

**Document of  
The World Bank**

**Report No.: 62511**

**PROJECT PERFORMANCE ASSESSMENT REPORT**

**COLOMBIA**

**COLOMBIA SOCIAL SAFETY NET PROJECT  
(LN. 73370 & LN.74330)**

**June 21, 2011**

**IEG Public Sector Evaluation**  
*Independent Evaluation Group*

## Currency Equivalents (annual averages)

Currency Unit = Colombian Peso, COL\$

2005	US\$1.00	COL\$2,279
2006	US\$1.00	COL\$2,261
2007	US\$1.00	COL\$2,014
2008	US\$1.00	COL\$2,253
2009	US\$1.00	COL\$2,017

## Abbreviations and Acronyms

CAS	Country Assistance Strategy	MSP	Ministry of Social Protection
CCT	Conditional Cash Transfers	MSP-DGP	MSP's General Planning and Sector Policy Department ( <i>Dirección General de Planeación y Análisis de Política Sectorial</i> )
CONPES	National Council of Economic and Social Policy ( <i>Consejo Nacional de Política Económica y Social</i> )	M&E	Monitoring and Evaluation
DEPP	Evaluation Department	NDP	National Development Plan
DfID	United Kingdom Department for International Development	PAD	Project Appraisal Document
DNP	Department for National Planning	PPAR	Project Performance Assessment Report
FONADE	National Fund of Development Projects	PSAL	Programmatic Sector Adjustment Loans
GDP	Gross Domestic Product	RAS	Social Support Network
IBRD	International Bank for Reconstruction and Development	SECAL	Social Sector Adjustment Loan
IDB	InterAmerican Development Bank	SIGOB	Government Results Information System
ICBF	<i>Instituto Colombiano de Bienestar Familiar</i>	SINERGIA	National System for Results Evaluation ( <i>Sistema Nacional de Evaluación de Resultados de la Gestión Pública</i> )
ICR	Implementation Completion Report	SISBEN	Selection System of Beneficiaries of Social Programs ( <i>Sistema de Selección de Beneficiarios de Programas Sociales</i> )
IEG	Independent Evaluation Group	UNDP	United Nations Development Programme
IEGPS	Independent Evaluation Group Public Sector		
MESEP	<i>Misión para el Empalme de las Series de Pobreza y Desigualdad</i>		
MDG	Millennium Development Goals		

## Fiscal Year

Government: January 1<sup>st</sup> - December 31<sup>st</sup>

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## Principal Ratings

### SOCIAL SAFETY NET PROJECT (LN. 7337-CO, LN. 7433-CO)

	<i>ICR*</i>	<i>ICR Review*</i>	<i>PPAR</i>
Outcome	Satisfactory	Moderately Satisfactory	Satisfactory
Risk to Development Outcome	Negligible to Low	Negligible to Low	Moderate
Bank Performance	Moderately Satisfactory	Moderately Satisfactory	Moderately Satisfactory
Borrower Performance	Satisfactory	Satisfactory	Satisfactory

\* The Implementation Completion Report (ICR) is a self-evaluation by the responsible Bank department. The ICR Review is an intermediate IEG product that seeks to independently verify the findings of the ICR.

## Key Staff Responsible

### SOCIAL SAFETY NET PROJECT (LN. 7337-CO, LN. 7433-CO)

<i>Project</i>	<i>Task Manager/Leader</i>	<i>Division Chief/ Sector Director</i>	<i>Country Director</i>
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**IEG Mission: Enhancing development effectiveness through excellence and independence in evaluation.**
**About this Report**

The Independent Evaluation Group assesses the programs and activities of the World Bank for two purposes: first, to ensure the integrity of the Bank's self-evaluation process and to verify that the Bank's work is producing the expected results, and second, to help develop improved directions, policies, and procedures through the dissemination of lessons drawn from experience. As part of this work, IEG annually assesses about 25 percent of the Bank's lending operations through field work. In selecting operations for assessment, preference is given to those that are innovative, large, or complex; those that are relevant to upcoming studies or country evaluations; those for which Executive Directors or Bank management have requested assessments; and those that are likely to generate important lessons.

To prepare a Project Performance Assessment Report (PPAR), IEG staff examine project files and other documents, interview operational staff, visit the borrowing country to discuss the operation with the government, and other in-country stakeholders, and interview Bank staff and other donor agency staff both at headquarters and in local offices as appropriate.

Each PPAR is subject to internal IEG peer review, Panel review, and management approval. Once cleared internally, the PPAR is commented on by the responsible Bank department. IEG incorporates the comments as relevant. The completed PPAR is then sent to the borrower for review; the borrowers' comments are attached to the document that is sent to the Bank's Board of Executive Directors. After an assessment report has been sent to the Board, it is disclosed to the public.

**About the IEG Rating System**

IEG's use of multiple evaluation methods offers both rigor and a necessary level of flexibility to adapt to lending instrument, project design, or sectoral approach. IEG evaluators all apply the same basic method to arrive at their project ratings. Following is the definition and rating scale used for each evaluation criterion (additional information is available on the IEG website: <http://worldbank.org/ieg>).

**Outcome:** The extent to which the operation's major relevant objectives were achieved, or are expected to be achieved, efficiently. The rating has three dimensions: relevance, efficacy, and efficiency. *Relevance* includes relevance of objectives and relevance of design. Relevance of objectives is the extent to which the project's objectives are consistent with the country's current development priorities and with current Bank country and sectoral assistance strategies and corporate goals (expressed in Poverty Reduction Strategy Papers, Country Assistance Strategies, Sector Strategy Papers, Operational Policies). Relevance of design is the extent to which the project's design is consistent with the stated objectives. *Efficacy* is the extent to which the project's objectives were achieved, or are expected to be achieved, taking into account their relative importance. *Efficiency* is the extent to which the project achieved, or is expected to achieve, a return higher than the opportunity cost of capital and benefits at least cost compared to alternatives. The efficiency dimension generally is not applied to adjustment operations. *Possible ratings for Outcome:* Highly Satisfactory, Satisfactory, Moderately Satisfactory, Moderately Unsatisfactory, Unsatisfactory, Highly Unsatisfactory.

**Risk to Development Outcome:** The risk, at the time of evaluation, that development outcomes (or expected outcomes) will not be maintained (or realized). *Possible ratings for Risk to Development Outcome:* High, Significant, Moderate, Negligible to Low, Not Evaluable.

**Bank Performance:** The extent to which services provided by the Bank ensured quality at entry of the operation and supported effective implementation through appropriate supervision (including ensuring adequate transition arrangements for regular operation of supported activities after loan/credit closing, toward the achievement of development outcomes. The rating has two dimensions: quality at entry and quality of supervision. *Possible ratings for Bank Performance:* Highly Satisfactory, Satisfactory, Moderately Satisfactory, Moderately Unsatisfactory, Unsatisfactory, Highly Unsatisfactory.

**Borrower Performance:** The extent to which the borrower (including the government and implementing agency or agencies) ensured quality of preparation and implementation, and complied with covenants and agreements, toward the achievement of development outcomes. The rating has two dimensions: government performance and implementing agency(ies) performance. *Possible ratings for Borrower Performance:* Highly Satisfactory, Satisfactory, Moderately Satisfactory, Moderately Unsatisfactory, Unsatisfactory, Highly Unsatisfactory.

## Preface

This is the Project Performance Assessment Report (PPAR) for the Colombia's Social Safety Net Project (US\$271.9 million, 2005-08). The project was financed by two International Bank for Reconstruction and Development (IBRD) loans for a total of US\$86.4 million approved by the Bank's Board on November 1, 2005. The project became effective January 20, 2006. Additional financing was approved in the amount of US\$104.8 million on February 15, 2007. In order to accommodate the expansion of the loan, the closing date was extended by 12 months to December 31, 2008. The loans were 99 percent disbursed and US\$0.26 million was cancelled.

This project was reviewed as part of the IEG evaluation of Bank support to Social Safety Nets worldwide.

This report was prepared by Carlos Eduardo Velez and task managed by Victoria Monchuk. Jennie Litvack participated in the mission to Colombia in March 2010 and provided guidance to the evaluation. Evidence was obtained from multiple sources: World Bank project files, government project reports and evaluations, independent published project assessments and impact evaluations, and interviews with World Bank staff in Washington. During a mission to Colombia interviews were conducted with Bank staff and consultants in the Colombia Country Office in Bogota and with members of government agencies and ministries, think-tanks and academia, non-governmental organizations and development partners, who were knowledgeable of Bank supported social safety net programs. During field visits to Engativa and Cartagena (El Pozon), meetings were held with officers, staff, "Madres Lideres" and beneficiaries of the *Familias en Acción* Program, and with staff of related local public programs. We acknowledge gratefully all those who were interviewed and provided relevant documentation, and they are listed in Annex C. Mission support by Ms. Cristina Cifuentes and Ms. Elsa Coy in the Colombia office was also greatly appreciated. Marie-Jeanne Ndiaye provided administrative support. Javier Baez and John Heath reviewed the document.

Following standard IEG procedures, copies of the draft PPAR were sent to the relevant government officials and agencies for review and comments. No comments were received.





## Summary

As a result of the 1999 Colombian economic crisis, a decade of progress in poverty reduction was lost and living conditions deteriorated significantly for poor Colombian households. Despite the vigorous economic recovery registered after 2001 and the labor market reform passed in 2002, unemployment remained high and poverty reduction was insufficiently responsive to economic growth. Children and youth, households with unemployed and/or low skilled heads, and displaced persons (mostly women and children), particularly those living in rural areas, were most vulnerable. The existing safety net had very limited coverage among the poor, addressed only some basic vulnerabilities, and lacked strategic focus.

Responding to the crisis, the Pastrana administration (1998-2002) introduced major changes to social safety net policy with the support of the World Bank and the Inter-American Development Bank. In 2001 the government created the Social Support Network (RAS), consisting of three programs: a conditional cash transfer program (CCT) in rural areas; emergency employment; and training/apprenticeship for young adults. In 2002-03 the first Uribe administration created the Ministry of Social Protection (MSP) and updated monitoring and evaluation systems that generated the demand for comparative evaluation of government programs, including the safety net programs.

The first Uribe administration (2002-06), however, was faced with the challenge in urban areas of a growing number of involuntarily displaced persons from extremely poor families with no access to basic social protection programs. In November 2005 the World Bank's Board approved the US\$92.7 million *Social Safety Net Project* with the objective "to strengthen the country's social safety net by consolidating and expanding the successful *Familias en Acción* Conditional Cash Transfer program and improving the monitoring and evaluation of the country's safety net portfolio." The project was financed by a US\$84.1 million IBRD loan and became effective January 2006. The first Uribe administration, approaching the end of its first term, borrowed to finance its safety net for an amount that was only sufficient to maintain the CCT for current beneficiaries in rural areas and small towns, plus a moderate expansion to 60,000 more families.

Following the election, the second Uribe administration (2006-10) decided to expand *Familias en Acción* in urban areas, more than tripling the number of beneficiaries. Additional financing in the amount of US\$104.8 million was approved by the Bank in February 2007 to fund the accelerated pace of expansion. The government contributed an additional US\$68 million to fund the expansion for the involuntarily displaced. The government announced the new strategy to eradicate extreme poverty – *Red Juntos* – and designated *Familias en Acción* as the core program to support the strategy over the next decade.

Most of the funding of the project (99 percent) was to finance the consolidation and expansion of *Familias en Acción* to 1.2 million families, including 200,000 internally displaced families. A health and nutrition grant was provided to the poor families of children 0-6 years of age, provided that the children receive all vaccinations and participate in growth monitoring. For children 7-17 years of age, poor families received an education grant, provided that the children enroll at school and attend regularly.

The design of the project was based on the previous operational experience of the Bank in the creation of *Familias en Acción*. Hence, benefit levels were similar to the ones used in the previous phase, calibrated using relevant welfare indicators of the extremely poor and adjusted for inflation. The design also sought to address “second generation” issues in the CCT, namely: (i) modification of the education benefits to emphasize secondary school incentives in large urban areas, as recommended by impact evaluations; (ii) expansion of opportunities to ethnic minorities; and (iii) incorporation of information technologies to reduce transaction costs. *Familias en Acción* retained the proxy-means test, Sistema de Selección de Beneficiarios de Programas Sociales (SISBEN), as the main targeting tool. SISBEN was well known and credible to the poor, and incidence analysis found it to be the most effective targeting system in Colombia. Thanks to interagency coordination, the SISBEN registry was updated and expanded and *Familias en Acción* expanded rapidly in urban areas.

The objective of consolidating and expanding *Familias en Acción* was substantially achieved. The program expanded to nearly all Colombian municipalities and the number of beneficiaries quadrupled, reaching nearly 1.8 million families. Information technologies were incorporated into the program, allowing health and education CCT payments to be accessed with debit cards in large cities. The project also piloted innovative methods (“caja extendida”) to reach beneficiaries in rural municipalities without commercial banks. Although only one of the three planned impact evaluations in urban centers was completed, this study helped inform the benefit structure for secondary students in urban areas. Forty-five percent of the benefits went to the poorest quintile of households, exceeding the 40 percent target. The target on secondary school attendance was not reached, however: seventy-two percent of school children in participating extremely poor families attended school at least 80 percent of the time.

Due to the rapid scale-up of the program in urban areas, the target on uptake (registered families as a share of eligible families within the poorest quintile),—70 percent—was not reached. As of 2008, sixty-three percent of the poorest quintile registered in the program overall. The eligible rural population, representing nearly two-thirds of all participants, had the highest take-up rate (68 percent). However, the rates were much lower in urban areas—59 percent in medium-size towns, 50 percent in big cities, and only 39 percent in Bogota. Although the take-up rate of *Familias en Acción* overall declined from 71 to 63 percent from 2005-08, the enrollment rate (beneficiary families as a share of registered families within the poorest quintile) rose from 80 to 97 percent, resulting in an overall increase in coverage of eligible families nationally from 57 to 61 percent.

The shortfall in take-up rates mainly reflects the difficulties faced in reaching the urban poor, especially in Bogota. The major factors in urban areas were fiscal and bureaucratic restrictions and errors in the SISBEN registration. The low take-up rate in Bogota is partly explained by the fact that it implemented its own CCT program for secondary school and other nutrition programs targeted to the same population that was supposed to be reached by *Familias en Acción*.

Short-term education, nutrition, health and food intake indicators improved for program beneficiaries. For example, chronic malnutrition of children aged 0-6 decreased by 9 percentage points in rural areas and food intake increased by 15 percentage points. Similar findings were reported for medium-term indicators of educational outcomes: high school completion rates increased by 4-8 percentage points for beneficiaries compared to non-beneficiaries.

The objective of improving the monitoring and evaluation (M&E) of the borrower's social safety net portfolio was also substantially achieved. The institutional capacity of the MSP was assessed; an M&E strategic plan was developed with indicators corresponding to the objectives of the Social Protection System; MSP staff were trained in the structure, relevance and validity of the proposed M&E system; an M&E system for the MSP was developed that provided an integrated and consistent information platform for safety net activities; and nine of 17 relevant agencies and nearly all programs (99 percent) adopted the integrated M&E system. As a result of these activities: a results-based approach was applied to the budget at the Institute of Family Welfare; a detailed agenda for the evaluation of safety net programs was developed; and the plans and achievements of the M&E system for the social safety net portfolio at the MSP were publicly disseminated, promoting transparency and accountability.

