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PROJECT PERFORMANCE ASSESSMENT REPORT



BULGARIA

Social Inclusion Project

Report No. 124861

JUNE 26, 2018

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1818 H Street NW
Washington DC 20433
Telephone: 202-473-1000
Internet: www.worldbank.org

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Report No.: 124861

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BULGARIA

**SOCIAL INCLUSION PROJECT
(IBRD NO. 76120)**

June 26, 2018

*Human Development and Economic Management
Independent Evaluation Group*

Currency Equivalents (annual averages)

Currency Unit = Bulgarian Lev (Lev)

2009	\$1.00	Lev 1.40
2010	\$1.00	Lev 1.47
2011	\$1.00	Lev 1.40
2012	\$1.00	Lev 1.52
2013	\$1.00	Lev 1.47
2014	\$1.00	Lev 1.47
2015	\$1.00	Lev 1.76
2016	\$1.00	Lev 1.76

Abbreviations and Acronyms

CBO	community-based organization
ECD	early childhood development
ESF	European Social Fund
EU	European Union
GDP	gross domestic product
ICR	Implementation Completion and Results Report
IEG	Independent Evaluation Group
MLSP	Ministry of Labour and Social Policy
M&E	monitoring and evaluation
NGO	nongovernmental organization
OP HRD	Operational Program Human Resources Development [of the Government of Bulgaria]
PAD	project appraisal document
PDO	project development objective
PPAR	Project Performance Assessment Report
SID	Social Inclusion Directorate
SIF	Social Investment Fund
SIP	Social Inclusion Project
UNICEF	United Nations Children's Fund

All dollar amounts are U.S. dollars unless otherwise indicated.

Fiscal Year

Government: January 1–December 31

Director-General, Independent Evaluation
 Director, Human Development and Economic Management
 Manager, Corporate and Human Development
 Task Manager

Ms. Caroline Heider
 Mr. Auguste Tano Kouame
 Ms. Emanuela Di Gropello
 Ms. Susan A. Caceres

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This report was prepared by Denise Anne Vaillancourt, who assessed the project in February 2018, with the technical input of Rosen Asenov, Bulgarian consultant. The report was peer reviewed by Gisela M. Garcia and panel reviewed by Soniya Carvalho. Aline Dukuze provided administrative support.

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Principal Ratings

	<i>ICR*</i>	<i>ICR Review*</i>	<i>PPAR</i>
Outcome	Moderately satisfactory	Moderately satisfactory	Moderately satisfactory
Risk to Development Outcome	Low or negligible	Moderate	Moderate
Bank Performance	Moderately satisfactory	Moderately satisfactory	Moderately satisfactory
Borrower Performance	Moderately satisfactory	Moderately satisfactory	Moderately satisfactory

* The Implementation Completion and Results (ICR) report is a self-evaluation by the responsible World Bank global practice. The ICR Review is an intermediate IEG product that seeks to independently validate the findings of the ICR.

Key Staff Responsible

<i>Project</i>	<i>Appraisal</i>	<i>Completion</i>
Task Manager/Leader	Christian Bodewig	Plamen Nikolov Danchev
Sector Manager or Practice Manager	Arup Banerji and Kathy Lindert	Mario Cristian Aedo Inostroza
Sector Director or Senior Global Practice Director	Tamar Manuelyan Atinc	Claudia Maria Costin
Country Director	Orsalia Kalantzopoulos	Arup Banerji
Country Manager	Florian Fichtl	Antony Thompson

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About this Report

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

Each PPAR is subject to technical peer review, internal IEG panel review, and management approval. Once cleared internally, the PPAR is commented on by the responsible World Bank country management unit. The PPAR is also sent to the borrower for review. IEG incorporates both World Bank and borrower comments as appropriate, and the borrowers' comments are attached to the document that is sent to the World 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 for Public Sector Evaluations

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://ieg.worldbankgroup.org>).

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 World Bank country and sectoral assistance strategies and corporate goals (expressed in Poverty Reduction Strategy Papers, Country Assistance Strategies, sector strategy papers, and 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 with alternatives. The efficiency dimension is not applied to development policy operations, which provide general budget support. *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, and not evaluable.

Bank Performance: The extent to which services provided by the World 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 or 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, and 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, and highly unsatisfactory.

Preface

This is the Project Performance Assessment Report (PPAR) for the Social Inclusion Project in Bulgaria.

A loan (IBRD 76120) of €40 million (equivalent to \$59 million) for the Social Inclusion Project was approved on November 4, 2008. The financing plan also included contributions of €73.43 million from government (including European Social Fund financing for a nationwide program rollout) and €23.30 million from communities for a total cost of €136.73 million. The loan became effective on April 16, 2009 and closed on December 31, 2015. The loan closed 26 months after the original closing date because of implementation delays caused by changes in implementing arrangements and severe government caps on project expenditure precipitated by the 2008 global economic crisis. The total project cost at closing was €25.99 million equivalent. A total of €23.58 million was disbursed: 59 percent of the original loan and 75 percent of the revised amount of €31.39 million (after €8.61 million was canceled in July 2013). An amount of €7.81 million was not disbursed.

This report assesses project performance and outcomes\ based on fieldwork and a review of project documents, the Implementation Completion and Results Report (ICR), aide-mémoire, supervision reports, and other relevant data, research, and material. Rosen Asenov, local consultant, and Denise Anne Vaillancourt, international consultant, undertook a mission to Bulgaria in February 2018, during which they conducted interviews with officials and technical staff, service delivery personnel, local and municipal authorities, civil society organizations, beneficiaries, relevant development partners, and other involved persons. They visited five municipalities: Byala Slatina, Haskovo, Pazardzhik, Plovdiv, and Pravets. Interviews were also conducted with relevant World Bank staff. The Independent Evaluation Group (IEG) gratefully acknowledges all those who made time for interviews and generously provided documents and information, especially those in the municipalities visited. IEG also expresses its gratitude to the World Bank office in Sofia for the technical, logistical, and administrative support provided to the mission. Appendix E is a list of persons consulted.

This report serves an accountability purpose by evaluating the extent to which the operation achieved its intended outcomes. It also seeks to draw lessons to inform and guide future investments in early childhood development and social inclusion. This assessment complements the ICR prepared by the World Bank's operations teams with borrower contributions and IEG's desk review (ICR Review) by providing an independent, field-based assessment more than two years after the project's closing. Additionally, this project was chosen for a field evaluation because of its pilot nature and potential for lessons, and because of its relevance to an IEG synthesis study on service delivery and behavior change assessment frameworks.

Following standard IEG procedures, a copy of the draft PPAR was sent to relevant government officials and organizations for review. Comments were received and are attached as appendix F.

Summary

Bulgaria is a middle-income country that joined the European Union (EU) in 2007. After setbacks in social well-being and economic growth precipitated by the 2008 global economic crisis, Bulgaria has recently made progress in improving economic performance and reducing poverty. However, it faces the formidable challenge of addressing persistent pockets of poverty and social exclusion. Poverty in Bulgaria is linked with low levels of education, high unemployment, rural residence, belonging to an ethnic minority, female gender, and old age. Social exclusion is both a cause of poverty and a consequence. Fighting poverty and social exclusion is a priority of Bulgaria, and education a key component of its national policies.

The objective of the Social Inclusion Project (SIP) is “to promote social inclusion through increasing the school readiness of children below the age of seven, targeting low-income and marginalized families, including children with a disability and other special needs” (World Bank 2008a). The objective did not change during the life of the project.

The SIP was designed to support the pilot phase of a national school readiness program composed of a range of early childhood development (ECD) interventions targeted to low-income, marginalized children, including those with a disability. The pilot was to be implemented in about 30 percent of Bulgaria’s 265 municipalities, and the rest of the municipalities were the control group. Experience and learning under the pilot were expected to document program effectiveness, contribute to fine-tuning its design, and leverage EU funding for the nationwide rollout. Support was channeled through two components. The integrated social and children services component was to provide grants to pilot municipalities to deliver integrated ECD services to target children and their parents. The capacity building component was to strengthen national capacity for program management, implementation, and evidence-based learning and improvement, including support for baseline, midterm, and impact evaluations. It also aimed to support municipal capacity building for cross-sectoral cooperation, collaboration with nongovernmental organizations, and accessing EU funds.

The relevance of the project development objective (PDO) is rated *substantial*. The PDO is relevant to country conditions and to Bulgaria’s strategic priorities. A goal of the *National Development Programme: Bulgaria 2020* is to raise living standards through education, creating conditions for employment and social inclusion, and ensuring health care quality and access. The program prioritizes improvements to education quality and access, poverty reduction, and social inclusion. The PDO is also relevant to the World Bank’s Country Partnership Framework for Bulgaria (FY17–22), whose pillar “investing in people” aims to enhance school outcomes for better employability and improve access to essential services, including ECD for the poor and marginalized. However, there are issues with the PDO’s framing. It was very ambitious to expect achievement of the PDO within a four-year time frame, especially considering the SIP’s multisectoral nature, civil works program,

decentralized implementation, capacity constraints, innovative service delivery, and pilot approach.

The relevance of the project's design is rated *modest*. There were some strong design elements—for example, a largely plausible results chain for component 1, services tailored to local needs and contexts, and a pilot approach supporting evidence-based learning before nationwide rollout. However, there were shortcomings. The results chains supporting behavior change, learning, and capacity building were not well articulated. Risks identified at design did not anticipate the difficulty of recruiting the substantial number of professional service providers, given their limited supply in the country and the low pay levels in the social services sector. The risk assessment also did not anticipate government-imposed limits on project expenditure, even though its fit within the government of Bulgaria's expenditure ceiling was an issue that had delayed project negotiations.

Implementation. The credit became effective on April 16, 2009 and closed on December 31, 2015. After a slow start (and after the global economic crisis), the government of Bulgaria set severe expenditure limits for the project, which delayed and compressed the service delivery period. Civil works delays (linked to expenditure caps) and difficulties recruiting service delivery staff also slowed implementation. Children were enrolled in kindergarten and preschool only during the project's last two years, and services were delivered during the last six to eight months. Delays and expenditure caps led to elimination of the impact evaluation. Five restructurings amended implementing arrangements, reallocated more loan proceeds for municipality grants, revised the results framework, reduced activities, canceled part of the loan (€8.6 million), and extended the closing date twice. The total cost (€25.99 million) was 65 percent of initial estimates.

Project efficacy is rated *substantial*. Many service delivery output targets were exceeded—a laudable feat against the backdrop of substantially delayed and compressed service delivery time frames. However, these outputs are not a proxy for the outcomes embedded in the PDO. Eighty percent of children 6–7 years of age and identified as vulnerable, who were exposed to SIP kindergartens and preschool groups for at least one year, passed school readiness tests, compared with a 49 percent pass rate in a 2012 matched baseline group. However, evidence is lacking to assess the efficacy of the targeting of low-income, marginalized children and their parents (except for disabled children), as was envisaged under the project.

Service delivery outputs and intermediate outcomes. Critical inputs (infrastructure and 1,409 service delivery staff) enabled the creation of new places and increased enrollment in kindergarten and preschool and the establishment and delivery of integrated social services for target children in the 66 pilot municipalities. In total, 2,357 new places in kindergartens and preschools were created—exceeding the 1,600 target—and 4,420 children ages 3–7 years were newly enrolled in kindergarten and preschool, surpassing the 3,000 target. There is no breakdown of enrollees to indicate how many came from the low-income, marginalized groups targeted under the project. The project created 113 community centers for service delivery, exceeding the target of 68. The number of children who benefited from early

intervention of disabilities services was 4,311, which is twice the target of 2,000 set in 2012 and almost triple the 2013 revised target. An estimated 471 children with disabilities and special education needs were enrolled in kindergarten or preschool, against a target of 150. The number of children ages 0–7 who had health checkups was 39,993, which exceeds the target of 10,000. More than half of these children were reached during the project’s last six months. A total of 12,864 parents of children ages 0–3 received counseling, exceeding the target of 10,000; two-thirds of these children were reached during the project’s last six months. There is no breakdown of beneficiaries by age, income, ethnicity, or mode of delivery (mobile versus facility-based). Changes in parenting practices and the target children’s early development, health, nutrition, and well-being were not tracked.

Capacity building outputs and intermediate outcomes. The project financed consultants and training to strengthen national- and municipal-level capacity, but it did not culminate in the development of evaluation capacity, systematic learning, or program refinement. Municipalities improved cross-sectoral cooperation, but collaboration with nongovernmental organizations was not strengthened. The project was successful in developing municipalities’ capacity to access EU financing. Sixty-four of the 66 pilot municipalities accessed EU funding to continue service delivery initiated under the SIP. However, delays between the end of World Bank financing and the start of EU financing averaged six months and caused breaks in service delivery.

PDO achievement. The only measure of school readiness provided is a comparison of two sets of school readiness test results, the first conducted in 2012 (the baseline year) and the second in mid-2015. According to this study, passing rates of school readiness tests taken by vulnerable children ready to enter primary school increased from 49 percent in 2012 to 80 percent in 2015.

There were shortcomings in the targeting of low-income and marginalized families, including children with a disability and other special needs. There was some ambiguity in the target setting for kindergarten enrollments. The project appraisal document is clear in its focus on target children and establishes enrollment rate indicators for two specific groups: low-income and marginalized children, and children with a disability. The restructuring eliminated the “low-income and marginalized” qualifier on the first of these indicators to include all children, though the PDO was not revised. Municipality contracts included a target stating that at least 30 percent of new enrollees should be target children. World Bank reports noted difficulty during implementation in ensuring a sufficient representation of Roma children within that quota, and advocated its close monitoring and improvement. The Independent Evaluation Group was unable to obtain these data for independent verification. Although service delivery output targets were exceeded, as previously noted, project data were not disaggregated to document the extent to which low-income, marginalized groups were reached. The reporting on disabled/special needs children was more straightforward. An anonymous tally of beneficiaries’s responsiveness to the multiple criteria established under the project for identifying and targeting low-income, marginalized groups would have shed light on the project’s success in this light.

The school readiness program (and the SIP, which supported its pilot phase) defines short-term social inclusion outcomes in terms of more equal starting conditions of children entering primary school. The project included activities to integrate target children in kindergarten, but it did not systematically track the share of target children among all new kindergarten enrollees, the equality of their starting conditions at the start of first grade, and their performance compared with their better-off counterparts.

Project efficiency is rated *modest*. Investments in ECD can be highly cost-effective, but two shortcomings are noted: (i) shortcomings in implementing efficiency (significant delays in implementation, which curtailed the time frame for service delivery and reduced cost efficiency); and (ii) shortcomings in targeting and reaching the low-income, marginalized populations (including the failure to harness nongovernmental organizations, community-based organizations, and other local actors, which could have provided better data, insights, and reach to communities).

Based on the ratings of PDO and design relevance, efficacy, and efficiency, the project's outcome is rated **moderately satisfactory**.

Risk to development outcome is rated **moderate**. Sociopolitical risks and government ownership are all rated *moderate*. Government has undertaken some key policy decisions and initiatives which are supportive of ECD outcomes. But a comprehensive, cross-sectoral, evidence-based ECD policy is still needed. Technical risk is rated *substantial* because the pilot did not culminate in learning and improved development effectiveness. Financial risk is *moderate* because state financing of SIP services by 2019 (when the EU funding finishes) is confirmed in Council of Ministers decisions, the affordability of which can only be verified with cost estimates of nationwide rollout of the program.

Overall, Bank performance is rated **moderately satisfactory**. Quality at entry is rated *moderately satisfactory*. Some aspects of project design were strong, including its innovation, its direct support to municipalities, and its emphasis on evidence and learning. However, shortcomings included weak results chains for behavior change, learning, and capacity building. Fiduciary and environmental aspects were well prepared. The failure to include a monitoring and evaluation (M&E) expert in the Ministry of Labour and Social Policy (MLSP) was an oversight, especially given the project's pilot design. The four-year time frame was very ambitious. The decision to let municipalities tailor services to local needs and contexts was sound. However, the targeting would have been more precise and efficient with a more systematic mapping of target populations and their needs, fuller involvement of those with intimate knowledge of the communities and community development expertise, and adequate M&E. Quality of supervision is rated *moderately satisfactory*. Revision of the results framework and indicators in 2012 weakened measurement of the PDO and target groups and the focus on them, and the World Bank began to rely on output indicators as a proxy for PDO achievement. The World Bank's rationale for dropping the impact evaluation is sound; and use of the supervision budget for assessing school readiness test results is noteworthy. Supervision reporting and dialogue with the government were candid and firm in

an effort to negotiate reasonable spending limits and an extended time frame for implementation that would allow time to deliver services and achieve results.

Overall borrower performance is rated **moderately satisfactory**. Government performance is rated *moderately unsatisfactory*. National development strategies place a high priority on the PDO, but the project was not protected against severe spending limits, which undermined PDO achievement. The elimination of the impact evaluation is justified, but M&E capacity building and evidence-based learning could have been preserved and supported. The multisectoral monitoring committee met infrequently. Implementing agency performance was *moderately satisfactory*. Despite expenditure caps and significant delays, the project established and launched the delivery of integrated services and increased preschool places and new enrollment. Fiduciary and environmental exigencies were also carried out. M&E was neglected and focused largely on outputs.

The quality of M&E is rated **modest**. The original design included an M&E framework that included measures for school readiness (but not social inclusion), an impact evaluation, and a multisectoral monitoring committee to oversee implementation, results, and learning. Restructuring weakened the results framework, reduced most indicators to output measures, and created ambiguity regarding the coverage of target groups. Baseline data were collected three years after project approval, and the monitoring committee rarely met. There was limited scope and effort for using data to learn about program effectiveness and strategic decision making.

Lessons. Investment in ECD and the development of evidence-based policy for ECD programs and nationwide rollout are critical to the achievement of Bulgaria's goals of human and economic development. The following lessons, offered to this end, are relevant to both the World Bank and the government:

- Official databases are important, but may need to be complemented with mapping of target communities and households and their needs, priorities, motivations, and dynamics, undertaken by those with intimate knowledge of the community and with community development expertise.
- Mobile services and mediators face challenges in reaching target populations, especially when mediators are few relative to their target populations and have heavy workloads, and they do not always share the language, culture, and living conditions of those populations. Leveraging their efforts with nongovernmental organizations, community-based organizations, and other leaders and actors trusted by the community has the potential to enhance the coverage and effectiveness of services.
- Low appreciation of evidence for learning, program refinement, and policymaking can undermine the effectiveness of programs and policies, especially where piloting is intended. The development of M&E capacities could provide MLSP with a critical management tool for ensuring continuous learning and accountability for ECD results and increase its potential for resource mobilization and future replication.

- Experience under the SIP reveals the scope and opportunity to clarify roles and responsibilities to optimize comparative advantages and synergies of the many actors involved both horizontally (across partners at each level of the system) and vertically (up and down the various levels of decentralized government). Such measures could enhance cross-sectoral collaboration within the government and more productive partnerships between the government and other development partners at each level of the system; and strengthen and streamline the financing, accountabilities, and interactions across the various levels of government for better service quality.
- Investments in ECD and social inclusion activities targeted to low-income and marginalized children ages 0–7 years and their parents are necessary, but they are insufficient to ensure the children’s success and inclusion in primary school and beyond. Continued delivery of integrated social services and social inclusion interventions during their primary school years (and beyond), support for teachers for coping with the challenges of social inclusion in the classroom, and improved education quality are also critical.

Auguste Tano Kouame
Director
Human Development and Economic Management
Independent Evaluation Group

1. Background and Context

1. This section summarizes the background and context covering the period during which the project under review was designed and implemented (2006–15).¹

General Background

2. **Population.** Bulgaria's population of 7.1 million in 2016 (World Bank data 2018) has rapidly declined since it peaked at 9 million in 1988, a result of substantial out-migration of young workers, low birthrates, and high mortality rates. A significant decline in the working-age population and a growing elderly population underlie high and growing dependency ratios. Bulgaria is also marked by internal rural-to-urban migration. The most disadvantaged rural areas endure the greatest outflow, caused by limited employment opportunities and poor socioeconomic status. The 2011 census estimates the following self-reported ethnic breakdown of the population: 84.8 percent (or 5.7 million) ethnic Bulgarians; 8.8 percent (or 588,318) ethnic Turkish people; and 4.9 percent (or 325,343) ethnic Roma people. Many consider the Roma population to be seriously underestimated.² More than three-quarters of ethnic Bulgarians live in urban areas compared with one-third of Turkish people and one-half of Roma. Turkish and Roma people are more concentrated in several specific districts.³

3. **Economic growth and poverty.** Since the 1990s, Bulgaria has evolved from a centralized, planned economy to an open, market-based, upper-middle-income economy. The initial transition was difficult. Bulgaria saw significant economic gains and progress toward poverty reduction from 2000 to 2008. Impressive growth was the result of structural reforms, deep fiscal adjustments, a favorable external environment, and prospects of European Union (EU) accession. Bulgaria became an EU member in 2007 after creating institutions to support democratic governance, human rights, and a market economy. Robust real gross domestic product (GDP) growth (more than 6 percent annually), low unemployment, and a boost in foreign direct investment inflows marked the period 2000–08, culminating in important gains in poverty reduction and shared prosperity. Poverty (population living on less than \$5 a day) declined from 37 to 13 percent between 2001 and 2008 because of enhanced employment opportunities for the poorest 40 percent.

4. The 2008 global financial crisis reversed positive trends. Between 2009 and 2014, annual real GDP growth slowed to less than 1 percent, and 0.4 million (mostly unskilled) Bulgarians lost their jobs. Unemployment more than doubled from 5.6 percent in 2008 to 13 percent in 2013, reaching almost 50 percent among workers with little education. Poverty rates rose from 13 to 15.8 percent, and debt levels rose by almost 9 percentage points to 27 percent of GDP (2014), which is still one of the lowest in the EU. Bulgaria was resilient during the global economic crisis, though convergence of income levels to EU averages has stalled. Indicators for 2015 point to improvements: the GDP growth rate rose to 3 percent, driven by exports; unemployment fell to 9.2 percent because of gains in

industry and construction; increased employment of low-skilled labor contributed to poverty reduction; and the fiscal position improved with a deficit of 2.5 percent of GDP (on accrual basis) in 2015 compared with 5.8 percent in 2014.

5. **Political stability and civil society.** After the global financial crisis, slow structural reforms revealed weaknesses in Bulgaria's institutional framework for growth and shared prosperity. This culminated in a period of rapid political change that included five governments in a 20-month period ending in October 2014, when a new coalition government led by the center-right political party was appointed and stabilized the political context. Local elections in 2015 consolidated the position of the four progovernment parties. The coalition has found common ground as pro-European and reformist, focused on education and health sector effectiveness, among other priorities.

6. Civil society underwent changes as Bulgaria transitioned to a market economy, and it continues to evolve and respond to citizens' needs and demands (Kabakchieva and Hristova 2012). There are many nongovernmental organizations (NGOs) in Bulgaria. Some are financed largely by the state and work in partnership with it on policy analysis and program implementation. Others, financed primarily by international NGOs and development partners, also contribute to research, policy analysis, and program implementation. Grassroots activist organizations are characterized by citizen involvement, their activities centering largely on advocacy for policy changes and holding government accountable. Civil society organizations and community-based organizations (CBOs) focus on the rights of children and the disabled, security, social policy, health, education, and the environment.

Social Inclusion

7. **Issues and challenges.** Poverty in Bulgaria is associated with lack of education, old age, and rural location. A substantial share of the bottom 40 percent is unemployed or inactive because they lack adequate education and skills for the labor market. The bottom 40 percent has the highest elderly dependency ratio. Nearly two-thirds of the poor live in rural areas, with limited employment, services, and access to centers of economic activity.

8. Ethnicity is another poverty-related factor. The poverty rate among the Roma is 33 percent compared with 5 percent for the non-Roma. Roma children are especially vulnerable. Roma make up 4.9 percent of the population, but they are 85 percent of the working-age poor with unemployment four to five times higher than that of the non-Roma population. Poverty could also be high among the Turkish minority. The bottom 40 percent suffered the most during the global economic crisis because many low-skilled jobs were lost.

9. Inequality is acute in Bulgaria, caused by low-paid employment and inadequate coverage of the social protection system. Gender gaps in economic opportunities persist.

Inequities are pervasive in pay, educational performance, and participation in public life. Social exclusion is a cause and a consequence of poverty and inequality.

Early Childhood Development and School Readiness

10. **Issues and challenges.**⁴ More than two-thirds of Bulgarians who are at risk of poverty or social exclusion either did not complete primary school or, in some cases, secondary education.⁵ This points to a cycle of low educational attainment (resulting in high unemployment) and poverty and social exclusion. Several factors curtail access of the most disadvantaged children to critical early childhood development (ECD) interventions, which undermines their prospects for attending and succeeding in school, reaching their potential, and escaping poverty. In particular, the number of available places and the high direct and indirect costs (even with partial subsidies provided by municipalities) constrains their access to preschool education.⁶ Their school readiness is also undermined by inadequate access to health care⁷ and nutrition;⁸ unstable, unhealthy home environments;⁹ and, for some parents, the lack of full trust in and appreciation of ECD and early childhood education services.¹⁰

11. **National priorities.** Fighting poverty and social exclusion are priority and national strategies stress the role of education to this end (appendix B). Bulgaria supports measures to promote school readiness, including partial subsidization of public nurseries and kindergarten fees, further fee reductions for the vulnerable, a policy on compulsory preschool, free transportation to preschools for remote children, additional preschool and kindergarten places where demand exceeds supply, and increased coverage of community-based social, education, and health services. In 2016–17, preschool enrollment in Bulgaria was about 80 percent.¹¹ Efforts are needed to increase the enrollment rate for the remaining 20 percent.

World Bank and Other Support

12. For two decades, the World Bank has supported Bulgaria's efforts to reduce poverty and social exclusion, improve the quality and coverage of health and education services, boost employment, and enhance social protection and children's well-being. World Bank support includes lending, trust funds for capacity building, and analytic work. Appendix B (table B.1) shows the chronology of this support, revealing a transition from lending to analytic work and reimbursable advisory services. The World Bank's only other direct investment in ECD before the Social Inclusion Project (SIP) was the Child Welfare Reform Project. Approved in 2001, it sought to improve child welfare and protect children's rights through community-based child welfare approaches as an alternative to institutionalized care. The SIP design used lessons from this project. Two recent analyses advocate for stronger ECD policies in Bulgaria and provide evidence to this end (World Bank 2016c; 2017b).

13. Since its 2007 accession to the EU, Bulgaria's main source of development financing is the EU. It also receives technical and financial assistance from the United

Nations Children’s Fund (UNICEF), which supports ECD through maternal and child health services, social services, and ECD targeted to the poor and vulnerable. The Swiss Agency for Development and Cooperation supports ECD in partnership with Bulgaria’s health and education sectors, with a focus on Roma and other marginalized minorities.

2. Objectives, Design, and Their Relevance

Project Development Objective

14. **Project development objective (PDO) statement.** According to the loan agreement (World Bank 2008b), the PDO is “to promote social inclusion through increasing the school readiness of children below the age of seven, targeting low-income and marginalized families, including children with a disability and other special needs.” The project appraisal document (PAD) states the same objective and adds another one: “...to contribute to the sustainability of the school readiness program by supporting the absorption of European Social Fund (ESF) financing.”¹² In keeping with World Bank and Independent Evaluation Group (IEG) guidelines, this evaluation is based on the PDO stated in the loan agreement.

15. The PDO did not change during the life of the project. Original outcome indicators were changed under the 2012 restructuring and revised slightly in 2013. These changes, itemized in appendix D, table D.1, do not warrant a split rating methodology.

16. **Geographic scope and targeting.** The project aimed to support the pilot phase of Bulgaria’s school readiness program in a subset of municipalities to be selected in line with criteria and methodology defined in paragraph 27 of the project operations manual. Four municipalities in each of Bulgaria’s 27 regions plus Sofia municipality were envisioned. The 27 regional capitals were assigned automatically as SIP beneficiaries,¹³ and the remaining three municipalities per region were to be selected on a competitive basis applying criteria that would reveal the greatest need.¹⁴ Awareness campaigns for the chosen municipalities, their application process, and the preparation, evaluation, and approval of their full proposals culminated in the implementation of subprojects in 66 pilot municipalities (one-quarter of all municipalities), where an estimated half of the Bulgarian population resides. Needs assessments prepared as an integral part of subproject proposals drew on local data and sources to identify and quantify target groups (as defined in the PDO). Tables D.11a–e in appendix D compile the various types and sizes of target groups identified in subproject proposals prepared by the five municipalities visited, along with the data sources they used.

Relevance of Objective

17. The relevance of the project objective is rated **substantial**.

18. The PDO is relevant to country conditions. Poverty and inequality in Bulgaria are intricately linked with low levels of education, high levels of unemployment, social

exclusion, discrimination, lack of access to information, health and social services, and unacceptable living conditions (housing, food intake, security, and stability at home). Poor, marginalized children suffer in particular. Research reveals that lack of positive, nurturing environments and low access to ECD services (health, good nutrition, early childhood stimulation, preschool education, among other things) can have deleterious and irreversible effects on the health and cognitive development of children, all of which prevent them from reaching their full potential and lock them into a cycle of intergenerational poverty.

19. The PDO is relevant to Bulgaria’s strategic priorities. The first goal of the *National Development Programme: Bulgaria 2020* is to raise living standards through education, creating conditions for employment and social inclusion, and ensuring health care quality and access. This program and Bulgaria’s National Strategy for Reducing Poverty and Promoting Social Inclusion prioritize improvements to education quality and access, poverty reduction, and social inclusion. Bulgaria’s National Roma Integration Strategy for 2012–20 is multisectoral, encompassing education, health, employment, and nondiscrimination, with an emphasis on women and children’s rights.

20. The PDO is relevant to the World Bank’s current Country Partnership Framework for Bulgaria (FY17–22), which supports two broad areas: strengthening institutions for sustainable growth, and investing in people. The second area is fully aligned with the PDO, supporting two objectives: enhanced school outcomes for better employability, and improved access to essential services (housing, water, ECD, and long-term care) for the bottom 40 percent and marginalized groups. Support for the first objective includes advisory services for measuring education system quality and performance, expanded access to preschool interventions, and strengthening of evidence to support ECD and social inclusion. The second objective has a focus on Roma and other marginalized children’s access to ECD.

21. However, there are issues with the PDO’s framing and level of ambition. The social inclusion objective is not clearly defined, though the PAD’s statement of objective gave more clarity (in the short-term “to equalize starting conditions of children entering primary school”) than the official statement in the legal document (“to promote social inclusion”). Moreover, it was ambitious to expect achievement of the PDO within a four-year time frame, especially considering the SIP’s multisectoral nature, civil works program, decentralized implementation, capacity constraints, innovative service delivery, and pilot approach.

