

**BULGARIAN NATIONAL REPORT ON THE  
THIRD REVIEW AND APPRAISAL OF THE IMPLEMENTATION OF THE MADRID  
INTERNATIONAL PLAN OF ACTION ON AGEING AND ITS REGIONAL  
IMPLEMENTATION STRATEGY (MIPAA/RIS)  
2012 – 2017**

**Outline of the report on the follow-up to the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing in Bulgaria**

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**Part I**

**Executive summary**

The strategic and operational documents on demographic development and promotion of active ageing are designed, monitored and reported within the **Interdepartmental Working Group on Demographic Issues** set up with an Order of the Minister of Labour and Social Policy and updated on an annual basis. **The members of this group (representatives of ministries, government agencies, non-governmental organisations, social partners, etc.) were invited to contribute to this document and to report on the actions taken within their sphere of competence for implementation of the four main goals of the Vienna Ministerial Declaration.** The information received is summarised and systematised in the second part of the report.

The key documents in the context of the strategic framework and the approach taken by the Bulgarian Government to promote active ageing include the **National Concept for Promotion of Active Ageing (2012 – 2030) and the Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria (2012-2030).**

**The National Concept for Promotion of Active Ageing (2012 – 2030)** is a follow-up and continuation of a major line of action in the Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria with a horizon up to 2030 – Overcoming the effects of population ageing.

The strategic objective of the National Concept for Promotion of Active Ageing is to enable active and decent living by ensuring equal opportunities for full-fledged participation of older people in the economic and social life of society.

The operational objectives and tasks laid down in the National Concept for Promotion of Active Ageing include:

Operational objective 1 – Enabling active working life of older people;

Operational objective 2 – Ensuring financial stability of the pension system, enabling active and decent life in retirement age and curbing poverty among pensioners;

Operational objective 3 – Ensuring access to health services and increasing the number of healthy life years of older people.

Operational objective 4 – Ensuring access to education, lifelong learning, training and retraining of older people with a view to improving their mobility on the labour market;

Operational objective 5 – Developing and upgrading long-term care and ensuring access to social services. Developing the so-called “silver economy”;

Operational objective 6 – Developing volunteering.

In 2015 the Ministry of Labour and Social Policy prepared a **Report on reflecting the National Concept for Promotion of Active Ageing in the sector policies, covering the period 2012-2014**. The analysis of the information received and summarized shows a need for undertaking integrated actions by institutions to adapt major sectors such as employment, healthcare, education, social insurance and social assistance to the process of population ageing.

The main strategic goal for the period 2012-2030 of the **Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria (2012-2030)** is to slow down the pace of population decline, achieving population stabilisation in the long run, and to ensure high quality of human capital, including people with their health status, education and qualification level, competences and skills.

The Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria (2012-2030) provides the strategic platform for taking an integrated, cross-sectoral approach in addressing the consequences of demographic changes, involving a maximum wide range of responsible institutions and organisations.

The key priorities of the Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria include:

1. Slowing down the negative demographic processes and population decline;
2. Overcoming the negative effects of population ageing and improving the quality characteristics of human capital;
3. Achieving social cohesion and creating equal opportunities for full-fledged social and productive life of all social groups;
4. Limiting the disproportions in the territorial distribution of the population and the depopulation of certain regions and of villages;
5. Adapting and aligning the legal framework with the societal needs of balanced demographic development and development of the quality of human capital.

The Republic of Bulgaria, through the Ministry of Labour and Social Policy, is one of the pilot countries that apply the Active Ageing Index in the analysis of the challenges and opportunities for promoting active ageing. **The Active Ageing Index is applied in Bulgaria within the project “Development of a national comprehensive strategy for active ageing” which is developed and implemented by the Demographic Policy and Planning Department of the MLSP with financial support from the European Union**. Six public discussions on active ageing issues were held in different regions across the country between April and June 2016 with participation of regional governors, mayors of municipalities, business and trade union representatives, non-governmental organisations, researchers, media, etc. A draft National Comprehensive Strategy for Active Ageing was developed as a result from the analysis and the discussions. The draft Strategy has been consulted with the different active ageing stakeholders and was presented at the closing conference of the project on 15<sup>th</sup> November 2016 in Sofia.

Regarding Bulgaria’s progress in fulfilling the commitments of the Regional Implementation Strategy of the Madrid International Plan on Active Ageing, **it can be concluded that diverse and targeted activities are carried out by the different responsible institutions within the framework of most of the commitments under the first three goals of**

**the Vienna Declaration, whereas the activities for the fourth goal – *Maintaining and enhancing intergenerational solidarity*, are mainly at the local level and need improvement in the future.**

## **General information**

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3. Name and contact details of official national focal point on ageing - Zlatina Naydenova, State Expert, Demographic Policy and Planning Department, Ministry of Labour and Social Policy, [znaydenova@mlsp.government.bg](mailto:znaydenova@mlsp.government.bg) , phone 003592 8119 514
4. Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing:
  - National Concept for Promotion of Active Ageing (2012-2030) adopted with Minutes No. 24 of the Council of Ministers meeting of 20.06.2012;
  - Report on reflecting the National Concept for Promotion of Active Ageing (2012-2030) in the sector policies, covering the period 2012-2014, adopted with Minutes No. 14 of the Council of Ministers meeting of 08.04.2015;
  - Updated National Strategy for Demographic Development of the Population of the Republic of Bulgaria (2012-2030), adopted with Minutes No. 4 of the Council of Ministers meeting of 01.02.2012;
  - National Comprehensive Strategy for Active Ageing (2016-2030) – under finalisation within the Project VS/2014/0026 according to a Grant Agreement between the European Commission and the Ministry of Labour and Social Policy.

### **1. National ageing situation**

**Demographically**, population ageing emerges as a long-standing and irreversible social process for the European countries, including Bulgaria. Eurostat projections indicate that the share of people aged 65+ in Bulgaria will increase from 17,4% in 2010 to 32,7% in 2060. In 2015, people aged 65+ make up 20,4 % of national population. The average age of the population indicator registers steady rising values in recent years. In 1995, it was 38.9 years, in 2001 - 40.4 years and in 2015 - 43.3 years.

According to National Statistical Institute (NSI) data, at 31 December 2015, the population of Bulgaria is 7 153 784 persons, making up 1.4% of the EU population. Compared to 2014, the population of the country decreases by 48 414 persons, or by 0.7%.

As in the previous years, in 2015 the population decrease in Bulgaria is attributable mainly to the natural decrease and not to external migration – as a result of the natural decrease population declines by 44 167 people and as a result of the mechanical decrease – by further 4 247 people.

In 2015, the demographic situation in Bulgaria is characterised by continuing population decline and ageing, low birth rates and high mortality rates. The absolute number of live births and the total fertility rate decrease. The number of deaths and the total mortality coefficient increase. The imbalance in the territorial distribution of the population aggravates.

Positive trends in 2015 include decreasing child mortality, higher number of concluded civil marriages, lower number of abortions, etc.

However, natural decrease as a result of the low birth rate and the high total mortality coefficient; population and labour force ageing; depopulation of towns, villages and regions; reproduction of different social inequalities preserve their long-standing negative effect.

The negative demographic trends in the past few decades and the changes in the population number and structure have a strong effect on the stability and functioning of the key systems of society: economic, educational, health-insurance, pension insurance, social protection and long-term care, labour market, etc. At the same time, the characteristics of the economic and social environment have a strong effect on the demographic development. The interaction of those processes is a challenge for any government.

After the 2009 GDP decline, since 2010 the Bulgarian economy is back on the path of economic growth. Growth in real terms varied between 0.1% and 1.5% in the period 2010-2014, driven mainly by exports of goods and services. In 2015 and the first half of 2016, GDP growth accelerated to 3%, but while in 2015 the main driver of increased economic activity were net exports, in the first half of 2016 domestic demand was the bigger contributor. While national economic growth remains higher than the EU 28 average, indicating a convergence to average EU income levels, on the **GDP per capita at PPP** (purchasing power standard) indicator Bulgaria remains the worst performer among the EU Member States with 46% in 2015.

Gradual increases in demand for labour and new jobs creation were at the basis of the accelerated growth in incomes in 2015 and the first half of 2016. The **national average wage** increased by 8.8% in nominal terms in 2015, driven mainly by the demand of highly qualified work force. In the first half of 2016, **growth in incomes** stabilised at 7.5%, with demand for labour extending to the lower qualification degrees. At the same time, labour market indicators registered improvement, including a decline in long-term unemployment to 4.8% and a decrease of the unemployment rate among people with primary and lower education to 24.3% in the first half of 2016.

Shortage of labour and the mismatch between labour demand and supply are major issues for the national economy, with implications for potential economic growth as well as for the competitiveness of the economy.

## 2. Method

A major condition for successful implementation of the demographic policy goals is to develop the capacity of all responsible institutions and partners at national, regional and local level. The Ministry of Labour and Social Policy provides coordination of the demographic and the active ageing policy.

Fourteen ministries, the National Health Insurance Fund, the National Statistical Institute, the National Social Security Institute, the National Association of Municipalities in the Republic of Bulgaria, public agencies, the Bulgarian Red Cross, non-governmental organisations, social partners, research institutes, etc., are engaged and involved in the implementation of the National Strategy for Demographic Development.

The Interdepartmental Working Group on Demographic Issues at the Minister of Labour and Social Policy is well into its tenth year of operation. It includes more than 80 experts from all institutions, structures and organisations involved in the implementation of the demographic policy. The Ministry of Labour and Social Policy prepares within the group on an annual basis cross-sector operational reports and plans for monitoring the implementation of the National

Strategy for Demographic Development and sets out measures and tasks for policy improvements.

Efforts to strengthen and develop the national coordination and monitoring mechanism for the implementation of the horizontal demographic policy continued in 2015 through the National Council on Demographic Policy established with Ministerial Decree No. 138 / 2 June 2014. The National Council on Demographic Policy at the Council of Ministers provides a broad platform for high-level cooperation and coordination between government bodies and institutions, local authorities, social partners and non-governmental organisations in the elaboration, planning, programming and performance monitoring and evaluation of the national demographic policy.

For the preparation of this report, a letter was circulated to all members of the Interdepartmental Working Group on Demographic Issues, inviting them to contribute and report on the actions taken within their sphere of competence for implementation of the four main goals of the Vienna Ministerial Declaration. The information received is summarised in part II hereof, with the institution/organisation providing the information mentioned for each one of the goals of the Vienna Ministerial Declaration / the commitments under the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing.

## **Part II**

### **1. National actions and progress in implementation of MIPAA/RIS**

#### **GOAL 1: ENCOURAGING LONGER WORKING LIFE AND MAINTAINING ABILITY TO WORK**

##### *Agency for People with Disabilities*

#### **Commitment 1: Mainstreaming ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages:**

Pursuant to the government policy for persons with disabilities and according to the provisions of Articles 51, 52, 53 and 53 a of the Implementing Regulations of the Integration of People with Disabilities Act (IRIPDA), the Agency for People with Disabilities pays targeted aid for use of sign language and for attendants of people with disabilities when they use the services of government and municipal administrations, health, educational and cultural institutions. In 2015, the nationally representative organisations of people with disabilities spend BGN 1 850 455 on targeted aid to 37060 persons.

The Agency for People with Disabilities finances projects with a social focus of specialised undertakings and cooperatives of people with disabilities. This activity is set out in Article 28 of the Integration of People with Disabilities Act (IPDA) and aims to create a favourable and healthy environment; improve the qualification and labour productivity of workers; create adequate conditions for improving the quality of work in the undertakings and cooperatives. Financing agreements were signed with 21 beneficiaries in 2015. The attainment of the project objectives resulted in improved working conditions of 660 factory and office workers, including 51 per cent of people with disabilities. Project implementation yielded the following outputs: ensured access to the workplaces of employed people with disabilities, to the WC rooms and the recreation places for the employed persons with permanent disabilities and health and safety at work ensured on a long-term basis for all persons employed in the specialised

undertakings and cooperatives. Activities aimed at improving the professional competences were implemented and standardised management system certification was enabled.

The Agency for People with Disabilities finances within the framework of the Rehabilitation and Social Integration of People with Disabilities Programme non-governmental public benefit purpose of and for people with disabilities, as well as nationally representative organisations of people with disabilities registered under the Cooperatives Act. Projects for trainings, ability to lead an independent lifestyle, rehabilitation, art-therapy and public events of and for people with disabilities are implemented within the framework of this programme; the design and publication of aids, manuals and materials in support of people with disabilities, as well as activities aiming to change the public attitudes to people with disabilities by organising their participation in fairs, labour exchanges, etc., are financed. Beneficiaries of the 20 projects financed within the framework of this programme in 2015 are about 3612 persons with disabilities.

*Ministry of Labour and Social Policy (MLSP)  
Employment Agency (EA)*

**Commitment 5: Enabling the labour market to respond to the economic and social consequences of population ageing:**

The focus of the measures undertaken by the Ministry of Labour and Social Policy in support of older people is on several priority areas:

- Provision of individualized services to promote active labour market behaviour; mediation to provide information and fill vacancies in the real sector; involvement in education and employment programmes and measures; operations under HRD OP 2014-2020;
- Giving a wider choice and ensuring access to training for enhancing vocational qualifications and acquiring key competences matching employer needs of workforce qualified in specific areas;
- Incentivising companies which provide employment to unemployed persons close to retirement.

The key legislative instruments regulating the implementation of the employment policy in Bulgaria include: Employment Promotion Act (EPA) and its Implementing Regulations (IREPA). EA adopts annually National Action Plan on Employment (NAPE), setting out the target groups in the priority focus of the active labour market policy. According to Item 4 of § 1 of the Additional Provisions of the Employment Promotion Act, ““Disadvantaged groups on the labour market” shall be groups of unemployed persons who are less competitive on the labour market, including: unemployed young persons; unemployed permanently disabled young persons; unemployed young persons from social institutions who have completed their education; long-term unemployed persons; unemployed permanently disabled persons; unemployed persons who are single parents (or male adopters) and/or mothers (or female adopters) with children under 5 years of age; unemployed persons who have served a custodial sentence; unemployed persons over 50 years of age; unemployed persons with primary or lower education without vocational qualifications; other groups of unemployed persons.” In the 2015 and 2016 NAPE, the priority focus of the active labour market policy is on the unemployed persons over 50 years of age.

