

**REGIONAL PILOT PROGRAM FOR PREVENTION OF AND ATTENTION TO
FAMILY VIOLENCE AGAINST WOMEN**

(TC-95-07-12-2-RG)

EXECUTIVE SUMMARY

APPLICANT: Agencies and institutions specializing in family violence in Argentina, Brazil, the Dominican Republic, Mexico, Paraguay, and Venezuela.

EXECUTING AGENCY: The Bank, at the regional level, through contracting of an agency or institution specializing in this area; and at the national level, through agencies specializing in this area in Argentina, Brazil, the Dominican Republic, Paraguay, and Venezuela.

BENEFICIARIES: Borrowing member countries of the Bank.

FINANCING:

IDB:	US\$2,875,000 (FSO)
Foreign currency:	US\$250,000
Local currency from participating countries as follows:	
Argentina:	US\$550,000
Brazil:	US\$550,000
Dominican Republic:	US\$325,000
Mexico:	US\$550,000
Paraguay:	US\$325,000
Venezuela:	US\$325,000
Local contributions:	US\$ 481,000
Total:	US\$3,356,000

DEADLINES:

Execution period:	2 1/2 years
Disbursement period:	3 years

ENVIRONMENTAL CLASSIFICATION: The Environment Committee, at its meeting of October 29, 1996, classified this as a Category II operation.

OBJECTIVES: The objectives of the proposed regional technical-cooperation project are (i) to establish and test models of effective response on women who are victims of violent acts in their relationship with their partners, (ii) to characterize and estimate potential demand in preliminary fashion; and (iii) to educate the population concerning family violence and its impact on society, all with a view to helping reduce the incidence of family violence against women.

DESCRIPTION: A pilot program will be implemented in six countries of the Region, aimed at helping to systematize and exchange information and experiences. The countries

participating in the program will be Argentina, Brazil, the Dominican Republic, Mexico, Paraguay, and Venezuela. The countries included in this project are those which have indicated an interest in receiving support for activities aimed at attending to and preventing domestic violence against women and which, on the other hand, have not been beneficiaries of the project being carried out by PAHO.

The activities aimed at achieving the objectives of this project in each country have been grouped under two components: (i) an attention and prevention component (US\$2,506,000), encompassing specific actions aimed at designing and implementing an attention model, fostering the establishment of relationships between sectors, so-called "attention networks", in selected localities; as well, training would be given to the staff of the agencies making up the attention networks, with a view to improving the quality of service they provide and improving their capacity to record and refer cases of family violence; and (ii) a communication component (US\$369,000), aimed at publicizing the program and raising the awareness both of the authorities and of the public at large as to the magnitude of the problem at the national level; the aim of this component is to prevent, delegitimize, and break the cycle that perpetuates patterns of violence over the long term.

The program consists of a set of activities at the regional and country level. The Bank will execute the activities at the regional level, while the activities at the country level will be executed by specialized agencies in each country.

The Bank will contract an agency or institution specializing in the field of family violence for the execution of regional actions and coordination of activities at the country level. The evaluation activities would be contracted directly by the Bank, using independent consultants.

The specific actions in the countries will be carried out by the following agencies and ministries: (i) Argentina: Office of the Under Secretary for Prevention Programs of the Ministry of Health and Social Action [Subsecretaría de Programas de Prevención del Ministerio de Salud y Acción Social]; (ii) Brazil: National Council on Women's Rights of the Ministry of Justice; (iii) Mexico: Health Promotion Division of the Ministry of Health [División de Promoción de la Salud de la Secretaría de Salud]; (iv) Paraguay: Women's Secretariat

[Secretaría de la Mujer]; (v) Dominican Republic: National Bureau of Planning [Organización Nacional de Planificación]; and (vi) Venezuela: National Council on Women [Consejo Nacional de la Mujer]. The executing agencies will adhere to the Bank's procedures for letting contracts for goods and services.

This operation will be carried out with the active participation of governmental and non-governmental organizations having experience in responding to and taking action to prevent this problem, as well as the selected communities.

BENEFITS:

The proposed project will, over the long term, make it possible to improve the living conditions of women, families, and society, to increase productivity, and to reduce hospital and emergency-room costs as well as costs for intervention by the legal system, police, and special shelters. As well, it will enable the Bank to gain experience in dealing with the issue of violence so that in the near future it can incorporate this concern into its projects in such areas as health, government reform, civil society, and education. The project will also yield the following specific benefits:

- a. Coordinating and optimizing the actions of different sectors of government and civil society, thus improving the quality of services provided to victims of family violence.
- b. Bringing about the political commitment necessary for the institutionalization of the program.
- c. Making the problem of domestic violence visible in the participating countries and exchanging experiences and knowledge in this area, at both the national and international levels, once reliable information is available which affords more precise knowledge of the incidence of violence and its effects on women's health.
- d. Disseminating information, and sensitizing and educating society in general, on the legal support for interventions which seek to reduce violence against women in the home and propose its recognition as a public health problem, as well as a human rights violation.

RISKS:

There is a risk that changes in government administrations could lead to destabilization of project execution, and it is hoped that this risk can be mitigated through the contracting of national

coordinators with a good technical profile who are not associated with partisan changes.

At the sociocultural level, there would be a risk of encountering resistance to a change in the cultural foundations that serve to perpetuate family violence. It is hoped that this risk can be mitigated through the educational and sensitization activities planned. It is also hoped that the presentation of the video produced with funds from technical-cooperation project TC-96-05-47-1-RG will make the issue more visible and have a significant impact in terms of sensitizing the audience.

There is a risk that the attention model implemented in the selected localities will not be reproduced later at the national level. It is hoped that this risk can be mitigated during execution, by making the successful results of actions very visible, and thus demonstrating that there are ways of attending to and preventing the problem of family violence against women.

RESPONSIBILITY:

Basic responsibility for the operation would lie with the Regional Technical Cooperation Division (INT/RTC) of the Integration and Regional Programs Department. Technical responsibility would lie with the Women in Development Unit (SDS/WID) of the Social Programs and Sustainable Development Department.