The outcome of the project is rated *satisfactory*; the project substantially achieved both of its objectives and the relevance of objectives, relevance of design, and efficiency were also substantial. The risk to development outcome is rated *moderate* due to financing risks. Bank performance is rated *moderately satisfactory*. Quality at Entry suffered from some fiduciary shortcomings as well as inadequate indicators for measuring the achievement of the second objective. Bank supervision was satisfactory. Borrower performance is rated *satisfactory*. The government manifested strong and sustained commitment to the policy reform of the social safety net. Implementing agency performance was satisfactory on balance, albeit with two minor shortcomings on M&E and delayed implementation of the second component.

## Lessons

- ❖ The expansion of CCT programs from rural areas to large urban centers presents challenges. The urban poor do not have the same needs as the rural poor in terms of access to basic health and education services for their children. Moreover, they have weaker social networks and frequently face higher opportunity costs of time. Adjustments have to be made, including making enrollment more accessible to the urban poor. Coordination in big cities can be challenging when local social programs are close substitutes of the national CCT program.
- ❖ Low-cost systems to manage and monitor large-scale CCT programs are essential to keep the marginal cost of expansion low. The availability of adequate information and communication technologies made *Familias en Acción* monitoring and management feasible and cost-effective as it expanded. Moreover, technologies for financial transactions and banking were introduced during the program, reducing administrative costs and transaction costs for the beneficiaries. Marginal changes in benefit levels for a specific subset of beneficiaries can be achieved at low marginal cost if technologies are in place.
- ❖ Making impact evaluation results widely and continuously available can help to shore up borrower commitment to a program, which is particularly important when new administrations come into power and are under pressure to show results. Despite the coherent strategic vision underpinning *Familias en Acción* initiated by the previous administration, the incoming Uribe administration remained skeptical of the program until the impact evaluation results of the first phase became available. Based on these findings, the new administration embraced the program and pushed for its expansion. *Familias en Acción* maintains its core role within the safety net under the Santos government that came into power in August 2010.

- ❖ Any significant expansion of CCT programs should be based on evidence from impact evaluations, to improve the efficiency and efficacy of scale-up. In this project, evidence-based modifications of the incentives for secondary schooling helped increase the effectiveness of CCT education grants in large towns.
- ❖ Major changes in the M&E system at the Ministry of Social Protection required changes not only in information systems but also within the whole institution. Improvements in M&E require changes in organizational culture that acknowledge the relevance and validity of the indicators and the anticipated use of the evidence in the decision-making process.

Vinod Thomas  
Director-General  
Evaluation

# 1. Background and Context

## Macroeconomic Context

1.1 Following the 1999 economic crisis, Colombians experienced a major deterioration in living conditions, which caused increasing violence. More than a decade of progress in poverty reduction was lost, and by 2001 the poverty count already exceeded the level registered in 1988. The unemployment rate more than doubled, peaking at 21 percent in 2000.<sup>1</sup> The cost of violence in terms of Gross Domestic Product (GDP) growth was estimated at 2 percentage points per year.<sup>2</sup>

1.2 Economic recovery was marked between 2001 and 2007. Annual economic growth accelerated from 2.2 percent in 2001 to 7.5 percent in 2007, averaging 4.6 percent for the period.<sup>3</sup> But despite the economic recovery and an important labor market reform passed in 2002, total unemployment remained high and job creation was insufficient to bring unemployment back to single digits. By 2007 unemployment remained 2.5 percentage points above the 1995 unemployment rate recorded at the peak of the previous economic cycle.<sup>4</sup> Moreover, informal employment and self-employment remained high, particularly among the less skilled. And most low skilled informal workers lacked insurance coverage for major economic risk in the form of family health insurance, severance payments, and pension saving accounts.<sup>5</sup>

## Poverty and Inequality

1.3 Although the economic recovery raised GDP per capita by 24 percent, poverty fell more modestly, from 53.7 percent in 2002 to 45.5 percent in 2009; extreme poverty fell from 19.7 to 16.4 percent.<sup>6</sup> The most vulnerable groups included children and young adults. In addition, households with unemployed and/or low skilled heads, displaced people (mostly women and children), and people who did not own their homes were vulnerable.<sup>7</sup> In 1999, rural poverty rates exceeded urban rates by more than 25 percentage points, and rural extreme poverty rates were more than double those in urban areas. Poor children were the most vulnerable to the risk of poor health, malnutrition, and lack of education. Male adolescents also faced risks due to elevated school drop-out rates, violence, homicide, poor job skills, and high unemployment. Adolescent girls faced the risk of unwanted pregnancies that made it harder for them to move out

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<sup>1</sup> Author's calculations based on DANE's quarterly unemployment tables ([www.dane.gov.co](http://www.dane.gov.co)).

<sup>2</sup> World Bank (2002a), p. 1.

<sup>3</sup> Author's calculations based on Colombia GDP tables at Banco de la República ([www.banrep.gov.co](http://www.banrep.gov.co)).

<sup>4</sup> Author's calculations based on DANE's quarterly unemployment tables.

<sup>5</sup> The share of formal workers in total employment—entitled to social insurance coverage—had been decreasing during the 90's—from 74 percent in 1994 to 54 percent in 2001 (source: author's calculations based on DANE's quarterly unemployment tables).

<sup>6</sup> Boletín MESEP, DANE-DNP (2010).

<sup>7</sup> And the relatively better off are households with college-educated head, the elderly, the pensioners and the homeowners. See Colombia Poverty Report (World Bank 2002a). This poverty profile was incorporated in the Bank's recommendations of SSN priorities.

of poverty. Finally, households whose heads were unemployed had a poverty rate 25 percentage points higher than household heads who were employed.<sup>8</sup>

1.4 In 2002 Colombians who were poor or nearly poor typically used three informal coping strategies to manage adverse income shocks: mobilizing available household labor (including child labor), reducing consumption, and using physical assets (mainly housing). Poor families were more likely to get involved in illegal activities (armed group collaboration, drug dealing and prostitution), pull children out of school, transfer children from private to public schools, reduce the number and quality of meals, connect illegally to public utilities, and rent out space in the home for a business or to shelter family members.<sup>9</sup>

1.5 Income inequality in Colombia has been persistently high by global standards and increased over the two past decades, weakening the impact of economic growth on poverty reduction.<sup>10</sup> Most Colombians consider the persistent high level of income inequality “unfair,” thus social assistance programs enjoy wide political support. According to the *Latinobarometro Survey 2001*, in Colombia more than 95 percent of the population considers the distribution of income to be unfair or very unfair.<sup>11</sup> This perception of inequality is consistent with Colombia’s low level of social mobility.<sup>12</sup> Thus, it is not surprising that across the Colombian political spectrum social assistance programs are viewed favorably.

## Social Safety Net Challenges

1.6 Despite the striking inequality and poverty levels in Colombia, there was no formal social safety net in Colombia before the 1999 crisis and the resources allocated to social assistance were small by international standards. Existing programs related to social safety net functions addressed some key vulnerabilities, but they were dispersed and lacked strategic focus.<sup>13</sup> Poverty targeting was limited and little use was made of the national anti-poverty program beneficiary selection system SISBEN (*Sistema de Selección de Beneficiarios*) beyond the subsidized health insurance program, which had limited coverage at the beginning of the decade.<sup>14</sup> Social Protection programs were primarily designed for formal sector workers, a shrinking fraction of

<sup>8</sup> See Colombia Poverty Report (World Bank 2002a) and Colombia Safety Net Assessment (World Bank 2002b).

<sup>9</sup> See Colombia Safety Net Assessment (2002b) by the World Bank. A recent study Núñez (2009), based on 2008 data confirms those key risk sources and coping strategies and highlights one additional source of risk: a major sickness of a household member, and the importance of having access to family health insurance to cope with it. Núñez (2009) shows that for any income group in Colombia the main source of concern of the household heads is facing sickness of a family member—twice as important as having insufficient income. The same document indicates that insurance coverage for the poor—mostly subsidized—increased significantly during the decade.

<sup>10</sup> According to a World Bank Flagship Report on Inequality for Latin America and the Caribbean (Di Ferranti and others 2003) Colombia had the second most unequal income distribution in the 1990’s and the fourth most unequal in the first half of the 2000’s decade. Colombian government estimates showed that inequality had increased by almost 5 points during the 1999 crisis, relative to 1995 levels, reaching a Gini coefficient of 0.60. Following this maximum, income inequality has diminished marginally, and the Gini coefficient still remained at 0.58 in 2009, according to recent official *Boletín MESEP* (DANE-DNP 2010)

<sup>11</sup> This makes Colombia the country with the second highest level of perception of unfairness of income inequality in Latin America (Di Ferranti and others 2003; Figure 1.3 p. 11).

<sup>12</sup> See Andersen (2001), Behrman, Gaviria y Székely (2001) and Gaviria (2006).

<sup>13</sup> See Colombia’s Social Safety Net Assessment (World Bank 2002b).

<sup>14</sup> The SISBEN proxy means test had been created in 1994 and its database had not been updated by 2001. See CONPES Social documents # 040/1997, #055/2001, #100/2006, #117/2008.

the labor force (declining from 74 to 54 percent of total employment between 1994 and 2001), or could not reach the poor.<sup>15</sup> In some cases there was fragmentation of programs within institutions and in other cases there were overlapping program objectives across institutions. Moreover, the availability of information on the effectiveness of the social safety net system was very limited, both in terms of the outputs and outcomes produced and how much budget was spent.

1.7 The Colombian government was poorly equipped to face the consequences of the 1999 economic crisis (the worst economic downturn since the Great Depression). In response to the crisis, the Pastrana government (1998-2002), introduced major changes to social safety net policy with the support of the World Bank and the Inter-American Development Bank (IDB). In 2001, the government created the Social Support Network (RAS) to alleviate the impact of the crisis on the most vulnerable and to protect the human capital formation of their children. With World Bank and IDB support, the government designed and implemented three social safety net programs, which included a conditional cash transfer (CCT) program in rural areas (*Familias en Acción*), an emergency program to create employment in community projects (*Manos a la Obra*), and a youth job-training program (*Jovenes en Acción*). The new programs were added to other preexisting social safety net programs and subsidies targeted to the poor, such as quasi-means tested public utility subsidies and public day-care centers (*Hogares Comunitarios de Bienestar*), which were simultaneously expanded to increase the coverage to the extremely poor and other vulnerable groups.

1.8 The first Uribe administration (2002-03) adopted the view of systematic development of a social safety net and a Social Protection System to address idiosyncratic and systemic risk of the household disconnected from the social protection mechanisms of the formal labor market.<sup>16</sup> It created the Ministry of Social Protection (MSP) and upgraded the performance and evidence-based monitoring and evaluation (M&E) systems at the National Planning Department, strengthening the demand for evaluation of government programs, including the ones in the social safety net system. The creation of the MSP integrated three ministries into one with health, labor, and social protection responsibilities and reflected a maturing vision of the challenges of social protection and social assistance.

1.9 The MSP became the backbone of the social safety net, and its creation was crucial for the move toward a more coordinated and efficient management of the social safety net programs. However, key programs of the RAS operated by the Acción Social agency, in the Office of the President, remained insufficiently integrated in the Social Protection Ministry, although they were supposed to migrate to the ministry following its creation. Moreover, the pilot phase of *Familias en Acción* in 2001 indicated that a reform of the SISBEN proxy means test was needed to solve the problems with low coverage and low take-up rates.<sup>17</sup> Increasing access to *both* the

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<sup>15</sup> For example, Núñez (2008) shows that access to job training programs was only 7 percent and 3 percent among the urban and rural poor in 2003, respectively. Social protection programs included social insurance programs (health and pensions) and social assistance programs such as family welfare (daycare and school feeding), housing programs, secondary education scholarships, and “Family subsidy” by local compensation association (Cajas de Compensación). See a more detailed description in Table 4.1, Colombia Safety Net Assessment (World Bank 2002b).

<sup>16</sup> CONPES policy documents # 3187/2001 and #3144/2002 created the Social Risk Management System and the Social Protection Fund.

<sup>17</sup> A considerable number of extreme poor beneficiaries had no valid SISBEN records.

CCT and subsidized health insurance coverage helped address three of the four main functions of the social safety net, namely poverty alleviation, promotion of human capital investment in the pre-school and school-age population, and mitigation of idiosyncratic risk (mainly health shocks). By 2004, *Familias en Acción* had become a main component of the three RAS programs and covered one quarter of the poor in Colombia, mostly in rural areas. Impact evaluations documented benefits in terms of better nutrition, food intake, rates of vaccination, and school attendance.<sup>18</sup>

1.10 Improvements in the results-based M&E system brought new challenges for the Ministry of Social Protection. As part of a reform to track public administration results, generate accurate information on resource allocation, and improve the effectiveness of public expenditure, the government reformed and upgraded the National System for Results Evaluation (SINERGIA) and the Evaluation Department (DEPP) at the National Planning Department. This led to the creation of the Government Results Information System (SIGOB).<sup>19</sup> SIGOB not only became the scorecard for the President's Office but a tool for inter-institutional coordination between ministries, agencies and the National Planning Department. These improvements created information demands for the Ministry of Social Protection to monitor and evaluate outcomes of programs and agencies under its responsibility.

1.11 At the same time, increasing numbers of people from conflict areas were displaced to urban areas, creating new demands for the social safety net. Some 423,000 persons were displaced in 2002 alone and the accumulated number of displaced individuals from 2000 to 2005 reached 1.6 million. The displaced tended to be poor and moved mainly into medium and large municipalities. After 2001, the government raised program spending to respond to the needs of the displaced population, and in 2005 adopted a comprehensive plan to meet their needs and raise investment even further.<sup>20</sup> The safety net needs of the growing displaced population in urban areas were in addition to those of the large proportion of extremely poor that still had no access to any major social safety net programs.<sup>21</sup>

## **Higher Level Objectives, CAS Pillars and Bank Support to the Social Safety Net**

1.12 As part of Colombia's National Development Plan for 2002-06 the government vision included a goal of improving social equity and focused on the integration and consolidation of the social protection system and its key programs.

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<sup>18</sup> Preliminary results of the impact evaluation became available by 2003 (see Attanasio and others 2004, 2005, and 2006) and a synthesis of those results was published by SINERGIA in the document DNP-SINERGIA (2006). The availability of the evidence on the effectiveness of the CCTs by 2003 was instrumental to gain the support of the new administration (Uribe I) for maintaining and expanding the program, in a context of tight fiscal constraints. Despite these developments, the social safety net system portfolio did not have effective programs to cover systemic risk (income shocks) due to unemployment. First of all, after 2002 under the new Uribe administration, the government phased out the emergency employment program, *Manos a la Obra*. Secondly, the unemployment insurance program started after the Labor Reform Law in 2003 was ineffective. According to Sanchez (2009) the program only covered 1 of every 20 unemployed household heads.

<sup>19</sup> See CONPES policy document #3294/2004.

<sup>20</sup> See CONPES policy document #3400/2005, and Ibanez (2007).

<sup>21</sup> According to registry of *Familias en Acción* beneficiaries, by the end of 2005 only one in four eligible families had been offered access to CCT benefits.



1.13 To support this objective, the Bank's 2002 Country Assistance Strategy (CAS) for Colombia had three main pillars: achieving fast and sustainable growth, sharing the fruits of growth, and building efficient, accountable, and transparent governance. In relation to the second pillar, the 2002 CAS proposed strengthening the social safety nets to address the main risk of the most vulnerable population groups. The World Bank had supported Colombia's social safety net programs since the 1999 economic crisis. The three new social safety net programs were financed with loans from the Bank and the IDB, and were implemented in rural areas after the 1999 economic crisis to alleviate the impact on the most vulnerable groups and protect ensure investments in the human capital of their children.<sup>22</sup> In agreement with the government, throughout the decade the World Bank and IDB alternated in financing *Familias en Acción*, but provided continuous joint technical supervision.

