

***Final Report***

**HIV/AIDS Workplace Education Project  
Cambodia**

**Project No. E-9-K-2-0072  
CAM/03/50/USA**

**International Labour Office  
United States Department of Labor**

**Internal Assessment  
April 2005**

## Table of Contents

ACRONYMS AND ABBREVIATIONS .....	iii
EXECUTIVE SUMMARY .....	iv
I. INTRODUCTION .....	1
A. Country Background .....	1
B. Project Description .....	1
C. Purpose of Internal Assessment .....	2
D. Internal Assessment Methodology .....	3
II. FINDINGS, CONCLUSIONS AND RECOMMENDATIONS.....	3
A. Validity of Project Strategy .....	3
B. Project Implementation .....	5
C. Training Activities and Materials .....	6
D. Participation of Partners/Stakeholders/Target groups .....	9
E. Project Management .....	11
F. Performance Monitoring .....	13
G. Sustainability, Benefits and Long-Term Impact .....	14
III. LESSONS LEARNED.....	16
IV. SUMMARY CONCLUSIONS AND RECOMMENDATIONS .....	17

## ANNEXES

<b>1</b>	<b>Strategic Framework</b>
<b>2</b>	<b>Performance Monitoring Plan</b>
<b>3</b>	<b>Scope of Work of Internal Assessment</b>
<b>4</b>	<b>Documents reviewed</b>
<b>5</b>	<b>Individuals and organizations met/interviewed</b>
<b>6</b>	<b>Training activities</b>

## **ACRONYMS AND ABBREVIATIONS**

<b>AIDS</b>	Acquired Immunodeficiency Syndrome
<b>BCC</b>	Behaviour Change Communication
<b>CAMFEBA</b>	Cambodian Federation of Employers and Business Associations
<b>CHED</b>	Cambodian Health Education Development
<b>FHI</b>	Family Health International
<b>GMAC</b>	Garment Manufacturers' Association of Cambodia
<b>HIV</b>	Human Immunodeficiency Virus
<b>ILO</b>	International Labour Office
<b>ILO Code of Practice</b>	An ILO Code of Practice on HIV/AIDS and the World of Work
<b>International Programme</b>	ILO/USDOL International HIV/AIDS Workplace Education Programme, based in Geneva
<b>MOLVT</b>	Cambodian Ministry of Labour and Vocational Training
<b>MSI</b>	Management Systems International
<b>NAA</b>	Cambodian National AIDS Authority
<b>NGO</b>	Non-Governmental Organization
<b>NPC</b>	National Project Coordinator for the HIV/AIDS Workplace Education Project, Cambodia
<b>PAB</b>	Project Advisory Board
<b>PMP</b>	Performance Monitoring Plan
<b>Programme Manager</b>	ILO Programme Manager responsible for the ILO/USDOL International HIV/AIDS Workplace Education Programme, based in Geneva
<b>SRO</b>	ILO Sub-regional Office, Bangkok
<b>USDOL</b>	United States Department of Labor

## **EXECUTIVE SUMMARY**

With the highest HIV/AIDS infection rate in Asia, Cambodia has mobilized on many fronts in the fight against HIV/AIDS. The Law on the Prevention and Control of HIV/AIDS was adopted in 2002, highlighting the importance of workplace programmes. MOLVT has also developed a “Strategic Plan for a Comprehensive Response to HIV/AIDS”, which calls for “enhancing workplace interventions in support of preventing workers from HIV infections and increasing their accessibility to services.”

Cambodia was the first of the countries included in the 4.6 million USD International HIV/AIDS Workplace Education Programme. It has a budget of approximately 480,000USD for the period of May 2003 to September 2006. The project has the twin objectives of reducing HIV/AIDS risk behaviours among targeted workers and reducing the level of employment-related discrimination against persons living with HIV/AIDS.

An internal assessment of the project was undertaken in April 2005, just over half way into the project’s scheduled duration, in order to determine if the project is meeting its objectives, to assess the impact of the project and provide recommendations. The team was composed of an official from the ILO and an official from USDOL. The internal assessment involved a document review, interviews in Geneva, Phnom Penh and Siem Reap, as well as debriefing in Bangkok and Geneva.

The project has succeeded in nurturing consensus and commitment among the stakeholders regarding the objectives of the project. A considerable amount of capacity building has been undertaken through the project, and training activities have been particularly appreciated by the participants. These activities have successfully built on and strengthened local training capacity, and have been integrated into the appropriate programmes of the stakeholders and collaborating partners. Follow-up training will, however, be needed to ensure those trained as trainers have sufficient confidence and capacity to carry out training independently, thus ensuring a multiplier effect. Training materials also need to be made more readily available to those wanting to undertake training or awareness raising activities. A critical mass of peer educators also needs to be trained and supported. Adequate management sensitisation programmes should also be undertaken.

Participation of stakeholders and target groups has been good. The project has developed an excellent network among NGOs and is using it effectively. Some of the individual enterprises participating in the project will need more intensive follow-up, as many are still at an early stage in terms of sensitisation, and policy and programme development. The target sectors are appropriate. At least initially, the project should not expand to other sectors; it should aim to reach more enterprises within the target sector, should resources allow.

The project has been well managed at all levels. Good communication and follow-up were evidenced. Community Zero is a useful management tool, the NPC and the Programme Manager should agree an arrangement that ensures the tool is appropriately used, without being burdensome. The SRO HIV/AIDS specialist, once taking up the post in July 2005, should make supporting the project a priority. An

HIV/AIDS component should be integrated into the work of the Garment Sector Project and the Labour Dispute Resolution Project.

