



# BULGARIA GROWS WITH ITS CHILDREN

Building Professional Competences  
of the Early Childhood Workforce



## SUMMARY OF REPORT

This document is the summary of a report based on the research conducted by a team of For Our Children Foundation. The team was led by Dr. Natalia Mihaylova and included Dr. Ivanka Shalapatova, Elitsa Gerginova, Savelina Roussinova, and Dimitar Ivanchev. The research took place in 2020.

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## MESSAGE

**from Ivanka Shalapatova,  
Executive Director  
For Our Children Foundation**

For 28 years, our Foundation has been working to ensure that every child in Bulgaria grows up happily in a supportive family environment and reaches their full potential. For Our Children Foundation focuses on early childhood - the first 7 years of the child's life. This is the most vulnerable and fundamental period that can give a strong impetus to human development. We reach children and their families directly with our social and integrated services in Sofia and Plovdiv districts, and in recent years, our efforts have also focused on policies and measures to promote early childhood development in our country. This present study is part of our research on early childhood development, through which we aim to collect key data, to point out the problems, to shed light on decisions, and to influence the process of making decisions that affect the future of Bulgarian children and give guidance to their parents.

The study is part of the initiative Bulgaria Grows with Its Children which focuses on professionals working with young children and their families in the health, education and social systems. The topic of people working directly with children and parents in these systems is stands out when we look for solution to problems and when we think not only about tomorrow but also about the future. European policies highlight the importance of education, motivation and support for the workforce. In our country, this topic is even more important given the workforce shortage in these sectors as well as the low indicators of reach of healthcare, early childhood education and care, and social protection to children.

The report outlines policies and measures aimed at the development of the workforce, including initial education, professional development and working conditions, as well as presents data from the experience of 461 specialists working directly with children and families. The research among professionals working with children reveals the need for targeted measures to upgrade the competencies of professionals, both in their initial education and continuing professional development, focuses on the prestige of the professions in this area and the recognition by parents and society of

the results from the work of the specialists. We also pay attention to working conditions. Doctors, nurses, midwives, educators, social workers, psychologists, therapists and all other professionals who are dedicated to the care, health, education and development of children deserve to work in an environment that supports their professional development and provides secure and motivating working conditions. Their knowledge, skills and competences are key for the wellbeing of the children and hence for preparing a strong future of the nation. It is of particular importance that state policies should ensure the necessary knowledge, skills and competencies of the workforce as well as dignified working conditions. This is the enabling environment for professionals to work in partnership with parents and help them cope with difficulties in the upbringing and development of their children.

One of the main conclusions of the research team is that the lack of a comprehensive, consolidated vision for investment in early childhood development as a key to our prosperity as a society has a negative impact on the quality of education and care for young children. We need an integrated modern early childhood development policy with clearly defined roles and responsibilities of the various stakeholders and a strategic

plan for the provision of quality and accessible services by a motivated and competent workforce. Time will tell whether our society will choose this priority on behalf of our children.

Our Foundation's team is thankful to all professionals who took part in the study, as well as to all the other professionals in the health, social and educational sectors who work tirelessly to support our children to grow and develop, and give their parents hope and confidence that they will cope. The project "Bulgaria grows with its children" would not have been possible without the support of the Active Citizens in Bulgaria Fund, part of the Financial Mechanism of the European Economic Area 2014-2021, for which we are deeply grateful. Our work in the field of early childhood development continues thanks to thousands of like-minded people and friends who believe in our vision of development and a happy childhood for the children of Bulgaria. Thank you for your trust and wish you a pleasant reading! Let's keep in mind that change depends on us, and children cannot wait, they have the right to be happy from the first breath, from the first caress and touch of tenderness!



## FOREWORD

**from Dr. Jan Peeters**  
**Senior researcher Ghent University**

### Senior consultant Fair Start Stories

When at the end of 2019 For Our Children Foundation in Bulgaria asked me to collaborate with them in a research project on the early childhood workforce in Bulgaria, I was also involved together with colleagues from different European member states in a policy research project on integrated working in Early Childhood Development (ECD). This review of recent research and case studies commissioned by the European Commission has proven that efforts to improve the development and well-being of children and families must involve a wide range of policies, services and actions. No single sector on its own can hope to achieve sustainable improvements.<sup>1</sup> There is a growing recognition among researchers, policy makers and practitioners that different sectors of early childhood development (health, education and social work) need to become better integrated if Early Childhood Development (ECD) wants to address complex issues such as poverty and promote social inclusion. Only multi-dimensional,

aligned and integrated responses and interventions in early years can address the complex and multi-faceted needs of all children and their families. The collaboration between these three sectors aims to better serve all children and families by responding better to their multi-faced needs. By making services from different sectors better connected to one another overlap in service delivery can also be avoided.

According to this NESET<sup>2</sup> study on Integrated working, a close collaboration between the three sectors requires well-qualified, experienced and competent staff with additional competences or attitudes such as the willingness to cooperate with others and reflect on one's own practice; open-mindedness to shared learning; and an enabling, welcoming, participative and inclusive work attitude. Professionals must also be equipped with competences in family and community engagement, in laying the groundwork for mutual respect, and in building relationships.