Project Design

22. The SIP was designed to support the pilot phase of a national school readiness program, supporting a range of ECD services targeted to low-income, marginalized children, including those with a disability. The pilot was to be implemented in about 30 percent of Bulgaria’s 265 municipalities, with the remaining municipalities serving as the control group. It aimed to document program effectiveness, contribute to program

fine-tuning, and leverage EU funding for a nationwide rollout. To this end, the design articulates three distinct phases: pilot testing in selected municipalities during 2009–11; opt-in of the control groups to the program after the two-year pilot, from 2012 onward; and the full transition to a national-level program by the project’s end in 2014 (World Bank 2008a). Project support was channeled through two components (appendix D, box D.1), essentially to support the program pilot, implementation, and evaluation. The integrated social and children services component was to provide grants to pilot municipalities to establish and deliver integrated ECD services to target children and their parents. The capacity building component was to strengthen capacity for program management, implementation, and evidence-based learning. To this end, it included support for establishing national baseline data and for undertaking midterm and impact evaluations. It also included support to develop municipal capacity for cross-sectoral cooperation, collaboration with NGOs, and accessing EU funds.

Relevance of Design

23. The relevance of the project’s design is rated **modest**.

24. There were several good design elements. The pilot design aimed to foster a learning process, including tracking program effectiveness and the use of evidence to improve effectiveness before the nationwide rollout. The results chain for component 1 (integrated service delivery) is largely logical, with mostly plausible links between inputs, outputs, intermediate outcomes, and outcomes. The design incorporates lessons from the previous Child Welfare Reform Project, especially the importance of parent involvement. It also reflects established evidence that school readiness is not only a function of preschool education, but it also involves a holistic, multisectoral approach with specific interventions for different age cohorts of children under age seven: health, nutrition, safety, and well-being at home; early childhood stimulation; access to social services; social protection; and transportation, among others. The design provided for contracting with NGOs for a range of functions and services. It put a cap on civil works expenditures, anticipating that some municipalities might emphasize infrastructure more than service delivery. The requirement for municipalities to commit to maintaining local-level investments aimed to promote local-level ownership and sustainability of investments.¹⁵

25. However, there are shortcomings. The project aimed to change awareness, knowledge, and behaviors of parents and other caregivers favoring child development and included training and counseling to this end. The design of appropriate behavior change interventions (information, incentives, and communications, among others) and their underlying logic, however, were not fully developed. Neither did the design anticipate or address the availability of professionals to fill new positions created at the municipality level, and the risk assessment did not fully explore the risk of limited fiscal space for the school readiness program, even though this was an issue that had delayed project negotiation.

26. Component 2 articulates and supports capacity building, program development, and learning objectives that are not captured in formal objectives, and its results chain is not well articulated. The initial design included an impact evaluation, but it did not define roles and responsibilities or a process or timetable for analysis, vetting of evidence with stakeholders, or its use in decision making. Although a refined school readiness program ready for nationwide implementation was at the heart of the pilot design, it was not identified as an intermediate outcome. Because this component envisioned capacity building of the Ministry of Labor and Social Policy (MLSP) and the Ministry of Education and Science to conduct impact evaluations beyond the SIP, a results chain to this end might have been more specific. Results chains for achieving capacity building of municipalities in clearly defined areas might have been articulated better. There was also scope for the design to have established a more holistic link and vision of central- and municipal-level capacity, incentives, and systems in two areas: cross-sectoral coordination; and program monitoring and evaluation (M&E) for learning and accountability. Although laudible for its emphasis on learning, the project's pilot design was too ambitious for a four-year time frame, even given its conception during the precrisis years and the anticipation of generous EU financing.¹⁶

27. **Implementation arrangements** did not envision a stand-alone implementation unit. Responsibility for loan administration and implementation oversight was placed in the Bulgaria Social Investment Fund (SIF) within MLSP, which had the mandate for overseeing the social inclusion agenda. SIF was well positioned to assume responsibility, given its relevant experience and capacity. The project also sought to align with the processes and mechanisms for ESF financing. MLSP's Directorate of European Funds, International Programs and Projects—designated as the managing authority for ESF Operational Program Human Resources Development (OP HRD)—was given responsibility for approving municipal projects supported under the SIP and for overseeing policy coordination and links with the absorption mechanism for the OP HRD.

28. All municipalities in Bulgaria were invited to apply to participate in the program. The managing authority was to select a sample of municipalities to participate in the first phase of the school readiness program's rollout. Selection was to be based on a methodology (to be defined after effectiveness in the project operational manual). Selected municipalities could apply for a set (or subset) of OP HRD-eligible social and childcare services tailored to their specific needs, including social service infrastructure investments (if justified, but not to exceed 50 percent of the grant). The SIF was responsible for receiving subproject proposals and preparing applications for submission to an evaluation committee. The managing authority would formally approve the subprojects in line with evaluation committee recommendations. Financing agreements between MLSP and municipalities would be signed to provide the financial and technical support for municipalities, which would be used to contract out the strengthening and delivery of services. Service provider contracts were to include performance targets, and payment was to be based on per capita allocations.

29. **Revised implementation arrangements.** The SIF was closed in March 2010 as part of the government of Bulgaria’s effort to cut overhead and administration because of its tight fiscal constraints. A 2010 restructuring of the SIP transferred implementation responsibilities to the Social Inclusion Directorate (SID) of the MLSP. World Bank supervision reporting notes that in May 2010, key members of the SIF staff responsible for project management were already being transferred to the SID. Another slight adjustment to implementation arrangements in May 2011 allowed advance payments to service providers for services only.

3. Implementation

Key Dates

30. The SIP was approved on November 4, 2008 and became effective on April 16, 2009. After long delays in start-up and implementation, the midterm review took place in December 2012. The project was restructured five times (appendix D, table D.2.) and closed on December 31, 2015, which is 26 months after the twice-extended original closing date. Even with this extension, only the first (pilot) phase of the national program rollout was implemented. The remaining two phases articulated in the design document (World Bank 2008a) (control groups opting into the program in 2012; and the full transition to a national-level program in 2014) have not yet happened.

Planned versus Actual Costs, Financing, and Disbursements

31. **Costs.** The project’s total cost was €25.99 million. This is 65 percent of the original estimate of 40 million (World Bank 2008a), but that original estimate was made on the basis of World Bank financing only and did not include the counterpart expected of the government of Bulgaria and pilot municipalities.¹⁷ The total project cost is 19 percent of the original program cost estimate of €136.73 million (World Bank 2008a), which was calculated on the basis of the three phases of program testing and rollout (para. 21). In the end, only the first (pilot) phase was implemented under the SIP.¹⁸ Appendix C, tables C.1 and C.2 provide details. Of the total grant funding provided to municipalities, 53 percent was spent on construction and rehabilitation, exceeding the project’s 50 percent cap (para. 27), with great variance across the 66 municipalities. About half of the municipalities (32) exceeded the cap, ranging from 51 percent to 83 percent of grants received (appendix D, table D.12).

32. **Financing and disbursements.** Actual financing was lower than planned (appendix C, tables C.3, C.4, C.5). The loan disbursed €23.58 million: 59 percent of the original loan (€40 million) and 75 percent of the reduced loan (€31.39 million) after €8.61 million were canceled in 2013. An amount of €7.81 million was undisbursed at the project’s end. Actual disbursements against the category “grants to municipalities” amounted to €22.81 million, or 64 percent of the original allocation. Disbursements against the category “consulting, training, and audit” amounted to €0.67 million, or

15 percent of the original allocation. These shortfalls are due to implementation delays and the government-imposed expenditure caps, which delayed and compressed the service delivery time frame and precipitated the elimination of the impact evaluation and other consulting services. Municipalities provided €2.15 million, and the government provided €0.25 million in counterpart financing. These low amounts (compared with estimates) are attributable to the implementation of only one of the anticipated three program phases and to project restructuring in 2013, which relieved municipalities and the government of any further counterpart financing under the project.

Project Restructuring

33. Table D.2 in appendix D summarizes the timing and nature of the five project restructurings. The July 2010 restructuring reassigned responsibility for project management and oversight to the SID in MLSP, replacing the SIF, which was closed in March 2010 (para. 28). The May 2011 restructuring decreased the time frame of municipal commitments to retain services supported under the project,¹⁹ and introduced small changes to subproject disbursements that allowed advance payments to service providers. The December 2012 restructuring reallocated loan proceeds to respond to high demand for grants to municipalities and revised the results framework.²⁰ The government's request to extend the closing date was not granted immediately, but rather conditioned on adequate provision for sufficient project expenditure under the 2013 State Budget Act. The September 2013 restructuring reduced the scope of activities,²¹ canceled part of the loan (€8.6 million), finalized the results framework agreed under the December 2012 restructuring (with slight revisions), and extended the closing date by 23 months. It is worth noting that even as late as the September 2013 restructuring, the revised allocation for municipality grants was 86 percent of the original allocation, indicating a substantial coverage of initial subprojects, albeit for a shorter time. In contrast, the revised allocation for evaluation and capacity building was slashed to 20 percent of the initial allocation. The September 2015 restructuring extended the closing date by an additional three months (to December 31, 2015) to allow for 12 months of service delivery and for some small municipalities to launch their services and fully use the project funds.

Factors Affecting Implementation

34. **Factors outside of the government's control.** The global economic crisis and sociopolitical unrest created a challenging backdrop for project implementation, particularly during 2009–15, in the aftermath of the 2008 global economic crisis. During this time, poverty increased, annual real GDP growth slowed to less than 1 percent, 400,000 (mostly unskilled) Bulgarians lost their jobs, the unemployment rate more than doubled (mostly affecting those with little or no education), fiscal pressures increased, and government debt rose. The period 2013–14 saw social unrest and rapid political change with five governments in 20 months. Political stability returned in 2014–15 with

the formation of a new coalition government. Changes to Bulgaria's demographic profile (para. 1) are also significant.

35. **Factors within the government's control.** Although a change in implementation arrangements and the imposition of severe limits on project expenditure slowed start-up and implementation, new government policies increased the need—and the demand for—project services. The transfer of project management responsibility (and relevant staff) from the SIF to the SID caused implementation delays. The government's severe expenditure limits on the project (and two other World Bank–financed projects), precipitated by the global economic crisis, curtailed the range and time frame of activities. Implementation only started in November 2011 (more than 2.5 years after effectiveness). Despite efforts to expedite implementation to make up for delays, the project stalled in 2012 because the annual expenditure limit (slashed to half of planned spending for that year) was reached at midyear, and the Ministry of Finance rejected requests for its increase. Expenditure limits set at zero for 2013 and 2015 further undermined implementation. These limits were set without regard to implementation schedules, procurement and disbursement plans, and contracts. In 2010, the government introduced policy decisions (among others, see para. 80), which likely increased the need and demand for SIP services: mandatory preschool, and the deinstitutionalization of orphaned, marginalized, disabled, and special needs children.

36. Severe expenditure limits imposed by the government precipitated the decision in 2013 to drop the impact evaluation and other capacity building activities that were not considered to be directly supportive of the PDO and to prioritize the establishment and delivery of the SIP services. Failure to convene, on a sufficiently regular basis, the SIP monitoring committee, whose mandate was to catalyze authorities of relevant sectors for cross-sectoral oversight, coordination, and learning, undermined the learning agenda.

37. **Factors within the implementing agency's control.** SID staff was diligent in carrying out project management and supporting and guiding municipalities, which took on their implementation responsibilities through a learning-by-doing approach. The SID staff's proactivity and considerable time spent in the field ensured good coordination, supervision, and outputs regarding civil works and the procurement of equipment and materials. Municipalities' difficulties in recruiting the 1,407 service delivery staff hired under the project (and in managing their turnover, especially among mediators and social workers) were due to stringent eligibility criteria, the part-time nature of the positions, and low pay, given the responsibilities, challenges, and stressful nature of the jobs, especially for those who did not speak the languages or did not have the trust of target groups. The underuse of NGO and CBO capacity for establishing richer, more accurate baselines, identifying and quantifying target groups, and service delivery and outreach activities could have been mitigated by SID and municipalities. Although the focus on implementation was strong, the focus on results and learning fell short of needs for the project's learning agenda.

SAFEGUARDS COMPLIANCE

38. The project was categorized as financial intermediary with subprojects of potential category C and B. Local environmental requirements were considered adequate. Guidelines for subprojects' environmental prescreening and analysis were included in the project operations manual. Compliance was rated satisfactory throughout implementation. During the midterm review, independent consultants checked the quality of works and compliance with local construction and safety standards in a sample of subprojects. Minor issues with environmental prescreening were identified, addressed promptly, and resolved.

FINANCIAL MANAGEMENT AND PROCUREMENT

39. Financial management arrangements were satisfactory, and adequate controls and procedures were in place throughout project implementation. All interim financial reports and annual project audits were received on time with clean opinions and no internal control issues. This was confirmed at the midterm review, in the Implementation Completion and Results Report, and with the World Bank's experts.

40. Adequate procurement processes were established and followed. Centralized procurement for equipment proved to be efficient. Procurement-related delays were due to the budget ceiling imposed at the government level.

4. Achievement of Objective

41. The PDO of the SIP was "to promote social inclusion through increasing the school readiness of children below the age of seven, targeting low-income and marginalized families, including children with a disability and other special needs" (World Bank 2008b).

42. PDO achievement is rated **substantial**.

43. This chapter examines components and links of the SIP results chain, including inputs and outputs contributing to intermediate outcomes (service delivery to target children and their families, and enhanced capacity for program management, implementation, continual learning, and improvement), and their contributions to the achievement of the PDO (appendix D, figure D.1). Project attribution and the counterfactual are also explored.

44. **Service delivery inputs.** The project financed critical inputs supporting the establishment and launch of ECD services in pilot municipalities. It financed construction and rehabilitation works to house the integrated social services for target populations and to provide additional places in crèches and kindergartens. It also financed furniture, equipment, training, and guidelines for the services offered. Support for child disabilities services included 44 buses for transporting disabled children (also used for mobile

services); specialized sensory therapy, medical, and sports equipment; 36 trainings for medical specialists working in maternity wards (for more sensitive dialogue with parents about disabilities and options for home care); 46 trainings for disability specialist teams; and the development of methodological guidelines. Support for services to develop parenting skills and deliver family counseling and support included 66 trainings for specialist teams and the development of methodological guidelines. Municipalities also contracted 1,409 specialists.²²

45. **Outputs of kindergarten and preschool investments.** A total of 4,420 children ages 3–7 were newly enrolled in kindergarten and preschool education groups, surpassing the target of 3,000. However, it is not clear how many of them came from the low-income, marginalized, disabled groups targeted under the project.²³ Not all enrollees completed two full years (or even one) in these facilities by the project’s end.²⁴ The project supported the creation of 2,357 new places in kindergartens and preschools, exceeding the target of 1,600. An estimated, 1,100 kindergarten and crèche staff were trained, exceeding the target of 700.²⁵

46. The project encouraged municipalities to reduce kindergarten fees to incentivize poor, marginalized families to send their children to kindergarten. Municipalities set their own policies in this regard. The five municipalities visited offer a range of reduced fees to families meeting one or several criteria.²⁶ Some staff met noted that neighboring municipalities have eliminated kindergarten fees. Fee reductions were already in place before the project. There is no evidence of further reductions precipitated by the project. On the other hand, municipalities did support the enrollment of vulnerable children in kindergarten under SIP through their application of fee reductions. Drawing on findings of an evaluation of the Springboard for School Readiness project (World Bank 2017b), complete elimination of fees would have provided greater access to low-income parents. Project-supported social workers and mediators also promoted attendance in kindergarten. Data and trends on their attendance and dropout rates were not systematically collected, analyzed, and reported.

47. The project supported summer schools for children in need of remedial support, including some who had also attended preschool or kindergarten, to help them prepare for primary school. These one-month programs focused on Bulgarian language skills, basic preschool math and phonics, self-discipline, and good classroom habits. Because primary school is compulsory, all children who register must be admitted regardless of whether they have the minimum skills. Students between grades 1 and 4 are promoted to the next grade whether or not they demonstrate mastery of curricula and skills.

48. **Outputs of integrated social services.** The project created 113 new community centers for delivering social services, exceeding the target of 68. The time frame for their delivery was compressed into six to eight months because of implementation delays (paras. 33–36). After a half-year gap between the closing of the SIP and the start of EU financing, service delivery was extended by an additional two years (appendix D,

table D.9). The actual coverage and targeting of these services has not been documented fully.

49. By the project's end, 4,311 children benefited from early intervention of disability services, more than twice the original target of 2,000 and almost three times the reduced target of 1,500, set in 2012 and 2013, respectively. This is a substantial achievement given that services were only launched well into the project's last year (appendix D, table D.9). In the five municipalities visited, there appears to be strong demand for these services (direct observation, exchanges with parents, and parent satisfaction surveys), and parents expressed deep appreciation for them. Beyond being free of charge, parents note that the services were of higher quality than services offered elsewhere that charge fees.²⁷ Some parents expressed the desire for more frequent sessions and the extension of coverage to children older than seven. Many learned of the services through physicians' referrals, word-of-mouth, and their proximity to the center. Mobile services to identify disabilities and encourage parents to access services report reluctance among ethnic minorities for their uptake. Bulgaria's deinstitutionalization reform and the reinsertion of disabled and special needs children into communities also likely fueled demand.²⁸ Managers of group homes for deinstitutionalized children in Pazardzhik Municipality expressed their appreciation of the services, on which they rely heavily. Direct observation of the services and exchanges with parents point to improvements in the functionality of disabled children and in the quality of life of their caregivers and families. Some parents met during field visits stated that their children learned to walk, talk, socialize, and/or become more confident, self-sufficient, and engaged because of these services.²⁹ Individual case files are kept for each beneficiary. Complementing medical support and therapies, individual pedagogical support is provided to help prepare them to attend kindergartens and preschools and, eventually, primary schools.

50. By the end of 2015, 471 children with disabilities or special education needs were newly enrolled in kindergartens and preschool education groups, more than triple the target of 150. Although largely accomplished prior to the launch of disability services under the project, this achievement is the result of outreach efforts to enroll these children into mainstream kindergarten and preschool education groups created with SIP support.³⁰ Bulgaria's campaign to reduce children's institutionalization likely precipitated these enrollments.

51. By the project's end, 39,993 children ages 0–7 years benefited from health checkups, exceeding the target of 10,000, but it is not clear what portion of these were from the target group. This service was designed to monitor and promote the health and well-being of very young children who may not otherwise be exposed to health screening and prevention. The age 0–3 group service includes screening for nutritional status, psychomotor development, and dental health; referrals to specialists when warranted;³¹ disease prevention; and health education, promotion, and vaccinations. The age 4–7 group service consists of semiannual health and dental checkups in kindergartens and preschools, covering all students. Because this service was launched very late in the project (2014), the majority of beneficiaries (20,693) were reached only during the last

six months of the project (according to MLSP project data). There is no breakdown of beneficiaries by age group or, within the age 0–3 group, by those who were reached through mobile services versus facility-based services. There are no breakdowns of beneficiaries by income or ethnic group or any calculation of the coverage of target groups. Official UNICEF data show high child vaccination coverage in 2012 – prior to government’s 2013 legal amendment introducing the condition for complete immunizations for the payment of child allowances, and prior to establishment and delivery of these SIP-supported health checkups. There are no trends or breakdowns available to document any impact on immunization rates of vulnerable children.

52. A total of 12,964 parents of children ages 0–3 received parenting skills counseling (exceeding the target of 10,000), of which two-thirds (8,482) were reached during the project’s last six months. The SIP supported interventions to develop parenting skills of parents-to-be and parents of children ages 0–3, targeting low-income and marginalized groups. Parents were informed of their duties through outreach or at group sessions held in various local venues. They received help accessing health and social services to support the care and nurturing of their children, and were given opportunities to interact recreationally with their children to strengthen bonds and nurturing. Family counseling addressed social issues encountered by vulnerable families that compromise family well-being. Group and individual counseling on reproductive health and family planning and group work with neglectful parents were delivered at community venues and through outreach. A team of social workers, psychologists, lawyers, and others supported a range of social and legal issues. As with other services, there are no data on coverage of the target groups or how many were reached through mobile services versus facility-based services.

53. **Service quality, equity, and sustainability.** The project included provisions for service quality, a critical dimension to ensure that new services translate into school readiness outcomes. Contracting specialized service providers supported a competitive process for fulfilling technical requirements and qualifications for these jobs. Recruits received additional training tailored to the project’s pilot approach. They were provided with methodological guidelines developed by technical experts and other materials and technical support to guide good practices. The project provided quality facilities and equipment for service delivery, which have been very well maintained. Field visits revealed that most service providers had a strong dedication to service quality.

54. However, regular inspection of these services has not yet been fully implemented or institutionalized. In principle, inspectorates of various line ministries are responsible for ensuring quality. IEG visits to kindergartens and primary schools revealed that the Regional Education Inspectorates’ visits to kindergartens, preschools, and primary schools do not appear to be regular, though kindergartens in Haskovo and Plovdiv reported visits and helpful feedback. The education sector is currently reforming its inspection function and so this situation might improve. According to UNICEF, the EU quality framework on early education will be developed later in 2018, and the Ministry of Education and Science is exploring the development of an instrument and standards for

quality assessment of preschools. The Child Protection and Social Protection Agencies, both within MLSP, are noted by MLSP to be the appropriate agencies to undertake inspections of child and social support services delivered under SIP. They have not yet assumed this responsibility because activities are still considered to be of a pilot nature. There is scope for the Ministry of Health Inspectorate to oversee technical standards of the health services provided under SIP. These considerations are important for program fine-tuning before its nationwide rollout.

55. The extent to which the SIP-supported services were delivered equitably (reaching the intended target groups) is not clear. Although targets set for the number of beneficiaries of the various services were exceeded (paras. 44–51), there is no breakdown of beneficiaries to indicate what portion of them was from the groups targeted under the project. There are no indications of how many were low-income and/or marginalized except for the reporting on the distinct group of disabled and special needs children under age seven, who were enrolled in kindergarten and preschool groups and who accessed disability services. Mediators in all five municipalities shared the difficulties of reaching the low-income and marginalized target groups, a phenomenon of the lack of trust of these populations,³² language barriers, cultural barriers,³³ and their changing size and composition caused by migration.

56. Field visits revealed a mixed picture of the equity and reach of services. In addition to the creation of additional places in kindergarten and preschool, equitable access was to be addressed through fee reductions, mobile services, and transportation. These measures are likely to have enhanced equitable access. Fee reductions for vulnerable children enrolled in kindergarten and preschool groups were applied. The frequency and reach of mobile services is not known. This is an important dimension of access because target groups are not easily reached, immediately open to initial (and follow-up) visits or likely to seek services at the community center. Transportation of beneficiaries to community centers is limited. In rare cases, children in poor areas are bused to kindergartens in better-off, more mixed neighborhoods. Access to social services under the SIP is further limited because most providers work only part-time, reducing hours of operation by about half in most centers.³⁴ Moreover, the period of service delivery under the SIP was reduced to less than a year because of implementation delays. An end-of-project survey on the vulnerable populations' knowledge of these services and their access to these services would have provided useful insights on real access and how it could improve.³⁵

57. The project secured the short-term sustainability of social inclusion services through financing under OP HRD, albeit with gaps between the end of World Bank financing and the start of OP HRD financing. OP HRD financing added two additional years of service delivery to the six- to eight-month period delivered under the SIP (appendix D, table D.9).

58. **Capacity building inputs and outputs.** The project financed consulting contracts and training to build central- and municipal-level capacity to design and implement the

school readiness program in 66 pilot municipalities. Central-level capacity building included consultants for independent evaluation of municipal subproject proposals, procurement, ECD and disabilities, a SIP management information system, training, supervision of construction and rehabilitation, baseline data collection, and external auditing. Municipality-level capacity building supported training on subproject proposal preparation, M&E and SIP reporting (for 144 municipal employees) and on selection of consultants according to Bank procurement guidelines. These contracts and trainings culminated in the approval and implementation of 66 municipality subprojects, the design and fine-tuning of ECD and disabilities interventions, and the satisfactory oversight and implementation of procurement, construction, and financial management. The project invested in technical work to secure EU funding for SIP activities under the 2014–20 HRD OP.³⁶

59. **Capacity building intermediate outcomes.** The project did not culminate in the systematic learning anticipated in its pilot design, which was expected to contribute to a review and refinement of program design and effectiveness before its anticipated nationwide rollout by 2014. Only the first of three planned phases of program rollout was implemented (para. 29). The impact evaluation was eliminated in 2013 for several reasons, among which: the decision to prioritize the use of limited project resources for the establishment and delivery of SIP services; and the severely curtailed time frame for service delivery (less than one year), which would have been inadequate for an impact evaluation as envisaged in the design document (World Bank 2008a). The World Bank’s team highlighted other, methodological issues, which also factored into this decision. The competitive process for selecting municipalities introduced self-selection bias and flawed the originally planned randomized controlled design. The huge variation of services chosen by municipalities precluded meaningful grouping of municipalities providing the same types of interventions, especially when time frames were ultimately curtailed. Project staffing did not include an M&E expert, who could have guided, overseen and strengthened monitoring and learning, even in the absence of an impact evaluation. The SIP monitoring committee did not meet regularly to carry out its function of overseeing the pilot and fostering learning from its results.

60. The project was successful in providing municipalities with the capacity to access and absorb EU funding under HRD OP 2014–20. Sixty-four of the original 66 pilot municipalities benefited from such funding, making it possible to continue the delivery of essential services for about two years after the SIP closed at the end of 2015.³⁷ Municipalities gained capacity in cross-sectoral work. Field visits and other discussions and reviews revealed that the integrated service delivery model at the municipality level has supported and nurtured improved collaboration and consultation across sectors and within the community centers, and among the service providers, municipality staff, and others.³⁸

61. However, evidence of municipalities’ collaboration with NGOs, community organizations, and others with intimate knowledge of and the ability to reach target populations is weak. Some municipalities (Plovdiv and Haskovo) reached out to the

Evangelical Church, which is well established and influential in some target communities. Mediators (mostly female) noted difficulties in engaging with Muslim populations because of language and cultural barriers, including gender. Most notable is the failure to harness existing capacity and potential of NGOs to contribute in areas not well covered by municipal staff or contractors. Unexploited capacity could have been harnessed for more detailed information on target populations and their risks, needs, and priorities; better access to those populations; stronger outreach; more trust; and improved targets and strategies for achieving results. This finding is based on field visits, a review of service contracts, and patterns of responses from a wide range of people, agencies and CBOs interviewed.

62. **PDO achievement.** Most service delivery output targets were exceeded—a laudable feat against a backdrop of significantly delayed and compressed service delivery time frames. However, service outputs are not a proxy for the outcomes embedded in the PDO. Moreover, intermediate outcomes crucial to attaining the PDO, such as improved parenting practices, early development of cognitive skills, and the health, nutrition, and well-being of target children have not been systematically tracked as planned initially.

63. **School Readiness.** School readiness is a function of preschool education and a range of other ECD services provided under the project, including child health and nutrition services and promotion; parenting skills development and counseling; and early intervention of disabilities and special needs. The only available measure of school readiness is a comparison of two sets of school readiness tests (measuring preschool academic skills, such as reading, writing, language and communication, and early math),³⁹ the baseline conducted in 2012 and the endline in June 2015. The baseline was established as a part of a broader, national baseline study, covering 98 municipalities, that was to be used to evaluate the project impact. The endline test was administered to the 897 vulnerable children aged 6/7 years at the time of test administration, who were enrolled for one to two years in mainstream SIP kindergarten or preschool groups, most of whom also benefited from SIP remedial summer schools. After elimination of 140 tests for noncompliance with testing procedures, 757 endline tests were considered to be viable. From these 757 tests a smaller subsample of 250 was selected to establish matched samples to facilitate comparison of test results of 2012 and 2015 cohorts with comparable parameters. According to this analysis, passing rates of school readiness tests taken by vulnerable children in these small, matched samples increased from 49 percent in 2012 to 80 percent in 2015 after one to two years of exposure to SIP kindergartens or preschool groups and (in many cases) summer school, too (Market LINKS 2015). Within this smaller sample, children from larger municipalities (greater than 35,000 population) had higher passing rates (84 percent) than those from smaller ones (74 percent). Statistically significant increases in scores were registered for: use of compound and complex sentences; word meaning comprehension; ability to distinguish past present and future tenses; word and sentence memorization; logical and associative thinking; and Bulgarian language ability. The test did not measure health and physical well-being or social and emotional development, two other aspects of child development.

64. Three years have passed since this end-of-project measure of school readiness. Services developed under the SIP continue to be delivered with the support of the EU. The establishment of three additional school readiness data points (that is, the testing of additional beneficiaries in June 2016, June 2017 and June 2018) could have revealed interesting trends and perspectives on school readiness program effectiveness, especially for younger children with earlier and longer exposure to crèches and kindergarten/preschool groups and for children exposed to the fuller range of ECD services (parent counseling, health checks, and so on.), which were not available to the children tested in 2015. This is a missed opportunity for learning and fine-tuning, which was at the heart of the pilot design, and still relevant today.

65. **Targeting Effectiveness.** Evidence on the actual targeting of activities and services is fragmented, incomplete and inadequate for assessing targeting effectiveness. As detailed in appendix D, tables D.11a-e, multiple criteria for defining and reaching the project's target groups (low-income, marginalized families, including disabled/special needs children) were itemized (and also captured in the project operations manual), notably: parents of children who were from marginalized ethnic groups, unemployed, receiving social assistance, uninsured, abroad, neglectful, having three or more children, single, very young, uneducated, living in poor housing conditions; and low-income, marginalized children of above-cited parents, and/or who were disabled, or suffering from delayed development, not benefiting from child care or preschool, in poor health, without access to quality health care. The more criteria these families met, the greater their needs and higher their priority. However, overreliance on official databases leaves out many low-income, marginalized groups, including those living in illegal housing with no official address, those with no identification cards,⁴⁰ and others not captured in official registries for multiple reasons.

66. On the one hand, the reporting of disabled and special needs beneficiaries is straightforward, because of the clear definition of this target subgroup and the specialized nature of the services provided to them: 4,311 children benefited from early intervention of disability services; and 471 children with disabilities and/or special education needs were newly enrolled in kindergartens and preschool education groups. On the other hand, there is ambiguity in the limited available data on the extent to which members of the other target subgroup – low-income and marginalized parents and their children – were actually reached.

