludable</li> <li>- Importante para otros areas</li> </ul>	<ul style="list-style-type: none"> <li>- No estoy tan bien</li> <li>- Estoy con tratamiento</li> </ul>

Areas of Life (Domains) What are the four most important areas in your life?	Definition Being well in this domain means...	Current Status How are you doing today?
Work	<ul style="list-style-type: none"> <li>- Business from home</li> <li>- Pay bills</li> <li>- Work <i>tranquila</i></li> </ul>	<ul style="list-style-type: none"> <li>- I'm not doing well</li> <li>- I'm not the person I used to be before my health problems</li> <li>- I want to have my own business from home (food sales), big investment</li> </ul>
Being Well Economically	<ul style="list-style-type: none"> <li>- Be <i>tranquila</i></li> <li>- Live well - nothing is missing from home</li> </ul>	<ul style="list-style-type: none"> <li>- Not doing well</li> <li>- Everything is difficult</li> </ul>
For Children to have good jobs	<ul style="list-style-type: none"> <li>- Good job</li> <li>- Being able to get ahead</li> </ul>	<ul style="list-style-type: none"> <li>- Not [doing well], looking for good jobs</li> </ul>

	<ul style="list-style-type: none"> <li>- They can be independent in the future</li> <li>- If they are ok, I'm ok</li> </ul>	<ul style="list-style-type: none"> <li>- Now they work but with low income [jobs]</li> </ul>
Health	<ul style="list-style-type: none"> <li>- Having health insurance</li> <li>- Being health</li> <li>- It's important for other areas [of your life]</li> </ul>	<ul style="list-style-type: none"> <li>- I'm not doing well</li> <li>- I'm under treatment</li> </ul>