

DOCUMENT OF THE INTER-AMERICAN DEVELOPMENT BANK

DOMINICAN REPUBLIC

**SUPPORT FOR THE SOCIAL PROTECTION PROGRAM
FIRST PHASE**

(DR-L1039)

LOAN PROPOSAL

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<p>REQUIRED</p> <ol style="list-style-type: none"> 1. AWP (Plan of activities for the first disbursement and first 18 months of implementation) http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2046009 2. Monitoring and evaluation arrangements http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2075604 3. Complete procurement plan http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2084179 4. Safeguard Policy Filter (SPF) and Safeguard Screening Form (SSF) http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2083008 <p>OPTIONAL</p> <ol style="list-style-type: none"> 1. Technical and design options: Technical notes on health, nutrition, and education http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2045977 2. Institutional analysis http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2065283 3. Operating Regulations http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2065293 4. Operational assessment of Solidaridad http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2046005 5. Institutional analysis of SIUBEN http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2046009 6. Logic of the outcomes expected from the program http://idbdocs.iadb.org/wsdocs/getDocument.aspx?DOCNUM=2075545

APPENDICES

Proposed resolution

ABBREVIATIONS

ADESS	Administradora de Subsidios Sociales [Social Subsidies Administration Unit]
CEP	Comer es Primero [Food First]
CCTP	Conditional cash transfer program
CTII	Comité Técnico Interinstitucional [Interagency Technical Committee]
CTIS	Comité Técnico Intersectorial [Intersector Technical Committee]
DAF	Dirección Administrativa Financiera [Financial Management Department]
DTE	Dirección Técnica Ejecutiva [Executive Technical Department]
ENDESA	Encuesta Nacional de Demografía y Salud [National Demography and Health Survey]
GCPS	Gabinete de Coordinación de Política Social [Social Policy Coordination Council]
ICT	Tecnologías de Información y Comunicación [Information and communication technologies]
ICV	Índice de Calidad de Vida Urbana [quality of life index]
ILAE	Incentivo a la Asistencia Escolar [school attendance incentive]
RAS	Red de Abasto Social [Social supply network]
SENASA	Seguro Nacional de Salud [National Health Care System]
SIUBEN	Sistema Único de Beneficiarios [master beneficiaries system]
SMES	Sistema de Monitoreo y Evaluación de Solidaridad [Solidaridad monitoring and evaluation system]
UNAP	Unidad de Atención Primaria [Primary health care unit]

PROJECT SUMMARY

DOMINICAN REPUBLIC SUPPORT FOR THE SOCIAL PROTECTION PROGRAM FIRST PHASE (DR-L1039)

Financial Terms and Conditions*					
Borrower: Dominican Republic Executing agency: Social Policy Coordination Council				Amortization period:	25 years
				Grace period:	18 months
				Disbursement period:	18 months
Source	Phase I	Phase II	Phase III	Interest rate:	LIBOR
IDB (Ordinary Capital)	70 million	100 million	130 million	Inspection and supervision fee:	*
Local	0	0	0	Credit fee:	*
Other	0	0	0	Currency:	U.S. dollars from the Single Currency Facility
Total	70 million	100 million	130 million		
Project at a glance					
Project objective: This operation is the first of three phases of a multiphase loan, the general objective of which is to protect and improve the investments that poor families in the Dominican Republic make in education, health, and nutrition. The specific objectives of the first phase of the multiphase loan are to: (i) begin the transition of Solidaridad’s Conditional Transfers Program to a program that places greater emphasis on promoting improvements in the nutritional and health status and levels of its beneficiaries, and doing so more efficiently; (ii) strengthen the management capacity of the Sistema Único de Beneficiarios [master beneficiaries system] (SIUBEN), Solidaridad, and the Administradora de Subsidios Sociales [Social Subsidies Administration Unit] (ADESS), in terms of their capacity to serve beneficiaries in a timely manner, and their capacity to generate relevant information for decision-making by these agencies and the health and education sectors; and (iii) promote the ongoing improvement and transparency of Solidaridad, by initiating the development of the SMES and the implementation of innovations in the Solidaridad intervention framework.					
Special contractual conditions: (i) a revolving fund will be set up with up to 23% of the loan proceeds, in view of the fast pace of disbursements required to pay transfers to beneficiaries; (ii) up to US\$12 million will be financed retroactively for the period ranging from 1 April 2009 to the date the program is approved by the Bank’s Board of Executive Directors. This financing is justified because of the significant changes the country has made for the execution of Solidaridad, beginning with the design of this operation (February 2009) (see paragraph 3.4).					
Exceptions to Bank policies: None.					
Project consistent with country strategy:		Yes [X]	No []		
Project qualifies as:		SEQ [X]	PTI [X]	Sector [X]	Geographic [] Headcount [X]
Procurement: Will be undertaken pursuant to Bank policies.					

* The credit fee and inspection and supervision fee will be established periodically by the Board of Executive Directors as part of its review of the Bank's lending charges, in accordance with the applicable provisions of the Bank's policy on lending rate methodology for Ordinary Capital loans. In no case will the credit fee exceed 0.75% or the inspection and supervision fee exceed, in a given six-month period, the amount that would result from applying 1% to the loan amount divided by the number of six-month periods included in the original disbursement period.

I. DESCRIPTION AND RESULTS MONITORING

A. Background, problem, and justification

1. International crisis and social assistance reform

- 1.1 As a result of the international economic crisis, the already discernible slowdown in the Dominican economy is threatening to widen the gap between the supply of and demand for public social protection actions. As the country needed to make a fiscal adjustment even before the crisis, there is now little room to boost social assistance expenditure as a countercyclical measure. This is particularly critical bearing in mind that social spending in the Dominican Republic is one of the lowest in the region (7.4% of GDP), at virtually half the regional average.¹
- 1.2 The economic crisis in 2003-2004 revealed the fragility of the social protection tools available to many Dominican households, and the economic slowdown increased the poverty rate dramatically (from 27.6% in 2002 to 43.4% in 2004). Since then, the economy has performed well, albeit unevenly, but poverty has not returned to its pre-crisis levels (the rate was 35.2% in April 2008). For that reason, the current crisis is expected to increase the demand for interventions to protect the welfare of the population and prevent the poorest sectors from disinvesting in their human capital (nutrition, health, education) in response to the adverse economic situation, thereby further reducing their chances of overcoming poverty through their own means.²
- 1.3 The economic situation thus makes it even more important to allocate social assistance expenditure more effectively and efficiently. In 2002, a social assistance reform process began in this direction, but its evaluation has been mixed. While progress has been made in rationalizing expenditure,³ there is still a long way to go in terms of reducing the budget assigned to programs that are not cost-effective. In addition, although key policy instruments, such as the Master Beneficiaries System (SIUBEN) and the “Solidaridad” conditional cash transfers program (CCTP), have been developed to achieve the reform's objectives, they need strengthening to make them more effective.
- 1.4 These instruments are described below, along with the challenges to consolidating them. The emphasis is on Solidaridad, the strengthening of which is the main focus of this loan operation.