67. This is especially so for kindergarten and preschool group enrolments. The original design (World Bank 2008a) included a specific indicator to track enrollment rates of low-income and marginalized children (and a separate indicator to track enrollment rates of children with a disability). The restructuring eliminated the “low-income and marginalized” qualifiers on the first of these indicators to include all children. The rationale for this was to enable low-income, marginalized children to attend ethnically mixed schools to enable enhanced learning opportunities and social integration. Municipality contracts included a target that at least 30 percent of new enrollees should be target children. This was to ensure that SIP kindergarten and

preschools would maintain a mixed/mainstream nature, which was expected to provide an optimal learning environment for all students.⁴¹ (Construction of kindergartens took place in urban areas, where there was a shortage of kindergarten places.) When initial enrollments (2013/2014) were found to have very low coverage of marginalized (especially Roma) children within that 30 percent, World Bank supervision reporting noted this issue and advocated for its close follow-up and monitoring. The World Bank's team and MLSP state that all municipalities met the 30 percent target, but IEG was unable to obtain an aggregation of the relevant data for independent verification.

68. Of the 4,420 children ages 3–7 newly enrolled in SIP kindergarten and preschool education groups, there is no indication of how many of them came from the low-income, marginalized groups targeted under the project. All of the 897 children who took the school readiness test in 2015 are identified as vulnerable. Their anonymous test results, provided by MLSP to the researchers, did not include any identifiers (aligned with above-cited targeting criteria) confirming that they belong to the project's target group or allowing any analysis of which subgroup or subgroups they represent within the target population. This could have been accomplished, while still respecting the anonymity of beneficiaries. It is not clear who identified these children as vulnerable and what process and criteria were used.⁴² This is especially important to confirm, given that the majority of new enrollees in kindergarten and preschool under the project were mainstream ethnic Bulgarians (not belonging to the target group). Moreover, these 897 children (identified as all the vulnerable children age 6/7 years in June 2015 who benefited from one or more years of kindergarten, preschool groups under SIP and/or summer school) came from 39 specific municipalities. Even after exchanges with the World Bank's team, it is not clear why six additional municipalities which opened 262 new kindergarten places (net of new crèche places) under the SIP, would have produced no vulnerable children of 6/7 years for testing in 2015.⁴³

69. There is no breakdown of beneficiaries of other ECD services to indicate what portion of them were from low-income and marginalized target groups. This applies especially to the 39,993 children ages 0–7 who benefited from health checkups, of which some (the age 4–7 years group) were delivered in kindergartens and preschools, covering all students. It is assumed that most of the 12,964 parents of children ages 0–3 years, who received parenting skills counseling, are largely drawn from target groups. But a tally of which and how many targeting criteria these beneficiaries met would have provided insight and assurance of the reach and coverage of the program.

70. **Social Inclusion.** There were no measures of social inclusion outcomes in the project's results framework and no systematic tracking of social inclusion outcomes during implementation, or postproject. The school readiness program (and the SIP, which supported its pilot) defines short-term social inclusion outcomes in terms of more equal starting conditions of children entering primary school, and more equal performance in the early years of primary school (World Bank 2008a). Field visits provided a glimpse of how a few selected beneficiaries are now faring in primary school, but with two important caveats: These children were not randomly selected and might not be

representative of the beneficiaries, and no firm findings or conclusions can be drawn without more systematic tracking of these children's performance and conditions compared with their better-off counterparts. Brief exchanges with beneficiary children and their teachers (and their parents, in some cases) encountered during primary school visits provide insights, nevertheless. In Byala Slatina, for example, an exchange with a beneficiary Roma girl in first grade, her father, and her teacher revealed her mastery of Bulgarian language, her love of school, and her early reading and writing skills. However, she had advantages (which most Roma do not) of living in a mixed neighborhood, with the consequent fluency in Bulgarian, and having two parents with secondary education (also fluent in Bulgarian) who are employed, literate, and highly supportive of her education. This raises questions about targeting and equity.⁴⁴

71. In Pazardzhik, the third-grade teacher of two beneficiaries of SIP preschool (a Roma boy and girl) pointed to some advantages of their training, but there were caveats about the sustainability of these benefits.⁴⁵ In Plovdiv, the evaluation team met twin girls in the second grade whose teacher also noted how their preschool training made a difference.⁴⁶ In Haskovo, a primary school teacher and special education expert shared their success in mainstreaming disabled and special needs children in the classroom, building on the work and progress initiated under the early intervention of disabilities service. Teachers attributed these individual children's good performance to their exposure to kindergarten or preschool training under the project, but the teachers, principals, and school administrators also pointed to continuing challenges that poor, marginalized children face that affect their performance in school. These include poverty, poor health, inadequate Bulgarian language ability, absentee parents (who migrate for work), lack of a safe and secure environment at home, lack of academic stimulation and encouragement at home, violence, and dropouts and absenteeism, among others. Some of these conditions were slated to be addressed under the integrated social services delivered under the project (health checkups, parental skills development, and counseling), and others are beyond the scope of these services.

72. **Attribution.** The positive results of the school readiness tests are directly attributable to SIP's support of the creation of new kindergarten and preschool group places and outreach activities to promote the enrollment of vulnerable children. They are not attributable to the other ECD services supported under the SIP, which were only launched at the time of the endline school readiness testing. This project was synergistic with government policy decisions and actions (itemized under "Risk to Development Outcomes") which encouraged and supported compulsory kindergarten enrollment, a reduction in kindergarten fees, child allowance conditionality linked to school attendance and immunization and the deinstitutionalization of children. These policies and decisions are likely to have boosted demand for newly created kindergarten and preschool places, disability and other social services and their uptake. In addition to the delivery of integrated social services supported under the SIP, the work of Bulgaria's health sector (especially reproductive health and material and child health and nutrition), education sector (especially education quality and learning outcomes from preschool to the

university level), and social assistance and child protection agencies is also critical for enhancing school readiness outcomes. IEG exchanges with local-level NGOs supporting ECD activities in municipalities supported under the SIP established that they were working with the same target populations. Municipality authorities and service delivery staff also acknowledged complementary ECD activities and family support going on in the same communities they serve thanks to church groups, NGO projects, other charitable organizations and efforts. Beneficiaries that may have been reached by SIP outreach activity (for example, for school enrollment promotion) are likely to have also received similar messages from other sources. EU financing of SIP services under its OP HRD, from mid-2016 to 2018 must also be acknowledged, as does the work of UNICEF and the Swiss Agency for Development and Cooperation, both working on ECD in some of the same municipalities as the SIP.⁴⁷ Although it is beyond the mandate of this study to undertake an extensive mapping of these activities in the 66 SIP municipalities, such an exercise could be supportive of efforts to improve program effectiveness, efficiency and scale-up.

73. **Counterfactual.** Feedback on the counterfactual highlights the project's contributions to an innovative model of social service delivery and to substantive policy dialogue on ECD. Systematic questioning of actors and stakeholders reveals that without the SIP, the integrated social services model might not have been launched, and the EU OP HRD funding of these services would not have been as easily accessed and absorbed. Respondents also noted this project's contributions to the ECD dialogue and policy deliberations that are ongoing in the country. However, they also note (and IEG's findings corroborate) that the World Bank's rigorous and high-quality analytic and technical advisory work (para 10) also stimulated dialogue and deliberations and made them even more prominent, culminating in the provision of relevant evidence, publications, and conferences.

5. Efficiency

74. Efficiency is rated **modest**.

75. A strong, growing body of evidence shows that investing in ECD is highly cost-effective. To reach full potential, children need to be in good health, well nourished, stimulated in their earliest years, safe and secure, and exposed to frequent and positive social interaction with adults and play. Low birthweight, reduced breastfeeding, stunting (low height for age), and iron and iodine deficiency undermine the development of cognitive and motor skills. High-quality ECD programs can improve school readiness, improve success in primary school, and enhance health. They also support medium- and long-term outcomes, including enhanced performance in secondary school and higher-level education; enhanced employment prospects, income, and labor productivity in adulthood; lower dependency on social protection systems in adulthood; and a break in the cycle of intergenerational poverty.

76. Investments in ECD can be highly cost-effective, but significant shortcomings to efficiency are noted. Long delays in start-up and implementation, precipitated by a change in implementing agency and severe spending limits, curtailed the time frame for service delivery and the amount of the loan ultimately used (59 percent of the original amount). This, in turn, undermines cost efficiency. Overreliance on official registries to quantify the target groups and on mobile units and mediators to reach them was inefficient. Better knowledge and reach of target populations might have culminated in greater impact. Failure of the monitoring committee to convene, as envisioned in the project design, was inefficient, undermining its potential to oversee implementation, foster cross-sectoral coordination and collaboration in line with comparative advantages of various sectors and agencies (public, nongovernmental, and private sectors), and ensure the full exploitation of the learning agenda embedded in the pilot design. Consequently, the development effectiveness of the school readiness program has not been documented or refined, as intended originally.

77. The economic analyses undertaken in the PAD and the Implementation Completion and Results Report might have been too ambitious. They assume that those benefiting from ECD will reap benefits in primary school, secondary school, and thereafter (improved access to and success in higher education, and higher levels of employment, productivity, and income). However, this evaluation's findings show that so much of this medium- and long-term success depends on what happens after age seven, regardless of whether they benefit from the SIP. Low-income, marginalized project beneficiaries might have acquired better skills and behaviors to start primary school (this needs to be documented better), but their success in primary school and thereafter depends heavily on factors beyond the project's control. Many of the beneficiaries end up attending segregated primary schools where the quality of education is low; many still experience instability associated with their parents' migration patterns to find employment (temporary and permanent)—sometimes traveling with their parents and disrupting their school attendance, sometimes staying with their grandparents or other caregivers and suffering from depression. Additionally, many lose their rudimentary Bulgarian language skills during summer vacations and other absences, especially when their parents do not speak Bulgarian. Discrimination at school and in the job market is still an issue.⁴⁸

6. Ratings

Outcome

78. The project's outcome rating is **moderately satisfactory**. The project's objective is **substantially relevant** overall. It is highly relevant to current country conditions and to Bulgaria's strategic priorities as captured in national strategic documents, and to EU strategies to which Bulgaria, as an EU member, is accountable. It is also highly relevant to the World Bank's twin goals of ending poverty and building shared prosperity, selected sector strategies (particularly ECD, health, and social protection), and its current

country partnership strategy for Bulgaria. However, the framing of the objectives was very ambitious for an experimental four-year project. The design is **modest**. Aside from some good design elements (innovative service delivery, services tailored to local needs and context, and a pilot design to support learning), there were shortcomings. The results chains supporting behavior change, learning, and capacity building were not well articulated. Project efficacy is **substantial** overall. Many service delivery output targets were exceeded, but those outputs are not a proxy for the outcomes embedded in the PDO. Eighty percent of a matched group of children 6–7 years of age, identified as vulnerable, who were exposed to SIP kindergartens and preschool groups for at least one year, passed school readiness tests, compared with a 49 percent pass rate in a 2012 matched baseline group. However, evidence is lacking to assess the efficacy of the targeting of low-income, marginalized children and their parents (except for disabled children), as was envisaged under the project. School readiness and social inclusion outcomes have not been tracked, post-SIP, under EU financing. Project efficiency is **modest**. Investments in ECD can be highly cost-effective, but important shortcomings to efficiency are noted. These include implementing efficiency (significant delays in project implementation that curtailed the time frame for service delivery), the failure to support the learning agenda for improved program effectiveness, and the failure to harness the potential of NGOs and CBOs and other local actors, which could have provided better data, insight, and reach to communities.

Risk to Development Outcome

79. The risk to development outcome is **moderate**.

80. Technical risk is **substantial**. The quality of services needs to be assured through independent inspections undertaken by inspectorates of the various relevant sectors, including preschool and kindergarten, and health, social and child protection services. Difficulties in attracting and retaining service providers also pose a threat to technical sustainability, including issues of low pay for these professionals, their part-time status, the difficult and stressful nature of the work, the low supply of qualified professionals compared with demand (especially in more remote areas), and considering plans for nationwide rollout. Moreover, a truncated service delivery time frame, flawed M&E and inadequate attention to learning, results and targeting culminate in a paucity of evidence on the school readiness program's effectiveness and on social inclusion. The school readiness test was administered once to 897 beneficiaries in June 2015, but there is no evidence that it has been administered to beneficiaries in the ensuing years of service delivery (younger ones with project support and those with EU support). Financial risk is **moderate**. With SIP support, municipalities succeeded in attracting and absorbing EU financing for up to three years after the closing of the SIP (albeit with some financing gaps). Government assurance of continued financing of these services is provided in two Council of Ministers decisions which commit to financial support of SIP services through the state budget.⁴⁹ The exact amount and affordability of this commitment remain to be determined on the basis of actual costs of existing services and cost estimates of

extending coverage nationwide (both within the 66 pilot municipalities and beyond them to the remaining 199 municipalities). Municipalities visited expressed their willingness to contribute, but noted their limited financial capacity.

81. Social risk is **moderate**. Residents in the municipalities support and appreciate the early intervention of disability services, which fill an important void and respond to a growing demand. Beneficiaries' parents are highly invested in these services, which they say have changed the quality of their lives and their children's. They also provide critically needed support to deinstitutionalized children who are reinserted into communities (many in group homes), but still need support. Other services targeted to the nondisabled, low-income, marginalized populations—especially parental skills development, counseling, and support—are also appreciated, as some beneficiaries reported to IEG. However, they appear to be less known and less used than disability services. Political risk is **moderate**. The coalition government has achieved a delicate stability. The risk of waning government ownership and commitment is also **moderate**. Social inclusion and school readiness are prominent in national policies and strategies. Government has also initiated a number of decisions and actions which encourage and support ECD efforts (compulsory kindergarten for children aged 4–6 years, child allowance conditionality encouraging school attendance and full immunization, reduced kindergarten fees and efforts to enroll and retain out-of-school children). These initiatives notwithstanding, the World Bank, in its analytic work, and others⁵⁰ point to the critical need for a long-term, cross-sectoral, coherent, comprehensive, inclusive and evidence-based ECD policy. The risk of low civil society ownership is **substantial** because civil society organizations expressed that they have not been fully used as partners in program design, implementation, evaluation and community development—areas in which they have the comparative advantage.

82. Institutional risk is **substantial**. The sustainability of school readiness and social inclusion depends heavily on the institutional/organizational framework and capacities. The program's innovative nature supports two challenging, ongoing reforms: cross-sectoral coordination and collaboration, and decentralization. There is scope for further defining agencies' roles and responsibilities in the institutional framework in line with comparative advantages and for better alignment of responsibilities and resources. There also is scope for enhanced, better-defined partnerships among the public and private sectors and civil society. The governance risk will continue to be **substantial** unless and until systems and capacities for M&E are established for learning and accountability at every level of the system.

Bank Performance

83. Overall Bank performance is **moderately satisfactory**.

84. Quality at entry is **moderately satisfactory**. Some aspects of project design were strong, including its support of Bulgaria's school readiness program, targeting of the most vulnerable elements of Bulgaria's population, innovation, its direct support to

municipalities, and its emphasis on evidence and learning through a pilot approach. However, there were shortcomings, including underdeveloped results chains for behavior change, learning, and capacity building. Fiduciary and environmental aspects were well prepared, including proper assessments of policies, systems, and capacities and measures for strengthening them to meet World Bank standards. Initial M&E arrangements included the choice of indicators that reflected the multisectoral approach to school readiness and envisioned an impact evaluation to underpin the learning agenda and evidence base for measuring and improving program effectiveness. The failure to include at least one M&E expert in the government's project management team was an important shortcoming, especially given the pilot design. Implementation arrangements gave municipalities the responsibility for subproject design and implementation. However, the four-year project time frame was too short to accommodate a learning-by-doing process that included needs assessment, subproject proposal preparation, appraisal, approval, implementation, the production of results, their evaluation and a process for learning and national rollout. The risk assessment included good mitigation measures for risks identified, but missed risks that occurred, including the government's limits on project expenditures. Bank inputs and processes were adequate, especially with task team (including the task team leader) located in Sofia.

85. Quality of supervision is rated **moderately satisfactory**. Largely because of delays caused by a change in implementing agency and spending limits (para. 34), supervision missions during the project's first three years focused on start-up activities, construction, and large procurement packages, and much less so on development objectives. The revision of the results framework and indicators in 2012 (the year baseline data was collected) weakened the focus on the development objectives (para. 92) and dropped indicators tracking enrolments of target groups. The World Bank's supervisions began to assess performance against output indicators (enrollments, beneficiaries receiving social services) as a proxy for PDO achievement,⁵¹ which affected the candor and quality of reporting. Conversely, supervision reporting, aide-mémoire, and dialogue with government were candid and firm in the World Bank's efforts to negotiate reasonable spending limits and an extended time frame for implementation that would allow time to deliver services. In light of implementation delays, combined with severe expenditure limits, the World Bank's agreement with government (reflected in the 2013 restructuring) to prioritize services over the impact evaluation made sense. In an effort to address concerns for potential bias in the endline school readiness testing, the World Bank used its supervision budget to recruit the same firm that conducted the baseline tests to conduct independent observation of the process (10 percent of the sample in 7 of 39 municipalities) and carry out an analysis of results. Although the independent observation covered a small fraction of the tests, it was all the supervision budget could afford and did eliminate some challenges to the quality and reliability of results.⁵² The World Bank was persistent and successful in building the capacity needed to attract and absorb EU funding after the project's closing. Supervision of fiduciary and environmental aspects was satisfactory, as were the adequacy of supervision inputs and processes. The location

of the task team leader and other team members in Sofia was especially appreciated and productive.

Borrower Performance

86. Overall borrower performance is rated **moderately satisfactory**.

87. Government performance is rated **moderately unsatisfactory**. Its ownership and commitment to achieving the PDO was evident in its national development strategies, which place high priority on poverty alleviation, social inclusion, human development, productive employment, and child well-being. Moreover, during the life of the project, and in the ensuing years, the government initiated decisions and actions which encourage and support ECD efforts, and create increased demand for programs and services supported under the SIP. Such decisions and actions include: compulsory kindergarten enrollment for children ages four, five and six; the deinstitutionalization of orphaned, marginalized, disabled and special needs children; conditionality for child allowances linked to kindergarten attendance and full immunization; kindergarten fee reduction; and the launch of a cross-sectoral mechanism to boost enrollment and retention in compulsory education. While the elimination of selected activities under component 2—especially the impact evaluation—had its rationale, alternative ways to serve the learning objectives and improve program effectiveness were not fully exploited. Although the government provided an enabling environment for implementation, especially in its strategic framework documents and above-cited decisions and actions, the severe spending limits it imposed on the project compressed the time frame for service delivery, results, and learning. The 2008 financial crisis was beyond government control and necessitated expenditure cuts, but the slashing of 2012 planned expenditures to half and the imposition of zero expenditure under the project for two additional years (2013 and 2015) severely compromised project implementation and outcomes linked to the highest-order national priorities. The World Bank in its reporting and communications with government characterized this as a major breach to the legal agreement and a threat to PDO achievement. Nevertheless funding for the operating costs of new SIP kindergartens and crèches was factored into the state budget. Central- and municipality-level government reported that they undertook consultations with beneficiaries and other stakeholders during subproject design, but these were limited and mostly did not extend into the implementation period, when comparative advantages could have been exploited better.

88. Government was reasonably ready for implementation. Transfer of staff to SID when SIF was dismantled was smooth, though it took time to accomplish. Financial management and procurement were carried out well. M&E arrangements included the establishment of a multisectoral project monitoring committee to oversee project implementation and intersectoral coordination, and to guide and facilitate a learning process. However, this committee met only four times during the six years of implementation, at the World Bank's prompting.⁵³ These meetings focused largely on implementation and financing. Even before the baselines were collected (or baseline study even designed), the convening of meetings to lay out a meaningful learning agenda

and process would have served well the pilot design. Subsequently, even after the dropping of the impact evaluation and the imposition of expenditure limits, there still was scope for better serving the learning agenda. Information on the extent to which intended targeting was actually achieved was not sufficiently tracked and analyzed at the program level. Transition arrangements for the continuation of SIP activities after project closing involved training and the establishment of procedures to acquire EU funding. These arrangements succeeded in acquiring two years of funding, but a six-month delay between the end of the SIP and the availability of EU funding caused a rupture in service delivery. Council of Ministers Decisions have committed to state financing of social inclusion services developed under the SIP starting in 2019.

89. Implementing agency performance was **moderately satisfactory**. Procurement and financial management were carried out well. There were frequent visits to the pilot municipalities, which registered appreciation for the guidance and support provided. M&E was neglected in favor of an almost exclusive focus on indicators (mostly outputs). The link between these outputs and the achievement of the PDO was not fully explored. The SID supervised construction and procurement well, and the municipalities executed them well.

Quality of Monitoring and Evaluation

90. The quality of M&E is rated **modest**.

91. **Design.** In support of the project's pilot design, rigorous M&E was envisioned as a means of providing policy makers with a reliable measure of the school readiness program's effectiveness in an initial subset of municipalities, on which basis the program design and approach would be tracked and modified as needed to foster learning and improve effectiveness before the nationwide rollout. M&E was also envisioned as a way to secure political support for the program, through which effectiveness could be demonstrated and further improved. To this end, an impact evaluation was planned as a strategic management tool, encompassing a baseline study to be undertaken after project effectiveness, a midterm evaluation, and an end-of-project evaluation. The lack of an M&E expert in the government's project implementation team was an important shortcoming of the M&E design.

92. The original results framework included appropriate indicators for measuring the multisectoral dimensions of the school readiness outcomes of vulnerable populations targeted under the project. These included cognitive development (with different measures for different age groups) and nutritional status (disaggregated by age group). However, there was no provision for disaggregation of results by specific target groups⁵⁴ or any indicator to track progress of the social inclusion objective. Intermediate outcome indicators included enrollment rates disaggregated to show trends for children from low-income and marginalized households and for disabled children. Intermediate outcome indicators also captured parents' skills and practices that would favor a healthier home environment that is more supportive. The lack of any indicators to capture the project's

intention to build central- and municipal-level capacity for program management, implementation, and M&E was an important shortcoming of the original results framework. The results framework failed to capture synergies with other projects and activities to document contribution and attribution.

93. **Implementation.** M&E activities were not implemented as planned. The 2012 restructuring represented a setback in the quality of the M&E design. The baseline was finally established, but only in May 2012. Only one school readiness measure was retained (share of vulnerable children passing a school readiness test). Indicators that were previously (and more appropriately) labeled as intermediate outcome indicators were reclassified as outcome indicators (enrollments and beneficiaries of services) and amended to be reported as numbers (versus rates). Measurement of parenting skills and the home environment were dropped. Indicators were added to measure the project's capacity building efforts, but focused on outputs (people trained), not on outcomes of such training. The 2013 restructuring eliminated the impact evaluation to prioritize the use of very limited project resources for establishing and delivering services. The compressed time frame for service delivery and methodological issues provided additional rationale for dropping the impact evaluation.⁵⁵ The 2013 restructuring largely maintained the December 2012 targets and indicators, providing two additional years to achieve the same targets as those set in 2012 or slightly lowered targets, in a few cases. Except for the school readiness test, data on all other revised indicators were to be compiled based on quarterly reports submitted by the 66 participating municipalities. Measurements under the revised indicators did not accommodate tracking the coverage or nature of target groups (no denominators qualifying the significance of numbers of beneficiaries of various services and no record of the extent to which beneficiaries identified as vulnerable responded to multiple criteria for targeting low-income, marginalized groups). Municipalities reported regularly on the revised project indicators. M&E training was provided to municipalities, but there was no institutional memory of this training in the five municipalities visited. The project's intention to build central and municipal capacity in program management and M&E did not happen. The failure to use municipal, MLSP, and Ministry of Education and Science program management staff to exploit existing data and information systems to monitor and analyze data and trends (for example, attendance and dropout rates of vulnerable children) and document and share learning and fine-tuning was a missed opportunity. Under OP HRD financing, indicators were reduced even further to essentially two: the number of beneficiaries and the number of service providers. There is no record of the project monitoring committee meeting to review or discuss project performance data for the purposes of learning. The option of postponing the impact evaluation a few years, until after EU financing was completed, was not considered. Neither was the option of conducting school readiness tests of vulnerable beneficiaries in the years after SIP closing to assess trends for children who would have (i) started benefiting from preschool education at an earlier age; and (ii) benefited from exposure of the range of integrated services, which the first set of children tested did not receive at the time of their testing in June 2015.

94. **Use of data for decision making.** The use of project indicators for refining program effectiveness and strategic decision making was limited because most were focused on outputs. However, there was some indication at the municipal level of some use of service data. The municipality of Pravets noted that its monthly reports and data (prepared by an NGO) are reviewed and tracked at the municipal level. Byala Slatina Municipality mentioned holding monthly meetings to discuss difficulties and to solicit donor support to address issues and fill gaps in their work. Haskovo, Plovdiv, and Pazardzhik all noted their efforts to reach out to various data sources inside and outside of Bulgaria to piece together information on location and coverage of out-migrants by selected services. All mentioned using the data of individual cases and clients for coordination across a range of social inclusion services.

7. Lessons

95. Official databases are important, but may need to be complemented with mapping of target communities and households and their needs, constraints, priorities, motivations, and dynamics undertaken by those with intimate knowledge of the community and with community development expertise. Exclusive reliance on official databases (whether at the national or municipality level) risks undermining the full and accurate identification and quantification of target groups necessary for designing and setting priorities for interventions, assessing real coverage, and effectively reaching those in need. Baseline and endline beneficiary assessments may have helped to identify target groups and their needs more accurately and track their outcomes.

96. Mobile services and mediators face challenges in reaching target populations, especially when mediators are few relative to their target populations and do not share the language, culture, and living conditions of those populations. Leveraging their efforts with NGOs, CBOs, and other leaders and actors trusted by the community has the potential to enhance the coverage and effectiveness of services. NGOs, CBOs, local institutions, and community leaders and representatives have a crucial role to play in brokering supply and demand for services and giving voice to target communities. Their potential roles and comparative advantages include troubleshooting, problem-solving, prioritization, targeting of services, listening to leaders and other community members. This nurtures mutual trust, constructive dialogue, and a learning-by-doing process.

97. Low appreciation of evidence for learning, program refinement, and policymaking can undermine the effectiveness of programs and policies, especially where piloting is intended. The development of M&E capacities could provide MLSP with a critical management tool for ensuring continuous learning and accountability for ECD results and increase its potential for resource mobilization and future replication. As the government of Bulgaria moves toward the development of a policy on ECD, it needs to articulate an M&E plan and framework; articulate roles and responsibilities for data collection and analysis and reporting; develop M&E capacity and systems; and establish a process for vetting and acting on data.

98. Experience under the SIP reveals the scope and opportunity to clarify roles and responsibilities to optimize comparative advantages and synergies of the many actors involved, both horizontally (across partners at each level of the system) and vertically (up and down the various levels of national, regional, and municipal government). The fuller analysis and refinement of the institutional and organizational framework is critical for growing the SIP experience into a nationwide school readiness program (or ECD policy). Insights gleaned from field visits and discussions indicate opportunity for enhanced effectiveness of ECD efforts through: (i) fine-tuning decentralization arrangements, including a better alignment of responsibilities and financing across levels; municipality capacity building in program management and M&E; clearer articulation of quality assurance responsibilities and accountabilities; more facilitation of cross-municipality learning and exchange; and research and studies to document collective and individual effectiveness of the various levels; and (ii) fuller exploitation of partnerships at each level of government—cross-sectorally (within the public sector) and between government and its various development partners: international, for-profit, nonprofit, civil society, and communities. This could ensure coordination of actors at each level and culminate in greater efficiency and effectiveness through joint and holistic oversight of financing and performance.

99. Investments in ECD and social inclusion activities targeted to low-income and marginalized children ages 0–7 years and their parents are necessary, but they are insufficient to ensure the children’s success and inclusion in primary school and beyond. Continued delivery of integrated social services and social inclusion interventions during their primary school years (and beyond), support for teachers for coping with the challenges of social inclusion in the classroom, and improved education quality are also critical. Opportunity exists for strengthening networks and partnerships between the integrated social services and social inclusion activities delivered at the municipality level and primary school teachers and administration to ensure cohesive and continued support to children and their families. The inclusion of low-income, marginalized, disabled, and/or special needs children in mainstream classrooms generates considerable, additional challenges and workload for teachers and administrators. Such challenges include discipline, poverty and social issues at home, language barriers, learning accommodations, and physical accommodations, among many others. Teachers need additional support to take on these challenges and workload, which could otherwise undermine their ability to teach all children. Whether children attend primary schools with mixed ethnicities or single-ethnicity schools in Roma neighborhoods, all students of all schools deserve a quality education. Investments in education quality are critical to ensure returns on the SIP investment.

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¹ Unless otherwise cited, the source for these data is the World Bank’s Country Partnership Framework for Bulgaria (FY17–22), April 21, 2016.

² Self-reporting as ethnic Roma is undermined by fear of discrimination and the sentiment that they are Bulgarian because they live in Bulgaria.

³ Sixty-four percent of self-identified Turkish people live in Kardzhali, Razgrad, Targovisthe, Shumen, Silistra, Dobrich, Ruse, and Burgas. The highest concentration of Roma live in Montana, Sliven, Dobrich, and Yambol.

⁴ This section’s information is drawn from the World Bank’s “Expanding and Improving Early Childhood Development: A Review of Current Trends, Lessons Learned, and Policy Directions for Bulgaria,” June 2016, which provides an overview of the main issues in early childhood development (ECD) in Bulgaria based on extensive analytic work, support, and dialogue.

⁵ Eurostat <http://appsso.eurostat.ec.europa.eu/nui/submitViewTableAction.do>

⁶ Fees for public nurseries and preschools are partly subsidized by local authorities, and further reduced for disadvantaged children. But part of the public school fee has to be borne by parents. Private schools charge the full fee and sometimes constitute the only option due to lack of space in public schools. Indirect costs (clothing, shoes, learning materials) are also a factor. In 2011 the monthly cost of preschool for a Roma child was estimated to be prohibitive at €15,4 (United Nations Development Programme–World Bank–European Commission Regional Roma Survey, 2011).

⁷ Access to health care is inadequate because of distance, inadequate quality and capacity, lack of health insurance, prohibitive costs, and a lack of awareness of patient rights and the value of services for their children’s physical and emotional health.

⁸ Poor children often go hungry and live in substandard housing, which affects their health and learning ability.