1.14 From the start of the RAS operations (1999-2001), both programmatic and investment lending concentrated on the main functions of the social safety net: (1) protecting the chronic poor and mitigating their systemic risk during the crisis by alleviating their income shortage (Community Works and Employment Project, 2000-05; and Human Capital Protection Project, 2001-05); (2) protecting human capital investments in poor children's nutrition, health, and education (Human Capital Protection Project, 2001-05); (3) promoting enrollment and completion of tertiary education for students of economically disadvantaged backgrounds (Higher Education Improving Access Project, 2002-08), or by expanding access of poor children to day-care and immunization (Social Sector Adjustment Loan (SECAL), 2002, and two following Programmatic Labor Reform and Social Structural Adjustment Loans, in 2004 and 2005), or by improving the allocation—equity and efficiency—of educational resources to poor children (Social Sector SECAL, 2002); and (4) mitigating the idiosyncratic risk of the poor and vulnerable by expanding insurance coverage of the poor (Social Sector SECAL, 2002, and the Programmatic Labor Reform and Social Structural Adjustment Loans in 2004 and 2005).

## 2. Project Objectives, Design, and Implementation

2.1 To continue its support for safety net development in Colombia the World Bank's Board approved the US\$92.7 million Social Safety Net Project on November 1, 2005. The project became effective January 20, 2006. The project was financed by a loan from the Bank of US\$86.4 million. Once the Uribe administration was re-elected in May 2006, the government embarked on an expansion of *Familias en Acción*, aiming to use up available funds by early 2007. Therefore, the government requested additional financing in proportion to the new coverage targets. Additional financing for US\$104.8 million was approved on February 15, 2007, increasing total financing to US\$191.2 million and the total project costs to \$271.9 million. To accommodate the expansion, the closing date was also extended to December 31, 2008.

2.2 According to both the Project Appraisal Document (PAD) (World Bank 2005) and the Loan Agreement, the Project's Development Objective was to "strengthen the country's social safety net by consolidating and expanding the successful *Familias en Acción* Conditional Cash

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<sup>22</sup> The Bank supported both the CCT and emergency unemployment programs and financing was supposed to expire by 2004 (Human Capital Protection Project, 2001-05, Ln. 7050-CO).

Transfer program and improving the monitoring and evaluation of the country's safety net portfolio". The Additional Financing PAD (World Bank 2007a) and Loan Agreement documents did not modify the development objective, the project's design, or the implementation arrangements.<sup>23</sup>

2.3 The project contributed to higher-level objectives as well, responding to the CAS and government priorities of achieving the Millennium Development Goals (MDGs).<sup>24</sup> The project contributed to all three CAS pillars: "(i) sharing the fruits of growth by providing a strengthened social safety net to those who are not benefiting from the renewed growth; (ii) contributing to further economic growth by investing in the education and health of today's poor children; and (iii) building quality government through the development of an M&E system in the Ministry of Social Protection, which will allow for more efficient and effective social risk management among the population and accountability of the Ministry's actions."<sup>25</sup>

## Project Components and Design

2.4 The project had two components. Component 1 (US\$196.2 million planned, US\$270.7 million actual) supported the project's first objective to consolidate and expand *Familias en Acción* to 1.2 million families, including 0.2 million displaced families.<sup>26</sup> Component 2 (US\$1.4 million planned, US\$1.2 million actual) was closely aligned with the project's second objective, to improve the M&E system of the MSP.<sup>27</sup> Additional financing was mainly used to scale-up the number of beneficiaries of the original program target of 400,000 to 1.2 million families. The log-frame in Table 1 describes how the activities in each component were expected to produce intermediate results, outputs, and outcomes that, in turn, would contribute to achievement of the development objective. Intermediate results are four outputs (in each municipality) crucial to reach the desired output and outcome indicators: the dissemination of basic program information to beneficiaries; the readiness of the targeting system; the coordination mechanism with the national implementing agency; and the system to verify compliance. The list of key indicators in the PAD, baselines, and targets, when available, are listed in Annex Table B-1.

2.5 **Component 1:** This component supported *Familias en Acción* to provide cash to poor households with children 0-17 years of age *conditional* on behavioral changes to enhance their human capital.<sup>28</sup> A health and nutrition grant was provided to poor families with children, 0-6 years of age, provided that the children receive a full course of vaccinations and attend growth-monitoring check-ups.<sup>29</sup> An education grant was provided to poor families with children 7-17 years of age, provided that the children enroll at school and attend classes at least 80 percent of the time. Compliance was reported by health and education facilities. The design of Component

<sup>23</sup> As a response to the 1999 crisis, both the Bank and the IDB jointly supported the *Familias en Acción* program through alternating financing and joint technical supervision in agreement with the government.

<sup>24</sup> Specifically four MDGs: reduction of poverty, hunger and malnutrition (MDG 1); achieving universal primary education (MDG 2), reducing child mortality (MDG 4), and improving maternal health (MDG 5).

<sup>25</sup> Social Safety Net Project PAD (World Bank 2005a), p. 6.

<sup>26</sup> After Additional Financing the appraisal estimate for Component 1 was raised to US\$196.2 and Component 1 was left unchanged.

<sup>27</sup> PAD (P104507) raised the target number of beneficiaries.

<sup>28</sup> Criteria for selecting poor households is explained below.

<sup>29</sup> Until 2005 children ages 0-6 were not eligible for the CCT if they already benefited from programs by the Instituto Colombiano de Bienestar Familiar such as day-care at Hogares Comunitarios de Bienestar.

1 was based on previous operational experience of the Bank in the creation of *Familias en Acción* (Human Capital Protection Project, 2001-05, Ln. 7050-CO.)

2.6 *Targeting instrument:* Beneficiaries of the CCT program were selected using SISBEN, a targeting system based on an index that ranks families according to their poverty or welfare levels, taking into account a set of economic and social indicators that describe their situation in terms of multiple dimensions of poverty.<sup>30</sup> SISBEN classifies households into five mutually exclusive groups; SISBEN 1 and 2 correspond to the groups with the lowest welfare levels and incomes below the official poverty line.<sup>31</sup> SISBEN started in 1994, and has been updated and revised to expand coverage and to minimize leakages due to moderate inclusion errors. Expanding and updating the SISBEN registry became critical for augmenting coverage during the previous phase of *Familias en Acción*.<sup>32</sup> Nevertheless, the number of families covered by SISBEN needed to be expanded fourfold during the execution of the second phase.

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<sup>30</sup> For the project SISBEN-1 was used, which is the lowest category of SISBEN.

<sup>31</sup> In principle, both SISBEN 1 and 2 were potential beneficiaries in the first phase of *Familias en Acción*, however due to limited resources only the poorest became eligible beneficiaries.

<sup>32</sup> The SISBEN register had been updated in 2003 and, it had expanded to 627 municipalities.

**Table 1. Project Log-frame: Components, Indicators and Objectives**

Component	Activity description and conditions	Intermediate Results	Output indicators	Outcome indicators	Development objectives
1. Consolidate and expand <i>Familias en Acción</i> to 1.2 million families (including 0.2 million displaced)	<p>Conditional cash transfer to poor household with children:</p> <p>0-6 years of age, health and nutrition grant to prevent limited early childhood development and/or malnutrition, provided children had all vaccinations and growth monitoring controls.</p> <p>7-17 years of age, education grant to prevent low human capital development, provided children enroll at school and attended classes regularly.</p>	<ul style="list-style-type: none"> <li>• 70% of total of revised SISBEN 1 families in new municipalities registered in the program.</li> <li>• 100% of Municipalities signed collaboration agreements for timely and adequate supply of education and health services (responsibilities and eventual sanctions specified).</li> <li>• Beneficiary information booklets published and distributed to new municipalities with training.</li> <li>• Functional monitoring system of human capital conditions.</li> </ul>	<ul style="list-style-type: none"> <li>• At least 40% of benefits of <i>Familias en Acción</i> program going to bottom quintile of the population (SISBEN 1).</li> <li>• At least 70% of SISBEN 1 eligible families are enrolled in participating municipalities.</li> <li>• At least 80% of primary-age school-age children in extremely poor beneficiary families attending school at least 80% of time.</li> <li>• At least 95% of beneficiary 0-6 year old children with completed growth monitoring and health check-ups, according to MSP protocol.</li> </ul>	<p>For children of household beneficiaries of the program:</p> <ul style="list-style-type: none"> <li>• Raise school participation of children: both enrollment and drop-out rates in primary and secondary.</li> <li>• Reduce chronic malnutrition of children; improve nutritional intake; improved anthropometric development; better health conditions; raise cognitive development, school achievements and long term productivity.</li> <li>• Increase vaccination coverage and reduce the incidence of disease.</li> </ul>	<p>Strengthen the country's social safety net</p> <p>by</p> <p>consolidating and expanding the <i>Familias en Acción</i> Conditional Cash Transfer program</p> <p>and</p> <p>improving the monitoring and evaluation of the country's safety net portfolio</p>
2. Improving the M&E system of the MSP	Planning and piloting an integrated Results- Based Monitoring and Evaluation System for the MSP.	<ul style="list-style-type: none"> <li>• Institutional capacity assessment of MSP and its agencies.</li> <li>• Develop strategic plan for a sustainable integrated Results Based M&amp;E system.</li> <li>• Train key government officials to benefit from M&amp;E system.</li> <li>• Build consistent information system.</li> <li>• Expand M&amp;E to: (1) include other MSP agencies, and (2) cover similar programs managed by local governments.</li> </ul>	<ul style="list-style-type: none"> <li>• Publicly available information on the coverage, financing, and impact of key social safety net programs managed by the MSP and its affiliated institutions.</li> <li>• At least 50% of social safety net programs of the MSP and at least two of its affiliated organizations are included in the M&amp;E system.</li> </ul>	<ul style="list-style-type: none"> <li>• Strengthen the relationship between outcome indicators and budget allocation in the social area.</li> <li>• Strengthen the MSP's institutional capacity to evaluate its current programs.</li> <li>• Improve transparency and accountability in the MSP.</li> </ul>	

Source: PAD (World Bank 2005a), Loan Agreement (World Bank 2005b) and Proposed Additional Financing (World Bank 2007).

2.7 *Benefit levels:* Bimonthly conditional cash transfers were provided for each child. The nutritional grant for children 0-6 was set at COL\$46,500 (US\$21.1), the primary education grant was set at COL\$14,000 (US\$6.4) and the secondary education grant was set at COL\$28,000 (US\$12.7). These benefit levels are similar to the ones used in the previous phase of *Familias en Acción*, adjusted for inflation, and had been calibrated using empirical evidence on poverty and expenditure patterns of the extreme poor.<sup>33</sup>

2.8 Consolidation of *Familias en Acción* sought to address second generation issues of the CCT program and to strengthen its role within the social safety net. The design left open the possibility of going beyond the basic CCT design (implemented from 2001 to 2005) in several directions, by: (i) modifying the education benefits to emphasize secondary school incentives relative to primary schooling in large urban areas (including grade differentiation); (ii) establishing more flexible beneficiary inscription procedures to expand opportunities to excluded population (displaced populations, indigenous and Afro-Colombian ethnic minorities, and disabled youth); (iii) incorporating information technologies to reduce transaction costs (extension to municipalities without banking services and use of debit cards in large urban centers); and (iv) including childhood development in training activities for mothers of beneficiaries (“encuentros de cuidado”). Several innovations were to be tested during a transition phase by implementing pilots. Overall these design adjustments, were expected to consolidate the CCT program by making it more inclusive, effective, and adaptable to regional and individual circumstances.

2.9 **Component 2:** The project financed the planning and piloting of an integrated Results-Based M&E system for the MSP. Intermediate results and outputs derived from this activity were expected to produce three desired outcomes: (1) a strengthened relationship between outcome indicators and budget allocation in the social protection programs; (2) strengthened institutional capacity of the MSP to evaluate its current programs; and (3) improved transparency and accountability in the MSP. Although the activities of this component would certainly move the MSP towards the three desired relevant outcomes, some intermediate and outcome indicators assumed that within two years the Results-Based M&E would be fully operational.<sup>34</sup>

2.10 Together, the outcomes from Components 1 and 2 were expected “to strengthen the country’s social safety net” (World Bank 2005).

2.11 **Implementation Arrangements.** Each project component had a different implementing agency. Acción Social, located in the Office of the President, was responsible for implementing Component 1, and benefited from the lessons learned during the previous phase of *Familias en Acción*. Component 2 was to be implemented by the MSP General Planning and Sector Policy Department (Dirección General de Planeación y Análisis de Política Sectorial) in close partnership with the National Planning Department’s Evaluation Department (DEPP), which had the responsibility of coordinating M&E efforts across government agencies.

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<sup>33</sup> Regardless of the number of children in the family, the health grant of US\$20 was equal to the extreme poverty gap in Colombia in 2001—that is, the difference between the cost of a basic food basket and the average income of the extreme poor, and the education grant of US\$6 per month in primary and US\$12 per month in secondary were equal to the average of direct education expenditure per student in household survey data.

<sup>34</sup> The first outcome indicator and the first and second intermediate indicators for Component 2 in Table B-1.

2.12 **Safeguards.** The project was classified under Category C, as no potential adverse environmental impact was anticipated. It was subject to the indigenous peoples safeguard policy that sought to ensure inclusion of indigenous peoples and Afro-Colombians as beneficiaries of CCTs. A social assessment plan was conducted and an Indigenous Peoples Development Plan was prepared accordingly to identify ways to reach eligible members of those groups and serve them in a culturally appropriate way.

2.13 **M&E design.** M&E had become a priority theme for the Borrower since the start of *Familias en Acción*. Consequently, Component 2 of this operation was designed to support monitoring and evaluation of the main social safety net programs at the MSP, including *Familias en Acción*.<sup>35</sup> M&E design for outputs and outcomes of Component 1 was based on project supervision during implementation and administrative data of the program's management information system (the pace of disbursements, completion of co-responsibilities of municipalities, household compliance information), and household survey data (such as consumption and income to estimate poverty and inequality, education enrollment and school attendance, morbidity, and health care, and anthropometric measures for malnutrition). Two household surveys were to be used – the household survey for the baseline of the pilot and the future household survey of the on-going evaluation of *Familias en Acción*. A separate impact evaluation was planned for the urban pilot of *Familias en Acción* in three urban centers.<sup>36</sup> Annex Table B-1, lists the set of key output and outcome indicators. Monitoring of the activities contributing to the second objective (Component 2) included indicators on technical assistance activities and product delivery.

2.14 There was one minor shortcoming in M&E design: it did not include detailed indicators of progress toward the implementation of the Results Based M&E System because the project appraisal document assumed that the system at the MSP would be fully operational and publicly available in two years.<sup>37</sup> Hence, M&E indicators of Component 2 were not fully adequate to follow the progress of implementation and results. More attention should have been paid in developing indicators of the gradual advancement of the activities and objectives over the project's time frame.

## Implementation

2.15 **Component 1.** At appraisal the expansion plan for *Familias en Acción* was relatively modest: it raised the total number of beneficiary families from 340,000 to 400,000. It was supposed to enter into marginalized urban areas and high priority rural zones affected by violence (totaling 57 municipalities). However, following the 2006 presidential elections, the reelected administration (Uribe, 2006-10) decided to expand the program further into urban areas. The motivation for the larger-than-planned expansion was that the government needed to

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<sup>35</sup> This commitment to M&E is valid for the MSP, DNP and the implementation agency.