***Monthly averages:  
01.01.2015 - 31.12.2015***

- ✓ *Number of unemployed persons – 330 816 persons;*
- ✓ *Number of unemployed persons over 50 years – 130 701 persons;*
- ✓ *Relative share of unemployed persons over 50 years in total registered unemployed persons – 39.5%.*

**01.01.2016 - 31.08.2016**

- ✓ *Number of unemployed persons – 297 975 persons;*
- ✓ *Number of unemployed persons over 50 years – 122 440 persons;*
- ✓ *Relative share of unemployed persons over 50 years in total registered unemployed persons – 41.1%.*

As is shown by the above data, the relative share of unemployed persons over 50 years of age registered in the Labour Office Directorates (LODs) increases. The observed increase in unemployment of older people calls for taking action to bring this group back to the labour market by special programmes and measures targeted with priority to the 50+ age group.

Given the changes in the pension system over the review period and the updated conditions for acquiring entitlement to contributory-service and retirement-age pension which provide for higher age and longer contributory service, the number of persons over 50 years of age registered in the LODs increases.

Demographic challenges place the implementation of specific, working life prolonging measures in the focus of the national employment policy. In that light, older people are ensured equal access to different forms of employment and lifelong learning, as well as involvement in training measures and programmes for acquiring knowledge and skills which are in demand in the labour market.

<b>01.01.2015 - 31.12.2015</b>	<b>01.01.2016 - 31.08.2016</b>
<b>Programmes</b>	<b>Programmes</b>
<i>Newly included – 21 848 persons</i>	<i>Newly included – 17 413 persons</i>
<i>Included persons over 50 years – 7 301 persons, (33.4%)</i>	<i>Included persons over 50 years – 6 742 persons, (38.7%)</i>
<b>Measures</b>	<b>Measures</b>
<i>Newly included – 2 735 persons</i>	<i>Newly included – 904 persons</i>
<i>Included persons over 50 years – 548 persons, (20.0%)</i>	<i>Included persons over 50 years – 233 persons, (25.8%)</i>
<b>Schemes</b>	<b>Schemes</b>
<i>Newly included – 14 629 persons</i>	<i>Newly included – 1 260 persons</i>
<i>Included persons over 50 years – 5 661 persons, (38.7) %</i>	<i>Included persons over 50 years – 527 persons, (41.8%)</i>

**PERSONS OVER 50 YEARS OF AGE INCLUDED IN NATIONAL EMPLOYMENT PROGRAMMES AND PROJECTS:**

**Beautiful Bulgaria Project** aims to promote employment in the construction sector and to support the small and medium-sized construction business, to decrease unemployment, renovate and improve the public environment in towns and villages and the social infrastructure in municipalities, to improve the qualification of unemployed persons and to enable sustainable employment of the workforce in the municipalities. *Newly included unemployed persons in the programme in 2015 - 153 persons, and between January and August 2016 - 137 persons.*

**National Programme “Assistants to People with Disabilities”** aims at providing care to persons with disabilities in a family environment by bringing unemployed persons into employment as personal assistants. *In 2015 the programme covered 864 persons, and between January and August 2016 - 885 persons.*

**National programme for employment and training of people with disabilities** aims to improve the employability of and bring into employment unemployed persons with disabilities registered in the Labour Office Directorates or people in working age who have received treatment for drug addiction, as a precondition for overcoming their social exclusion and for their full social integration. *In 2015 the programme covered 327 unemployed persons and between January and August 2016 - 434 persons.*

**National Programme “Recovery and Protection of Bulgarian Forest”** aims to provide employment and social integration to long-term unemployed by creating jobs in activities for recovery and protection of state-owned forest areas and to improve the environmental situation in the country. *In 2015, the programme covered 194 persons, and in 2016 it was not implemented.*

**National Programme “Clio”** aims to ensure social integration of unemployed persons by creating jobs in activities for conservation, maintenance, restoration and servicing of sites that are immovable cultural heritage. *In 2015, the programme covered 123 unemployed persons, and between January and August 2016 -165 persons.*

**National Programme “Support for Retirement”** provides support for the transition from unemployment to employment and retirement. The programme is targeted at unemployed active job seekers registered in the Labour Office Directorates who, according to Article 68, (1) and (2) of the Social Insurance Code, are short of up to 24 months of contributory service and up to 2 years of age to acquire entitlement to a pension and have not been issued an order by NSSI for the granting of pension on other grounds. *In 2015, the programme covered 55 unemployed persons, and between January and August 2016 - 325 persons.*

**Programme “Interest-free Loans for People with Disabilities”** aims to ensure equality and to enable people with disabilities to live full-fledged lives by achieving sustainable self-employment and entrepreneurship. *In 2015, the programme covered the interest on loans of 4 unemployed persons, and between January and August 2016 – of one person.*

**National Programme “Melpomene”** aims to decrease unemployment by creating jobs in support of the operation of theatres across the country. *In 2015, the programme covered 52 unemployed, and between January and August 2016 - 56 persons.*

**Programme for training and employment of long-term unemployed persons** aims to provide employment to long-term unemployed persons. *In 2015, the programme covered 437 unemployed persons, and between January and August 2016 - 1 133 persons.*

#### **PROJECTS OF SOCIAL PARTNERS:**

**Project “Chance for Work – 2015”; “Chance for Work – 2016”.** The projects aim to accelerate the transition from unemployment to employment by activating and improving the employability of unemployed persons over 50 years of age. *In 2015, the project covered 1 291 unemployed persons, and between January and August 2016 - 1 119 persons.*

**Project “From Vocational Training to Effective Employment”** aims to improve the employability and adaptability of the labour force, to create new opportunities for employment and social inclusion of disadvantaged persons in the labour market. *In 2015, the project covered 258 unemployed persons and in 2016 it was not implemented.*

**Project “Quality Workforce – Stable Labour Market”** aims to improve the employability and adaptability of the workforce, to create new opportunities for employment and

social inclusion tailored to the labour market needs. *In 2015, the project covered 477 unemployed persons and in 2016 it was not implemented.*

**Project “I Study and Succeed in Bulgaria”** aims to increase employment and decrease unemployment by meeting the business needs for well-prepared, qualified, motivated labour force with adequate work habits. *In 2015, the project covered 608 unemployed persons and in 2016 it was not implemented.*

**Project “New Horizons”** aims to create sustainable employment for the persons from the most vulnerable groups in the labour market and to improve the vocational qualification and key competences in demand by employers. *The project is implemented in 2016 only and the newly included persons between January and August 2016 are 689.*

**Project “Vocational Training for All – A Chance for Successful Transition to Employment (ProChance)”** aims to improve the employability of unemployed persons from the disadvantaged groups in the labour market with a view to successful professional fulfilment in the real economy. *In 2015, the project covered 707 unemployed persons and in 2016 it was not implemented.*

**Project “Qualification, Personal Integration and Professional Assistance – KLIPS”** aims to improve the access to the labour market, with a focus on the disadvantaged groups, by services adapted to their needs. 393 persons covered between January and August 2016.

#### **PERSONS OVER 50 YEARS OF AGE INCLUDED IN REGIONAL TRAINING AND EMPLOYMENT PROGRAMMES:**

The regional programmes implemented aim to increase employment, decrease unemployment and improve the quality of the workforce in the regions. *Persons covered in 2015 are 1 810, and between January and August 2016 regional programmes were not implemented.*

#### **PERSONS OVER 50 YEARS OF AGE INCLUDED IN TRAINING AND EMPLOYMENT INCENTIVES:**

**Encouraging geographical mobility** /Article 42 of EPA/. *In 2015, the measure supported the geographical mobility of 4 persons.*

**Credit for qualification of persons who have received lump sums** /Article 47 (1) and Article 48 of EPA/. *In 2015, 21 persons over 50 years of age concluded contracts and between January and August 2016 24 persons received lump sum assistance.*

**Entrepreneurship promotion for persons who have registered micro-enterprises** /Article 49 of EPA/. *In 2015, 5 persons over 50 years of age concluded contracts and in the first eight months of 2016 4 persons participated in the measure.*

**For the first five jobs created by employers who are micro-enterprises** /Article 50 of EPA/ *In 2015, the persons employed under the measure are 31, and between January and February 2016 one person received work placement.*

**For part-time work** /Article 51 of EPA/ *8 persons received work placement under the measure in 2015 and in 2016 the measure is not implemented.*

**For persons with disabilities, including war-disabled persons** /Article 52 (1) of EPA/ *60 persons received work placement under the measure in 2015 and in 2016 the measure is not implemented.*

**For persons with disabilities employed in jobs created for temporary, seasonal or hourly work** /Article 52 (2) of EPA/ *78 persons received work placement under the measure in 2015 and in 2016 the measure is not implemented.*

**For persons who have served a custodial sentence** /Article 55 of EPA/ *One person was covered by the measure in 2015.*

**For unemployed persons over 50 years of age** /Article 55a of EPA/ 255 persons received work placement under the measure in 2015 and seven persons were covered by the measure in the first eight months of 2016.

**For long-term unemployed** /Article 55c of EPA/ 116 persons received work placement under the measure in 2015 and 203 persons were covered by the measure between January and August 2016.

**For persons who received work placement in jobs created for apprenticeship work** /Article 55d of EPA/ 23 persons received work placement under the measure in 2015 and 22 persons were covered by the measure in the first eight months of 2016.

**Incentivising employers to create “green jobs”** /Article 55e of EPA/ 50 persons received work placement under the measure in 2015 and in 2016 the measure is not implemented.

### **PERSONS OVER 50 YEARS OF AGE INCLUDED IN SCHEMES IMPLEMENTED WITHIN THE FRAMEWORK OF THE HUMAN RESOURCES DEVELOPMENT OPERATIONAL PROGRAMME (HRD OP):**

01.01-31.12.2015

**Scheme BG051PO001-2.1.14 - “I Can Do More”.** In 2015, 1 570 persons over 50 years of age were covered by the scheme.

**Scheme BG051PO001-2.2.01 - “Closer to Work”.** In 2015, mediation, motivation and consultation were provided to 10 156 persons over 50 years of age for inclusion in the Scheme. 451 persons were included in induction and advanced training.

**Scheme BG051PO001-1.1.11 “Support for Employment”** In 2015, 3 359 persons over 50 years of age were covered by training and employment under the scheme.

01.01-31.08.2016

**Scheme “Trainings and Employment”** –527 persons over 54 years of age provided with employment in the real business and the local self-government institutions and with training tailored to individual needs.

### **2012 – 2015 OUTCOMES:**

According to Employment Agency data, in **2012**, by active policy initiatives were covered total 48 655 unemployed and employed persons over 50 years of age, including 10 417 persons by programmes and incentives under the Employment Promotion Act financed from the state budget and 38 238 persons by HRD OP schemes (in a number of HRD OP schemes, the 50+ age group includes people over 55 years of age), of whom 19 750 unemployed and employed persons included in training, 17 897 unemployed persons included in apprenticeship work, employment and in employment after training, and 591 unemployed persons – in consultation.

According to Employment Agency data, in **2013**, by active policy initiatives were covered total 38 467 unemployed and employed persons over 50 years of age, including 21 609 persons by programmes and incentives under the EPA financed from the state budget, and 16 858 persons by HRD OP schemes (in a number of HRD OP schemes, the 50+ age group includes people over 55 years of age), of whom 10 833 unemployed and employed persons are included in training, 5794 unemployed persons – in apprenticeship work and in employment after training, and 231 unemployed persons – in consultation.

According to Employment Agency data, in **2014**, by active policy initiatives were covered total 29 892 unemployed and employed persons over 50 years of age, including 18 674

persons by programmes and incentives under the EPA financed from the state budget and 11 218 persons by HRD OP schemes (in a number of HRD OP schemes, the 50+ age group includes people over 55 years of age).

According to Employment Agency data, in **2015**, by active policy initiatives were covered total 13 510 unemployed and employed persons over 50 years of age, including 7 849 persons by programmes and measures under the EPA and 5 661 persons by HRD OP schemes (in a number of HRD OP schemes, the 50+ age group includes people over 55 years of age).

### *Ministry of Health (MH)*

With a view to promoting and supporting healthy lifestyle and health at work, the Council of Ministers approved with Decision No. 538 / 12.09.2013 **National Programme for Prevention of Chronic Non-Communicable Diseases, 2014-2020**.

In the past few decades, the most common chronic non-communicable diseases (CNCD – cardiovascular diseases, malignant neoplasms, chronic lung diseases, and diabetes account for 80% of deaths in the country. It has been shown that the above diseases are caused by common risk factors – smoking, alcohol abuse, unhealthy diet, low physical exercise. Experience shows that the reduction of such risks results in decreased mortality and morbidity related to the above diseases and, accordingly, their burden on the society. The most effective way to attain that objective is prevention within programmes for general coordinated (integrated) approaches and actions for lowering the risk factor levels, early diagnostics and ensuring healthy living environment.

The programme aims to improve the health of the population and the quality of life by reducing premature mortality, morbidity and the health implications of the most common chronic non-communicable diseases related to the risk factors.

The activity for attaining the objectives laid down in the programme is focused on:

- Raising the public awareness of the main risk factors related to cardiovascular diseases (CVD), oncological diseases, diabetes, chronic lung diseases (CLD), etc.;
- Improving the competence of medical and non-medical specialists, building capacity and consultation and support skills with a view to preventing the most common CNCD: CVD, oncological diseases, CLD, diabetes;
- Reducing the level of the most common CNCD risk factors by decreasing the incidence of smoking;
- Improving the oral health of children and reducing the intensity of tooth decay;
- Ensuring equal access of the vulnerable groups (including Roma) to health promotion services and activities, reducing the risk factors and prevention of chronic non-communicable diseases.

With a view to raising the awareness about the harmful effect of smoking, alcohol and unhealthy diet and about the advantages of a healthy lifestyle, all Regional Health Inspectorates (RHI) across the country organise annually trainings, lectures; display health information materials are printed and disseminated. RHIs purchased interactive tools with funds from the National Programme for Prevention of Chronic Non-communicable diseases 2014-2020 (Smokey Sue cigarette smoking doll, alcogoggles, body mass index measuring apparatus), which display the effects of harmful habits. Part of the activities are organised in cooperation with other government and non-governmental organisations (Regional Inspectorates on Education, municipal anti-drug abuse councils, community cultural centres, libraries, youth centres, etc.), proven external experts are invited to speak in health education campaigns. Appropriate events

are organised to celebrate the World Health Day, the World Move for Health Day; the World Sports Day; the European Anti-Obesity Day; the World No Smoking Day; the World Breastfeeding Week; the World Nutrition Day; the World Iodine Deficiency Day; the International No Smoking Day; the European Day of Healthy Food and Cooking.

With a view to reducing the level of the common CNCD risks by decreasing the incidence of smoking, RHIs across the country provide annual control for compliance with Article 56 and Article 56a of the Health Act on limiting smoking in indoor public places, including the public transport and indoor work premises. Total 184 283 inspections (daytime and night time) were carried out in 180 692 sites in business days and holidays in 2015, 233 prescriptions and 705 statements of established violations were issued.