I. BACKGROUND

A. Current situation

- 1.1 Violence against women has a high economic and social cost for the governments of the Region and can become a barrier to socioeconomic development. Some studies estimate that sexual and physical abuse of women lowers their income by between 3% and 20% because of their impact on academic achievement and on health, which in turn affect their working lives.
- 1.2 It is only recently that this problem has been recognized by governments and international agencies, being included in some countries in public health policies and legal and judicial reform. The magnitude and importance of this topic was amply discussed during the recent World Conference on Women held in Beijing, and priority has been given to it in the plan of action.
- 1.3 In 1993, the United Nations General Assembly approved a Declaration on Violence against Women which defines it as "any act of violence based on gender which results, or can result, in physical, sexual, or psychological harm or suffering to women, including the threat of said acts, coercion, or arbitrary deprivation of liberty, which occurs either in public or in private life" (Economic and Social Council, 1992). In 1994, the 24th regular session of the OAS General Assembly approved the Belém do Pará Convention to prevent, sanction, and eradicate violence against women. Among the countries signing the Convention were Argentina, Brazil, the Dominican Republic, and Venezuela.
- 1.4 In recent years, legitimacy has been given to the concept of "gender violence", which refers to the violence suffered by women in different segments of society on account of social discrimination. For analysis purposes, this type of violence has been broken down into sexual violence and domestic violence. The first includes the crimes of rape, sexual abuse of minors, statutory rape, and harassment. Domestic violence against women, also called family violence, covers a variety of violent acts perpetrated against a female family member in daily or chronic fashion, including beatings and a variety of attacks of a psychological, physical, and sexual nature.
- 1.5 It is recognized that the causes of violence which men perpetrate against women in their family relations are intimately linked to cultural and social factors, which determine both the acceptable behavior of individuals in society and the legal and statutory frameworks which govern these behaviors. Little boys learn that males are dominant and that violence is an acceptable means of asserting power and resolving conflicts, while little girls learn to tolerate and avoid attacks. Violent men do not need to justify their acts, because they assume that they are exercising their male

rights to guarantee their position of control. This explains why the aggressor in the home is mainly a man and the victim a woman.

- 1.6 Traditionally, health specialists have paid little attention to the violence perpetrated daily against women in the home environment and tend to accept this type of violence as natural, minimizing or paying scant attention to violent incidents which they witness. However, family violence has significant repercussions on the physical and mental health of the women who experience it. In addition to injuries, miscarriages, and even death, victims suffer from chronic stress and, as a consequence, from diseases such as hypertension, diabetes, asthma, and obesity. Frequently, as a result of abuse, both physical and psychological, victims suffer chronic headaches, sexual malfunctions, depression, phobias, and continuing fear. Likewise, they typically have low self-esteem which directly affects their behavior and their productivity at work, as well as their ability to defend themselves and to report what is happening to them.
- 1.7 There is agreement among specialists on the high degree of under-reporting of cases of family violence as a result of the state of fear and shame which grips the persons affected, because many consider that it is normal for this to happen to them, and consequently they do not ask for help or report the case. On the other hand, the rare cases which reach the court system encounter obstacles from a system which lacks sensitivity to the importance of this problem. For example, some countries demand a report issued by forensic medical specialists. These professionals are not easy to contact, are few in number, and lack the necessary sensitivity and training to deal with victims. It has been found that in those countries where a forensic specialist is not required to investigate the crime and where appropriate facilities have been opened, the reporting of cases of violence is proportionately greater. For example, in Mexico City, there was a significant increase in reporting following the opening of the Centro de Atención a la Violencia Intrafamiliar (CAVI) [Center for Dealing with Family Violence], under the Office of the Attorney General. In 1992, the center saw approximately 6,000 cases and in 1994, more than 9,000.
- 1.8 Some 45% to 60% of murders of women occur in the family context, and in the majority of cases the aggressor is the victim's partner. Minors in homes where the wife is beaten suffer more frequently from physical abuse, and in turn have increased probability of abusing their partners when they grow into adulthood. A study in Argentina indicates that 81% of aggressors and 21% of victims come from families where the mother was beaten by her partner.
- 1.9 Important progress has been made in interventions to prevent and attend to cases of violence against women, many of which are attributable to the work of the women's movement in the countries

of the Region. There are initiatives by NGOs which give psychological and legal assistance to women in their offices or in other cases, on the telephone and with little coordination among them. Thus, for example, in Argentina there are more than 76 NGOs offering some type of response to this problem, although they say they are not sufficiently effective, given the degree of to which their efforts are fragmented. Aware of this problem, some countries have begun to coordinate actions. For example, in Argentina and Paraguay, the offices responsible for women's issues have entered into agreements with the police to encourage coordinated actions for prevention of and attention to this problem. In the case of Mexico, a cooperation agreement was signed in 1989 between the Ministry of Health and the Office of the Attorney General in order to implement a program of legal and health services for the victims of sexual crimes in the Federal District.

- 1.10 Another important effort by the women's movement has consisted of securing legal support for the protection of victims. Laws have been passed in Argentina, Brazil, the Dominican Republic, and Mexico, although in most of these countries the resources to publicize and enforce them are lacking. In Venezuela and Paraguay, there are bills before the national congress waiting to be approved and lobbying efforts are needed to bring about their approval.

B. The Bank's strategy and experience

- 1.11 The nature and purposes of this operation coincide with the Bank's basic objectives under the Eighth General Increase in Resources: reducing poverty, seeking social equity, and improving the people's quality of life. As well, this operation will provide the opportunity to support, as beneficiaries, a segment of the population considered deserving of high-priority attention pursuant to the Bank's operations policy on women in development (1987), and will enable the Bank to be part of an innovative initiative to confront a problem which has been neglected up to now by the different sectors, particularly health. This project falls within the process of decentralization, support for civil society, and reform of the health and judicial sectors in the countries of Latin America and the Caribbean; and as a pilot project, it will offer lessons which may be replicated later in other Bank operations.
- 1.12 There are other Bank initiatives aimed at preventing and attending to family violence against women: (i) Regional technical-cooperation project ATN/SF-5317-RG, entitled "Video as a means of sensitizing public opinion to domestic violence against women", which was recently approved, will supply a video to sensitize public opinion and those making political decisions to the social and economic cost which this problem represents for countries' development. The video will be presented by means of a television broadcast in a group of selected countries, including the six in this project, and will be accompanied by public discussion in which the magnitude of the problem at the national level will be

emphasized. (ii) Regional technical-cooperation project TC-96-03-09-5-RG, entitled "Legal education: Towards a jurisprudence of equality", which is currently being developed, has as its aim to improve the capacity and ability of judges to resolve cases of violence against women in the courts of Argentina, Brazil, Chile, Ecuador, and Uruguay, as well as to sensitize other sectors concerned with the administration or teaching of justice.

C. Programs being executed by other institutions

- 1.13 PAHO has recognized that violence against women is a public health problem and is an issue that must be given high-priority attention. Accordingly, under its Women, Health, and Development (WHD) program, PAHO has begun to implement its project concerned with domestic violence against women in 10 countries of the Region. In all the countries, the evaluation study has been completed and the remaining activities have been begun, including the formation of attention networks with the participation of the health sector. It is hoped that through PAHO's cooperation, the advances made in its project will have an impact on the execution of the IDB project now being proposed, making it possible to reproduce positive outcomes and avoid negative ones.