As the project has reached a stage of intensive training and policy development, it is recommended that a further staff member be hired. Whether this person should be a training assistant/coordinator or have other qualifications should be discussed further between the NPC and the Programme Manager.

As a tool for performance monitoring, the PMP is comprehensive, easy to understand, practical and well adapted. The Worker Survey on Knowledge, Attitude and Practice has been well designed to respond to the PMP indicators. The results of the final workers' survey to be undertaken towards the end of the project may not, however, reflect fully the extent of the project's impact, since the baseline survey was undertaken almost a year after the project activities began. Other information and data has been collected through the HIV/AIDS focal points and the NPC. The task list has also been a useful monitoring tool.

With respect to the benefits of the project, some are already evident, such as increased commitment to and knowledge of HIV/AIDS workplace issues, knowledge and use of the ILO Code of Practice, preparation of a draft Prakas on HIV/AIDS committees in the workplace, and the adoption of Implementing Guidelines on the HIV/AIDS Law. With respect to the development of workplace policies and programmes, these are still at an early stage. The benefits of the project are likely to be much more significant once the workplace policies and committees are established, and the Prakas is adopted. The momentum will need to be sustained to ensure that the committees function well and the policies are adopted and implemented.

A number of key lessons have been learned in the course of the project. The use of existing resources and networks has been of critical importance. The role of the constituents at all stages and instilling a sense of ownership is key to ensuring sustainability. Another important lesson learned is to do a mapping as was done in this project, and work in areas where there are gaps, and also where synergies are possible. In such a project, it is important to work in a few key sectors where it can be most useful and also have a real impact.

Due to the various delays and to ensure sustainability, the project should be extended beyond the original scheduled period to ensure the workplace policies and committees are in place and functioning, and that the training is deepened. The planning and design work should begin soon. A comprehensive sustainability plan should be prepared in the near future, and steps taken to ensure funding is secured beyond September 2006.

## **I. INTRODUCTION**

### ***A. Country Background***

The HIV infection rate in Cambodia is the highest in Asia; despite the recent decline in prevalence among higher risk groups, the infection rate remains higher than that of neighboring countries. The worst affected population category – the 15-49 age group, constituting nearly 94 per cent of all reported cases – is also the working and economically active segment of society. The estimated costs of the epidemic to the Cambodian economy are expected to reach two billion US dollars by 2006.

The Ministry of Health has been active in the fight against HIV/AIDS since 1991. To help ensure a multi-sectoral approach, the National AIDS Committee was established in 1993, which later became the National AIDS Authority (NAA) in 1999. A number of international non-governmental organizations have been involved in workplace interventions. The involvement of the Ministry of Labour and Vocational Training (MOLVT), and employers' and workers' organizations had been limited in scope. However, there is growing awareness among the tripartite constituents that much more could be done in developing an enabling environment to develop policies and prevention programs on HIV/AIDS and the world of work. The Law on the Prevention and Control of HIV/AIDS, adopted in 2002, highlights the importance of workplace programs. MOLVT has also developed a "Strategic Plan for a Comprehensive Response to HIV/AIDS", which calls for "enhancing workplace interventions in support of preventing workers from HIV infections and increasing their accessibility to services."

### ***B. Project Description***

The U.S. Department of Labor (USDOL) awarded a four year grant to the International Labour Office (ILO) in FY2002, signed on 26 September 2002, to implement a US\$4,644,596 global HIV/AIDS education in the workplace programme in partnership with Family Health International (FHI). As part of this programme, the ILO began a three-year HIV/AIDS workplace education project in Cambodia with an initial budget of US\$431,085, which was later increased to US\$483,883. The project began in May 2003 and is scheduled to end in September 2006.

The Development Objective set out in the original project document was to contribute to the prevention of HIV/AIDS in the world of work, the enhancement of workplace protection and the reduction of its adverse consequences on social, labour and economic development.

The Development Objective was to be accomplished by pursuing three immediate objectives:

1. Tripartite constituents will have been sensitized and mobilized to develop policies and programs for the prevention of HIV/AIDS in the world of work;
2. A comprehensive national policy on HIV/AIDS and the world of work would be in place and prevention programs in specific sectors will have been implemented, evaluated and good practices identified;

3. A sustainable national plan on prevention of HIV/AIDS in the world of work will have been developed to replicate programs for workers fully integrated into the regular programs of the Government, and employers' and workers' organizations, individual enterprises in both the public and private sector as well as activities in the informal economy.

In May 2004, the ILO Staff in Geneva, consultants from MSI, a USDOL Representative, and the NPCs met to develop the overall strategic framework. They developed a generic strategic framework, which was then tailored for each project country. The Strategic Framework, as established for Cambodia, resulted in the revision of the original objectives. As a result of this exercise, the development objectives are now as follows:

1. Reduced HIV/AIDS risk behaviours among targeted workers;
2. Reduced level of employment-related discrimination against persons living with HIV/AIDS.

These development objectives are to be pursued through the accomplishment of 4 immediate objectives:

1. Improved knowledge and attitudes related to HIV/AIDS risk behaviours;
2. Increased awareness/use of available HIV/AIDS workplace services;
3. Reduced stigma against persons living with HIV/AIDS;
4. Increased knowledge of HIV/AIDS workplace policies.

The Strategic Framework is attached as *Annex 1*. The Performance Monitoring Plan (PMP) was subsequently adapted to the Cambodian context in a national workshop in June 2004. It sets forth the performance indicators for each of the development, immediate and sub-immediate objectives, and is attached as *Annex 2*.

