

## Grupo de Apoyo Este Amor

### Peer education for young MSM in eastern Dominican Republic

#### Overview

*Este Amor was one of three Caribbean civil society organizations given CVC/COIN Mini-Grants of US\$20,000 to pilot and help refine CVC/COIN's Sex Positive approach to peer education. In October 2011, it chose 20 MSM from 15 to 19 years old to take four days of training guided by an early draft of the new CVC/COIN facilitator's manual. At the end of this training, it chose eight to apply lessons as they conducted individual and group interventions in towns, villages and bateys (ethnic Haitian settlements) across the Province of San Pedro de Macorís, in the country's Eastern Region. In February 2012, these eight were given five more days of training and, in June 2012, another five days of training. By December 2012, the pilot project had delivered HIV education, information and condoms to 2,500 young MSM and had referred them to two health clinics for voluntary HIV and STI counselling and testing.*

*Este Amor received a second CVC/COIN Mini-Grant of US\$20,000 to carry on with the work in San Pedro de Macoris. By the end of 2013, they estimated that over the two years they had covered more than 6,000 young MSM men with interventions financed by their first and second CVC/COIN grants. Over those two years they had distributed more than 80,000 condoms. During the second year, a mobile clinic enabled them to offer on-the-spot HIV and STI counselling and testing. They strengthened their focus on human rights.*

*Este Amor and Jovenes Aliados a Este Amor (JALEA) received a third CVC/COIN Mini-grant of US\$20,000 to deliver a similar package of interventions to young MSM in the Province of La Romana, to the immediate east of San Pedro de Macoris. This project extended from August 2014 through September 2015 and its peer educators counted more than 6,500 participants in their interventions.*

#### About Grupo de Apoyo Este Amor

##### History of Grupo de Apoyo Este Amor

*El Grupo de Apoyo Este Amor — a play on words that can be translated as “This Love Support Group” or as “East Love Support Group” — is better known simply as Este Amor. Ninive Pelaez is Este Amor's Chairperson. A nurse and one of Este Amor's founders, she traces the organization's history back to August 2005, when an older man dropped a 15-year old boy off at *Complejo Micaeliano Religiosas Adoratrices*, a family health centre in La Romana. The boy had symptoms of HIV-infection so they tested him and confirmed he was HIV-positive. He told them he had been the receptive partner in anal sex with the older man. He had asked the older man to use condoms but the older man had refused and had promised him clothes, sneakers and other gifts in exchange. The boy was not fully aware of the dangers of unprotected anal sex and agreed.*

*Ninive got together with a social worker and three gay men to discuss what had happened to the boy. They agreed that very few young men who have sex with men (MSM) ever came to the clinic for HIV testing. The few who came did so only after they had symptoms showing their HIV-infection was well advanced. There was no organization that represented or served MSM in the country's Eastern Region, so they founded such an organization and called it *El Grupo Apoyo Este Amor*.*

With a background in law, Marcia Alvarez is a social worker and educator. A consultant to *Este Amor* and Jalea, she was Project Coordinator for the CVC/COIN-financed projects in San Pedro de Macoris and La Romana. She summarized the rest of *Este Amor*'s history. In November 2005, *Este Amor* became a member of the Dominican Network of People Living with HIV (REDOVIH). In March 2006, they joined with *Amigos Siempre Amigos* (ASA) – the country's preeminent organization representing and serving gay men – in forming the *Alianza de Gays, Travestis y Otros Hombres que Tienen Sexo con Hombres* (AGTH) – the Alliance of Gays, Transvestites and Other Men Who Have Sex with Men. Through this new alliance they began receiving the training and tools they needed to build their capacity to function effectively. On 26 February 2008, they were officially registered as a non-for-profit civil society organization.

*Este Amor* now works with groups of MSM in the five provinces in the Eastern Region of Dominican Republic. These groups are *Este Amor*'s chapter in San Pedro de Macoris; *Jovenes Aliados a Este Amor* (JALEA) – “Youth Allied with *Este Amor*” – in La Romana; *Unión Gay Internacional* (UGI) – “United Gays International” – in La Altagracia; *Trans Este Podemos Avanzar* (TEPA) – “Transgender People in the East Moving Forward” – in El Seibo, Hato Mayor, La Altagracia, San Pedro de Macoris, and La Romana.