⁹ Parents’ low educational attainment significantly reduces their ability to promote their children’s emotional and intellectual well-being to make them school-ready.

¹⁰ Some parents of disadvantaged children do not trust that their children will be fairly and respectfully treated by the staff and other children in the nursery or kindergarten and thus choose to keep them at home.

¹¹ NSI; <http://www.nsi.bg>

¹² The project appraisal document’s project development objective (PDO) statement is as follows: “The government of Bulgaria aims to promote intergenerational social inclusion by developing and rolling out nationally a school readiness program to equalize starting conditions of children entering primary school. In support of this policy agenda, the proposed PDO for the Social Inclusion Project [SIP] is to promote school inclusion through increasing the school readiness of children below the age of 7, targeting low-income and marginalized families (including children with a disability and other special needs). The SIP will contribute to the sustainability of the school readiness program by supporting the absorption of European Social Fund [ESF] financing.”

¹³ The 27 regional capitals were automatically assigned as SIP beneficiaries based on the following common factors: concentration of a greater number and multidimensional social problems; greater ethnic

diversity of their population; shortage of kindergarten places; greater possibilities for benefiting from project services; and a greater number of prospective end beneficiaries (project operations manual, May 2014).

¹⁴ The criteria to reveal the greatest need included the following: children on social assistance benefits and monthly family benefits; family size; young parents; single-parent households; children with disabilities receiving allowance for permanent disabilities; kindergarten and primary school enrollment rates; preschool-age children; unemployment rate; and unemployed up to age 35 years registered.

¹⁵ Originally, the SIP required that municipalities commit to maintaining newly created integrated social services for 10 years after project completion for investments involving construction, repair works, and equipment, and for five years after project completion for investments in services only. Under the 2012 restructuring, these commitments were reduced to five years and three years, respectively.

¹⁶ Designed in the boom (precrisis) years, the original SIP design envisioned the achievement of national coverage of the SIP services within four years of implementation. The first two years were dedicated to a pilot in treatment municipalities (including procurement, construction and delivery of services), bringing in the control municipalities in the third, and end with one year of national expansion in the fourth year of implementation.

¹⁷ It was not possible to factor these counterparts into the original estimates because there was no breakdown of Bulgarian government and ESF financing, the latter financier expected to finance the program rollout.

¹⁸ This amount does not include ongoing postproject ESF financing of the 66 municipalities (2016–18). The total actual project cost of 25.99 million euros.

¹⁹ For projects with investments in construction, repair works, and equipment, the time frame was reduced from 10 years to five years after project completion. For projects with investments in services only, without any construction or repair works, the time frame was reduced from five years to three years after project completion.

²⁰ Revisions to the results framework included substantial changes to outcome and intermediate outcome indicators, the introduction of baseline values for all indicators, and inclusion of indicators for the capacity building component (appendix D, table D.1).

²¹ Reductions in project activities reflected a shortening of the implementation period of SIP services under the project from an original estimate of 24 months to about 12 months, the elimination of the impact evaluation, and the need to align project spending with expenditure limits in the 2013 State Budget Act.

²² The specialists the municipalities contracted (1,409 total) included 289 pediatricians, nurses, mediators, and dentists to deliver health counseling for children; 240 pedagogues and mediators to provide remedial education in summer schools; 237 pediatricians, psychiatrists, rehabilitation specialists, psychologists, speech therapists, social workers, and mediators to deliver early intervention of disabilities services; 47 social workers and mediators to provide pedagogical support to disabled children; 525 pediatricians, gynecologists, midwives, nurses, psychologists, legal experts, mediators, and social workers to develop parenting skills and provide family counseling and support; 29 social workers, pedagogues, and mediators to support integration in kindergartens; and 42 social workers and coordinators.

²³ There are no identifiers to confirm low-income status, how or to what extent they are marginalized, and how many are disabled or have special needs (and with what disabilities or special needs).

²⁴ According to MLSP project data, 2,482 were enrolled by December 31, 2014 (one year before the project's end), an additional 683 were enrolled by June 30, 2015 (six months before the project's end), and 1,255 were enrolled during the project's last six months.

²⁵ The training of kindergarten and crèche staff was originally slated for project support, but this was ultimately financed by the EU's Science for Smart Growth Program.

²⁶ Criteria include multiple siblings attending, guaranteed minimum income recipients, single-parent households, very young parents, and disabled students, among others.

²⁷ Clients' perspectives are important, but independent technical experts need to oversee and ensure the quality of services.

²⁸ In Bulgaria, there has been a significant decrease (more than 80 percent) in the number of children placed in institutional care from 7,587 in 2009 to 1,495 at the beginning of 2016. In 2015 alone, 1,226 children left institutional care, and 33 institutions were closed. In 2015, there were 6,463 children in kinship care and 2,323 children in foster care. All specialized institutions for children with disabilities have been closed. In October 2016, Bulgaria's "Vision for Deinstitutionalization of Children in Bulgaria 2016–20" was officially adopted.

²⁹ It was beyond the Independent Evaluation Group's (IEG) mandate and budget for this study to undertake an independent verification of children's outcomes and their attribution to the services.

³⁰ Of these 471 disabled children, 157 were reported as enrolled in kindergarten as of December 31, 2014 (before the launch of disability services under the project), and an additional 205 were enrolled in kindergarten or preschool as of June 30, 2015, when disability services had been operating for only a few months.

³¹ In Bulgaria, health services are free for children under age 18, which would make it feasible for even the poorest parents to follow up on referrals they might have received.

³² A pattern of comments revealed that there is fear among the population that the services are linked to the Child Protection Agency, which is perceived as the agency that would take their children away from them. Most mediators encountered during IEG field visits do not belong to the ethnic minority groups they were targeting.

³³ Cultural barriers that mediators encountered include the following: Muslim women forbidden to use contraception for religious reasons; some Muslims and Roma women forbidden to consult a male gynecologist; some Roma girls forbidden to study beyond grade 4 because of early marriages and a perceived risk of loss of innocence. Moreover, some Roma parents are unaware of the benefits of early intervention of disabilities services and fear a stigma if a disabled Roma child uses such services. Some Roma families refuse to accept that their child might have a disability.

³⁴ There is evidence of providers working overtime in emergencies and client crises.

³⁵ The *Baseline Impact Evaluation Study*, undertaken in 2012, collected information (through a field survey of vulnerable parents) on parenting skills deficits among parents in vulnerable households (Industry Watch and Market LINKS 2012).

³⁶ Technical work included the development of criteria for a continuation of financing under the 2014-20 HRD OP and the preparation of guidelines for application for funding under HRD OP.

³⁷ The two municipalities that dropped out of the pilot are Yakoruda and Maritsa.

³⁸ Some municipalities work with private companies to undertake charitable campaigns to generate products and gifts for vulnerable parents and their children. Community centers work together with some kindergartens and a few primary schools to follow up and support school readiness and disability and integration efforts focused on parents and children. Community centers refer clients to municipal services (health and social assistance, among others). Municipal health authorities sought the help of mediators to reach children who were not vaccinated, and municipal education authorities sought the help of mediators to reach out-of-school children and their families.

³⁹ School readiness tests assessed children's visual interpretation, communication skills, counting and math skills, sound comprehension, motor skills, general knowledge, and reading and writing skills.

⁴⁰ An estimated 30 percent of Roma did not hold a national identification card in 2013 (Dimitrov et. al 2013).

⁴¹ Keeping target groups to a level of about 30 percent of all students was considered a way to discourage the withdrawal of ethnic Bulgarian students and thus maintain an ethnically mixed, optimal environment for learning..

⁴² By contrast, the 2012 tests administered as part of an extensive baseline study were administered to children who came from households that independent researchers identified as low income and/or marginalized, based on a rigorous methodology of household visits, observations, and interviews with parents and children (Industry Watch and Market LINKS 2012).

⁴³ In response to IEG's request for clarification, the World Bank's team stated that the lack of tested children in these six municipalities meant that at the time of school readiness testing, these municipalities confirmed that there were no vulnerable children that complied with the testing requirement in June 2015 (aged 6/7 years and beneficiary of one to two years of SIP kindergarten exposure. But this does not necessarily mean that these specific kindergarten groups did not serve vulnerable children. The World Bank's team explained that new places were allocated more or less equally across four age tranches – 25 percent each for children aged 3–4 years, 4–5 years, 5–6 years and 6–7 years. This should mean that about 58 children 6–7 years of age would have benefited from the 232 places in these six additional municipalities and would have been eligible for testing.

⁴⁴ The Roma girl's father and mother both have a secondary education, are employed, and support and encourage her learning at home. They live in a mixed neighborhood, which enabled the girl and her father to speak perfect Bulgarian. According to the father, their family does not experience discrimination in their neighborhood. Her teacher shared the girl's school workbook (which was neat and complete) and compared it with the sloppier work of another student who did not benefit from the project. The teacher noted that the girl started primary school with all the prerequisite skills and good classroom discipline and attributed these differences to the project. However, it is likely that her parents' education, employment status, residence in a mixed, Bulgarian-speaking neighborhood, and attendance at an ethnically mixed primary school were key factors in the girl's success in school.

⁴⁵ The girl spoke Bulgarian with some difficulty, and the boy spoke Bulgarian with great difficulty. The school they attended was segregated (purely Roma). IEG could not assess the quality of the primary school, but the principal shared that his school and another neighboring all-Roma school “compete for last place” in school rankings every year. Exchanges with teachers and administrators made clear the extreme difficulties and challenges they face working with vulnerable children. Those lacking a secure environment, stability at home, books and other educational resources, and parents' aspirations for their children's education and future all have a negative impact on children's academic success, attendance, and dropout rates.

⁴⁶ The teacher noted that these girls are more inquisitive and better prepared. However, home environments can pull them back. Specifically, the parents' inability to speak Bulgarian causes the children to lose their Bulgarian language skills during the summer, and the parents' extended absences to work abroad cause the children to feel neglected and depressed. Additionally, the parents do not encourage their girls to go to school beyond the fourth grade.

⁴⁷ UNICEF provides technical assistance and financing to Bulgaria to strengthen the delivery of health, nutrition, and education services for young children. The Swiss Agency for Development and Cooperation also supports the strengthening of health and education service delivery for young children and a program to address the needs of Roma. International and local NGOs and CBOs support a range of programs and activities aimed at improving the health, education and well-being of vulnerable groups, including services, outreach and building evidence for policymaking and enhanced program effectiveness. Among these, the Roma Education Fund supports Roma access to kindergarten and preschool.

⁴⁸ Teachers and school administrators encountered in Roma schools and other municipality staff raised these issues consistently.

⁴⁹ The two decisions are (i) Decision #859/13.10.2016 of the Council of Ministers (updated Action Plan for the Implementation of the National Strategy “Vision for Deinstitutionalization of Children in Bulgaria), which states that from 2019 forward, the ECD services established under the SIP project shall be financed

from the state budget through the municipal budgets; and (ii) Decision #277/24.04.2018 of the Council of Ministers adopting the state funding standards for 2019.

⁵⁰ World Bank 2016c and Yosifov, Yordan, et al. (2018)

⁵¹ This actually created a fractured results chain. School readiness tests measured school readiness of target children who were enrolled in SIP kindergartens, especially their cognitive skills. But the complementary services, expected to contribute to school readiness outcomes, were launched only at the time of the administration of the school readiness tests.

⁵² This enabled the World Bank and the researcher to assess bias, eliminate invalid tests and analyze and compare baseline and endline results based on a matched sample of tests completed by children with comparable characteristics at baseline and endline testing.

⁵³ The first meeting was held at the time of the SIP municipal subprojects selection and approval process (December 2011). The second was convened at the point when the construction works were completed (February 2013). The third (May 2014) took place at the point when various bottlenecks began surfacing (insufficient funding, recruitment of service providers and launch of health and social services). The fourth (2015) focused on the continuation and sustainability of the SIP interventions under OP HRD financing. A new monitoring committee was established in 2016 to oversee the OP HRD financing of SIP activities, and the monitoring committee for the World Bank–financed SIP was dismantled.

⁵⁴ For example, disaggregation to show trends for disabled versus low-income, marginalized groups would have allowed a better understanding of the reach of the project's target groups.

⁵⁵ Methodological issues that challenged the impact evaluation, according to the World Bank's task team, included the huge variation of services chosen by municipalities, precluding the meaningful grouping of municipalities providing the same types of interventions; and government's adoption of a competitive process for selection of pilot municipalities, which introduced self-selection bias and flawed the originally planned randomized controlled design

Appendix A. Basic Data Sheet

SOCIAL INCLUSION PROJECT (LOAN 7612-BG)

Table A.1. Key Project Data (\$, millions)

	<i>Appraisal Estimate</i>	<i>Actual or Current Estimate</i>	<i>Actual as Percentage of Appraisal Estimate</i>
Total project costs	59.00	30.68	52.00
Loan amount	59.00	30.51	52.00
Cancelation	0.00	24.23	n.a.

Source: Implementation Completion and Results Report Review and SAP project supervision disbursement data.

Table A.2. Cumulative Estimated and Actual Disbursements

<i>Category</i>	<i>FY09</i>	<i>FY10</i>	<i>FY11</i>	<i>FY12</i>	<i>FY13</i>	<i>FY14</i>	<i>FY15</i>	<i>FY16</i>	<i>FY17</i>
Appraisal estimate (\$, millions)	3.69	19.21	39.13	52.45	58.37	59.09	59.09	59.09	59.09
Actual (\$, millions)	0.00	0.00	0.79	10.15	16.60	24.64	31.36	30.53	30.51
Actual as percent of appraisal	0.00	0.00	2.00	19.00	28.00	42.00	53.00	52.00	52.00
Date of final disbursement: 04/30/2016									

Source: SAP project supervision disbursement data.

Table A.3. Key Project Dates

	<i>Original</i>	<i>Actual</i>
Concept review	10/19/2006	10/19/2006
Negotiations	09/26/2008	09/26/2008
Board approval	11/04/2008	11/04/2008
Signing	11/18/2008	11/18/2008
Effectiveness	04/16/2009	04/16/2009
Closing date	10/31/2013	12/31/2015

Table A.4. Task Team Members

<i>Name</i>	<i>Title</i>	<i>Unit</i>
LENDING AND SUPERVISION		
Christian Bodewig	Program Leader	ECCU5

Blaga Djourdjijn	Procurement Specialist	GGO03
Lire Ersado	Senior Economist	GSP05
Roberta V. Gatti	Lead Economist	GSPDR
Rebekka E. Grun	Asst. to the President	EXC
Kari L. Hurt	Senior Operations Officer	GHN02
Mirela Mart	Financial Management Specialist	ECADE
Peter Ivanov Pojarski	Consultant	GSP03
Svetlana Georgieva Raykova	Associate Operations Officer	CASPM
Albena Alexandrova Samsonova	Program Assistant	ECCBG
Bogdan Constantin Constantinescu	Sr Financial Management Specialist	GGO21
Anneliese Viorela Voinea	Financial Management Specialist	GGO21
Valeria Nikolaeva	Procurement Specialist	GGO03
Plamen Nikolov Danchev	Senior Education Specialist	GED02
Adela Delcheva	Program Assistant	ECCBG

Table A.5. Staff Time Budget and Cost for World Bank

<i>Stage of Project Cycle</i>	<i>Staff Weeks (no.)</i>	<i>Finance, including Travel and Consultant Costs (\$, thousands)</i>
LENDING		
FY06	2.30	10.85
FY07	50.95	252.81
FY08	11.77	60.35
Total	65.02	324.01
SUPERVISION AND IMPLEMENTATION COMPLETION AND RESULTS REPORT		
FY09	9.57	71.72
FY10	18.81	54.88
FY11	20.18	58.75
FY12	12.55	38.30
FY13	16.58	31.61
FY14	13.53	35.05
FY15	15.48	20.27
FY16	12.77	29.32
Total	119.47	339.90

Appendix B. National Policies on Social Inclusion and Early Childhood Development and Relevant World Bank Portfolio

Box B.1. National Development Program: Bulgaria 2020

Goals

- Raising the standard of living through competitive education and training, creating conditions for quality employment and social inclusion and ensuring accessible and quality health care
- Building of infrastructure networks, providing optimal conditions for the development of the economy and quality and healthy environment for the population
- Enhancing the competitiveness of the economy by ensuring a favorable business environment, promotion of investments, application of innovative solutions, and improving resource efficiency

Priorities

- Improving the access to and enhancing the quality of education and training and the quality characteristics of the workforce
- Reducing poverty and promoting social inclusion
- Achieving of sustainable integrated regional development and use of local potential
- Development of the agricultural sector to ensure food security and production of products with high value-added through sustainable management of natural resources
- Support of innovation and investment activities to increase the competitiveness of the economy
- Strengthening the institutional environment for higher efficiency of the public services for citizens and businesses
- Energy security and increasing resource efficiency
- Improving transport connectivity and access to markets

Source: Bulgaria, n.d.

Box B.2. Declaration of the Decade of Roma Inclusion, 2005–15

Signed: in Sofia, Bulgaria on February 2, 2005 with eight countries signing

Components of decade action plans that each country would adopt and tailor to its own specific circumstances

Education

- Ensuring access to compulsory education
- Improving the quality of education
- Implementing integration and desegregation
- Expanding access to preschool education
- Increasing access to secondary, postsecondary, and adult education

Employment

- Increasing opportunities through education and skills
- Expanding labor market participation through active measures
- Improving labor market information
- Reforming employment services

Health

- Ensuring access to health care
- Increasing the information base on Roma health
- Raising the inclusiveness of health systems
- Improving health in vulnerable communities

Housing

- Tackling discrimination in housing
- Improving living conditions in settlements
- Expanding access to housing

Source: Declaration of the Decade of Roma Inclusion, 2005–15, February 2, 2005.

Box B.3. Bulgaria's Action Plan for the Decade of Roma Inclusion 2005–15

Priority Areas and Goals

Education

- Guarantee the right to equal access to quality education to children and pupils from the Roma ethnic minority
- Preservation and development of the cultural identity of the children and pupils from the Roma ethnic minority
- Creation of prerequisites for successful socialization of Roma children, pupils, and youth
- Transformation of the cultural diversity into a source of and a factor for knowledge of each other and spiritual development of the young people. Establishment of an atmosphere of mutual respect, tolerance, and understanding
- Formation of appropriate social psychological climate, favorable for the educational integration of children and pupils from the Roma minority

Health Care: *Reduction of mortality and morbidity and suspension of negative trend in the health status of the Roma population*

- Reduction of infant mortality
- Improvement of health care of newborns and children under school age
- Improvement of preventive activities amid Roma population
- Increase of health awareness and level of information of Roma population
- Improvement of access to health services
- Assessment and monitoring of the health status of the Roma population

Housing: *Sustainable improvement of living conditions for Roma population in Bulgaria*

- Providing opportunities for access to houses in compliance with the state standards in areas with predominant Roma population

Employment

- Improvement of the competitiveness of the Roma population in the labor market, including in modern spheres of labor activity
- Encouragement of entrepreneurship, start-up, and management of own business activities
- Capacity building for Roma employment promotion

Protection against Discrimination and Guaranteeing of Equal Opportunities

- Improvement of the police officers' work effectiveness in a multicultural environment, adhering to standards and regulations on human rights protections
- Encouragement of tolerant interethnic relations through sports initiatives
- Increase of Roma people presence at all levels of the public administration
- Higher effectiveness of the social assistance system achieved through improvement of the social workers qualification to work in a multiethnic environment

Culture: *Providing conditions for the preservation of the Roma cultural identity and its development as an intrinsic element of the national cultural identity*

- Ensuring sustainability and steadiness of the cultural integration
- Development of ethnic minorities' culture as specific ones and as part of the national culture
- Improvement of the Roma public image in the society, especially in the media

Source: Bulgaria 2005.

Box B.4. National Roma Integration Strategy of Bulgaria, 2012–20	
Summary	
Strategic Goal	
Creating conditions for equitable integration of the Roma and Bulgarian citizens in a vulnerable situation, belonging to other ethnic groups, and in the social and economic life by ensuring equal opportunities and equal access to rights, goods, and services by involving them in all public spheres, and improving their quality of life while observing the principles of equality and nondiscrimination	
Guiding Principles	
<ol style="list-style-type: none"> 1. Constructive, pragmatic, and nondiscriminatory policies 2. Explicit, but not exclusive targeting 3. Intercultural approach 4. Aiming for the mainstream 5. Awareness of the gender dimension 	<ol style="list-style-type: none"> 6. Transfer of evidence-based policies 7. Use of European Union instruments 8. Involvement of regional and local authorities 9. Involvement of civil society 10. Active participation of the Roma
Priorities, Operational Objectives, and Lead Responsible Institutions	
<ol style="list-style-type: none"> 1. Education: Enrolling or retaining in the educational system all Roma children and students, ensuring high-quality education in a multicultural environment (Ministry of Education, Youth, and Science) 2. Health care: Ensuring equal access to quality health care services and preventive programs (Ministry of Health) 3. Housing conditions: Improving the housing conditions and the technical infrastructure (Ministry of Regional Development and Public Works) 4. Employment: Improving the access of Roma to the labor market and raising Roma employment rate (Ministry of Labour and Social Policy) 5. Rule of law and nondiscrimination: Guaranteeing citizens' rights, with an emphasis on the rights of women and children, protecting public order, prevention, and combatting any manifestations of intolerance and hate speech (all state institutions, agencies, the Commission for Protection against Discrimination, advisory structures, and so on, in accordance with competencies) 	
Culture and Media	
<ol style="list-style-type: none"> 1. Creating conditions for equal Roma access to the cultural life, and preserving and developing the traditional Roma culture and creativity (Ministry of Culture) 2. Creating conditions for equitable presentation of the Roma community, for changing its negative image, and combatting hate speech in the printed and electronic media (National Council for Cooperation on Ethnic and Integration Issues with other agencies responsible for media) 	

Box B.5. National Strategy for Reducing Poverty and Promoting Social Inclusion 2020

Vision: By 2020, Bulgaria will have become a country where the quality of life of vulnerable groups is improved and conditions for their full social inclusion are created.

Principles

- Preventive effect of measures: undertaking action to eliminate the cause of negative phenomena in society, such as poverty and social exclusion
- Sustainability and long-term effect of the results achieved: durability and long-term impact of the effects from the policies implemented
- Effectiveness and efficacy: implementing programs and measures after an analysis of needs, coordination, and appropriateness of measures
- Not allowing discrimination: providing equal opportunities, full and active participation in all spheres of social life
- Solidarity and partnership: creating conditions for interaction, consultations, open dialogue, and responsibility sharing between all stakeholders

Goal: To improve the quality of life of the vulnerable groups of Bulgarian society and to create the conditions for their fulfillment by reducing poverty and promoting social inclusion

Target: To reduce the number of persons living in poverty by 260,000 by 2020 (with specific targets for children ages 0–18 years, people ages 65 and over, the unemployed, and workers living in poverty)

Main Target Groups

- Persons at nonworking age: children and older persons
- Families with children
- Disadvantaged groups in and out of the labor market
- Vulnerable representatives of the Roma community
- Persons with disabilities
- Homeless persons and persons living in poor housing conditions
- Working poor

Priorities

1. Providing opportunities for employment and increased labor income through active labor market inclusion
2. Ensuring equal access to quality preschool and school education
3. Ensuring equal and efficient access to quality health care
4. Eliminating the institutional care model and developing cross-sectoral social inclusion services
5. Ensuring sustainable and adequate social transfers
6. Improving the capacity and interaction in education, health care, employment, and social services while implementing common social inclusion targets
7. Ensuring accessible environment—physical, institutional, and informational alike, and accessible transportation
8. Improving the housing conditions for vulnerable groups and supporting the homeless people
9. Working in partnership to overcome poverty and social exclusion and the related consequences

B.6. National Policies on Social Inclusion and Early Childhood Development and Relevant World Bank Portfolio

World Bank Portfolio of Projects Relevant to Social Inclusion and School Readiness

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
P070991	Integration of Ethnic Minorities	To enhance the policy making and implementation capacity of the National Council on Ethnic and Demographic Issues at the central and local levels	IDF grant, 0.46	05/22/2000	06/22/2003	S (ICM)
P051151	Social Protection Adjustment Loan	To establish a viable policy framework for systemic reform in the social protection area (pensions, labor and unemployment, and social assistance—for example, sickness and maternity benefits, social assistance and child allowances, and health care financing)	IBRD, 40.0	FY99	06/30/2000	S (ICRR)
P055156	Regional Initiatives Fund	To test the social fund mechanism to improve the standard of living among the poor and unemployed during economic transition, test the cost and benefits of using microprojects to transfer income to vulnerable groups, and use temporary employment creation to build infrastructure for development. The project experience would justify the creation of an autonomous Social Investment Fund with a particular social protection mandate	IBRD, 4.38	FY99	04/30/2001	MU (ICRR)
P055157	Health Sector Reform Project	To support the borrower in implementing fundamental reform of its health sector designed to improve access to (quality) health care and to ensure financial (especially for disadvantaged and remote populations) and operational sustainability of the sector	IBRD, 63.30	06/22/2000	10/31/2008	MS (ICRR)
P055158	Education Modernization Project (APL)	To enhance the quality of teaching and learning, and to make more efficient the use of physical, financial, and human resources for primary and secondary schools, and higher education institutions	IBRD, 5.76	09/05/2000	03/31/2004	U (ICRR)
P064536	Child Welfare Reform Project	To improve child welfare and protect children's rights through, among others, promoting community-based child welfare	IBRD, 10.50	03/06/2001	06/30/2006	MS (ICRR)

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
		approaches as cost-effective alternatives to institutionalized childcare				
P069532	Social Investment and Employment Promotion	To strengthen Bulgaria's existing social protection services and improve living standards of poor, unemployed people and selected disadvantaged communities (ethnic minorities, Roma, and Turkish)	IBRD, 86.7	12/17/2002	12/31/2009	MU (ICRR)
P076487	Poverty Monitoring, Evaluation and Policy Design (for MLSP)	To develop and institutionalize reliable and sustainable poverty monitoring, evaluation, and policy design mechanisms based on the Living Standards Measurement Study to assist policy makers in the design, implementation, and evaluation of economic and social programs and spending; to develop analytic capacity for analysis of poverty issues, M&E of poverty impacts, and proactive poverty reduction policy design; and to support the government's capacity building regarding targeting and evaluating social programs and monitoring poverty on a regular basis (focus on MLSP)	Trust Fund 0.32	06/15/2001	12/13/2005	S (ICM)
P075020	Poverty Assessment	To provide the government and the World Bank with an updated picture of poverty in the country and identify policy strategies for poverty reduction. The analysis was also intended to provide an input into the country assistance strategy and to continue capacity building for ongoing poverty monitoring (including under P070996)	Various Trust Funds (not quantified)	06/28/2002		
P082574	Regional Roma Conference, in-country preparations	No stated objectives; no documents or data		02/27/2003	06/30/2003	
P099328	Capacity Building for Education	To enhance the capacity of the Ministry of Education and Science to effectively use the resources from the EU Structural Fund and Cohesion Fund and other international financial institutions, especially to develop, implement, manage, and	Trust Fund 0.29	11/01/2005	12/31/2009	S (ICM)

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
	System Quality Improvement and Modernization	monitor programs and projects for education system modernization				
P100659	Poverty Monitoring (Living Standards Measurement Study)	To report on living conditions in Bulgaria as a part of the Bulgaria Poverty Monitoring Task, culminating in joint MLSP-World Bank production of “Bulgaria: Living Conditions before and after EU Accession”	World Bank budget, 0.09	04/20/2006	06/21/2007	
P094967	First Social Sectors Institutional Reform (SIR) DPL I	To support the adoption and implementation of policies as follows: (i) to increase employment and lay the foundations for long-term productivity growth by providing incentives for job creation and improving education quality; and (ii) to promote fiscal sustainability through efficiency gains in social sectors and improve access to social services	IBRD, 153.23	03/21/2007	01/31/2008	MU (for entire series) (ICRR) Region disagrees
P107715	Poverty Monitoring Policy	“Bulgaria: Living Conditions before and after EU Accession” September 2009 Capacity building for poverty monitoring, social development policy, and social risk management		05/01/2008	06/30/2008	
P112824	Poverty Monitoring Policy Note	Associated with P107715: monitoring and assessment of living conditions carried out jointly with the Bulgarian government and other counterparts. “Poverty Implications of the Global Financial Crisis” (World Bank 2009a) and “Bulgaria Social Assistance Programs: Cost, Coverage, Targeting, and Poverty Impact.” (World Bank 2009b)	World Bank budget, 0.05	04/20/2009	09/30/2009	
P102160	SIR DPL II	(same as for DPL I)	IBRD, 137.56	11/04/2008	12/31/2011	
P100657	Social Inclusion Project	To promote social inclusion through increasing the school readiness of children below the age of seven, targeting low-	IBRD, 30.7	11/04/2008	12/31/2015	MS (ICRR)

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
		income and marginalized families, including children with a disability and other special needs				
P115400	SIR DPL III	(same as for DPL I and II)	IBRD, 208.40	05/14/2009	03/31/2010	MU (ICRR) modest efficacy on education
P118162	School Autonomy	To study the impact of school autonomy policies on education sector effectiveness in four areas of interest: efficiency, quality, equity, and accountability “A Review of the Bulgaria School Autonomy Reforms” (World Bank 2010b) and “Assessing the Quality of Education in Bulgaria Using PISA [Programme for International Student Assessment] 2009” (World Bank 2010a)	World Bank budget, 0.18	09/28/2009	09/30/2010	
P122454	Programmatic Technical Assistance for the Education Sector	To support Bulgarian efforts to deepen implementation and impact of ongoing reforms, focusing on improvement of education quality through strengthening education accountability. “Strengthening Higher Education in Bulgaria: Options for Improving the Models of Governance, Quality Assurance, and Financing of Higher Education” (World Bank 2012) and “SABER Teacher Country Report: Bulgaria 2013” (World Bank 2013)	World Bank budget, 0.13	10/28/2010	11/10/2013	
P130455	Gender Dimensions of Roma Inclusion	To inform the development of effective Roma inclusion policies and programs in Bulgaria by investigating, through a gender lens, the factors and mechanisms that promote or inhibit social inclusion of the Roma, focusing on early childhood education, early marriage, the labor market, and high rates of Roma women affected by crimes, violence, trafficking, and prostitution	World Bank budget, 0.12	01/23/2012	06/03/2014	

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
P146246	Programmatic Education Sector Technical Assistance: Implementation and Impact Educational Reforms for Quality	To support Bulgarian efforts to deepen the implementation and impact of education reforms by focusing on improvement of the quality of education. To improve quality of pre-university education through strengthening education quality assurance and assessment mechanisms and enforcing the accountability framework envisioned in new draft pre-university legislation. (World Bank 2015c)	World Bank budget, 0.13	06/11/2013	06/08/2015	
P157367	Early Childhood Development Technical Assistance	To inform Bulgarian policies on early childhood development (ECD) by taking stock of past and ongoing programs and identifying key priorities for further improving the coverage, quality, and equity of ECD services in Bulgaria. "Expanding and Improving Early Childhood Development: A Review of Current Trends, Lessons Learned, and Policy Directions for Bulgaria"(World Bank 2016c)	World Bank budget, 0.06	09/10/2015	06/27/2016	
P161593	Bulgaria Education Policy Dialogue Priorities and Technical Assistance	To deepen education sector policy dialogue and identify priorities as follows: (i) in conjunction with the reimbursable advisory service work on school value-added measures, (ii) by synthesizing past sector work, and (iii) by updating PISA trends and priorities based on PISA 2015. "Improving the Quality of Bulgaria's Education System: A Review of Bulgaria's Performance on the 2015 Programme for International Student Assessment (PISA)" (World Bank 2015c)		06/28/2017		
P143076	Evaluating and Closing the Gap between Roma and non-Roma in Bulgaria through Preschool Participation			06/28/2017		

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
	(World Bank 2017b)					
P161817	Engaging Effectively on Roma Inclusion in Bulgaria (to increase effectiveness of World Bank policy dialogue) transformative social inclusion policies					
P160610	Bulgaria Integrated Social Services (to enhance quality of essential services: health, education, social, and employment)					
P158309	Addressing the Behavior and Social Dimensions of Gender Gap in Skills in the Roma Community in Bulgaria				06/29/2018	

Code	Task	Objective	Actual Financing: Source and Amount (\$, millions)	Approval	Closing	Rating
P157368	Bulgaria Reimbursable Advisory Services on Education				07/30/2018	

Note: DPL = development policy loan; ECD = early childhood development; EU = European Union; IBRD = International Bank for Reconstruction and Development; ICM = Implementation Completion Memorandum; ICRR = Implementation Completion and Results Report Review; MLSP = Ministry of Labour and Social Policy; MS = moderately satisfactory; MU = moderately unsatisfactory; PISA = Programme for International Student Assessment; S = satisfactory; SABER = Systems Approach for Better Education Results; SIR = Social Sectors Institutional Reform; U = unsatisfactory.