Preservice training institutions that prepare professionals to work in early years (education, health, social work) should develop more joint courses, engage in greater collaboration, and offer more joint internships. Continuous professional

development (training courses and seminars, professional learning communities, as well as networking and mentoring), should be available to develop competences on the central issues involved in collaboration of the three sectors, such as networking, cooperation and functioning within integrated services.

So, when I had a look at the project proposal that For Our Children Foundation has sent to me, I was very enthusiast to participate in this research because this proposal was in perfect alignment with the recommendations of this European study. During my visit to Sofia in February 2020, a couple of weeks before the pandemic, I met a very dynamic team that was preparing the research. Together with my colleague Ayça Alaylı, we had very inspiring talks on how to set up this important research in Bulgaria. When the lockdown took over our lives in March 2020, I thought that the For Our Children team would cancel the project, but I underestimated their entrepreneurship: they continued the research in difficult circumstances and finalised it in January 2021. The results and the recommendations of this research are very inspiring not only for the Bulgarian sectors of health, social work and education, but also for many countries in Europe. I hope this report will help increase

the professionalization of the workers in the three sectors. The findings and conclusions that reflect the experiences of a wide range of professionals, will inspire the universities and the training centres to set up pre- and in-service trainings with a focus on an holistic view on the young child and on cooperation and dialogue among professionals from various sectors as a core competence.

I hope the findings and conclusions will inspire universities and training centres to set up pre- and in-service trainings with a focus on an holistic view on the young child and on cooperation and dialogue among professionals from various sectors as a core competence. This will be an important move for the professionalization of the workers in the three sectors.

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<sup>1</sup> Vandekerckhove, A., Hulpia, H., Hutova, J., Peeters, J. Makareviciene, A. (2019). The role of ECEC in integrated working, benefitting vulnerable groups such as Roma. NESET. Luxembourg: European Union. [https://www.researchgate.net/publication/332876571\\_](https://www.researchgate.net/publication/332876571_)

<sup>2</sup> NESET is a network consisting of 60 experts representing 28 EU Member States, Albania, Belarus, Bosnia and Herzegovina, Canada, Iceland, Kosovo, Montenegro, North Macedonia, Norway, Serbia, and the US. It provides scientific support, country-specific expertise, and advice to the European Commission in relation to the equity and social aspects of all types and levels of education and training. More information about the network is available at: <https://nesetweb.eu/en/>





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# INTRODUCTION

Scientific evidence from across the globe has demonstrated that investments in early childhood development – the period which lays the foundations of the person’s wellbeing and development has a high rate of return for families and societies (Irwin et al., 2007). The two United Nations Conventions, The Convention on the Rights of the Child<sup>3</sup> and the Convention on the Rights of Persons with Disabilities<sup>4</sup>, are the core international human rights instruments that guarantee the rights of all children, including children with disabilities, to develop “to the maximum extent possible” and to receive support for the realization of fundamental human rights.

Contemporary European studies confirm that the quality of education and care in the early childhood depends on the presence of a professional and competent workforce that works within a ‘competent system’. This includes each individual professional, teams of professionals in each separate organization or service and competent management at local and national levels (Urban et al., 2011).

Each of the levels of the competent system unfolds in the dimensions of knowledge, practice, and values (ibid, p. 33). To improve the quality of education and care

in the early childhood age, respectively the effects for children and families, it is necessary to develop all the components of the competent system. The Key principles of the European quality framework for early childhood education and care, formulated by European experts, highlight the cooperation between different stakeholders: individual professionals, teams of professionals, educational institutions, local authorities, non-governmental organizations (NGOs). The Framework emphasizes the interinstitutional cooperation and partnership (for example between educational and health institutions), partnership between professional communities (for instance between early childhood education and care facilities and schools), networking, including local authorities and NGOs (European Commission, 2014). To make this cooperation possible, a common framework of early childhood education and care (ECEC) policies at a national level is necessary (ibid, p.61-62).

In relation to the Framework for Nurturing Care of the World Health Organization (World Health Organization, United Nations Children’s Fund, World Bank Group, 2018), the Early Childhood Workforce Initiative<sup>5</sup> suggests three approaches, to prepare the workforce for supporting nurturing care: to form a consensus regarding the concept of nurturing care among the workforce in the respective areas; initial training and continuous professional development of the workforce need to include nurturing care; to pay attention to the working conditions, which limit the possibilities for early childhood professionals to support families (Hatipoglu, Neuman, 2018). The workforce

is defined as ‘the most important factor for the wellbeing, learning and development of children’ in the EU Council Recommendation on High-Quality Early Childhood Education and Care Systems (Council Recommendation of 22 May 2019). Therefore, the Council views professional development of the workforce and working conditions as the main components of quality in early childhood education and care.

<sup>3</sup> The CRC is in force for Bulgaria since June 1991.

<sup>4</sup> The CRPD is in force for Bulgaria since 21.04.2012.