¹ The 2009 income and expenditure budget allocates 1.9% of GDP to education and 1.7% to health.

² Preliminary estimates indicate that the poverty rate rose by two percentage points in the second half of 2008.

³ This included replacement of the general gas price subsidy with a targeted cash transfer (gas voucher) and the emerging process to eliminate the electricity price subsidy. Albeit more modest, progress has been made in consolidating the country's disperse social assistance programs (supported by policy based loan DR-0150).

2. Tools to make social assistance actions more effective

- 1.5 **SIUBEN.** Operating since 2004, SIUBEN is a mechanism that promotes the transparent and objective targeting of social assistance programs through the socioeconomic identification and evaluation of potential beneficiaries. It is operated by the Social Policy Coordination Council (GCPS), which is attached to the Office of the Vice President of the Republic. Drawing on household surveys, SIUBEN assigns quality of life index (ICV) points to each household. It currently has information on 1.5 million households (almost 60% of the total), of which roughly 625,000 are classified as poor. Of these, 52% are extremely poor, according to their ICV. SIUBEN periodically provides the household registry to the social programs that use it, to select beneficiaries according to their specific operating regulations and budgets.
- 1.6 Although the SIUBEN 2008 operational assessment identified institutional strengthening needs, the general analysis of its organizational capacity and external perception is positive. A quantitative evaluation of SIUBEN still needs to be undertaken, to evaluate the suitability of its model for classifying households.^{4 5} SIUBEN management is strongly committed to implementing the recommendations made in these evaluations by designing a strengthening plan with a view to undertaking a new census in 2010.
- 1.7 **Solidaridad.** Created in late 2005 and attached to the GCPS, Solidaridad represents a change of approach to social assistance, by explicitly connecting the delivery of transfers to human capital investments made by the beneficiaries. It aims to break the intergenerational transmission of poverty by improving the investment that poor households make in education, health, and nutrition. The program has three components. “*Comer es Primero*” [Food first] (CEP) provides RD\$700 per month (US\$19.50) to each family that has fulfilled the following co-responsibilities: (i) attendance every four months by the head of the household or spouse at training events related to better nutrition and health care; and (ii) attendance every four months at a health unit by children between birth and five years of age to undergo a growth and development assessment, and immunization. The “*Incentivo a la Asistencia Escolar*” [school attendance incentive] (ILAE) provides RD\$300 per month to families with up to two children between six and 16 years of age, enrolled in 1st - 8th grade of basic education, RD\$450 if the family has three eligible children, and RD\$600 if it has four children or more. To receive this transfer, the

⁴ SIUBEN evaluations are funded with resources from the Labor Markets and Social Transfers Program, Phase I (DR-L1006). The quantitative evaluation is expected to be completed in October 2009.

⁵ *The Report on Poverty in the Dominican Republic* (IDB and World Bank, 2006) concludes that there is room to improve the performance of the methodology used by SIUBEN. Own estimates, based on the National Demography and Health Survey (ENDESA) 2007, confirmed this result, estimating a 21% filtration rate (i.e. nonpoor in terms of income, classified as poor by the ICV), with a moderate poverty line of RD\$2,849 per month. Both assessments suffer from significant methodological shortcomings that tend to overestimate filtration problems and thus cannot substitute for the quantitative evaluation currently being undertaken.

children must attend at least 85% of actual school days. “*Dominicanas y Dominicanos con Nombre y Apellido*” [Dominican men and women with first and last names] provides a preferential and cost-free procedure for undocumented members of Solidaridad beneficiary families in coordination with institutions responsible for civil registry and the issuance of identity documents.⁶ The annualized budget for Solidaridad transfers (CEP and ILAE) is roughly US\$150 million (about 0.3% of GDP in 2008 at constant prices).

- 1.8 To be eligible for Solidaridad, a family's ICV must classify them as extremely or moderately poor (SIUBEN 1 and 2), and their head of household must have an identity document. Budgetary constraints prevent Solidaridad from covering the entire population living in poverty (about 625,000 families), and it prioritizes the admission of families according to their ICV scores. It currently covers 461,000 families through the CEP and of these, 212,000 through the ILAE.
- 1.9 To separate the payment function from the identification and selection of beneficiaries, the Social Subsidies Administration Unit (ADESS), attached to the GCPS, is responsible for delivering transfers to Solidaridad beneficiaries.⁷ Payments are made monthly for the CEP and every two months for the ILAE, through a prepaid cash card that can be used in the Social Supply Network (RAS), which mainly consists of retail stores known as “*colmados*”.⁸
- 1.10 Although both civil society and the beneficiaries have a good perception of Solidaridad, in February 2009 the country began a consolidation process to strengthen the program's human capital promotion capacity and make it more efficient.⁹ The specific objectives of the process are to: (i) conceptually clarify its function as a social protection program, which has gradually become confused as transfers that in practice are not conditional (e.g. the gas voucher) have been included in its operations; (ii) strengthen its operational coordination with the education and health sectors to avoid duplication of functions and systems, and also to generate information on the poorest population groups in the country, which

⁶ According to Tamargo (2008), roughly 22% of children between birth and five years of age did not have a birth certificate in 2006, and 11.9% of adults did not have an identity document. The latter figure rises to 25% in the case of people who declare themselves heads of household in SIUBEN.

⁷ Apart from Solidaridad, ADESS also makes payments to beneficiaries of the higher education incentive, the protection program for elderly people living in extreme poverty, and the gas voucher.

⁸ Compared with the alternative of paying cash, this system has the advantages of having broad coverage with low administration costs, is well perceived by civil society, and has a perceptible stock of social capital between beneficiaries and the store owners (“*colmaderos*”), which can act as an informal social safety net tool. There are two disadvantages however. The first is that de facto restriction of the use of the transfer may result in a loss of welfare compared with a scenario in which the beneficiaries are free to choose where they spend it. The second is that prices in the “*colmados*” are higher than in markets and supermarkets, and their product range is smaller. The first of these would only be a real disadvantage if, in the case of cash payments, the beneficiaries chose to spend a smaller proportion of their liquid resources to purchase goods available in the “*colmados*”.

