



**SMARTWORK**

**“TRABAJO VIVO”**

**THE WORKPLACE RESPONSE TO AIDS**

THE DOMINICAN REPUBLIC COMPONENT OF AN  
INTERNATIONAL HIV/AIDS WORKPLACE EDUCATION PROGRAM

FUNDED BY THE BUREAU OF INTERNATIONAL LABOR AFFAIRS,  
UNITED STATES DEPARTMENT OF LABOR

**PROJECT PLAN**

Academy for Educational Development  
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## LIST OF ACRONYMS

AcciónSIDA	Proyecto AcciónSIDA
AED	Academy for Educational Development
AIDS	Acquired Immune Deficiency Syndrome
AIDSCAP	AIDS Control and Prevention Program
AmCham	American Chamber of Commerce
BRTA/LRTA	Business and Labor Response to AIDS
CEPROSH	Centro de Promocion y Solidaridad Humana, Inc.
CNUS	Consejo Nacional de Unidad Sindical
COIN	Centro de Orientacion e Investigacion Integral, Inc.
CONASIDA	Consejo Nacional para el Estudio del SIDA
CONEP	Consejo Nacional de la Empresa Privada
COPARDOM	Confederacion Patronal
COPRESIDA	Consejo Presidencial del SIDA
DIGECITSS	Direccion General de Control de las Infecciones de Transmisi3n Sexual y Sida
FHI	Family Health International
FTZ	Free Trade Zone
GODR	Government of Dominican Republic
HIV	Human Immunodeficiency Virus
IDSS	Instituto Dominicano de Seguros Sociales
IEC	Information, Education, Communication
INFOTEP	Instituto Nacional de Formacion Tecnico Profesional
ILO	International Labor Organization
MOL	Ministry of Labor
NGO	Nongovernmental Organization
PAHO	Pan American Health Office
PROCETS	Programa Control de Infecciones de Transmision Sexual y SIDA
SECTUR	Secretaria de Estado de Turismo
SESPAS	Secretaria de Estado de Salud y Asistencia Social
SET	Secretaria de Estado de Trabajo
SIDA	Sindrome de Inmunodeficiencia Adquirida
STD	Sexually Transmitted Diseases

STI	Sexually Transmitted Infections
TAB	Tripartite Advisory Board
UNAIDS	United Nations AIDS Program
USAID	United States Agency for International Development
USDOL	United States Department of Labor
WHO	World Health Organization

## PROBLEM STATEMENT

As of July 2000, the Dominican Republic had registered a total of 10,738 cases of HIV infections and 5,440 accumulated AIDS cases, of which 72% corresponded to sexual transmission (mostly heterosexual). While registered cases appear relatively low, UNAIDS estimated as of 1999 the country's prevalence rate for HIV infection to be 2.2% in the adult population, translating into approximately 130,000 people infected. The national surveillance system is weak and under-reporting of AIDS cases is believed to be significant. Of all AIDS cases reported until 1998 almost 90% fell within the ages of 15 and 44.<sup>1</sup> This is of great concern to economic growth and national development because the infected and affected are those that are the most economically active segment of the population. The National Statistics Office puts the 2000 total population at 8,553,744 while the Central Bank estimated the 2001 Economically Active Population to be 3,752,668.

Incidence of HIV/AIDS among workers is certain to have an adverse impact on output and productivity and cause significant loss of income and available labor. Both employers and workers face higher health and labor costs in terms of sick leave, absenteeism, medical insurance, replacement and training, death-related costs, and shortage of skilled labor as a result of HIV/AIDS. At the macroeconomic level, this impact is responsible for a reduction in savings rates and disposable income. In the long term, this leads to declining economic growth. It is therefore clear that the spread of HIV must be a priority not only to preserve lives but also to protect businesses and the economy.<sup>2</sup>

An associated social problem is the limited care and access to treatment for those living with HIV/AIDS. Despite recent gains in the involvement of NGOs in this area, "the less developed project intervention area to date has been the increased access to decentralized primary health care and the incorporation of AIDS and STD care into the public health system."<sup>3</sup>

The consequences of the epidemic are severe due to the unique features of the disease. Death due to complications of AIDS is often preceded by a long period of illness, high treatment costs, and high degrees of stigma and discrimination. The latter is particularly onerous in workplaces, as fellow workers often refuse to work alongside those known to be infected.