<sup>5</sup> The Early Childhood Workforce Initiative is an initiative of the International Step by Step Association (ISSA), which was created with the aim to help policymakers in specific countries support the development of a quality workforce. More information about the Initiative is available at: <https://www.issa.nl/workforce>

# GOAL AND METHODOLOGY

The goal of the research 'Bulgaria grows with its children: Building professional competences for early childhood development' (hereinafter referred to as 'research on the early years workforce' and 'the research') is to outline the main directions for improvement of the professionalization of the early years workforce on the basis of data – quantitative and qualitative – as well as to formulate recommendations for policy development in this area.

The research methodology includes a system of qualitative and quantitative methods for data collection. An in-depth review and analysis of strategic documents, scientific research and regulatory frameworks has been conducted. A quantitative study among a total of 461 professionals in the educational, social and health sectors has been conducted, as well as focus groups and interviews with 78 representatives in the three sectors at a national, regional, and local levels.

The participants in the study are professionals from the three sectors, more specifically early childhood education and care teachers, kindergarten principals, representatives of regional departments of education, the Ministry of Education and Science, social workers, psychologists, pedagogues, managers of social services in the community, managers of Centres for early childhood development, representatives of the Ministry of Labour

and Social policy, the Agency for Social Assistance, general practitioners (GPs), paediatricians, nurses, representatives of Regional Health Inspectorates, and local authorities. University lecturers, students and parents also took part in the study.

The data from the quantitative studies on the early years workforce, is processed via statistical distributions, while qualitative data is processed through content analysis and interpreted with a view to the key factors defining the professionalization of the workforce: initial training, continuous professional development and working conditions in the three sectors and at all levels of the 'competent system' (individual, institution, intersectoral, national and international).

# MAIN RESULTS

## COMPETENCE PROFILES OF THE PROFESSIONALS IN THE THREE SECTORS

The International Step by Step Association (ISSA) recommends developing professional and training competence profiles, in order to make initial training and continuous professional development effective (Putcha, 2018). The competence profiles contain requirements on knowledge and skills, which professionals need to have (ibid). The topic of competence profiles is discussed in a number of studies, some of which (UNICEF, 2019) emphasize that it is more useful for these profiles to be more general and not tightly specialized, because, on one hand, this allows for a better adaptation to the concrete local needs and, on the other hand, these profiles enhance the possibility for participation and professional autonomy. It is also recommended for the competence profiles to be created together with practitioners, researchers and policymakers (Urban et al., 2011).

The data from the research on the early years workforce show that in the three main sectors in Bulgaria – healthcare, education and social work, there are different professional groups, which work with and support children at an early age and their families. Professional competence

in the three sectors is defined in different ways. It is present mostly in regulatory documents, describing knowledge, skills, and relationships, needed to take a certain job position. The competence profile of the professionals, working in the educational sector, includes knowledge, skills and approaches, related to early childhood learning, educational achievements, pedagogical interactions with the children and educational work (Regulation № 15, 2019). General values such as child participation approach, cooperation with parents, development of the child's personal potential, multicultural approach, and inclusive education, are incorporated in the professional competence profile of the teacher. The competence profile of the professionals in the health sector includes knowledge and skills for meeting children's health needs (Regulation № 7, 2016). None of these sectors, however, is focused on early childhood development, rather it seems that the three sectors include separate early childhood development components.

The only sector, in which the competence profiles of the professionals are not regulated, is the social sector.

# ACADEMIC QUALIFICATIONS OF THE PROFESSIONALS WORKING WITH CHILDREN AT AN EARLY AGE

## Educational sector

Data from the Organization for Economic Cooperation and development (OECD, 2018) shows that a higher educational degree (Bachelor/Master) leads to more stimulating interactions between ECEC professionals and children. An alignment between the professional competence profile (what the institutions are expecting from a practitioner) and the training competence profile (the competences that are taught in the initial training) ensures a reciprocal relationship between theory and practice in the training institution, as well as in the childcare facility. This balance between theory and practice supports the professionals to develop a critical reflection on their own practice and that of their colleagues, which researchers define as a key competence to work in the early childhood sector (Urban et al., 2011).

The data from the early years workforce research shows that 77,6% of the professionals in pre-school education in Bulgaria have a master's degree. Higher education for professionals in this system is oriented towards developing pedagogical and didactical knowledge and competences that stimulate children's early learning and development. The curriculums are oriented towards children from a broad age group, without a focus on preschool age. The participants in the focus group discussions of the research have debated the insufficient

knowledge and skills, related to the work with children with special needs, diagnosing these children, working in a group, and also working with families, they received in the initial university training. The relationship between theory and practice is established through work experience (internships) in kindergartens and schools that have contracts with universities. The data from the research shows that in spite of the practical training in the course of the initial university education, which is relatively well balanced with theory, the practical preparation of the future teachers does not seem to lead to the development of the necessary competences for working with children and families in practice.

## Social services sector

UNICEF's strategic framework for strengthening the workforce in the social services, oriented towards child protection, determines the main guidelines for development and support for the workforce in the social sector (UNICEF, 2019). The guidelines concern many professions, related to providing social services. One of them is the social worker profession. The development of the workforce requires: establishment of international cooperation in training of the workforce; alignment of training of the workforce with the national standards and priorities; integrating fieldwork with knowledge of the local needs in the training of the workforce; possibilities for additional training and continuous professional development. The support for the workforce requires: to improve policies for attracting and keeping social workers; to support social services by creating associations and councils; to invest in supervisions of the quality of work of the professionals in the field; to encourage career development and growth; to promote

public trust in the profession of the social worker (ibid).