<sup>36</sup> Impact evaluations used a “quasi-experimental approach” and two methodologies adequate to this kind of data: Differences in Differences and Controlling for Observable Differences. The impact evaluation is based on three panel surveys (2002, 2003 and 2006), applied in 122 municipalities in both urban and rural location. The numbers of households sampled in the three surveys were respectively, 11462, 10742 and 9566. See DNP-SINERGIA (2006), page 9.

<sup>37</sup> However, the PADs implicit log-frame planned activities that were adequate and relevant to achieve the objectives of Component 2.

respond to the emerging demands of the displaced population and the large number of extremely poor that remained without access to the CCT program.<sup>38</sup> By October 2006, the number of beneficiary families had already reached 582,000 and, at that pace, funds were going to be exhausted by February 2007. With additional government and Bank financing—approved in February 2007—the new target was to reach 1.2 million beneficiary families using the SISBEN targeting system, including 0.2 million displaced families.<sup>39</sup> The closing date was extended by a year.

2.16 *Scale up:* Owing to the substantial expansion of Component 1 in December, 2008, the number of beneficiary families had approximately quadrupled in relation to the start of the project. The number of child beneficiaries also quadrupled. The largest expansion happened for the early childhood benefit (the health grant 0-6).<sup>40</sup> The number of municipalities covered rose from 702 to 1,096. The execution of the expansion goals in 2007 temporarily strained the capacity of the information system and the compliance verification system at the implementing agency Acción Social.<sup>41</sup>

2.17 The expansion into urban areas produced a reduction in the program take-up rate by seven percentage points from 2005 to 2008 (Figure B-1), and at the end of the project the average take-up rate was lower than the target (63 percent versus 70 percent). The take-up rate is defined as the number of registered SISBEN 1 families as a percent of the number of eligible SISBEN 1 families. The decreasing trend in the take-up rate can be partially explained by the lower take-up rates in 39 medium size towns (59 percent) and 16 big cities (50 percent), although the composition of the eligible population remained predominantly rural (64 percent rural) with relatively high take-up rates (68 percent take up-rate).<sup>42</sup> Nearly half of shortfall in the take-up rate is explained by the special case of Bogota, where it reached just 39 percent. Excluding the city of Bogota the average take up rate at the end of 2008 would have been 66 percent, which means that the shortfall in relation to the target rate would have been reduced from 7 to 4 percentage points.<sup>43</sup> Moreover, the low take-up rate in Bogota was mitigated by the fact that the city implemented its own CCT program for secondary school and other nutrition programs targeted to the same population that was supposed to be reached by *Familias en Acción*.

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<sup>38</sup> The government executive branch not only had the pressure of humanitarian organization and public opinion, but a ruling from the Constitutional Court ordering humanitarian assistance to the displaced population, as well.

<sup>39</sup> These included 460,000 families that qualified with the updated SISBEN, and 100,000 families of nearby municipalities without banking facilities. The project also financed CCTs to rural families that continued in the program, and overall it was supposed to reach nearly all Colombian municipalities (totaling 1,096).

<sup>40</sup> See Annex Table B-2 and Annex Figure B-1.

<sup>41</sup> Colombian media sources have raised the issue of potential political motivations at the local level underlying the aggressive expansion of *Familias en Acción*. Most of the allegations have been related to incumbent parties in local elections trying to obtain the vote of the CCT beneficiaries, arguing that the continuity of the program and the benefits for the voters depends on their party's reelection. Nevertheless, there is no hard evidence linking those presumed events with the deteriorations of indicators of efficiency and effectiveness.

<sup>42</sup> However, the take up rate in 15 big cities, excluding the special case of Bogota, was 62 percent close to the countries average (author's calculations based on statistics provided by Acción Social, Planeación).

<sup>43</sup> In the capital Bogota technical differences with the central government prevented a municipal collaboration agreement. The city government implemented its own education CCT program for secondary education with alternative design, which expanded since 2006, following a pilot program in 2005 (Fedesarrollo 2005). Political observers suggested that the collaboration became less likely because the major of the capital city belonged to the political opposition to the Colombian president's party.

2.18 The main factors behind the overall lower *urban* take-up rate were fiscal and bureaucratic restrictions, and errors in the SISBEN registration in predominantly urban municipalities.<sup>44</sup> Nevertheless, the decreasing trend in the take-up rate was also linked to the expansion into rural provinces (Departamentos) with more dispersed population. The evolution of take-up rates from 2005 to 2008 across provinces (see Table B-4), indicates that out of eleven provinces that experienced the highest drop in take-up rates, seven of them were very rural (47 percent rural, nearly twice the national average), and their take-up rate fell 14 percent, on average. These facts are consistent with government studies that indicated the difficulties faced by eligible families living in remote rural areas and in extremely precarious living conditions to register for *Familias en Acción*.<sup>45</sup>

2.19 There are two additional mitigating factors of the take-up rate trend. First, a substantial share of SISBEN-1 eligible families with children (0-6 years of age) attended Instituto Colombiano de Bienestar Familiar (ICBF) day-care centers, and received childcare services and nutrition benefits in kind. Second, the enrollment rate of beneficiaries registered in *Familias en Acción* showed an improving trend during the execution of the project, closing the gap of registered families to beneficiary families from 20 percent in 2005 to 3 percent in 2008 (Table B-6). While the enrollment rate was 80 percent before the start of the project, it jumped to 90 percent in the first two years and reached 97 percent at the end of 2008.

2.20 Despite the rapid scale up and drop in take-up rates, two intermediate indicators illustrate the achievement of expanding *Familias en Acción* into urban and remote rural areas. First, the expansion of collaboration agreements to more than 1,000 municipalities helped to offer access to CCT benefits for a large group of extremely poor families that had previously been excluded because of their location in remote rural areas or in medium size and large urban centers. Second, almost all of the resources of *Familias en Acción* were well targeted to eligible families, with 45 percent of benefits going to the bottom quintile.<sup>46</sup> The expansion of the beneficiary identification system, SISBEN, facilitated the rapid expansion of the CCT program. Coordination between Acción Social and the National Planning Department was essential for the success of the scale-up.

2.21 *Education benefits were modified in the large urban centers.* In 2007 some of the lessons of the impact evaluations of the first phase of *Familias en Acción* were partially incorporated in the design for big cities, by increasing the benefits for secondary school attendance and

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<sup>44</sup> The main factors behind the low urban take-up rates were: 1) The regional allocation of CCT funds favored the poorest and mostly rural municipalities (given limited funds), generating fiscal restrictions in the largest urban areas, that in turn required local geographical targeting in poorest neighborhoods, excluding eligible poor in other neighborhoods; 2) Restrictive bureaucratic procedures that limited the period of time for registration of eligible families in certain municipalities or prevented for some families the presentation of required documentation on time; 3) Preexisting municipal programs and insufficient promotion of the program among the poor by some municipalities; 4) Biases in the calculation of the take up rate, due to errors in the SISBEN registry (for instance, displaced families included in SISBEN registry that benefit from the program for the displaced population), and 5) Higher Opportunity cost of time and transaction costs for the potential beneficiaries. Sources, Mina and others (2007), sections 1 and 2 and World Bank (2009), Annex 2.

<sup>45</sup> See Acción Social (2010), p. 254, in reference to Marcelo (2008). See also Mina and others (2007).

<sup>46</sup> Núñez (2009).



completion relative to benefits for primary school attendance.<sup>47</sup> These changes were applied to the 16 largest Colombian cities in which approximately 17 percent of all CCT beneficiary families resided in 2008. In addition to the basic benefit design for education used in all medium and small municipalities and rural areas, three new education benefits were introduced into the 16 largest urban centers in consensus with local authorities.<sup>48</sup> In contrast with the traditional design (which offered twice the amount of benefits to secondary students relative to primary students), these new designs either increased the grant in the last years of secondary schooling; or gave no benefit for primary education and increased benefits for secondary education.<sup>49</sup>

2.22 In late 2006, as part of its new National Development Plan, the government announced the *Red Juntos*, a strategy to eradicate extreme poverty (somewhat similar to the “Chile Solidario” program) and *Familias en Acción* was designated a core program to support this strategy over the following decade.<sup>50</sup> The introduction of *Red Juntos* solidified the role of *Familias en Acción* within the social safety net.

2.23 **Component 2.** The startup of Component 2 activities was delayed nearly a year for several reasons. To save on fee costs, MSP replaced the National Development Projects Fund (FONADE) as implementing agency. However, leadership at MPS was unstable during 2006, so proper “ownership” of the project did not materialize. Additional bureaucratic delays were caused by a hiring freeze until May 2006. Once those obstacles were overcome, the pace of implementation was satisfactory and the Department for Planning and Policy Analysis at the MSP, responsible for implementation, provided adequate supervision and technical support.

2.24 When work started in 2007, the information system design adopted a systemic view of the Colombian social safety net and Social Protection System and the ministry’s project team was learning the Results-Based M&E methodology. As a result, the thematic complexity of the M&E system increased and the time to achieve the objectives became a limiting factor.<sup>51</sup>

2.25 **Planned and actual expenditure.** Figure 1 shows the evolution of total disbursements against the original disbursement plan and the formally revised disbursement plan, after additional financing was approved. Following the delay in the first two quarters, disbursements accelerated and reached a rate per quarter that exceeded both the rates of the “original” and “revised” disbursements plans. This higher-than-planned-disbursement rate is explained by the very fast scale-up in the implementation of *Familias en Acción* in 2007.

2.26 Table 2 shows a summary of project cost for the two components. Overall the Bank reached 99 percent of the funding target. It is notable that for Component 1 the total actual

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<sup>47</sup> Attanasio and others (2006) showed that, contrary to what happened in rural areas, in small urban centers CCTs for primary education did not make a difference, while CCT for secondary education did raise enrollment. Hence this evidence suggested a similar outcome should be expected in medium and large urban centers and monetary incentives should be adjusted accordingly. The evidence of the Medellin pilot (Aguilar and Siza 2009) confirms that reasonable expectation.

<sup>48</sup> Technical/political differences between the City of Bogota and the central government prevented the celebration of the collaboration agreement. Bogota had implemented its own conditional cash transfer program for secondary school. See evaluation by Barrera and others (2008).

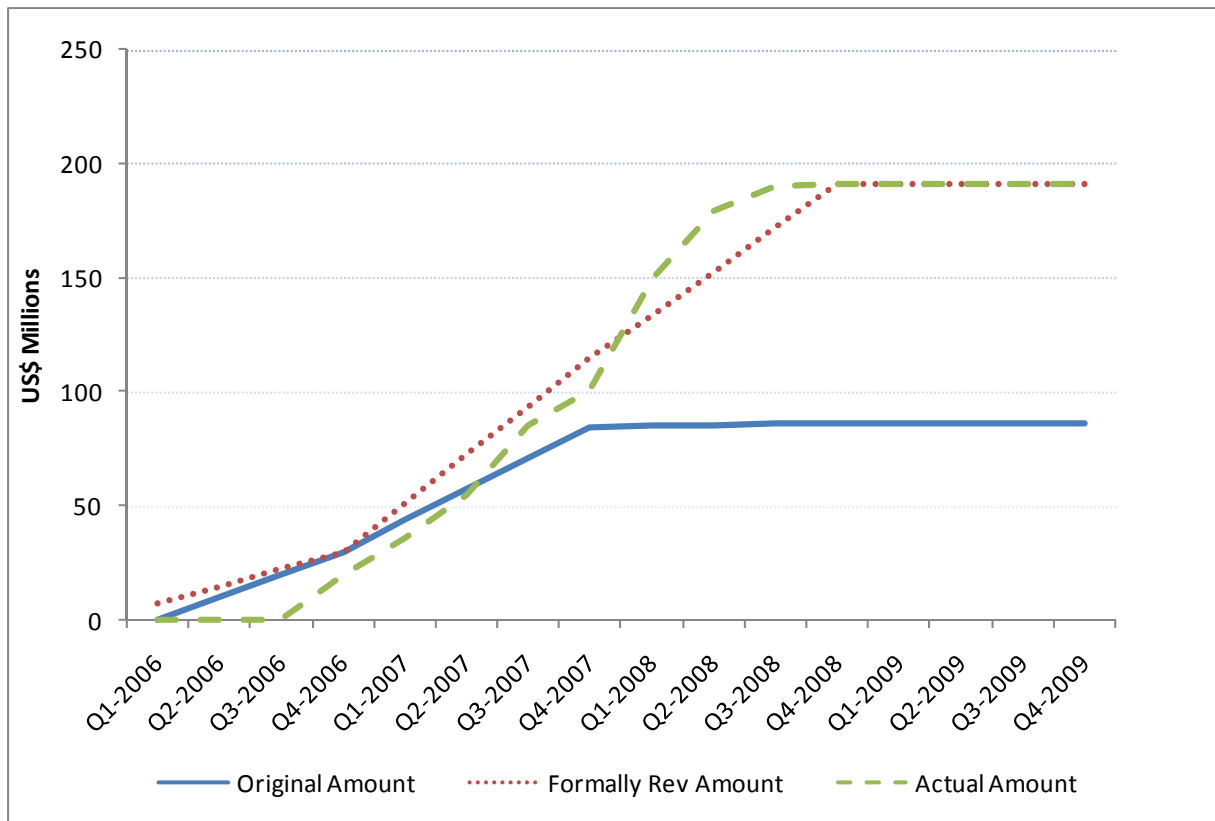
<sup>49</sup> See Table B-5.

<sup>50</sup> See also CONPES policy document #102.

<sup>51</sup> After this operation, other Bank projects have maintained the support to the M&E system at the MSP.

expenditure was 138 percent more than the appraisal estimate including additional financing. The main reason is that government funding for Component 1 increased its contribution 12 times higher than the appraisal estimate to expand the CCT program to address the pressing needs of displaced persons in small and large municipalities.<sup>52</sup> Local financing of CCT benefits for the displaced population and expansion beyond the original targets came from surplus in the collection of earmarked payroll taxes for the Colombian Institute of Family Welfare in a period of economic recovery. Despite being a very small part of total funding and the extension of the closing date, the second component's actual costs fell short of the appraisal estimate (86 percent).

**Figure 1. Project Disbursement Profile**



Source: World Bank 2009.

<sup>52</sup> And most of that increase in funds by the government was associated to subsidies for the displaced population that exceeded the appraisal estimates 74 times! Note that project administrative costs more than double the appraisal estimates, 219 percent, due to the scale-up in the number of beneficiaries, including displaced populations.

**Table 2. Summary of Project Costs**

<i>Component/ Category of Expenditure</i>	<i>Appraisal Estimate (includes AF)</i>			<i>Actual (USD millions)</i>			<i>Actual/Appraisal (percent)</i>		
	<i>Bank (1)</i>	<i>Gov. (2)</i>	<i>Total (3)</i>	<i>Bank (4)</i>	<i>Gov. (5)</i>	<i>Total (6)</i>	<i>Bank (4)/(1)</i>	<i>Gov. (5)/(2)</i>	<i>Total (6)/(3)</i>
<b>Component 1:</b>									
Consolidation and Expansion of <i>Familias en Acción</i>	189.9	6.3	196.2	189.9	80.9	270.7	100.0	1276.0	138.0
A. Subsidies	178.9	0.9	179.8	179.7	69.4	249.1	100.4	7543.0	139.0
B. Bank Commissions	10.7	0.6	11.3	10.1	0.9	11.0	94.4	150.0	97.3
C. Studies	0.3	0.0	0.3	0.1	0.0	0.1	18.8	--	18.8
D. Project Administration <sup>a</sup>	0.0	4.9	4.9	0.0	10.6	10.6	--	218.1	218.1
<b>Component 2:</b>									
Improving the Monitoring and Evaluation System of MSP	1.4	0.0	1.4	1.2	0.0	1.2	85.7	--	85.7
<b>Total</b>	<b>191.3</b>	<b>6.3</b>	<b>197.6</b>	<b>191.1</b>	<b>80.9</b>	<b>271.9</b>	<b>99.9</b>	<b>1276.0</b>	<b>138.0</b>

Source: World Bank 2009.