*Este Amor*'s main office is in La Romana. It often partners with ASA, *El Centro de Orientación e Investigación Integral* (COIN) and other Dominican civil society organizations and its donors include organizations based in the United States including Aid for AIDS (AFA), Hispanic AIDS Forum (HAF), Latino Commission on AIDS, American Foundation for AIDS Research (AmfAR), John Snow's AIDSTAR-One (a USAID programme), and the Centres for Disease Control (CDC). In addition to money, its partners and donors provide technical support, training, educational material and condoms and lubricants.

[Some examples of \*Este Amor\*'s earlier work](#)

In 2006 and 2007, *Este Amor* participated in two six-month projects to develop educational strategies and tools for HIV and STI prevention among MSM. The first project was driven by ASA. The second was driven by COIN and had the USAID-financed Academy for Educational Development (AED) [now FHI-360 under Family Health International] as a partner.

In 2008, *Este Amor* partnered with the *Clínica Esperanza y Caridad* (CEyC) in San Pedro de Macorís on an AmfAR-funded project to support peer education and distribute condoms among MSM and also provide them with referrals (and sometimes accompaniment) to the CEyC for HIV and STI testing, care and treatment.

In 2009, *Este Amor* partnered with COIN and AED in the design and implementation of a qualitative study of male sex workers in the Eastern Region. In the course of doing so, its MSM peer educators and volunteers learned qualitative research methods including participant observation, in-depth interviewing and mapping. The study's purpose was to provide evidence on which to base action and its final report identified *Este Amor* as a well-qualified partner in action, saying it has intimate knowledge of MSM and good relations with them plus drive, commitment and capacity on which to build in order to serve MSM throughout the Eastern Region.<sup>1</sup>

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<sup>1</sup> Thanel K, Kerrigan D, Barrington C. Estudio Cualitativo sobre el Trabajo Sexual Masculino: La Romana, Higüey y el Seibo. July 2009. Final report presented to the Academy for Educational Development.

## About HIV and young MSM in the Eastern Region

### Evidence from serological and behavioural surveys

In 2008, a serological and behavioural survey in Dominican Republic used the snowballing method (e.g., recruiting a few known MSM and asking those MSM to recruit more) to cover more than 1,200 each of MSM, sex workers and drug users. It counted all biological males who have sex with other males as MSM but, in the analysis, broke them down into sub-categories. It found HIV prevalence of 6.1 percent among all MSM but 17.2 percent among those who self-identified as transgender women, 10.8 percent among those who self-identified as gay and 4.3 percent among those who self-identified as neither transgender nor gay. In addition, it found HIV prevalence of 4.8 percent among female sex workers and 8 percent among drug users.<sup>2</sup>

In 2012, serological and behavioural surveys covered sex workers and MSM in five of the country's 31 provinces, chosen because these five had large cities or were popular tourist destinations. One of the five was the country's most popular high-end tourist destination, the Province of La Altagracia in the Eastern Region. It had HIV prevalence of 12.1 percent among its sex workers and 9.1 percent among its MSM and only 27 percent of its MSM made regular use of condoms during sex.<sup>3</sup>

In 2011, CVC/Coin surveyed 274 marginalized youth in poor barrios of Santo Domingo including 49 gang members, 46 involved in transactional sex, 69 using drugs, 72 having sex with same-sex partners, and 38 living with HIV. Sixty three percent were male and their average age was 20 years.<sup>4</sup> Some of the findings were:

- Their average age of sexual initiation was 13 years. Over the past year, 65 percent had had casual sexual partners, 51 percent had had regular sexual partners and 23 percent had had “outside partners” in addition to their regular partners. The fact that they had outside partners in addition to regular partners meant they were practicing highly risky “multiple concurrency”, which connects people in networks through which HIV spreads rapidly.
- 90 percent recognized condom use as a means of HIV prevention but only 59 percent said condoms were easy to find and a significantly smaller percentage of those involved in transactional sex found them easy to find.
- 56 percent said they had been taught how to use condoms but many were misinformed about how to use them correctly. Some had misinterpreted the message that they should have two condoms on hand for anal sex (in case one breaks) to mean they should wear two condoms at once (which increases the chance of breakage).
- Only 49 percent said they found it comfortable to use condoms and many said they did not trust condoms.
- 70 percent had been tested for HIV but, of those, only 64 percent had been tested within the past year.