In the last decade, the practice of involving users of the services in the training of social workers has become more popular and developed in several European countries. Scientific research in different countries shows that the systematic involvement of users in the training of social workers is a successful strategy for balancing theory and practice (Driessens et al., 2016).

Professionals in the social sector in Bulgaria have higher education, with 95% of them holding bachelor's or master's degree in a wide range of programmes such as psychology, speech therapy, social work. The initial training in social work provides a fundamental preparation, the development of competences in the field of various social problems for people of different ages, as well as in-depth theoretical knowledge in different scientific areas. University training provides competences for working with children and focuses on child development, without a special focus on early childhood. Internships are organized in social services, including services that work with children and families, but there is no focus on children at an early age. The participants in the focus groups and interviews concluded that the extent of the internship has been increasing in recent years, however it lacks a focus on early-age children and their families. As a result, professionals don't feel well prepared for practical fieldwork after finishing higher education.

## Healthcare sector

On the occasion of the publication of the Framework for Nurturing care of WHO, UNICEF and the World Bank, the European Academy of Paediatrics<sup>6</sup> made recommendations for the education of

paediatricians with the aim of supporting the early childhood development (European Academy of Paediatrics, 2018). Paediatricians' education should include clinical paediatric examination for the new-born, including premature babies, growth, and development, feeding, social factors, protection, prevention of infectious diseases and the identification and treatment of childhood diseases. In addition, the initial training should include the development of competences for work with vulnerable groups of children, as well for cooperation with professionals from other sectors (ibid.).

The European Academy of Paediatrics emphasizes that the training of future paediatricians is very important, and it should include more than skills and knowledge related to medical paediatric expertise. Paediatricians should be able to work together with other professionals such as teachers, social workers, etc. In addition, due to the fact that other professionals such as general practitioners also take care of children, an integrated and multidisciplinary approach is necessary, in order to improve the health and well-being of young children across Europe.

The data from the early years workforce research shows that university training in general medicine and paediatrics is highly insufficient to meet the needs of children at an early age. The competences that are taught are mostly focused on the medical aspects; other competences addressing the communicative and psychological needs of children and families, child participation and development, are less well developed. Therefore, the initial training has to focus

<sup>6</sup> The European Academy in paediatrics is the paediatric division of the EU for medical specialists. See more information at: <https://www.eapaediatrics.eu/about/>



more on topics like working with parents, child participation and the creation of a rich environment for child development. According to the participants in the focus groups and the interviews, the medical preparation has a good enough balance between theory and practice, but the training is limited to paediatric expertise. The specialisation in paediatrics is focused on medical care and does not include additional competences linked to communication, teamwork, leadership and ethical issues.

# CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)

## Educational sector

Scientific evidence points to the great importance of continuous professional development, which is as important as initial education (European Commission, 2014). A systematic review of scientific publications in 28 European countries made it possible to draw conclusions as to what are critical success factors in determining a positive impact of CPD programmes on the improvement of pedagogical practices and hence on the quality of ECEC settings. First, CPD provision must be embedded in a coherent pedagogical framework or curriculum that builds upon research and addresses local needs. Secondly, CPD initiatives should be grounded in an active involvement of practitioners in the transformative process for the improvement of educational practices within ECEC settings. Third, CPD needs to be focused on practitioners' learning in practice, in dialogue with colleagues and parents and, in order to maximise the effectiveness of CPD practice, a mentor or coach should be available during ECEC staff childfree hours (Peeters et al, 2015; Peleman et al., 2018).

The data from our research in Bulgaria shows that the goals and expected results from the work of professionals in the educational sector are related mostly to children's learning, their development and preparation for starting school. These goals determine the theoretical and practical preparation of the practitioners, they are the framework for organizing pedagogical situations, for separate predefined areas of knowledge, for meeting the needs for development and early learning. Activities such as communication with and