### ***C. Purpose of Internal Assessment***

The internal assessment took place just over half way into the project's scheduled duration, and was intended to take the place of a mid-term evaluation. The main objectives of the internal assessment were as follows:

- a) Determine if the project is achieving its stated objectives;
- b) Assess the impact of the project in terms of sustained improvements achieved;
- c) Provide recommendations on how to improve performance, and, where necessary, identify the possible need to refine the strategy.

The internal assessment team addressed issues of project implementation and project impact, or foreseen impact, based on the strategy and work plan. In addition, the internal assessment was to provide project management, ILO field and headquarters staff, project stakeholders and the donor with feedback and information needed to assess, and possibly revise, policies, strategies, data collection methods, objectives, institutional arrangements, work plans and the resources allocated (the scope of work is attached as *Annex 3*).

#### ***D. Internal Assessment Methodology***

Project documents and general documents regarding Cambodia or HIV/AIDS were reviewed prior to and during the course of the internal assessment mission (see *Annex 4* for a list of documents reviewed). The Senior Social Dialogue Specialist also received a briefing from and interviewed the Geneva-based Programme Manager and the members of his staff regarding the International Programme, as well as the specific Cambodian component. She also received a demonstration of the “Community Zero” site, which is a virtual community allowing the various component projects to share information and exchange views.

The field portion of the Cambodia HIV/AIDS Education in the Workplace internal assessment was conducted by a two-person team from 19 to 26 April 2005. The members of this team were Mr. Bruno Bui, the U.S. Department of Labor Project Manager, and Ms Shauna Olney, the Senior Social Dialogue Specialist of the International Labour Office. Interviews were conducted in two provinces: Phnom Penh and Siem Reap. The selection of the two provinces was made by the project staff based on provinces containing one or more actively participating enterprises. The internal assessment team met a total of 112 persons during the field portion of the mission (see *Annex 5* for a complete list of individuals and organizations met/interviewed).

Following the completion of the field interviews, the internal assessment team spent the last day of the field mission drafting general findings and recommendations, and provided a briefing to the Project Advisory Board (PAB). The ILO Senior Social Dialogue Specialist then went on to Bangkok to brief members of the ILO Sub-Regional Office on the results of the field mission. Upon returning to Geneva, the Senior Social Dialogue Specialist also briefed the Programme Manager.

## **II. FINDINGS, CONCLUSIONS AND RECOMMENDATIONS**

### ***A. Validity of Project Strategy***

#### ***Findings***

The project document states that the overall project strategy is to increase the capacity of the tripartite constituents to design and implement workplace HIV/AIDS prevention policies and education programmes. The project strategy relies on collaboration with the Government to ensure that the national legal and policy framework is conducive to workplace prevention and protection of workers’ rights; and collaboration with employers and workers to launch effective and sustainable prevention education and behaviour change communication programmes within the workplace and surrounding communities.

A three-stage approach was designed, each stage building upon the previous one:

1. Building consensus and strengthening the capacity of the tripartite constituents;
2. Defining target sectors and developing a BCC sectoral strategy;



### 3. Developing and implementing HIV/AIDS policy and programmes in workplaces.

In terms of the first stage, namely building consensus and strengthening the capacity of the tripartite constituents, the internal assessment team heard from all the stakeholders expressions of enthusiasm for and commitment to the project and its objectives. The implementing partner organizations acknowledged that the project is continually building on their HIV/AIDS education capacity. The constituents and NGOs who had been involved in the training activities expressed their particular appreciation for the capacity-building, with the training of trainers component having been highlighted as benefiting a number of stakeholders. The specific training activities are discussed below.

With respect to the second stage of defining target sectors and developing a BCC sectoral strategy, the target sectors were determined by the PAB, based on the recommendations of a report assessing responses, gaps and opportunities regarding HIV/AIDS at the workplace in Cambodia. The draft of the assessment report was widely distributed in January 2004, and finalized in June 2004. The target sectors are hospitality (hotels and casinos), construction and garment manufacturing. In Phnom Penh, one casino, three hotels, two garment factories and the Association of Concrete Products have signed memoranda of understanding with the project. In Siem Reap, memoranda have been signed with five hotels and a temple construction company. The project also works with the Hotel Construction Workers in Siem Reap and the Hotel School. A number of other enterprises in the target sectors had also expressed interest in working with the project. Those interviewed supported the choice of sectors, though some of the social partners suggested other sectors be added, including agriculture, entertainment, taxis and moto drivers. With respect to the BCC sectoral strategy, a local NGO and a BCC consultant began this work in December 2004. The BCC workshop was conducted in February 2005. The project was originally conceived to draw upon FHI's experience in developing BCC programmes for different target groups, but this collaboration did not materialize to the extent originally foreseen, in particular regarding the implementation phase (this issue is dealt with below under implementation).

The third stage of the project, developing and implementing HIV/AIDS policies and programmes in workplaces, has begun only recently. A model policy has been developed by the project, but very few of the target enterprises have officially adopted the policy or any policy at all. From the interviews with the target enterprises, it was evident that those in Siem Reap were considerably behind those in Phnom Penh with respect to adopting a policy, undertaking peer education programmes and establishing HIV/AIDS committees.

### *Conclusions*

The overall strategy and methodology remain valid, despite the refocusing of the objectives during the PMP exercise. Based on the three-stage methodology, the project is now focusing on the third and final stage. With respect to the first stage, there is a clear consensus and commitment among the stakeholders regarding the objectives of the project. The capacity-building process will be on-going throughout the project, though a considerable amount has already been undertaken.