With a view to ensuring equal access of vulnerable groups to services and activities for health promotion, reduction of risk factors and prevention of chronic non-communicable diseases, 23 mobile medical rooms provide preventive screening and immunisation of health uninsured persons, persons of Roma origin and persons with difficult access to health institutions. A number of awareness raising trainings and campaigns are carried out to improve the knowledge of topics such as contraception, sexually transmitted infections, breast cancer, cervical cancer, healthy diet, immunisations, patient's rights, socially significant diseases, environment and health, osteoporosis and smoking.

### *Ministry of Agriculture and Food (MAF)*

Taking into account the specifics of the rural regions and of agriculture in a socio-economic and in a demographic aspect, the implementation of the Rural Development Programme (RDP) 2014 – 2020 also contributed to addressing national population ageing problems.

One of the main objectives of RDP 2014 – 2020 is focused on the socio-economic development of rural regions. Interventions in three priority areas (6A, 6B and 6C), which, taken together, aim to develop the economic potential, to preserve the demographic potential and to contribute to the social inclusion of vulnerable groups and the Roma, thereby contributing to economic recovery and to controlling the process of depopulation and social exclusion, will be supported within the framework of this objective.

Priority Area 6A aims to facilitate diversification and create jobs in the rural regions by promoting investments in the start-up and development of non-agricultural business. Within Priority Area 6A, RDP2014 – 2020 will support 1 600 projects for development of non-agricultural economic sectors resulting in the creation of 4 300 new jobs. In line with the Partnership Agreement, priority will be given to investment in the North-western Region of Bulgaria.

Interventions under Priority Area 6B aim to strengthen the competitiveness of rural regions by improving the quality of life and the conditions for doing business. Two groups of interventions are programmed within Priority Area 6B:

✓ The first group addresses the need to improve the social, technical and tourism infrastructure by supporting investments to improve the quality of life and the access to services of 1 995 people living in the rural regions. RDP 2014 – 2020 will support investment in infrastructure which encourage growth, employment and the economic revival of the rural regions and match the priorities of the national sector strategies and the needs identified in the municipal and local development strategies.

✓ The second group of measures aims to develop and utilise the socio-economic potential of rural regions by encouraging community-led local development via LEADER. The

programme will finance the implementation of local development strategies which are sufficiently mature and add clear value to territorial development. A target for support of 60 Local Action Groups (LAG) covering 48 percent of the rural population has been set. To enable LAG to adequately address the most important territorial problems in their strategies, implementation of multi-funding is planned in order to integrate and complement the interventions of regional and social policy, rural development policies, and maritime and fisheries policies.

Priority Area 6C aims to ensure equal access of all rural households and businesses to broadband Internet, pursuant to the targets laid down in RDP 2014 – 2020 in the field of the Digital Agenda for Europe (6C-1) and its national implementation strategies. RDP 2014 – 2020 will support the building of next-generation broadband Internet infrastructure only in regions which do not enjoy investor interest due to market defects and will thus contribute to building additional capacity and to speed connection, improved service quality and improved user access to online resources.

A prerequisite for attainment of a major objective of RDP 2014 - 2020 focused on promoting the socio-economic development of rural regions is the successful implementation of the measures under the other operational programmes set out in the Partnership Agreement – improving the business environment, the knowledge and skills of entrepreneurs and the workforce, including for the purposes of the new sectors of the local green economy and ICT, and improving the social and technical infrastructure.

There are no age limits for the measures of RDP 2014 – 2020, except for sub-measure 6.3 “Start-up aid for young farmers”. All measures are also aligned with the policy for provision of equal opportunities and no discrimination of applicants and potential beneficiaries.

The implementation of the measures for support of the agricultural and the non-agricultural sector and the measures for provision of consultation and information to potential beneficiaries, laid down in RDP 2014 – 2020, contribute to attainment of Objective 1: “Encouraging longer working life and maintaining ability to work” and Objective 2: “Promoting participation, non-discrimination and social inclusion of older people” of the Vienna Ministerial Declaration.

### *National Social Security Institute (NSSI)*

#### **Commitment 5: Enabling the labour market to respond to the economic and social consequences of population ageing:**

The Social Insurance Code was amended in 2015 (promulgated, SG, No. 61 / 11.08.2015, effective 1.01.2016) to reform the pension system. The essential parameters of the reform, which result in longer labour market participation of workers and have been dictated by the need to adapt the public pension system to the demographic situation in Bulgaria, include:

- Gradually increasing and equalizing the standard pensionable age (workers under the condition of Work Category III) under Article 68 (1) of SIC for women and men in 2037 to 65 years of age, increasing pensionable age:
  - for women, initially by 2 months per calendar year until 2029 and from 2030, by 3 months per calendar year until attainment of 65 years of age,
  - for men, initially by 2 months per calendar year in 2016 and 2017, and by one month from 2018 till 2029;
  - after 31 December 2037, the pensionable age will be tied to the increase in the average life expectancy.

- Gradually increasing the length of contributory service for workers under the conditions of Work Category III – from 31 December 2016, by 2 months from the first day of each subsequent year, until the following length of contributory service is achieved:
  - 37 years for women;
  - 40 years for men.
- Gradually increasing the pensionable age upon shortfall of contributory service (but having not less than 15 years of actual contributory service):
  - till 31 December 2016, entitlement to a pension will be acquired upon attainment of 65 years and 10 months of age for women and men;
  - from 31 December 2016, the age will be increased by 2 months from the first day of each subsequent calendar year, until attainment of 67 years of age.
- A requirement for attainment of age has been introduced for acquiring entitlement to a pension by:
  - by servicemen under the Republic of Bulgaria Defence and Armed Forces Act and the civil servants under the Ministry of Interior Act, and the Implementation of Penal Sanctions and Detention in Custody Act, the civil servants under Article 11 of the Postal Services Act, the civil servants who provide judicial system security under Article 391 of the Judicial System Act, civil servants under the State Agency for National Security Act and other specialized institutions – 52 years and 10 months, and 42 years and 10 months for diving personnel, paratroopers, etc.;
  - from 31 December 2016, the pensionable age will be gradually increased by 2 months from the first day of each subsequent calendar year until attainment of 55 years of age for the persons referred to in Article 69, (1), (2), (3) and (6), and until attainment of 45 years of age for the persons referred to in Article 69, (4) and (7).
- A requirement for attainment of age has been introduced for acquiring entitlement to a pension by ballet dancers and dancers in cultural organisations - 42 years and 10 months, which, from 31 December 2016, will be increased by 2 months from the first day of each subsequent calendar year until attainment of 45 years of age.
- Towards greater adequacy in determining the pension amount:
  - from 1 January 2019, the individual coefficient used to calculate the pension amount under Article 70 of SIC will be determined as the arithmetic mean of the monthly individual coefficients;
  - from 01.01.2017, the weight of one year of contributory service in calculating the pension amounts whose percentage is equal to or bigger than the percentage under Article 100 (1) of SIC will be gradually increased until it reaches 1,5;
  - from 1 January 2019, the contributory income for an optional period of three consecutive years before 1 January 1997 will not be taken into account in the formula for determining the pension amount.
  - from 01.07.2019, the maximum aggregate of one or several pensions granted prior to 31 December 2018, net of the supplements thereto, is set at 40 per cent of the maximum contributory income for the same calendar year as fixed by the Public Social Insurance Budget Act.
- Changes in the contribution amount:
  - The contribution to the Pensions Fund will be increased by 2%, as follows: by 1 percentage point from 1 January 2017 and by further 1 percentage point from 1 January 2018.

- The increase in the social insurance contribution to a universal pension fund from 5 to 7 per cent from 1 January 2017 is repealed.

- The amendments aiming to improve the three-pillar pension model give persons born after 31 December 1959 the option to choose whether to insure for additional pension in a universal pension fund (UPF) or only for lifelong pension in the public social insurance (PSI). It is set out that this is not a single choice but it should be made not later than five years before attainment of the age under Article 68 (1) of SIC. However, those insured in an occupational pension fund may only once shift from insurance in an occupational pension fund to the Pensions Fund (Article 4c – new).

*Institute of Population and Human Studies at the Bulgarian Academy of Sciences  
(IPHS BAS)*

**Commitment 1: Mainstreaming ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages:**

Bulgaria has strong tradition of population ageing research. A major research initiative aiming to coordinate national research in this field is the project ERA AGE 2 (European Research Area in Ageing 2, 2009-2012), funded by the European Commission under the 7 Framework Programme. Project partner from Bulgaria is the Institute of Population and Human Studies at BAS and project coordinator is the University of Sheffield, UK. The main project objective is to coordinate the existing national ageing research programmes; to contribute to interdisciplinary research in the field and support the exchange of information and good practices on ageing policies. As a result of the project, Bulgaria has become part of the integrated European ageing research area and is included in the common research infrastructure which develops the topic in Europe.

In addition to the participation in the international research network, there is also national research on the effect of ageing on the demographic situation, employment, the labour market, the national anti-discrimination policies for older people, health and well-being, as well as studies of the needs and necessities of elderly people, etc.

A major challenge for researchers of population ageing in Bulgaria is to procure funding for research in the field and for participation in international research projects.

*Institute for the Study of Societies and Knowledge at the Bulgarian Academy of Sciences  
(ISSK BAS)*

**Commitment 1: Mainstreaming ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages:**

**Measure: Promoting and supporting healthy lifestyles and well-being in work, preventing and controlling non-communicable diseases, and ensuring safe and healthy working conditions, including measures for appropriate work-life balance with flexible working time schemes, through the entire working career:**

An ISSK BAS team headed by Prof. DSc in Sociology Emilia Chengelova participated in Project BG051PO001 - **Prevention for Safety and Health at Work Project: Elaboration of Safety and Health at Work Profile, National level**, financed under the Human Resource Development Operational Programme, 2012-2013, Contracting Authority – General Labour Inspectorate Executive Agency.

The project team took part in the Ninth National Conference on Ethics with International Participation “European Ethical Standards of Bulgarian Medicine”, Sofia, 25 – 26 October 2013, co-organised by the Medical University of Sofia, the Bulgarian Medical Association and ISSK BAS, with a contribution on “Health at Work – Risks and Prevention Resources” and a publication in the book of conference proceedings.

## **GOAL 2: PROMOTING PARTICIPATION, NON-DISCRIMINATION AND SOCIAL INCLUSION OF OLDER PERSONS**

### *Ministry of Labour and Social Policy (MLSP)*

With a Decision № 38 from a meeting of the Council of Ministers on 13<sup>th</sup> October 2011 concerning **the participation of the Republic of Bulgaria in the European Year of Active Ageing and Solidarity between Generations – 2012**, the Minister of labour and social policy was appointed to be a National coordinator of the Year for Bulgaria. With the same decision was also adopted a National Programme for the Participation of Bulgaria in the European Year 2012.

In **The National Work Programme** for the participation of the Republic of Bulgaria in the European Year were included various activities for raising awareness of the positive sides of active ageing, for including all stakeholders at all levels in order to stress upon the important role older people have in public and economic life.

The official ceremony of the opening of the European Year of Active Ageing and Solidarity between Generations – 2012 was held on March, 2<sup>nd</sup> 2012 in the presence of 140 participants and the closing conference was conducted on December, 4<sup>th</sup> 2012, having 253 participants.

There were more than 250 participants in the work of the four thematic seminars, organized by the Ministry of labour and social policy: “Active Ageing and Participation in the Labour Market” on March, 2<sup>nd</sup> 2012; “Media and the Public Image of Older People” on April, 26-27<sup>th</sup> 2012; “Active Ageing and Development of Social Insurance and Protection Systems – Pensions, Healthcare, Long-term Care” on May, 14-15<sup>th</sup> 2012; “Active Social Life of Older People - Solidarity between Generations, Developing Volunteering, Various Forms of Association and Good Practices” on June, 7-8<sup>th</sup> 2012.

### *Ministry of Education and Science (MES)*

#### **Commitment 2: Ensuring full integration and participation of older persons in society**

#### **Commitment 6: Promoting life-long learning and adapting the educational system in order to meet the changing economic, social and demographic conditions:**

In response to the need for dynamic adaptation of life-long learning to personal needs and labour market requirements, the Ministry of Education and Science (MES) developed a comprehensive long-term policy framework of life-long learning.

National Strategy for Life-long Learning, 2014-2020 has been adopted and its implementing documents have been prepared (three action plans giving effect to the Strategy – for 2014, 2015 and 2016). Monitoring and performance assessments of the National Strategy for Life-long Learning, 2014-2020, with findings, conclusions and recommendations for the next planning and performance reporting period were carried out in 2014 and in 2015. Effective stakeholder coordination and consultation at the national level has been enabled, including through e-tools for development of the life-long learning policy.

Activities implemented pursuant to the European Agenda for Adult Learning have enabled visualization of a database for preparing assessments and progress reports for the adult learning sector at the national and the regional level and formulation of decisions for the development of the adult learning sector by pooling the efforts of different stakeholders. The benefits of life-long learning are promoted through different events, including National Life-long Learning Days organised annually.

National Support Service for the establishment and development of the Electronic Platform for Adult Learning in Europe (EPALE) has been set up and the starting conditions for bringing EPALE close to the education and learning community have been put in place.

The Ministry of Education and Science implements recommended actions for ensuring lifelong access to different forms of quality education and training in the following areas:

*Participation in formal education and training*

By implementing forms other than full-time education as a tool for continuing training, the Ministry of Education and Science paves the way for the reintegration of early school leavers.

The number of students covered by the full-time form of education is prevalent – 707 781 persons, followed by informal learning over 16 years of age – 22 310 persons, and part-time courses – 12 900 persons. This is a positive trend enabling persons over 16 years of age, including early school leavers, to complete their education. The reintegration process places the focus on distance learning and forms of education outside working hours which are appropriate for working young people. Emphasis is given to enabling early school leavers to acquire vocational qualification which is appropriate for them. Particular attention is paid to the education of young people with special educational needs, including in combined forms of training.

In the 2014/15 school year, formal adult education and training in Bulgaria was provided by 294 general schools, vocational schools, vocational high-schools, vocational colleges and 362 Vocational Training Centres (VETs)<sup>1</sup>. In the 2014/15 school year, adult learners are 48 572 persons. In the period 2010/11 - 2014/15 school years the number of adult learners covered by formal education in Bulgaria varies, with fragile increase, between 48 and 60 thousand people, registering notable decrease in the 2014/15 school year. In particular, compared to the 2010/11 school year, the number increases modestly by 417 persons or 0.9%, peaking in the 2013/14 school year to 60 564 people. The relative share of adult learners in total learners covered by formal education in the review period also varies, going up from 6.0% in the 2010/11 school year to 7.8% in 2013/14, then down to 6,4% in the 2014/15 school year.