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<sup>1</sup> UNAIDS/PAHO/WHO, "Dominican Republic: Epidemiological Fact Sheet on HIV/AIDS and Sexually Transmitted Infections", 2000 Update (revised). However, DIGECITSS reports in "Situacion Actual del VIH/SIDA en la Republica Dominicana 1983-2001" that HIV infection cases between 1983 and March 2001 for the 14-44 age group amounted to 82.5%, while AIDS cases were 79.7%. See also UNAIDS, "AIDS Epidemic Update—December 2001", <http://www.unaids.org>

<sup>2</sup> For a thorough accounting of the economic impact of HIV/AIDS, see ILO Global Programme on HIV/AIDS and the World of Work's "The Economic Impact of HIV/AIDS: Employment and Labor Market Implications", Geneva, June 2001.

<sup>3</sup> TvT Associates, Inc., "Mid-term Evaluation: HIV/AIDS/STI Prevention and Care Project—USAID/Dominican Republic", January 2001, p.2.

## BACKGROUND

Dominican concern about HIV/AIDS dates back to 1983 when the first AIDS case was identified. In 1987, PROCETS, the National STD and AIDS Control Program, was created within the Ministry of Health (SESPAS, is its Spanish acronym). This was followed in 1993 by the passing of Law 55-93 that established a policy framework for addressing the epidemic. It was also during that year that the USAID's AIDSCAP Program began. This effort ran until 1997 and worked through improved HIV surveillance, behavior change communication, the improvement of sexually transmitted infection diagnosis and treatment, and by increasing the availability and accessibility of condoms. Some of these interventions were done in the workplace, but no systematic coverage was attempted.<sup>4</sup>

In 1998, DIGECITSS—the National HIV/AIDS Directorate—was created to substitute PROCETS and to focus on a national coordination and normative role for nationwide HIV/AIDS prevention and control. Subsequent to that, in August 2000, a National Council for the Study of AIDS (CONASIDA) was created to study the situation and produce recommendations to confront the epidemic. In November 1999, CONASIDA produced the STI/VIH/SIDA *National Strategic Plan* (NSP). Further evidence of political willingness and decision on the part of the Government to prioritize the fight against AIDS was the creation in September 2000 of the Presidential Council on AIDS, COPRESIDA, replacing CONASIDA as a permanent body.

COPRESIDA's mission is to target interventions mainly through the ministries of education, tourism, higher education, and the armed forces and through the national police. COPRESIDA had a 2001 budget allocation of USD 7.8 million to tend to primary prevention, vertical transmission, post-exposition prophylaxes, care for AIDS patients, epidemiological research, institutional strengthening and legal support. In addition, COPRESIDA is responsible for managing additional funds to support the implementation of the NSP. Prominent among these is a recently approved USD 25 million loan from the World Bank to fight HIV/AIDS (carrying a counterpart contribution of USD 5 million from the GODR).

International cooperation is an important component of the Dominican effort against AIDS. USAID, UNAIDS, PAHO, and the European Union are the most active in this area. UNAIDS focuses on the prevention agenda, while PAHO provides direct technical assistance to DIGECITSS, and the European Union provides funding for mass communications and pilot community interventions. USAID is recognized as the major provider of services, with its AcciónSIDA project playing a prominent role (AcciónSIDA is implemented by AED). The USAID strategic areas of intervention are:

1. Increasing knowledge, risk perception, and health seeking behavior among the most vulnerable groups;
2. Promoting the expansion of STI/HIV/AIDS information and services to ensure universal access of couples and individuals;
3. Encouraging community, private, and GODR collaboration and involvement, improving availability and use of data to monitor STI/HIV/AIDS prevalence and trends;
4. Advocating a policy environment which continues to allocate increased resources in the national budget; and

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<sup>4</sup> Family Health International, "Final Report for the AIDSCAP Program in the Dominican Republic—October 1993 to April 1997", <http://www.fhi.org/en/aids/aidscap/aidspubs/special/countryprog/DomRep/domexsum.html>

5. Supporting community-based programs directed for the care and support of people infected and affected by HIV/AIDS.

The populations targeted by USAID are youth, women, STI patients, the general population, people living with and affected by HIV/AIDS, and those groups most likely to pass on the infection.