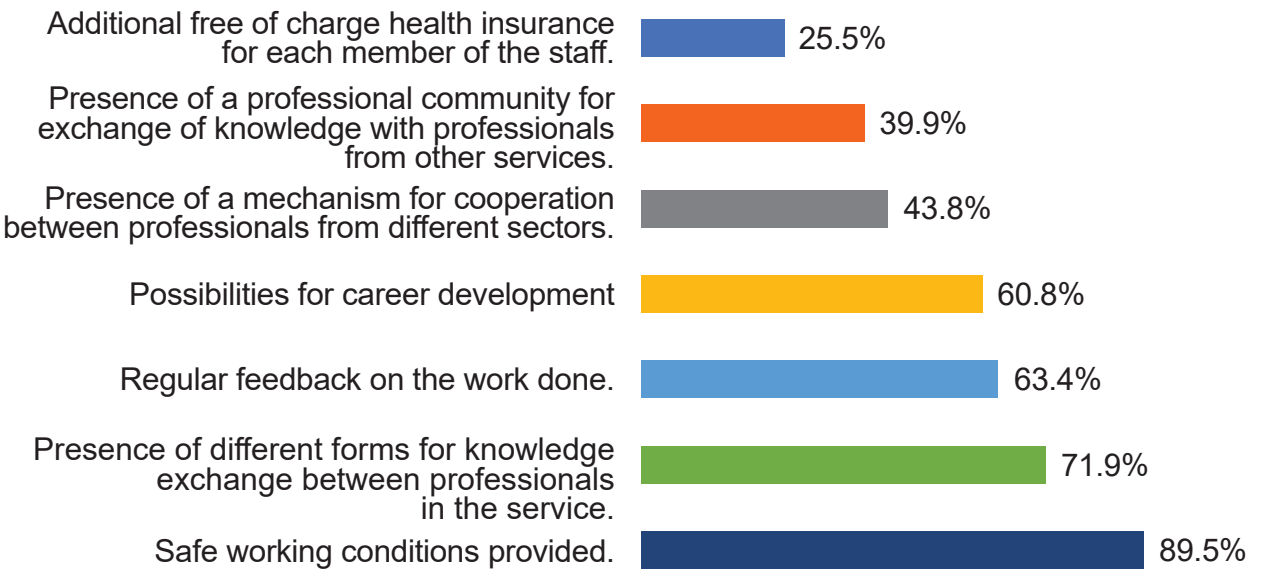
support for families, work with vulnerable groups, work with children with special educational needs, get much less attention and therefore present serious challenges due to insufficient knowledge and skills as well as due to the organization of the work (Graph 1).

One of the challenges in relation to CPD in the educational sector is lack of induction training for newly recruited staff. Sixty-one percent of professionals share that they have not taken part in such trainings. Furthermore, the existing CPD framework seems complicated, oriented more towards quantity and variety of possibilities, than responding to the practical needs of professionals and involving them. Only 22% of respondents declare that individual and group supervision, as well as mentorship are used in their facilities as CPD. The creation and development of a community for innovations, observation and self-reflection seems to be in the early stages of implementation in the system of preschool education (Graph 2).

Graph 1: Needs for training



Graph 2: Working conditions and CPD in the educational sector



## Social sector

UNICEF's standards for parental support programmes suggest various good practices (UNICEF, 2017). Some of the standards relate specifically to the social service workforce, which provides programmes for parents. These standards prescribe high quality training of the workforce, knowledge about the respective programmes and about the scientific research on early childhood development (ECD), as well as the need for supervision. It is recommended that the workforce should have access to professional support and development through mentoring, in order to provide high quality services (ibid).

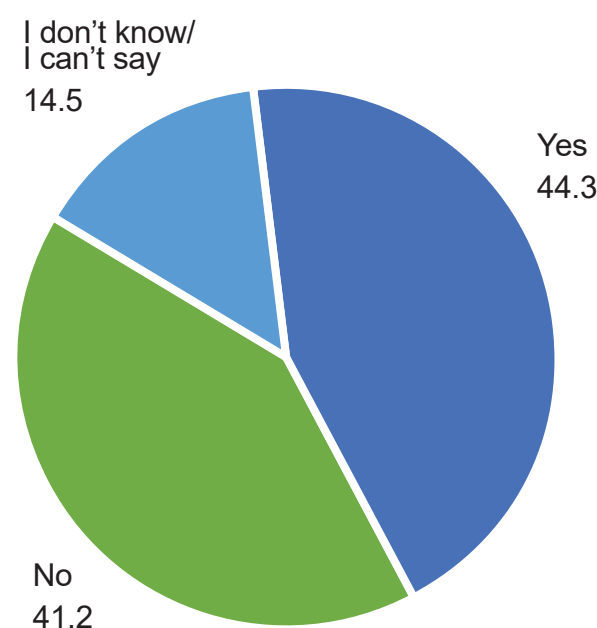
The data from the early years workforce research in Bulgaria shows that the goals and expected results from professionals in the social sector are related mostly to the reduction of risk factors for children and families, support for improving the social workers' capacity to deal with problematic situations, and support for social inclusion.

There are no social services, oriented exclusively towards support for children at an early age and their families. This task is discussed as a basis for the development of services of an integrated nature. In order to realize activities for needs assessment, planning and support, social workers are prepared theoretically and in practice. Among the topics which are indicated as challenging for them are support for ECD, work with specific groups of clients, and work on cases of violence and aggressive behaviour.

The system for continuous professional development in the social sector does not have a common framework, developed with the active participation of the professional community. According to 40% of respondents in the survey, there are no

induction trainings, while 41% think that advanced and continuous professional training is lacking and only 11% say that there is a system for mentorship and support when they start work.

Graph 3: Availability of advanced training in the social sector



The main challenges in professional development in the social sector are a lack of a common framework for upgrading knowledge and for the development of a community for innovations, observations and self-reflection.