Appendix C. Costs, Financing and Disbursements

Table C.1. Planned versus Actual Project Cost, by Component (IBRD loan only)

<i>Component</i>	<i>Planned (€, millions)</i>	<i>Actual (€, millions)</i>	<i>Actual/Planned (percent)</i>
Integrated social and childcare services	37.39	22.81	61
Capacity building	2.51	0.67	27
Total project costs	39.90	23.48	59
Front-end fee IBRD	0.10	0.10	100
Total, including front-end fee	40.00	23.58	59

Source: World Bank (2008) for planned costs; World Bank Project Information System for actual costs.

Note: World Bank (2008) showed only distribution of the IBRD loan across components to show cost estimates. There is no project cost estimate by component that includes government and municipality counterpart financing. Therefore, actual costs show the real use and distribution of the IBRD loan to facilitate analysis. Actual costs of the project, including these counterparts, are shown in table C.2. IBRD = International Bank for Reconstruction and Development.

Table C.2. Planned versus Actual Program Costs, by Component

<i>Component</i>	<i>Planned (€, millions)</i>	<i>Actual (€, millions)</i>	<i>Actual/Planned (percent)</i>
Integrated social and childcare services	130.85	25.22	19
Capacity building	3.28	0.67	20
Project management	2.50	^a .	
Total project costs	136.63	25.89	19
Front-end fee IBRD	0.10	0.10	
Total financing required	136.73	25.99	19

Source: World Bank (2008) for planned; Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016; cross-checked with World Bank data for actual.

Note: Program rollout did not happen as anticipated because of delays in the SIP implementation. European Union funding of SIP activities in the 66 municipalities for an additional two years, postproject, is not included here. IBRD = International Bank for Reconstruction and Development; MLSP = Ministry of Labour and Social Policy; SIP = Social Inclusion Project.
a. Actual costs of project management are included under capacity building.

Table C.3. Planned versus Actual Financing (€, millions)

<i>Financing Source</i>	<i>Planned</i>		<i>Actual</i>	
	<i>Amount (€, millions)</i>	<i>Planned Breakdown (percent)</i>	<i>Amount (€, millions)</i>	<i>Actual/ Planned (percent)</i>
Government and ESF	73.43	53.00	0.25	0
IBRD	40.0	30.00	23.59	59
Communities and municipalities	23.30	17.00	2.15	9

Total	136.73	100.00	25.99	19
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Source: World Bank (2008) for planned; : Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016; cross-checked with World Bank data for actual.

Note: Estimate of the government of Bulgaria's initial estimate includes ESF funding, and actual is net of ESF funding. ESF = European Social Fund.

Table C.4: Planned versus Actual Disbursements, by Disbursement Category
(€, millions)

Disbursement Category	Original Allocation	Restructuring 12/2012	Restructuring 10/2013	Actual	Actual/Original (percent)
1. Grants under Part I of the project	35.39	36.40	30.38	22.81	41
2. Consultants' services, training, and audit	4.51	3.50	0.91	0.67	15
3. Front-end fee	0.10	0.10	0.10	0.10	
Total	40.00	40.00	31.39	23.58	59
Canceled			8.61	8.61	
Undisbursed				7.81	
Total			40.00	40.00	

Source: World Bank (2008b) for original; internal restructuring papers for revised.

Table C.5. Expenditures by Source, April 16, 2009–December 31, 2015

		Lev		€		
		Total	IBRD	Government	Municipalities	Total
I	Received amounts					
1.1	IBRD	47 569 299.10	47 569 299.10	–	–	24 321 796.42
1.2	Government	506 659.65	–	506 659.65	–	259 050.97
1.3	Cofinancing from municipalities	4 327 329.33	–	–	4 327 329.33	2 212 528.35
I.	Total received (1.1+1.2+1.3)	52 403 288.08	7 569 299.10	506 659.65	4 327 329.33	26 793 375.74
2	Payments					
2.1	Projects of municipalities	50 084 170.80	45 287 509.88	469 331.59	4 327 329.33	25 607 629.91
2.2	Consultancy services, trainings, and audit	1 320 901.90	1 283 573.84	37 328.06		675 366.42
2.3	Initial fee	195 583.00	195 583.00			100 000.00
II.	Total paid (2.1+2.2+2.3)	51 600 655.70	46 766 666.72	506 659.65	4 327 329.33	26 382 996.32
4	Currency exchange rate differences					
	Funds made available					
III.	Difference between amounts paid and amounts received (I.-II.)	802 632.38	802 632.38	–	0.00	410 379.42
3	Cash					
3.1	In project account	–	–	–	–	–
3.2	Special IBRD account	–	–	–	–	–
5	Funds available	802 632.38	802 632.38	–	0.00	410 379.42
5.1.	Project account	–	–	–	–	–
5.2	Special account with the BNB	802 632.38	802 632.38	–	–	410 379.42
5.3	Government account	–	–	–	–	–
5.4	Municipal cofinancing account	–	–	–	–	–
IV.	Total (5.1+5.2+5.3+5.4)	802 632.38	802 632.38	–	–	410 379.42
	Currency exchange rate: €1 = Lev 1.95583					–

Source: Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016.

Appendix D. Statistical Data and Results

Table D.1. Results Framework and Key Outcome Indicators: Evolution through the Various Restructurings

Original Design (drawn from annex 3 of the PAD, and the loan agreement)	December 2012 Restructuring (drawn from December 2012 restructuring paper)	Supplemental Letter 2 (09/24/2013)
Project Development Objective		
Promote social inclusion through increasing the school readiness of children under age seven, targeting low-income and marginalized families (including children with a disability and other special needs)		
Project Outcome Indicators (age-specific preprimary and early primary school outcome indicators)		
Cognitive development and school readiness scores, including	<p>Revised by replacing original subindicators with single measure of school readiness:</p> <p>Share of vulnerable children age six (participating in the project) who pass the school readiness diagnostic test. Baselines and targets were given for three of four original subindicators.</p> <p>Baseline: 36 percent (baseline impact evaluation survey); target for 2013: 40 percent Data source and methodology: Standardized school readiness diagnostic test administered to children age six participating in the project</p>	<p>Outcome indicator 1 Maintained as revised in December 2012 with change:</p> <p>Extension of target year: from 2013 to 2015</p>
<ul style="list-style-type: none"> Memory, verbal, and visual motor skills development; copying scores (ages 3–5) 	Dropped as a subindicator Baseline 2012: 25 percent; target 2013: 27 percent	
<ul style="list-style-type: none"> Fluency in Bulgarian (ages 5–6) 	Dropped as a subindicator Baseline 2012: 42 percent; target 2013: 45 percent	
<ul style="list-style-type: none"> Achievement test results, including reading tests (age 6–8) 	Dropped as a subindicator Baseline 2012: 36 percent; target 2013: 40 percent	
Child nutrition in target population (proxied by anthropometric measures)	Dropped because of methodological constraints, low reliability, and limited project and country relevance	
	<p>Added as upgraded IOI: Number of children ages 3–6 newly enrolled in kindergartens and preschool groups through the project</p> <p>Baseline 2012: 0; target 2013: 3,000 Data source or methodology: annual Social Inclusion Project (SIP) reporting forms from municipalities</p> <p>This enrollment indicator is a slight revision of an IOI (specifying “absolute number enrolled” instead of the original “rate of enrollment”) and was reclassified as an outcome indicator. The specificity of low-income and marginalized households” in the original IOI articulation is dropped.</p>	<p>Outcome indicator 2 Maintained with changes Extension of target year: from 2013 to 2015 Expansion of age range: from 3–6 to 3–7</p>
	<p>Added as upgraded IOI: Number of children with disabilities and other special needs enrolled in mainstream kindergartens and preschool groups through the project</p> <p>Baseline 2012: 0; target 2013: 150</p>	<p>Outcome indicator 3 Maintained with change</p> <p>Extension of target year: from 2013 to 2015</p>

	Data source or methodology: annual SIP reporting forms from municipalities This enrollment indicator is a slight revision of an IOI (specifying “absolute number enrolled” instead of the original “rate of enrollment”) and reclassified as an outcome indicator. Wording is modified, replacing the original “childcare centers” with “preschool groups” and eliminating the term “in participating municipalities,” though specifying “through the project.”	
	Added: Number of beneficiaries of “early intervention of disabilities” service Baseline 2012: 0; target 2013: 2,000 (quarterly) Data source or methodology: quarterly SIP reporting forms from municipalities	Outcome indicator 4 Maintained with changes Extension of target year: from 2013 to 2015 Reduction of target value: from 2,000 to 1,500
Intermediate Outcomes (IO) and Intermediate Outcome (or Results) Indicators (IOI/IRI)		
Component 1: Integrated social and childcare services		
IO 1: Improvements in child welfare among children from low-income and marginalized families (including children with a disability and other special needs) below age seven in participating municipalities (as articulated in PAD)		
Rate of enrollment in mainstream preschool and kindergarten among children under age seven from low-income and marginalized households	Dropped as an IOI and revised or reclassified as an outcome indicator	
Rate of enrollment of children with a disability in mainstream preschool, kindergarten, and childcare centers in 66 municipalities	Dropped as an IOI and revised or reclassified as an outcome indicator	
Parenting skills (as proxied by frequency and quality of parent-child interaction, such as reading, stories, drawing, and so on) and characteristics of home environment (availability of children books and toys)	Dropped Baseline 2012: -1.31; target 2013: -1.19 Numerator and denominator are not specified.	
Number of children who received full set of immunizations	Dropped Baseline 2011: 86.40 percent; actual 2012: 87.40 percent; target 2013: 88.60 percent	
IO 2: Expansion of coverage of childcare services to children from low-income and marginalized families (including children with a disability and other special needs) below age seven in participating municipalities (as articulated in PAD)		
Number of parents who completed parenting skills sessions	Revised: Number of parents of children ages 0–3 who received parenting skills counseling Baseline 2012: 0; target 2013: 15,000 Data source or methodology: quarterly SIP reporting forms from municipalities	IRI 3 Maintained with changes Extension of target year: from 2013 to 2015 Reduction of target value: from 15,000 to 10,000
Number of children newly placed into kindergarten or childcare facilities through the project (including those with disabilities)		
Rate of inflow of children from poor and marginalized families into institutional care	Dropped	
Number of new childcare places created through the project	Revised: Number of newly created places in kindergarten and preschool groups through the project	IRI 1 Maintained

	Baseline 2012: 0; target 2013: 1,600 (cumulative) Data source or methodology: quarterly SIP reporting forms from municipalities	No change in target year or value
	Added: Number of newly created facilities for delivery of integrated social inclusion services through the project Baseline 2012: 0; target 2013: 68 (cumulative) Data source or methodology: quarterly SIP reporting from municipalities	IRI 2 Maintained No change in target year or value
	Added: Number of children ages 0–6 who benefited from the health consultation services Baseline 2012: 0; target 2013: 15,000 Data source or methodology: quarterly SIP reporting forms from municipalities	IRI 4 Maintained with changes Extension of target year: from 2013 to 2015 Reduction of target value: from 15,000 to 10,000 Expansion of age range from 0–6 to 0–7
Component 2: Capacity building		
	Added: Number of municipal staff trained in public procurement rules and procedures under the project Baseline 2012: 0; target 2013: 120 Data source or methodology: quarterly reporting or lists of participants in training sessions	IRI 1 Maintained No change in target year or value
	Added: SIP project management information system (PMIS) developed and operationalized Baseline: PMIS not developed; target 2011–13: PMIS in use Data source or methodology: quarterly monitoring reports produced through the PMIS	IRI 2 Maintained with change Extension of target year: from 2011 to 2012
	Added: Number of municipal staff trained in project reporting and M&E Baseline: 0; target 2012–13: 120 Data source or methodology: quarterly reporting or lists of participants in training sessions	IRI 3 Maintained with change Extension of target year: from 2012 to 2014
Number of kindergarten and childcare facilities staff having received training.	Revised: Number of kindergarten and crèche staff trained under the project Baseline 2012: 0; target 2013: 1,400 Data source or methodology: quarterly reporting or lists of participants in training sessions	IRI 4 Maintained with changes Extension of target year: from 2013 to 2014 Reduction of target: from 1,400 to 700
	Added: Baseline and final product impact evaluation (IE) surveys conducted Baseline: not conducted; target 2012: baseline IE survey conducted and analytical report with results produced; target 2013: final IE survey conducted and analytical report with results produced Data source or methodology: IE methodology endorsed by MLSP and the World Bank	Dropped

Note: IE = impact evaluation; IO = intermediate outcomes; IOI/IRI = intermediate outcome indicators or intermediate results indicators; M&E = monitoring and evaluation; PAD = project appraisal document; PMIS = project management information system; SIP = Social Inclusion Project.

Box D.1. Social Inclusion Project Components

Component I: Integrated Social and Childcare Services

Grants to municipalities for community subprojects supporting a menu of integrated social and childcare services for marginalized and/or disabled children and their parents, as follows:

- **Programs for children ages 0–3 and their parents**
 - Orientation for marginalized parents of target children, covering prenatal and postnatal parenting skills and information about available health and social services
 - One-to-one parenting counseling for parents with complex needs and those who completed orientation, extended to parents of children over age three, as requested
 - Mobile outreach for less accessible communities (Roma neighborhoods or remote villages), covering parents of children over age three, if needed
- **Programs for children ages 3–6 years and their parents:** menu of supports to increase demand for and supply of places in formal kindergarten, preschools, and alternative childcare
 - Kindergarten fee reduction for guaranteed minimum income recipient parents who enroll in employment agency programs
 - Family (childcare) centers, that enable the following:
 - Interested individuals to be child minders in their own homes or other available buildings adhering to existing standards for social services for children; or
 - Interested community-based organizations (CBOs) to offer childcare services adhering to existing standards
 - Transportation service for parents (private minibus accompanied by staff) for pickup and drop-off of children
 - Health services: examination of kindergarten children by pediatricians and dentists several times a year
- **Infrastructure and material investments** (not to exceed 50 percent of the overall loan volume):
 - Infrastructure rehabilitation in existing kindergarten and childcare buildings;
 - Construction of new childcare centers in underserved areas;
- **Training for service providers** (preservice, refresher and in-service support):
 - Parenting program service providers/childcare providers delivering programs
 - Kindergarten staff training: how to integrate marginalized and early disability detection
 - Child minder training: to qualify marginalized individuals and CBO staff.

Component II: Capacity Building

Support to the design and pilot launch of a national school readiness program and start-up capacity building support, complementing European Social Fund financing for the rollout. Support includes the following:

- **Local project management capacity building**, especially:
 - Interagency and cross-sectoral cooperation (education, health, social services, and assistance)
 - Subcontracting of services to and cooperation with nongovernmental organizations
 - Accessing European Union Structural Fund and Cohesion Fund: project proposal development
- **Impact evaluation:** to inform program design and report on program effectiveness.
 - Establishment of a national baseline of relevant child welfare and educational data
 - Project-specific impact evaluation to reveal project's impact before a full rollout
 - Capacity building for the Ministry of Labour and Social Policy and the Ministry of Education and Science to conduct impact evaluation beyond the Social Inclusion Project
- **Audit and construction works inspection for municipal subprojects**

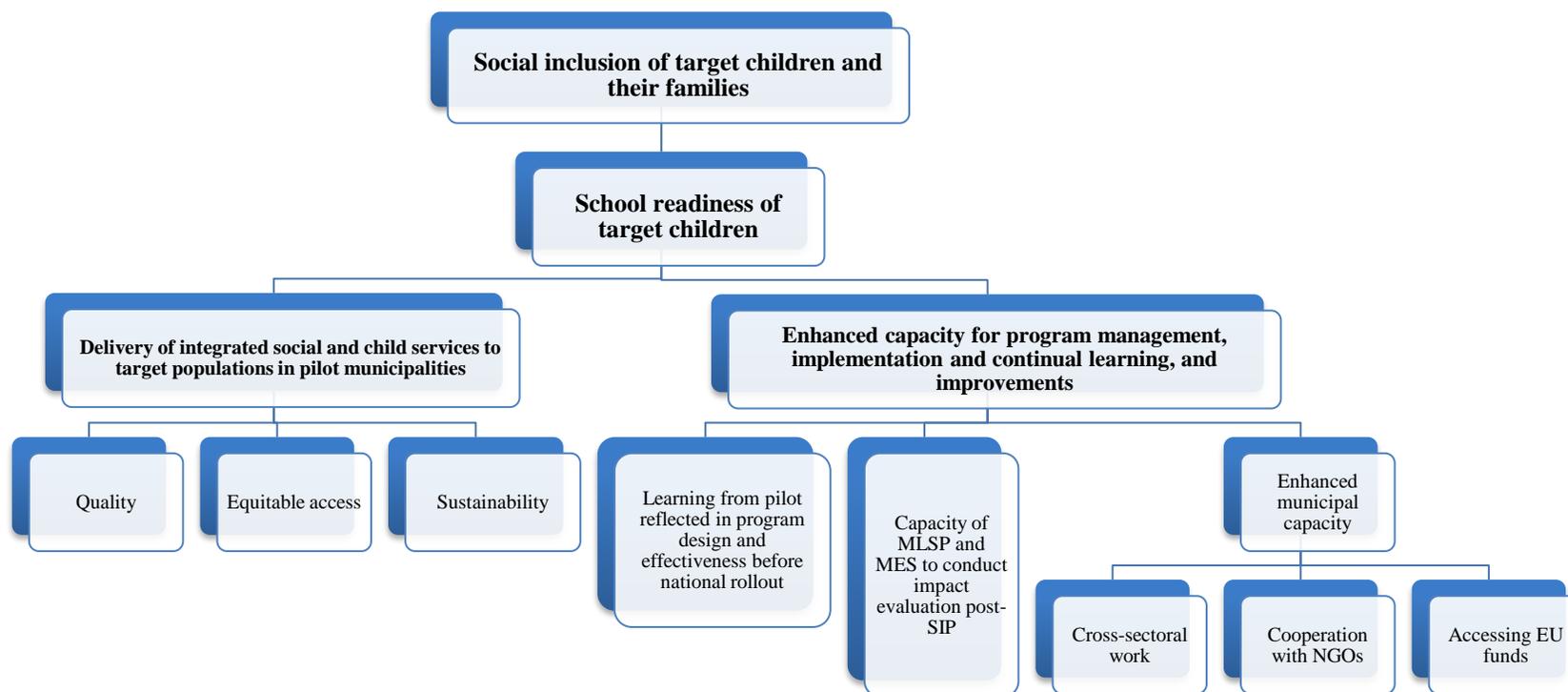
Source: World Bank 2008a.

Table D.2. Social Inclusion Restructuring: Dates and Nature of Amendments

<i>Restructuring Date</i>	<i>Implementing Arrangements</i>	<i>Components</i>	<i>Reallocation or Cancellation of Funds</i>	<i>Indicators Results Framework</i>	<i>Disbursement Schedule</i>	<i>Closing Date</i>
06/09/2010	X				X	
05/31/2011	X					
12/14/2012			X	X	X	
09/30/2013		X	X	X	X	X
09/15/2015						X

Source: World Bank Project Information System and internal supervision reporting.

Figure D.1. Social Inclusion Project Results Chain



Source: World Bank 2008a.

Note: EU = European Union; MES = Ministry of Education and Science; MLSP = Ministry of Labour and Social Policy; NGO = nongovernmental organization; SIP = Social Inclusion Project.

Table D.3. Achievement of Results

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
Project development objective: Promote social inclusion through increasing the school readiness of children below age seven, targeting low-income and marginalized families (including children with a disability and other special needs)					
Social inclusion of target children and their families (short-term trends that project would have impacted)					
More equal starting conditions and opportunity for target children as measured by their performance and success in primary school compared with nonvulnerable children	n.a.	n.a.	n.a.		Not evaluable. Anecdotal evidence revealed during visits to five municipalities, but no systematic data or trends are available.
Reductions in early dropout rates from primary schools					No rating: project effect too early to determine. Field visits and fact checks reveal that ethnically vulnerable girls tend to stay in school until about grade 4, and boys until about grade 8. Earliest beneficiaries of the Social Inclusion Project (SIP) services, including kindergarten, are currently in grade 3.
Reduced inflow into special schools for children with learning difficulties and disabilities					
Outcome Indicator 3: Number of children with disabilities and with special education needs newly enrolled in kindergartens and preschool education groups as a result of the project (wording changed from the original, which focused on rate of enrollment, but was later revised to focus on the absolute number of enrollees)	0	150	471		Target exceeded; partial attribution. Early intervention of disabilities services were launched in 2015. Some of these gains might be attributable to the project, but some might be primarily or equally attributable to Bulgaria's successful campaign to reduce the institutionalization of children substantially (primarily those deprived of parental care and/or those who are disabled or have special needs).
Reduced discrimination of target children in the preschool and primary school settings and in the community at large					No data or trends are available. Sensitization training planned under the project is not reported as having been implemented. Moreover, mission findings from a range of sources (documents, fieldwork, interviews, and other sources) indicate that discrimination is still an issue. Surveys or other instruments or measures might have been useful for tracking trends in this regard.
Parents (and grandparents and other caregivers) better informed and better supported with information and resources for proper care and					

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
nurturing of their children and for better management of obstacles to their social inclusion					
School readiness of target children					
Outcome indicator 1: Share of vulnerable children age 6 (participating in the project) who pass the standardized school readiness diagnostic test (SRT), administered to children age 6 participating in the project	36 percent (2012 impact evaluation survey) 47 percent (2012 baseline value reported in ICR)	40 percent	80 percent (Market LINKS Research and Consulting 2015)		The baseline SRT was conducted in 98 municipalities, some of which were SIP pilot municipalities, but others were not. The SRT passing rate among vulnerable children in project municipalities was used as the baseline. Original sample for 2015: 897 tests, minus 140 tests eliminated for methodological reasons = 757 tests. Of these, 250 match samples were retained to compare with 2012 results. Issues with methodology; attribution; target groups; comparison of 2012 and 2015
Memory, verbal, and visual motor skills development; copying scores (ages 3–5)					
Fluency in Bulgarian (ages 5–6)					Not measured
Nutrition measures					
Full immunization					Vaccination rates: 97 percent for Bacillus Calmette–Guérin (BCG) vaccine; 95 percent for diphtheria, pertussis and tetanus (DPT3) and polio 3; 94 percent for meningococcal vaccine (MCV. Vaccination rates have been relatively stable during the project period and are not disaggregated by ethnic group. According to the National Network of Health Mediators (NNHM), Roma communities have lower immunization rates than the general population. Ninety percent of measles cases recorded during the 2010 outbreak were concentrated within the Roma community. Together with health authorities, NNHM undertook an emergency campaign to stop the epidemic, vaccinating 180,000 children within a two-month period. Reasons for lower immunization rates among the Roma include a lack of information, lack of trust in health providers, and limited access to services for reasons of unaffordability and discrimination by hospitals and service providers who refuse

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
					their treatment. Health mediators continue collaborating with general practitioners to provide culturally adapted information about the benefits of vaccinations and guidance on tracking and honoring vaccination schedules. Source: Reaching Roma: Vaccinating Underserved Minorities, August 2016 (vaccinestoday.eu)
Adoption of good parenting practices fostering child health well-being from conception, safety, early stimulation of the child, and a high value placed on education					No systematic measurement of any changes in awareness or behaviors. Anecdotal evidence obtained through fieldwork reveals mixed trends, at best.
Disabilities of children detected early and mitigated or managed through early disability services					
Intermediate outcome: Delivery of integrated social and child services to target populations in pilot municipalities, with good outcomes					
Maybe subdivided by three types of services:					
Early childhood education services					
Health services					
Social services					
Quality of services					
Equitable coverage of services					
Broken down by vulnerable groups, specifying numerator and denominator					
Who is in the 70 percent? Who is in the 30 percent (target groups disaggregated)					
Time frame of service delivery/phasing (SIP, EU, any gaps)					
Responsiveness to school readiness/early childhood development needs and demands					

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
Outcome Indicator 2: Number of children ages 3–7 newly enrolled in kindergartens and preschool education groups as a result of the project (wording changed from the original, which focused on the rate of enrollment, but was later revised to focus on the absolute number of enrollees)	0	3,000	4,420		Target exceeded but with important caveats. This indicator statement changed in two significant ways from its original articulation, which would lead to a larger number being reported: (i) the specificity of children coming from low-income and marginalized households was dropped; and (ii) the age range was expanded from 3–6 years to 3–7 years. The Independent Evaluation Group’s discussion of this indicator with MLSP and municipality staff revealed their understanding of the target to encompass all children, both because of an overall shortage of spaces and because of the desire for mixed school populations versus segregated schools, especially among the Roma. No breakdown of enrollees by income level or ethnic group is provided.
Attendance at school					Attendance at preschool and kindergarten is somewhat of an issue.

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
Dropouts					
Intermediate outcome indicator 1: Number of newly created places in kindergarten and preschool groups through the project	0	1,600	2,357		Target exceeded. This is an output.
Intermediate outcome indicator 8: Number of kindergarten and crèche staff trained under the project	0	700	1,100		Target exceeded. This activity was financed under the EU-funded operational program Education and Science for Smart Growth. This is an output.
Outcome Indicator 4: Number of beneficiaries of the early intervention of disabilities service (launched in 2015, the last year of implementation)	0	2,000 (set in 2012 after the midterm review) 1,500 (reset in 2013)	4,311		Target exceeded, despite the fact that the service was launched only in 2015, the last year of SIP implementation. This illustrates a strong focus on the promotion and delivery of this service and a strong demand for this service. In addition to the good reputation of the services and outreach work, demand might also have been precipitated by the deinstitutionalization reform and the reinsertion of disabled and special needs children into the communities (families, foster care, group homes, and the like).
Intermediate outcome indicator 2: Number of newly created facilities for delivery of integrated social inclusion services through the project	0	68	113		Target exceeded
Intermediate outcome indicator 3: Number of parents of children ages 0–3 who received parenting skills counseling	0	10,000	12,964		Target exceeded
Intermediate outcome indicator 4: Number of children ages 0–7 who benefited from the health consultation services	0	10,000	39,993		Target exceeded
Equitable access					No data
Affordability, reduced fees					
Mobile versus facility-based					
Transportation to services					
Access to information about services					
Extent of efforts to stimulate latent demand for services					
Absence of discrimination by parents, teachers, and students					

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
Sustainability					No data
Financial					
Technical					
Social					
Political					
Intermediate outcome: Enhanced capacity for program management, implementation, continual learning, and improvements modest achievement					
Learning from pilot reflected in program design and effectiveness before national rollout					Partially achieved. Some learning occurred through the demonstration of a new way to integrate and deliver social services, and through the experience of implementation, ongoing learning, and fine-tuning of service delivery. Learning occurred within and across municipalities. However, the elimination of the impact evaluation undercut a rigorous assessment of the effectiveness of the pilot phase of the program, including changes in parents' behaviors, and a systematic process of documenting achievements and lessons and the fine-tuning of the national school readiness program before its nationwide rollout.
Capacity of MLSP and the Ministry of Education and Science to conduct impact evaluation post-SIP					Not achieved
Enhanced municipal capacity					
Cross-sectoral work					Partially achieved. Good dynamics and cooperation within municipalities, but budgets still mostly allocated to sector silos, and budgets still not sufficiently decentralized to municipalities commensurate with their responsibilities
Strengthened cooperation with NGOs and subcontracting of services to and cooperation with NGOs					Not achieved
Accessing EU funds					Achieved

<i>Expected Outcomes and Intermediate Outcomes^a</i>	<i>Baseline</i>	<i>Target^b</i>	<i>Actual as of December 2015^c</i>	<i>Progress 2016 to Present^d</i>	<i>Rating and Comments</i>
Intermediate outcome indicator 7: Number of municipal staff trained in project reporting and monitoring and evaluation	0	120	144		Target exceeded. However, field visits to five municipalities revealed complete turnover of those who received this training (no one who received training was still there) and no replacements for assuming these roles, resulting in limited capacity for M&E. Numbers of beneficiaries and numbers of service providers are currently tracked under OP HRD financing, but intermediate outcomes and outcomes are not tracked or evaluated. NAMB noted need for project and program management capacity.
Project management capacity established					
Intermediate outcome indicator 5: Number of municipal staff trained in public procurement rules and procedures under the project	0	120	120		Target achieved. Municipality-level procurement was well carried out and respectful of World Bank guidelines.
Intermediate outcome indicator 6: SIP PMIS developed and operationalized			PMIS in use by 2012		Target achieved, but only toward the end of the project (2014–15).