II. OBJECTIVES

- 2.1 The proposed regional technical-cooperation project has as its objectives: (i) to establish and test models of effective response on women who are victims of violent acts in their relationships with their partners; (ii) to characterize and estimate potential demand in preliminary fashion; and (iii) to educate the population on the issue of family violence and its impact on society. All this has as its aim to help reduce the incidence of family violence against women.

III. DESCRIPTION

A. The program

- 3.1 A pilot program will be implemented in six countries of the Region, which will help systematize information and facilitate the exchange of information and experiences among them. The countries participating in the program will be Argentina, Brazil, the Dominican Republic, Mexico, Paraguay, and Venezuela. The countries included in this project are those which have shown interest in receiving support to carry out activities designed to attend to and prevent domestic violence against women, but have not been beneficiaries of

the PAHO project being mounted in Central America, Bolivia, Ecuador, and Peru.

- 3.2 As a response, the Bank has designed the pilot project described above, which will be executed over two and a half years and will enable both the Bank and the countries to learn lessons from, and compare the results of, the actions taken. These lessons will, to the extent possible, be reproduced in other cities in the same country as well as in other countries of the Region. As well, it is expected that the Bank will consider the results of this pilot project in future operations in the areas of health, education, and law reform.
- 3.3 Because responsibility for attending to the victims of violence has been borne mainly by those NGOs whose focus is on providing assistance to women, and because the public sector has taken a long time to recognize that this is not only a social problem but also a public-health problem, the program has been formulated so as to involve both the public and private sectors, and test out an inter-sectoral attention model. Given that education, and heightened awareness on the part of both the population at large and public officials, are recognized as being of key importance in assuring the success of an effort in this area, a communication component has been included as well.
- 3.4 The activities whereby the objectives of this project will be achieved in each country have been grouped under two components: (i) attention and prevention component; and (ii) communication component.

B. Attention and prevention component (US\$2,506,000)

- 3.5 The aim of this component is to improve both the isolated attention which today is being offered to women who suffer acts of family violence and the measures which exist to prevent this problem. This is the key component of this project and that which will produce the knowledge needed to implement effective measures for attending to victims at the national and regional level. Each country will select at least one locality, using socioeconomic criteria, to carry out the activities envisaged in this component (see details by country in Annexes I to VI), where an attention model coordinated at the interinstitutional and multisectoral level will be tested and preventive measures promoted.
- 3.6 Some basic criteria were defined for the selection of localities: (i) presence of a health center with no more than 100 beds, so as to facilitate monitoring and evaluation of interventions; (ii) undertaking of by the head of the health center to participate actively in the attention network; (iii) willingness by the members of the attention network to adapt their recording system and send the information monthly to the person responsible for the database; and (iv) local presence of governmental and nongovernmental

agencies providing attention, whether medical, police, legal, psychological, or of another type.

- 3.7 Situation assessment. In order to define the activities of this component more precisely and set evaluation parameters during the first three months of execution, a situation assessment will be carried out in each selected locality, under the heading "critical path of women affected by family violence". This assessment makes no claim to quantifying the magnitude of the problem at this level, for obvious reasons. Its objectives are: (i) to learn what action has been taken by persons affected by family violence and the course they have followed in seeking attention for and a solution to their problems; (ii) to learn what factors foster or hinder the initiation of a critical path, in the case of women affected by family violence; (iii) to learn how the persons affected by family violence perceive the responses encountered in their search for help and a solution to their problems of violence; and (iv) to investigate social attitudes and the responses of service providers concerned with family violence.
- 3.8 The specialists hired to conduct the assessment (see Annex VII) will participate in a preparatory regional workshop, where they will be given precise instructions on the methodology and its application. The information needed for the assessment will be obtained from the following sources: (i) suppliers of services; (ii) documents recording cases of family violence in institutions; (iii) female and male population in the community; and (iv) women affected by family violence who have taken some steps to seek support. Beginning with the results of this assessment, recommendations will be prepared for the development of a model of attention to and prevention of family violence (Annex VIII describes the detailed protocol for conducting this assessment).
- 3.9 The activities planned towards achieving this objective are the following:
 1. Attention and referral system
- 3.10 In the fourth month of execution, an attention and referral model for victims of family violence coordinated at the interinstitutional and multisectoral levels will be designed and implemented. The consultant responsible for designing the system in question (see Annex IX) will use the results of the situation assessment of the different sectors and of the NGOs and the perception of women affected by family violence with respect to the attention offered them. As part of the attention and referral model, one month after execution begins, the project will promote the creation or strengthening of intersectoral relations, called Attention Networks, in each of the localities.
- 3.11 The networks will include, *inter alia*, representatives of the health sector, the judicial system and the police, the education

sector, the Church, the media, and local civil organizations, in particular those concerned with the well-being of women who suffer violence. Given the significant interaction of the health sector with women, this sector will assume a role as catalyst in promoting and strengthening multisectoral efforts to deal with the problem of violence. The creation of these networks, in addition to permitting an exchange of experiences and knowledge and the supplying of information which will be systematized to provide tools which can lead to planning and optimization of actions and resources, also seeks to improve the attention and prevention offered by their constituent public and private agencies. It is seen as important that agencies providing services coordinate their activities and have the capacity to refer victims to another center, with the assurance that the required service will be provided.

- 3.12 Likewise, within the design of the attention model, mechanisms will be identified to overcome the obstacles represented by compulsory reports by forensic medical specialists. For this purpose, legal requirements, local customs and practices will be studied in the different countries, examining the interaction between the medico-legal system and the judicial system.

2. Training plan

- 3.13 Responding to the result of the situation assessment, in the course of the first five months of execution, the specialist responsible (see Annex X) will design and implement a training plan for executive, administrative, and working personnel of the health centers making up the attention networks, concerning domestic violence, its manifestations, and proper procedures for its detection and recording. Likewise, the plan will include training of judges, prosecutors, police, psychologists, and all other professionals who work in the agencies making up the networks, through which tools will be provided to improve the attention given to victims.
- 3.14 As a result of training activities, specialists in health centers, judges, prosecutors, and police will create openings to listen to and attend to women and refer them to the agencies which can offer them support and thus change the situation of violence. For this reason, those responsible for project coordination will provide ongoing follow-up to the selected health centers, police stations, prosecutor's offices, and courts, so that personnel can gain confidence and be sure of properly applying the concepts and tools provided in the training processes.
- 3.15 With a view to improving the quality of psychological care provided by network professionals to victims in some localities, the training offered will include the introduction of therapeutic techniques which are successful in terms of reducing the incidence of violence in the home. For example, the services of NGOs with experience in therapy to treat victims and violent men will be contracted, to

enable them to pass on their experiences and train professionals in their country or others, if this is required.

- 3.16 In activities to train community health agents in the selected localities – for instance promoters and unlicensed midwives who have direct contact with the community – a special module on violence will be included, so that they can disseminate information and identify and refer cases.