Note: Government-financed administrative costs for *Familias en Acción* was not included in the project document for additional financing, so figures reflect estimates only at time of appraisal of original Project. Higher actual cost (US\$10.6 million vs. US\$4.86 million) is explained by the major expansion of program as well as the extension period.

2.27 There was one shortcoming in project fiduciary management. Contract documents with commercial banks to handle the payments to beneficiaries of *Familias en Acción* were not subjected to a thorough procurement review. Commissions were classified as operational costs, governed by existing agreements between the program and commercial banks, and represented a sizeable amount of money (around US\$7 million). The agreements with the commercial banks should have been reviewed by the Bank's procurement staff and discussed at appraisal to ensure proper handling.

2.28 **M&E implementation and utilization.** The management information system of *Familias en Acción* provided the main process indicators and allowed the implementation agency, Acción Social, to monitor adequately the critical steps, namely, compliance of beneficiaries with school attendance, growth monitoring, and health check-up requirements following MSP protocols, compliance of municipalities with provision of health and education services to the beneficiaries, compliance with SISBEN targeting requirements, and disbursement of benefits to eligible beneficiaries in compliance with targeting and behavioral conditions. Moreover, it provided Acción Social with "alarms" (red flags) and allowed management to identify and address emerging problems at the regional and municipal level.

2.29 Although at the design stage M&E was more focused on outputs and processes (compliance with conditions) than on outcomes (school enrollment, nutrition, vaccination and health), reliable information on outcomes and impacts became available from three sources.

First, the impact evaluation of one of the three pilots in large urban areas was an integral part of the M&E design. Second, quasi-experimental evaluations were conducted, based on data collected in rural areas and municipalities of up to 100,000 inhabitants between 2002 and 2006.<sup>53</sup> Third, the evaluation of experimental design of secondary education CCTs was carried out in by the local government of Bogota.<sup>54</sup> The findings of the most recent impact evaluation of the first *Familias en Acción* phase, the Bogota experiments, and the Medellin pilot suggested that in order to assure more impact on human capital gains in large urban areas, the benefits for secondary education should be raised relative to primary education. Accordingly, in 2007 three new designs were offered in the 16 largest Colombian cities. The findings of an impact evaluation of *Familias en Acción* (including expansion into urban areas) should be available by July 2011.<sup>55</sup> The fact that only one of the three planned impact evaluations of urban pilots was implemented (the one in Medellin) was a shortcoming. The Soacha/Bogota and Pozon/Cartagena pilots were not implemented because at the start of the rapid expansion basic methodological impact evaluation requirements were neglected.

2.30 The implementation of M&E and use of the data in *Familias en Acción* had one other shortcoming. Once the major expansion into large and medium-sized cities was under way, the Bank team should have lowered the results framework targets for take-up rates, following other international experiences in Latin America and the Caribbean, and should have anticipated disruptions of program operations due to strains in the management information system and the compliance information system.

2.31 Despite the paucity of defined indicators at the project design stage, adequate data were collected and used to follow up the development of the Results Based M&E System at the MSP. Given the strategic importance of SINERGIA (National System for Results Evaluation) and the government commitment to management for results, it is anticipated that the MSP's M&E System will be sustained.

### **3. Achievement of Development Objectives**

3.1 Assessing the achievement of the development objectives of the Social Safety Net project amounts to assessing the extent to which Objective 1, consolidating and expanding the successful *Familias en Acción* CCT program, and Objective 2, improving Monitoring and Evaluation of the Social Safety Net portfolio, were achieved and their contribution to strengthening Colombia's social safety net.

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<sup>53</sup> See DNP-SINERGIA (2006) Evaluación de Políticas Públicas #4, *Familias en Acción*.

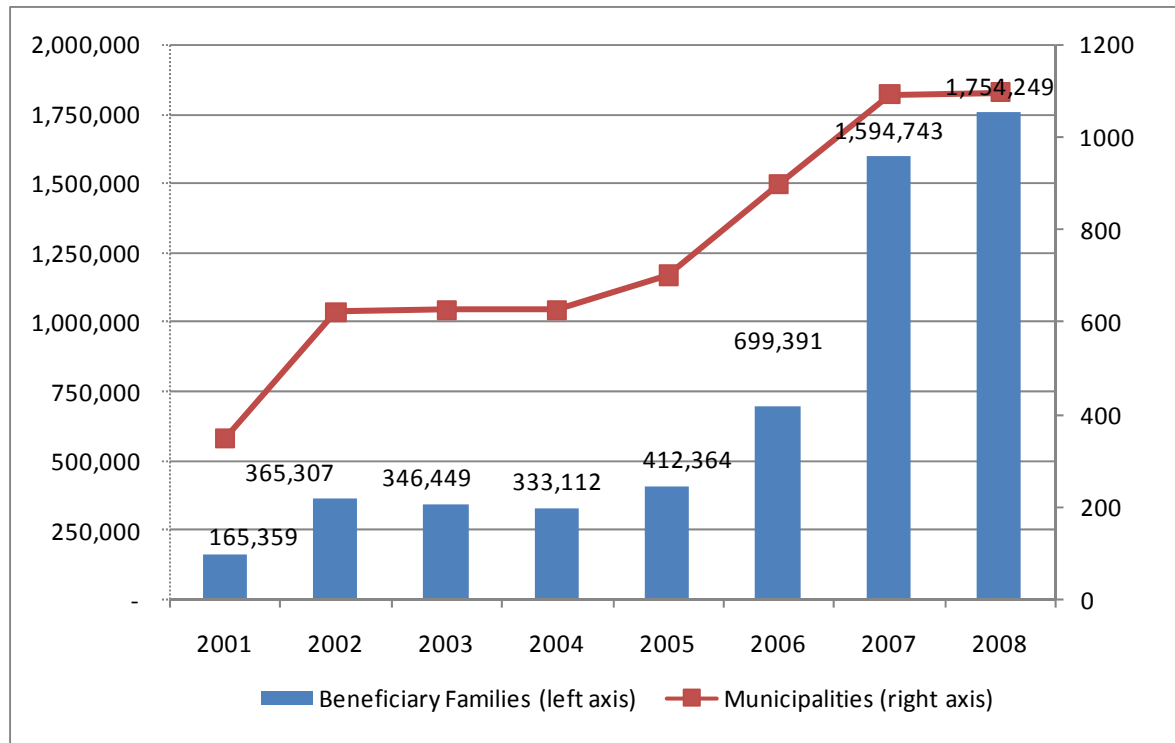
<sup>54</sup> See Barrera and others (2008).

<sup>55</sup> Field data collection was completed in the first quarter of 2011.

## Consolidating and Expanding the *Familias en Acción* CCT Program

3.2 **Expansion.** The scale-up of *Familias en Acción* exceeded the target number of beneficiaries by 46 percent after the Additional Financing.<sup>56</sup> Because of the substantial scale-up of *Familias en Acción*, by December 2008 the number of beneficiary families approximately quadrupled from the first quarter of 2006 (Figure 2).<sup>57</sup>

**Figure 2. Number of Beneficiary Families and Municipalities**



Source: Acción Social (2010)

3.3 *The number of children who benefitted also quadrupled during the scale-up, but the largest expansion was among young children who benefitted from the health-nutrition grant. At the end of 2008, 3.9 million children received CCT benefits, up from one million at the end of 2005 (see Annex Table B-2). In late 2008, the number of beneficiaries of the health-nutrition benefit was 1.66 million, a figure six times larger than the number of beneficiaries at the start of the project, exceeding the scale-up target for secondary school (3.7:1) and the primary education (2.6:1) beneficiaries.<sup>58</sup> Consequently, the share of health-nutrition and secondary education benefits increased substantially.<sup>59</sup>*

<sup>56</sup> Author's estimates based on the revised target of 1.2 million beneficiary families and the numbers reported in Figure 2. The original target number of beneficiary families (before Additional Financing) was 400,000.

<sup>57</sup> Number of beneficiaries in December, 2008 includes 260,000 displaced families (Acción Social 2010). Excluding the displaced families the scale-up factor between 2005 and 2008 was 1:3.6.

<sup>58</sup> See Annex Table B-2. An encouraging result, considering that children 0-11 were the most vulnerable to poverty (followed by children 12-17) according to Giugale, Lafourcade and Luff (2003) Policy Notes for Colombia.

<sup>59</sup> As a proportion of additional coverage, those two benefits had shares of 48 percent and 27 percent respectively.

3.4 Thanks to good inter-agency coordination, the SISBEN beneficiary identification system was updated. *Familias en Acción* maintained the use of the proxy-means test SISBEN as the main targeting instrument, which was well known and credible to the poor and had been shown to be the most effective targeting system in Colombia (Núñez 2009). Although not included in the project, a crucial operational challenge was to update and expand the SISBEN registry at a pace that allowed for the expansion of the CCT program. Given the fact that SISBEN was controlled by the National Planning Department and financed independently of *Familias en Acción*, appropriate coordinating actions with the implementing agency were crucial to assure the timely expansion of SISBEN into municipalities that had reached collaboration agreements with Acción Social.<sup>60</sup> Thus, the number of eligible families in the targeting registry in 2008 was five times larger than the number of eligible families at the start of the project, removing constraints in terms of eligibility. Evidence from the 2008 Colombia Living Standards Measurement Survey indicates that the three best-targeted social programs in Colombia are *Familias en Acción*, subsidized health insurance, and the public child-care program.<sup>61</sup> *Familias en Acción* therefore greatly benefitted from the SISBEN updates although these activities were not financed under the project.

3.5 Collaboration agreements were expanded to nearly all municipalities and the CCT program became available to the poor in medium-sized and large urban centers.<sup>62</sup> The number of municipalities served increased from 702 at the start of the project, to 1,096 in December 2008. This expansion included the 16 largest urban concentrations (provincial capitals) and another 39 medium-sized municipalities.<sup>63</sup> The number of municipalities with available beneficiary information booklets and functional systems for monitoring compliance with the human capital conditions was 466, exceeding the target of 57 (Table B-1).<sup>64</sup> Verification systems to prevent and combat fraud took advantage of the development of the Results-Based M&E system at the MSP. Consequently, program managers could cross-check whether SISBEN 1 beneficiaries were illegally enjoying benefits of the health and pensions contributory system that would make them non-eligible for *Familias en Acción*. As expected from the log framework, the achievement of these intermediate actions led to expanded coverage of the poor by *Familias en Acción*.

3.6 *Targeting of the poor reached target values but coverage of the poor fell slightly below expectations.* Based on the 2008 Encuesta de Calidad de Vida household survey, Núñez (2009) shows that the share of CCT benefits accruing to the first income quintile (SISBEN-1) is 45.4 percent and 33.2 percent for the second quintile (Table B-1).<sup>65</sup> Therefore, the share of CCT benefits for SISBEN-1 families exceeded the target of 40 percent and both of these groups are well below the income poverty line. Núñez (2009) shows that *Familias en Acción* is the best

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<sup>60</sup> See the *Familias en Acción* Activity Report, Acción Social (2009), section 3 for description of this process in six municipalities.

<sup>61</sup> See Núñez (2009).

<sup>62</sup> Urban centers with population above 100,000, except Bogota. Despite the lack of a collaboration agreement with Bogota, the program *Familias en Acción* was implemented in that location, but only managed to reach a take-up rate of 29 percent.

<sup>63</sup> Acción Social (2009), Table 6.

<sup>64</sup> At completion, these intermediate results indicators of program expansion exceeded PAD targets.

<sup>65</sup> The targeting by type of benefit on the first quintile are very similar: for the nutrition benefit 0-6 is 44.4 percent, for education grant 7-11 is 46.5 percent and for the education grant 12-17 is 45.7 percent.

targeted social program in Colombia.<sup>66</sup> However, the number of households enrolled as a share of the eligible SISBEN-1 population (the extreme poor) reached 61 percent, short of the 70 percent target and only slightly higher than the 60 percent baseline (Table 3 and B-1). The low coverage should have been anticipated, given the very fast pace of expansion of the program into new municipalities and given the previous experience in other CCT programs in Latin America that showed a lower take-up rate in urban areas (World Bank 2009).

3.7 The four percentage points of shortfall in the take-up rate that were not due to Botoga were linked not only to the expansion into urban areas, but also by expansion into remote rural areas, where families living in remote locations faced increasing difficulties to register in the program. However, enrollment rates nevertheless improved significantly during the project and many of the poor children that did not enroll in *Familias en Acción*, received day-care and nutrition benefits in kind from the ICBF program. Despite the lower-than-targeted take-up rates, 2.9 million Colombian children living in the newly covered municipalities gained access to the *Familias en Acción* program. In addition, the totality of CCT funds were very well targeted and predominantly allocated among the rural poor.<sup>67</sup>

**Table 3. Program take-up and enrollment rates, 2005-08**

	2005	2006	2007	2008
Eligible families SISBEN 1 (1)	725,507	919,964	2,435,821	2,437,379
Registered families SISBEN 1 (2)	514,030	651,301	1,571,256	1,541,482
Beneficiary (enrolled) families SISBEN 1 (3)	412,364	588,105	1,422,106	1,493,888
Take-up rate (percent) [(2)/(1)]	71	71	65	63
Enrollment rate (percent) [(3)/(2)]	80	90	91	97
Coverage (percent) [(3)/(1)]	57	65	58	61

Source: Acción Social (2010), Oficina Planeación.

3.8 *Compliance with education and health conditions by the poor was below project targets.* The share of primary school children in extremely poor households who attended school at least 80 percent of the time reached 72 percent of children, an increase from 70 percent at baseline but short of the 80 percent target.<sup>68</sup> The share of children 0-6 (health benefit) in extremely poor households that completed growth monitoring and health check-ups reached 92 percent, still

<sup>66</sup> However, the ICR provides an alternative indicator based on administrative data of the implementing agency and some household survey data, but not strictly comparable with the target indicator defined as the share of beneficiaries in the first quintile by income per capita. According to this methodology, the share of *Familias en Acción* benefits going to the bottom SISBEN score quintile reached 96 percent. Three steps summarize this alternative methodology. First, SISBEN scores are computed for all families in the 2008 Encuesta de Calidad de Vida household survey, second, the cut-off points of all SISBEN-score deciles are determined and third, all beneficiary families of *Familias en Acción* are assigned a decile according to their own SISBEN score. See ICR, World Bank 2009, Annex 2.

<sup>67</sup> The majority of the SISBEN-1 beneficiary families were still living in rural areas or small urban centers (70 percent), while the rest were divided evenly between big cities and medium sized municipalities. Author's estimates based on Table 3 in Acción Social (2009), p.11.

<sup>68</sup> The compliance rate is defined as the percentage of children that satisfy the condition (attending health controls and attending the school at least 80 percent of the time), relative to the total number of children enrolled in the program.

short of the 95 percent target.<sup>69</sup> The lower-than-desired compliance rates were partially due to the rapid scale up that led to temporary gaps in the verification of compliance with CCT conditions in some locations.