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<sup>2</sup> COPRESIDA (2009). 1er Encuesta de Vigilancia de Comportamiento con Vinculación Serológica en Poblaciones Vulnerables: Gay, Trans y otros Hombres que tienen Sexo con Hombres (GTH), Trabajadoras Sexuales (TRSX) y Usuarios de Drogas (UD), República Dominicana, año 2008. Santo Domingo, Consejo Presidencial del SIDA (COPRESIDA).

<sup>3</sup> DIGECITSS (2012). El estado epidémico del VIH en la República Dominicana Informe final del análisis y consulta sobre el tipo de epidemia. Santo Domingo, Dirección General de Control de Infecciones de Transmisión Sexual y SIDA (DIGECITSS)

<sup>4</sup> Hasbún J et al (2012b). Baseline Study on Marginalized Youth in Trinidad, Jamaica and the Dominican Republic: A Report on the Triangulation of Quantitative and Qualitative Research Results. Santo Domingo, CVC/COIN Vulnerabilised Groups Project, September 2012.

- 39 percent of all marginalized youth had been called discriminatory names but this was the case with 61 percent of those having sex with same-sex partners.
- 54 percent said they had been victims of discrimination in their own families and those most likely to have experienced such discrimination were HIV-positive.
- Asked to name the main sources of their information about HIV, they gave the following answers in descending order from most to the least common answers: mass media, school, programmes for people living with HIV or drug users, youth networks, and civil society organizations supporting people having sex with same-sex partners. Those questioned more closely in focus group discussions and in-depth interviews showed an aversion to long lectures about HIV and a strong preference for short talks and inter-active and entertaining activities involving drama and role play.

#### Studies of “bisexually-behaving” males in the pleasure industry

In one of its projects, *Este Amor* assisted with a study done by Mark Padilla, a Medical Anthropologist with the Department of Global and Sociocultural Studies, School of International and Public Affairs, Florida International University (FIU). This study looked at men associated in various ways (e.g., as hotel and bar staff and beach boys) with the Eastern Region’s vibrant tourism industry and found many who exchange sex for cash or gifts and who might be considered bisexual insofar as they are willing to have sex with both males and females, whether not they are sexually attracted to both males and females.

Mark Padilla has investigated the phenomenon of “bisexually-behaving males” in what he sometimes calls “the pleasure industry” because, in Dominican Republic and across the Caribbean there are many nightclubs, bars, brothels and other businesses that hire attractive young people and cater to all manner of pleasure-seekers, both tourists and locals. He has authored and co-authored a number of books and articles on the subject and a list can be found at <https://gss.fiu.edu/people/faculty/mark-padilla/>.

#### Observations arising from *Este Amor*’s work under its first CVC/COIN Mini-Grant

Amarantha describes herself as a transgender woman. An active spokesperson for MSM in San Pedro de Macoris, she helped formulate *Este Amor*’s proposal for its first CVC/COIN Mini-Grant, for the pilot project. She helped recruit 20 MSM from 16 to 19 years old to be trained as potential peer educators, participated in the training and final selection of the project’s eight peer educators and then became the Peer Education Supervisor. The eight peer educators included four who self-identified as gay, three as heterosexual and one as a transgender woman.

On 27 November 2012, after the one-year project drew to a close, the Project Coordinator Marcia Alvarez, the Peer Education Supervisor Amarantha and the eight peer educators met with this writer and discussed the characteristics of the young MSM they knew from personal experience and through their peer education work.

The group agreed that only a very few adolescent males in San Pedro de Macoris will admit to being gay, bisexual or transgender but a great many more engage in male-male sex. Amarantha and the peer educators, themselves, were “out” and related typical “coming out” stories where, for example, mothers are not surprised when their sons confess they are gay and, although they are not happy about it, continue loving their sons and sometimes become closer to them due to new levels of honesty. Fathers tend to be much less accepting and often reject their sons entirely, though some eventually come around to accepting their sons again and even to respecting them for their courage and admiring them for other qualities, such as being intelligent and good students.

In the wider community, outside of families, there is extreme stigmatization and discrimination against anyone even suspected of being gay, bisexual or transgender because of their appearance or behaviour. This means that most adolescent males who have sex with other males (because they are sexually attracted to them or only because they are willing to exchange sex for money, gifts or favours) will never admit it. Instead, they do their best to seem sufficiently masculine in appearance and behaviour to pass as “normal” heterosexual males.