The NGO sector is a key partner in the Dominican response to AIDS. *Coalicion ONG-SIDA* is a group of 24 NGOs that are partially funded by USAID for HIV/AIDS activities. Among its members are COIN and CEPROSH, two NGOs who have done work in workplace prevention education, particularly among the hotel and FTZ sectors. COIN is engaged in workplace prevention activities through its “Trabajo y Salud” project –sponsored by AcciónSIDA— while CEPROSH is currently providing prevention education services to an important FTZ firm in the city of Santiago.

The USDOL project mission established, however, that workplace prevention is still relatively minimal in the Dominican Republic. There have been some previous efforts to engage employers in creating workplace-based HIV/AIDS prevention education, but they have been uncoordinated, *ad hoc*, and have not resulted in significant or sustained business or labor responses. Both labor and employer leaders admitted that they have given little attention to the problem, and the Ministry of Labor (SET, is its Spanish acronym) has not played any significant role. Even in those cases where employers have allowed prevention work to be done within their companies—most notably through the work done by COIN and CEPROSH—they have not provided financial support for these activities. Most employers require pre-employment HIV testing despite its banning by Law 55-93, and widespread discrimination and stigma accompanies those who have been infected. Attitudes are reportedly beginning to change, but most employers still consider the HIV/AIDS issue taboo. An encouraging development has been the inclusion of CONEP—the National Private Enterprise Council, the most important employer organization—on the COPRESIDA board membership.

By and large, the NSP does not specifically address workplace prevention. Though it includes a chapter on prevention activities, the strategic action areas are only tangentially involved with workplace prevention. The NSP’s priorities in this area include: (1) blood banks and laboratories, (2) IEC materials dissemination to change risk behavior, (3) condom use, (4) STI control, and (5) mother to child transmission.

## PROGRAM APPROACH AND STRATEGY

USDOL awarded the Academy for Educational Development a USD \$9 million cooperative agreement to implement an international HIV/AIDS workplace education program. The AED component of the US DOL program is entitled SMARTWork (Strategically Managing AIDS Responses Together), and is being implemented in six countries (Ukraine, Vietnam, Haiti, Dominican Republic, Nigeria and Zimbabwe).<sup>5</sup> The approach calls for working with government, labor, and employers, in a tripartite structure to implement and/or improve workplace HIV/AIDS prevention and education, and reduce stigma and discrimination through policy development and implementation of workplace programs. The program seeks to encourage government, employers, and unions to implement programs based on social responsibility, workers rights, and economic efficiency. “Trabajo Vivo” is the name given to the Dominican Republic component of SMARTWork.

As evidenced in the Project Matrix, the overall aim of “Trabajo Vivo” is to catalyze a sustainable workplace-focused response to HIV/AIDS that will serve to increase the number of operational, comprehensive, effective workplace programs to reduce the spread of HIV/AIDS, and eliminate stigma and discrimination towards those who are infected with and/or affected by HIV/AIDS.

In general, Trabajo Vivo will focus on a strategy that will challenge employers, labor, and government leaders to develop their awareness of the existing and growing danger of HIV/AIDS and to act to address it in the workplace. This will be accomplished through a campaign of presentations and workshops among employer and labor groups, complemented by an effort to increase understanding of the existing situation, and the development of support materials designed to induce a change in risk behavior. Follow-on technical assistance will also be offered—such as peer education training-of-trainers and policy dialogue and advocacy training—to ensure that comprehensive prevention programs are established. The provision of technical assistance is to be rendered by a number of organizations concerned with workplace education, but the bulk of it is expected to be provided by INFOTEP and the *Coalicion* members. This will entail not only helping employers and workers to set up the programs but also to monitor their progress and promote their sustainability.

Trabajo Vivo’s general development goal is to reduce the rate of HIV infections as a result of workplace education and prevention programs and to ensure workplace protection and guaranteed human rights of individuals affected and infected by HIV/AIDS. This general goal in turn translates into four separate operational goals with corresponding objectives as follows:

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<sup>5</sup> While tailored to the specific needs and circumstances of the countries and their business sectors, the Program has the following fundamental components: (1) preparation of company profiles that are representative of target sectors, serve as models for workplace intervention, and/or highlight the opportunities for organizations to establish HIV/AIDS programs and policies; (2) provision of materials that can guide and assist in the creation of workplace HIV/AIDS policies and programs; (3) working collaboratively with (and training as needed) business, labor, and other partners to establish or improve HIV/AIDS-related workplace programs and policies, principally through presentations and workshops; (4) working collaboratively with business, labor, and other partners so that they (with the project as well as necessary) will offer follow-on assistance to organizations creating workplace programs and policies; and (5) nurturing the creation of sustainable, in-country networks that can assist and encourage workplace-based HIV/AIDS programs.