Regarding the second stage, the target enterprises have been selected, and the BCC implementation has only recently been launched. The target sectors remain the most appropriate, in terms of the resources of the project, the mix of formal and informal sector, and the comparative advantage of the ILO. There is also considerable interest of enterprises in those sectors to work with the project. The project has solidly prepared the groundwork for the third phase, namely developing and implementing HIV/AIDS policies and programmes in the workplace.

The capacity-building of the implementing partners, the commitment of the stakeholders and the effective utilization of existing resources in Cambodia have been the key to the success of the strategy as currently implemented. The strategy has successfully built upon the ILO's experience in advocacy and policy development particularly drawing on the "Code of Practice on HIV/AIDS and the World of Work". While the BCC partnership with FHI for the implementation phase did not materialize, this did not affect the overall strategy and movement toward the accomplishment of the objectives. The utilization instead of a local NGO has supported the goal of strengthening local national capacity in this field.

#### *Recommendations*

The project should not change the target sectors or expand to other sectors. Should resources permit, it could, however, include more enterprises within the target sectors.

### ***B. Project Implementation***

#### *Findings*

There have been some delays in activities as scheduled in the original work plan. The project was scheduled to start on 1 May 2003, though the final project document was not approved by the Cambodian Government until 1 September 2003, and the official project launch did not take place until 9 October 2003. However, the NPC began working with the project in May 2003, and there were very little initial start-up delays since the NPC was already very familiar with many of the stakeholders.

The development of the BCC material was considerably delayed due to difficulties in the context of the International Programme in securing the BCC partnership agreement with FHI. This partnership was ultimately restricted to the development of a joint ILO/FHI BCC tool-kit. The material was originally scheduled to be developed with FHI, pre-tested and published by the last quarter of 2003. The generic material was in fact developed in April 2004, and the adaptation process in Cambodia began in December 2004. The NPC informed the internal assessment team that he was not aware until November 2004 that FHI would not be involved in the implementation phase, thus resulting in a delay in undertaking the adaptation process.

Due to the delay in the formation of the new Government, it was impossible to have a Project Advisory Board (PAB) meeting for approximately six months. This in turn resulted in a delay in the PAB reviewing the draft Prakas. Once the Government was formed, there was a further delay in reappointing the government representatives to the PAB.

From the interviews with various government officials, the project has not had the advantage of using the Prakas as leverage for some of its activities. This was due to the Government delay in adopting the Prakas (the regulation implementing the HIV/AIDS law) on the creation of the HIV/AIDS committee in the enterprises and establishments and managing HIV/AIDS in the workplace. With the adoption of the Prakas, enterprises with more than eight employees will be required to set-up a committee to implement HIV/AIDS education and policies in the workplace.

Local project management described action taken to overcome the potential problems caused by the delays. For example, in the absence of a global partnership agreement with FHI, a local consultant was found to draft the local BCC material and a partnership with a local NGO was established. With respect to the Prakas, while this is still in draft form, the NPC has used the shadow of the future adoption of the Prakas to encourage enterprise involvement in the project, to be better prepared once the requirements under the Prakas become mandatory.

Representatives of Government and government agencies interviewed were particularly sensitive to the need for the Prakas to be adopted in order for the project to be most effective. However, most of the stakeholders did not indicate an awareness of the various delays, and expressed satisfaction with the pace of the project activities. The stakeholders interviewed were unanimous in the view that to implement fully the work of the project in a sustainable manner, the period of the project needs to be extended. This issue will be dealt with in more detail below under sustainability.

### *Conclusions*

While the project suffered initial and intervening delays, it has now reached a stage of considerable momentum. The delays were for reasons beyond the control of the local project management, and they were addressed in a timely and satisfactory manner to overcome the potential problems caused by the delays. While the delays have not affected the overall strategy, it has meant that at each stage, particularly the third stage of developing and implementing HIV/AIDS policy and programmes in workplaces, has started later than originally foreseen. Despite the pace of the recent and planned activities, it will be difficult for the project to ensure the sustainability of the activities in the time remaining under the project. Recommendations in this regard are made below under sustainability.

### ***C. Training Activities and Materials***

#### *Findings*

A number of first stage training activities have been carried out, involving sensitisation, executive briefings, training of trainers, BCC and peer educators (see *Annex 6* for the list of training activities carried out). Those who had participated in the training were of the view that it had been well-targeted and useful, and that the materials were appropriate. A number of the participants from the social partners, government agencies, as well as some of the target enterprises, requested that the training material be made more widely available, since each participant was only given one copy of the material, making it more difficult to conduct their own training

courses or undertake general awareness-raising. Some of those interviewed, particularly from government and unions, requested that other material be developed, such as videos and posters on HIV/AIDS in the world of work, representing “real” people, to make them more accessible to more workers, employers and their families. One specific suggestion was that a video could be shown outside the government medical facility, where there are normally a large number of people waiting to undertake a medical exam in order to get a job in a garment factory.

Those interviewed expressed particular appreciation for the training of trainers course, since for many it was a solid introduction to the issues, which was tailored to the local situation. There was a unanimous expression for more of this type of training as well as follow-up training. Many of those trained as trainers acknowledged that they had not had any previous experience in training, and for a number of them, it was also an introduction to HIV/AIDS workplace issues; therefore, they did not yet feel able to carry out training independently after attending only one training course. Very few had carried out any independent training following the course, with the exception of the construction workers’ federation, which has had 5 people trained as trainers, who in turn have trained 80 peer educators, working on 5 temple construction sites.