Most school principals, teachers and students scorn any boy who does not conform to very narrow definitions of “normal”. They exclude and bully boys who appear in any way effeminate. Principles may even throw boys out of school if, for example, they dress or wear their hair in unconventional ways. Even if these boys are not thrown out of school, they often choose to drop out. This is so even when they are good students.

Meanwhile, their schools have taught them next to nothing about sexual and reproductive health and how to protect themselves against sexually transmitted infections (STIs) and HIV. Nor have their schools taught them anything about their human rights and how to protect themselves against sexual exploitation and abuse or against the verbal and physical violence and robbery that is often inflicted on known or suspected MSM by members of the general public and the police.

Asked when they became sexually active, the peer educators said at age 11, 12 or 13 until one said at age eight and all laughed and agreed that the boys they know generally become sexually active as soon as they reach adolescence and often before that. Asked how many sexual partners they had, they gave answers ranging from three to ten until one said, “Oh, do you mean in a whole year? Dozens and dozens, so many that I lose count.” The others laughed and agreed that adolescent boys are generally happy to seize any opportunity for sexual pleasure.

Whether or not they have dropped out of school and whether or not they self-identify as gay, bisexual or transgender, young MSM often engage in transactional and commercial sex. Mark Padilla is right that in tourist areas like La Altagracia and La Romana, some of the older men who give young men cash, gifts or favours for sex are tourists. In less touristy areas like San Pedro de Macoris, however, most of these older men are locals. Boys may be lured into this behaviour when they are very young and naïve but, once they are lured in, this behaviour often becomes an irresistible temptation for boys who come from poor families and have few opportunities for paying work.

It can be a vicious circle. Once young men are known or suspected to be MSM, most employers will not hire them even if they are sufficiently old and well-educated to qualify. In any case, there are not nearly enough jobs to go around in San Pedro de Macoris or anywhere else in the Eastern Region.

#### [Ethnic Haitian MSM in the \*bateys\*](#)

The unemployment situation is particularly severe in the *bateys* of the Eastern Region. These began as settlements for migrant Haitian labourers who came to work on the Region’s many sugar plantations. Most of these sugar plantations have ceased to operate as such and many of the *bateys* have become, in effect, neighbourhoods of the Region’s growing towns and cities. Most of the descendants of the migrant Haitian labourers who continue to live in the *bateys* are unemployed. Since the Haitian earthquake of January 2010 they have been joined in the *bateys* and in unemployment by many new migrants from Haiti.

Among the ethnic Haitians living in the *bateys* are many young MSM, of whom only a few self-identify as gay or transgender. Their main language is Creole and, if they are recent migrants from Haiti, they may speak little Spanish. They generally have little or no formal education and even those who have lived in Dominican Republic all of their lives usually do not qualify as citizens and so do not qualify for the full range of public education, health and other services available to citizens. Recently, new laws have made their situation even worse. These laws are taking citizenship away from those few who have it and are making it illegal for people to give ethnic Haitians jobs or accommodation. They are being told they should “return” to Haiti even if their families have lived in Dominican Republic for generations.

#### Networks connecting “out” and “bisexually-behaving” MSM

Amarantha and the eight peer educators suggest that many men, whether young or older, are bisexually-behaving for other than purely economic reasons. As self-identified gay, transgender and transvestite people, they socialize with groups of their peers and these groups are connected through social networks that extend across the Eastern Region and beyond. Members of these groups and networks are well aware, through personal experience, that many supposedly heterosexual men are interested in them sexually.

For example, if they go out at night such men may bully them but also sexually molest them (e.g., grabbing their bums) and try to lure them into hidden places where they can have sex with them secretly. If they engage in transactional or commercial sex, they find no shortage of potential clients and these include many men with girlfriends or wives and children. They are sometimes arrested by the police and then released without being charged after they have gratified the police sexually. Most of them have had sexual experiences with supposedly heterosexual male relatives, friends and acquaintances and with supposedly heterosexual men in authority, including police, priests and school teachers.