**PROJECT GOAL 1: INCREASE UNDERSTANDING OF THE EXISTING WORKPLACE HIV/AIDS PREVENTION EFFORTS AND POLICIES IN KEY SECTORS OF THE ECONOMY AND PREPARE COUNTRY NEEDS ASSESSMENT.**<sup>6</sup>

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*OBJECTIVE 1.1: Profile existing organizational practices (encompassing policies and programs) in a sample of major workplaces to be targeted by the project.*

These profiles will document the current impact of HIV/AIDS upon the workplace, current practices within the workplace related to HIV/AIDS, and outline the opportunities to implement, strengthen, or continue programs and policies related to HIV prevention and education. Though the tourism and FTZ sectors are anticipated to be the primary targets of this project, the profiles will also be done for unions, employers and other specific sectors (e.g., construction and agro-industrial/agriculture) to assess the feasibility of their inclusion in the project. On the basis of these profiles, presentations and workshops will be tailored to help companies and unions establish HIV/AIDS policies and prevention programs.

The profiles will be developed following the guidelines and using the research instruments contained in SMARTWork's Needs Assessment Guide after having made the necessary adaptations. They will be appended to a general Needs Assessment Report from which a Country Brief will be extracted for the purposes of supporting program implementation and to share with the public as a means of providing background information.

*OBJECTIVE 1.2: Review country-specific studies on HIV/AIDS policies and practices that may affect workplace-related programming.*

The project will conduct a thorough review of the literature on worker knowledge and prevention practices in the country. This will include AccionSIDA and AIDSCAP literature reviews. A written review containing the essential findings will be incorporated into the Needs Assessment Report and the Country Brief.

*OBJECTIVE 1.3: Identify knowledge and attitudes of workers and managers regarding HIV/AIDS and workplace-based policies and programming.*

This will be accomplished through focus groups with workers in chosen companies and through surveys of both employers and workers in the targeted companies. The latter will determine employers' and workers' baseline knowledge, attitudes, perceptions, and behaviors to allow for an eventual evaluation of the impact of interventions. These tasks will produce an updated base assessment that, together with the company profiles, should enrich the prevention program design process.

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<sup>6</sup> The fulfillment of this goal will result in three specific products: (1) the 2-5-page company profiles; (2) the needs assessment report (which includes the profiles as appendices); and (3) a country brief—a shorter, publicly sharable document that summarizes the findings of the full assessment report.

**GOAL 2: MOBILIZATION OF NATIONAL LEVEL TRIPARTITE EFFORT TO ESTABLISH AND EXPAND HIV/AIDS PROGRAMS AND POLICIES TO REDUCE STIGMA AND DISCRIMINATION IN THE WORKPLACE.<sup>7</sup>**

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*OBJECTIVE 2.1: Create an HIV/AIDS workplace Tripartite Advisory Board (TAB) comprised of major employer, labor, and government entities that is linked to the national coordinating mechanisms for HIV/AIDS programming.*

Working in close coordination with COPRESIDA and under the umbrella sponsorship of CNUS and COPARDOM, Trabajo Vivo will strive to achieve the adoption of a Tripartite Collaborative Agreement among the major labor, employer and other relevant organizations. Following this, Trabajo Vivo will work with COPRESIDA to develop a Tripartite Advisory Board that should be made up of the signatories of the Agreement, though preferably chaired by the Ministry of Labor. It is this Board that would establish policy on matters pertaining to workplace prevention and should also serve as a consultative body to Trabajo Vivo.

*OBJECTIVE 2.2: Encourage development of -and adherence to—a national workplace policy within the framework of the HIV/AIDS national strategic plan.*

A major first task of COPRESIDA and Trabajo Vivo will be the development of a national HIV/AIDS policy framework (Trabajo Vivo will provide technical assistance to help the COPRESIDA and its partners to pursue this objective, but will not have direct responsibility for its achievement). The policy framework is to be complemented by the widespread distribution of Law 55-93 on AIDS and the development of incentives to support it.