⁹ In 2007, Solidaridad reported an operating cost of 19%, double the international standard for CCTPs.

would be useful for policy design and evaluation; (iii) adapt its framework of transfers, co-responsibilities, and training for beneficiaries to align them with sector priorities, programs, and standards, and also to more effectively promote the behavioral changes needed to address the causes of the sector problem; (iv) deconcentrate and automate its operating cycle and strengthen its community organizational structure, to reduce costs, systematize verification of the set of co-responsibilities, and improve service to beneficiaries; and (v) systematize monitoring and evaluation to strengthen performance and accountability.¹⁰

- 1.11 The following paragraphs outline the developmental challenges faced by the country in terms of nutrition, mother-child health, and basic and secondary education, which provide a framework for the changes that have been and are being made to Solidaridad with support from this loan operation.¹¹

3. Promotion of human capital: developmental challenges in nutrition, health, and education

- 1.12 **Nutrition.** The Dominican Republic is going through a major nutritional epidemiological transition process, with a dual disease burden resulting from the prevalence of both undernutrition and obesity. While the chronic undernutrition rate (height for age) among the under-fives is a moderate 10% nationwide, levels of undernutrition at six months are high (8.5%) even by Latin American standards. Nonetheless, this indicator becomes more critical when it is analyzed for the SIUBEN-1 population (18% among the under fives, 10.6% for children younger than six months). At the same time, there is also an emerging obesity problem, since roughly 6% of children under six months are overweight, irrespective of their socioeconomic level. There is also a serious shortage micronutrients for the under-fives, which is worrying given its negative consequences for cognitive development and health: 27% suffer from anemia and 23% display vitamin A deficiencies.
- 1.13 Although one cannot rule out the possibility that these problems stem from low income (by restricting the level of spending on food), there is clearly considerable room to reduce them by improving nutritional practices. For example, just 8% of children are exclusively breast-fed until they are six months old, and foods to complement breast feeding are introduced too early in 90% of cases.
- 1.14 **Mother-child health.** At first glance, the mother-child health figures (children under one year of age) in the Dominican Republic are paradoxical. While the country has high rates of timely prenatal care (93.9%) and institutional delivery

¹⁰ Recent progress in this direction includes the signing of Presidential Decree 118-09 (February 2009), which, among other things, orders the restructuring of processes and systems in agencies involved in social protection.

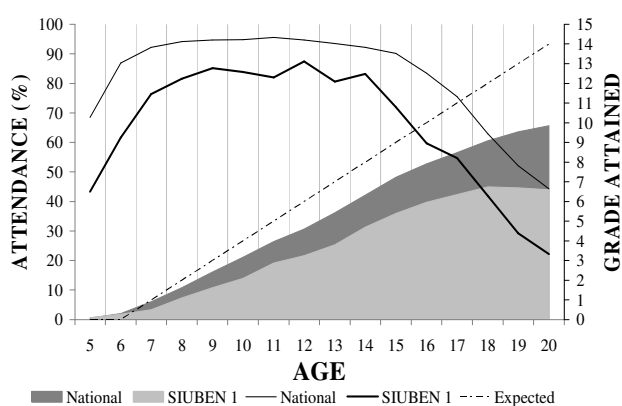
¹¹ For further details on the problem outlined in this document and its causes, see the technical notes on nutrition, health, and education prepared by the project team, which are available through the electronic links and use ENDESA 2007 as the key data input.

(98.3%), its infant and maternal mortality rates are among the region's highest: 32 per 1,000 live births and 159 per 100,000 live births, respectively.

- 1.15 In simple terms, there are three factors explaining this apparent paradox. Firstly, the use of prenatal and postnatal services, and hence maternal and infant mortality rates, varies greatly by socioeconomic level. For example, the prevalence of timely prenatal care is just 68.2% for women in the SIUBEN-1 group, and the corresponding infant mortality rate is 37.5% above the national figure. Owing to prior health and nutrition conditions, greater use of prenatal and postnatal care by this group of women and their children would produce a more-than-proportional improvement in national mother-child health indicators, compared with their representation in the population. Secondly, the need to improve the quality of health services and integrate the various care levels is evident. For this reason, high levels of access to and use of services do not translate into the expected results. Lastly, the mother-child health figures are highly influenced by fertility risk factors (anemia, short intervals between pregnancies, and both early and late pregnancies). For example, 22.5% of women between 15 and 19 years of age have been pregnant at least once; and the situation is even more alarming among young women classified as SIUBEN-1: 43% of 15- to 19-year-old women in this group have had at least one pregnancy.

- 1.16 **Basic and secondary education.** Figure 1 illustrates the significant educational challenge facing the Dominican Republic: how to translate high rates of school attendance and permanency into adequate years of schooling and learning outcomes. Ideally, a student should have completed the eight years of the basic education cycle by 14 years of age. In practice, at the national level, 92% of this age group is attending school, but has only completed 6.3 grades. In fact, just 69% of the cohort that was between 16 and 18 years of age in 2007 had completed basic education, and just 40% had completed the first cycle of secondary school (10 grades). The situation is even more critical among the SIUBEN-1 population: at 14 years old, 83% continue to attend school—high by regional standards but could be improved—but on average have only completed 4.7 grades. Based on the 16- to 18-year-old cohort in 2007, only 35% would complete basic education, and 12% would complete the first cycle of secondary school.

Figure 1. Current school attendance and last grade passed



- 1.17 Late school entry and early dropout, but mainly a high repetition rate explain these results. The explanatory factors are themselves the result, among other things, of

low-quality teaching and a lack of well-equipped educational infrastructure to make it possible to fulfill the minimum school timetable. At the same time, the slow pace at which students progress through the school cycle generates a vicious circle, by putting additional pressure on educational inputs and impairing learning, and thus promoting repetition.

4. Promotion of human capital: program strategy and rationale

- 1.18 In close collaboration with the World Bank, this loan operation (the program), supports the Government of the Dominican Republic in consolidating Solidaridad as a program that efficiently promotes and protects the human capital investment of the poorest Dominican families. That objective is consistent with the current country strategy, by making a priority of “modernizing social protection systems.” It is also consistent with the terms of reference of the new strategy, which establishes, under the objective of “Reducing Poverty,” the strategic tenet of “strengthening the social safety net by improving the targeting, evaluation, and monitoring of social assistance programs, building up operational coordination, and adjusting the design of transfer programs.” It is also consistent with the structural need to increase capacities among the country's poor population to make economic growth more effective in reducing poverty. Lastly, the program's objective is also relevant to the economic circumstances being experienced by the country, by preventing the gap between the demand for and supply of public social protection measures from widening. The program has been designed on the basis of four lines of action described below.
- 1.19 **Coordination of Solidaridad with the supply of services.** To promote this coordination, in March 2009 the government set up the Intersector Technical Committee (CTIS),¹² which has devised a framework of co-responsibilities that is better aligned with sector priorities.¹³ In the specific case of health, coordination with the sector also encouraged these co-responsibilities to be established on the basis of the care protocols and standards set out in the Basic Health Plan. In the case of nutrition, coordination with health care supply will make it possible to provide micronutrient supplements in the form of dosage packets or *chispitas* [sprinkles].
- 1.20 The program will promote integration between Solidaridad's information technology systems and those of the education and health sectors to increasingly verify co-responsibilities automatically. This will reduce administrative costs and make it possible to set up a shorter operating cycle, thus enhancing the capacity of Solidaridad to detect and deal with the specific problems faced by their beneficiaries. Automated verification in education will start in pilot form in four provinces (out of a total of 32) during the next school year (July 2009 to May

¹² Consisting of technical experts from Solidaridad and from the Ministries of Economic Affairs, Finance, Education, and Health and the Seguro Nacional de Salud [National Health Care System] (SENASA).