3. Recording and information system

- 3.17 A specialist will be contracted (see Annex XI) to design and implement a uniform, centralized system for collection of data on violence against women located in the health center of the attention network, for the purpose of systematizing information on cases of violence and determining the relationship between the violence suffered by women and the effects on their health and daily activities. The system will be in operation four months from the beginning of execution. File cards will be designed for completion by the professionals in the health and other centers providing attention making up the network, which will not substantially increase the workload of the service provider but will nonetheless make it possible to identify the characteristics of each case and the type of attention provided.
- 3.18 These file cards will enable the professionals to follow up on cases, although these cases will be entered in the database anonymously. A person responsible for maintenance of a database will be contracted (see Annex XII), and will maintain the information collected by the agencies making up the attention network, including the health centers, courts, and police stations. Key officials in the agencies will be trained to properly record information on the causes, frequency and consequences of family violence against women. A procedure will be established for the cards recording the cases seen to be delivered each month to the person responsible for the database.

4. Pilot communities

- 3.19 The aim of this activity is to test attention and prevention interventions in a community close to the health center belonging to the attention network, no later than five months from the beginning of execution. In turn, the work and contact with the community will help to identify the factors which most frequently have an impact on family violence against women and will permit consultations to verify the results of activities. The local coordinator will ensure that the community receives information on the project and that the members of the attention network talk with men and women about the problem of family violence, its consequences, women's rights, and the services to which they may have recourse if they need help.

- 3.20 In addition, the services of professionals belonging to the network will be contracted to set up support and discussion groups, to encourage an examination of these problems. Where capacity exists, group therapy will be offered for victims and violent men, and peer-group training will be encouraged; this will consist of identifying and training men in the selected community who will then sensitize those of their friends who are guilty of violent behavior towards their wives. Some of these activities will be carried on both in health centers and in the communities.

C. Communication component (US\$369,000)

- 3.21 In each country a communication model (see Annex XIII) will be designed and implemented four months after the start of the execution period, to serve as support for the execution of the attention and prevention component. The aim of this component is to create an awareness of family violence against women among the authorities and the general population and change their socio-cultural behavior patterns in dealing with this problem. The activities of this component seek to prevent family violence and deprive it of legitimacy, and to break the cycle which perpetuates patterns of violence from generation to generation.
- 3.22 These activities will be carried out essentially at the national level and in the localities selected for implementation of the attention and prevention model. Actions will be taken to encourage primarily the education, health, and justice sectors to coordinate the adoption of measures designed to prevent acts of family violence against women.
- 3.23 Among other activities, which will be defined with greater precision after the situation assessment, the following will be carried out:

1. Communication strategy

- 3.24 Work will begin in the fifth month of execution on designing a communication strategy, aimed at waging an information campaign to demonstrate the magnitude of the problem at the national level and to produce attitudinal changes in public opinion. Part of this strategy will include the use of the video and advertising spots which the Bank will provide through regional technical-cooperation project ATN/SF-5317-RG, and support materials will be produced such as posters and pamphlets for publication and for distribution in health centers, courts, police stations, and other centers frequented by women.

2. Sensitization

- 3.25 As part of the activities aimed at sensitization to the issue of family violence, at least two national and two local meetings will be held, in which the background, progress, and results of the

pilot experiment will be presented and discussed with authorities and representatives of the different sectors.

- 3.26 Likewise, events will be held to sensitize the following to the problem and its legal aspects: (i) key media personnel, (ii) officials of the Ministry of Health, especially those in national health prevention and promotion programs, (iii) members of the national congress, (iv) judges, (v) prosecutors, (vi) police, (vii) teachers, (viii) professors, and (ix) public opinion in general. This will enable the prejudices and stereotypes which legitimize violence to be counteracted.

3. Dissemination of laws

- 3.27 Support will be given to initiatives aimed at promoting laws or legislative proposals concerned with family violence in the national congress and publicizing them nationwide, recognizing the importance of legal support in pursuing the various activities aimed at preventing and attending to the problem.

D. Regional activities

- 3.28 The central aim of this component is to monitor and evaluate the activities from a regional perspective, thus permitting systematization of the results and the lessons learned. Two regional meetings will be held with those responsible for coordination of the project in the six countries. The first will be held when all the countries have the results of the situation assessment in hand - that is, after the third month of execution. The purpose of this meeting will be to exchange knowledge and experience in attending to the problem of violence against women and in programs to counter it.
- 3.29 Innovative programs and human resources will be identified in some countries, with a view to strengthening the capacity for attention and introducing preventive measures in other countries. During this meeting, the results of the situation assessment of all localities will be discussed. Upon completion of the project, a second meeting will be held, the purpose of which will be to present the results of the intervention in the six participating countries in comparative fashion and systematize the information and the lessons learned from this experience at the regional level.

E. Sustainability

- 3.30 Execution of the activities of the communication component of the project will create a national awareness in the population of the magnitude of the problem and its impact on society, providing information on the types of services existing in the different cities and towns in the country. These informative and sensitizing measures are expected to result in an increase in demand which the government will have to meet in coordination with the organizations

which up to now have been attending to the problem in isolated fashion, so as to take on the financial and logistical commitments necessary to ensure that the actions in question proceed on a continuing and sustainable basis.

- 3.31 Health sector authorities in the participating countries have become aware of the need to introduce measures to prevent and attend to this serious problem. The interest in executing this project is in response to the search for an efficient way of intervening. Thus, if the pilot project interventions prove efficient, the authorities have indicated that they will be repeated on a national scale.

F. Execution

- 3.32 The program consists of one regional component and six country components. The Bank will execute the regional component of the proposed operation. The six country components will be executed by specialized agencies in each country. Basic responsibility for the operation will lie with the Regional Technical Cooperation Division (INT/RTC) of the Integration and Regional Programs Department. Technical responsibility will lie with the Women in Development Unit (SDS/WID) of the Social Programs and Sustainable Development Department.
- 3.33 The Bank will contract an agency or institution specializing in this area to execute regional actions and coordinate activities at the country level. The evaluation activities will be contracted directly by the Bank, using independent consultants.
- 3.34 The specific actions in the countries will be carried out by the following agencies and ministries: (i) Argentina: Office of the Under Secretary for Prevention Programs of the Ministry of Health and Social Action [Subsecretaría de Programas de Prevención del Ministerio de Salud y Acción Social]; (ii) Brazil: National Council on Women's Rights of the Ministry of Justice; (iii) Mexico: Health Promotion Division of the Ministry of Health [División de Promoción de la Salud de la Secretaría de Salud]; (iv) Paraguay: Women's Secretariat [Secretaría de la Mujer]; (v) Dominican Republic: National Bureau of Planning [Organización Nacional de Planificación]; and (vi) Venezuela: National Council on Women [Consejo Nacional de la Mujer]. The executing agencies will adhere to the Bank's procedures for letting contracts for goods and services.
- 3.35 Execution of this operation will take place over a period of two and a half years with the active participation of governmental and nongovernmental organizations with experience in attending to and taking action to prevent this problem, as well as the selected communities.