#### *Piloting the Sex Positive approach to peer education*

In 2011, the CVC/COIN Vulnerabilised Groups Project (CVC/COIN) invited three organizations to submit proposals for Mini-Grants of US\$20,000 each to cover the costs of their participation in pilot projects that would help consultant psychologist Alex Vega refine a new Sex Positive approach to peer education. *Este Amor* was one of the three, and CVC/COIN asked them to be the one that would target biological males from 13 to 19 years old who qualify as men-who-have sex with men (MSM) whether or not they self-identify as gay, bisexual or transgender.

*Este Amor’s* proposal identified Marcia Alvarez as the Project Coordinator of a project that would provide peer education to MSM throughout the Province of San Pedro de Macoris. The Province has a total population of 390,000 living in the City of San Pedro de Macoris, its suburbs and outlying towns and rural areas. This population includes ethnic Haitians living in several *bateys*, only one of which was still an active sugar plantation.

#### Recruiting and training potential peer educators and selecting the best candidates

Marcia asked Amarantha, a transvestite man well known as a leader among the Province’s MSM, to help her recruit known 15-to-19-year-old MSM willing to undergo training and become peer educators. Many young gay, transgender and bisexually-behaving MSM volunteered and Marcia and Amarantha chose 20 to attend an initial four-day training workshop facilitated by Alex Vega and guided by his draft of a new CVC/COIN facilitator’s manual.<sup>5</sup>

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<sup>5</sup> Vega, A. (2014). Sex Positive Model for HIV Prevention & Promotion of Sexual Health: Facilitator’s Manual. Kingston and Santo Domingo, CVC/COIN Vulnerabilised Groups Project.

The four-day workshop took place in October 2011. During the proceedings, Alex observed that he had never, in all the places he had facilitated workshops, experienced such a diverse group of young MSM able to work together in harmony. Marcia and Amarantha participated in the workshop and, at its end, Alex helped them to select the eight who had demonstrated the greatest commitment and enthusiasm, the greatest comprehension of the course material and the best skills at communication. Those eight became the project's peer educators and four of them self-identified as gay, three as heterosexual and one as transgender. It was agreed that Amarantha would supervise their work in the field.

#### Making other preparations

**Preparing clinics to receive referrals.** The *Este Amor* team (Marcia, Amarantha and the peer educators) met with staff at the *Clínica Esperanza y Caridad* (CEyC) and another health clinic to inform them about the pilot project and to prepare them to receive any young MSM the team might refer to them for voluntary HIV and STI counselling, testing and treatment.

**Preparing peer educator ID.** The team was disappointed that CVC/COIN was very late at fulfilling a promise to provide them with caps, t-shirts and backpacks that would serve as ID and publicity for the pilot project. In lieu of these, they made do with ID tags giving their names and saying they were peer educators associated with *Este Amor* and CVC/COIN.

**Preparing hand-out cards.** The team prepared hand-out cards telling people where they could go for more information, advice and health services.

**Preparing flip chart.** The team prepared a flip chart with graphic photos and brief descriptions of HIV and various STIs. This proved very useful for group presentations, generating much interest and discussion, and prompting some people to come forward after presentations and ask what they should do if they or someone they knew had symptoms. The photos engaged more interest than the words and this was a reminder that many Dominicans, young and old, are functionally illiterate so the most effective IEC material is rich with graphic illustration.

#### Delivering peer education to individuals and groups

Amarantha explained that the peer educators worked in pairs and she made sure they always wore their ID tags and did most of their interventions during the mornings or afternoons. Most of the peer educators were children under the law and, with or without the law, *Este Amor* was responsible for ensuring their safety.

She actively supervised each pair of peer educators at least once per week and worked with them on some interventions, especially if there were obvious safety issues. On one occasion, she and a pair of peer educators tried to deliver a group intervention in a public place during the evening but the two peer educators were harassed by men making lewd comments, grabbing at them and asking if they would like to come away for sex.

One of the peer educators said that, despite instruction to work in pairs, he had ventured out on his own one evening and tried to do one-on-one interventions while wearing his ID tag. Despite the tag, he had been arrested and thrown in prison for the night by a police officer who was not interested in hearing his explanation that he was working for *Este Amor*.

#### Providing additional training after four months of practical experience

In February 2012, after the *Este Amor* team had four months of experience applying lessons from the first round of training, they were given an additional five day days of training on the wide range of ways in which individuals perceive their own gender identities and on the most sensitive and effective ways of approaching them.