*OBJECTIVE 2.3: Strengthen the capacity of government, labor, employers, and NGOs at the national level to support workplace HIV/AIDS programs and policies, and foster linkages with other relevant HIV/AIDS programs.*

Under the leadership of COPRESIDA and with the support of Trabajo Vivo, the Tripartite Collaborative Agreement will require the elaboration of work plans for most of the signatory organizations (SESPAS, IDSS, SET, COPARDOM, CNUS, INFOTEP, COALITION). Through the TAB mechanisms, Trabajo Vivo shall seek quarterly meetings in order to review workplan progress. Trabajo Vivo will also make an effort to ensure that the highest officials in the participating organizations – as well as in all existing employer and labor organizations – are properly sensitized to the HIV/AIDS problem.

A major outcome of these institutional work plans is the creation of a cadre of trainers (particularly within INFOTEP, the *Coalicion ONG-SIDA*, and other organizations) to provide advisory and training services to companies, labor organizations, and even public health sector agencies. Trabajo Vivo will assist these organizations in marketing their services, particularly through the implementation of presentations and workshops.

The other major effort to strengthen capacity is the development of mechanisms through which employer and labor organizations will seek financial cost sharing from COPRESIDA.

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<sup>7</sup> Conventionally, tripartism in the world of work is interpreted to include government, labor and employers. However, given the recognition that the fight against HIV/AIDS requires collaboration from all sectors and actors in society, tripartism here should be interpreted to mean multisectoral.

*OBJECTIVE 2.4 Design and implement an advocacy and recognition campaign to promote workplace HIV/AIDS policies and programs.*

In close collaboration with COPRESIDA and through the TAB, Trabajo Vivo will seek to establish an annual workplace award to an enterprise and/or union that has responded with a model workplace policy and program. The recipients of the award will be honored at a high-profile national event.

Likewise Trabajo Vivo will, in collaboration with COPRESIDA and the TAB, ensure that certificates are granted to participants upon successful completion of the workshops. CONEP, COPARDOM and CNUS will be asked to validate these certificates.

**GOAL 3: INCREASE THE NUMBER OF ENTERPRISES (INCLUDING BUSINESS, LABOR UNIONS, AND MIISTRY OF LABOR WORKPLACES) THAT HAVE EFFECTIVE WORKPLACE HIV/AIDS PREVENTION AND SUPPORT PROGRAMS AND POLICIES THAT SERVE TO REDUCE STIGMA AND DISCRIMINATION.**

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*OBJECTIVE 3.1: Adapt and translate project materials to country context.*

Using the Needs Assessment results and SMARTWork workplace materials, the presentations and workshops are to be contextualized to fit the needs of Dominican workplaces. This will require a review of existing presentations and workshops and the adaptation will ensure that follow-up, monitoring and evaluation provisions are incorporated.

*OBJECTIVE 3.2: Initiate and engage employers in developing workplace-based prevention education programs and policies through presentations and workshops.*

At least 30 presentations will be made to business groups, company boards and labor groups, representing a minimum of 500 organizations directly and indirectly, with a total of over 100,000 employees. In addition, at least 12 (but ideally more than 20) workshops will be held for over a total of 250 employer/labor organizations to explore the impact of HIV/AIDS on employers, and to help managers and labor representatives to develop effective policies and prevention programs for the workplace. In general, the effort is to be concentrated on large workplaces with over 200 employees, as this will serve to leverage the reach and impact of the project. Presentations will be free of charge, but workshop costs are expected to be shared by the business managers, if possible.

The oral presentations will highlight the critical business, human rights, and social responsibility reasons for effectively responding to AIDS. The presentations will utilize data collected in the needs assessments and profiles. The key objective for presentations is to engage labor and business leaders in recognizing the need and value of workplace HIV/AIDS prevention and education programs. After each presentation, the Country Coordinator will follow-up with stakeholders to determine the level of interest in developing a comprehensive HIV/AIDS prevention program and workplace policies for their respective companies. Participants will also receive documentation from Trabajo Vivo to stimulate their further exploration of the subject and to provide the required information for follow up.

The Tripartite Collaborative Agreement should facilitate access to company boardrooms and association board meetings for the presentations. If necessary, Trabajo Vivo will also seek to sign collaborative agreements with representative entities within key sectors. The aim is to use these agreements as a means to reach the business managers and labor leaders.

Workshops, unlike the oral presentations, will last two full days, and will provide an in-depth learning experience and analytical exercise for business managers and labor representatives. The process will focus on providing some of the under-lying principles and approaches for implementing workplace HIV/AIDS prevention programs and policies.