- 3.36 Coordination of the project will be carried out at three levels, in accordance with the execution timetable (see Annex XIV):

1. Regional coordination

- 3.37 Regional coordination will be assured through a regional project coordinator in Washington, with support from the Bank's Country Offices. The purpose of this coordination is to provide continuous follow-up, from the preparatory activities until execution is complete, as well as to systematize and disseminate the results obtained from this pilot experiment to the Bank, PAHO, and the various countries participating in the project. The coordinator's duties are described in Annex XV.

2. National coordination

- 3.38 National coordination will be assured through a coordinator in each beneficiary country, and will be the responsibility of the Ministry of Health, Ministry of Planning, or Office for Women as applicable, depending on the decision taken by each country (see Annexes I to VI). The duties of the coordinator are described in Annex XVI. All the countries will have a consultant working full-time on national project coordination, with the exception of Argentina and Brazil, where the pilot intervention will be carried out solely in localities outside the capital, in which there is a local coordinator. In these cases, the consultant will have a medium-term contract to carry out follow-up and monitoring of activities at the national level and ensure execution of the Communication component. A key responsibility of the coordinator will consist in verifying that the proposed changes to the "attention model" are implemented opportunely and adequately by the professionals of the agencies making up the network.

3. Local coordination

- 3.39 In the countries where the project is being executed in a locality outside the capital, as is the case of Argentina, Brazil, Mexico and Santo Domingo, a consultant will be contracted in that locality to ensure local coordination. The coordinating bodies at the local level, as is the case of the national ones, will vary depending on the country (see Annexes I to VI) and will be supported by women's organizations, governmental and nongovernmental, with experience in women's issues, in community development and in training in gender, health and violence. Each local coordinator, as in the case of the national ones, will be selected according to the attached terms of reference (Annex XVII) and the procedures established by the Bank. He or she will work in close cooperation with the national coordinating office, reporting on activities and results.

4. Advisory committee

- 3.40 The advisory committee is a body which will be set up in each country to advise the project coordinators at the national level. It will be made up of representatives from: (i) the Ministry of Health; (ii) the Ministry of Justice; (iii) government offices responsible for women's issues; (iv) NGOs concerned with the problem; (v) the PAHO mission in the country; and (vi) an academic body with broad experience in the field. There will be some degree of variation by country, as indicated in Annexes I to VI, since some countries believe that the Planning Ministry and/or members of congressional committees charged with promoting the law on family violence should also be involved. The purpose of this committee is to advise the national coordinators, so that multisectoral activities are implemented in coordinated fashion and receive the support required for the success of the program.

5. Coordination with PAHO

- 3.41 Close cooperation with PAHO is planned during the program execution period. For this purpose, PAHO, making use of its experience acquired in the execution of similar projects in the Region, has indicated its willingness to provide support in the following areas: (i) situation assessment (2 consultants/6 months); (ii) design of file cards for recording data in the records and information system (1 consultant/3 months); (iii) design of training workshops; and (iv) monitoring of the project at the regional level. The resources needed for these activities have already been committed by PAHO.

G. Follow-up and reports

- 3.42 The report containing the results of the situation assessment carried out in each locality selected for execution of the pilot experiment will be used for purposes of planning activities, and these will be analyzed every six months on the basis of the results presented by the national coordinators in their follow-up report.
- 3.43 The regional project coordinator will deliver the following reports to the Bank, which will be subject to Bank approval (see Annex XV):
- a. The initial report, to be submitted within one month after signature of the contract, which will present the tentative working plan and the timetable of activities for the next six months;
 - b. Semiannual reports on the progress made in carrying out the activities, including the difficulties encountered and the solutions found.
 - c. The final report, which will include lessons learned and recommendations for improving or repeating interventions in other

countries in a successful manner. Specifically, it will make recommendations to the Bank on incorporating interventions which have proven effective in the different sectoral projects.

3.44 The national coordinators must submit the following reports to the Bank (see Annex XVI):

- a. Semiannual progress reports, which should describe the process of execution at the national and local levels, identifying the problems encountered and ways of solving them. The reports must be submitted within 60 days after June 30 and December 31, and once a methodology for program evaluation is in place, this must be incorporated into subsequent progress reports. Using the management indicators mentioned in Annex XIX, these reports must specify the process of implementation of each component and should contain sufficient details to evaluate both the progress of activities charged to the technical-cooperation funds and the local contribution, and the problems encountered in achieving objectives. The second semiannual report for the first year should contain an action plan and a timetable for the final year of execution, which will be subject to Bank approval.
- b. The final report will include the results of the project evaluation at the national and local levels, as well as recommendations for strengthening the model and identifying mechanisms to give continuity to the model implemented locally.

3.45 The consultants who coordinate execution at the local level must submit the following reports (see Annex XVII):

- a. The initial report, to be submitted within three months following signature of the respective contract, which will indicate the progress of activities carried out for situation assessment, the agreements entered into, and the results of the research. This report will also include a tentative work plan for the first-year activities, including a timetable.
- b. Semiannual reports. The first will indicate contacts and agreements entered into for execution of the sensitization and training plan, as well as the actions taken and envisaged for community development and all the other activities planned. The second, with follow-up and results, will describe the problems encountered, lessons learned, and action plan for the final year of execution. It will be presented at the yearly national meeting. The third report will focus on follow-up and results.
- c. The final report will include results and recommendations for strengthening the attention and prevention model.

H. Cost and financing

- 3.46 The total estimated cost of the project would be US\$3,356,000, with the Bank contributing the equivalent of US\$2,875,000 on a non-reimbursable basis from the net income of the Fund for Special Operations (FSO) in local currency and foreign exchange: US\$550,000 for Argentina, US\$550,000 for Brazil, US\$325,000 for the Dominican Republic, US\$550,000 for Mexico, US\$325,000 for Paraguay, and US\$325,000 for Venezuela; plus US\$250,000 in convertible currency.
- 3.47 The local counterparts will be US\$69,000 for Argentina, US\$77,000 for Brazil, US\$51,000 for the Dominican Republic, US\$90,000 for Mexico, US\$116,000 for Paraguay, and US\$78,000 for Venezuela, for a total of US\$481,000 (see general budget contained in Annex XVIII).
- 3.48 The application of the funds making up the Bank's contribution, by component of the proposed program and by country, is detailed below:

BUDGET BROKEN DOWN BY COMPONENT AND BY COUNTRY
Bank investment

Country	Component 1 Attention/Prevention	Component 2 Communication	Total
Argentina	482,000	68,000	550,000
Brazil	479,000	71,000	550,000
Dominican Republic	284,000	41,000	325,000
Mexico	495,000	55,000	550,000
Paraguay	280,000	45,000	325,000
Venezuela	269,000	56,000	325,000
Regional [*]	217,000	33,000	250,000
TOTAL	2,506,000 (87%)	369,000 (13%)	2,875,000 (100%)

[*] FSO convertible currency.