¹³ It is available in the program's electronic links as part of the operating manual.

2010). For the subsequent school year, the aim is to have extended this system throughout the country, and to have begun the automated verification process in the health sector.¹⁴

- 1.21 Fiscal constraints preclude a significant increase in the near term in the health and education budget to ensure that the services provided to Solidaridad beneficiaries have inputs that satisfy minimum standards. Nonetheless, the program will promote the implementation of a multiyear plan to raise the priority in budgetary allocation to ensure that supply deficits are gradually covered.¹⁵
- 1.22 **Adjustment to the transfer and co-responsibilities system.** Among significant post approval design activities, the Bank will assist the government in formulating a new system for transfers in the education sector. This system will be incremental in relation to the grade level passed, firstly to reflect the dynamic of the opportunity cost of attending school, and secondly to generate school progression incentives.¹⁶ The new transfers system will be fiscally neutral, which will require smaller resource transfers to households with few children and in the first few grades of basic education. The operational implications of changing this system will be evaluated in the next school year, and implementation will start in the subsequent one.
- 1.23 Complementing the adjustment to the co-responsibilities, the program will also promote beneficiary participation in community training events, the design of which has been strengthened to more effectively promote changes in behavior with regard to food acquisition and consumption, preventive health care measures at the household level, and prevention of teen pregnancy, among other things.
- 1.24 **Deconcentration of the operational process.** Although the separation of functions between SIUBEN, Solidaridad, and ADESS improves transparency in beneficiary targeting, service, and payment, it has also generated high administrative costs. To increase the crosscutting efficiency of these institutions, in March 2009 the

¹⁴ Automated verification of co-responsibilities in the health sector could be done through SENASA's information system. This poses significant operational challenges, since, for example, 23% of Solidaridad beneficiaries are ineligible because they do not have an identity document.

¹⁵ Preliminary estimations show that the main supply deficits are in education. Roughly US\$185 million would be needed to cover shortfalls in basic education, and US\$252 million if the aim is to expand the scope of Solidaridad to embrace basic secondary education. The Bank will help to close this gap through operation DR-L1032, which is expected to be approved in 2010. In contrast, closing supply shortfalls in health would only require US\$15 million (excluding medication costs and the delivery of micronutrients).

¹⁶ An analysis will also be made of the relevance of extending the scope of Solidaridad to preschool and basic secondary education. Although preschool attendance can have a positive impact on promoting completion of schooling (through better readiness for learning and early entry into the school system), it is important to consider its potential impact on classroom overcrowding, which is already high. Promoting attendance in secondary education would also be justified because of the high return on investment in higher secondary education. Nonetheless, supply problems are critical at that level, so any expansion of Solidaridad to that level requires careful analysis.

government set up the Interagency Technical Committee (CTII)¹⁷ with responsibility for producing an Operating Manual and a “crosscutting” interagency strengthening strategy. The manual envisages regional deconcentration of Solidaridad, and the program will support this by strengthening information technology systems. At the same time, the World Bank will finance a program to bring the capacity of the entities' staff into line with the new operational standards.

- 1.25 **Strengthening of monitoring and evaluation capacities.** The IDB and World Bank will support the government in implementing the Solidaridad Monitoring and Evaluation System (SMES), which will evaluate the following: (i) program impact (ii) innovations; (iii) processes; (iv) beneficiary perceptions; and (v) participatory program monitoring (by the community and local service providers). The Bank will finance and support the design of the first two elements, and the World Bank will do the same with the others.

B. Objectives, components, and cost

- 1.26 This operation is the first of three phases of a multiphase loan, the **general objective** of which is to protect and increase the investment that poor families in the Dominican Republic make in education, health, and nutrition. The **specific objectives of the multiphase series** are to: (i) develop the coordination of Dominican State resources directed towards increasing human capital among the poorest families, and thus make it more effective; (ii) provide conditions and give incentives for Solidaridad beneficiaries to make decisions that lead to greater human capital investment; (iii) reduce the administrative costs of implementing the Solidaridad operational cycle; and (iv) create conditions that allow for continuous improvement and promote the transparency of Solidaridad.
- 1.27 The **specific objectives of the first phase** of the multiphase series are to: (i) begin the transition of Solidaridad to a program that places greater emphasis on promoting improvements in the nutritional and health status and enrollment levels of its beneficiaries, and doing so more efficiently; (ii) strengthen the management capacity of SIUBEN, Solidaridad, and ADESS, in terms of their capacity to serve beneficiaries in a timely manner, and their capacity to generate relevant information for decision-making by these agencies and the health and education sectors; and (iii) promote the ongoing improvement and transparency of Solidaridad, by initiating the development of the SMES and the implementation of innovations in the Solidaridad intervention framework.
- 1.28 **The milestones triggering the following two phases** are related to compliance with the operational manual, evaluations that inform the design of the different phases, and the implementation of budget safeguards that make it possible to cover shortfalls in the supply of education, health, and nutrition. The specific milestones for **triggering the second phase** are: (i) an external evaluation to determine

¹⁷ Consisting of technical experts from SIUBEN, Solidaridad, and ADESS.

compliance with the operating manual;¹⁸ (ii) evaluation of the Social Supply Network (RAS) finalized and incorporation of recommendations in the design of the second phase of the operation to expand the use of transfers by the beneficiaries, to the Bank's satisfaction; (iii) an external operational evaluation of implementation of the crosscutting processes manual; (iv) an evaluation of information technology systems; (v) with the Bank's prior clearance, approval by the CTIS of an alternative system of educational transfers, and of the community training component, to be evaluated initially on a pilot basis during the first phase of the program at the start of the 2010-2011 school year; and (vi) implementation of the procedure to ensure that the funds appropriated in the 2010 income and expenditure budget to cover shortfalls in education, health, and nutrition are not altered and are disbursed in accordance with the execution timetable.¹⁹ The program consists of three components as described below.