The peer educator training was still at a very early stage in most cases, so little feedback was available. However, as noted above, there had been considerable training of peer educators in the construction industry in Siem Reap. The internal assessment team met with five of the 80 peers that had been trained. They informed the team that they took every opportunity, at breaks, after work, and even in the community, to disseminate information on HIV/AIDS to colleagues, friends and family. They requested general follow-up training, and asked that more peers be trained. They also wanted to have available multiple copies of informational material on HIV/AIDS that workers could take home and discuss with their families. At present, they have limited copies of materials that can be consulted only at the workplace.

We were informed of some instances where workers were not permitted to attend the training courses due to a lack of management sensitisation to the issues. During interviews with some of the target enterprises, it was also clear that there remained a lack of sensitisation to the HIV/AIDS workplace issues. However, the management of a number of other target enterprises exhibited a high level of understanding of the issues.

The NPC has been involved in virtually all the training activities, and he works closely with a number of NGOs. The NGOs working with the project on training expressed their appreciation for the support of the project and the opportunity to improve their own training capacity. The internal assessment team was interested to note that where an activity had been undertaken with an NGO or the employers, for example, they referred to it as their own activity.

### *Conclusions*

The first stage training activities have been appreciated by the participants, and most are committed to undertaking follow-up training. The training has been well adapted to the audience and to the local context. The materials used in the training were

appropriate. However, with the exception of the construction workers, very few of those trained as trainers have led their own training activities. Many of those trained lack the confidence, and believe they still lack the capacity, to carry out training courses independently. From the interviews with the stakeholders, the project should expand and deepen the training activities. Also, for those trained to be able to conduct their own courses or raise awareness after the course, easy access to multiple copies of the materials is needed.

With respect to peer educator training, indications from the example of the considerable number of peer educators trained in the construction industry in Siem Reap are that if a critical mass of workers is trained, they will be comfortable speaking to their colleagues about HIV/AIDS, and taking that message back to their communities. Their colleagues will also be more comfortable approaching them if there are a number of them in the workplace. If there is, for example, only one peer educator in the workplace, they may feel isolated, and workers may feel there is a stigma in approaching them.

In interviews at the enterprise level, there was a clear indication that management still needs further sensitisation to HIV/AIDS workplace issues. Before training of the staff begins in an enterprise, it is important that the management is sufficiently sensitised through briefings, training or other activities.

The training to date has been carried out by the NPC in close collaboration with various NGOs, government agencies and the social partners, thus increasing the local training capacity. The NPC has succeeded in getting buy-in and ownership with respect to the social partners and the NGOs, and ensuring that the various training initiatives are integrated into the appropriate programmes of the stakeholders and collaborating partners. There was a clear sense of ownership and commitment exhibited.

### *Recommendations*

To ensure sufficient capacity and confidence of those trained as trainers, follow-up courses will be needed, and possibly some mentoring, initially by the project, and then by those trained who feel confident to lead a training activity. How best to tailor the follow-up courses should be considered by the project management team, as different groups may have specific needs at different stages. The resources of the project should be used to deepen the training rather than significantly expanding the pool of those trained as trainers. In order to ensure a multiplier effect of the training of trainers, following up on the use of the training will be needed, and a commitment and training plan by those trained as trainers to make sure they use their skills and knowledge.

A critical mass of peer educators should be trained and supported to ensure they have the confidence to approach their colleagues, and also for their colleagues to feel comfortable approaching them.

At the enterprise level, sensitisation of management to workplace HIV/AIDS issues should be a priority. Adequate sensitisation programmes should be undertaken before training of staff begins in an enterprise.

The materials should continue to be used, with multiple copies being made available to the participants/trainers as needed, to facilitate greater dissemination and impact. Consideration could be given to preparing a video on HIV/AIDS in the world of work.

As the pace of the training activities increases, as foreseen in the present stage of the project, the NPC will need further assistance in carrying out the work beyond the local partnerships with NGOs. It is recommended that funds be made available to create another full-time position for the project, either to assist directly with training (perhaps with responsibility for the target enterprises in Siem Reap), or to free up the NPC to carry out more training.

#### ***D. Participation of Partners/Stakeholders/Target groups***

##### ***Findings***

The original project document makes only one reference to a *partner*, namely FHI. While the project document has a separate heading for “target groups and partners”, it does not go on to use these terms, instead referring to “intended beneficiaries”, “direct beneficiaries” and “indirect beneficiaries”. In the context of the Government and the social partners, the project documents speaks in terms of “collaboration”.

**FHI** - The original project document foresaw a partnership with FHI in preparing the BCC tool kit and implementing the BCC component. A workshop for the preparation of the general BCC tool kit was held in Ghana in April 2004, which the NPC of the Cambodia project attended. This material was subsequently substantially revised by the Programme Management Team in Geneva. There was then no agreement concluded for the implementation of the BCC component in the specific project countries, including Cambodia. In Cambodia, the BCC material was prepared by a consultant, and a local BCC specialist NGO, Cambodian Health Education Development (CHED), was selected to implement the BCC component. This began in December 2004 with CHED carrying out a formative assessment of the garment sector and hotel industry.

**Constituents** - Most of those with whom the internal assessment team met appeared to have a good understanding of the objectives of the project, and evidenced their sincere commitment to those objectives. This is an area where there is a perceived community of interest among the Government, and workers’ and employers’ organizations. The constituents have been involved in the project from its inception, and have remained active throughout. They noted the importance of having been consulted from the planning stage. All three constituent groups indicated their desire to continue to work closely with the project. Within the employer community, the project also has individual “champions” who promote the work of the project, and refer other employers to the NPC. The employers’ organizations, both CAMFEBA and GMAC, are promoting the work on HIV/AIDS as not just a health issue, but also as a business and social responsibility issue.