Workshops will be held on approximately a quarterly basis, though exact timing will reflect needs as expressed in presentations or by employers. Pre- and post-workshop feedback assessments will be conducted to evaluate workshops and outcomes. Following the workshop, interested participants will be encouraged to continue meeting to share their lessons of experience and to assist each other in implementing workplace programs and policies. The project will help facilitate their follow-up meetings, and will provide technical assistance, as appropriate and available. The project will track both companies and unions installing comprehensive programs as well as those that opt for programs that are less than comprehensive. It is likely that the resulting needs for technical assistance will include further TOT and peer education activities and cater to the special circumstances of the individual recipients.

*OBJECTIVE 3.3: Follow-up technical assistance (TA) provided by SMARTWork staff and partners to establish effective workplace HIV/AIDS prevention education programs and policies among employers.*

TA will target those employers and/or trade unions that have shown, in the workshops, a high potential for adopting workplace policies and programs. Trabajo Vivo's follow-up shall ensure that either these companies and/or unions receive the TA from the project or they receive it from one of the signatories of the Tripartite Collaborative Agreement. Trabajo Vivo will also encourage the creation of HIV/AIDS workplace committees and facilitate the post-workshop meetings of groups of employers and any other type of workshop participant. Technical assistance may include a wide range of relevant topics and will be planned based on individual needs of companies and unions. Assessment of technical assistance needs will, in part, be determined through the profiling of organizations conducted under Objective 1.1. Areas for which technical assistance may be provided, include, but are not limited to: development and distribution of IEC materials, implementation of VCT programs, social marketing, policy development, and support for PLWH. As individualized plans of technical assistance are developed, they will be documented and included or amended to the annual work plan and country program plan.

*OBJECTIVE 3.4: Targeted employers adopt effective workplace HIV/AIDS prevention education programs and policies.*

From workshop participants, 50 of the larger employers and/or unions will be selected to be offered follow-on TA. The project will ensure that at least 20 of these employers and/or unions (and preferably more than 30) adopt appropriate HIV/AIDS policies that help to reduce stigma and discrimination. A total of 15 major employers and/or unions (preferably more than 30) will be expected to establish prevention and support programs. In both these cases the Workplace Committees are expected to play a role to ensure sustainability.

*OBJECTIVE 3.5: Increased knowledge about HIV/AIDS, decreased risk behavior, and reduction in stigma and discrimination among workers and managers of organizations targeted by the project.*

Much of the achievement of this objective will be accomplished through the activities conducted under Objectives 3.2, 3.3 and 3.4. The outcome of Objective 3.5 will be evaluated, in-part, through the use of KAPB and/or other evaluation instruments. In addition, baseline data gathered through the KAPB and/or other evaluation instruments will be utilized to help shape activities under Objective 3.2, 3.3, and 3.4.

**GOAL 4: DEVELOP AND/OR ADAPT) AND DISTRIBUTE INFORMATION, EDUCATION, AND COMMUNICATIONS (IEC) MATERIALS TO SUPPORT HIV/AIDS WORKPLACE PREVENTION EFFORTS, REDUCTION OF STIGMA AND DISCRIMINATION, AND BEHAVIOR CHANGE.**

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*OBJECTIVE 4.1: Disseminate workplace-related materials that would increase employer participation.*

Dissemination will be accomplished through various channels. First, the SMARTWork Manager's Guide and other relevant materials will be distributed to companies via workshops, on the web, and elsewhere. Trabajo Vivo is to ensure that the TAB partners are also familiar with the Guide and, to the extent possible, use it extensively in the course of their fieldwork.

*OBJECTIVE 4.2: In coordination with key government, business, labor, and NGO partners, encourage and achieve widespread utilization of relevant IEC materials by workers.*

Brochures, leaflets, pamphlets, and posters will be developed to carry effective prevention messages to workers. Where effective materials already exist, such as the ILO's Code of Practice and IEC materials developed and available through resources like the BRTA/LRTA clearing house and the National Prevention Information Network (NPIN), such resources will be utilized to support programs while reducing the likelihood of duplication of efforts. The specific channels to be used for dissemination and the ways in which this will be done shall be determined by the institutional work plans from the Tripartite Collaborative Agreement.