The significant reduction in the number of students from 60,5 thousand in the 2013/14 school year to 48,6 thousand in the 2014/15 school year, or by 19,8%, is considered a major problem of adult education. The most important reasons include employers' unwillingness to invest in the long-term training of employees and the low motivation of potential students for personal prosperity they would achieve by completing the training<sup>2</sup>.

*Reducing the share of illiterate people*

The project “A New Chance for Success”, implemented by MES under Scheme BG051PO001/4.3-01, “Adult Literacy Provision”, under Human Resources Development Operational Programme, 2007 – 2013 (HRD OP), was completed in June 2015. In 2014, adult

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<sup>1</sup> The data on the population coverage by formal education and training are available in the website of the National Statistical Institute at: [www.nsi.bg](http://www.nsi.bg)

<sup>2</sup> 2015 Annual Implementaiton Report of the National Strategy for Life-long Learning, 2014 – 2020, [www.mon.bg](http://www.mon.bg)

literacy courses and V-VII grade educational content courses covered 5621 persons over 16 years of age, including 3324 who acquired a document for successfully completed training. The last adult training phase under the project was implemented in 2015, with 836 persons successfully completing their training and receiving certificates of successfully completed course.

The implementation of New Chance for Success will continue with funding from the Operational Programme “Science and Education for Smart Growth” thereby ensuring sustainability of the provision of access to general education and vocational training for illiterate and low-literacy people and the competitive labour market participation of such people.

*Enabling the development of non-formal and informal learning options for personal growth and career development*

The implementation of Project BG 051PO001- 4.3.03-0001 “A New Opportunity for My Future – developing a system for identifying and recognizing knowledge, skills and competences acquired in non-formal and informal training”, financed under HRD OP, has improved the access to vocational qualification and to the labour market, and has enhanced the citizens’ motivation and the opportunities for career development.

Ordinance No. 2 / 13.11.2014 on the terms and procedure for validation of professional knowledge, skills and competences is effective from 01 January 2015. It enables recognition of professional knowledge, skills and competences acquired in non-formal or informal learning, facilitates the access to education for acquiring qualification in a profession and to the labour market.

As of November 2015, 400 vocational secondary schools and 988 licensed vocational training centres with active licenses are operational across the country. In addition to training for acquiring qualification in professions, they also offer options for acquiring professional qualification or part of a qualification by validation.

### *Ministry of Culture (MC)*

#### **Commitment 2: Ensuring full integration and participation of older persons in society. Measure: Facilitating participation of older persons in political, economic, cultural and social life:**

The activities implemented by the Ministry of Culture are targeted at all ages and population groups with a view to ensuring equal access to cultural heritage and modern art achievements, as well as offering appropriate forms and services for development of creativity potential and socialisation through participation in community, regional and national cultural life.

For the purposes of facilitating the access of older people to cultural heritage, Ministry of Culture programmes finance annually archaeological excavations, conservation and restoration of fixed cultural assets, trainings and working meetings with museum workers on mastering new working methods to present cultural assets, attract a wider audience and visitors with special needs. Significant events in the field of intangible cultural heritage are financed, the national system “The Living Human Treasures of Bulgaria”, which includes activities for preservation and transfer of the traditional knowledge and skills of the older people who convey intangible cultural values, is maintained.

The special Ministry of Culture programmes for development of performing arts provide annual funding to creative projects of cultural institutions and non-governmental organisations operating in the field of amateur arts. The purpose of project financing is to increase the access of the population and especially of older people to theatre, music and dance art works of high

artistic merit. Such programmes support annually national and regional festivals, fairs, exhibitions, which are part of the national cultural calendar, and other forms, which promote arts and creators, ensure direct involvement of older people and encourage their creative and spiritual development. Programmes also finance projects for preservation of the culture of ethnic communities, as well as events of persons with disabilities.

The activities of the Ministry of Culture for development of the community cultural centres (chitalishta) and the public libraries are essential for facilitating the access of older people to cultural life across the country.

The network of more than 3600 community cultural centres is distributed in a balanced manner cross the country. In some of the small settlements, the community cultural centres are the only cultural centres which offer also forms of educations and, in recent years, social services for the local communities. Most of the community cultural centres maintain public libraries, including 960 which are part of the Global Libraries – Bulgaria Programme that aims to increase the access to information and communications.

Community cultural centres are, essentially, traditional Bulgarian cultural and educational associations – not-for-profit legal entities which, because of their high prevalence and sustainability, receive support from the State to provide citizens with more and quality services for access to cultural products, participation in cultural life, development of the creative potential and promotion of non-formal and informal life-long learning. In the context of the national active ageing priority, financing by the State ensures access to community cultural centre forms, which, in turn, is linked to overcoming social exclusion and reducing poverty. State efforts are also focused on improving the condition of the community cultural centres and their modernisation, furnishing with modern equipment, crating the resources for artistic and creative activity and for maintenance of the building stock.

Towards development of the network of public libraries, the Ministry of Culture implemented the programme “Bulgarian Libraries – Modern Reading and Awareness Centres” which aims to support the renewal of the library collections of public libraries with new, up-to-date literature, cultural and literature periodicals and other modern information sources, thus enabling the Bulgarian libraries to respond to the growing needs of readers, most of whom are older people.

The policy of the Ministry of Culture is focused on continuous improvement of the cultural infrastructure with a view to ensuring and facilitating the access to cultural content. The condition of museums, galleries, theatres, libraries and community cultural centres is improved in the context of the dialogue with the municipal governments on the development of the modern urban environment in which cultural institutions play a major role for preventing social exclusion and addressing population ageing problems.

### *Social Assistance Agency (SAA)*

The philosophy of social assistance in Bulgaria is based on the principle that all Bulgarian citizens have the right to social protection when on health, age, social or other grounds beyond their control they are unable to meet their basic necessities of life on their own through their work or on income accruing from property they own, or with the help of the persons whose dependants they are by law. Social assistance consists in making benefits available and delivering social services. The social assistance entitlements also accrue to foreign nationals who have a long term or permanent residence permit in the Republic of Bulgaria, foreign nationals who received asylum, refugee status or humanitarian status, and foreign nationals who were

granted temporary protection, as well as individuals who are provided for in an international treaty that the Republic of Bulgaria is signatory to.

### **Social assistance benefits**

**Social assistance benefits** are granted when all other possibilities for self-support and support by the persons obligated by law to do so have been exhausted. The entitlement to social assistance is linked to an assessment on a case by case basis. It depends on the income of the person or the family, the property status, the marital status, the health status, the employment status, the **age** and other established circumstances. Social assistance benefits are granted on the basis of a social report prepared on the basis of a social inquiry conducted at the home of the persons and families to establish the eligibility for entitlement to social assistance.

A major focus of the social policy pursued is **the protection of the lowest-income earners, with special emphasis on older people living alone and on persons with disabilities.**

The protection of low-income earners is set out in the Social Assistance Act, its Implementing Regulations and Ordinance No. RD 07-5/2008 of the Minister of Labour and Social Policy on the terms and procedure of granting targeted heating subsidies.

**Monthly, target and lump-sum social assistance benefits are made available pursuant to Social Assistance Act.**

**Monthly social assistance benefits** are made available to the poorest persons and families whose income is less than a certain differentiated minimum income. The guaranteed minimum income (at BGN 65) serves as the basis for determining the entitlement to monthly social assistance and the amount of the social assistance benefits. The Implementing Regulations of the Social Assistance Act set out 11 risk groups and the respective individual rate (between 20% and 165%) used to adjust the guaranteed minimum income for each one of those persons. The factors taken into account when determining the individual rates for each one of the target groups are: **age**, health status, marital status, employment status and attendance of an educational institution, as well as co-habitation with other persons or families. **The highest rates are determined for older people living alone and for persons with disabilities**, with intra-group age-based differentiation (persons over 65 and over 75 years of age) and differentiation based on the degree of disability (more than 50%, more than 70% and more than 90%). As of 30 September 2016, the monthly average number of persons and families receiving assistance is 43 642 people.

**Target social assistance benefits** are designed to support persons and families in meeting specific needs – payment of rent for municipal housing (**for older people living alone**) and for free-of-charge travel with the public transport across the country of persons with disabilities. As of 30 September 2016, the monthly average number of persons and families receiving support is 170 people.

**Lump-sum social assistance benefits** are granted to meet incidental needs related to health, utilities, education and other areas. Emphasis is placed on the specific social work and consideration of each individual case with a view to preparing an objective assessment of the social, property and health status of persons and families subject to assistance. Such assistance may not be higher than 5 times the amount of the guaranteed minimum income. As of 30 September 2016, benefits were granted in 4 563 cases.

**Target social assistance benefits for heating** ensure heating in the winter period (5 months – November through March) for the people who are socially worst-off. Similar to the monthly social assistance benefits, **the highest individual rates are set for older people living alone and for persons with disabilities**, subject to the above principles. The annual amendments to Ordinance No. RD 07-5 / 16.05.2008 on the terms and procedure of granting target social assistance benefits for heating aim to compensate the increase in the electricity

prices which affect directly the most vulnerable social groups included in the target energy support programme. As of 30 September 2016, assistance was provided to total 124 772 persons and families.

The analysis of the information about the persons and families receiving target social assistance benefits for heating shows that 80 % are persons and families that have exited working age – older people and people with disabilities.

People without income and/or personal property that would ensure them personal participation in the health insurance process are granted target funds for diagnosis and inpatient treatment.

### **Information system**

An Integrated Information System (IIS) with three functionally self-contained modules “Social Assistance”, “Social Services” and Child Protection was designed and implemented in the Social Assistance Agency (SAA) in 2015 with a view to creating and supporting a centralized database of the persons and families subject to social assistance, child protection and social inclusion. Creating a uniform and unified integrated information system is a prerequisite for the implementation of specific steps towards generating general databases for proper policy formulation and implementation of practices in support of the persons from the vulnerable groups, as well as for real-time information exchange and monitoring.

IIS contains complete information about the physical data and value indicators for the performance of family support, child protection and social service policies. The system enables generation of different list structures with personal information about supported persons by different indicators such as gender, age, health status, type of social assistance benefits and integration allowance for persons with disabilities, type of social service, assistance, etc.

System’s utilization decreases the administrative workload of the regional structures and cuts down the document processing time, thus contributing to effective individual social work with users.

The information system also features a mechanism for automatic loading at the central level of “External Databases” by the institutions with which SAA has signed information exchange agreements, which enables optimization of the processing of primary documents at Social Assistance Directorate (ASD) level and ensures better data integrity control.

The utilization of the information system by SAA and its regional units ensures adequate information environment for the administration and monitoring of social assistance and family benefits, integration allowances and financial support for children and families.

*Institute for the Study of Societies and Knowledge at the Bulgarian Academy of Sciences  
(ISSK BAS)*

### **Commitment in 6: Promoting life-long learning and adapting the educational system in order to meet the changing economic, social and demographic conditions:**

#### **Measure: Ensuring lifelong access to various forms of high quality education and training, including in advanced technologies:**

A team of ISSK researches implemented between 2010 and 2013 research project funded from the 7 Framework Programme: “Towards a Lifelong Learning Society in Europe: The Contribution of the Education System, (LLL 2010)”. The monograph: The lifelong learning hybrid: Policy, Institutions and Learners in Lifelong Learning in Bulgaria. Sofia: “East-West”, 2012, 398 pp. was published within the framework of the project.

**Summary:** Just like mass-scale school education responded historically to the well-structured needs of the societies of early modernity, lifelong learning (LLL) reflects the uncertain

and liquid character of late modernity and globalization. In a sense, LLL reflects the unprecedented dynamic aspects of late modern societies and the immanent uncertainty of their social structures and life trajectories. Under the conditions of global openness, the LLL paradigm is being transmitted “cross-border” – with tensions, idiosyncrasies and hybridization – from its “homeland”, i.e. the developed societies of late modernity, to the less developed ones. An ambition of this monograph is to cast more light on the intriguing process of international LLL transplantation and hybridization. Being a good example in this respect Bulgaria is set in the centre of the research interest. The analysis is based mainly on the empirical results from an international research project, which included social scientist from 13 European countries – Austria, Belgium, Bulgaria, Czech Republic, England, Estonia, Hungary, Ireland, Lithuania, Norway, Russia, Scotland, and Slovenia.

**Measure: Developing non-discriminatory images of older persons, and disseminating information about ageing as a natural phase in individual development:**

Work in the framework of the recommended measure included two ISSK monographs on ageing, older people and their place in the social system, aiming to create public sensitivity and awareness of the problems of older people and to develop intergenerational solidarity were published in 2015:

- Златанова, В. 2015. Стареење на населението. Социологически дискурси. Софија: Авангард Прима. ISBN 978-619-160-519, 193 стр. (Zlatanova, V. 2015. Population Ageing. Sociological discourses. Sofia: Avangard Prima ISBN 978-619-160-519, 193 pp)
- Златанова, В. 2015. Стареење и неравенства. Софија: ОМДА. ISBN 978-954-9719-83, 111 стр. (Zlatanova, V. 2015. Ageing and inequalities. Sofia: OMDA. ISBN 978-954-9719-83, 111 pp).

The concept of ageing and old age is developed and presented in the two monographs. The risk factors for the quality of life of older people are depicted and different old age coping strategies are outlined.

*Bulgarian Red Cross (BRC)*

**Commitment 1: Mainstreaming ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages:**

The activities of Bulgarian Red Cross, implemented jointly with and in favour of older people, are given priority and are reflected in BRC’s Strategy 2020 and in the BRC elder and/or retired people platform. Through the specific activities set out in the above documents, Bulgarian Red Cross contributed to accelerated social inclusion of older people by enabling the use of their resource for full-fledged participation in the economic, social and cultural life of the community.

Since 2009, BRC is a full member of the European Elder People Platform AGE and is recognised as an organisation working actively in favour of older people by its partners in Europe.

Building on its long-standing experience in the work “*for*”, “*with*” and “*by*” older people, the Bulgarian Red Cross is implementing since 2003 the project “Age Awareness and Advocacy of Older People” which introduced the participatory approach in Bulgaria and made older people active participants in the life of their communities and in discussing the specific problems which directly concern them.