- 1.29 **Component 1: Conditional transfers to poor households (US\$65.45 million).** Its objectives are to protect the expenditure of Solidaridad beneficiary households and encourage their demand for the public health, nutrition, and education services agreed upon by the CTIS. It will partly finance CEP and ILAE transfers to families that have complied with an adjusted co-responsibilities scheme, set out in the new operating manual. The manual will be approved by the CTIS and CTII, and also by the IDB and World Bank, before this operation is presented to the Bank's Board of Executive Directors.²⁰ The budget for this component accounts for roughly 43% of the annualized budget of Solidaridad for the CEP and ILAE transfers.²¹
- 1.30 **Component 2: Strengthening of institutional information systems (US\$4 million).** This component aims to strengthen capacities in terms of management, operations, and services provided to SIUBEN, Solidaridad, and ADESS beneficiaries, by improving and integrating these entities' information technology systems. This technological modernization will make it easier to deconcentrate operations to the regions, and will improve the quality and timeliness of information, with the aim of rationalizing expenses and investments in information and communication technologies (ICTs). Funding will be provided for

¹⁸ Such compliance will be evaluated on the basis of the following parameters: (i) on the last payment date prior to presentation of the second operation to the Board of Executive Directors of the Bank, co-responsibility in education will be verified for at least 90% of beneficiary households and in health for 70%; and micronutrients will be delivered to at least 50% of the eligible population (pregnant and postpartum women, children between the ages of six and 60 months)

¹⁹ This budget safeguards procedure ensures the creation of specific programs within the Ministries of Education and Health with regard to the Solidaridad program that can only be executed in the context of closing the supply gaps established by the CTIS.

²⁰ An initial draft of the operating manual is available through the program's electronic links.

²¹ Excluding administrative expenses and the costs incurred in targeting functions and payments made by SIUBEN and ADESS. If these items were included, the proportion would drop to around 25%.

consulting services, procurement of technological infrastructure, software licenses and training, to develop specific projects.²²

- 1.31 **Component 3: Evaluation of impact and innovations (US\$450,000).** The aim of this component is to start the SMES development process, which will help to create conditions for continuous improvement and promote the transparency of Solidaridad. This objective is expected to be achieved alongside implementation of a technical cooperation operation (DR-T1052) that will generate information for performing an ex post evaluation of Solidaridad and, at the same time, serve as a baseline for evaluating the impact of the changes made to the program. This component will also finance consulting services to evaluate the quality of health services through practical hypothetical cases (vignettes), and an evaluation—at the pilot level—of three potential innovations to the design of Solidaridad:²³ (i) increase in the number of commercial establishments that accept the Solidaridad cash card, to analyze its effect on the quantity and quality of the consumption of foods and other goods, as well as its impact on the local economy; (ii) incorporation of ICTs as a tool to improve the program's communication with beneficiaries; and (iii) incorporation of a strengthened system of community training on topics related to human capital.
- 1.32 Table I-1 summarizes program costs and shows the complementary activities being undertaken with World Bank funding.²⁴

²² These projects are: (1) integration of information systems for electronic data exchange between entities; (2) development of a management information system to support analysis, monitoring, and decision-making on social protection programs; (3) implementation of an electronic document management system in the three entities; (4) implementation of an SMS messaging platform to improve communication between the entities and beneficiaries; (5) development of a one-stop window of the social protection system on the Internet, which will supply information and consultation services available on the GCPS, SIUBEN, Solidaridad, and ADESS websites; (6) improvement of financial management and accounting systems in the three entities; (7) improvement of the master beneficiary registration system; (8) improvement of the payments system; (9) strengthening of information technology security in the three entities; (10) strengthening of ICT management processes, applying best practices and quality standards; (11) modernization of the technological infrastructure of the three entities, including refitting of rooms housing computer hardware, upgrading of communications networks in the entities with their regional and provincial offices, and implementation of IP telephony; (12) strengthening of the three entities' information technology departments, for the period in which they will have to combine continuity of the current information technology service with the design, development, implementation of earlier projects; and (13) evaluation of information technology systems.

²³ Innovations that could be studied during a possible second phase include: (i) incorporation of the new educational transfers system; (ii) linkage with teaching strategies aimed at reducing the proportion of over-age children in the different school grades; and (iii) promotion of preventive health in relation to chronic diseases.

²⁴ World Bank funding to support the social protection programs—mainly Solidaridad—will be channeled through a new unrestricted loan (US\$70 million), and expansion of a current investment loan (US\$8 million). Table I-1 does not show the unrestricted financing or support for the new SIUBEN census funded by the investment loan.

Table I-1. Summary of program costs and complementary World Bank financing

Component/budget item	Cost (US\$ thousands)	
	IDB	WB
Component 1. Conditional transfers	65,450	
Component 2. Strengthening of information systems	4,000	
Component 3. Evaluation of impact and innovations	450	
Staff training in the new operational system		661
Monitoring, process and qualitative evaluation		1,101
Community participation and participatory monitoring		439
Administrative costs (strengthening for execution)	80	
External audit	20	
Total	70,000	2,201

C. Results framework and key indicators

- 1.33 The program's results framework sets out indicators, baselines, and outcome targets for the multiphase program. The program's electronic links contain a framework that summarizes the logical relationship between program interventions, the expected intermediate outcomes, and their anticipated impacts. The outcome indicators have been established for the series of three loans, reflect the expected increase in human capital of the youngest members of Solidaridad beneficiary households, and have been established for SIUBEN-1 (the poorest beneficiaries). The indicators are: (i) prevalence of chronic undernutrition among children between birth and two years of age; (ii) the average height of children in the 36- to 60-month range; (iii) percentage of children under two years of age with complete immunization; and (iv) percentage of children between 14 and 16 years of age who have completed at least six years of basic education.²⁵ Given the rapid pace of execution anticipated for this first operation, the use of intermediate outcome indicators (at the component level) as results indicators for the first phase is recommended. Indicators of human capital investment have been selected to measure intermediate outcome for Component 1. The intermediate outcome indicators chosen for Component 1 are indicators of investment in human capital that follow directly from the delivery of cash transfers and the monitoring and implementation of co-responsibilities. To measure Component 2 results, one indicator is presented to evaluate the integration and modernization of the information technology systems of entities involved in implementing the Solidaridad operating cycle, and another to measure efficiency gains obtained from the program's regional deconcentration and automation of its processes. Component 3 includes an indicator measuring the use of the impact and innovation evaluation results to improve Solidaridad design and operation. Lastly, the results framework

²⁵ Despite being a program objective, no indicator was included to measure the impact on maternal mortality, since there is potentially a high level of error when measuring this indicator.

and the electronic link on Monitoring and Evaluation describe how the measurement of outcomes will evolve as the multiyear evaluation strategy is implemented.