**Target enterprises** – With respect to the participating enterprises, some had already undertaken a number of activities, while others were still at the initial stages. There

were a few enterprises that did not seem to understand the project fully, and had not yet scheduled training, though during the internal assessment mission, they agreed to undertake the training process in the near future since the hotels were coming up to a slower season. The garment factories had already established an HIV/AIDS policy and a committee; however, among the participating hotels, only one had a fully functioning HIV/AIDS committee. The garment factories are also integrating HIV/AIDS issues in innovative ways, for example having an HIV/AIDS quiz with prizes at the annual New Year or 1 May celebrations. All the enterprises participating have fully cooperated in the carrying out of the baseline survey. Individual workers, particularly in the context of the peer educator training, have also been eager to be involved in the project activities. We were also informed of a number of enterprises beyond the target enterprises, as well as individual workers, contacting the project directly for information, advice and assistance.

**NGOs** - Concerning the NGO's, a number are working with the project to develop materials, undertake training or simply share information. Those involved are clearly committed to the issues, and are working well with the project, while the project has also assisted them.

**PAB** - The PAB is tripartite plus, and has had 5 meetings thus far. The meetings were stalled for some time because of a delay in the formation of the Government. At their last meeting, the PAB members requested to have more regular information on the implementation of the activities and the proposed activities.

### *Conclusions*

The only formal partner foreseen in the project was FHI, and this partnership, at least vis-à-vis the Cambodian component, did not materialize. This led to some delays and the need to adjust the implementation plan and approach, as discussed above under implementation. Other avenues were therefore found for preparing the Cambodian BCC material and implementing the BCC component, using a consultant and a local NGO. This new partnership appears to be working very well.

The constituents have been involved actively in the project since the planning stages, and are eager to remain closely involved. The workers' and employers' organizations are committed to the project and its objectives. They have taken part in and facilitated numerous activities, and have organized a number of their own spin off activities. Different government agencies and ministries have also been closely involved in the work of the project, and the Government has also evidenced its commitment.

With respect to the individual enterprises targeted by the project, there is certainly good will to participate, though some have been more active than others. Many of the hotels are still at an early stage and will need more intensive follow-up.

The project has had an influence beyond the target enterprises, with other employers and individual workers approaching the NPC for advice, information and training possibilities. While this does take up project time, it has been important in increasing the profile of the project and has not affected the implementation of core project work. The relationship between the project and the participating NGOs has been one

of mutual respect, benefit and assistance. The project has developed an excellent network and has been using it well.

### *Recommendations*

Some of the individual enterprises participating in the project will need more intensive follow-up, which will need to be tailored to the capacity and needs of each enterprise/sector.

### ***E. Project Management***

#### *Findings*

The NPC was unanimously praised by the stakeholders and the ILO project staff, particularly for his knowledge and commitment. While some constituents expressed the view that they would have liked to have more of his attention, all agreed that he responded to them in a timely and appropriate manner, and followed up on commitments made by and to the stakeholders.

The relationship between the local project management and the International Programme has at this stage of the project a substantial administrative component, with the International Programme ensuring work plans are completed, reports are submitted and there is an exchange of information between the various NPCs. Technical support from the International Programme is provided through two main channels: exchanges on substance arising out of the NPC submitting administrative requests; Community Zero, since a wide-range of templates and information are posted on the site. NPCs are also expected to post queries and comments on Community Zero so that exchanges on substance can take place as needed. The Programme Manager also aims to ensure that the NPCs focus on the PMP and concentrate on the planned activities, since there is a concern that the projects will be weighed down with many other general requests and enquires.

Community Zero has been set up by the International Programme as a virtual community for the various component projects to share information, exchange views on various issues, and stimulate a “community of learning”. The Programme Manager has requested NPCs to log in once a day; the NPC of the Cambodian project has not been able to log in with this frequency. Initially he was hampered by an inefficient Internet connection. Although the project has recently gained a high-speed Internet connection, the NPC is still not logging in regularly, due to other time constraints. The NPC also does not consider Community Zero to be as useful for his project as perhaps it is for others, since Cambodia was the first of the countries in the programme to begin work; therefore, it has been the leader in terms of developing the local PMP, activities and materials.

With respect to the relationship between the International Programme, the local project management and the Sub-regional Office in Bangkok, the HIV/AIDS specialist left the Bangkok office in January 2004, and his replacement is scheduled to arrive in July 2005. Prior to his departure, the specialist was a key link between the project and the International Programme, and provided significant technical assistance to the project, particularly in the start-up phase. The specialist was also supported



technically by the International Programme. There has also been assistance provided from the SRO Standards Specialist.

The communication between the International Programme and USDOL was considered by both sides to be very open and responsive, and working to the satisfaction of the parties.

Linkages between this project and other ILO projects in Cambodia were initially foreseen. An agreement was reached early on in the life of the project with the ILO Workers' Education Assistance Project on the integration of an HIV/AIDS module into the regular training activities. The NPC also reports working closely with the Informal Economy Project and the ILO-IRAP Project. A number of those interviewed pointed to the potential role the ILO Garment Sector Project (also known as "Better Factories Cambodia") could play in sensitising workers and management regarding HIV/AIDS, particularly through the remediation component.