This process was underpinned by a number of trainings for empowering older people, enabling them to acquire different skills and making them aware of their rights. Older people thus become initiators of different efforts in support of other vulnerable groups and real

advocates of their own rights. Different activities were implemented in 14 national regions by more than 1500 active and trained volunteers, leading to greater public awareness of older people's current problems while highlighting their role of a valuable social resource and a wellspring of different knowledge and skills. Many round tables and thematic meetings were organised in the past 13 years on different occasions in cooperation with representatives of local authorities, partner organisations and NGOs with the aim of addressing specific local problems such as inaccessible urban transport and urban infrastructure, more effective use of existing social services, improving the quality of life of the most vulnerable community groups, etc.

Acting as the link between older people and the representatives of the central and local authorities, BRC contributes to overcoming the barriers to active ageing. The organisation is lobbying nationally and internationally for policymaking to improve the quality of life of older people.

Within the “**Age Awareness and Advocacy of Older People**” project, older volunteers became the main actors in the participatory **research “Voice of the older people” /2007/** conducted in 6 Bulgarian regions. The survey results were published in Bulgarian and in English. Older people identified their problems in the social and health, financial, and access to participation in intra-community initiatives spheres. A second participatory research “Voice of Older People” 2 was carried out in the early 2013 and the results thereof were also published in Bulgarian and in English.

Every year on the occasion of the **International Day of Older Persons – 1 October**, BRC's volunteers and officers across the country initiate and organise different events for showing respect and recognition to older people, bringing them joy and pleasant experience of the celebration, wishing them health and long life. Within the project “**Age Awareness and Advocacy of Older People**”, supported financially by Swiss donors, on 1 October 2015 BRC organised the first of its kind National Competition for Older People on disaster preparedness, first aid, psychological and social support and awareness of their rights.

All participants in the competition – total 70 volunteers over 60 years of age from 14 national regions (Blagoevgrad, Vratsa, Gabrovo, Dobrich, Kyustendil, Lovech, Montana, Plovdiv, Ruse, Smolyan, Targovishte, Shumen, Yambol and, for the first time, Varna), were pre-trained by the regional BRC organisations and went through 14 competition locations. The teams had to deal with giving first aid in emergency situations, sport, domestic and traffic accidents, to provide psychological and social support to victims and to demonstrate knowledge of older people's rights. With catching optimism, courage and pro-activeness, competitors showed that they are a valuable social resource that can and should be used.

On 1 October 2016, BRC organised the competition again with the ambition to make it a traditional annual event.

Between 2010 and 2012, Bulgarian Red Cross was a partner in the project “**Older Women in Europe**”, implemented in cooperation with NGOs from Austria, Germany, Italy, the Czech Republic and Lithuania. A comparative study of the lifestyle of elderly women in different countries in Europe was carried out and workshops were conducted in Bulgaria, the Czech Republic, Italy and Germany. Twelve older volunteers from Bulgaria took active part in the meetings and had the opportunity to exchange ideas for future activities with volunteers from other countries.

Since 2007, Bulgarian Red Cross is a member of the international network of NGOs working on the issues of older people – SEVEN. This membership enabled BRC to exchange experiences and best practices concerning volunteers from the EU Member States – Italy, Germany, Spain, Austria, Belgium, UK, France, and Bulgaria, as well as to find partners and implement projects in support of the social inclusion of older people.

One of the projects was “*Older volunteers provide social services*”. Its main objective was to exchange volunteers in the provision of social services and to present the mechanisms for coordination and training of older volunteers in Austria and Bulgaria. The project contributed to improving the cultural and linguistic knowledge of participants, to their personal development, and encouraged the expansion of voluntary activities in the provision of social services in the two countries. Total 16 older volunteers took active part in the project and the two national Red Cross societies produced documentaries on the implemented activities.

Between 2013 and 2014, BRC took part in the project “Active Senior Citizens for Europe” (Europe for Citizens Programme, Action 2 - Measure 3, No. 540961), led by the European platform of older people AGE Platform Europe in partnership with organisations from 7 other countries – Ireland, Greece, Italy, Poland, Portugal, Slovenia and Slovakia. The purpose of the project was to raise the awareness of older people about EU citizenship, the ensuing rights and the way to addressing the barriers to the exercise of such rights.

In 2014, Bulgarian Red Cross was accredited to the Open-ended Working Group on Ageing (OEWGA), established by UN in 2010. A BRC representative took part in the Fifth Working Session which was held in New York from 30 July – 1 August 2014. Representatives of the governments of different countries as well as non-governmental organisations from all over the world took active part in the meeting and BRC participated with a statement on behalf Bulgarian Red Cross and AGE Platform Europe on the implementation of the Madrid International Plan of Action on Ageing in the past 10 years in Europe.

#### *National Association of Municipalities in the Republic of Bulgaria (NAMRB)*

Common practices implemented across all municipalities:

- Older people’s work as part of the initiatives of many municipalities to revive traditional crafts in different regions;
- Typical social services such as Centre for Social Rehabilitation and Integration of Older People (such centres are set up in 60 municipalities, with total 2502 places) involve their users in different initiatives such social enterprises and workshops;
- Clubs for Retired People – the most popular service in all municipalities, provided following the example of the municipalities of Vratsa, Novo Selo, Sliven and Pazardzhik.

#### **Varna Municipality:**

“To Preserve the Woman” Association has 20 years of extensive experience in the work with older women to prevent such negative factors.

The Centre for Social Rehabilitation and Integration (CSRI) of older women is a comprehensive social service for active and creative ageing. In Bulgaria, almost every older person has a home. What they lack is contacts, communication, attention, applying their experience in a useful way. The Social Programme of Varna Municipality puts the emphasis on meeting those needs. “To Preserve the Woman” Association has been developing a comprehensive social service for nine years already through a set of more than 30 social activities in Impulse Older Women CSRI.

CSRI is largely a successful alternative to institutionalisation in Homes for Older People. The purpose is to compensate the three risk factors for older people: poverty, age-related problems and ill health. Measures and services to prevent the risk of exclusion and marginalisation include also a set of activities for meeting the spiritual needs of older people for contacts and communication, awareness and activity in their personal and social life.

The Association has won the trust of the people in Varna as an organisation working successfully with socially disadvantaged persons, women with disabilities and older women of retirement age living alone.

All the necessary conditions have been put in place: premises, medical and rehabilitation equipment, computer and electrical equipment, sewing machines, kitchen equipment and furniture. The human resources are certified for working with older people. Expert leaders have prepared a set of training and rehabilitation and integration programmes, lectures, talks, scenarios for open events, interactive games, tests, cases.

As a result of the CSRI social services, older women:

- accept retirement better, without dramatism, remain active outside their home, get smoothly integrated in the community;
- overcome loneliness in a less painful manner, especially after losing their partner;
- have an appropriate social environment and view themselves as an important part of a functioning community;
- can reveal previously not manifested personal abilities and talents or practice their hobby, thus improving their self-esteem and self-confidence that they can create and be useful;
- can share their personal experience, acquire new knowledge and skills;
- get away from the problems of poverty, loneliness, illnesses by engaging into meaningful activities: health lectures, music therapy, art therapy, dance therapy, poetry, gymnastics and many other “investments” in mental health;
- receive donations such as: food products, sanitary materials, clothes, bags, shoes, medical aids – walking-sticks, walkers, shower chairs, wheel-chairs, wheeled-trays, etc.

#### **Vratsa Municipality:**

Ensuring social inclusion through activities implemented in 28 Clubs for Retired Persons on the territory of Vratsa Municipality. Implemented activities include:

- organising and promoting cultural and social events;
- exchange of experience with other clubs for retired persons across the country;
- tourist visits;
- participation in folklore events and activities (Folklore Festival “To Preserve the Bulgarian Spirit”).

#### **Sliven Municipality:**

Clubs for Retired Persons with a large number of older members are operational on the territory of Sliven Municipality. They develop actively popular cultural activities, organise concerts for national holidays, inviting in addition to their amateur groups also participants from institutions providing services for children and persons with disabilities. A best practice example is the National Fair “Karandila Sings” which is the meeting place for amateurs and amateur groups from all over the country.

#### **Pazardzhik Municipality:**

Older people prevail in the remote locations away from the municipal centre. There are 38 clubs for retired people, three clubs for people with disabilities, a club of retired teachers, of the Union of the Blind, the Union of the Deaf, Diabetes Association and the Union of Reserve Officers and Sergeants operational on the territory of Pazardzhik Municipality. Clubs for retired people operate in all settlements in the municipality. Their equipment, heating, lighting and maintenance are financed by the municipality. The clubs organise social contacts, create opportunities for active lifestyle of older people and people with different disabilities.

The clubs have strengthened the amateur talent groups; every year representatives of different groups take part in festivals across the country. The municipal administration organises annually the folk song festival in Dobra Voda locality, providing transport, a gala lunch and

prizes for participants. More than 3000 people (older people and persons with disabilities) take part in the festival. Within the calendar year, every club organises excursions to chosen destinations in the country, with municipal funding.

The clubs also organise gatherings to learn about new activities in all spheres of life. Priority is given to health protection. Medical specialists carry out different examinations.

#### **Parvomay Municipality:**

Parvomay Municipality works actively with older people. A best practice example is the organisation and promotion of opportunities for participation in cultural, sports and health events and activities with the aim of social inclusion and prevention of exclusion.

Every year, the Cultural Calendar of Parvomay Municipality features folklore and folksong festivals which provide a forum for expression of the young and older people in the municipality. Intergenerational solidarity is thus maintained and strengthened.

#### *State Agency for Bulgarians Abroad (SABA)*

The commitments of the State Agency for Bulgarians Abroad relate mainly to its interaction with the associations set up by Bulgarians abroad. Such associations are organisations with relatively small number of members but are full of people of initiative and ambition. They are independent structures and do not keep registers of their members but have activity guidelines emphasising on four main lines of action: information, educational activities, cultural activities and social activities.

The different lines of action are not balanced in the activity of the associations. The organisations are very active in the design of educational projects and cultural activities. The Bulgarian state has provided an option for organisations of Bulgarians abroad to apply for beneficiaries of direct funding from the Bulgarian state for weekend schools established by them under Ministerial Decree No. 334 / 2011 and National Programme “Mother Tongue and Culture Abroad”. Allocations by the Bulgarian state for this line of activity amount to BGN 5-6 million.

### **GOAL 3: PROMOTING AND SAFEGUARDING DIGNITY, HEALTH AND INDEPENDENCE IN OLDER AGE**

#### *Ministry of Health (MH)*

#### **National Health Strategy 2020 and Action Plan for the implementation of the National Health Strategy 2020:**

The National Health Strategy is the leading strategic document individualising the healthcare system development objectives up to 2020. Brought in harmony with Bulgaria’s European and international commitments, it also represents the efforts of the State to choose a national path for development of the healthcare system.

The instrument emphasizes on the problems of older people and one of the major national health goals is to increase the average remaining life expectancy of people after 65 years of age to 16,4 years.

The following challenges for older people are pointed out in the strategy:

- low life expectancy in years and in healthy life years;
- Increasing need of treatment resources and;
- Growing gap between the resources available and required to meet the needs of older people.

In that light, Policy 1.4., Health for Older People, includes the measures necessary to improve the quality of life and to limit the chronic diseases and disabilities in this population group.

The activities for ensuring access to health care for older people are included in different pieces of subordinate legislation with the aim of putting in place conditions for preventive measures, early diagnosis and timely treatment.

Ordinance No. 39 on medical check-ups and Ordinance No. 2 on determining the basic package of health activities guaranteed from the budget of NHIF address separately the specific age-related conditions requiring additional measures for timely identification of cardiovascular, oncological diseases, diabetes, etc. A requirement to include persons for whom medical check-ups have identified existing risk in the respective risk group and to cover them by additional types and scope of check-ups and tests has been introduced.

Ordinance No. 2 on determining the basic package of health activities guaranteed from the budget of NHIF sets out also the types of outpatient and inpatient medical care which ensure the access of patients, including older people, to medical care within the scope of the compulsory health insurance. Since 2016, the ordinance sets out separate clinical pathways for long-term treatment and early rehabilitation which will enable inpatient treatment, including of older patients, with health persistencies after the active treatment.

### *National Health Insurance Fund (NHIF)*

**Strengthening measures of health promotion, care and protection, as well as disease and injury prevention. Giving special attention to preventive measures, early diagnosis and to the treatment, care, especially long-term care, and social protection of persons with Alzheimer's disease and other dementias, while ensuring their dignity. Respecting self-determination as a core value through the end of life of an individual, including in long-term and palliative care:**

To be eligible for medical help from the National Health Insurance Fund (NHIF) Bulgarian nationals must have uninterrupted health insurance rights. *All citizens insured under the mandatory health insurance scheme, regardless of their age, sex, social status and place of residence, should have equal access to medical help (including prevention, treatment and palliative care), as well as freedom of choice of outpatient, inpatient and dental care provider across the country.*

The mandatory health insurance scheme in Bulgaria is an activity for management and spending of the resources collected from mandatory health insurance contributions for payment for health services. This activity is carried out by the National Health Insurance Fund and its regional units – the regional health insurance funds (RHIF). According to the Health Insurance Act, NHIF purchases medical activities, including the provision of medicines and medical goods for them, as specified in the NHIF Budget Act for the respective calendar year. The NHIF Budget Act sets out the differentiated health insurance payment costs for outpatient, inpatient and dental medical care, medical diagnostic activities, medicines, medical goods and dietetic foods for special medical purposes, intended for treatment at home, medical goods used in inpatient care. Activities outside this package within the budget approved by the National Assembly will be paid for by the citizens or by voluntary health insurance funds (where citizens have chosen to get insured in such funds).

The institution does not have legal powers for healthcare policy-making. NHIF implements the provisions of the Health Insurance Act, the Public Finance Act, the Health Act, the Medicinal Products in Human Medicine Act, the Medical-Treatment Facilities Act, etc.

With a view to improving the diagnostic and treatment healthcare for the population and expanding the prophylactic and preventive provision of medical care, NHIF puts the emphasis on the activities for health promotion and prophylaxis of health insured persons by paying for medical check-ups and related tests of the health insured citizens over 18 years of age, including for immunisations.

**Persons in the 50+ and 65+ age groups are given attention in the package of medical activities covered from the NHIF budget, in terms of the medical check-ups included in the package. They are subject to certain number of check-ups and tests for early diagnosis, inclusion in risk groups and treatment, as well as case follow-up if existing illness is proven.**

For example, women and men between 46 and 65 years of age are subject to complete blood count every five years, in addition to the number of check-ups and tests set out for all persons over 18 years of age. Men over 46 years of age and women over 50 years of age are subject to cholesterol and triglyceride tests, assessment of the SCORE CV risk for persons without cardiovascular diseases, diabetes, chronic kidney disease (CKD), LDL-cholesterol (for persons with cardiovascular diseases, diabetes, CKD who are not subjected to SCORE CV risk assessment) – every five years. Persons over 65 years of age – men and women, are subject to complete blood count (annually), cholesterol and triglyceride tests (every 5 years), SCORE CV risk assessment for persons without cardiovascular disease, diabetes, CKD, LDL-cholesterol (for persons with cardiovascular diseases, diabetes, CKD who are not subjected to SCORE CV risk assessment) – every five years.