3.9 However, outcome indicators of short-term effects showed impacts on children's education, nutrition, health, and food intake. Impact evaluations revealed important benefits in secondary school attendance, which improved by 7 and 5 percentage points in rural and urban areas, respectively, and only small improvements in primary school attendance, with gains of 2 percent in rural areas and no change in urban areas.<sup>70</sup> Average grade repetition was reduced by 0.09 years for children aged 12-17 and by 0.12 years for children aged 14-17. In nutrition, chronic malnutrition (low height-for-age) of children aged 0-6 decreased 9 percentage points in rural areas, weight-for-age in children aged 0-3 improved by 6 percentage points in rural areas and 4 percentage points in urban areas, and child birth weight increased 0.4 kg in urban areas. In health outcomes, vaccination rates increased for children aged 0-2 years and in the Medellín pilot, the treatment group showed a reduction of 14 percent in the prevalence of acute respiratory disease among children aged 0-6. Food intake increased by 15 percent, mostly with protein content (milk and beef).<sup>71</sup> Beyond this, breast feeding increased by more than 24 percent in both urban and rural areas compared to the control group, and health check-ups for children 3-7 years of age increased by 44 percent in urban areas and 20 percent in rural areas.<sup>72</sup>

3.10 *Familias en Acción* also had medium-term impacts on human development outcomes. The gap between the level of education achieved and the level expected by age was reduced by a fifth of a year for beneficiaries just by registering in the program, and by an additional 7-9 percent of a year for an additional year of membership (Bhargava 2007). An impact evaluation of longer-term impacts of *Familias en Acción* found that completion of secondary education increased by 4-8 percentage points for beneficiaries, without any detrimental effects on test scores taken by students willing to apply to college (IEG 2011). Impacts on completion rates are larger for girls and rural youth. These results are particularly important, considering that the largest inequality of opportunity for children and youth in Colombia is the completion of secondary school at the appropriate age.

3.11 *Household welfare outcomes also showed improvements due to CCTs in rural areas and small municipalities* (with a population less than 100,000). For participating households, rural poverty was reduced by 5 percent points and urban extreme poverty by 17 percent.<sup>73</sup> Moreover an impact evaluation by Barrera and Perez-Calle (2005) found that *Familias en Acción* can play an insurance role in protecting households' consumption from idiosyncratic shocks associated with health and employment.

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<sup>69</sup> See Table B-1 in the Appendix.

<sup>70</sup> See Attanasio and others (2006) and DNP-SINERGIA (2008). Evaluation results of Medellín pilot for education are also consistent. See Aguilar and Siza (2009).

<sup>71</sup> These indicators deserve additional attention in terms of impact, if we consider the fact that a recent Bank study on inequality of opportunity for children in Colombia shows the large level of food insecurity of household in more unfavorable circumstances, which are mostly in extreme poverty by consumption standards. See Velez, Azevedo and Posso (2010).

<sup>72</sup> World Bank (2009, p.15). Moreover the testimony by mothers of beneficiaries, during field visits, confirmed the impact of the program on school attendance and additional resources to feed children.

<sup>73</sup> DNP-SINERGIA (2008), p. 95.



3.12 Overall, the expansion of *Familias en Acción* reached the objective of the program in terms of impacts on secondary school attendance, repetition rates in school, nutrition, vaccination, breast-feeding, health check-ups, and household welfare indicators (poverty and protection against idiosyncratic shocks). It did so by expanding fourfold the number of beneficiaries and extending the program to nearly all Colombian municipalities, eliminating exclusion of the poor in big cities and medium-sized towns from the program, even though the target values for coverage of the poor and compliance rates were only partially met.<sup>74</sup>

3.13 **Consolidation.** The government strengthened the role of *Familias en Acción* within the social safety net system. The relative importance of *Familias en Acción* within the safety net system was elevated by designating it as the core program of *Red Juntos*, a new strategy to eradicate extreme poverty launched in late 2006 as part of the new government National Development Plan.<sup>75</sup> *Familias en Acción* was designated as the main point of entry or access for the beneficiaries of *Red Juntos* (4.1 million by the end of 2009) in order to facilitate their access to seven other programs within the *Red Juntos*. Moreover, *Familias en Acción* commands a significant share (21 percent) of the total amount of resources of the *Red*.

3.14 Several “second-generation issues” were adequately addressed in the project.<sup>76</sup> Because *Familias en Acción* expanded into the 16 largest Colombian urban centers, the benefits for secondary school attendance and completion were increased relative to the benefits for primary school attendance. These modifications were based on findings and lessons of the impact evaluation of the first phase of *Familias en Acción* that showed a very low marginal impact of the program on primary school attendance in urban centers. Second, information technologies were incorporated into the program, allowing health and education CCT payments to be accessed with debit cards in large cities. It also piloted innovative methods (“caja extendida”) to reach beneficiaries in rural municipalities without commercial banks. Third, in adhering to safeguard policies the program made substantial adjustments to promotional activities and conditions to meet the needs of indigenous peoples and Afro-Colombian communities. Inclusion of eligible disabled youth in the CCT program was ensured by extending their nutrition benefits until age 18.<sup>77</sup> Fourth, mothers of beneficiary families emphasized the great value of “encuentros de cuidado” (regular meetings with “madres líderes”) in enhancing their knowledge of available social services, improving their parenting skills, and offering an opportunity to socialize with other mothers, raising their level of common trust.<sup>78</sup> This impact on social capital has been documented in DNP-SINERGIA (2008).<sup>79</sup>

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<sup>74</sup> According the classifications of indicators in the log frame provided in Table 1, which differs partially with the PAD classification of indicators presented in Table B-1.

<sup>75</sup> See CONPES Social policy document #102/2006.

<sup>76</sup> The project aimed to (i) modify education benefits to emphasize secondary school incentives in large urban areas in order to raise effectiveness of CCTs –as suggested by impact evaluations; (ii) expand opportunities to ethnic minorities; and (iii) incorporate information technologies to reduce transaction costs.

<sup>77</sup> Poverty profiles of the Colombian population have shown that household with disabled members are exposed to a significantly larger risk of poverty and extreme poverty. See Giguale, Lafourcade and Luff (2003).

<sup>78</sup> Testimony collected during the field visit to Cartagena/El Pozon and Bogota/Engativa. Beneficiary mothers also describe changes in terms of less conflict between neighbors, reductions in domestic violence, etc.

<sup>79</sup> See Attanasio, Perellano and Polania (2008) and Section 4.8 in DNP (2008) Evaluación de Políticas Públicas #6, *Familias en Acción*.

3.15 In sum, the objective of consolidating and expanding *Familias en Acción* was *substantially* achieved. While exceeding the target numbers of beneficiaries, the objectives on uptake and compliance were not fully reached due to the rapid scale-up in urban areas. Nevertheless, the expansion and consolidation of *Familias en Acción* made substantial progress.

### **Improving the Monitoring and Evaluation of the Social Safety Net Portfolio**

3.16 *Three intermediate results for the improvement of the M&E of the safety net portfolio were achieved.* First, institutional capacity was assessed on each part of the social protection system. In the area of monitoring, the assessment included institutional aspects, as well as existing norms, sources of information, and information systems. Baselines were defined for the indicators for social protection policies and projects, which helped to formulate the proposed reports for the M&E system. In the area of evaluation, all of the existing evaluations in the social protection system were reviewed.

3.17 Secondly, the *strategic plan* for the M&E system was structured into three components, aligned with the SINERGIA model: Monitoring, Evaluation, and Citizen Accountability (“rendición de cuentas”). Eleven strategic objectives and 43 specific objectives were defined, consistent with the purpose of the social protection system, as the basis for identification of the indicators. The indicators were defined to conform to the systemic vision of social protection adopted by the MSP. Half of the indicators are available through the SISPRO.

3.18 Third, staff of the Planning and Policy Analysis Department of the MSP received *training* on the structure and composition of the Results-Based M&E system. Presentations and discussions were held with other departments of the Ministry on the relevance and validity of the indicators, their interpretation, and the procedures for collecting the information and calculating the indicators.

3.19 *The M&E system covers 9 of 17 affiliated agencies, and 99 percent of affiliated social safety net programs* (against a target of 50 percent). Although the results-based M&E system was not fully operational at the end of the project, the report to congress made use of the Results-Based M&E approach available on the MSP website, and the public had been informed about the M&E design at the National Planning Department evaluation website.

3.20 *The project improved monitoring and evaluation of the safety net portfolio.* Outcomes achieved include a results based budget, evaluations of current programs, and the improvement in transparency and accountability. The results-based M&E approach to budgeting was tested at the Institute of Family Welfare, producing a preliminary results-based budget with 55 product indicators and 14 indicators for evaluation results, with baselines and targets. In program evaluation, key areas, themes, and methodological approaches were identified by MSP. The evaluation agenda included 14 results evaluations (reviewing outputs and processes), 6 impact evaluations, and 4 evaluations of implementation; it was discussed with the Committee for Intersectoral Evaluations, led by the Evaluation Department of the National Planning Department. In transparency and accountability, the MSP organized a public forum attended by about 150 people to explain the stages of development of the M&E system.

3.21 Overall, the activities under the second component influenced the MSP in building and understanding the results-based M&E system and helped the lead team reach a shared view of the MSP key objectives, concrete activities, and corresponding indicators. For example, the contents of the ministry's report to Congress changed from a list of activities by project to a structure of results by objectives.

3.22 *The MSP has become the backbone of the safety net system.* The project unrealistically anticipated that the M&E system at the MSP could be operational and publicly available in just two years. However, because of the strategic plan to develop an integrated results-based M&E system during the project, subsequently supported by other Bank projects, the ministry today has a set of consistent information systems that allow monitoring of activities and results in key areas: social assistance, health insurance, pensions, and labor markets.<sup>80</sup> Some of the most important information systems operating at MSP in 2010 are the Sistema de información integrado para la toma de decisiones, the Registro Unico de Afiliados a la salud y a la Protección social, the Planilla integrada de aportes a la salud y la Protección social, and the Registro del acceso de los servicios de salud. Moreover, the results-based M&E system at MSP feeds the Government Results Information System (SIGOB) at SINERGIA. IEG verified the advances in the integrated information system at the MSP and found that similar advances in monitoring and information systems, based on public administrative records of social assistance and social insurance, have taken place in key social safety net programs, such as the *Red Juntos* (*Infojuntos*).

3.23 In sum, the objective of improving the monitoring and evaluation system of the social safety net portfolio of the MSP was *substantially* achieved. The rating takes into account delayed implementation, a minor shortcoming.

3.24 Overall, the Colombia Social Safety Net project contributed to strengthening the country's social safety net, first, by expanding *Familias en Acción* to nearly all Colombian municipalities, covering a much larger share of the extreme poor and the displaced populations that previously had no access to safety net programs. Moreover, the project consolidated the safety net system by strengthening the role of *Familias en Acción* within the social safety net and by addressing second-generation design issues that made the program more inclusive and effective. Second, the project designed and piloted an upgraded results-based M&E system that has helped the MSP to reach a shared view of key objectives, activities, and indicators, and has enabled the MSP to become the backbone of the country's social safety net.

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<sup>80</sup> Progress in M&E of social safety nets has benefited from other Bank projects, namely Strengthening Public Information, Monitoring, M&E for Results Management, 2008, Ln. 7620-CO.

## 4. Ratings

### Outcome

4.1 The outcome of the *Social Safety Net Project* is rated *satisfactory*, based on *substantial* relevance of objectives and design, *substantial* achievement of both objectives, and *substantial* efficiency.

### RELEVANCE

4.2 **Relevance of objectives.** The relevance of the objectives is rated *substantial* because of the direct link of the development objectives to the CAS pillars, to the strategic development objectives of the government, and to higher-level objectives, such as the first, second, fourth, and fifth Millennium Development Goals. The expansion and consolidation of *Familias en Acción* contributed to two pillars of the National Development Plan (NDP) 2002-06, to recover high and sustainable growth, and to improve social equity. More specifically, the second NDP pillar is focused on the integration and consolidation of the social protection system and its key programs. Furthermore, *Familias en Acción* remains a core program of the new government strategy to eradicate extreme poverty, *Red Juntos*, and a key part of the new strategic development policies – the NDP 2006-10 and *Vision Colombia 2019*. Meanwhile, the objective of improving the M&E of the social safety net portfolio contributed to another pillar of the NDP, strengthening transparency and efficiency. In particular, it helped to support the efforts made by the government to strengthen the tracking of public administration results and resource allocation in order to improve the effectiveness of public expenditure. Ongoing efforts have led to reform and upgrade of the SINERGIA, the Performance Based M&E System, and to the creation of the Government Results Information System (SIGOB).

4.3 Both objectives were relevant to the Bank’s 2002 CAS. The first objective was relevant to two CAS pillars, “sharing the fruits of growth by providing a strengthened social safety net to those who are not benefiting from the renewed growth,” and “contributing to further economic growth by investing in the education and health of today’s poor children.” The second objective was relevant to a third CAS pillar, “building quality government through the development of an M&E system in the Ministry of Social Protection, which will allow for more efficient and effective social risk management among the population and accountability of the Ministry’s actions”.<sup>81</sup> At project closing, the project continues to be relevant to the Bank’s Country Partnership Strategy (2008-10). Bank support to *Familias en Acción* is part of focus areas such as strengthening poverty alleviation and equitable opportunities, improving services, and national reconciliation and lasting peace.

4.4 **Relevance of design** is rated *substantial*. Project activities were based on a consistent log-frame that was reasonably expected to lead to the desired outcomes. The activities fitted the technical capacity of national and local governments, the targeting instrument chosen was adequate and ex-ante effective, and the monitoring and evaluation design was appropriate.

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<sup>81</sup> World Bank (2002c).

4.5 The choice of demand incentives, conditions for cash transfers, benefit levels, targeting instruments, and activities at the municipal level were appropriate and logically consistent for achieving the first objective. A few simple design modifications were coherently added to the original CCT design that had already proved successful through the first phase of the *Familias en Acción* program.<sup>82</sup> For example, *Familias en Acción* maintained the use of the proxy means test SISBEN that had demonstrated its capacity to deliver effective targeting and enjoyed credibility among the poor. Consequently, the targets to raise coverage of the *Familias en Acción* program required a proportional expansion of the number of eligible families in the SISBEN registry and appropriate coordination with the National Planning Department.

4.6 The degree of complexity of project design for both objectives fitted the government's policy agenda and its technical capacity, both at the central and subnational levels. Overall, a CCT was an adequate and feasible instrument to counterbalance the perverse effects of the risk coping strategies of the extremely poor household that lowered investment in the human capital of their children.

4.7 Monitoring and evaluation design was generally consistent with the results framework. For the first objective, initially there was more emphasis on intermediate results and output indicators (such as the take-up rate, compliance, targeting), than on outcome indicators for children (such as education and health achievements) or household consumption. However, impact evaluations launched in the first phase of *Familias en Acción* and the planned pilot household surveys assured access to reliable data and information on outcomes.

4.8 Nevertheless, two moderate shortcomings were found in project design. First, as the CCT program was to expand substantially into urban areas and remote rural areas, the lower take-up rate should have been anticipated based on similar experiences in other Latin American countries. Targets on coverage of the poor and compliance rates should have been adjusted and measures to increase take-up rates should have been identified. Second, the PAD unrealistically anticipated that the MSP's M&E system could be operational and publicly available in just two years.