Note: DPT = diphtheria, pertussis, and tetanus; EU = European Union; ICR = Implementation Completion Results Report; M&E = monitoring and evaluation; MLSP = Ministry of Labour and Social Policy; NAMB = National Association of Municipalities in Bulgaria; NGO = nongovernmental organization; NNHM = National Network of Health Mediators; OP HRD = Operational Program Human Resources Development; PMIS = project management information system; SIP = Social Inclusion Project; SRT = school readiness test.

a. Original labels and numbers of outcome and intermediate outcome indicators are retained for the purposes of transparency and easy reference to the project's results framework. However, they do not necessarily match this evaluation's definitions of outcome and intermediate outcome indicators.

b. The target was initially set for 2013, but was later extended to 2015.

c. December 2015 marked the end of World Bank financing.

d. This column presents progress under OP HRD financing.

Table D.4. Sixty-Six Municipalities Funded under the Social Inclusion Project, as of December 31, 2014

Number	Municipality	Value of Construction (Lev)			Value of Services and Furniture and Materials (Lev)			Amount of the Project (Lev)		
		World Bank	From World Bank Loan (%)	Municipality	World Bank	From World Bank Loan (%)	Municipality	World Bank	Municipality	Total
1	Ardino	263 629.31	43	0.00	354 830.33	57	0.00	618 459.64	0.00	618 459.64
2	Assenovgrad	551 879.81	55	100 000.00	452 243.04	45	0.00	1 004 122.85	100 000.00	1 104 122.85
3	Avren	198 698.97	50	0.00	199 561.43	50	0.00	398 260.40	0.00	398 260.40
4	Aytos	250 112.00	60	98 700.64	169 535.74	40	0.00	419 647.74	98 700.64	518 348.38
5	Blagoevgrad	1 338 680.00	82	400 000.00	285 413.55	18	122 880.00	1 624 093.55	522 880.00	2 146 973.55
6	Bourgas	1 297 740.00	59	1 513 112.61	886 008.72	41	198 000.00	2 183 748.72	1 711 112.61	3 894 861.33
7	Byala	87 548.38	23	0.00	298 069.18	77	0.00	385 617.56	0.00	385 617.56
8	Byala Slatina	306 381.48	46	0.00	363 545.83	54	0.00	669 927.31	0.00	669 927.31
9	Chirpan	499 646.38	72	0.00	199 133.02	28	10 920.00	698 779.40	10 920.00	709 699.40
10	Devin	196 006.58	31	0.00	445 079.22	69	0.00	641 085.80	0.00	641 085.80
11	Dimitrovgrad	466 334.07	52	0.00	424 810.20	48	51 840.00	891 144.27	51 840.00	942 984.27
12	Dobrich, City	497 104.27	49	0.00	507 895.58	51	0.00	1 004 999.85	0.00	1 004 999.85
13	Dobrich, District Municipality	204 064.66	31	0.00	464 275.33	69	0.00	668 339.99	0.00	668 339.99
14	Dolni Chiflik	548 086.53	80	11 935.41	135 250.48	20	17 280.00	683 337.01	29 215.41	712 552.42
15	Dolni Dabnik	208 691.96	34	0.00	408 236.49	66	0.00	616 928.45	0.00	616 928.45
16	Dupnitsa	465 376.30	47	0.00	518 697.34	53	10 671.00	984 073.64	10 671.00	994 744.64
17	Elena	99 183.37	15	0.00	550 120.37	85		649 303.74	0.00	649 303.74
18	Gabrovo	991 382.00	80	101 618.00	240 843.66	20	26 000.00	1,232, 225.66	127 618.00	1 359 843.66
19	General Toshevo	353 803.39	53	0.00	316 304.67	47	31 495.50	670 108.06	31 495.50	701 603.56
20	Haskovo	767 970.70	71	0.00	308 165.72	29	0.00	1 076 136.42	0.00	1 076 136.42
21	Kameno	318 091.69	48	0.00	340 246.93	52	0.00	658 338.62	0.00	658 338.62
22	Karlovo	127 166.01	13	0.00	839 408.16	87	48 000.00	966 574.17	48 000.00	1 014 574.17

23	Kirkovo	128 999.52	27	0.00	346 000.84	73	0.00	475 000.36	0.00	475 000.36
24	Knezha	187 803.31	29	0.00	453 545.55	71	5 000.00	641 348.86	5 000.00	646 348.86
25	Krumovgrad	272 334.43	41	0.00	386 132.35	59	54 900.00	658 466.78	54 900.00	713 366.78
26	Krushari	60 654.70	19	0.00	255 540.90	81	0.00	316 195.60	0.00	316 195.60
27	Kubrat	86 565.76	20	0.00	342 220.58	80	0.00	428 786.34	0.00	428 786.34
28	Kyustendil	326 135.88	40	0.00	494 628.60	60	145 584.00	820 764.48	145 584.00	966 348.48
29	Lom	53 981.32	10	0.00	478 138.23	90	41 496.00	532 119.55	41 496.00	573 615.55
30	Maritza	382 000.00	59	90 641.66	260 659.76	41	33 125.00	642 659.76	123 766.66	766 426.42
31	Montana	647 679.81	64	0.00	357 482.54	36	18 020.00	1 005 162.35	18 020.00	1 023 182.35
32	Nikolaevo	89 981.99	22	1 131.78	323 819.90	78	0.00	413 801.89	1 131.78	414 933.67
33	Pazardjik	968 328.11	70	0.00	420 054.58	30	395 928.00	1 388 382.69	395 928.00	1 784 310.69
34	Pernik	577 647.72	69	400 000.00	264 565.36	31	108 000.00	842 213.08	508 000.00	1 350 213.08
35	Petrich	418 735.47	56	0.00	335 196.45	44	0.00	753 931.92	0.00	753 931.92
36	Pleven	726 184.42	54	0.00	614 032.05	46	0.00	1 340 216.47	0.00	1 340 216.47
37	Plovdiv	1 494 848.18	66	0.00	758 746.76	34	25 000.00	2 253 594.94	25 000.00	2 278 594.94
38	Pravetz	202 350.36	51	0.00	195 896.64	49	0.00	398 247.00	0.00	398 247.00
39	Provadia	196 548.00	39	0.00	312 073.36	61	47 860.00	508 621.36	47 860.00	556 481.36
40	Razgrad	311 818.59	31	0.00	693 343.76	69	0.00	1 005 162.35	0.00	1 005 162.35
41	Rila	23 573.44	0.06	0.00	383 335.55	94	21 600.00	406 908.99	21 600.00	428 508.99
42	Rousse	1 096 920.44	80	0.00	267 896.38	20	0.00	1 364 816.82	0.00	1 364 816.82
43	Samokov	443 402.00	48	540 803.04	488 004.89	52	0.00	931 406.89	540 803.04	1 472 209.93
44	Samuil	275 469.37	59	0.00	190 673.78	41	12 600.00	466 143.15	12 600.00	478 743.15
45	Sevlievo	511 607.28	73	0.00	189 180.96	27	0.00	700 788.24	0.00	700 788.24
46	Shoumen	762 400.83	55	0.00	626 082.67	45	0.00	1 388 483.50	0.00	1 388 483.50
47	Sliven	1 100 011.00	79	238 595.32	298 176.03	21	123 120.00	1 398 187.03	361 715.32	1 759 902.35
48	Slivo Pole	285 751.15	43	0.00	374 647.47	57	0.00	660 398.62	0.00	660 398.62
49	Smolyan	541 820.41	55	0.00	444 702.04	45	1 800.00	986 522.45	1 800.00	988 322.45
50	Sofia Greater Municipality	2 245 360.00	54	912 083.47	1 915 677.09	46	32 400.00	4 161 037.09	944 483.47	5 105 520.56

51	Sredetz	376 889.14	55	0.00	313 853.04	45	780 000.00	690 742.18	780 000.00	1 470 742.18
52	Stara Zagora	865 284.92	67	0.00	427 470.30	33	260 850.00	1 292 755.22	260 850.00	1 553 605.22
53	Straldja	278 000.00	49	0.00	289 785.22	51	26 640.00	567 785.22	26 640.00	594 425.22
54	Strazhitza	142 923.92	23	16 959.33	469 531.55	77	29 160.00	612 455.47	46 119.33	658 574.80
55	Targovishte	539 935.00	58	0.00	392 045.68	42	0.00	931 980.68	0.00	931 980.68
56	Teteven	199 586.40	30	0.00	467 965.37	70	0.00	667 551.77	0.00	667 551.77
57	Trun	125 858.39	40	20 000.00	186 134.45	60	0.00	311 992.84	20 000.00	331 992.84
58	Tundja	144 650.87	20	0.00	567 445.53	80	54 543.78	712 096.40	54 543.78	766 640.18
59	Varna	1 199 472.05	73	0.00	449 410.51	27	31 048.00	1 648 882.56	31 048.00	1 679 930.56
60	Veliko Tarnovo	374 499.44	43	0.00	498 000.75	57	7 900.00	872 500.19	7 900.00	880 400.19
61	Velingrad	158 882.52	18	0.00	746 143.88	82	11 475.00	905 026.40	11 475.00	916 501.40
62	Vidin	377 718.25	30	0.00	882 548.44	70	0.00	1 260 266.69	0.00	1 260 266.69
63	Vratza	386 407.35	38	0.00	638 394.41	62	60 000.00	1 024 801.76	60 000.00	1 084 801.76
64	Vulchi Dol	268 515.29	56	0.00	209 780.33	44	0.00	478 295.62	0.00	478 295.62
65	Yakoruda	240 222.53	54	0.00	203 699.05	46	9 758.33	443 921.58	9 758.33	453 679.91
66	Yambol	1 131 725.49	83	11 734.00	234 314.40	17	0.00	1 366 039.89	11 734.00	1 377 773.89
	Total	31,267 062.91	53	4 457 315.26	28 154 652.97	47	2 854 894.61	59 421 715.88	7 312 209.87	66 733 925.75

Source: : Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016.

Table D.5. SIP Municipalities that Opened New Nursery and Kindergarten Places

<i>No.</i>	<i>Municipality</i>	<i>Nursery Groups</i>	<i>Places in Nursery Group</i>	<i>Total Places in Nurseries</i>	<i>Kindergarten Groups</i>	<i>Places in Kindergarten Groups</i>	<i>Total Places in Kindergarten Groups</i>	<i>Total Nurseries + Kindergarten Groups</i>
	Sofia Municipality: Ovcha Kupel District			0	1	25	25	25
	Sofia Municipality: Druzha District			20	1	25	25	45
1	Sofia Municipality: Slatina District			0	3	25	75	75
2	Bourgas:Block A			0	4	25	100	100
	Bourgas:Block B	1	20	20	3	25	75	95
3	Varna			0	4	25	100	100
4	Shoumen	1	18	18	3	18	54	72
5	Yambol	1	20	20	2	25	50	70
6	Assenovgrad			0	2	24	48	48
7	Smolyan			0	1	18	18	18
8	Pernik			0	3	24	72	72
9	Sredetz			0	2	25	50	50
10	Yakoruda			0	2	24	48	48
11	Aytos	1	16	16	2	24	48	64
12	Devin	1	18	18	1	22	22	40
13	Kameno			0	1	22	22	22
14	Slivo Pole			0	1	22	22	22
15	Chirpan			0	1	22	22	22
16	Samuil	1	18	18				18
17	Dolni Chiflik			0	2	24	48	48
18	Maritza			0	2	16	32	32
19	Petrich			0	2	22	44	44
20	Plovdiv	2	18	36	4	24	96	132
21	Vulchi Dol							
22	Montana				1	24	24	24
23	Pazardjik				2	25	50	50
24	Haskovo	1	18	18				18
25	Stara Zagora				4	24	96	96
26	Blagoevgrad				4	25	100	100
27	Sliven				4	24	96	96
28	Rousse				4	25	100	100
29	Pleven				2	25	50	50
30	Strazhitza				1	21	21	21
31	Gabrovo				3	24	72	72
	Total			184			1,705	1,889

Source: Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016.

Table D.6. Targets and Indicators Established for EU Financing under OP HRD, Post-SIP

<i>No.</i>	<i>Performance Indicator</i>			<i>Result Indicator</i>		
	<i>Indicator</i>	<i>Measuring Unit</i>	<i>Target Value</i>	<i>Indicator</i>	<i>Measuring Unit</i>	<i>Target Value</i>
1.	Number of service providers for social inclusion	Number	66	Number of children who received service support	Number	15,000
2.				Number of service providers for social inclusion that expanded the scope of their activities	Number	At least 8

Source: Ministry of Labour Social Policy, OP HRD Program Data.

Note: EU = European Union; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.7. Achievements as of February 2018 under OP HRD Financing, Post-SIP

<i>No.</i>	<i>Performance Indicator</i>			<i>Result Indicator</i>		
	<i>Indicator</i>	<i>Measuring Unit</i>	<i>Actual</i>	<i>Indicator</i>	<i>Measuring Unit</i>	<i>Actual</i>
1.	Number of service providers for social inclusion	Number	64	Number of children who received service support	Number	19,096
2.				Number of service providers for social inclusion that expanded the scope of their activities	Number	At least 3

Source: Ministry of Labour and Social Policy, Summary: Procedure BG05M9OP001-2.004, “Services for Early Childhood Development,” Priority Axis No. 2: “Reducing Poverty and Promoting Social Inclusion.”

Note: EU = European Union; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.8. OP HRD–Funded ECD Activities in SIP Pilot Municipalities, Post-SIP

<i>No.</i>	<i>Municipality</i>	<i>Early Intervention of Disabilities</i>	<i>Individual Pedagogical Support for Children with Disabilities</i>	<i>Psychological Support and Counseling to Parents, Children and Families to Promote Well-being and School Attendance</i>	<i>Support for Providing Child Health Consultation and Disease Prevention Activities</i>	<i>Additional Pedagogical Training to Increase the School Readiness of Children for an Equal Start in School</i>	<i>Family Center for Children Ages 0–3</i>
1	Avren		✓	✓	✓	✓	
2	Aytos			✓	✓	✓	
3	Ardino	✓	✓	✓	✓	✓	✓
4	Assenovgrad	✓	✓	✓	✓	✓	
5	Blagoevgrad	✓	✓	✓	✓	✓	
6	Bourgas	✓	✓	✓	✓	✓	✓
7	Byala (Rousse Province)	✓	✓	✓	✓	✓	
8	Byala Slatina	✓		✓	✓	✓	
9	Varna	✓	✓	✓	✓	✓	✓
10	Veliko Tarnovo	✓	✓	✓	✓	✓	✓
11	Velingrad	✓	✓	✓	✓	✓	
12	Vidin		✓	✓	✓	✓	
13	Vratsa	✓	✓	✓	✓	✓	✓
14	Valchi Dol	✓	✓	✓	✓	✓	
15	Gabrovo	✓	✓	✓	✓	✓	
16	General Toshevo			✓	✓	✓	
17	Devin	✓	✓	✓	✓	✓	
18	Dimitrovgrad	✓	✓	✓	✓	✓	
19	Dobrich, City	✓	✓	✓	✓	✓	✓
20	Dobrich, District	✓	✓	✓	✓		
21	Dolni Dabnik	✓		✓	✓	✓	
22	Dolni Chiflik		✓	✓	✓	✓	
23	Dupnitsa	✓	✓	✓	✓	✓	✓
24	Elena	✓	✓	✓	✓	✓	
25	Kameno		✓	✓	✓	✓	
26	Karlovo	✓	✓	✓	✓	✓	
27	Kirkovo	✓	✓	✓	✓	✓	
28	Knezha			✓	✓	✓	

<i>No.</i>	<i>Municipality</i>	<i>Early Intervention of Disabilities</i>	<i>Individual Pedagogical Support for Children with Disabilities</i>	<i>Psychological Support and Counseling to Parents, Children and Families to Promote Well-being and School Attendance</i>	<i>Support for Providing Child Health Consultation and Disease Prevention Activities</i>	<i>Additional Pedagogical Training to Increase the School Readiness of Children for an Equal Start in School</i>	<i>Family Center for Children Ages 0-3</i>
29	Krumovgrad	✓	✓	✓	✓	✓	
30	Krushari		✓	✓	✓	✓	
31	Kubrat			✓	✓	✓	
32	Kyustendil	✓	✓	✓	✓	✓	
33	Lom	✓	✓	✓	✓	✓	
34	Maritsa	contract terminated					
35	Montana	✓	✓	✓	✓	✓	
36	Nikolaeco			✓	✓	✓	
37	Pazardzhik	✓	✓	✓	✓		
38	Pernik	✓	✓	✓	✓	✓	
39	Petrich	✓	✓	✓	✓	✓	
40	Pleven	✓	✓	✓	✓	✓	
41	Plovdiv	✓	✓	✓	✓	✓	
42	Pravets			✓	✓	✓	
43	Provadia		✓	✓	✓	✓	✓
44	Razgrad	✓	✓	✓	✓	✓	
45	Rila		✓	✓	✓	✓	
46	Rousse	✓	✓	✓	✓	✓	
47	Samokov	✓	✓	✓	✓	✓	
48	Samuil	✓		✓	✓	✓	
49	Sevlievo	✓	✓	✓	✓	✓	
50	Sliven	✓	✓	✓	✓	✓	
51	Slivo Pole	✓	✓	✓	✓	✓	
52	Smolyan	✓	✓	✓	✓	✓	
53	Sredets	✓	✓	✓	✓	✓	
54	Stara Zagora	✓	✓	✓	✓	✓	
55	Sofia Greater Municipality	✓	✓	✓	✓	✓	
56	Strajitsa	✓	✓	✓	✓	✓	
57	Straldzha			✓	✓	✓	
58	Teteven	✓		✓		✓	✓
59	Trun	✓	✓	✓	✓	✓	
60	Tundzha	✓	✓	✓	✓	✓	
61	Targovishte	✓	✓	✓	✓	✓	

<i>No.</i>	<i>Municipality</i>	<i>Early Intervention of Disabilities</i>	<i>Individual Pedagogical Support for Children with Disabilities</i>	<i>Psychological Support and Counseling to Parents, Children and Families to Promote Well-being and School Attendance</i>	<i>Support for Providing Child Health Consultation and Disease Prevention Activities</i>	<i>Additional Pedagogical Training to Increase the School Readiness of Children for an Equal Start in School</i>	<i>Family Center for Children Ages 0–3</i>
62	Haskovo	✓	✓	✓	✓	✓	
63	Chirpan	✓	✓	✓	✓	✓	
64	Shumen	✓	✓				
65	Yakoruda	contract not signed					
66	Yambol	✓	✓	✓	✓	✓	

Source: Ministry of Labour and Social Policy.

Note: ECD = early childhood development; EU = European Union; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Reported Results of the Social Inclusion Project under the World Bank–Financed and OP HRD–Funded Phases

The review of the Social Inclusion Project documentation provided by the Ministry of Labour and Social Policy shows that project outputs and lower-level outcomes were monitored and reported during the World Bank–financed phase of the project. As the results tables for five municipalities show (tables D.8a–e), targets were set for municipal-level outputs and lower-level outcomes, but information is missing regarding their actual values reached at the end of 2015. However, there is information about the obtained cumulative project results for all 66 municipalities that implemented projects with SIP grants.¹ During the ongoing Operational Program Human Resources Development (OP HRD)–funded phase of the project, cumulative and municipal-level targets are established only for outputs, namely, the number of service providers for social inclusion and number of children receiving service support², whereas municipalities also report outputs disaggregated by type of service or intervention.

Table D.9. Byala Slatina Municipality: Social Inclusion Project Results

<i>No.</i>	<i>SIP Results Indicators</i>	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
		<i>Service delivery time frame: 07/01/2014–12/31/2016</i>			<i>Service delivery time frame: 08/03/2016–10/03/2018</i>		
		INDICATOR VALUE			INDICATOR VALUE		
		Baseline	Target	Actual	Baseline	Target	Intermediate (date not specified)
1	Kindergarten enrollment rate of children up to age seven years from low-income	n.a.	80 percent	n.a.	n.a.	n.a.	n.a.

No.	SIP Results Indicators	World Bank–Financed Phase			OP HRD–Funded Phase		
		Service delivery time frame: 07/01/2014–12/31/2016			Service delivery time frame: 08/03/2016–10/03/2018		
		INDICATOR VALUE			INDICATOR VALUE		
		Baseline	Target	Actual	Baseline	Target	Intermediate (date not specified)
	families and different ethnic groups, specifically Roma						
2	Preschool enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	80 percent	n.a.	n.a.	n.a.	n.a.
3	Kindergarten enrollment rate of children with disabilities	n.a.	80 percent	n.a.	n.a.	n.a.	n.a.
4	Preschool enrollment rate of children with disabilities	n.a.	80 percent	n.a.	n.a.	n.a.	n.a.
5	Number of new nursery and kindergarten places opened	n.a.	9	n.a.	n.a.	n.a.	n.a.
6	Number of newly created kindergarten and preschool places as a result of the project	n.a.	18	18	n.a.	n.a.	n.a.
7	Number of project beneficiary children enrolled in first grade	n.a.	70	n.a.	n.a.	n.a.	n.a.
8	Number of newly created places (spaces) for providing integrated services for social inclusion as a result of the project	n.a.	3	3	n.a.	n.a.	n.a.
9	Number of target children who have had all compulsory immunizations and health checkups	n.a.	100	n.a.	n.a.	n.a.	n.a.
10	Number of prevented child abandonments	n.a.	4	n.a.	n.a.	n.a.	n.a.
11	Institutional care placement rate among children from poor and vulnerable families	n.a.	–15 percent	n.a.	n.a.	n.a.	n.a.
12	Number of nursery and kindergarten staff members trained under the project (not required anymore)	n.a.	52	—	—	—	—
13	Number of parents who participated in the family counseling and support groups	n.a.	390	n.a.	n.a.	n.a.	130
14	Number of parents of children ages 0–3 who participated in the family counseling and support groups	n.a.	250	778	n.a.	n.a.	n.a.
15	Number of prospective parents who participated in the family counseling and support groups	n.a.	n.a.	n.a.	n.a.	n.a.	12

No.	SIP Results Indicators	World Bank–Financed Phase			OP HRD–Funded Phase		
		Service delivery time frame: 07/01/2014–12/31/2016			Service delivery time frame: 08/03/2016–10/03/2018		
		INDICATOR VALUE			INDICATOR VALUE		
	Baseline	Target	Actual	Baseline	Target	Intermediate (date not specified)	
16	Number of children beneficiaries of child counseling (health checkups)	n.a.	3,200	2,788	n.a.	n.a.	182
17	Number of parents who do not take sufficient care of their children	n.a.	–4	n.a.	n.a.	n.a.	n.a.
18	Number of children beneficiaries of early disability intervention services for children with disabilities	n.a.	120	12	n.a.	n.a.	22
19	Number of parent beneficiaries of early intervention services for children with disabilities who have children diagnosed with various diseases	n.a.	n.a.	n.a.	n.a.	n.a.	30
20	Number of children beneficiaries of summer school activities	n.a.	n.a.	n.a.	n.a.	n.a.	30
21	Number of beneficiaries of counseling services	n.a.	300	n.a.	n.a.	n.a.	n.a.
22	Number of children enrolled in kindergarten, nursery, and/or other childcare services as a result of the project	n.a.	82	n.a.	n.a.	n.a.	n.a.
23	Number of children ages 3–7 enrolled in kindergarten and preschool as a result of the project	n.a.	25	21	n.a.	n.a.	n.a.
24	Number of disabled children enrolled in kindergarten and preschool as a result of the project	n.a.	10	3	n.a.	n.a.	n.a.
25	Total number of service providers for social inclusion	n.a.	n.a.	n.a.	n.a.	1	n.a.
26	Total number of children receiving service support	n.a.	n.a.	n.a.	n.a.	300	341

Source: Byala Slatina Municipality, SIP Proposal (2010); ; Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016; project documentation provided by the Ministry of Labour and Social Policy related to Social Inclusion Project activities, and intermediate results since OP HRD took over the project's funding.

Note: — = not applicable; n.a. = not available; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.10. Haskovo Municipality SIP Results

<i>SIP Results Indicators</i>	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
	<i>Service delivery time frame: 07/01/2014–12/31/2015</i>			<i>Service delivery time frame: 06/30/2016–08/30/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
	Baseline	Target	Actual	Baseline	Target	Intermediate (02/08/2018)
Kindergarten enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	70 percent	n.a.	n.a.	n.a.	n.a.
Preschool enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	70 percent	n.a.	n.a.	n.a.	n.a.
Kindergarten enrollment rate of children with disabilities	n.a.	90 percent	n.a.	n.a.	n.a.	n.a.
Number of children ages 3–7 enrolled in kindergarten and preschool as a result of the project	n.a.	–	12	n.a.	n.a.	n.a.
Preschool enrollment rate of children with disabilities	n.a.	90 percent	n.a.	n.a.	n.a.	n.a.
Number of disabled children enrolled in kindergarten and preschool as a result of the project	n.a.	–	2	n.a.	n.a.	n.a.
Number of project beneficiary children enrolled in first grade	n.a.	98 percent	n.a.	n.a.	n.a.	n.a.
Number of newly created places (spaces) for providing integrated services for social inclusion as a result of the project	n.a.	1	1	n.a.	n.a.	n.a.
Number of children who have had all compulsory immunizations and health checkups	n.a.	90 percent	n.a.	n.a.	n.a.	n.a.
Number of children beneficiaries of health counseling and disease prevention activities for children	n.a.	605	837	n.a.	n.a.	175
Number of prevented child abandonments	n.a.	5	n.a.	n.a.	n.a.	n.a.
Institutional care placement rate among children from poor and vulnerable families	n.a.	–3	n.a.	n.a.	n.a.	n.a.
Number of nursery and kindergarten staff members trained under the project (not required anymore)	n.a.	15	—	—	—	—
Number of parents who participated in the family counseling and support groups	n.a.	50	n.a.	n.a.	n.a.	n.a.
Number of parents of children ages 0–3 who participated in the family counseling and support groups	n.a.	80	303	n.a.	n.a.	n.a.
Number of parents who do not take sufficient care of their children	n.a.	–5	n.a.	n.a.	n.a.	n.a.
Number of beneficiaries of counseling services	n.a.	40	n.a.	n.a.	n.a.	n.a.

	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
	<i>Service delivery time frame: 07/01/2014–12/31/2015</i>			<i>Service delivery time frame: 06/30/2016–08/30/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
<i>SIP Results Indicators</i>	Baseline	Target	Actual	Baseline	Target	Intermediate (02/08/2018)
Number of children beneficiaries of family counseling services	n.a.	n.a.	n.a.	n.a.	n.a.	637
Number of children beneficiaries of early intervention of disabilities services	n.a.	110	94	n.a.	n.a.	160
Number of children enrolled in kindergarten, nursery, and/or other childcare services as a result of the project	n.a.	5	n.a.	n.a.	n.a.	n.a.
Total number of service providers for social inclusion	n.a.	n.a.	n.a.	n.a.	1	n.a.
Total number of children receiving service support	n.a.	n.a.	n.a.	n.a.	920	702

Source: Haskovo Municipality, SIP Proposal (2010); Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–December 31, 2015; project documentation provided by the Ministry of Labour and Social Policy related to SIP activities, and intermediate results since OP HRD took over the project’s funding.
Note: — = not applicable; n.a. = not available; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.11. Pazardzik Municipality SIP Results

	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
	<i>Service delivery time frame: 11/01/2014–12/31/2015</i>			<i>Service delivery time frame: 05/11/2016–12/11/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
<i>Project Results Indicators</i>	Baseline	Target	Actual	Baseline	Target	Intermediate (01/31/2018)
Kindergarten enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	10 percent	n.a.	n.a.	n.a.	n.a.
Preschool enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	20 percent	n.a.	n.a.	n.a.	n.a.
Kindergarten enrollment rate of children with disabilities	n.a.	15 percent	n.a.	n.a.	n.a.	n.a.
Number of children ages 3–7 enrolled in kindergarten and preschool as a result of the project	n.a.	48	49	n.a.	n.a.	n.a.
Number of disabled children enrolled in kindergarten and preschool as a result of the project	n.a.	20	0	n.a.	n.a.	n.a.
Preschool enrollment rate of children with disabilities	n.a.	10 percent	n.a.	n.a.	n.a.	n.a.
Number of children beneficiaries of health consultations	n.a.	150	524	n.a.	n.a.	n.a.

<i>Project Results Indicators</i>	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
	<i>Service delivery time frame: 11/01/2014–12/31/2015</i>			<i>Service delivery time frame: 05/11/2016–12/11/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
	Baseline	Target	Actual	Baseline	Target	Intermediate (01/31/2018)
Number of new nursery and kindergarten places opened under SIP	n.a.	75	50	n.a.	n.a.	n.a.
Number of new kindergarten and preschool places opened under the project	n.a.	2	50	n.a.	n.a.	n.a.
Number of project beneficiary children enrolled in first grade	n.a.	240	n.a.	n.a.	n.a.	n.a.
Number of children who have had all compulsory immunizations and health checkups	n.a.	70	n.a.	n.a.	n.a.	n.a.
Number of prevented child abandonments	n.a.	5	n.a.	n.a.	n.a.	n.a.
Institutional care placement rate among children from poor and vulnerable families	n.a.	–10	n.a.	n.a.	n.a.	n.a.
Number of newly created places (spaces) for integrated services for social inclusion	n.a.	1	1	n.a.	n.a.	n.a.
Number of nursery and kindergarten staff members trained under the project (not required anymore or dropped)	n.a.	70	–	–	–	–
Number of parents who participated in the family counseling and support groups	n.a.	69	n.a.	n.a.	n.a.	59
Number of parents of children ages 0–3 who participated in the family counseling and support groups	n.a.	50	207	n.a.	n.a.	n.a.
Number of foster parents who participated in the family counseling and support groups	n.a.	n.a.	n.a.	n.a.	n.a.	37
Number of parents who do not take sufficient care of their children	n.a.	–10	n.a.	n.a.	n.a.	n.a.
Number of beneficiaries of counseling services	n.a.	95	n.a.	n.a.	n.a.	n.a.
Number of children enrolled in kindergarten, nursery, and/or other childcare services as a result of the project	n.a.	25	n.a.	n.a.	n.a.	n.a.
Total number of service providers for social inclusion	n.a.	n.a.	n.a.	n.a.	1	1
Total number of children receiving service support	n.a.	n.a.	n.a.	n.a.	590	249

Source: Pazardzhik Municipality, SIP Proposal (2010); Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–December 31, 2015; project documentation provided by the Ministry of Labor and Social Policy related to SIP activities, and intermediate results since OP HRD took over the project's funding.