### *Conclusions*

The project has been well managed at all levels. There has been good communication between local project management and stakeholders. The NPC works in a systematic manner with good follow-up. He has created an important network among the stakeholders, as well as inspiring confidence in the project and enthusiasm for the issues. The project team, though small and over-extended, is working effectively in the light of the limited resources. There are good relations between the International Programme and the local project, with the International Programme having a strong administrative role and general technical support and oversight. Community Zero has been an interesting and useful tool, though as the front-runner, it may not be as useful for the Cambodian component, and it involves a clear time commitment. The NPC, however, may be able to better utilize this tool.

In the absence of a technical specialist on HIV/AIDS in the SRO, the NPC has had little direct technical assistance on the ground in carrying out the activities of the programme. This has had some impact on the NPC's workload, which is extremely onerous, though he has managed it very well to date. The project should benefit from the replacement of the SRO HIV/AIDS specialist, scheduled for July 2005.

Communication and relations between the International Programme and USDOL have been functioning well.

There are good opportunities for linkages between this project and some of the other ILO projects, in particular the Garment Sector Project and the Labour Dispute Resolution Project that have not as yet been fully explored, since the former has access to all the garment factories, and the latter involves labour inspectors.

### *Recommendations*

With respect to Community Zero, while this is a useful tool, it should not act as a burden on the local project team. On the other hand, the NPC may be able to make better use of this tool. As it does not appear to be realistic for the NPC to log in every

day, the NPC and the Programme Manager should agree an arrangement that ensures the tool is appropriately used, without being burdensome.

The SRO HIV/AIDS specialist, once taking up his appointment in July 2005, should make learning about the project and providing the necessary assistance a priority.

The project should work closely with the Garment Sector Project to integrate an HIV/AIDS component in the work of the Garment Sector Project, in particularly the remediation component. The project should also work with the Labour Dispute Resolution Project to incorporate HIV/AIDS issues into its training activities, in particular those for labour inspectors.

Given that the project has reached a stage of intensive training and policy development, and the staff are already over-extended, it is recommended that a further staff member be hired on the project. Whether this person should be a training assistant/coordinator or have other qualifications should be discussed further between the NPC and the Programme Manager.

#### ***F. Performance Monitoring***

##### *Findings*

The PMP sets out performance indicators for the development objectives, immediate objectives and sub-immediate objectives. The strategic framework and generic PMP were developed in May 2004 in Geneva by MSI, ILO Geneva, USDOL, and the NPCs. A country-level PMP for Cambodia was then developed on a tripartite basis during a workshop held from 28 June to 2 July 2004, and subsequently approved by the PAB.

To establish a baseline and monitor progress with respect to the PMP indicators, the project carried out a baseline survey of workers, the Worker Survey on Knowledge, Attitude and Practice, in August 2004. This survey was carried out by consultants using a questionnaire, which was administered to a representative sample of 371 individual workers (150 in Siem Reap, 221 in Phnom Penh) in 10 enterprises receiving assistance from the project. The results of the survey were disseminated to the PAB during its meeting on 14 January 2005. The final survey was scheduled to be carried out in January 2006, to enable the measurement of the nature and extent of the impact of the project. This survey will now take place sometime towards the end of the project.

PMP data was submitted by the project as an attachment to the March 2005 technical progress report. With respect to Development Objective I: Reduced HIV/AIDS risk behaviours among targeted workers, the results of the baseline survey, disaggregated by sex, showing the present level of risk behaviour, were set out. The same was done for Development Objective II on reduced level of employment-related discrimination against those living with HIV/AIDS. Most of the performance indicators under the immediate and sub-immediate objectives also relied on the baseline survey. For these indicators, actual measurement of change will not be possible until the final survey has been carried out. A number of other sub-immediate objectives rely on other sources of information, such as the HIV/AIDS focal points in the target enterprises,

and this information is being collected from them every 6 months through the workplace monitoring forms. Other sub-immediate objectives are based on objective information available to the NPC, such as PAB recommendations referred to the National Labour Advisory Committee or the NAA, the number of organizations with which the project regularly shares information, number of peer educators trained, etc. This information has been kept updated.

As the PMP has been adapted to the Cambodian context, and has been prepared with tripartite involvement, it is considered by the Programme Manager and the NPC to be a very useful tool to track changes and impact, and it is being used in that context.

The task list posted on the Community Zero site is also used by project management, both locally and in Geneva, as a monitoring tool. It sets out very precise tasks linked to the PMP as well as to the functioning of the project office (e.g. mapping exercise, training of peer educators, setting up project office, etc). It also sets out the status of each task and the planned completion date. From the point of view of the International Programme, the task list is a good monitoring tool, and is useful for sharing information among the various projects. The NPC viewed it as administratively useful. The Programme Management Team discusses the status of the task list with the NPC every three months.

### *Conclusions*

The PMP is comprehensive, easy to understand, practical and well adapted to the realities of Cambodia. The indicators used are verifiable and appropriate. The Worker Survey on Knowledge, Attitude and Practice has been well designed to respond to the PMP indicators. The results of the final workers' survey to be undertaken towards the end of the project should be able to show clearly the nature of the impact of the project. However, it may not reflect fully the extent of the impact, since the baseline survey was undertaken almost a year after the project activities began. The actual impact may, therefore, be more substantial than what is ultimately reflected in the final survey. The other information and data being collected through the HIV/AIDS focal points and the NPC has also been helpful. The task list has also been a useful monitoring tool. Since it is posted on Community Zero, the information can be shared among the various country programmes.