[**] The full budget, broken down by component and investment category, is contained in Annex XVIII.

- 3.49 The difference in the proportions of the counterpart contributions is due to the different degrees of progress of the programs which would provide support for the proposed program in each of the countries, and to the fact that the program takes into consideration

the different levels of costs of similar goods and services in each country.

3.50 Below is the estimated table of costs for the proposed operation:

TABLE OF COSTS (US\$ equivalent)

Categories	IDB	Local	Total
Attention and prevention component	2,506,000	361,000	2,867,000
Specialized institutions	440,000	68,000	508,000
Individual consultants	1,219,000	55,000	1,274,000
Participants	219,000	67,500	286,500
General support	401,000	138,000	539,000
Publications	48,000		48,000
Contingencies	179,000	32,500	211,500
Communication component	369,000	120,000	489,000
Specialized institutions	110,000	55,000	165,000
Individual consultants	41,000		41,000
Participants	111,000	58,000	169,000
Publications	47,000		47,000
Contingencies	60,000	7,000	67,000
TOTAL	2,875,000 (86%)	481,000 (14%)	3,356,000 (100%)

[*] FSO convertible currency.

[**] The full budget, broken down by component and investment category, is contained in Annex XVIII.

IV. EVALUATION AND FOLLOW-UP

4.1 There will be monitoring, follow-up, and evaluation of the proposed program. The program monitoring and follow-up activities will be carried out by the national and local coordinators under the supervision of the regional coordinator.

- 4.2 Insofar as program evaluation is concerned, a methodology and a plan will be designed for this purpose at the regional, national, and local levels. Some management-by-objectives indicators have been designed for the components and activities (see Annex XIX), which will be improved when the results of the situation assessment are obtained, permitting the activities to be defined with greater precision. Also to be taken into consideration are the indicators and results of the evaluations carried out by PAHO in the countries where it is implementing its project to counter domestic violence. It is expected that the evaluation plan will be ready in the fourth month of project execution.
- 4.3 A specialist will be contracted to design an evaluation methodology and implement the plan for carrying out the evaluation, which will review the indicators proposed in Annex XIX. Following the field visits, the specialist will deliver two reports, as indicated in the terms of reference (see Annex XX); these reports should contain the results of the intermediate regional evaluation and the final evaluation. The first report is the intermediate regional evaluation report, to be prepared 15 months from the beginning of the execution period. The activities planned at the regional level will be evaluated in relation to objectives and using the revised management indicators in the six countries making up this project. The results of this evaluation will permit adjustments to improve the activities carried out during the second year of execution.
- 4.4 The report will provide results both by country and in consolidated form and, in cases where the activities have failed, indicate the explanations identified. The second report is the final regional evaluation report, to be prepared within 90 days following completion of the program in all the countries: it will assess the activities planned at the regional level vis-à-vis project objectives. The report will provide results both by country and in consolidated form and, in cases where the activities have failed, indicate the explanations identified. The regional evaluator must submit a report with the results no later than 60 days following the return of the evaluation mission. The report will be discussed at the last regional meeting.

V. BENEFITS AND RISKS

A. Benefits

- 5.1 The project proposed herein will, over the long term, make it possible to improve the living conditions of women, families, and society, to increase productivity, and to reduce hospital and emergency-room costs as well as costs for intervention by the legal system, police, and special shelters. As well, it will enable the Bank to gain experience in dealing with the issue of violence so

that in the near future it can incorporate this concern into its projects in such areas as health, government reform, civil society, and education. The project will also yield the following specific benefits:

- a. Coordinating and optimizing the interventions of different sectors of government and civil society, improving the quality of assistance to victims of family violence.
- b. Promoting the political commitment needed to institutionalize the program.
- c. Making the problem of family violence visible in the participating countries and exchanging experiences and knowledge in the area, at both the national and international levels, once reliable information is obtained which makes it possible to know with greater precision the incidence and the effect of violence on women's health.
- d. Disseminating information, and sensitizing and educating society in general, on the legal support for interventions which seek to reduce violence against women in the home and propose its recognition as a public health problem, as well as a human rights violation.

B. Risks

- 5.2 There is a risk that changes in government administrations could lead to destabilization of project execution, and it is hoped that this risk can be mitigated through the contracting of national coordinators with a good technical profile who are not associated with partisan changes.
- 5.3 At the sociocultural level, there would be a risk of encountering resistance to a change in the cultural foundations that serve to perpetuate family violence. It is hoped that this risk can be mitigated through the educational and sensitization activities planned. It is also hoped that the presentation of the video produced with funds from technical-cooperation project ATN/SF-5317-RG will make the issue more visible and have a significant impact in terms of sensitizing the audience.
- 5.4 There is a risk that the attention model implemented in the selected localities will not be repeated later at the national level and that as a result the project would not be sustainable. It is hoped that this risk can be mitigated during execution, by making the successful results of the interventions very visible to demonstrate that there are ways of attending to and preventing the problem of family violence against women.