Note: — = not applicable; n.a. = not available; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.12. Plovdiv Municipality SIP Results

<i>Project Results Indicators</i>	<i>World Bank–Financed Phase</i>			<i>OP HRD–Funded Phase</i>		
	<i>Service delivery time frame: 10/29/2014–12/31/2015</i>			<i>Service delivery time frame: 07/26/2016–09/26/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
	Baseline	Target	Actual	Baseline	Target	Intermediate (date not specified)
Kindergarten enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	40	n.a.	n.a.	n.a.	n.a.
Preschool enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	45	n.a.	n.a.	n.a.	n.a.
Number of children ages 3–7 enrolled in kindergarten and preschool under the project	n.a.	160	81	n.a.	n.a.	n.a.
Number of disabled children enrolled in kindergarten and preschool under the project	n.a.	20	2	n.a.	n.a.	n.a.
Kindergarten enrollment rate of children with disabilities	n.a.	20	n.a.	n.a.	n.a.	n.a.
Number of children benefiting from early intervention of disabilities	n.a.	100	208	n.a.	n.a.	n.a.
Preschool enrollment rate of children with disabilities	n.a.	20	n.a.	n.a.	n.a.	n.a.
Number of new nursery and kindergarten places opened under SIP	n.a.	28	132	n.a.	n.a.	n.a.
Number of project beneficiary children enrolled in first grade	n.a.	70	n.a.	n.a.	n.a.	n.a.
Number of newly opened kindergarten and preschool places under the project	n.a.	60	40	n.a.	n.a.	n.a.
Number of newly opened places (spaces) for integrated services for social inclusion under the project	n.a.	1	1	n.a.	n.a.	n.a.
Number of children who have had all compulsory immunizations and health checkups	n.a.	150	n.a.	n.a.	n.a.	n.a.
Number of prevented child abandonments	n.a.	60	n.a.	n.a.	n.a.	n.a.
Institutional care placement rate among children from poor and vulnerable families	n.a.	–60	n.a.	n.a.	n.a.	n.a.
Number of nursery and kindergarten staff members trained under the project (not required anymore)	n.a.	10	–	–	–	–
Number of parents who participated in the family counseling and support groups	n.a.	250	n.a.	n.a.	n.a.	n.a.

Number of parents of children ages 0–3 who participated in the family counseling and support groups	n.a.	200	80	n.a.	n.a.	n.a.
Number of children ages 0–7 who benefited from health consultation	n.a.	120	1,000	n.a.	n.a.	n.a.
Number of parents who do not take sufficient care of their children	n.a.	–120	n.a.	n.a.	n.a.	n.a.
Number of beneficiaries of counseling services	n.a.	865	n.a.	n.a.	n.a.	n.a.
Number of children enrolled in kindergarten, nursery, and/or other childcare services as a result of the project	n.a.	68	n.a.	n.a.	n.a.	n.a.
Number of health workers who received trainings under the project	n.a.	30	n.a.	n.a.	n.a.	n.a.
Share of project beneficiaries with positive feedback about the project	n.a.	50 percent	n.a.	n.a.	n.a.	n.a.
Share of beneficiary children with progress in their development and the care for them during the project	n.a.	60 percent	n.a.	n.a.	n.a.	n.a.
Number of children from isolated communities and children with special needs who are integrated in family centers, preschools, and summer schools	n.a.	120	n.a.	n.a.	n.a.	n.a.
Number of children ages 0–3 for whom substituting baby care is provided in their homes from a babysitter	n.a.	8	n.a.	n.a.	n.a.	n.a.
Number of children in kindergartens who have had psychomotor and physical development checks under the project	n.a.	400	n.a.	n.a.	n.a.	n.a.
Total number of service providers for social inclusion	n.a.	n.a.	n.a.	n.a.	1	1
Total number of children receiving service support	n.a.	n.a.	n.a.	n.a.	875	223

Source: Plovdiv Municipality, SIP Proposal (2010); Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–December 31, 2015; project documentation provided by the Ministry of Labour and Social Policy related to SIP activities, and intermediate results since OP HRD took over the project’s funding.

Note: — = not applicable; n.a. = not available; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.13. Pravets Municipality SIP Results

<i>Project Results Indicators</i>	<i>World Bank–Financed Phase</i> <i>Service delivery time frame:</i> <i>03/01/2013–12/31/2015</i> <i>01-Mar-2015 – 31-Dec-2015</i>			<i>OP HRD–Funded Phase</i> <i>Service delivery time frame:</i> <i>08/03/2016–10/03/2018</i>		
	INDICATOR VALUE			INDICATOR VALUE		
	Baseline	Target	Actual	Baseline	Target	Intermediate (date not specified)
Kindergarten enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	4 percent	n.a.	n.a.	n.a.	n.a.
Preschool enrollment rate of children up to age seven years from low-income families and different ethnic groups, specifically Roma	n.a.	4 percent	n.a.	n.a.	n.a.	n.a.
Kindergarten enrollment rate of children with disabilities	n.a.	2 children	n.a.	n.a.	n.a.	n.a.
Number of children ages 3–7 enrolled in kindergarten and preschool under the project	n.a.	22	30	n.a.	n.a.	n.a.
Number of disabled children enrolled in kindergarten and preschool under the project	n.a.	2	2	n.a.	n.a.	n.a.
Preschool enrollment rate of children with disabilities	n.a.	2 children	n.a.	n.a.	n.a.	n.a.
Number of new nursery and kindergarten places opened under SIP	n.a.	32	n.a.	n.a.	n.a.	n.a.
Number of new kindergarten and preschool places opened under the project	n.a.	32	32	n.a.	n.a.	n.a.
Number of project beneficiary children enrolled in first grade	n.a.	12	n.a.	n.a.	n.a.	n.a.
Number of newly created places (spaces) for integrated services for social inclusion	n.a.	2	2	n.a.	n.a.	n.a.
Number of children who have had all compulsory immunizations and health checkups	n.a.	70	n.a.	n.a.	n.a.	n.a.
Number of parent beneficiaries of health consultations and disease prevention services for children	n.a.	n.a.	n.a.	n.a.	n.a.	241
Number of children ages 0–7 beneficiaries of health consultations and disease prevention services for children	n.a.	160	109	n.a.	n.a.	n.a.
Number of children beneficiaries of additional pedagogical preparation for raising their school readiness for an equal start in school	n.a.	n.a.	n.a.	n.a.	n.a.	45
Number of beneficiaries of free transportation for the purpose of attending the integrated services, kindergarten, and mobile work	n.a.	n.a.	n.a.	n.a.	n.a.	172
Number of prevented child abandonments	n.a.	10	n.a.	n.a.	n.a.	n.a.

Institutional care placement rate among children from poor and vulnerable families	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Number of nursery and kindergarten staff members trained under the project (not required anymore or dropped)	n.a.	20	–	–	–	–
Number of parents who participated in the family counseling and support groups	n.a.	450	n.a.	n.a.	n.a.	534
Number of parents of children ages 0–3 who participated in the family counseling and support groups	n.a.	450	446	n.a.	n.a.	n.a.
Number of children who benefited from the family counseling and support service	n.a.	n.a.	n.a.	n.a.	n.a.	247
Number of parents who do not take sufficient care of their children	n.a.	30	n.a.	n.a.	n.a.	n.a.
Number of beneficiaries of counseling services	n.a.	574	n.a.	n.a.	n.a.	n.a.
Number of children enrolled in kindergarten, nursery, and/or other childcare services as a result of the project	n.a.	32	n.a.	n.a.	n.a.	n.a.
Total number of service providers for social inclusion	n.a.	n.a.	n.a.	n.a.	1	n.a.
Total number of children receiving service support	n.a.	n.a.	n.a.	n.a.	240	543

Source: Pravets Municipality, SIP Proposal (2010); Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–December 31, 2015; project documentation provided by the Ministry of Labour and Social Policy related to SIP activities, and intermediate results since OP HRD took over the project’s funding.

Note: — = not applicable; n.a. = not available; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

Table D.14. SIP Service Delivery Time Frames across World Bank and (Postproject) OP HRD Phases

BYALA SLATINA MUNICIPALITY				
SIP Early Childhood Development Services	Time Frame	Service Delivery Gap	OP HRD ECD Services	Time Frame
Child health consultation	09/03/2014–12/31/2015 (16 months)	7 months	Support for providing child health consultation and disease prevention activities ^a	08/03/2016–10/03/2018 (26 months)
Early intervention for child disability, and individual pedagogical support for children with disabilities	08/01/2015–12/31/2015 (5 months)		Early intervention of disabilities ^b	
Formation and development of parental skills, and family counseling and support	03/01/2015–12/31/2015 (10 months)		Support to families for the early development of their children	
Additional pedagogical training to increase the school readiness of vulnerable and marginalized children for an equal start in school (summer schools)	Summer 2014–12/31/2015 (20 days: two summer schools delivered, 10 days each)		Motivation and preparation for an equal start in school	
HASKOVO MUNICIPALITY				
Service	Time frame	Service Delivery Gap	OP HRD ECD Services	Time Frame
Child consultation	11/01/2014–12/31/2015 (14 months)	6 months	Support for providing child health consultation and disease prevention activities	06/30/2016–08/30/2018 (26 months)
Early intervention for child disability, and individual pedagogical support for children with disabilities	11/26/2015–12/31/2015 (1 month)		Early intervention of disabilities, and individual pedagogical support for children with disabilities	
Formation and development of parental skills, and family counseling and support	12/09/2014–12/31/2015 (13 months)		Providing psychological support and consultation to prospective and current parents to build and develop parenting skills; family consultation and support	
Additional pedagogical training to increase the school readiness of vulnerable and marginalized children for an equal start in school (summer schools)	Summer, 2014 (Four months: 2 months in 2014 + 2 months in 2015)		Additional pedagogical training to increase the school readiness of children for an equal start in school	
Integrating vulnerable and marginalized children in kindergartens and preschools. Activities include: Enrolling vulnerable and marginalized children in kindergarten and preschool, and	11/01/2014–12/31/2015 (14 months)		Individual and group work with children and parents, including with children and parents not from vulnerable groups with a view of attending a kindergarten	

<p>helping them to adapt to the new environment there.</p> <p>Work with the vulnerable and marginalized children's parents aimed to overcome their mistrust of integrated kindergarten and make them supportive of their children's better education</p> <p>Work with the other parents (nonvulnerable) through meetings aimed to overcome prejudices toward newly enrolled vulnerable kids</p> <p>Joint activities with all parents</p> <p>Providing free transportation to beneficiary children to and from kindergarten, summer school, and the community center^c</p>				
PAZARDZIK MUNICIPALITY				
Service	Time frame	Service Delivery Gap	OP HRD ECD Services	Time frame
Child health consultation	06/01/2015–12/31/2015 (7 months)	(4.5 months)	Support for providing child health consultation and disease prevention activities	05/11/2016–12/11/2018 (31 months)
			Mother and child health	
Individual pedagogical support for children with disabilities	06/15/2015–12/31/2015 (6.5 months)		Individual pedagogical support for children with disabilities	
			Early intervention of disabilities service is prevention of the abandonment and/or the institutionalization of children with disabilities and their families, including rehabilitation and consultation activities, training, and mobile work with the child in his or her home	
Formation and development of parental skills, and family counseling and support	06/15/2015–12/31/2015 (6.5 months)		Providing psychological support and consultation to prospective and current parents to build and develop parenting skills, and family consultation and support	
Additional pedagogical training to increase the school readiness of vulnerable and marginalized children for an equal start in school (summer schools)	07/01/2015–12/31/2015 (Two months: one summer school delivered, two months long)			
	11/01/2014–12/31/2015 (23 months)		Individual and group work with children and parents not from vulnerable groups with a view of attending a kindergarten	
PLOVDIV MUNICIPALITY				

Service	Time frame	Service Delivery Gap	OP HRD ECD Services	Time frame
Child health consultation	10/29/2014–12/31/2015 (14 months)	7 months	Support for providing child health consultation and disease prevention activities	07/26/2016–09/26/2018 (26 months)
Early intervention for child disability, and individual pedagogical support for children with disabilities	03/01/2015–12/31/2015 (10 months)		Early intervention of disabilities, and individual pedagogical support for children with disabilities	
Formation and development of parental skills, and family counseling and support	03/01/2015–12/31/2015 (10 months)		Formation and development of parental skills, and family counseling and support	
Additional pedagogical training vulnerable and marginalized children to increase their school readiness for an equal start in school (summer schools)	07/15/2015–12/31/2015 (3.5 months: one summer school, 3.5 months long)		Additional pedagogical training to increase the school readiness of children for an equal start in school	
PRAVETS MUNICIPALITY				
Service	Time frame	Service Delivery Gap	OP HRD ECD Services	Time frame
Child health consultation	07/31/2015–12/31/2015 (5 months)	7 months	Support for providing child health consultation and disease prevention activities	08/03/2016–10/03/2018 (26 months)
Formation and development of parental skills, and family counseling and support	03/01/2015–12/31/2015 (10 months)		Providing psychological support and consultation to prospective and current parents to build and develop parenting skills, and family consultation and support	
Additional pedagogical training to increase the school readiness of vulnerable and marginalized children for an equal start in school (summer schools)	07/15/2015–12/31/2015 (up to three months: one summer school, length not specified)		Additional pedagogical training to increase the school readiness of children for an equal start in school	
			Individual and group work with children and parents including with children and parents not from vulnerable groups with a view of attending a kindergarten	

Source: For SIP ECD services and time frame: Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–April 30, 2016, Annex 2; for OP HRD ECD services and time frame: Ministry of Labour and Social Policy, Department European Funds, International Programs and Projects, Operational Program Human Resources Development (2014–20).

Note: ECD = early childhood development; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

a. Support for providing child health consultation and disease prevention activities is a service for monitoring the health, physical, and psychomotor development of children ages 0–7 to prevent child morbidity and mortality, insufficient care in the family, and other early childhood–related risks by providing regular monitoring of the health, physical, and psychomotor development of babies and children.

- b. Early intervention of disabilities is a service for preventing the abandonment and/or institutionalization of children with disabilities and building special skills for raising children with disabilities.
- c. The source for this information is the Municipality of Haskovo Social Inclusion Project Proposal, 2010.

Table D.15. Services Delivered across World Bank– and OP HRD–Financed Phases for Five Municipalities

BYALA SLATINA MUNICIPALITY			
SIP Early Childhood Development (ECD) Services	OP HRD ECD Services	Services Dropped	Services Added
Child health consultation	Support for providing child health consultation and disease prevention activities^a	Individual pedagogical support for children with disabilities	
Early intervention for child disability, and individual pedagogical support for children with disabilities	Early intervention of disabilities ^b		
Formation and development of parental skills, and family counseling and support	Support to families for the early development of their children		
Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)	Motivation and preparation for an equal start in school		
HASKOVO MUNICIPALITY			
Service	OP HRD ECD Services	Services Dropped	Services Added
Child health consultation	Support for providing child health consultation and disease prevention activities		
Early intervention for child disability, and individual pedagogical support for children with disabilities	Early intervention of disabilities, and individual pedagogical support for children with disabilities		
Formation and development of parental skills, and family counseling and support	Providing psychological support and consultation to prospective and current parents to build and develop parenting skills; family consultation and support		
Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)	Additional pedagogical training to increase the school readiness of children for an equal start in school		
Integrating children in kindergartens and preschools Enrolling and/or helping to adapt vulnerable children in integrated kindergartens and preschools Work with the vulnerable children's parents Work with the rest of the parents (nonvulnerable) through meetings aimed to overcome prejudices toward the newly enrolled vulnerable children	Individual and group work with children and parents, including with children and parents not from vulnerable groups aimed to improve kindergarten attendance		

Joint activities with all parents Providing free transportation to and from kindergarten or preschool ^c			
PAZARDZIK MUNICIPALITY			
Service	OP HRD ECD Services	Services Dropped	Services Added
Child health consultation	Support for providing child health consultation and disease prevention activities	Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)	Early intervention of disabilities Mother and child health
	Mother and child health		
Individual pedagogical support for children with disabilities	Individual pedagogical support for children with disabilities		
	Early intervention of disabilities		
Formation and development of parental skills, and family counseling and support	Psychological support and consultation to prospective and current parents to build and develop parenting skills, and family consultation and support		
Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)			
	Individual and group work with children and parents not from vulnerable groups aimed to improve kindergarten attendance		
PLOVDIV MUNICIPALITY			
Service	OP HRD ECD Services	Services Dropped	Services Added
Childcare health consultation	Support for providing child health consultation and disease prevention activities		
Early intervention for child disability, and individual pedagogical support for children with disabilities	Early intervention of disabilities, and individual pedagogical support for children with disabilities		
Formation and development of parental skills, and family counseling and support	Formation and development of parental skills, and family counseling and support		
Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)	Additional pedagogical training to increase the school readiness of children for an equal start in school		
PRAVETS MUNICIPALITY			
Service	OP HRD ECD Services	Services Dropped	Services Added
Childcare health consultation	Support for providing child health consultation and disease prevention activities		Individual and group work with children and parents, including with children and

Formation and development of parental skills, and family counseling and support	Providing psychological support and consultation to prospective and current parents to build and develop parenting skills, and family consultation and support		parents not from vulnerable groups aimed to improve kindergarten attendance
Additional pedagogical training to increase the school readiness of children for an equal start in school (summer schools)	Additional pedagogical training to increase the school readiness of children for an equal start in school		
	Individual and group work with children and parents, including with children and parents not from vulnerable groups aimed to improve kindergarten attendance		

Source: For SIP ECD services and time frame: Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–April 30, 2016, Annex 2; for OP HRD ECD services and time frame: Ministry of Labour and Social Policy, Department European Funds, International Programs and Projects, Operational Program Human Resources Development (2014–20).

Note: ECD = early childhood development; OP HRD = Operational Program Human Resources Development; SIP = Social Inclusion Project.

- a. Support for providing child health consultation and disease prevention activities is a service for monitoring the health, physical, and psychomotor development of children ages 0–7 to prevent child morbidity and mortality, insufficient care in the family, and other early childhood–related risks by providing regular monitoring of the health, physical, and psychomotor development of babies and children.
- b. Early intervention of disabilities is a service for preventing the abandonment and/or institutionalization of children with disabilities and building special skills for raising children with disabilities.
- c. The source for this information is the Municipality of Haskovo Social Inclusion Project Proposal, 2010.

Municipality-Level Targeting: A Sample from Five Municipalities

Table D.16. Byala Slatina Municipality: SIP Target Groups and Expected Number of Beneficiaries

SIP Target Groups: Key Indicators	Estimated Target Group Size ^a	Data Sources
Children at risk ages 0–7 from vulnerable ethnic groups, mainly from Roma ethnicity	354	Unofficial sources: nongovernmental organizations, informal Roma leaders Official source: Department of Education within the municipal administration
Children at risk ages 0–7 with unemployed parents	209	Local employment office and local social assistance department
Children at risk ages 0–7 whose parents receive social assistance	163	Local social assistance department
Children ages 0–7 whose parents are uninsured	650	Multiprofile Hospital for Active Treatment, Byala Slatina
Children at risk ages 0–7 who are not cared for well or whose parents are abroad	130	Local police department and local social assistance department
Children with disabilities ages 0–7	45	Local social assistance department
Parents of children ages 0–7 from vulnerable ethnic groups, mainly Roma	192	Unofficial data sources (not specified)
Future parents from vulnerable groups	109	Unofficial data sources (not specified)
Parents of multiple children (three or more) ages 0–7	60	Local social assistance department
Single parents of children ages 0–7	62	Local social assistance department (the proposal notes that there are more, but yet unidentified)

Teen mothers (ages 13–18)	19	Department of Obstetrics and Gynecology at Multiprofile Hospital for Active Treatment, Byala Slatina
Parents with no or low education who have children ages 0–7	110	Local social assistance department
Parents of children ages 0–7 living in poor housing conditions	110	Not specified
Parents of children ages 0–7 who do not care well for them (registered)	103	Local police department and local social assistance department
Parents of children with disabilities or health issues	65	Local social assistance department
Parents of children ages 0–7 with developmental delays	10	Local child protection department
Parents of children ages 0–7 who are uninsured	235	Number of target parents who visited the municipal hospital in 2010
Children ages 0–3 not attending nursery	897	Not specified
Children age five not attending preschool	55	Department of Education at the municipal administration
Children age six not attending preschool	70	Department of Education at the municipal administration
Children not attending elementary school (grade 1–4)	0	Department of Education at the municipal administration
Number of villages or quarters with compact Roma population	9	
Coverage (share of expected project beneficiaries from the target group, all potential beneficiaries)	Target children: 100 percent Target parents: 53.4 percent	

Source: Municipal Situation Analysis annexed to the Social Inclusion Project Proposal, Byala Slatina Municipality, 2010.

Note: SIP = Social Inclusion Project.

a. The estimated size of the target groups includes overlaps across categories.

Table D.17. Haskovo Municipality: SIP Target Groups and Expected Number of Beneficiaries

SIP Target Groups: Key Indicators	Estimated Target Group Size ^a	Data Sources
Children ages 0–7 from vulnerable ethnic groups, specifically Roma	85	Municipal situation analysis, the municipal early childhood development concept; the municipal concept for a social services package accessible to children and families at risk; and the municipal analysis of issues that children and their families are faced with at the municipal and national level, which is part of the National Strategy for the Child (2008–18)
Children ages 0–7 whose parents are unemployed	134	
Children ages 0–7 whose parents are social assistance recipients	105	
Children ages 0–7 without a general practitioner or whose general practitioner is not a pediatrician	110	
Children ages 0–7 whose parents are uninsured	105	
Children ages 0–7 who do not attend kindergarten or other childcare services	137	
Children ages 0–7 who are not cared for well by their parents	12	
Children ages 0–7 with disabilities	145	
Children ages 0–7 with health issues	145	
Parents from vulnerable ethnic groups, specifically Roma	170	
Parents of children ages 0–7 on social assistance	31	
Unemployed parents of children ages 0–7	31	

Parents of multiple children ages 0–7	104	
Single parents of children ages 0–7	28	
Future parents from vulnerable groups	15	
Parents of children ages 0–7 (mainly mothers) at risky age (teen parents)	115	
Parents of children ages 0–7 without education or with low education	205	
Parents of children ages 0–7 living in poor housing conditions	103	
Parents who do not care well for their children ages 0–7 (registered in the local police department and social assistance department)	82	
Parents of children ages 0–7 with disabilities or health issues	200	
Parents of children ages 0–7 with disease	200	
Uninsured parents of children ages 0–7	31	
Parents of children ages 0–7 at high risk (with developmental delays and the like)	20	
Children not attending kindergarten	75	
Children not attending preschool	62	
Coverage (share of expected project beneficiaries from the target group; all potential beneficiaries)	1,620 expected total beneficiaries from all potential beneficiaries (their number is not indicated) because some of these 1,620 will benefit from more than one service under the project	
Number of segregated Roma settlements in the Haskovo Municipality	1 (the Republika District in the city of Haskovo)	

Source: Municipal Situation Analysis annexed to the Social Inclusion Project Proposal, Haskovo Municipality, 2010.

Note: SIP = Social Inclusion Project.

a. The estimated size of the target groups includes overlaps across categories.

Table D.18. Pazardzhik Municipality: SIP Target Groups and Expected Number of Beneficiaries

SIP Target Groups: Key Indicators	Estimated Target Group Size ^a	Data Sources
Children ages 0–7 from vulnerable ethnic groups, specifically Roma	1,200	Municipal early childhood development and parental support concept, municipal situation analysis, and municipal needs assessment
Children ages 0–7 whose parents are unemployed	920	
Children ages 0–7 whose parents are social assistance recipients	262	
Children ages 0–7 without a general practitioner or whose general practitioner is not a pediatrician	900	
Children ages 0–7 whose parents are uninsured	926	
Children ages 0–7 who do not attend kindergarten or other childcare services	2,395	
Children ages 0–7 who are not cared for well by their parents	150	

Children ages 0–18 with disabilities, of which: Children ages 0–18 with physical disabilities: 128 Children ages 0–18 with multiple disabilities: 251 Children ages 0–18 with cognitive delays: 36 Children ages 0–18 with mental illness: 42	457		
Children ages 0–7 with health issues	520		
Parents from vulnerable ethnic groups, specifically Roma	915		
Parents of children ages 0–7 on social assistance	95		
Unemployed parents of children ages 0–7	190		
Parents of multiple children ages 0–7	600		
Single parents of children ages 0–7	33		
Future parents from vulnerable groups	215		
Parents of children ages 0–7 (mainly mothers) at risky age (teen parents)	85		
Parents of children ages 0–7 without education or with low education	3,540		
Parents of children ages 0–7 living in poor housing conditions	3,500		
Parents who do not care well for their children ages 0–7 (registered in the local police department and social assistance department)	90		
Parents of children ages 0–7 with disabilities or health issues	680		
Parents of children ages 0–7 with disease	307		
Uninsured parents of children ages 0–7	1,700		
Parents of children ages 0–7 at high risk (with developmental delays and the like)	45		
Children not attending nursery	204		
Children not attending kindergarten	2,191		
Children not attending preschool	368		
Children not in elementary school (grade 1–4)	120		
Number of segregated Roma settlements	27 (in the Municipality of Pazardzhik)		
Coverage (share of expected project beneficiaries from the target group, all potential beneficiaries)	Target children (ages 0–7)	Target group size	Expected number of project beneficiaries
	All target children	5,822	960
	Target children from vulnerable ethnic groups, particularly Roma	1,492	770

Source: Municipal Situation Analysis annexed to the Social Inclusion Project Proposal, Pazardzhik Municipality, 2010.

Note: SIP = Social Inclusion Project.

a. The estimated size of the target groups includes overlaps across categories.

Table D.19. Plovdiv Municipality: SIP Target Groups and Expected Number of Beneficiaries

SIP Target Groups: Key Indicators	Estimated Target Group Size^a	Data Sources
Children ages 0–7 from vulnerable ethnic groups, specifically Roma	60	Not specified
Children ages 0–7 whose parents are unemployed	40	Not specified
Children ages 0–7 whose parents are social assistance recipients	60	Not specified
Children ages 0–7 without a general practitioner or whose general practitioner is not a pediatrician	20	Not specified
Children ages 0–7 whose parents are uninsured	10	Not specified
Children ages 0–7 who do not attend kindergarten or other childcare services	45	Not specified
Children ages 0–7 who are not cared for well by their parents	100	Not specified
Children ages 0–7 with disabilities	50	Not specified
Children ages 0–7 with health issues	60	Not specified
Parents from vulnerable ethnic groups, specifically Roma	100	Not specified
Parents of children ages 0–3 from vulnerable groups		Not specified
Parents of children ages 0–7 on social assistance	35	Not specified
Unemployed parents of children ages 0–7	45	Not specified
Parents of multiple children ages 0–7	15	Not specified
Single parents of children ages 0–7	20	Not specified
Future parents from vulnerable groups	10	Not specified
Parents of children ages 0–7 (mainly mothers) at risky age (teen parents)	10	Not specified
Parents of children ages 0–7 without education or with low education	60	Not specified
Parents of children ages 0–7 living in poor housing conditions	40	Not specified
Parents who do not care well for their children ages 0–7 (registered in the local police department and social assistance department)	100	Not specified
Parents of children ages 0–7 with disabilities	15	Not specified
Parents of children ages 0–7 with disease	20	Not specified
Uninsured parents of children ages 0–7	20	Not specified
Parents of children ages 0–7 at high risk (with developmental delays, and so on)	15	Not specified
Coverage (share of expected project beneficiaries from the target group, all potential beneficiaries)	10 percent	

Source: Plovdiv Municipality, Inclusion Project Proposal, 2010.

Note: SIP = Social Inclusion Project.

a. The estimated size of the target groups includes overlaps across categories.

Table D.20. Pravets Municipality: SIP Target Groups and Expected Number of Beneficiaries

SIP Target Groups: Key Indicators	Estimated Target Group Size^a	Data Sources
Target children	569	
Children ages 0–7 from vulnerable ethnic groups, specifically Roma	Not specified	Not specified

Children ages 0–7 whose parents are unemployed	Not specified	Not specified
Children ages 0–7 who are not cared for well by their parents	Not specified	Not specified
Children ages 0–7 with disabilities	Not specified	Not specified
Children not attending nursery	Not specified	Not specified
Children attending mainstream or integrated kindergarten	Not specified	Not specified
Children attending mainstream or integrated preschool	Not specified	Not specified
Target parents (from the entire municipality)	854	
Parents of children ages 0–7 from vulnerable ethnic groups, specifically Roma	Not specified	Not specified
Parents of children ages 0–7 on social assistance	Not specified	Not specified
Unemployed parents of children ages 0–7	Not specified	Not specified
Parents of multiple children ages 0–7	Not specified	Not specified
Single parents of children ages 0–7	Not specified	Not specified
Future parents from vulnerable groups	Not specified	Not specified
Parents of children ages 0–7 without education or with low education	Not specified	Not specified
Nonvulnerable parents whose children attend kindergarten and preschool along with vulnerable target children	Not specified	Not specified
Coverage (share of expected project beneficiaries from the target group, all potential beneficiaries)	Target children: 100 percent Target parents: 100 percent	

Source: Social Inclusion Project Proposal, Pravets Municipality, 2010.

Note: SIP = Social Inclusion Project.

a. The estimated size of the target groups includes overlaps across categories

Table D.21. Municipalities that Spent More Than Half of the World Bank Loan on Construction

No.	Municipality	Share of Total World Bank Loan (percent)
1	Yambol	83
2	Blagoevgrad	82
3	Gabrovo	80
4	Rousse	80
5	Dolni Chiflik	80
6	Sliven	79
7	Sevlievo	73
8	Varna	73
9	Chirpan	72
10	Haskovo	71
11	Pazardjik	70
12	Pernik	69
13	Stara Zagora	67
14	Plovdiv	66
15	Montana	64
16	Aytos	60
17	Maritza	59
18	Bourgas	59
19	Samuil	59
20	Targovishte	58
21	Vulchi Dol	56
22	Petrich	56
23	Assenovgrad	55
24	Smolyan	55
25	Shoumen	55
26	Sredetz	55
27	Pleven	54
28	Yakoruda	54
29	Sofia Greater Municipality	54
30	General Toshevo	53
31	Dimitrovgrad	52
32	Pravetz	51

Source: Ministry of Labour and Social Policy Report on the Implementation of the Social Inclusion Project for the period March 2010–December 31, 2015.