## Healthcare sector

In most European countries, continuous medical education is obligatory for physicians and other medical specialists. According to an EU study on medical specialists<sup>7</sup>, in 2018 out of 31 European countries, in 14 including Bulgaria, continuous medical education is

not obligatory (CME-CPD, 2019). In Bulgaria physicians can choose whether or not to undertake continuous medical education (after their university education). They can prove their qualification with a certificate, issued by the Union of Bulgarian Physicians (Healthcare Act, 2005).

Our research among professionals from the health sector shows that the goals and expected results of their work are related mostly to children's health, diagnosing diseases and treatment of different health issues. These goals lead to a professional competence profile with a focus on meeting health needs, and professionals receive a good theoretical and practical preparation for this. The tasks of the physicians for prevention, communication, support for families and healthy lifestyle, although present in the professional competence profile, are overlooked due to the deficit of knowledge as well as due to the organization of their work.

The professionals who participated in the early years workforce research in Bulgaria express their difficulties in taking part in different forms of continuous medical education. Participation depends on their personal initiative, time, and resources. Continuous medical education has not been developed as a coherent framework, containing different possibilities like participation in forums, congresses and trainings.

<sup>7</sup> The European union of medical specialists (EUMS) is the oldest organization of medical specialists in the EU, founded in 1958. The Bulgarian union of medical specialist is a member of EUMS since 2007.

## SUPPORTING WORK ENVIRONMENT AND LEADERSHIP

The specialists and other practitioners, working with young children and their families, need childfree hours time, (Peeters et al, 2015) in order to reflect on practice and develop inspiring new pedagogical practices to be able to provide support for children and parents (European Commission, 2014). The most important working conditions, which influence the quality of ECEC are the adult/child ratio, the size of the group and salaries of the staff (OECD, 2012). Due to the complex interaction between different factors, the researchers cannot make definitive conclusions on the optimal ratio of number of staff to number of children and regards the size of the groups. They suggest that this ratio should be determined depending on the local conditions, qualification of the practitioners and good practices (European Commission, 2014).

When it comes to remuneration of staff, international research shows the need for measures to overcome the existing discrepancies in pay and professional preparation of teachers and staff taking care of children. In a number of countries, the staff which takes care of children is underpaid and has limited possibilities for professional development (Bennett, 2006).

Creation of favourable work conditions depends to a high degree on the management of ECEC services (European Commission, 2014). The leaders of the educational institutions are those who develop a shared common framework, provide different possibilities for continuous professional development, they organize possibilities for exchanging good practices



and provide pedagogical support for the staff, working with children in a vulnerable situation (Urban, et al., 2011). Effective leadership requires continuous professional development of the leaders, as well as policies and regulations, which would provide opportunities for the leaders to effectively manage ECEC services (OECD, 2019).

The data from the early years workforce research in Bulgaria shows diverse patterns of work conditions in the three sectors. In the educational sector, work conditions have been improved in recent years, when it comes to salaries, safe working conditions, provision of materials and resources. At the same time, however, the number of children in a kindergarten classroom is very high and the staff-child ratio is 1:27. It is necessary to point out that two teachers work with each group, but not at the same time. The issue of the workload of the teachers and the inclusion of children with special educational needs is experienced by the practitioners as a challenge.

The situation in the social sector is quite different. Work conditions have not been improved, the staff is severely underpaid, the status of the profession continues to be low, thus it is not an attractive occupation, which leads to a high turnover. The number of cases of children at an early age is an average of 14 per month per social worker. The facilities and available resources vary according to the type of service and service provider.

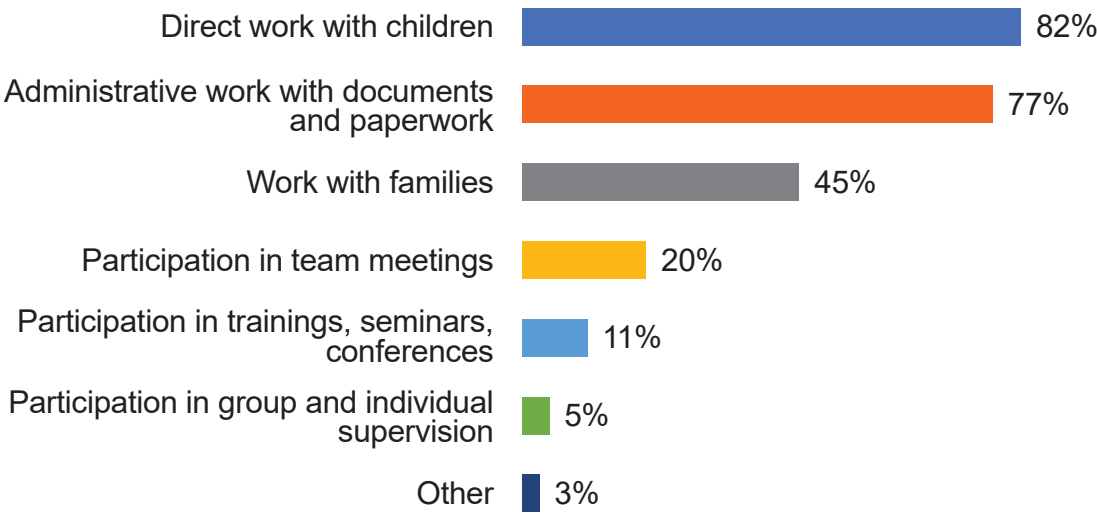
In the health sector, the working conditions are different depending on the different categories of professionals. The salaries depend on the type of practice and workplace of the medical specialists (hospital, private doctor's office, etc.) There are efforts to improve working conditions

for medical nurses in kindergartens and crèches, but they are still in the early stages and related mostly to the resources of municipalities. The paediatricians work with an average of 15 children per day, while nurses in crèches work with an average of 5 to 8 children.