### ***F. Sustainability, Benefits and Long-Term Impact***

#### *Findings*

The benefits and impact of the project appear to have occurred at a number of different levels. At all levels, there was evidence of increased commitment to and knowledge of issues related to HIV/AIDS in the world of work. This could be inferred from the adoption of HIV/AIDS policies, the establishment of committees, engaging with the project, spin-off activities of the constituents and NGOs, etc. There was considerable knowledge and use of the ILO Code of Practice. At the national level, the project has assisted with and influenced the text of the draft Prakas and the Implementing Guidelines on the HIV/AIDS Law. The Guidelines were launched on 22 April 2005, and refer specifically to the ILO Code of Practice. The draft Prakas has also been heavily influenced by the Code of Practice. The NPC has also been asked to

be involved in the process of reviewing the national strategic plan. We heard from a government representative that prior to the ILO project, the Department of Occupational Safety and Health had focused on hazardous work and industrial disease, and not on HIV/AIDS. Due to the project, its mandate was increased to include HIV/AIDS in the workplace, and it has been involved actively in this area since.

In terms of the participating enterprises, some have established an HIV/AIDS policy and established an HIV/AIDS committee, though a number have not yet reached this stage. Where the Committee has been set up, a culture of dialogue and trust is being nurtured through providing a unique forum for dialogue on an issue giving rise to common interests between workers and management. With respect to individual workers, three examples were given of managers who contacted the project upon finding out that a staff member was HIV positive. In two of these cases, awareness-raising of the co-workers was subsequently undertaken and the staff member continued to work, at least for a period of time. In one case, the worker was described as having gained renewed hope, and was thus able to benefit from improved health and productive work.

The project has helped to develop important networks, in particular, some managers informed us that prior to the ILO training, they would not have known who to contact if they had an HIV/AIDS related question, but afterwards, they had contacted the local Provincial AIDS office or an NGO that was present at the same training, and received useful advice. One of the unions also described improved relations with local authorities due to the training, which had in the past been conflictual. They noted further that the training from the project has made them more credible with their members and potential members.

The project has been able to utilize the already existing HIV/AIDS networks in Cambodia of local and international NGOs, and in turn strengthen local capacity. The project has been able to use and disseminate materials designed by the NGOs, and vice-versa, and also to dovetail with their training efforts.

The project has also benefited the UN agencies generally, through conducting training for the agencies on HIV/AIDS in the world of work, and helping them with their own internal assessments. A representative of one UN agency described the project as “the most effective [HIV/AIDS] UN workplace programme”.

In terms of sustainability, the role of the employers’ and workers’ organizations was stressed for replication, as well as the importance of management commitment at the enterprise level, and the implementation of workplace policies. A sustainability plan has not yet been developed. The International Programme has identified some possible funding to enable the project to continue beyond September 2006.

### *Conclusions*

The benefits of the project are already evident, and are likely to be much more significant once the workplace policies and committees are established, and the Prakas is adopted. The momentum will need to be sustained to ensure that the committees function well and the policies are adopted and implemented. The Prakas,

which has been delayed because the new Labour Advisory Council has not yet been established, needs to be adopted as soon as possible. This will provide considerable leverage for the work of the project and contribute to sustainability as it will require enterprises with more than eight employees to set-up a committee to implement HIV/AIDS education and policies in the workplace. As such, the Prakas also authorizes the enterprises to set aside funds to implement work on HIV/AIDS.

It is clear that many positive changes have occurred in some of the participating enterprises actively supporting HIV/AIDS prevention and the establishment of policies to protect HIV positive workers from discrimination. Enterprises have demonstrated their commitment by providing information and education during work time, by setting up permanent bipartite HIV/AIDS committees and by committing company resources to education and training efforts. These committees, if properly trained and supported, are likely to continue to function beyond the life of the project.

There is legitimate concern among stakeholders that the project's completion date of September 2006 may be premature. As the project has recently moved into the third phase, much still needs to be done to ensure a smooth and effective transition of the responsibility of the technical and programmatic leadership to the respective Cambodian Government agency and the social partners. The stakeholders who attended the training of trainers workshops expressed concern that they will need follow-up training, and worried that when the project ends, regular technical updates would not be provided to them.

#### *Recommendations*

Due to the various delays, including the absence of a Prakas, the project should be extended beyond the original scheduled period to ensure the workplace policies and committees are in place and functioning, and that the training is deepened. In this regard, the planning and design work should begin soon. This should be coupled with discussions with the Cambodian Government and the social partners on how they envision the structure of a transitional activity to begin the transfer of technical and programmatic support to an expanded countrywide effort with a much larger group of employers and workers. A comprehensive sustainability plan should be prepared in the near future, and steps taken to ensure funding is secured beyond September 2006.

### **III. LESSONS LEARNED**

The use of existing resources and networks has been critical to the project achievements to date. Utilizing the existing networks, materials and expertise was particularly important given the small staff of the project and the relatively modest budget.

The key role of the constituents in ensuring sustainability has also been evident. And in this regard, the partnership approach with the constituents and other key stakeholders has been beneficial. The stakeholders were involved from the planning stage, and clearly feel it is their project. Instilling a sense of ownership is essential.

Another important lesson learned is to do a mapping as was done in this project, and work in areas where there are gaps, and also where synergies are possible. In such a project, it is important to work in a few key sectors where it can be most useful and also have a real impact.

#### **IV. SUMMARY CONCLUSIONS AND RECOMMENDATIONS**

- Another full-time staff member should be added to the project;
- At least initially, the project should not expand to other sectors or change sectors. It could, however, try to reach more enterprises within the target sectors, should resources allow;
- The training should be intensified – following-up on the training of trainers to increase the confidence of the trainers; obtain a critical mass of peer educators; ensure management is well sensitised at the outset;
- Ensure materials are readily available to those who want to distribute them or do their own training;
- The project should be extended, and funded accordingly, beyond September 2006.