¹ This information is contained in the : Ministry of Labour and Social Policy, Report on the Implementation of the Social Inclusion Project (March 2010–December 31, 2015), Sofia, May 2016.

² Under the OP HRD funding, the project beneficiaries target output data are not disaggregated by subtarget category because only information about the cumulative number of children served is required.

Appendix E. List of People Met

Government of Bulgaria

Ministry of Labour and Social Protection

- Ms. Zornitsa Roussinova, Deputy Minister
- Ms. Elena Kremenlieva, Director, Social Inclusion Department (SID)
- Mr. Iliyan Saraliev, Manager, Social Inclusion Programs Department, SID
- Ms. Anna Nikolova, Deputy Director, Operational Program Human Resources Development (OP HRD) Managing Authority
- Ms. Maria Zhelezarova, Manager, Verification Department, OP HRD Managing Authority
- Mr. Georgi Yankov, Manager, Verification Department, North

Five Municipalities in Bulgaria Visited by Evaluation Team

Byala Slatina Municipality

Meetings at Buala Slatina Town Hall

- Ivo Tsvetanov, Mayor
- Petar Petrov, Deputy Mayor, Head of Projects and Finances Department
- Darina Krysteva, Social Inclusion Project (SIP) Coordinator (until 2015), SIP Project Manager (since 2015)
- Denitsa Vasileva, Technical Assistant, Byala Slatina Municipal Administration
- Albena Gabrova, Ministry of Labour and Social Policy (MLSP)
- Budinka Todorova, Head/Headmaster, Chervena Shapchitsa Kindergarten, Gabare Village
- Maria Dimitrova, Head/Headmaster, Nezabravka Kindergarten, town of Byala Slatina

Meetings at a (mainstream) secondary school, Vasil Levski, in the town of Byala Slatina where SIP beneficiary children study

- A Roma father and his daughter, who is in first grade and is an excellent student
- Elementary school teacher
- Jordan Tsokanov, school principal
- Deputy school principal

Meetings at Center for Social Inclusion “My Family and I,” town of Byala Slatina

- Head of the Center for Social Inclusion “My Family and I”
- Specialists providing services at the Center for Social Inclusion “My Family and I” (psychologist, kinesitherapy specialist, pediatrician, gynecologist, and other specialists)

- Parents and their children benefiting from services (predominantly Roma)
- Three community mediators, all Roma (two women and one man)

Meetings at a (segregated) elementary school, Hristo Smirnenski, in a Roma neighborhood in the town of Byala Slatina

- Evgeni Angelov, school principal

Meetings at predominately Roma kindergarten (nonbeneficiary of SIP) in a Roma neighborhood in the town of Byala Slatina

- Head/Headmaster of the kindergarten
- Two kindergarten teachers

Haskovo Municipality

Meetings at Community Center, town of Haskovo

- Miroslava Macheva, Head of Community Center
- Dessislava Stoyanova, SIP Manager and Senior Officer at Municipality of Haskovo
- Hristna Mihailova, Technical Assistant
- Antonia Delcheva, Senior Officer, MLSP, European Funds, International Programs and Projects Department, Verification—South Unit
- Two mediators (Radka and Irina, non-Roma women who do not live among Roma)
- Two social workers (non-Roma women)
- Pediatrician
- Physical therapist
- Other service providers

Meetings with three parents of children with disabilities, benefiting from SIP services

- Two ethnic Bulgarians
- One ethnic Turk

Meetings at (mainstream) Secondary School, Vasil Levski, town of Haskovo

- Resource teacher (specialized in teaching children with special educational needs)
- Preschool teacher of two children with disabilities who are SIP beneficiaries

Meetings at Kindergarten Shturche in Republika quarter (mainly Roma and Turkish residents)

- Head/Headmaster, kindergarten
- Kindergarten teachers (teach one of the disabled SIP beneficiaries)

Meetings at Haskovo Municipality Offices

- Dobri Belivanov, Mayor
- Zlatka Karadzhova, Director, Humanitarian and Public Services Department, Haskovo Municipal Administration
- Dessislava Stoyanova, SIP Manager (previously SIP Coordinator) and Senior Social Services Expert, Haskovo Municipal Administration
- Maria Spilkova, Junior Officer, Social Services, Haskovo Municipal Administration
- Kremena Kondova, Senior Health Care Officer, Haskovo Municipal Administration
- Hristina Mihailova, Junior Officer, Social Services, Haskovo Municipal Administration
- Antonia Delcheva, Senior Officer, MLSP, European Funds, International Programs and Projects Department, Verification—South Unit

Meetings at Community Center, town of Haskovo

- Head of community center
- Two mediators
- Two social workers
- Gynecologist
- Lawyer

Meetings with Roma parents and their children, SIP beneficiaries, residents of a municipal residential building in the Roma neighborhood of Republika

Visit with an unemployed, 53-year-old Roma grandmother whose daughter and grandchildren are SIP beneficiaries, living in Republika

- Plovdiv Municipality

Community Center, Plovdiv

- Ofelia Velkova, Head of Community Center
- Donka Shtilianova, Head of Education Department, Plovdiv Municipal Administration
- Veselina Boteva, Director, Social Policy Directorate, Plovdiv Municipal Administration
- Emil Nachev, School Principal, (segregated, Roma) Secondary School Nayden Gerov
- Stefka Simeonova, Education Officer, Municipality of Plovdiv
- Five parents of children who are SIP beneficiaries
- Specialists employed at the community center (speech therapist and physical therapist, among others)
- Two Roma mediators (one woman and one man)

Meetings at Primary School Pencho Slaveykov, Stolipinovo (segregated Roma) neighborhood

- Ekaterlina Delinova, School Principal
- Teachers
- Parents
- Students

Meetings at Kindergarten Shtastlivo Detstvo (Happy Childhood), Town of Plovdiv (about 80 percent Roma)

- Evgenia Popivanova, Headmaster
- Kindergarten teachers
- Speech therapist
- Children

Pazardzhik Municipality

Meetings at Community Center (Center for Social Inclusion and Support), Town of Pazardzhik

- Tanya Gyunova, Project Coordinator
- Svetlana Stamenova, Manager of Municipal Foster Care Team
- Tsonka Karadzova, community center accountant
- Irina Stamatova, SIP Project Manager
- Diana Pashova, Manager of family care center of children with disabilities
- Nikolai Lazarov, family care center for children and youth (without disabilities)
- Iliana Atanasova, community center social worker
- Penka Uzunova, community center social worker
- Petya Mitova, community center social worker
- Vanya Dimitrova, speech therapist
- Community center midwife
- Maria Totkova, Roma mother of a disabled child who is a SIP beneficiary
- Stoyanka Pencheva, mother of SIP beneficiary
- Antonya Gecheva, mother of SIP beneficiary

Meetings at (Segregated, Roma) Secondary School, Dimitar Gachev, town of Pazardzhik

- Mariana Dimova, elementary school teacher
- Two Roma children (a girl and a boy) in third grade, beneficiaries of SIP summer school
- Valeri Stoyanov, School Principal

- Pravets Municipality

Meeting at the Pravets Town Hall:

- Rumén Guninski, Mayor, Pravets Municipality
- Veselka Asenova, Head/Headmaster, Indira Gandhi Kindergarten
- Silvia Staneva, Head/Headmaster, Zdravets Kindergarten
- Snezhana Georgieva, Pravets Municipal Administration
- Galabila Tsvetanova, Pravets Municipal Administration, Senior Officer, Education, Health Care, Social Services, Sports, and Tourism
- Albena Petrova, Municipal Secretary
- Tsonka Ivanova, Sociologist, Head of Foundation “Social Norms”
- Maya Pencheva, Manager, Center for Family Counseling and Support
- Deyan Dimitrov, School Principal, Primary School Vasil Levski, Village of Vidrare (70 percent Roma students)

Meetings in Dzhurovo Village

- Three young Roma mothers and one Roma mother-to-be, beneficiaries of SIP services along with their young children
- A class with Roma-only students
- A mediator (female ethnic Bulgarian living among the Roma community)
- Ivanka Ivanova, School Principal, Primary School Hristo Botev (100 percent Roma students)
- A primary school teacher, Primary School Hristo Botev

Meetings in the Village of Vidrare

- Preschool group of Roma-only children in a rehabilitated preschool facility
- Deyan Dimitrov, School Principal, Primary School Vasil Levski

Meetings in Center for Family Counseling and Support, Pravets

- Psychologist, delivering services under SIP
- Nutrition counseling session with eight Roma parents (seven women and one man) and interview with the nurse, who is also a nutrition specialist

Nongovernmental Organizations

- Dorianá Basamakova, Chief of Staff, Trust for Social Achievement (TSA)
- Sarah Perrine, Chief Executive Officer, TSA
- Vania Kaneva, Head of Projects and Advocacy, For Our Children Foundation
- Ilona Tomova, IPHS

- Deyan Kolev, Amalipe Center for Inter-Ethnic Dialogue and Tolerance, Veliko Tarnovo, Bulgaria
- Mila Tashkova, National Network for Children
- Sasho Kovachev, Largo Association, Kyustendil
- Daniela Ushatova, Team Leader, Department of Municipal Services and Finances, National Association of the Municipalities in Bulgaria
- Zina Yankova, Foundation for Tolerance and Solidarity, Haskovo

Research and Consulting

- Tsvetelina Stoyanova, Owner and Lead Researcher, Market LINKS Research and Consulting, Sofia

World Bank

- Anthony Thompson, Country Manager, World Bank Country Office, Bulgaria
- Dessislava Kuznetsova, Education Specialist, World Bank Country Office, Bulgaria
- Valya Nikolaeva, former Procurement Specialist, World Bank Country Office, Bulgaria
- Stella Ilieva, Senior Economist, Macroeconomics and Fiscal Management Global Practice
- Eolina Milova, Senior Environmental Specialist/Acting Country Manager during wrap-up, World Bank Country Office, Bulgaria
- Sylvia Stoynova, Operations Officer, World Bank Country Office, Bulgaria
- Peter Pojarski, SIP Task Team Leader (2009–12)
- Plamen Danchev, SIP Task Team Leader (2012 through project closing) (by e-mail exchange)

Other Development Partners**UNICEF, Bulgaria**

- Dessislava Encheva, Child Protection and Social Services Officer
- Maria Yankova-Mladenova, Education Officer (by e-mail exchange)

Swiss Agency for Development and Cooperation, Bulgaria

- Irina Faion, Team Leader, Program Management Unit, Health and Education for All

Appendix F. Borrower Comments

Bulgaria
Ministry of Labour and Social Policy
 ISO 9001:2008 Certified Quality Management System

1051 Sofia, 2 Triaditza Str., Phone: 8119 443; Fax: 988 44 05,
www.mlsp.government.bg

Outgoing ref.: 17-81
 18.05.2018

To
Mr. Tony Thompson
Country Manager
The World Bank
Interpred ITC
36 Dragan Tzankov Blvd.
1040 Sofia

Copy: Mr. Vladislav Goranov
Minister of Finance

Subject: Draft report on the evaluation of implementation of the Social Inclusion Project (funded with loan 7612-BG from the International Bank for Reconstruction and Development [The World Bank] by the Independent Evaluation Group of the World Bank.

Honorable Mr. Thompson,

First of all let me express our gratitude for the excellent cooperation and support provided by the World Bank during the implementation of the Social Inclusion Project (SIP). We thank you for the draft report on the evaluation of the SIP implementation prepared by the Independent Evaluation Group of the World Bank. On considering the conclusions and recommendations therein, we would like to note the following:

As an overall impression from the report, we are extremely surprised by the substantially reduced ratings of the work done on the implementation of the SIP (Performance ratings) of the borrower (including the project implementation unit at the Ministry of Labour and Social Policy (MLSP) – Social Inclusion Directorate [SID]) and of the World Bank, as well as with the reduced rating of the outcomes of the SIP and with the upgraded risk for achievement of the planned objectives of the SIP implementation. In the report on the completion of implementation and on the SIP outcomes (dated July 22, 2016) the rating of the borrower was ‘moderately satisfactory,’ whereas that of SID—‘satisfactory.’ In the present report, prepared more than two years after the activities under the SIP ended, the ratings of the borrower and SID have gone down by one grade without substantial motives, respectively to “moderately unsatisfactory” and “moderately satisfactory.” In case the justification for such an action is contained in paragraph 36 of the report, namely the following text: *“Both SID and the municipalities could have undertaken measures to address the insufficient use of the capacity of NGOs and local community organizations for establishing richer, more accurate baselines, identifying and quantifying target*

groups and for activities for supply of services and raising awareness,” then we deem this unacceptable. Our argumentation is as follows:

1. SID, respectively the MLSP, has no legal grounds whatsoever to intervene in any way in the decision of beneficiary municipalities with respect to hiring of contractors for supply of services under the SIP. In this connection, the authority for selection of supplier of a particular service under the SIP is entirely with the beneficiary municipality that carries out the relevant tender procedure under the World Bank Rules. Any intervention in or influence on the free choice of beneficiary municipalities on the part of SID does not correspond to the Rules for the SIP implementation and the Bulgarian legislation.
2. On the data, MLSP is required to use and work with data that are officially provided by the authorities responsible for the collection thereof. Exactly such data were used in appointing beneficiary municipalities. MLSP has no mechanism or authority to check the veracity of the data provided by private organizations – nongovernmental organizations (NGOs) being such. Conversely, municipalities are the ones that are required to assess the needs on their territories and they did just that at the time of applications, and also during the practical implementation of activities.
3. Setting of baseline values of indicators for measuring the outcomes of the SIP was done following a public procurement procedure as per the World Bank Rules based on terms of reference for the implementation of activities prepared by a consultant of the World Bank and coordinated with the latter; in these very terms of reference, in the section on the work methodology the possible sources of information are given. “*NGOs and local community-based organizations*” are not among the listed eligible sources of information for the purposes of the study. The procurement itself was done by a consortium of companies specialized in marketing surveys, analyses and forecasts and possessing the relevant experience and qualification, and both the selection of contractor and the results of the procurement were coordinated by the World Bank. As a result of the implementation of the activities, the values of the SIP outcome indicators were determined, and Supplementary Letter 2 to Loan No. 7612 BG was prepared, by force of which the indicators for monitoring the SIP implementation were set.

We would like specifically to note the increased risk for the achievement of the set objectives for the SIP implementation. In the current report, the risk is increased by two grades, respectively from “Low to Insignificant” (set as of July 22, 2016 in the report on the closing of the implementation and the outcomes of the SIP) to “Significant.” We categorically cannot accept such a rating, all the more considering the following:

1. The SIP is a pilot project, and during its implementation the following basic services were pilot-tested: “Early intervention in disabilities,” “Individual pedagogical support for children with disabilities,” “Nurturing and promoting of parenting skills,” “Family counseling and support,” “Additional pedagogical

- support for equal start in school (summer schools),” as well as the “Health counseling for children” service.
2. In view of the funding provided, a focus was placed on the services “Early intervention in disabilities,” “Individual pedagogical support for children with disabilities,” “Nurturing and promoting of parenting skills,” “Family counseling and support” (as totally novel and unfamiliar activities then). For those services, under the SIP, methodological guidelines for the provision of services were prepared and provided to the beneficiaries, and trainings of suppliers of these services and of medical staff employed at maternity wards and working directly with babies and young children with disabilities took place, for the implementation of new approaches in telling parents about the disability of the child and for encouraging raising of children in a family environment.
 3. The successful implementation of the SIP promoted the development and affirmation of the concept of the importance of early childhood development services as an integral part of the overall policies for children and families. In this connection and for the purpose of sustaining the operation of the services established under the SIP, the operation BG05M9OP001-2.004 Early Childhood Development Services was launched under the 2014-2020 Human Resources Development Operational Program (HRD OP). The operation allowed all beneficiary municipalities under the SIP to obtain funding to continue the operation of introduced services until 31.12.2019, the budget of the operation being BGN 30,000,000.
 4. Recognizing that early childhood is an especially significant period for the child with crucial impact for his/her further development and success, the development of innovative and integrated early childhood development services is among the main priorities for Bulgaria, including in the context of the Presidency of the Council of the EU. Therefore the updated Action Plan for the Implementation of the National Strategy ‘Vision for Deinstitutionalization of Children in Bulgaria’ adopted with Resolution of the Council of Ministers (CoM) 859/13.10.2016, as part of the measures for providing social and integrated services for family-based early intervention and prevention, expansion of early childhood development (ECD) services is envisioned on a national scale, building on the activities of the Centers for Community Support (CCS) through an ECD program including the mandatory activities in accordance with the already existing SIP services ‘Nurturing and promoting of parenting skills,’ (NPPS), ‘Family counseling and support’ (FCS) and ‘Health Counseling’ (HC). The program will be one of the programs applied at the CCS as part of the reform of this social service, including a targeted program for prevention of abandonment and separation of children and families. The plan provides for upscaling of services for early intervention in disabilities and individual pedagogical support for children with disabilities nationally by building on the day centers for children with disabilities (DCCD) and the centers for social rehabilitation of children with disabilities (CSRCD) via a program including the mandatory activities in accordance with the already

- existing SIP services “Early intervention in disabilities” (EI) and “Individual pedagogical support for children with disabilities” (IPS).
5. As of date, the Social Assistance Agency has undertaken steps to update the methodological guidelines for the CCS social service, in accordance with the measures for reforming the service, under the updated Action Plan for the Implementation of the National Strategy “Vision for Deinstitutionalization of Children in Bulgaria,” and more specifically the inclusion of an ECD Program that includes the mandatory activities in accordance with the already existing services under the SIP: NPPS, FCS, and HC. Work will be starting on updating of the methodological guidelines for supply of social services DCCD and CSRCD, respectively with the inclusion of a Program for early intervention in disabilities with the mandatory activities corresponding to the ones already introduced under the SIP – EI and IPS. In the updating of those methodological guidelines, the methodological guidelines developed under the SIP for EI and IPS, NPPS and FCS will be taken into consideration.
 6. By force of Resolution 277 from April 24, 2018 of the CoM of the Bulgaria standards for state-delegated activities in 2019 in terms of quantities and values were adopted. Envisioned are standards for the services DCCD (with a program for EI in disabilities), Center for Social Rehabilitation and Integration of Children with Disabilities (with a program for EI in disabilities), and Center for Community Support/Community Center for Children and Families. In this way, on a national scale, all municipalities providing the said services, in 2019 will be able to get funding under state-delegated activities arrangements, including municipalities that finish the implementation of projects under the BG05M9OP001-2.004 operation “Early Childhood Development Services” (that is, former SIP beneficiary municipalities).

In view of the foregoing, we believe that we fulfilled to a complete extent the commitments undertaken with the SIP implementation, and as of the moment there is no practical risk of failure to accomplish the set objectives for the implementation of the SIP. On the one hand, the services introduced and pilot-tested under the SIP were assessed as necessary, and there is both agreement and desire on the part of municipalities for a national rollout. On the other hand, state funding is provided for the services which guarantees that they become part of national policies and priorities. In addition, securing sustainability of services and policies is done by the government under our national rules for funding and organizing of the system. Funding from the state is not provided under a temporary program; on the contrary – this is done through a much more robust instrument in terms of recognizing the national significance of these services and ascertaining them as a lasting and permanent commitment matched with clearly allocated and approved funding by the CoM. Therefore for us it is not clear on the basis of what the risk for the implementation of the objectives of the SIP was raised to “Significant” where no such risk exists.

In light of the above, we believe that the information in the Summary of the report on “Significant” financial risk due to *“nonconfirmed state financing of a program covering*

the entire country, until the end of 2018 (when the EU funding stops)” is not true, for as early as at the time of adoption of the updated Action Plan for the Implementation of the National Strategy “Vision for Deinstitutionalization of Children in Bulgaria” in October 2016 the state undertook to roll out nationally the services created under the SIP and to have those financed from the state budget after the end of the EU funding, that is, from 2019. This information was provided to the evaluation team too.

We would like to note some other more significant inconsistencies in the report:

7. In paragraph 39 there is incorrect information that the centralized public procurement procedures for construction works proved to be efficient. Under the SIP not a single centralized public procurement procedure for construction works was carried out. All public procurement for works under the SIP was conducted by beneficiary municipalities. SID engaged solely in ex-ante control.
8. The statement in paragraph 54 of the report that ‘the extent to which the services created under the SIP were provided in an equitable way (reaching out to the planned target groups, most of them in need) is not clear’ is not based on any evidence. [The paragraph] reads that ‘despite the set values of the indicators for the number of beneficiaries for the various services have been exceeded, there is no breakdown of beneficiaries, to indicate what share of these are from the target groups of the SIP. There is no indication how many of them are low-income and/or marginalized.’ We would like to stress that beneficiaries under the SIP services have been solely from the target groups of the SIP, those, however, not being confined only to ‘persons with low income and/or marginalized.’ Neither was there a special focus on a specific part of target groups, therefore no breakdown of beneficiaries was necessary. We believe that such a statement may imply that beneficiary municipalities (as sources of the data for the indicators) have engaged in ineligible expenses under their projects, the evaluation team failing to give any reasoning or proof for this.

Under the SIP, the target groups eligible for funding are defined in a clear and detailed way:

1. *Target groups of children at risk (0–7)* – children from vulnerable ethnic groups, Roma community in particular; children with unemployed parents; children with parents on social welfare; children without a family doctor (GP), or whose doctor is not a pediatrician; children whose parents have no health insurance; children not attending kindergarten or alternative childcare; children whose parents do not provide adequate care; children with disabilities; children with health issues.
- *Target groups of parents (of children from 0 to 7)* – parents from vulnerable ethnic groups, Roma community in particular; parents on social welfare; unemployed parents; parents of three or more children; single parents; expecting parents from vulnerable groups; parents (primarily mothers) in high-risk age groups; parents of children with disabilities; parents of children with health issues; parents of children in high risk (developmental delays and so on.); parents

with no health insurance; parents who do not provide adequate care of their children; parents with no education or with low education; parents in poor housing conditions.

In this connection, all persons who fall in the above target groups are eligible beneficiaries for the services under the SIP, and not just those with low income and/or from marginalized groups. Moreover, the very nature of services predetermines target groups.

2. Paragraph 89 contains information that “under HRD OP the financing indicators were further reduced basically to two: number of beneficiaries; and number of service providers.” It should be noted that the set indicators are as per the ones prescribed in the HRD OP and the definitions approved by the European Commission, with the exception of one specific indicator that is directly related with the objectives of the scheme and measures particular outcomes. The target group under the scheme for grant financing under HRD OP is: ‘Families with children between 0 and 7, including with disabilities; Children 0–7 at risk and their families; Children 0–7, including with disabilities, placed in specialized institutions and their families; Children and adults at risk.’ The target group thus defined does not rule out the Roma community by virtue of ethnicity. The ‘disability’ factor makes it much broader, and the ‘at risk’ factor renders the concept even wider. The application guidelines for the operation BG05M9OP001-2.004 Early Childhood Development Services lists in detail target groups, in the same way as they are specified under the SIP.

On the comment in paragraph 45 of the report in connection with introducing kindergarten and crèche fee reliefs that “*there are reductions in the fees preceding the project, and there is no evidence of further reliefs under the project,*” we would like to note that no funds from the SIP were used for payment of kindergarten and crèche fees, since as early as prior to the application process it was established that municipalities have already introduced reliefs locally. Those reliefs are adopted by the relevant municipal councils.

We would like to point out that, in view of the pilot nature of the SIP, coupled with the limited amount of funding for it, the project support for introducing a nationwide school readiness program was confined to the pilot testing of a set of integrated measures for ECD for children up to age seven and their parents focusing on prevention of dropping out of school and on leveling out school readiness, including services for EI in disabilities. The following must to be taken into consideration however: the SIP was approved back in 2008; now it is 2018. Over those 10 years the policy of ECD and school readiness underwent major reforms. One such reform, further to the amendments of the repealed Public Education Act effective from October 5, 2010 was the introduction of mandatory two-year preschool education before first grade, but not earlier than the year in which the child turns five. For children with poor Bulgarian language skills, the preschool education includes also teaching of Bulgarian language as per specialized

methodology. Under the Preschool and School Education Act (in force from 01.08.2016), preschool education is mandatory from the school year beginning in the calendar year in which the child turns five. Parents may choose from the alternative forms of preschooling under Art. 67 – whole-day schooling, half-day schooling, hourly or individual arrangements, according to the preference of parents as per the terms and conditions in the State Education Standard for Preschool Education. The state and municipalities are required to guarantee coverage of children in kindergartens and preschool groups in schools. Art. 16 of the said act mandates the provision of additional conditions for children with non-Bulgarian mother tongue, for acquiring command of the language and for better integration in the education system, as per the terms and conditions in the State Education Standard for Bulgarian Language.

Some of the key political priorities of the government for 2017–21 are enlargement of the coverage of 5- and 6-year-olds in the mandatory preschool education from the age of 4; mandatory Bulgarian language training for children with non-Bulgarian mother tongue; measures to promote inclusive education and individual development for each child, including early assessment of possible risk of learning/educational difficulties; extra modules in kindergartens for children not speaking Bulgarian; improvement of the efficiency of interaction with parents from vulnerable communities – project under the national program ‘Together for Every Child’ which includes activities for interaction with parents, nurturing positive attitude in parents toward the education of their children, and improving the child-raising skills of families.

Bulgaria in a purposeful and targeted way uses also the support of EU Structural Funds for improving the care for children with a special focus on improving early childhood development services and providing equal access to preschool education for disadvantaged children. Under HRD OP, primarily measures for integrated services are funded, as well as all services for deinstitutionalization, whereas Science and Education for Smart Growth OP finances measures for improving the access to and quality of preschool education, including through additional work with children with non-Bulgarian mother tongue, involvement of parents, promoting motivation of children and parents, overcoming negative attitudes, and so on.

The foregoing clearly shows that our policy agenda is far beyond and above the objectives of the SIP. The reforms effected to date have been exactly to promote school readiness, as codified by law.

We use again this opportunity to express once more our gratitude for the extremely productive cooperation and support the IBRD team involved with the SIP has provided throughout the course of the project implementation which is of substantial importance for the results achieved.

18.05.2018

/signed, illegible/

Bisser Petkov

Minister of Labour and Social Policy

Round stamp: Ministry of Labour and Social
Policy, Bulgaria

Square stamp: True Copy of Electronically
Signed Original /*signed, illegible*/



REPUBLIC OF BULGARIA
MINISTRY OF FINANCE

99-00-183/22.05.2018.

MR. RASMUS HELTBERG
ACTING MANAGER
HUMAN DEVELOPMENT AND CORPORATE EVALUATIONS
INDEPENDENT EVALUATION GROUP
THE WORLD BANK

DEAR MR. HELTBERG,

Re: Bulgaria: Social Inclusion Project (IBRD Loan 76120) Draft Project Performance
Assessment Report/

Thank you for sharing with us the Independent Evaluation Group's (IEG) draft Project Performance Assessment Report (PPAR) of the Social Inclusion Project and/or the efforts of the IEG to prepare an assessment of the project, financed via an IBRD loan in the period 2009–15. Trying to evaluate the such operations is an important but challenging task.

Since the project was implemented and the loan administered by the Ministry of Labour and Social Policy, which is in charge also of the main policies the project was oriented toward, its comments on the draft report are instrumental.

On behalf of the Ministry of Finance I would like to share some general observations and comments:

In assessing the outcomes of the above operation it is important to take into account that;

1. The project was designed as a pilot for the first EU Operational Programmes (OPS) in Bulgaria (the World Bank identification mission took place in the autumn of 2006), but was launched simultaneously with the OPS, although its actual start was immediately and directly affected by the economic downturn, Bulgaria experienced hardest in 2009 (the loan agreement was signed in November 2008 and became effective in April 2009). The availability of ELI grant financing the use of which is naturally prioritized to other sources, combined with the need fiscal restrictions, affecting the loan-financed operations, makes it difficult to assess the project as a stand-alone operation, The initial

- project design had to be adapted to the changed circumstances from the very beginning (to avoid duplication and ensure consistency with the EU financing) and further on during the project implementation, The operation should be given credit for the fact that despite the challenges it ensured consistency and follow-up.
2. In regard to the Project monitoring and evaluation framework it should be noted that due to the fact that the original project design envisaged impact evaluation, (here was no formal agreement on the project monitoring indicators at the moment of the signing of the loan agreement; no signed Supplemental Letter 2). The respective letter was Signed by the Bulgarian Side on September 23, 2013, became effective November 18, 2013, and has not amended hereafter.
 3. The draft report mentions, inter alia, “Government of Bulgaria’s reluctance to use IBRD loans for studies, research, consulting, technical assistance and training,” as well as that the “Joint (World Bank-Government of Bulgaria) portfolio reviews (JPR) conducted regularly in Sofia for all projects under implementation were characterized by the Government of Bulgaria’s efforts to review planned activities and eliminate those related to research, studies, training, consulting and technical assistance.” It should be noted that the JPRs were a format for quarterly project implementation stocktaking, involving meetings between the World Bank and the respective counterparts on the Bulgarian side. The meetings results were recorded in a matrix reflecting the implementation progress and the actions for the next periods, outlined by the project implementing agencies and the respective World Bank. These reviews neither had intention nor were meant to invoke or authorize elimination of project activities. As for the reluctance to use IBRD loans for consulting services—the Ministry of Finance has always appealed for durable capacity building in the implementing agencies and project designs that contribute to retaining and using the knowledge, the expertise, and the staff involved in the project implementation with the executing agencies. In this sense and given the need (or effective use of the available resources), as well as for their proper prioritization, giving preference to grant and internal resources and looking for value-added from loan-financed operations has always been among our goals.
 4. In respect of certain references in the report: We would appreciate your efforts in refraining from references to information qualified as anecdotal in the PPAR. Also while other World Bank–financed research in Bulgaria (more specifically the 2017 World Bank impact evaluation *Supporting Disadvantaged Children to Enter Kindergarten: Experimental Evidence Bulgaria*, based on the impact of a Springboard for School Readiness program) might be useful, we would caution on differences in substance and scope, which may render findings not entirely relevant to the assessment of the Social Inclusion Project.

We hope above comments to be helpful in finalizing

report.

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Sincerely yours,



MARINELA PETROVA
DEPUTY MINISTER OF FINANCE

cc:Mr. Frank I-leemsker
Executive
Director
The World
Bank

Mr. Biser Petkov
Minister of Labour and Social Policy

Mr. Antony Thompson
Country Manager
The World Bank Bulgaria Country Office