II. FINANCING STRUCTURE AND MAIN RISKS

A. Financial instrument

- 2.1 The use of a multiphase investment loan enables the Bank to provide close technical support to the country, in the context of a complex technical agenda that will need to be adjusted through time, based on evaluations. At the same time, the Solidaridad execution structure affords a degree of certainty to the programming of disbursements in this operation, which is extremely valuable to the government given its current fiscal situation. The program's second phase is expected to be presented to the Bank's Board of Executive Directors in mid-2010, for a loan amount of US\$100 million, and the third phase in mid-2011 for US\$130 million.

B. Environmental and social risks and mitigation measures

- 2.2 In accordance with the Environment and Safeguards Compliance Policy (OP-703), the ESR classified the program as a “C” operation.

C. Fiduciary risk

- 2.3 An institutional capacity assessment of this program's implementation arrangements, with respect to accounting-financial and procurement issues (ICAS), rated its fiduciary risk as low.

D. Other risks

- 2.4 Except for the protection of consumption in the short run, the impacts of Solidaridad are constrained by the quality of the nutrition, health, and education services supplied. If the CTIS is not consolidated as a coordination mechanism, and if incentives are not created to retarget resources that promote supply quality, the program's impacts could be substantially below potential. To mitigate this risk, a cross-cutting operational manual for Solidaridad has been produced, which regulates CTIS action for program implementation. In addition, an agreement has been reached with the government to implement budget safeguards that guarantee minimum and targeted investment of education and health—including nutrition—expenditure as the trigger of the subsequent phases of the program.

III. IMPLEMENTATION AND MANAGEMENT PLAN

A. Summary of implementation arrangements

- 3.1 **Program implementation framework.** The program's executing agency will be the GCPS, which was created by Presidential Decree (1082-04) and given executive and coordination powers. It has the mandate and the capacity to implement the program, since Decree (570-05) gives it the functions of leadership, management,

- and execution of programs in the government's social protection system, and it has implemented other multilateral organization projects, specifically with the World Bank.
- 3.2 **Execution scheme.** The program will be implemented by the Executive Technical Department (DTE) and the Financial Management Department (DAF) of the GCPS. Program funds will be used to hire a coordinator, located in the DTE, and an operations technical expert, located in the DAF. The Coordinator will report to the DTE and have the function of facilitating and supervising the execution of program components, in coordination with the CTIS and CTII, pursuant to the powers given to them under the program's operating manual. The DAF will be responsible for procurement, contracting, and payments at the DTE's request through the Coordinator, except for transfer payments, which are the responsibility of ADESS.
- 3.3 **Procurement.** The procurement of goods and services and the selection and contracting of consulting services will be done in accordance with the Bank's policies. Procurements will be reviewed ex ante, in accordance with the thresholds set out in the procurement plan. Six months from the start of program execution, the appropriateness of making a change so as to review procurements ex post will be evaluated.
- 3.4 **Disbursements.** A **revolving fund** will be created for up to US\$16 million (23% of the loan amount), taking into account the fast pace of disbursements needed for transfer payments to beneficiaries. Two separate accounts will be set up in the revolving fund, the first in the amount of US\$15 million for Component 1, and the second in the amount of US\$1 million for Components 2 and 3. In Component 1, disbursements will be released at the rate of US\$15 million each quarter, against presentation of reconciliations of payments made to beneficiaries in the expiring quarter, prepared by ADESS, and payment projections for the following quarter prepared by the GCPS. For Components 2 and 3, a disbursement will be made to set up the respective revolving fund account, and this will be replenished as project implementation proceeds. Up to US\$12 million will be **financed retroactively**, applicable to the period ranging from 1 April 2009 to the date the program is approved by the Bank's Board of Executive Directors, for expenses executed in accordance with policies and procedures acceptable to the Bank. This is justified by the significant changes that the government has made to implement Solidaridad since March 2009.
- 3.5 **External audit.** The borrower will file the program's annual consolidated financial statements with the Bank, within 120 days of the end of the fiscal year in question. Audits will be performed by a firm of independent auditors acceptable to the Bank, and the corresponding costs will be financed out of program funds.
- B. Summary of arrangements for monitoring results**
- 3.6 One of the program's intermediate outputs is development of the SMES. In close collaboration with the World Bank, the program will fund a number of monitoring and evaluation processes, seeking to: (i) generate learning to make it possible to

- gradually improve the design and operation of Solidaridad; and (ii) make the program more transparent by strengthening the accountability process.
- 3.7 Paragraphs 1.25 and 1.30 describe the monitoring and evaluation processes to be financed by the IDB and the World Bank in the 2009-2010 period. The program's electronic links give details of methodological aspects related to the processes to be financed by the Bank, both during the first phase of the financing and to be able to measure the results presented in the program's results framework. Household surveys will be implemented in the first quarter of 2010 to conduct an ex post evaluation of Solidaridad (2005-2008) using a quasi-experimental methodology, and at the same time serve as a baseline for evaluating the impact of the changes made to the program. Pursuant to the Bank's policies, the executing agency will submit a semiannual activities report to the Bank.
- C. Significant design activities post approval**
- 3.8 The following activities will be undertaken to strengthen the design of Solidaridad during execution of the first phase of the program: (i) design of a new transfer system in education; (ii) design details of the impact evaluation; (iii) specific design of innovations to be evaluated in the first phase of the program; and (iv) an international workshop on technologies for changing health, eating, and nutrition habits. This workshop will be held in the fourth quarter of 2009 in the Dominican Republic, and its results will be used in the final design of the pilot to strengthen community training efforts.

RESULTS FRAMEWORK - MATRIX OF INDICATORS SUPPORT FOR THE SOCIAL PROTECTION PROGRAM (DR-L1039)			
PROJECT OBJECTIVE	To protect and increase the investment that poor families in the Dominican Republic make in education, health, and nutrition.		
EXPECTED IMPACT	A reduction in the intergenerational transmission of poverty.		
Outcome indicators¹	Baseline 2009²	Target by the end of the program³	Responsible Entity/Comments
(1) Nutrition: 1. Prevalence of chronic undernutrition among children from birth to two years of age in SIUBEN-1 families.	1. 11.6%	1. 10.44%	1. According to the Monitoring and Evaluation Plan (see electronic link)
(2) Health: 2. Average height of children between months 36 and 60 in SIUBEN-1 households	2. 98.8 cm	2. 99.8 cm	2. According to the Monitoring and Evaluation Plan. Height is a long-term general measurement of health since it is a function of the quality of food and nutrition and of the “insults” to health faced throughout childhood, in particular infancy.
3. Percentage of children under two years of age in SIUBEN-1 households with complete immunization.	3. 46.8%	3. 60%	3. According to the Monitoring and Evaluation Plan.