## INSTITUTIONAL AND MANAGEMENT FRAMEWORK

The Program will be implemented by AED's regional office for the Dominican Republic and Haiti with the guidance and direction of AED/Washington, and in full consultation with the U.S. Department of Labor. The main government counterparts are to be COPRESIDA and the Ministry of Labor, with whom collaboration is to be maintained on a continuing basis throughout the life of the program. It is expected that Trabajo Vivo also works closely with the TAB and reflect in its activities its priorities and concerns.

This is seen as an essential element of the sense of ownership of the program to be developed by the various national elements involved to make Trabajo Vivo successful. These various local pillars should not only constitute Trabajo Vivo's most important sources of institutional support, but also a consultative body which can be called upon to guide program policy in instances when that becomes necessary. The mechanism is expected to introduce enough flexibility to ensure that stakeholder concerns are being responded to effectively by the program.

Responsibility for day-to-day management will rest with the Regional Coordinator. He will be assisted by a Program Associate and an Administrative Assistant. (For Haiti there will be a Program Manager based in Port-au-Prince but reporting to the Regional Coordinator.) The Regional Coordinator will report to the AED Project Director based in Washington, D.C.

An important role to be played by the Regional Coordinator is the orchestration of the Tripartite Collaborative Agreement and the follow-up institutional work plans. Trabajo Vivo is expected, in particular, to collaborate with COPRESIDA in the coordination of the task of elaborating all of these work plans. Yet eventually the bulk of the Regional Coordinator's work will concentrate on workplaces, both to persuade them to change wrongful practices and to help them develop HIV/AIDS policies and prevention programs.

It is expected that the Regional Office will develop special ties to the USAID-sponsored AcciónSIDA Project managed by AED. It is anticipated that in some cases both projects could converge in the implementation and financing of given activities. It is also expected that the Regional Office will liaise as necessary with other international donors and agencies.

## TARGET GROUPS & PARTNERS

The intended beneficiaries of the project will be workers and their families both in the formal sector of the economy, but more particularly in the tourism, FTZ, and construction and agro-industrial/agricultural sectors of the economy (work with informal enterprises, particularly in the case of the agricultural sector, is not ruled out and will depend on circumstances). The indirect beneficiaries will be companies that will benefit from prevention and support programs and policies through the reduction of absenteeism, worker deaths and the associated costs of recruitment and retraining. The direct beneficiaries of the project will be government staff, employers and worker organizations, companies and community-based organizations, NGOs and civil society.

As suggested above, the main government partners will be COPRESIDA and the Ministry of Labor, but there will also be a special tie to INFOTEP, a tripartite institution with an excellent reputation among employers. The Program shall aim to make the role of INFOTEP pivotal, in that the institution is an ideal partner because of its tripartite sponsorship and because its Board is chaired by the Minister of Labor. From the private sector the main partners will be *Coalicion ONG-SIDA*, CONEP, COPARDOM, and CNUS.

## SUSTAINABILITY

Sustainability of the Program will be assured through the following program features:

- *A participatory approach:* All Program activities will be designed and planned in full consultation with representatives of the intended beneficiaries and the implementing partners (e.g., Tripartite Advisory Board).
- *Local ownership:* The emphasis of the program design will focus on the identification of problems and solutions at the local level.
- *Capacity building:* Improving knowledge and skills and strengthening existing infrastructures through training and other capacity-building interventions. The co-funding mechanism with COPRESIDA would be an additional result in this area.
- *Tripartite Advisory Board:* As suggested in the Institutional and Management Framework section, this board will have broad representation from all relevant government agencies, employers and workers organizations, and concerned NGOs.
- *Situational analysis:* All elements to be incorporated into the SMARTWork program, particularly the training activities, will be based on careful analysis to ensure their long-term viability.
- *Advocacy:* A fundamental element of the program will be to protect human rights and prevent discrimination.
- *Awareness-raising:* Sensitization will be a core aspect of the program addressing awareness-raising with the aim of changing attitudes leading to behavioral change.
- *Integration:* All activities will be planned in such a way as to facilitate integration into ongoing COPRESIDA and DIGECITSS efforts.
- *Harmony with National Legislation:* Maximum effort will be made to ensure that the policy framework governing the program activities will positively influence and be in harmony with national policy, particularly Law 55-93.
- *Linkage:* Synergies will be sought with all ongoing national and international HIV/AIDS projects, particularly those sponsored by USAID and UNAIDS.