Men over 50 years of age are subject to PSA test every two years. Women from 50 up to 69 years of age inclusive are referred by their GP, following a clinical test of the mammary glands, for mammography of the mammary glands every two years.

**During medical check-ups, a patient can be included in a risk group with the aim of prophylaxis of major diseases and priority diseases nationally.** In that light, the general practitioner (family doctor) forms risk groups for: cardiovascular diseases, diabetes, malignant neoplasms, “Malignant Neoplasm of the Cervix”, “Malignant Neoplasm of the Mammary Gland”, “Malignant Neoplasm of the Rectosigmoid”, “Malignant Neoplasm of the Prostate”. In such cases, the doctor issues, as necessary, a referral for the respective tests.

**Specialist doctors make a certain number of examinations within the prophylaxis of the risk groups formed by the GP: for example, for the risk group for malignant neoplasm of the rectosigmoid – of persons between 50 and 70 years of age; for the risk group for malignant neoplasm of the prostate – of men over 50 years of age; for the risk group for diabetes and cardiovascular diseases, etc.** The screening of the health insured persons over 18 years of age is provided by doctors who are specialists in Internal Medicine, Gastroenterology, Urology, Endocrinology and Metabolic Diseases, Cardiology, Surgery, and Obstetrics and Gynaecology.

**NHIF pays for case follow-up (check-ups) and related tests of health insured persons with one or several diseases, most of whom are older people** whose cases are followed up by the GP or by a medical specialist; they are subjected to case follow-up with the respective medical activities and tests by type, volume and incidence of all diseases by the GP, unless they state their express willingness to have their case followed up by a medical specialist, i.e. patients are given a choice option. If the chronically ill patients whose cases are followed up want to be followed by their GP, the latter can refer them for the necessary tests, including some highly specialised ones. This change is essential for people from remote regions who have to travel a long distance for an examination by a medical specialist.

NHIF provides also comprehensive (outpatient) follow-up care of persons with mental and skin and venereal diseases.

The health insured person can choose for the follow-up of their case a specialised outpatient medical care provider who has concluded a contract with NHIF and the choice option may not be limited on geographical and/or administrative grounds. The case follow-up of health insured persons is carried out only with their explicit consent.

Gradual increase in the number of preventive and case follow-up examinations of persons over 55 years of age is registered between 2012 and 2015, as follows: check-ups of persons over 55 years of age - 2012 - 448974 (men) and 642421 (women); 2013 - 454678 (men) and 653706 (women); 2014 - 464143 (men) and 665198 (women); 2015 - 483162 (men) and 688762 (women); 2016 - 309039 (men) and 441826 (women). Follow-up of cases of persons over 55 years of age - 2012 - 1445039 (men) and 2230910 (women); 2013 - 1543128 (men) and 2369349 (women); 2014 - 1621144 (men) and 2478931 (women); 2015 - 1677684 (men) and 2072190 (women); 2016 - 1127631 (men) and 1639716 (women).

The number of persons over 55 years of age included by a GP in risk groups during a medical check-up is as follows: women - 25 782; men - 23 030 (data are from May 2016 to date, on the basis of GP-issued preventive examination cards).

Persons from risk groups / check-ups for malignant neoplasm of the rectosigmoid, malignant neoplasm of the mammary gland in women, for malignant neoplasm of the cervix in women, for malignant neoplasm of the prostate in men over 50 years of age, for diabetes, for cardiovascular diseases, by the GP in the period 01.01.2013 - 08.2016: 2013 - 40 men, 49 women; 2014 - 55 men, 61 women; 2015- 29 men 47 women; 2016 (January - 31 August 2016) - 34 men, 36 women, by specialised outpatient medical care providers - 2013 - 45 men, 186 women; 2014 - 38 men and 131 women; 2015 - 35 men and 149 women, 2016 - 38 men and 113 women.

**As regards the provision of medicines form NHIF, an option which significantly facilitates the health insured citizens and especially older people has been envisaged.** From 2014, prescriptions for medical goods and dietetic foods for specialized medical purposes are dispensed by pharmacies working under a contract with the NHIF, wherever their location and whatever health insured person's choice of a GP. Such prescriptions were previously dispensed by pharmacies located on the territory of the region where the choice of a GP was made.

With the aim of respecting the self-determination and dignity as core values through the end of life of an individual, especially long-term care and social protection of persons with Alzheimer's disease and other dementias, **from 2013 NHIF began to pay medicines for treatment of persons with Alzheimer's disease at home**, which is very expensive globally and is at the top of the list of medical costs after cardiovascular and oncological diseases. NHIF reimburses Anticholinesterase medicinal products - Donepezil, Galantamine and Rivastigmine, as well as other anti-dementia medicines such as Memantine. Between 2013 and 2016, the Fund paid for the treatment of persons with Alzheimer's disease, as follows: 611 patients received treatment in 2013, payment amounting to BGN 197 877, in 2014 the patients are 1100 and the cost of their treatment is BGN 333 272, the amount paid in 2015 for 1435 health insured persons is BGN 181 311, and in the first six months of 2016 (01.01. - 07.2016) payment amounted to BGN 156 357 for the treatment of 1185, i.e. the number of persons with Alzheimer's disease receiving medicinal products from NHIF increases.

**With a view to promoting and safeguarding health and independence in older age, NHIF has signed contracts with inpatient palliative care providers** for clinical pathway 297 "Palliative care for cancer sufferers" (for the period 2012-2015), respectively for clinical pathway 253 "Palliative care for cancer sufferers" (for 2016) with annual average number of natural persons receiving such care in the period 2012 - 2016 (as of 30.09.2016) of 1971 people.

The clinical pathway enables total 20 days of inpatient treatment within the terminal stage, within 6 months of the oncological pathology. The activities under the clinical pathway are focused on **decreasing and preventing the suffering (pain control)** of patients in the terminal stage in the cases where their medical diagnosis excludes any hope for recovery or for maintaining health and death is imminent. **The clinical pathway does not cover rehabilitative care, restoring care** or maintenance treatment of patients or persons with chronically debilitating diseases and medical and social problems who cannot receive the care they need in their homes.

NHIF has envisaged incentivization of outpatient GP and dental care providers working **in remote locations** which are **centres of practices with unfavourable working conditions and mainly ageing population**, and in that light special methodologies for determining the monthly pay for working in locations which are centres of practices with unfavourable working conditions for primary outpatient and dental care providers have been developed. Such methodologies set out objective criteria for allocation of the funds for GPs and dental practitioners working in unfavourable conditions and aim to facilitate the access to primary medical and dental care of the ageing population living in those regions.

According to the Health Insurance Act, any Bulgarian citizens covered by mandatory health insurance has to pay the so-called “consumer fee” for the outpatient, inpatient and dental care provided. These amounts are set in a Ministerial Decree and health insured persons have to pay to the physician or the dental practitioner or to the medical care provider for each visit to the physician’s or dentist’s office and for each day of hospital treatment BGN 2.90 for outpatient care and BGN 5.80 for inpatient care for each day of hospital treatment, but not more than ten days annually. **A Ministerial Decree sets lower amounts for a visit to a physician’s or dental practitioner’s office from January 2014 for all persons who have exercised their entitlement to contributory-service and retirement-age pension. Such persons pay for each visit to a GP’s office, a medical-specialist office or a dental practitioner’s office a consumer fee of BGN 1, unless exempted under Article 37 (4) of the Health Insurance Act** (i.e. unless they belong to the categories of persons who are exempt from payment of such fee or have diseases included in a list to the National Framework Agreements in the period 2012-2016). The consumer fee for hospital treatment is BGN 5,80 and has to be paid by contributory-service and retirement age pensioners as well as by the other health insured persons, unless exempted.

**NHIF, as the health insurance fund providing management and spending of the resources accrued from health insurance contributions for payment for a basic package of budget-guaranteed health activities, is also responsible for providing information to the health insured persons about the health insurance contributions for a basic package of budget-guaranteed health activities, and about their rights at all levels of access to health services.** The institutional website – [www.nhif.bg](http://www.nhif.bg), features a special section with the following headings: “For the Patient” and “Online Consultations” where materials for the rights of health insured persons are posted in information brochures and information bulletin. The idea of the **“online” consultations for citizens** is to enable citizens to ask questions 24/7, including weekends and holidays. The “Online Consultations” e-service is accessible and is used a lot by the users. Between 2012 – 30.09.2016, replies were given to 17 822 inquiries – annual average of 3500 inquiries.

NHIF has enabled the citizens who do not use Internet, mostly over 60 years of age, to ask their questions also on-site – **in the reception room of NHIF**, as well as on the **hotline – 0800 14 800**, and on specified fixed telephone numbers callable from all over the country. From the beginning of 2012 till 30.09.2016, 6752 persons visited the reception room of NHIF and the hotline – 0800 14 800 provided answers to inquiries placed by 75 518 citizens. **The “E-services”**

**heading** in the website of NHIF enables health insured persons to make enquiries about all contractual partners and activities carried out by the health insurance funds across the country, and to make use of many other online e-services.

*Ministry of Youth and Sports (MYS)*

**Commitment 7: Striving to ensure quality of life at all ages and maintain independent living including health and well-being:**

**Measure: Strengthening measures of health promotion, care and protection, as well as disease and inquiry prevention at all ages, thus lowering the probability of illness and disability, and helping to ensure high physical and mental functioning, independent living, as well as active participation throughout the life course:**

The sport-for-all programmes administered by the Ministry of Youth and Sports are also intended to provide conditions and options for physical exercise and sports, and for achieving a healthy lifestyle by people in post-retirement age and persons with disabilities through their participation in sporting activities adapted for them. Involvement in sporting activities preserves and improves the physical capacity of those people, has a preventive effect in terms of cardiovascular, respiratory, locomotor system diseases, diabetes, obesity, helps to maintain or reduce body weight, etc., contributes to the better physical and mental conditions of doers.

*Social Assistance Agency (SAA)*

The **National Strategy for Long-term Care** (“The Strategy”) was adopted with Ministerial Decree No. 2 / 07.01.2014 to cover the need for provision of high-quality, diverse and sustainable forms of home-based and community-based services which meet the complex needs (health, mental and social) of older people, people with chronic diseases and persons with disabilities, and can play a preventive role and preclude placement in specialised institutions while meeting the increased demand for long-term care by the older population of Bulgaria. The Strategy provides for building of a network of affordable community-based and home-based services of high quality to enable the preparation for and deinstitutionalisation of older people and people with disabilities placed in specialised institutions while having a preventive role with regard to the institutionalisation of such persons. The main objective of the Strategy is to **enable older people and persons with disabilities to lead a life of dignity and independence** by improving the access to social services and the quality thereof, expanding the national network of such services, deinstitutionalization and promotion of the interaction of health and social services. Special emphasis is placed on the development of integrated cross-sector services.

Pursuant to the National Strategy for Long-term Care, a project for “Presentation and discussion of the draft 2016-2020 Action Plan for implementation of the National Strategy for Long-term Care” was prepared. The plan contains all of the measures and specific projects for **reforming and modernizing the system for long-term care and for deinstitutionalization of the care for elderly people and people with disabilities.**

In connection with an identified need for more flexible approaches in the provision of social services, for improved quality of such services and for introduction of special measurements to report the effectiveness and efficiency of social services, a Social Services Act is to be drawn up.

As of 31.08.2016, the following social services, **which are state-delegated activities**, are operational in the country:

**1. Specialised institutions for provision of social services:**

- 1.1 Home for mentally disabled elderly people – 27 homes with a capacity of 2 117 persons;
- 1.2 Home for elderly people with mental disorders – 13 homes with a capacity of 1 036 persons;
- 1.3 Home for elderly people with physical disabilities – 21 homes with a capacity of 1 301 persons;
- 1.4 Home for elderly people with sensory disabilities – 4 homes with a capacity of 133 persons;
- 1.5 Home for elderly people with dementia - 14 homes with a capacity of 825 persons;
- 1.6 Retirement home – 81 homes with a capacity of 5 553 persons.

## 2. Community-based social services:

- 2.1 Day care centre for elderly people with disabilities – 75 homes with a capacity of 1 920 persons, including Day care centre for elderly people with disabilities – weekly care – 4 homes with a capacity of 88 persons;
- 2.2 Day care centre for elderly people – 47 homes with a capacity of 1 208 persons;
- 2.3 Centre for social rehabilitation and integration – 85 homes with a capacity of 2 617 persons;
- 2.4 Sheltered homes (SH) – total 142 homes with a capacity of 1 259 persons, including:
  - SH for people with mental disorders – 31 homes with a capacity of 307 persons;
  - SH for people with mental retardation - 96 homes with a capacity of 809 persons;
  - SH for people with physical disabilities - 15 homes with a capacity of 143 persons;
- 2.5 Supervised homes - 22 homes with a capacity of 137 persons;
- 2.6 Transitional homes – 11 homes with a capacity of 100 persons;
- 2.7 Family-type accommodation centres (FTAC) for older persons – total 83 homes with a capacity of 1 086 persons, including:
  - FTAC for elderly people with mental disorders - 25 homes with a capacity of 335 persons;
  - FTAC for elderly people with dementia - 12 homes with a capacity of 153 persons;
  - FTAC for elderly people with mental retardation - 23 homes with a capacity of 285 persons;
  - FTAC for elderly people with physical disabilities - 19 homes with a capacity of 259 persons;
  - FTAC for old people - 4 homes with a capacity of 54 persons;
- 2.8 Crisis centre – 5 homes with a capacity of 50 persons;
- 2.9 Temporary accommodation centres - 12 homes with a capacity of 607 persons;
- 2.10 Shelters - 2 homes with a capacity of 70 persons;

Social services in Homes for Elderly People with Dementia (HEPD) and in FTAC for elderly people with dementia are provided with the aim of ensuring support for people in cases of dementia or Alzheimer’s disease.

**National Programme “Assistants for People with Disabilities” (NP APD)** – the Personal Assistant activity aims to provide employment opportunities to unemployed persons for easing the plight of families with persons with disabilities in need of permanent care. The Personal Assistant social service within the framework of NP APD is provided in a family environment. It ensures reliable, affordable and safe assistance to elderly people with disabilities in their home. The programme is financed from the state budget.