¹ Given the short implementation period for the first phase of the program, its outcomes should be evaluated based on the intermediate outcomes described for the components. As the evaluation process—described in the Monitoring and Evaluation annex—is implemented, it will be possible to establish outcome indicators based on a “short-term control group” (receives Solidaridad support, but without the program-promoted improvements) and a long-term control group (does not receive Solidaridad support, but is close to the eligibility cohort point to have received it), although, by design, the latter will refer to the less poor beneficiary population.

² Estimates made by the project team based on ENDESA 2007.

³ As described in the Monitoring and Evaluation link, target achievement could be measurable through a before and after evaluation for the SIUBEN 1 population, based on the 2007 and 2013 ENDESAs. The 2013 survey is expected to be conducted in 2012. The link describes an impact evaluation process that in the future will make it possible: (i) to establish the impact of the lending program in comparison with the impacts that would have been made if Solidaridad had not modified its intervention and operational design (an ex post evaluation of Solidaridad will be made using the discontinuous regression technique to identify impact, and impacts will be established on the upper margin of the distribution of potential beneficiaries based on the implementation of pilot programs); (ii) to establish the specific attribution of the short-term program through the implementation of pilot evaluations based on an experimental design; and (iii) lastly, when the entire eligible population is covered, to conduct a (before and after) “ingenuous” evaluation, to which this version of the Results Matrix refers. Accordingly, this Results Matrix will necessarily change during the program evaluation process. Based on these evaluations, it will also be possible to establish ex post the cost-benefit ratio of the Solidaridad program and the credit program.

(3) Education: ⁴ 4. Percentage of children between 14 and 16 years of age in SIUBEN-1 who complete at least six grades of basic education.	4. 38.9%	4. 48.5%	4. According to the Monitoring and Evaluation Plan. Perhaps the best indicator for education is “learning” measured through standardized tests. However, the electronic link “Logic of the outcomes expected from the program” discusses the biunique relationship between that indicator and “years of schooling.” As also discussed in that link, although the program is expected to have an impact on the “learning” indicator, a significant impact is not expected in the short term. However, “learning” will be evaluated to estimate up to what point higher passing rates are a proxy for “learning.”			
COMPONENT I: MONETARY TRANSFERS WITH CO-RESPONSIBILITIES						
	Base level 2009 ⁵	Phase 1 2009-2010	Phase 2 2010-2011	Phase 3 2011-2012	Cumulative target	Entities in charge/comments
Product indicators						
1 Increase in the number of SIUBEN 1 and 2 CEP beneficiary households.	453,000	0	0	100,000	553,000	Solidaridad, ADESS
2. Increase in the number of SIUBEN 1 and 2 ILAE beneficiary households.	230,000	0	200,000	90,000	520,000	Solidaridad, ADESS
Intermediate outcome indicators						
1. Percentage of households with children under five that are CEP beneficiaries and receive micronutrient supplements.	0%	50%	90%	90%	90%	Solidaridad
2. Percentage of children under six months in Solidaridad households who are exclusively breast-fed.	8%	16%	19%	22%	22.8	Solidaridad
3. Percentage of children under 60 months of age in Solidaridad households that are being monitored and have received growth promotion services.	0%	80%	90%	90%	90%	Solidaridad
4. Reduction in the average price paid by Solidaridad beneficiaries for a food basket (to be determined).	TBD	TBD	TBD	TBD	TBD	To be determined during implementation of the first phase through the RAS expansion pilot.

⁴ During implementation of the first phase, it will be determined whether the following objectives are appropriate for the program: (i) higher enrollment in early education; (ii) higher enrollment in basic secondary education; and (iii) higher completion rate in basic secondary education.

⁵ The baseline for the indicators for Solidaridad households or beneficiaries is extrapolated from indicators for the SIUBEN-1 population. During the first phase, the baseline will be defined for the Solidaridad evaluation, and these figures will be adjusted along with the projections of outcomes.

5. Percentage of expectant mothers in Solidaridad households receiving iron supplement.	81.3%	85%	90%	90%	90%	Solidaridad
6. Percentage of expectant mothers in Solidaridad households receiving a prenatal checkup in the first month of pregnancy.	68.2%	70%	80%	85%	85%	Solidaridad
7. Percentage of adults over 65 years of age in Solidaridad households who attended a preventive health checkup in the last month.	1.1%	1.1%	TBD	TBD	TBD	This will be determined during implementation of the second phase through the preventive health promotion pilot.
8. Prevalence of over-age (2 years or more compared with the ideal age for the grade) among children under 16 in Solidaridad households).	45%	TBD	TBD	TBD	TBD	This will be determined on the basis of the microsimulation of a new transfer plan (first phase), and implementation of a pilot program (second phase).

COMPONENT II: INSTITUTIONAL STRENGTHENING, IMPROVEMENT OF MANAGEMENT AND SERVICES FOR BENEFICIARIES						
Output indicators ⁶	Base level 2009	Year 1 2009-2010	Year 2 2010-2011	Year 3 2011-2012	Cumulative target	Responsible Entity/comments
1. Interfaces between the systems of the following institutions: (i) Solidaridad; (ii) SIUBEN (iii) ADESS; (iv) SENASA; and (v) the Ministry of Education.	There are no interfaces between the systems	Interfaces operating			Interfaces operating	CCII
2. Integrated management information system to support decision making and the design and monitoring of social protection programs.	Nonexistent	System operating and in use.			System operating and in use.	CCII
3. Electronic document management system.	Manual document management	System in use			System in use	CCII
4. SIUBEN, Solidaridad and ADESS communications networks upgraded and modernized.	Current networks.	Networks upgraded (operational de-concentration)			Networks upgraded	CCII
5. IP telephony platform: an integrated IP solution for SIUBEN and Solidaridad, and another for ADESS, both connected.	IP telephony in SIUBEN and Solidaridad	IP telephony in 80% of offices	IP telephony in 90% of offices	IP telephony in 95% of offices	IP telephony in 95% of offices	CCII
6. Social protection system website which aggregates and presents information and electronic services of SIUBEN, Solidaridad and ADESS.	Individual websites	Website operational			Website operational	CCII
Intermediate outcome indicators						
1. Administrative information is used to generate analytical information of use for decision-making.	Slow, risky, and fragmented flow of social protection data.	Fluid, safe, and comprehensive flow of information between social protection entities.			Fluid, safe, and comprehensive flow of information between social protection entities.	System evaluation to be financed using program funds.

⁶ A selection of output indicators is shown from the 12 projects to be implemented under this component.