OVERALL BUDGET BROKEN DOWN BY COMPONENT AND COUNTRY

Component	Argentina		Brazil		Mexico		Paraguay		Dominican Republic		Venezuela		Regional	
	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	IDB
	482,000	58,000	479,000	56,000	495,000	68,000	280,000	78,000	284,000	34,000	269,000	67,000	217,000	2,506,000
	80,000	20,000	80,000	5,000	80,000	18,000	85,000	12,000	55,000	10,000	60,000	3,000	0	440,000
	70,000	20,000	75,000	5,000	70,000	18,000	80,000	12,000	50,000	10,000	50,000	0	0	395,000
	10,000	0	5,000	0	10,000	0	5,000	0	5,000	0	10,000	3,000	0	45,000
	183,000	0	226,000	5,000	254,000	0	108,000	20,000	148,000	0	111,000	30,000	189,000	1,219,000
ation	117,000	0	128,000	0	109,000	0	51,000	20,000	78,000	0	63,000	30,000	150,000	696,000
	47,000	0	52,000	5,000	112,000	0	40,000	0	54,000	0	37,000	0	6,000	348,000
	19,000	0	46,000	0	33,000	0	17,000	0	16,000	0	11,000	0	33,000	175,000
	43,000	13,000	53,000	13,000	44,000	12,000	23,000	12,000	23,000	7,000	33,000	10,500	0	219,000
tion	10,000	10,000	10,000	10,000	10,000	10,000	5,000	10,000	5,000	3,000	20,000	10,500	0	60,000
	30,000	0	40,000	0	30,000	0	15,000	0	15,000	0	10,000	0	0	140,000
	1,000	1,000	2,000	2,000	3,000	1,000	1,000	1,000	2,000	3,000	1,000	0	0	10,000
	2,000	2,000	1,000	1,000	1,000	1,000	2,000	1,000	1,000	1,000	2,000	0	0	9,000
ort	66,000	17,000	100,000	23,000	98,000	29,000	39,000	34,000	48,000	17,000	50,000	18,000	0	401,000
nt	5,000	2,000	10,000	2,000	15,000	3,000	5,000	1,000	8,000	4,000	5,000	0	0	48,000
	40,000	9,000	50,000	13,000	40,000	11,000	20,000	28,000	25,000	10,000	30,000	3,000	0	205,000
er	5,000	0	6,000	0	8,000	0	4,000	0	5,000	0	5,000	0	0	33,000
staff	6,000	3,000	14,000	4,000	15,000	5,000	5,000	5,000	4,000	2,000	5,000	10,000	0	49,000
i-	10,000	3,000	20,000	4,000	20,000	10,000	5,000	0	6,000	1,000	5,000	5,000	0	66,000
	10,000	0	10,000	0	10,000	0	5,000	0	5,000	0	5,000	0	3,000	48,000
s	100,000	8,000	10,000	10,000	9,000	9,000	20,000	0	5,000	0	10,000	5,500	25,000	179,000

ment	Argentina		Brazil		Mexico		Paraguay		Dominican Republic		Venezuela		Regional	
	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	Local	IDB	IDB
ment	68,000	11,000	71,000	21,000	55,000	22,000	45,000	38,000	41,000	17,000	58,000	11,000	33,000	369,000
	20,000	0	20,000	5,000	20,000	10,000	15,000	30,000	15,000	10,000	20,000	0	0	110,000
	10,000	0	15,000	5,000	10,000	10,000	10,000	30,000	10,000	10,000	10,000	0	0	65,000
	10,000	0	5,000	0	10,000	0	5,000	0	5,000	0	10,000	0	0	45,000
	7,000	0	4,000	0	7,000	0	6,000	0	4,000	0	5,000	0	8,000	41,000
	7,000	0	4,000	0	7,000	0	6,000	0	4,000	0	5,000	0	8,000	41,000
	20,000	11,000	28,000	11,000	18,000	12,000	9,000	8,000	16,000	7,000	20,000	9,000		111,000
	10,000	10,000	10,000	10,000	10,000	10,000	5,000	6,000	5,000	3,000	10,000	9,000		50,000
	8,000	0	14,000	0	5,000	0	2,000	0	9,000	0	8,000	0		46,000
	1,000	0	2,000	1,000	2,000	1,000	1,000	1,000	1,000	3,000	1,000	0		8,000
ion	1,000	1,000	2,000	0	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0		7,000
	10,000	0	10,000	0	10,000	0	5,000	0	5,000	0	5,000	0	2,000	47,000
	11,000	0	9,000	5,000	0	0	10,000	0	1,000	0	6,000	2,000	23,000	60,000
country	550,000	69,000	550,000	77,000	550,000	90,000	325,000	116,000	325,000	51,000	325,000	78,000	250,000	2,875,000

MANAGEMENT INDICATORS

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
<p>ectives. The of the eration is to e problem of inst women he six coun- o exchange and informa- regional objectives gn and test For responding vis-à-vis offer acts of a preselected o establish a characteriza- timate of the emand, and to population phenomenon and on society.</p>	<p>a) The problem of violence in the six countries begins to be made visible.</p> <p>b) Statistics on the type and frequency of instances of violence begin to be produced.</p> <p>c) The data collected are used in campaigns to raise awareness and are exchanged with other countries.</p> <p>d) Activities to prevent and attend to violence begin to be incorporated in programs financed by the Bank and other specialized agencies.</p>	<p>- Results of the discussion and analysis by the regional meetings.</p> <p>- Follow-up and evaluation reports.</p>	<p>- The results of from situation assessment are quality and th make it possibl define with p the activities carried out.</p> <p>- All the coord regional, nat local – have a technical pro political supp the performanc their tasks.</p>
<p>and activities</p> <p>les of this egin after he results of on assessment n each mmunity.</p> <p>ion and pre- a component: of violence tended to and tive measures proved.</p>			

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
<p>attention and referral system is established, after multisectoral attention network has been set up.</p> <p>training plan is designed to improve skills of officials in the private and public organizations making up the network.</p>	<p>i) Attention and referral system:</p> <ul style="list-style-type: none"> a) In the initial month of execution, community networks with multisectoral representation will be established. One health center will have been selected in each locality chosen for execution. b) In the fourth month from the beginning of program execution, the attention and referral system will have been designed and implemented. c) The professionals of the agencies participating in the networks systematically and routinely refer the victims of violence to support agencies and record all such cases. d) There are monthly follow-ups of cases of family violence. e) In the fourth month of execution, mechanisms will have been identified for overcoming the obstacles represented by compulsory reports by the forensic medical specialists in those countries where this applies. <p>ii) Training plan:</p> <ul style="list-style-type: none"> a) Four months from beginning execution, a national training plan will have been designed for officials of agencies making up the networks. b) Five months from beginning execution, a special module on violence will have been incorporated into the training which health ministries offer to promoters and unlicensed midwives to improve their capacity for dissemination, and identification and referral of cases. c) Five months from beginning execution, training workshops will have been organized for the agencies making up the network. 	<p>i) Attention and referral system:</p> <ul style="list-style-type: none"> - Number and type of agencies in the networks and guidelines for activities in same. - Report by specialist contracted for design. - Report or agreement on selection of the health center in each locality chosen for execution. - Number of working meetings by the networks, attendance records, and minutes of meetings. - Number of cases attended to, detected, and recorded. - Expert report. <p>ii) Training plan:</p> <ul style="list-style-type: none"> - Agreements with training experts. - Number of training workshops held by sector and by agency. Attendance lists. 	<p>i) Attention and referral system:</p> <ul style="list-style-type: none"> - In each locality for execution are interested making up networks. - The agencies participating in the attention and referral mechanisms carry out the responsibilities agreed amongst them. - Qualified national and local coordinators the necessary have been recruited. - The agencies making up the networks participate in benefit from the training plan. <p>ii) Training plan:</p> <ul style="list-style-type: none"> - Experts have been recruited with necessary skills to prepare the training plan and establish special modules on violence. - The officials of the agencies making up the special modules on violence participate in the training workshops.