## EFFICACY

4.9 Efficacy is rated *substantial* for both objectives as discussed in chapter 3.

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<sup>82</sup> Available evidence on vulnerability types and coping strategies in Colombia did not indicate any systematic differences between vulnerable households and their coping strategies in rural and urban areas that would justify changes to the basic rationale of the CCT program (see Colombia's Social Safety Net Assessment, World Bank 2002b). Moreover, the expansion into large urban areas (i) should improve horizontal equity of the SSN because a significant share of the urban poor would not be excluded of the program due to their geographical location, and (ii) should help to avoid tensions between the displaced population and the urban poor, if discriminating access to this kind of benefits had to be imposed. In addition, supply constraints of public social services—basic education and health— for the second phase of *Familias en Acción* should have been expected to be less binding, as the availability of those services in medium and large urban centers tends to be superior—when compared to rural areas and small urban centers, in which the first phase of *Familias en Acción* had been implemented.

## EFFICIENCY

4.10 Efficiency is rated *substantial*. Cost-benefit analysis of the previous phase of the *Familias en Acción* program, covering 70 percent of beneficiaries in rural areas and small towns (less than 100,000 inhabitants), generated a benefit-cost ratio of 1.59. Benefits account for a 13 percent addition to future earnings resulting from: (a) lowered incidence of underweight infants; (b) lowered incidence of malnutrition and child morbidity among children aged 0-6; (c) higher birth weight; and (d) increased years of secondary schooling.<sup>83</sup> The cost-benefit score is considered high, and could be even higher if the benefits of additional household consumption were taken into account.<sup>84</sup>

4.11 However, the extrapolation of these numbers for the expansion of *Familias en Acción* into big cities and medium-sized municipalities involves two opposing tendencies. On the one hand, the ex ante cost-benefit analysis probably underestimates the efficiency of the second phase of *Familias en Acción* because it was based on the distribution of beneficiaries for health, primary, and secondary education up to 2006. This distribution was outdated because after 2006 the share of health and secondary schooling transfers had significantly increased (from 56 percent to 75 percent),<sup>85</sup> which would lead to underestimation of the contribution of these two transfers, the most effective in urban areas.<sup>86</sup> Hence, the modification in the grant composition may have increased the effectiveness and efficiency of the program by the end of the project in December, 2008.

4.12 On the other hand, the CCT had had less than half of the impact on educational achievement in urban areas than in rural areas.<sup>87</sup> Beneficiaries living in big cities and medium sized towns represented approximately one third of the total number of CCT beneficiaries at the end of the project. There is no evidence available to judge which of the two tendencies is larger or whether they cancel each other out. Hence, one should consider the 1.59 benefit-cost ratio as the most relevant estimate of efficiency. Finally, although the administration of SISBEN targeting system was beyond the control of the project, updating procedures at the start of the project in order to improve targeting caused some temporary administrative cost (dropping and re-enrollment of beneficiaries), but improved the efficiency of the program in the long run.

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<sup>83</sup> See DNP-SINERGIA (2008). The magnitude of the benefits of the programs was calibrated using the extreme poverty gap for the health-nutrition grant and the expenditure pattern of the poor for educational services. International comparisons indicate by Fiszbein and Schady (2009) show that level of CCT benefits as percentage of household income is 6 percent in Colombia, which is similar to Jamaica and Ecuador, but much lower Brazil, Mexico and Nicaragua.

<sup>84</sup> See Fiszbein and Schady (2009), p. 188.

<sup>85</sup> Moreover, out of the 2.9 million additional children brought into the program between 2005 and 2008 (to reach 3.9 million total), only 25 percent received the primary education grant, nearly half of its share before the operation started (44 percent).

<sup>86</sup> According to available evaluations, in urban areas those two transfers had much higher impacts than the primary education grant.

<sup>87</sup> See IEG (2011) and see Attanasio and others (2006).

## M&E Quality

4.13 M&E quality is rated *substantial* because of the rigorous evaluation framework and the extensive use of the information that became available to guide the operation to be more effective, despite some delays in implementation.

## Risk to Development Outcome

4.14 Risk to development outcome is rated *moderate* based on four considerations: strong government ownership, continuous support for building the safety net systems (especially M&E systems) from multilaterals, medium-term development indications from impact evaluations, and some risks of fiscal sustainability.

4.15 First, the ownership by the government of project objectives was strong even after project closure. The social protection theme and the *Familias en Acción* program have major importance in the government strategic development policies (summarized in their National Development Plan 2006-10 and *Visión Colombia 2019*).<sup>88</sup> Moreover, the government has embarked, throughout the decade, in actions to build its safety net and an evidence-based system to monitor the results of government projects, aiming to improve the effectiveness of the public sector. The central role that *Familias en Acción* plays in *Red Juntos* and the strategy to eradicate extreme poverty that was incorporated in the National Development Plan 2006-10 have solidified program sustainability.

4.16 Second, the Bank and other major donors have provided continuous support for *Familias en Acción*. The main partner is IDB, which has helped finance the expansion of the CCT program through a sequence of operations and also offered, jointly with the Bank, continuous supervision and technical assistance on social protection issues.<sup>89</sup> This operation constituted another step in a series of financial operations and technical services provided to Colombia on social protection issues during the decade. On the other hand, other donors, including the IDB, DFID, and UNDP, jointly with the Bank, supported a major analytical effort to design a strategy to eradicate extreme poverty, the *Misión para el Diseño de la Estrategia de la Reducción de la Pobreza y Desigualdad*, which was launched in 2005 and produced the *Red Juntos* proposal that was incorporated in the National Development Plan 2006-10 during the second Uribe government. Continuous Bank support to build the M&E system has also been provided by other operations before and after the Social Safety Net project.<sup>90</sup>

4.17 Third, emerging evidence from impact evaluations shows the impact of *Familias en Acción* on medium-term outcomes.<sup>91</sup> Both Bhargava (2007) and IEG (2011) show that, in addition to the short term benefits (nutrition status and school attendance), beneficiaries improve

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<sup>88</sup> See DNP, 2005 and 2006.

<sup>89</sup> CCT support and social protection sector work has been coordinated between the IDB and the Bank since the first *Familias en Acción* operation in 2001, following the 1999 crisis.

<sup>90</sup> Namely by the following operations: the first phase of the *Familias en Acción* program (US\$150M, 2001), the SECAL Social Sector Adjustment Loan (US\$155 million, 2003), the three PSALs Programmatic Labor & Social Sector Reform (sequence of three operations plus a technical assistance loan from 2004 to 2007, total US\$602 million), and the DPL Inclusive Equitable and Efficient Social Protection System (US\$500 million, 2010).

<sup>91</sup> IEG (2011).

medium-term indicators of educational status, such as more children in the correct grade for their age in basic education, and a higher secondary education completion rate. Moreover, although the M&E system was not fully operational at project closing, the current results-based M&E system at the MSP today includes a set of consistent information systems to monitor activities and results in social protection, health insurance, pensions, and labor markets.

4.18 Nevertheless there is a moderate likelihood of fiscal risk that could compromise the sustainability of the program. *Familias en Acción* has enjoyed the continuous financial support from the Bank and the IDB, before and after this operation. The program costs are a small share of total public social expenditure and are within the Medium-Term Expenditure Framework (2006-10). However, the fact that over seventy percent of the CCTs' expenses remain funded by multilateral loans raises doubts to some extent about the long-term fiscal sustainability of the program.

## Bank Performance

### QUALITY AT ENTRY

4.19 The Bank's performance in ensuring quality at entry is rated as *moderately satisfactory*. To improve implementation and design of the project components, the Bank took advantage of the opportunity to build on previous experience and knowledge drawn from social protection projects in Colombia and other Latin American countries. It implemented lessons from the first phase of *Familias en Acción* and other CCT programs in Latin America; it improved its ex ante economic analysis of the project by incorporating results from first impact evaluation of *Familias en Acción*; it provided better quality background analysis and better project design by drawing on extensive analytic and advisory activities work on social protection and poverty issues in Colombia; and it improved M&E design as it built up on solid previous impact evaluation design implemented in the first phase. As a result, a consistent logical framework was adopted for both objectives. Moreover, in order to expand opportunities for excluded populations, such as ethnic minorities of indigenous peoples and Afro-Colombians, an appropriate safeguard policy was implemented and the special social development needs of these groups were taken into account in service delivery design.

4.20 Nevertheless, there were two moderate shortcomings. First, fiduciary mistakes jeopardized intermediation paid to commercial banks that handle the payments to beneficiaries. Preexisting agreements with the commercial banks should have been subjected to thorough procurement review and discussed in project preparation stage. Second, the Bank should have developed better progress indicators for the strengthening of the M&E systems.

### QUALITY OF SUPERVISION

4.21 The Bank's performance in supervision is rated *satisfactory*. First, routine supervision visits were undertaken and implementation status reports were prepared regularly twice a year. Second, apart from the arrival of new task manager in mid-2006 that was adequately coordinated, the team was rather stable and included well qualified and experienced consultants that knew the efforts of the government in both social protection and monitoring and evaluation. Third, supervision was well coordinated with the IDB, with which the Bank has alternated



financial support during the decade and provided continuous joint supervision and technical support. Fourth, adequate attention was paid to ongoing impact evaluations and the evaluation of the Medellin pilot. Finally, this project was also included in a special review of CCT programs done by the Human Development department in the Latin America and Caribbean region; the review of control and accountability mechanisms rated performance as satisfactory.<sup>92</sup>

4.22 However, there was one shortcoming in project supervision. Once plans to expand the CCT into urban areas was adopted, the Bank's team should have lowered target take-up rates considering previous international experience, and should have anticipated disruptions of program operations due to strains on both the management information system and the compliance information system. The rapid expansion led to a lower take-up rate and reduced marginally the quality of targeting.

4.23 In sum, Quality at Entry is rated as *moderately satisfactory*, Quality of Supervision is rated *satisfactory*, and Bank performance overall is rated *moderately satisfactory*.

## Borrower Performance

### PERFORMANCE OF GOVERNMENT

4.24 The performance of the government is rated *satisfactory*. The government was fully committed to the reform of the safety net system. The effort over the decade started with the steps taken by the government after the 1999 crisis and the implementation of the first phase of *Familias en Acción*, and was followed by the creation of the MSP. Likewise, the government was committed to a national agenda of management for results and impact evaluation. The project objectives were clearly aligned with the strategic development objectives stated in the National Development Plans for the periods 2002-06 and 2006-10, and the long-term objectives of the *Vision Colombia 2019*. The government assigned high priority to the strategy to reduce extreme poverty (*Red Juntos*) and gave a fundamental role to *Familias en Acción* as a core component of that strategy. The strategy was jointly discussed between the National Planning Department, the MSP, and the implementation agency, *Acción Social*. The financial commitment to the program by the government greatly exceeded the initial commitments stated in the PAD. Finally, the National Planning Department paid continuing attention to impact evaluations and the reform of the educational benefit design to fit the incentive structures of urban areas, informed by ongoing impact evaluations started in the first phase.

4.25 Nevertheless, there were two minor shortcomings. One shortcoming was the delayed preparation of the impact evaluation design by the National Planning Department, which precluded the timely application of the baseline surveys in Barranquilla and Soacha, before the program was launched in those areas. Another was the delayed start of monitoring and evaluation component; the delay meant that the MSP was unable to hire consultants during the first semester of 2006 during the presidential election campaign, due to public hiring restrictions passed at the end of 2005.

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<sup>92</sup> World Bank (2007b).

## PERFORMANCE OF THE IMPLEMENTING AGENCIES

4.26 Acción Social was responsible for the implementation of *Familias en Acción*. The agency had valuable experience and technically qualified staff from the implementation of the first phase. Therefore, implementation started without delay and expansion targets, after additional financing, were exceeded. Although the expansion goals of 2007 stretched the capacity of the management information and compliance verification systems, the agency maintained satisfactory control over the expansion of the program. It carried out consultations with key stakeholders in the sub-national level of government (municipalities and ethnic communities) and it provided complete bi-annual implementation reports as required by the legal agreements. Fiduciary management and handling of reimbursement requests were satisfactory.

4.27 The MSP was responsible for implementation of the monitoring and evaluation component, through the Department for Planning and Policy Analysis.<sup>93</sup> Initial implementation delays were caused by the hiring restrictions on consultants and the turnover of the director of the responsible department. Once implementation started, however, activities progressed satisfactorily and the MSP demonstrated the commitment and technical capacity to manage and achieve the M&E objective. Following the adoption of a systemic vision of social protection by the MSP, the indicators in the M&E system were redefined with a more advanced vision that went beyond the PAD's simpler approach. Finally, fiduciary management and handling of reimbursement requests were satisfactory.

4.28 In summary, government's performance is rated *satisfactory* and the performance of the implementing agencies is rated *satisfactory*. Overall borrower's performance is rated *satisfactory*.

## 5. Conclusions and Lessons

5.1 Colombia's social safety net system was strengthened by the project because both development objectives were achieved.

5.2 The consolidation and expansion of the *Familias en Acción* conditional cash transfer program involved a quadrupling of the number of beneficiaries relative to the beginning of the project. *Familias en Acción* expanded to nearly all Colombian municipalities and 45 percent of benefits went to the poorest quintile (SISBEN 1) families. Most of the benefits went disproportionately to pre-school children and secondary school students; according to previous impact evaluations these groups had the greatest impact. The targets on uptake and compliance were not fully reached due to the scale-up in urban areas. Crucial "second generation" issues were addressed, contributing to the consolidation of the CCT program by making it more inclusive and cost-effective. Finally, short-term education, nutrition, health and food intake outcome indicators improved for program beneficiaries. Similar findings were reported for

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<sup>93</sup> Following special authorization to handle financial management and procurement, due to the delay and excessive fee charged by another public agency, FONADE, that was initially designated for it.

medium-term outcome education indicators (high school completion rates and the share of children enrolled in the right grade for their age).

5.3 Although it made up only a small share of funding, the improved M&E system made a significant difference in strengthening the Colombian social safety net system. A much wider group of government officials in key agencies and ministries understands the link between the strategic vision of the social protection system and the results indicators in all related programs and relevant agencies led by the MSP. Furthermore, new initiatives within the safety net system, such as the extreme poverty reduction strategy, *Red Juntos*, which have a very complex set of goals for each extremely poor household, would have been more difficult to develop without the previous achievements of the M&E system at the MSP.

5.4 The main lessons of the Colombia Social Safety Net project are:

5.5 The expansion of CCT programs from rural areas to large urban centers presents challenges that must be addressed at both design and implementation stages. The urban poor do not have the same needs as the rural poor in terms of access to basic health and education services for their children. Moreover, they have weaker social networks and frequently face higher opportunity costs of time. Appropriate program adjustments have to be made, including flexible access to reach eligible beneficiaries. Coordination in big cities can be challenging when local social programs are close substitutes of the national CCT program, as was the case in Bogota.

5.6 Low-cost systems to manage and monitor large-scale CCT programs are essential to keep the marginal cost of expansion low.<sup>94</sup> The availability of adequate technologies made *Familias en Acción* monitoring and management feasible and cost-effective as it expanded. Moreover, technologies for financial transactions and banking were introduced, reducing administrative program costs and transaction costs for the beneficiary households. Marginal changes in benefit levels for a specific subset of beneficiaries can be achieved at low marginal cost if the technologies are in place.