2. Administrative costs of Solidaridad. ⁷	19%	19%	15%	12%	12%	Integrated management information system (with program resources) promoted through automation of the verification of co-responsibilities and operational deconcentration
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COMPONENT III: IMPACT AND INNOVATION EVALUATIONS						
Output indicators	Base 2007	Year 1 2009-2010	Year 2 2010-2011	Year 3 2011-2012	Cumulative target	Data source/comments
1. Evaluation of the supply of health services in primary health care units (UNAPs).	Not applicable	Completed			Completed	Consultancy report
2. Evaluation of pilot program to expand the RAS.	Not applicable	Completed			Completed	Consultancy report
3. Evaluation of the pilot program to introduce ICTs.	Not applicable	Completed			Completed	Consultancy report
4. Evaluation of the new community training system.	Not applicable	Completed			Completed	Consultancy report
Indicators of intermediate outcomes						
1. The lessons generated will be institutionalized to improve Solidaridad design and operation.	There are only evaluations of perceptions of Solidaridad.		1. Lessons generated by the evaluations performed in the first phase are incorporated into the design or operation of Solidaridad.		Solidaridad monitoring and evaluation system functioning.	GCPS. To develop the SMES, the World Bank and IDB will both continue to support the formalization of other monitoring and evaluation tools in subsequent phases.

⁷ As part of preparation of the second phase of the program, a detailed study will be made of the administrative costs of Solidaridad, and those incurred by Solidaridad through targeting (SIUBEN) and payments (ADESS). This analysis will be used to review the projection on the targets.



OPERATION DR-L1039 **SUPPORT FOR THE SOCIAL PROTECTION PROGRAM - FIRST PHASE**

Period October 2009 - October 2010

Procurement Plan [2009/2010]

Procurement Plan [2009/2010]											
Reference No.	Description of the contract	Estimated cost (US\$000)	Procurement method	Review (ex ante or ex post)	Source of financing and percentage		Prequalification Yes / No	Estimated dates		Status (pending, in process, awarded, canceled)	Comments
					% IDB	% Local/other		Publication of Specific Procurement Notice	Completion of contract		
1. Goods											
1.1	Technological infrastructure SIUBEN, Solidaridad, ADESS; Software and antivirus; unified storage equipment for shared systems	1,847.40	ICB	ex ante	100%		No	QIV/2009	QIII/2010	pending	
1.2	Communications network (IP telephony, video, data)	450.00	ICB	ex ante	100%		No	QII/2010	QIII/2010	pending	
1.3	Two technical support vehicles. Solidaridad, ADESS	40.00	NCB	ex ante	100%		NO	QIV/2009	QI/2010	pending	
2. Works											
3. Nonconsulting services											
4. Consulting services											
	Integration of social protection systems										
4.1	Technical design of integration architecture, unification of codes and data for household members in the systems. Website design and development	175.00	QCBS	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.2	Development of integration architecture	48.00	CCIN	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.3	Adaptation of data centers for SIUBEN, Solidaridad, and ADESS, strengthening of information technology security, and diagnostic assessment of status and implementation of COBIT, ITL, ISO, and solution for automating technology services.	625.00	QCBS	ex ante	100%		No	QI/2010	QIII/2010	pending	
4.4	IP telephony in SIUBEN and Solidaridad	20.00	CCIN	ex ante	100%		No	QI/2010	QII/2010	pending	
4.5	SMS messaging platform for beneficiaries	75.00	CCIN	ex ante	100%		No	QII/2010	QIII/2010	pending	
4.6	Definition of management information system requirements and technical design and development of the system, Phase I.	157.00	QCBS	ex ante	100%		No	QI/2010	QIII/2010	pending	
4.7	Identification of requirements and selection of software for an electronic document management system. System implementation	90.00	CCII	ex ante	100%		No	QIV/2009	QI/2010	pending	
4.8	Procurement and implementation of enhanced resource management in the entities	46.00	CCIN	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.9	Improvement of the master beneficiary record system: communications (expert), technical design (1 expert), and system improvement (3 experts)	61.50	CCII	ex ante	100%		No	QIV/2009	QI/2010	pending	
4.10	Development of a new beneficiary payment system	150.00	CCII	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.11	Development and implementation of an SLA management system with the participating financial institutions	70.00	CCII	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.12	Strengthening of SIUBEN ICT team	25.00	CCIN	ex ante	100%		No	QIV/2009	QIII/2010	pending	
4.12	Strengthening of Solidaridad ICT team	25.00	CCIN	ex ante	100%		No	QIV/2009	QIII/2010	pending	
4.13	Strengthening of ADESS ICT team	25.00	CCIN	ex ante	100%		No	QIV/2009	QIII/2010	pending	
4.14	Evaluation of the supply of health services in UNAPs	140.00	QCBS	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.15	Evaluation of the RAS expansion pilot program	120.00	QCBS	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.16	Evaluation of the ICT introduction pilot program	80.00	QCBS	ex ante	100%		No	QIV/2009	QII/2010	pending	
4.17	Evaluation of the new community training model	70.00	QCBS	ex ante	100%		No	QI/2010	QIV/2010	pending	

Goods and works: ICB: International competitive bidding; LIB Limited international bidding; NCB: National competitive bidding; S: Shopping; DC: Direct contracting; FA: Force account; PSA: Procurement through specialized agencies; PA: Procurement agents; IA: Inspection agents; PLFI: Procurement in loans to financial intermediaries; BOO/BOT/BOOT: Build, own, operate/build, operate, transfer/build, own, operate, transfer; PBP: Performance-based procurement; PLGB: Procurement under loans guaranteed by the Bank; CPP: Community participation in procurement.

Consulting firms: QCBS: Quality- and cost-based selection; QBS: Quality-based selection; FBS: Selection under a fixed budget; LCS: Least-cost selection; CQS: Selection based on the consultants' qualifications; SSS: Single source selection.

Individual consultants: CCIN: Selection based on a comparison of individual national consultants' qualifications. CCII: Selection based on a comparison of individual international consultants' qualifications.

DOCUMENT OF THE INTER-AMERICAN DEVELOPMENT BANK

PROPOSED RESOLUTION DE-___/09

Dominican Republic. Loan ____/OC-DR to the Dominican Republic
Support for the Social Protection Program Stage I

The Board of Executive Directors

RESOLVES:

That the President of the Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such contract or contracts as may be necessary with the Dominican Republic, as Borrower, for the purpose of granting it a financing to support a social protection program stage I. Such financing will be for the amount of up to US\$70,000,000, from the resources of the Single Currency Facility of the Bank's Ordinary Capital, and will be subject to the Financial Terms and Conditions and the Special Contractual Conditions of the Project Summary of the Loan Proposal.

(Adopted on __ _____ 2009)

LEG/SGO/CID/IDBDOCS#2082815
DR-L1039