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
<p>System for case management and information which can be used with follow-up to identify the factors that have impact on the violence experienced in the community.</p> <p>The community is identified and trained for the purpose of seeing the results of the intervention system and preventive measures.</p>	<p>iii) Recording system:</p> <ul style="list-style-type: none"> a) Four months from beginning execution, a computerized system for recording data on family violence will be in operation. b) Four months from beginning execution, a uniform, centralized system for recording cases of violence has been prepared. c) Five months from beginning execution, training workshops will have been given on information recording to members of the network. d) After six months, the database will be set up and maintained in each locality. e) After six months, the officials of agencies making up the network have the recording file cards and deliver them to the database managers once a month. <p>iv) Pilot community:</p> <ul style="list-style-type: none"> a) Two months from beginning execution, the community is informed about the issue of violence, its consequences, and the rights of women; and six months from beginning execution the professionals who have received training institute actions to attend to the beneficiaries. 	<p>iii) Recording System:</p> <ul style="list-style-type: none"> - File card for entry of data and recording of cases of violence - Clinical history of victims. - Receipt for purchase of computer equipment. - Existence and use of software. - Working report by expert in charge of installing the recording system and training users. - Reports on cases of violence broken down by sector. <p>iv) Pilot community:</p> <ul style="list-style-type: none"> - Consultation or opinions collected in the pilot community on attention given by the health center, police, sources of aid, etc. - Recording of sessions of support, discussion and men's groups in the pilot community. - Number of trained facilitators working. <p>v) Reports:</p> <ul style="list-style-type: none"> - Report and comments of national and local coordinators. - Final report. 	<p>iii) Recording System:</p> <ul style="list-style-type: none"> - The agencies maintain the networks and provide resources to feed the system. - The necessary equipment has been acquired. - An expert has been contracted with necessary experience setting up the recording system and training users. - A person trained to maintain the database and produce reports has been contracted. - The equipment is maintained.

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
<p>ication compo- or creating an ess of the ms of violence t women in the ities and in heral popula- nd changing ultural ns of or. The ties to be d out are:</p> <p>ication</p>	<p>i) Communication:</p> <ul style="list-style-type: none"> a) Five months from beginning execution, a national communication will have been designed. b) Twelve months from beginning execution, the mass media are providing serious information on the problem, through the press, radio, and television c) Eight months from beginning execution, materials, posters, pamphlets, etc. on family violence against women have been prepared and distributed to all the centers making up the network. 	<p>i) Communication:</p> <ul style="list-style-type: none"> - Report of expert in communication strategy - Number of meetings for multi-sectoral sensitization, minutes of meetings and list of attendants. - Results of workshop evaluations - Copies of materials prepared and published. - Materials distributed and placed in waiting rooms of health centers, NGOs, police stations, etc. - Press articles, radio and T.V. programs, educational package, advertising spots. - Video on violence with IDB backing. - Working plan or agreement with experts who will design the communication plan. 	<p>i) Communication:</p> <ul style="list-style-type: none"> - The project is interesting a mass of mass dealing with t - The communication strategy and materials disseminated are well received public opinion the sectors participating in the

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
ization	<p>ii) Sensitization:</p> <ul style="list-style-type: none"> a) Ten months from beginning execution, events will have been held for the purpose of sensitizing mass media personnel, judges, police, prosecutors, and health ministry officials in health prevention and promotion programs in particular, as well as educators, to the magnitude of the problem. b) Twelve months from beginning execution, the first national and local meetings will have been held to analyze the progress and results of the project with authorities in the different sectors. c) One month after completion, the last national and local meetings will have been held to discuss the results of execution and the evaluations. Likewise, mechanisms for continuing the actions in future will have been devised. 	<p>ii) Sensitization:</p> <ul style="list-style-type: none"> - Opinions collected from participants in multisectoral sensitization events. - Minutes of national and local meetings. 	<p>ii) Sensitization:</p> <ul style="list-style-type: none"> - The different recognize the tance of the participate in sensitization - Highly-placed ties and offici participate in events. - Experts with technical pro recruited to communication conduct the m toral sensiti events.
ination	<p>iii) Dissemination:</p> <ul style="list-style-type: none"> a) Six months from beginning execution, initiatives will have been taken to disseminate and/or implement laws in the area of domestic violence. b) Twelve months from beginning execution, the mass media will have presented information on domestic violence in a sensitive, responsible manner. 	<p>iii) Dissemination:</p> <ul style="list-style-type: none"> - Reports of NGO meetings with national congresses. - Minutes of sessions of Congress. - Report of the national and/or local coordinators on the initiatives taken to disseminate and/or implement laws relating to domestic violence. <p>iv) Reports:</p> <ul style="list-style-type: none"> - Reports and comments of local and national coordinators, reflecting the actions and opinions of members of congress, judges, etc. in connection with the issue. - Final report. 	<p>iii) Dissemination:</p> <ul style="list-style-type: none"> - There is politi support and a democratic sys government.

PROGRAM	INDICATORS	CHECKLISTS	ASSUMPTIONS
Regional component Regional meetings are held with those responsible for program coordination in the six (6) participating countries and knowledge and experiences will be exchanged. The results will be presented and discussed in comparative fashion. The information and lessons learned during execution will be systematized.	<ul style="list-style-type: none">- Two regional meetings will have been held: (i) the first in the fourth month from the beginning of execution and (ii) the second three months following the end of project execution.	<ul style="list-style-type: none">- Reports of regional meetings.- Final report of the regional coordinator.	The regional meetings have been successfully organized and conducted, with multisectoral participation by committed authorities.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation for a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.
2. That up to the sum of US\$250,000 in foreign exchange, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.
3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Ministerio de Salud y Acción Social, of the República de Argentina, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$550,000 in pesos argentinos, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Ministerio de Justicia, of the República de Brasil, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$550,000 in reales, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Secretaría de Salud, of the Estados Unidos Mexicanos, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$550,000 in pesos mexicanos, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Secretaría de la Mujer, of the República del Paraguay, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$325,000 in guaraníes, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Oficina Nacional de Planificación (ONAPLAN), of the República Dominicana, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$325,000 in pesos dominicanos, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.

PROPOSED RESOLUTION

REGIONAL. NONREIMBURSABLE TECHNICAL COOPERATION FOR A REGIONAL
PILOT PROGRAM ON PREVENTION OF AND ATTENTION TO
DOMESTIC VIOLENCE AGAINST WOMEN

The Board of Executive Directors

RESOLVES:

1. That the President of the Inter-American Development Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, to enter into such agreements as may be necessary and to take such additional measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a nonreimbursable technical cooperation with the Consejo Nacional de la Mujer, of the República de Venezuela, for the execution of a Regional Pilot Program on Prevention of and Attention to Domestic Violence Against Women.

2. That up to the equivalent of US\$325,000 in bolívares, is authorized for the purposes of this resolution, chargeable to the net income of the Fund for Special Operations.

3. That the above-mentioned sum is to be provided on a nonreimbursable basis.