5.7 Making impact evaluation results widely and continuously available can help to shore up borrower commitment to a program and can be particularly important when new administrations come into power and are under pressure to show results. Despite the coherent strategic vision underpinning *Familias en Acción* initiated by the previous administration, the incoming Uribe administration remained skeptical of the program until the impact evaluation results of the first phase became available. Based on these findings, the new administration embraced the program and pushed for its expansion. *Familias en Acción* maintains its core role within the safety net under the newly elected Santos government that came into power in August 2010.

5.8 Any significant expansion of CCT programs should be based on evidence from impact evaluations to improve the efficiency and efficacy of scale-up. This project demonstrated that evidence-based modifications of the incentives for secondary schooling helped increase the effectiveness of CCT education grants in large towns.

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<sup>94</sup> The huge CCT programs of Brazil and Mexico illustrate this point more emphatically.

5.9 Major changes in the M&E system at the Ministry of Social Protection required changes not only in information systems, but also within the whole institution. Improvements in M&E require changes in organizational culture that acknowledge the relevance and validity of the indicators and the anticipated use of evidence in the decision-making process.

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## Annex A. Basic Data Sheet

### SOCIAL SAFETY NET PROJECT (LN. 7337-CO, LN. 7433-CO)

#### Key Project Data *(amounts in US\$ million)*

	<i>Appraisal estimate</i>	<i>Actual or current estimate</i>	<i>Actual as percent of appraisal estimate</i>
Total project costs	92.7	271.9	293.3
Loan amount	86.4	190.9	220.9
Cancellation	-	0.3	-

Notes: Additional Financing in the amount of US\$104.8 million was approved on March 15, 2007 and signed on April 16, 2007.

#### Cumulative Estimated and Actual Disbursements

	<i>FY06</i>	<i>FY07</i>	<i>FY08</i>	<i>FY09</i>
Appraisal estimate (US\$M)	30.0	85.0	86.4	86.4
Actual (US\$M)	20.0	100.2	190.7	190.9
Actual as percent of appraisal	66.7	117.9	220.7	220.9

Date of final disbursement: 05/18/2009 (Date of the justification of the special account)

#### Project Dates

	<i>Original</i>	<i>Actual</i>
Concept Note	03/08/2005	02/28/2005
Negotiations	09/12/2005	09/28/2005
Board approval	11/01/2005	11/01/2005
Signing	n/a	11/23/2005
Effectiveness	01/20/2006	01/20/2006
Closing date	12/31/2007	12/31/2008

**Staff Inputs** (staff weeks)

	<i>FY05</i>	<i>FY06</i>	<i>FY07</i>	<i>FY08</i>	<i>FY09</i>	<i>FY10</i>	<i>Total</i>
Preparation	13.85	-	-	-	-	-	13.85
Appraisal	13.45	-	-	-	-	-	13.45
Negotiations	-	8.79	-	-	-	-	8.79
From Negotiations to Board	-	10.90	-	-	-	-	10.90
Supervision	-	0.34	28.76	31.36	19.27	-	79.73
Other	-	-	-	-	5.91	0.08	5.99
<b>Total</b>	<b>27.30</b>	<b>19.03</b>	<b>28.76</b>	<b>31.36</b>	<b>25.18</b>	<b>0.08</b>	<b>132.71</b>

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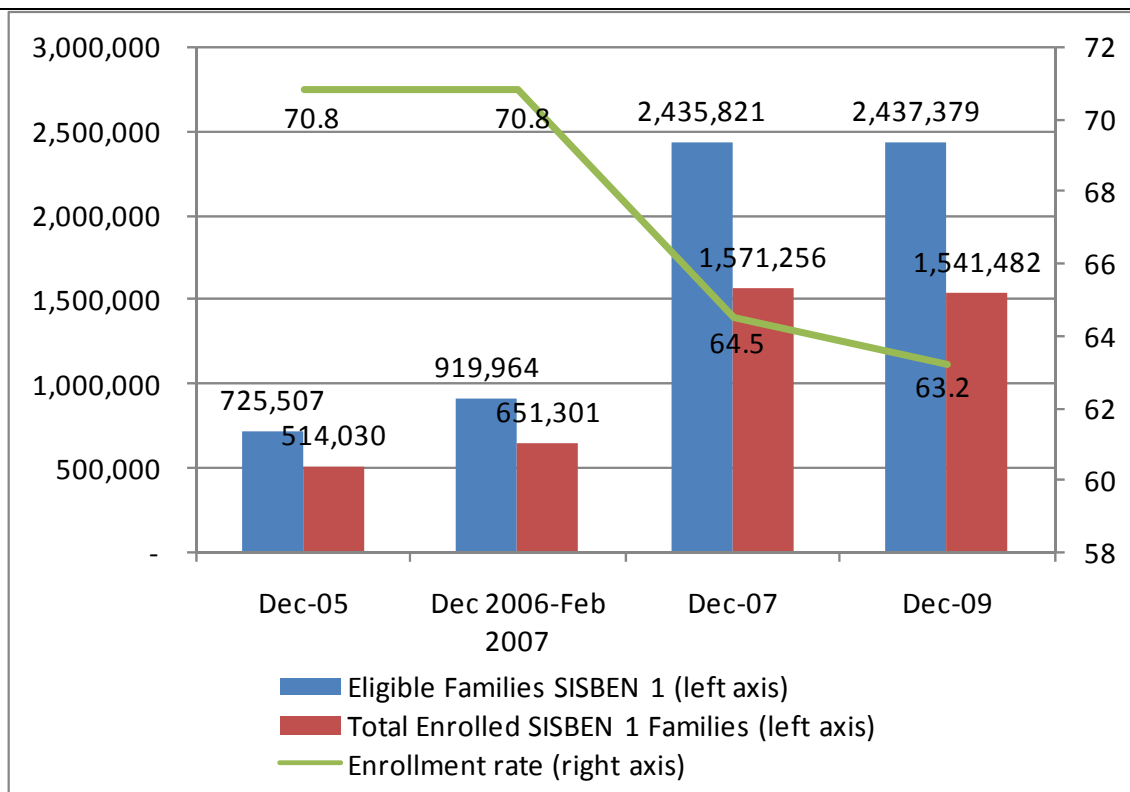
## Annex B. Project Data

<b>Table B-1. Key performance Indicators (as listed in the PAD)</b>			
<b>INDICATOR</b>	<b>BASELINE</b>	<b>TARGET</b>	<b>VALUE AT COMPLETION</b>
<b>Objective 1</b>			
At least 40 percent of benefits of Familias going to bottom quintile	40 percent	40 percent	45.4 percent
At least 70 percent of SISBEN I families covered in participating municipalities	60 percent	70 percent	61 percent
At least 80 percent of primary-age school children in extremely poor beneficiary families attending school at least 80 percent of the time.	70 percent	80 percent	71.9 percent
At least 95 percent of beneficiary 0-6 year old children completed growth monitoring and health check-ups, according to MSP protocol	90 percent	95 percent	91.7 percent
At least 70 percent of the total revised SISBEN I families in newly entered municipalities are registered in the program.	0	70 percent	66.4 percent
100 percent of municipalities have signed a collaboration agreement with program.	0	100 percent (57 municip.)	99 percent (1096 municip., not Bogota)
Beneficiary information booklets designed, published and distributed to new municipalities with training.	0	57 municipalities	466 municipalities
System for monitoring human capital conditions operating for new selected municipalities.	0	57 municipalities	466 municipalities
Monitoring information System includes data on ethnic origin of beneficiaries by municipality	0	57 municipalities	466 municipalities
<b>Objective 2</b>			
Publicly available information on the coverage, financing, and impact of key social safety net programs managed by the MSP and its affiliated institutions.	Not specified	Not specified	–
At least 50 percent of social safety net programs of the MSP and at least two of its affiliated organizations are included in the M&E system.	Not specified	>50 percent of safety net programs	99 percent of safety net progs. and 9 of 17 affiliated orgs.
Result based indicators of four main social assistance programs publicly accessible	Not specified	4	n.a.
Integration between MPS results-based M&E System and SIGOB-SINERGIA via software	Not specified	Not specified	–
Greater transparency and accountability of social safety net programs by strengthening civil society involvement in MPS performance assessment.	Not specified	Not specified	–
<i>Source:</i> Targets and baselines from World Bank 2005, values at completion from Núñez (2009) and World Bank (2009).			

**Table B-2. Number of children by grant type, December 2005- December 2008**

Year	Number of municipalities	Number of children by grant type			Total number of children
		Nutrition	Elementary school	Secondary school	
2002	620	247,342	322,587	184,475	754,404
2003	627	264,537	345,004	197,303	806,844
2003	627	225,460	357,159	218,562	801,181
2005	702	275,622	438,362	293,986	1,007,970
2006	887	627,880	668,792	467,204	1,763,876
2007	1,093	1,219,198	1,075,499	896,732	3,191,429
2008	1,093	1,662,741	1,154,064	1,095,581	3,912,386

Sources: Acción Social (2009), Informe Multilaterales Segundo Semestre (2008).

**Figure B-1. Number of eligible and enrolled SISBEN-1 families and SISBEN 1 take-up rate, 2005-08.**

Sources: Acción Social (2009), Informe Multilaterales Primer Semestre (2009).

Note: The enrollment rate is defined as the number of SISBEN 1 families enrolled in the program as a percent of the number of eligible SISBEN 1 families.

<b>Table B-3. Results Based M&amp;E System at MSP: Information Systems</b>	
PISIS	Subnational Health Accounts (Cuentas Territoriales de salud)
RUAF	Health insurance and social protection coverage -including births and deaths- (Aseguramiento en salud y en Protección social -incluyendo nacimientos y defunciones-)
SISMED	Medicines markets and prices (Mercado y precios de medicamentos).
SISPRO	Integrated information system for decision making (Sistema de información integrado para la toma de decisiones)
PILA	Contributions to health insurance and social protection (Aportes en salud y en Protección social)
RIPS	Register of health service users (Registro de uso de los servicios de salud)
<i>Source:</i> Ministerio de Protección Social, Departamento de Planeación y Análisis de Políticas.	

<b>Provinces *</b> <b>(Departamentos)</b>	<b>Take-up rate (percent)<sup>a</sup></b>			<b>Rural Population<sup>b</sup></b>
	<b>2005</b>	<b>2008</b>	<b>Change</b>	<b>Percent</b>
Guaviare	60	38	-21	48
Vichada	55	38	-17	63
N Santander	76	60	-16	24
Chocó	68	53	-15	51
Atlántico	82	68	-14	5
Casanare	82	70	-12	32
Risaralda	70	58	-12	23
Guainía	70	59	-11	69
Antioquia	69	58	-11	24
Sucre	77	66	-10	36
Tolima	71	62	-9	34
Huila	83	74	-9	41
Caquetá	54	45	-9	45
Bolívar	76	67	-8	25
Vaupés	67	58	-8	64
Cesar	64	58	-5	29
Cundinamarca	77	72	-5	36
Arauca	60	56	-5	39
San Andrés	78	73	-4	29
Guajira	63	59	-4	46
Boyacá	77	73	-4	49
Amazonas	69	65	-4	62
Meta	50	46	-4	27
Santander	72	68	-4	27
Caldas	68	67	-2	31
Magdalena	63	62	-1	31
Córdoba	72	72	0	50
Valle	61	64	3	14
Cauca	79	86	6	62
Nariño	79	90	11	54
Putumayo	42	60	18	56
Bogotá Dc	n.a.	29	n.a.	0
Quindío	n.a.	66	n.a.	13
National	71	63	-4	26

*Sources:* <sup>a</sup> Acción Social, Oficina Planeación, <sup>b</sup> Census 2005.  
*Notes:* Take-up rate is defined as number of registered SISBEN 1 families as a percent of number of eligible SISBEN 1 families.

**Table B-5. Alternative education grants: basic design and three alternatives for big cities (Colombian dollars)**

Municipalities	Subsidy According to Student's Grade			
	Elementary (Grades 2-5)	Secondary (Grades 6-8)	Secondary (Grades 9-10)	Secondary (Grade 11)
Medellin, Cali and Soacha	15,000	25,000	35,000	40,000
Ibague, Neiva Popayan, Santa Marta and Sincelejo	0	30,000	45,000	60,000
Bogota, B/quilla, B/manga, Monteria, Pasto, Pereira, V/cencio and Yopal	0	25,000	35,000	40,000
Remaining Municipalities with Eligible Families (SISBEN 1) and displaced families	15,000	30,000	30,000	30,000

*Source:* Acción Social (2010), Oficina Planeación.

## Annex C. List of People Interviewed

### World Bank Staff and Consultants

Theresa Jones	Task Team Leader (after July 2006)
Diana Isabel Cardenas	Consultant
Aline Coudouel	Senior Economist
Maria Claudia Vasquez	Consultant
Javier Baez	Economist, IEG (author of impact evaluation)

### National Planning Department (Departamento Nacional de Planeación)

Jose Fernando Arias	Director, Social Development
Miguel Cardoso	Assistant to Director, Social Development
Roberto Angulo	SISBEN, Coordinator
Luz Stella Rodriguez	Senior Advisor to DNP Chief
Andrea Franco	Assistant to Director, Social Development

### Acción Social (implementing agency)

Rita Combariza Cruz	National Coordinator, <i>Familias en Acción</i>
Hernando Sanchez	Regional Operations Coordinador, <i>Familias en Acción</i> .
Ricardo Gomez	Liaison with Foreign Donors, <i>Familias en Acción</i>
Fernando Sanchez	Institutional Strengthening Coordinator, <i>Familias en Acción</i>
Irina Marun Meyer	Technical Coordinator, <i>Red Juntos</i>
Natalia Velasco	Assistant to Technical Coordinator, <i>Red Juntos</i>

### Ministry of Social Protection

Juan Pablo Toro	Director General, Planning and Policy Analysis
Luis Carlos Corral	Consultant, Information Systems MPS
Maria Eulalia Arteta	Head, Information Systems MPS

### Ministry of Finance

Fernando Jimenez	Director, Budget Division
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### International Development Partners

Ana Lucia Munoz	Inter-American Development Bank, Bogota
Olga Lucia Acosta	Local Representative, Economic Commission for Latin America

### Universities, Think-tanks and NGOs

Alejandro Gaviria	Dean, Economics Department, <i>Universidad de los Andes</i>
Sergio Clavijo	Director, <i>Asociacion Nacional de Instituciones Financieras</i>
Jairo Núñez	Research Associate, <i>Centro Nacional de Consultoría</i>
Guillermo Perry	Research Associate, <i>Fedesarrollo</i> , and former Chief Economist World Bank
Mauricio Olivera	Research Associate, <i>Fedesarrollo</i>



Raquel Bernal	Professor, Economics Department, Universidad de los Andes
Adriana Camacho	Professor, Economics Department, Universidad de los Andes
Ana Maria Ibanez	Director El Centro de Estudios sobre Desarrollo Económico, Economics Department, Universidad de los Andes
Jorge Ivan Gonzalez	Director CID, Economics Department, Universidad Nacional
Carolina Cuevas	<i>Fundación Saldarriaga Concha</i>

**Field Visit (Engativa and Cartagena–El Pozon)**

Carolina Quevedo	Bogota District Coordinator, <i>Familias en Acción</i>
Maria Fernandez	Bogota Local District Coordinator (North, Center and West Zones), <i>Familias en Acción</i>
Sandra Rincon	Mother Group Leader, Engativa, <i>Familias en Acción</i>
Liliam Puello Leal	Municipal Liason Cartagena, <i>Familias en Acción</i>
Beatriz Jimenez Vanegas	Social Worker, Cartagena, <i>Familias en Acción</i>
Carlina Naranjo Lozano	Economist, Cartagena, <i>Familias en Acción</i>