The Integration of People with Disabilities Act (IPDA) and its Implementing Regulations provide **guarantees and incentives for integration and equality of persons with disabilities, including elderly people with disabilities**, and outline the parameters of their social and economic protection through the provision of the following **additional funds to compensate the disability**:

- **Monthly integration allowance** – it is differentiated and represents a sum of money complementing the person’s own income, which is intended for covering additional costs for transport services, information and telecommunication services, training, balneotherapy and

rehabilitation services (it is used also by the person's attendant where reliance on care is specified in the Expert Decision issued by the Regional/National Invalidity Committee), dietetic food and medicines, accessible information. The amount of the monthly allowance is determined as a percentage of the guaranteed minimum income (GMI) set by the Council of Ministers, which is currently BGN 65. As of 30 September 2016, the support covered 524 602 persons, including 21 582 children.

- **Target assistance benefits for making, purchase and repair of aids, appliances, equipment and/or medical devices (AAE and/or MD)** – these are paid only for the AAE and/or MD on the lists under Article 35 (1) of IPDA, with the exception of the medical devices which are fully or partially paid by the National Health Insurance Fund. As of 30 September, the average monthly number of persons receiving assistance is 9 867 people.
- **Additional assistance benefit for travel expenditure in the country**, which is payable when the AAE and/or MD cannot be made, purchased or repaired in the place of disabled person's permanent address and the person needs to be present. As of 30 September 2016, assistance was provided to 1 354 persons.
- **Target assistance benefits for purchase and/or adaptation of a private motor vehicle.** They are in the amount of BGN 1 200 and are payable to disabled persons with reduced mobility where the monthly average income per family member in the past 12 months is equal to or lower than three times the amount of the guaranteed minimum income and where the degree of permanent decrease of their performance or the type and degree of permanent disability is determined at more than 90% by RIC/NIC. As of 30 September 2016, assistance was provided to 3 persons.
- **Lump-sum target assistance benefit in the amount up to BGN 600 for alteration of housing**, payable to disabled persons with degree of permanent decrease of their performance and/or type and degree of permanent disability at more than 90%, moving with wheel-chairs, where the monthly average income per family member in the past 12 months is equal to or lower than two times the amount of the guaranteed minimum income. As of 30 September 2016, assistance was provided to 2 persons.

Persons with decrease of their performance or type and degree of disability determined at 50+ % (including elderly people with disabilities) are exempt from the payment of vignette tax for one private car – owned by the person or representing matrimonial property, with cylinder capacity up to 2000 cc and engine power up to 117.64 kW (160 hp).

The following legislative amendments were made from 2012 to date in order to facilitate the procedures for granting targeted assistance benefits and allowance to people with ku:

From 09.08.2013, people with disabilities are enabled to report the realization of targeted assistance benefits for purchase or repair of custom-made AAE and/or MD within 90 days from the receipt of the benefit and, from 01.10.2014, the requirements with regard to the medical protocols of Medical Supervisory Committees for the granting of most of the medical devices. The requirement for persons to enclose a copy of the expert decision of RIC/NIC to every application form for targeted assistance benefits or allowance submitted within the period of validity of the expert decision is eliminated.

The sample application forms for monthly integration allowance, targeted assistance benefits for purchase and/or adaptation of private motor vehicles and for alteration of housing were eliminated with Order No. RD01-248 / 23.03.2015 of the Minister of Labour and Social Policy and the set of documents which have to be enclosed to the application forms for different types of assistance benefits and allowance were thus decreased.

The conditions for granting certain types of monthly integration allowance were changed in 2015 and the possibilities for receipt thereof were thus expanded. For example, the requirement for having a chronic disease with an issued prescription book of the chronically ill persons was eliminated from the assessment of the entitlement to monthly integration allowance for dietetic food and medicinal products. The requirement that the training allowance should be paid if the training is related to the health problem of the disabled people, i.e. that training should be with the aim of acquiring specific knowledge and skills to compensate the disability, was also eliminated.

From 01.06.2014, the eligible persons may mail forms for free-of-charge vignette stickers with confirmed receipt and from 01.01.2015 they can also mail forms in accordance with the Electronic Document and Electronic Signature Act. Pursuant to the amendments from 01.06.2014 the Social Assistance Directorates make the annual vignette stickers immediately available to the eligible persons upon acceptance and processing of the documents, provided that the requirements are met.

**Operational programme for food and/or basic material assistance  
under the Fund for European Aid for the Most Deprived  
(HRD OP 2014-2020)**

The Social Assistance Agency was designated Managing Authority of the Operational Programme with Ministerial Decision No. 632 / 08.09.2014 amending Ministerial Decision No. 792 / 17.12.2013 and was accredited as Managing Authority with Ministerial Decision No. 902 / 16 November 2015.

The operational programme was approved with Commission Implementing Decision of 05.12.2014 and is implemented across the whole country. It contributes for attainment of the **National Target under Europe 2020 Strategy for reducing the number of people living in poverty by 260 000 by 2020**. In the light of that target, the programme is directed to the people who are at the highest risk of poverty and social exclusion.

**The Programme finances food assistance to address an essential material deprivation through two types of operations: provision of individual food packages and provision of hot lunch.**

The monitoring of the operations implemented in 2015 identified a need to make some changes in the operational programme that would bring greater flexibility in the implementation thereof and higher efficiency in the measures planned. The proposed amendments were approved at the meeting of the Council of Ministers on 27.01.2016 and on 01.02.2016 the amended programme was transmitted to the Commission for official approval via the SFC2014. There are three main lines of amendments to the operational programme:

- **Modified description of the mechanism for identifying the most deprived persons.**

With a view to preventing the wastage of food already bought and achieving better focus and timeliness of support from the fund, the proposal is that only the mechanism for determining the target groups should be described in the Operational Programme, without specifying them as in the previous version of the programme. The target groups are determined with an ordinance issued by the minister of labour and social policy on the basis of an analysis of the degree of vulnerability and the identified level of material deprivation. The ordinance determines the target group for the respective type of assistance –provision of individual food packages and provision of hot lunch, as well as an additional target group for redistribution of food not received or not dispensed.

- **Determining as eligible the costs of implementing accompanying measures, at 5 per cent of food purchase costs.**

The costs of implementation of accompanying measures by the partner organisations in charge of execution of the contracts under the programme – for provision of hot lunch and for provision of individual packages, are eligible in accordance with the provisions of Article 26 (2) d) of Regulation (EU) No. 223/2014, but same were ineligible under the Bulgarian Operational Programme because it was accepted in the initial programming that accompanying measures would be financed from the European Social Fund under Human Resources Development Operational Programme. In the course of the implementation it was established that there is no risk of double funding because the Fund for European Aid for the Most Deprived provides initial basic support to the most deprived citizens affected by forms of extreme poverty, who are too disconnected from the labour market to benefit from the social inclusion measures of the European Social Fund. Determining such an expenditure as eligible under the Operational Programme for Food will improve the efficiency of operations, on one part, and will further incentivize the partner organisations which are currently obligated to implement accompanying measures, receiving no funds for them. On the other hand, that will constitute grounds for the Managing Authority to be more demanding regarding the results of the accompanying measures financed.

- **Supplementing the criteria for selection of partner organisations.**

It is proposed that the criteria for selection of partner organisations to provide individual food packages should be elaborated by adding experience in the provision of aid in kind to experience should be included in the requirements for having specific experience in terms of the requirement to the organisations to have specific experience, by adding to experience in the provision of food also experience in the provision of aid in kind.

The amendments to the programme were approved with Commission Implementing Decision on 14.04.2016.

Financial framework of the Operational Programme – The total budget of the Operational Programme for the period 2014-2020 is EUR 123 312 076, allocated as follows:

- EUR 117 146 472 for the provision of food under the operations
- EUR 6 165 604 for technical assistance in relation to the management of the programme.

Following the amendment to the Operational Programme, the total financial resource of the programme is allocated as follows:

- EUR 117 146 472 for the provision of food under the operations, including EUR 5 324 839 for accompanying measures.
- EUR 6 165 604 – technical assistance.

According to Ministerial Decree 37/2015 (as amended and supplemented, SG, No. 41 / 31.05.2016), the allocation of the financial resource for the different operations for the following year is approved by the Minister of Labour and Social Policy by the end of December of the previous year.

- ✓ Allocation of the financial resource for 2015:
  - Purchase of food – BGN 24 240 000.
  - Provision of food – 5 % of the value of purchased food, but not more than BGN 1 200 000.
  - Provision of hot lunch – BGN 5 995 571.

- ✓ Allocation of the financial resource for 2016:
  - Purchase of food – BGN 48 225 224.
  - Provision of food - 10 % of the value of purchased food, but not more than BGN 4 822 522.
  - Provision of hot lunch – BGN 23 883 472.

Results under Operation Type 3 “Provision of hot lunch – 2016”:

The operation was announced on 25.04.2016; the grant was made available through a direct award procedure with five application deadlines, the latest expiring on 30.09.2016. Eligible applicants include municipalities and municipal regions. As of 27.09.2016:

- Applicant municipalities and regions – 171
- Evaluated applications – 157 (from the first, second, third and fourth implementation deadlines)
- Fifth application deadline is open with 14 applicants so far
- Contracts concluded with 125 municipalities
- Number of soup kitchens under the concluded contracts – 153
- Number of beneficiaries under the concluded contracts - 15 577

As of 27.09.2016, grant contracts worth BGN 6 961 052,35 have been signed within three evaluation rounds. Contracts worth BGN 3 235 538,57 are pending signing in October with 31 other municipalities evaluated within the fourth evaluation round. There is one more application deadline within the procedure – 30.09.2016. Annexes to extend the deadline and increase the number of beneficiaries are pending signing for the contracts concluded in the first three rounds in 2016.

Results under Operation Type 2 “Provision of individual food packages”:

The first food provision tranche was completed. Between 06.01.2016 and 05.02.2016, food packages (total 13,600 kg per package) of 5 foods: flour, spaghetti, fruit in syrup, jam and lentils, were dispensed to 225 836 eligible persons in 313 dispensing points. Between 09.05.2016 and 03.06.2016, 7 foods were dispensed in 286 dispensing points to 39 164 persons from the additional target groups. Beneficiaries received the balance quantities of the 5 foods from the first tranche (flour, spaghetti, fruit in syrup, jam and lentils) plus the new products (Turkish delight and nectar). Every eligible person received total 14,800 kg of the seven foods.

Total 265 000 beneficiaries received food packages within the first tranche. A second tranche with 14 dispensed foods is currently going on.

*Institute for the Study of Societies and Knowledge at the Bulgarian Academy of Science  
(ISSK BAS)*

An ISSK BAS team participated in the project “**Health, quality of life, inequalities. State of play, relationships, trends and challenges**”, developed under Contract No. KO02/4 with the National Research Fund in the period 2014 – 2016, with project manager Ass. Prof. Bozhidar Ivkov.

The project makes an assessment of public health in general and of the health of different social groups, including older and disabled people. The level of equality of the different groups in terms of the access to health services, medicines and medical devices is assessed on the basis of the identified inequalities and the state of play, the interrelationships and links between health and the quality of life of the Bulgarian citizens, as well as the formative effect of existing inequalities are evaluated.

*Bulgarian Red Cross (BRC)*

In line with BRC’s Strategy 2020, the organisation is a provider of social services for older people aiming to ensure a life of independence and dignity to its beneficiaries.

Meeting the needs of older people in a comprehensive and adequate manner calls for implementation of integrated health and social services in Bulgaria. In response, BRC

implements the project **“Home Care and Assistance Services towards Independent and Dignified Life”** /2012 – 2017/ within Switzerland’s contribution to the enlarged European Union. The objective is to ensure long-term home-based care for elderly people with chronic diseases and disabilities. The high quality of such care will be guaranteed by developing a uniform national quality standard for home care which will be provided by qualified medical nurses and domestic helpers.

The project involves cooperation with many institutions, professional organisations and NGOs, including the Ministry of Labour and Social Policy, the Ministry of Health, NHIF, Bulgarian Medical Association, Bulgarian Association of Healthcare Professionals, Social Assistance Agency, local authority representatives, Swiss Red Cross, etc. The purpose is to provide a broad forum for discussion and to create prerequisites for regulatory decision-making towards **sustainable regulation of long-term home-based care**. Such an approach will enable elderly people to remain as long as possible among their families and friends and will save financial resources to the social and health funds, as well as to the elderly people. In a longer-term aspect, this process is relevant to balancing the social safety nets in Bulgaria which has a high share of older people over 65 years of age. In addition, the provision of integrated home-based health and social services will enable elderly people with chronic diseases and disabilities and their relatives and friends to find solutions to their problems within the community they live in.

**Four Municipal Home Care Centres were established and function in four municipalities in the district of Vratsa – Krivodol, Byala Slatina, Oryahovo and Vratsa.**

Total 17 medical nurses and 33 domestic helpers are appointed in the four centres. Towards provision of quality services, all team members receive compulsory training, organised by BRC within 160 tuition hours for medical nurses and 120 tuition hours for domestic helpers, before they are employed in the centres. Training is focused on acquiring skills and knowledge about the specifics of home-based work with elderly and ill people.

As of October 2016, the teams of the four centres provide regular care to total 430 beneficiaries – elderly people over 65 years of age with chronic diseases and disabilities. More than 70% of the beneficiaries live alone and 20% live in small settlements within the respective region lacking any form of health care or social service.

As a result of the project, the integrated health and social services for elderly people with chronic diseases and disabilities in Bulgaria received their first legislative regulation (amendments to the Health Act, September 2015). BRC is currently working with MH, MLSP and NGOs on the design of an ordinance regulating the future organisation and provision of this type of services, as well as on a proposal for a sustainable financial model.

The Home Care Programme implemented by the Bulgarian Red Cross was included as best practice in the collection “Lessons from transforming health services delivery: Compendium of initiatives in the WHO European region” published by the WHO Regional Office for Europe in June 2016. The document includes examples from 53 WHO member countries in Europe. Against the background of the demographic challenges faced by Bulgaria, WHO emphasises on the experience of the Bulgarian Red Cross in the provision of integrated community-based health and social services for elderly people with chronic diseases and disabilities. Special focus is placed on the project “Home-based care for independent and dignified life”, implemented since 2012 in cooperation with MH, MLSP and the Swiss Red Cross with support from the Bulgarian-Swiss Programme. The project aims at building the institutional framework for sustainable, quality and effective provision of this type of services in the future.

The compendium is available online at:

<http://www.euro.who.int/en/health-topics/Health-systems/health-service-delivery/publications/2016/lessons-from-transforming-health-services-delivery-compendium-of-initiatives-in-the-who-european-region-2016>.