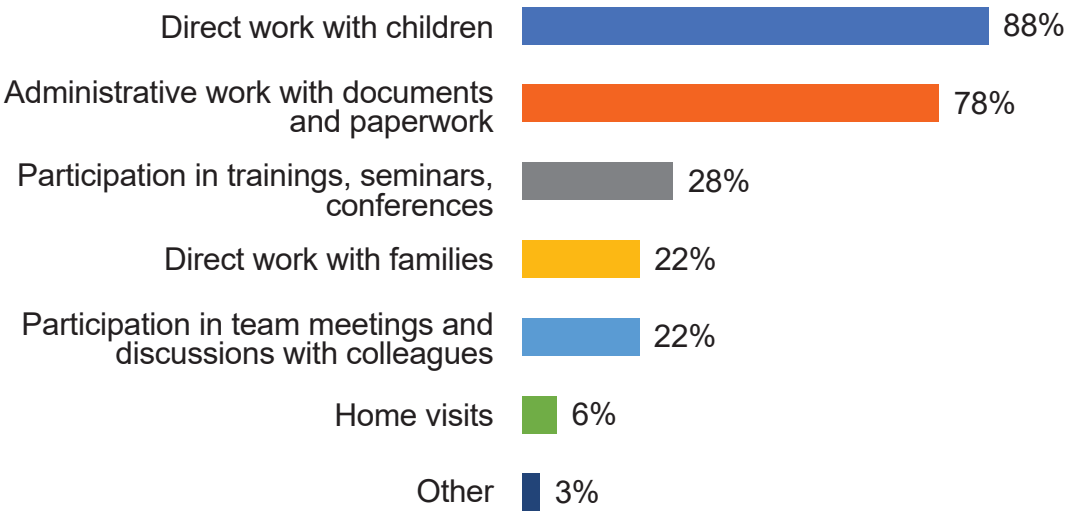
The data on the main activities of the professionals in the three sectors shows that apart from working with children, a very big share is taken up by administrative work and paperwork (78,7% in the social sector, 77% in the system of preschool education, 78% for doctors and paediatricians) and a significantly smaller share goes for working with families and the community, as well as for activities related to professional development (Graphs 4, 5 6)

The leadership capacity and possibilities provided for development are challenging in the educational and social sector, while in healthcare this topic has not been researched in depth due to the focus on the individual practices. The managers of services have mostly administrative functions at the expense of skills for forming and developing teams. There is no developed system for increasing the capacity of managers in any of the three sectors. This task is not a function of the system, but an individual responsibility.

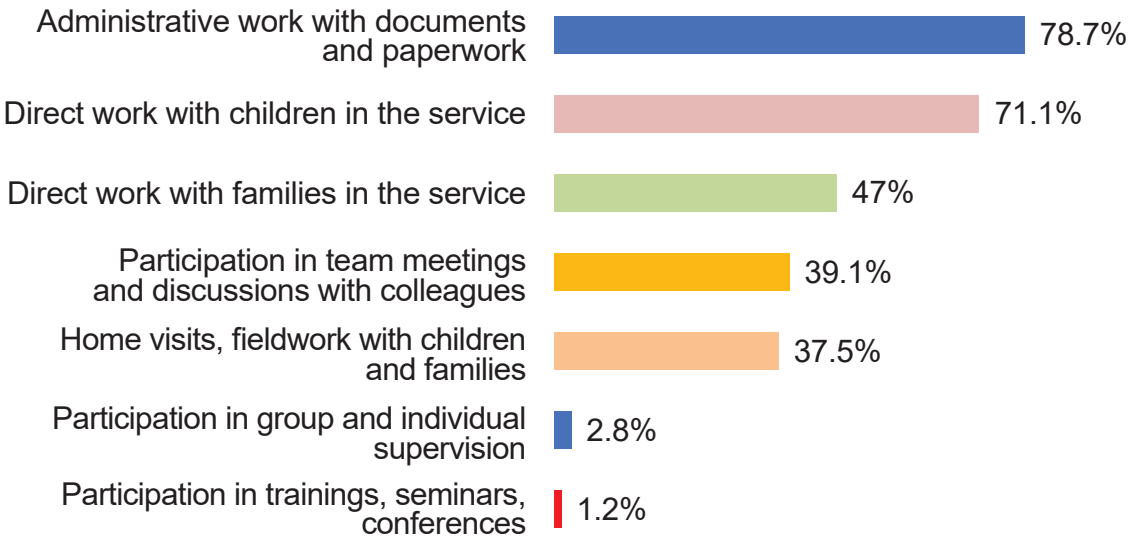
Graph 4: Activities during working hours for professionals in the system of pre-school education