*National Association of Municipalities in the Republic of Bulgaria (NAMRB)*

Common practices implemented across all municipalities:

All municipalities provide the most common deinstitutionalised home-based service – home care. (The service is described in greater detail hereunder in the practices of the municipalities of Topolovgrad, Kyustendil, Sliven). The service provides support mainly to elderly people who cannot organise and meet alone their everyday life needs (having no relatives and friends, and persons with disabilities) and covers more than 38 thousand beneficiaries. Most of the municipalities implement additional and upgrading services under different projects, for example “Hot Lunch” and “Hourly Service Centres”.

Day care centres for elderly people are another service which does not have so wide territorial coverage but registers sustainable results (such centres are operational in 43 municipalities with total 1231 places). (The service is described in greater detail in the practices of the municipalities of Ruse and Krichim).

**Topolovgrad Municipality:**

**Home Care** is a community-based service fully financed from the municipal budget. The target group is provided with an additional option to choose services which meet best their needs. An Hourly Service Centre for provision of community-based or home-based social inclusion services has been established. It provides a comprehensive service for people over 65 years of age who need help or are unable to look after themselves.

The objective of the project is to encourage the social inclusion and enhance the access of elderly people to quality services, including health and social services.

The project “Provision of hot lunch” is an upgrading service. It ensures hot meal for potential beneficiaries throughout the year. There is diversified menu every week which ensures balanced meals for the target group, subject to food safety requirements and national nutrition standards and norms.

The Home Care social services include activities for meeting everyday life needs, health needs, educational needs, leisure time activities. The services offered by Home Care include:

- Daily cooking and home delivery of varied meals;
- Maintaining the personal hygiene of beneficiaries and the hygiene in the place where they live;
- Assistance for a visit to the GP and purchase of medicines;
- Assistance for communication and social contacts, entertainments and activities;
- Everyday life services – buying food, basic necessities, paying electricity bills, phone bills, etc. with funds given by the person;
- Ensuring heating materials with funds given by the person cared for;
- Ensuring specialised transport for access by the target group to the Hourly Service Centre;
- Ensuring home-based medical, psychological and therapeutic services.

**Kyustendil Municipality:**

Kyustendil Home Care is a local activity which ensures:

- Home delivery of food with a capacity of 450 beneficiaries;
- Sanitary services with a capacity of 34 beneficiaries;

- Free-of-charge support for social inclusion, provided by a social worker and a psychologist;
- Municipal soup kitchen with a capacity of 50 beneficiaries.

These are long-term community-based services. The **Social Service Complex (SSC)** works until the problem and needs of every beneficiary are fully addressed. It was set up with a decision of the Municipal Council but it is not a legal person and operates on behalf and for account of Kyustendil Municipality with funds from the republican budget, pursuant to the Municipal Ownership Act and the State Budget Act.

Experts are engaged in: preparing assessments and individual plans of beneficiaries; discussing issues of personal needs and necessities with the service beneficiaries and their families; work is carried out on a needs basis, individually or in groups; consultations with beneficiaries and their relatives and provision of psychological support; assistance in case of communication and behavioural difficulties; participation in and organisation of trainings for social skills development, support groups, etc. Mobile work provides assistance for preparing the necessary documents for invalidity commissions, etc. The service covers 315 beneficiaries on average per year.

A Support Group for persons with mental problems was set within the framework of the service. Its purpose is to show to its members, through sharing and discussion, that, above all, they are not alone. Going twice a week to the group meetings, they learn how others address problems, what they have tried and what has helped them, how they fight to overcome difficulties and what sustains them. Group members provide strong support and motivation to one another and those are important steps for every person with mental problems. The service covers 10 beneficiaries on average per year.

#### **Sliven Municipality:**

**Home Care** provides social services in the homes of elderly people. There is a Domestic Helper Unit within the Home Care Service. The services are targeted at people living alone and persons with disabilities who cannot look after themselves. In addition, Sliven Municipality implements the project “Support and expansion of the activity for hourly provision of community-based or home-based social inclusion services” of the Domestic Helper Social Service Unit of Sliven Home Care Service, financed from Human Resources Development Operational Programme. Persons in close to retirement age were also selected during the selection of domestic helpers and personal assistants.

#### **Rousse Municipality:**

Provision of the social service “**Day care centre for elderly people**” by Old Age Foundation, Rousse, as an alternative service for provision of conditions, opportunities and care, as well as communal living of good quality to disadvantaged persons.

The centre’s activities are focused on assisting elderly people by:

- Taking elderly people with reduced mobility to the Day Care Centre and back, to medical care providers and back, and to different institutions with transport secured by the Foundation.
- Weekly and daily activities; consultations and courses.
- Consultations with jurists and medical specialists.
- Educational discussions and activities to increase social contacts, celebrating Christian holidays and traditions.
- Work therapy, organising and visiting exhibitions. Going to the theatre, to concerts, to cultural and public events, organising excursions for exchange of experience.

- Supporting beneficiaries in their relations with different institutions on administrative issues.

**Krichim Municipality:**

The Day Care Centre for Elderly People (DCCEP) in Krichim with a capacity of 35 beneficiaries provides the following services:

- Health and social consultations;
- Day care;
- Giving meaning to one’s leisure time;
- Group work;
- Rehabilitation / movement therapy;
- Meals.

Major results achieved in **addressing social exclusion and protecting health and independence in older age:**

In 2015 and 2016, DCCEP implemented a number of events and activities to encourage beneficiaries to be active and to be proud to show their skills to the younger generation. Together with the children from the Public Support Centre in Krichim, older people make martenitsi, knitted articles, Easter decorations, Christmas decorations and cards on different occasions for the charity bazaars and exhibitions organised by Krichim Municipality. Visits and exchange of experience with other centres are organised, as well as festivals to celebrate the International Day of Older Persons, the Old Urban Folk Song Day, the Natal Care Day.

The day centre beneficiaries created the group “Orchids” and take active part in festivals. On 20.06.2015 they participated in the festival in Sopot and on 22.10.2016 – in the festival of old urban folk songs and hits “Tender Memories” in Panagyurishte.

In 2015 and 2016, the beneficiaries took part in 7 excursions and visited many cultural and historical sites.

**Targovishte Municipality:**

The municipality ensures annually recreation visits for older people to its recreation home in Balchik. Every year, on 22 September, the municipality organises a fair in the village of Ossen, targeted mainly to older people.

There is a Day Care Centre for elderly people and Day Care Centre for persons with disabilities in Targovishte Municipality, as well as 33 clubs for retired persons, including 9 in the town and 24 in the villages.

**GOAL 4: MAINTAINING AND ENHANCING INTERGENERATIONAL SOLIDARITY**

*Ministry of Economy (ME)*

Action Pillar 3 – Role Models and reaching out to specific groups, of the adopted Entrepreneurship 2020 – Bulgaria Action Plan with a list of specific measures in line with the Entrepreneurship 2020 Action Plan Reigniting the entrepreneurial spirit in Europe, approved by the European Commission (COM/2012/0795 final), includes the measure “Creating a mechanism for senior entrepreneurs to transfer know-how to new inexperienced entrepreneurs”.

The purpose of the initiative is to foster senior entrepreneurs interested in transferring know how to new entrepreneurs and match senior entrepreneurs with inexperienced entrepreneurs to create teams with broader skill sets.

It is planned that the action will be implemented together with the measure “Fostering entrepreneurship and creating new enterprises in Bulgaria” within a project of the Ministry of Economy under Human Resources Development Operational Programme 2014 – 2020 for creating a voluntary register of senior entrepreneurs willing to transfer know-how to new, inexperienced entrepreneurs.

*Ministry of Youth and Sports (MYS)*

**Commitment 1: Mainstreaming ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve society for all ages:**

**Measures:**

**Recognising the value of and fostering the joint volunteering of people of all ages;**

**Improving cooperation between youth organisations and older person’s organisations:**

The National Youth Programme (2016 – 2020) was adopted with Ministerial Decision No. 83 / 11.02.2016. It aims to improve the quality of life and the personal fulfilment of young people by creating and applying sustainable mechanisms to invest in youth as a significant social factor and to build an environment of tolerance among children and youth towards their full-fledged development, to develop the ability to get insight and integrate into the different spheres of national social, political and economic life and to build sustainable attitudes for responsible lifestyle.

Sub-programme 2 “National youth initiatives and campaigns” includes the thematic area “Youth volunteering and participation in voluntary initiatives”. The programme activities aim to promote volunteering among young people in support and protection of vulnerable and marginalized social groups, older people, etc. Generally, Sub-programme 2 emphasises mainly on fostering active citizenship and participation in campaigns and initiatives by young people and youth workers in the country. Non-formal approaches and methods are thus established towards encouraging the active citizenship and involvement of young people.

*National Association of Municipalities in the Republic of Bulgaria (NAMRB)*

**Gabrovo Municipality:**

**Take Me in Your Village Initiative:**

A concept for preservation of the Bulgarian cultural heritage – folklore, traditions, customs and values through a network of foster families across the country was prepared in 2012 for the National Contest “My Ideas for Bulgaria”. Since 2013, the idea has been recognised, developed, funded and implemented by Gabrovo Municipality under the name “Take Me in Your Village”. Main partners include the community cultural centres in the villages. The initiative is implemented from July through September. Young people stay in the villages for 5 days.

Initiative’s implementation went through the following steps: 2013 – one village with 12 young people covered; 2014 – five villages and 50 participants; 2015 – eight villages and the “foster grandchildren” are 70. In 2015, the initiative was expanded with “Take Me in Your Village” – Junior, for children between 9 and 14 years of age.

A strategy for development of the Foster Villages Network, a logo and a trademark were signed with Gabrovo Municipality.

**In 2016**, the stay of the „foster grandchildren” was extended from 5 to 7 days and a Day Camp “Take Me in Your Village” was organised in Popovtsi”.

### **Opportunities for the following years:**

- Enlarging the target groups: „Take Me in Your Village” – Family, for children under 9 and their parents;
- Promotion among the Bulgarian communities abroad and involvement of young people from those communities with the aim of preserving their Bulgarian identity and promoting our cultural heritage;
- Including new villages.

Villages are depopulated and disappear from the national map every day, young people are gradually removed from their roots and break their bond with the village and nature, removed also from national folk traditions and customs. Villages become modern exotic and only the textbooks will tell about.

The following objectives are attained through the initiative:

- Social commitment: mutual knowledge and communication between generations, as well as tolerance, understanding and interaction between them are fostered. The participating young people help older people with their everyday chores and get to know the patriarchal lifestyle, culture and spirit;
- Educational objective: social skills are developed – team work, communication, transfer of know-how by older to young people and vice versa. Knowledge is acquired through activity and experience;
- Cultural focus: Preserving and promoting Bulgaria’s living cultural heritage – traditions, customs, folklore, crafts and values, in an authentic cultural environment;
- Tourism: Through the young people, the Bulgarian village is promoted as a place for rural and cultural tourism.

Target groups of the initiative: young people between 15 and 29 years of age – “foster grandchildren”. Children from all over the country between 9 and 14 years – “foster grandchildren” in Take Me in Your Village – Junior; “foster grandmothers and grandfathers” from the villages in Gabrovo Municipality and the “Foster villages” from other municipalities which have joined the initiative.

### **Vratsa Municipality:**

**Grandmother Residence Project** is a programme that connects urban people with older households in depopulating villages so that they can look together for solidarity interaction models.

The activities are implemented in villages in Vratsa Municipality. Ten urban youths took part in or initiated activities ranging from cleaning of eco-paths to helping households with the daily chores like cooking traditional dishes, wool carding and spinning, making cheese and hand-made yellow cheese, gathering potatoes, they also joined in the vine harvest. Young and old gathered at a sit-in with songs, dancing and a lot of enthusiasm. The grannies from the village choir sung traditional sit-in songs, showed how maize was husked. Two painted bus stops decorated with drawings will remind of the residents in Pavolche. The sit-in they organised at the end of their stay in the village gathered more people than ever before.

Grannies (housewives in the villages) received help with their daily chores and household work; the older people cheered up sharing values, skills and knowledge with the young people, organised events together, older people got the chance for social inclusion as active members of the society.

### **Tsenovo Municipality:**

A non-traditional **summer day camp brought together students and their grannies in Tsenovo**. The idea behind the day camp is to enable children to master the skills and experience

of older people. The first lesson was divided into three parts – making bracelets and necklaces, embroidering on flax fabric and drawing on glass surface. Activities continue for about two hours every Wednesday till the end of the summer holidays. The leisure time of young people is thus given meaning to, causal interaction and intergenerational contacts are fostered. The idea for the summer day camp was given by the club of retired women “Young Hearts” and was supported by Hristo Botev Community Cultural Centre.

The participants in the summer day camp unanimously decided to give the articles made to the charity exhibition within the Children’s Folklore Festival “Tsenovo Sings and Dances” to be held on 22 and 23 September. The funds raised will be donated to disadvantaged children for the purchase of school aids. At the next gathering, the children and the grannies made different flowers of colour paper and encrusted vases.

#### **Sliven Municipality:**

The Home for Elderly People is an open-type institution visited by youth organisations for celebration of holidays. Older people transfer their know-how to the youths and do not feel excluded. The home for elderly people makes martenitsi and cards which are delivered to institutions providing services for children. The institution has established cooperation and partnership with youth organisations and institutions providing services for children.

## **2. Conclusions and priorities for the future**

The analysis of the demographic situation in Bulgaria strongly suggests that due to the long response time characterising demographic processes, significant population increase cannot be the sound national policy in the medium-term. Further population decrease and ageing are largely predetermined, given the real age structure and the lower number of women in fertile age.

In the modern context, it is not the population number that is essential but the condition of the human capital, namely education, competences, skills and the health status of people. Ensuring quality healthcare and education, effective gender equality and possibilities for full-fledged personal development at any age is viewed as a tool and a way to achieve balanced demographic development in the longer term.

In Bulgaria, there is growing need of integrated institutional action to adapt major sectors such as employment, healthcare, education, social insurance and social assistance to population ageing.

An important step in that direction will be the adoption by the Council of Ministers of a National Comprehensive Strategy for Active Ageing with a horizon from 2016 up to 2030, which is pending finalisation and submission for public discussion in December 2016.

The new Report on reflecting the National Concept for Promotion of Active Ageing in the sector policies, covering the period 2015-2016, is to be prepared in 2017.

Regarding the cooperation with the international organisations on ageing, **we suggest that Bulgaria, through the Ministry of Labour and Social Policy, should request assistance from UNECE for the development of a Roadmap on Ageing.** This proposal is made in view of the fast pace of population ageing in Bulgaria and the need of adequate actions with support from international institutions.