Graph 5: Activities during working hours for doctors and paediatricians



Graph 6: Activities during working hours for professionals in the social sector



## PROFESSIONAL LEARNING COMMUNITIES AND INTERSECTORAL COMMUNICATION

Scientific literature and European practices in the field of ECEC study the influence of the so-called Professional Learning Communities (PLC) on capacity building for professionals in this sphere. The analysis of the advisory network for the European commission NESET, highlights five criteria, which determine the PLCs (Sharmahd et al., 2017):

- Practitioners frequently engage in 'reflective and in-depth dialogues' with colleagues about educational matters based on daily practice.
- Practitioners move towards a 'deprivatization of practices', by observing each other's practice and giving feedback, building links with people living in the neighbourhood around the childcare facility, dialogue with parents and intersectoral interaction.
- There is investment in 'collective responsibility', as school (or social work or health work) improvement is not considered any-more as solely the responsibility of the director or of a single practitioner.
- There is a focus on reaching shared values and vision, based on children rights and respect for diversity.
- These four characteristics need a fifth condition to be realized. This condition is the presence of 'leadership' as a key factor in transforming the culture of the institution.

Our research in Bulgaria shows that in the educational and social sectors there are opportunities for a teamwork approach (according to 86% of the participants in the educational sector and 83% of the participants in the social sector). If this leads towards a kind of professional learning community depends on the extent to which the five conditions above are met in the specific services. The competences to reflect on one's own practice are also present in the educational sector (80%) and the social sector (75%) and indicated far less by paediatricians and GPs (29%). The reflective practices, however, depend on the organization of work, the model of communication, leadership, and the specific service provider. Whether the organization of work in the education and health sectors favours such conditions is a debatable issue, while in the social sector it is mostly connected with case management.

In 2020, Bulgaria has no active national strategic policies for child wellbeing and ECD.<sup>8</sup> The sectoral nature of policies and services in Bulgaria presupposes an intersectoral cooperation, which would ensure the focus of the efforts and support for ECD. The study has identified a presence of formal collaboration between the three sectors at the level of national policy. At the local level, coordination depends on the desire for cooperation and there

<sup>8</sup> The National strategy for the child, adopted by a Decision of the National Assembly of the Republic of Bulgaria in January 2008 was in force until the end of 2018. In 2019, the work on the new National strategy for the child 2019-2030 has been stopped and a new strategy has not been adopted. In 2019, the work on a Strategy for early childhood development of the working group at the Ministry of Education and Science has also been stopped.

are no legalized formal mechanisms for its implementation, apart from specific policies for prevention of violence, deinstitutionalization, etc. At the micro

level of a case, communication between the sectors depends on the desire and professionalism of the people working there, and not on an active model of cooperation.





# RECOMMENDATIONS

## Training and Professional Competence Profile

Although competence profiles for the educational and health sector exist, our study shows that they are too narrowly focused on learning in the educational sector and on medical issues in the health sector. A mixed group of early childhood experts, researchers, policy makers and practitioners needs to be brought together to define the broad competences that practitioners need to have (Professional Competences Profile) to work in each of the three sectors. Another group of university lecturers, practitioners and policymakers need to develop a Training Competence Profile for the three sectors. The topics that have to be included for the three sectors are:

- knowledge, skills and approaches in the various aspects of child development from a holistic perspective (physical, cognitive, social, and emotional) and skills to create relationships with children, to observe and plan activities for the child's development, and to identify difficulties of the individual child;
- knowledge, skills and approaches for nurturing care (good health, nutrition, early learning, stimulating environment, safety and security for the children at early age) and strategies for supporting parents to provide nurturing care;
- knowledge, skills and approaches for applying different learning strategies for children according to their age and skills and for organizing an environment for learning and development according to the age of the children;

- knowledge, skills and approaches for communication with children and for their participation and skills for creating a stimulating environment and engagement of the children in various activities;
- knowledge, skills and approaches for assessing the influence of the family environment, the capacity of the family, and encouraging the participation of the family in the care for children;
- knowledge, skills and approaches for respect of the rights of the child, understanding the specific needs of children, applying individual approaches and creating an appropriate environment for learning and development of children with special educational needs and children from vulnerable groups.

## Continuous professional development

The system for continuous professional development in the three sectors should be improved. In the education and health sectors improvement should go along the lines of strengthening the connection between the needs of the workforce and the available training programmes, supervision and methodological support. In the social sector continuous professional development should be built as a system. The content of the professional support should upgrade the skills and knowledge related to professionals' current work tasks and be preceded by a needs analysis at the individual and system level.

The system for continuous professional development should be a part of an entire framework, developed with the active participation of and in a dialogue with professionals, the scientific community and families.

## Intersectoral communication

Possibilities should be provided for intersectoral communication in relation to policies and services for children at an early age, by using clear mechanisms for cooperation between professionals at the level of an individual case and at the policy level. This might be ensured by using an integrated system or integrated services, which would be connected with each other, exchange information and work on a common goal.

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