This second round of training helped them deal with the fact that most MSM in San Pedro de Macorís are closeted and that even those who are out to their families and friends have good reason to fear the prejudice and discrimination of others. This means the peer educators should never ask questions or deliver answers in such ways as to imply someone might be MSM before they have offered that information without prompting. The whole approach is to try to make everyone feel comfortable talking about all manner of sexual desire and activity without fear of embarrassment or moral judgement.

Amarantha and the peer educators say this approach meant that many men they guessed to be heterosexual participated in their group interventions and often wanted to talk to them one-on-one afterwards. The peer educators became recognized and respected for their expertise on sexual health and human rights matters and since people generally did not have access to anyone else with this kind of expertise, they were keen to participate in interventions. In fact, those who participated often urged others to participate too.

Notwithstanding the unpleasant incidents mentioned earlier, Amarantha says they usually could deal with disruptive males by drawing them aside and talking to them privately. The peer educators found their group interventions in *bateys* particularly rewarding. These attracted a lot of parents who were very interested in what they had to say about the risks their sons and daughters were facing as they went out into the world. Often they wanted to talk one-on-one about particular cases.

#### Providing a final five days of training and feedback

In June 2012, Alex Vega facilitated a final five-day workshop that provided additional training to the *Este Amor* team and that also provided him with feedback. Marcia explains that, throughout, they had to recognize that the peer educators were adolescents and they were delivering peer education to other adolescents as well as to adults, including their parents. They had to be very careful not to use language or get into subject areas that some adults might consider inappropriate for adolescents.

To illustrate Marcia says that, as careful as they were, they soon realized that most adults were not comfortable with their initially stated intention to provide peer education to adolescents from 13 to 18 years old so they decided to focus on adolescents no less than 15 years old. In addition, school authorities would not allow them into schools. No one else was providing sex education to adolescents in schools and the school authorities were not ready to allow them to be the first to do so.

The feedback allowed Alex Vega to identify the strengths and weaknesses of the course material outlined in his draft training manual and resulted in a decision to produce two versions of the facilitator's manual, one with material appropriate for adults and the other with material appropriate for adolescents. To avoid possible controversy, Alex removed the phrase "Sex Positive" from the title of the one with material for adolescents.<sup>6</sup>

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<sup>6</sup> Vega, A. (2014). Facilitator's Manual for HIV Prevention & Promotion of Sexual Health. A facilitator's resource guide and manual for promoting sexual health with peer educators reaching marginalized youth. Kingston and Santo Domingo, CVC/COIN Vulnerabilised Groups Project.

### Results achieved by the pilot project

In terms of numbers, the project achieved its targets of training and deploying an *Este Amor* team consisting of a project coordinator, a field supervisor and 8 peer educators. It set targets of having each peer educator reach an average of 25 new young MSM each month they were actively delivering peer education in the field; reaching a total of 2400 young MSM through the duration of the pilot project. They exceeded that target and reached a total of 2500 young MSM. In addition, they covered many youth who were not MSM and many adults, including parents.

In the course of delivering peer education, they distributed more than 13,800 condoms and they would have distributed far more if they had not run short of supplies. During all their interventions, they told people about the two collaborating clinics where they could go for voluntary counselling, testing and treatment of HIV and STIs and urged them to follow up if they had been sexually active and did not know their HIV status.

While doing peer education, the *Este Amor* team gained considerable knowledge about the populations they were reaching and the strategies that were working best. CVC/COIN's consultant psychologist, Alex Vega, used this information to produce a facilitator's manual more appropriate for the training of adolescent peer educators who would reach other to other adolescents.

### Lessons learned from the pilot project

- **In an intervention of this nature, there is no reliable way of distinguishing between young MSM and other adolescent males or of determining the exact age of a seemingly adolescent male.** *Este Amor's* supervisor and 8 peer educators said they relied on "gaydar" and their familiarity with the MSM community and networks to guess which were "out" MSM and which were bisexually-behaving MSM who were not out. They had to do that in order to produce the numbers for monitoring and evaluation purposes. They felt that all males who were under 25 and marginalized by poverty and lack of education and job opportunities were vulnerable to becoming bisexually-behaving in exchange for money, gifts or favours from older men.
- **Young MSM peer educators can be very effective at providing peer education to all youth and many adults.** The peer educators' youth, their courage in making themselves conspicuous as peer educators and their association with respected institutions (*Este Amor* and the two clinics) seemed to inspire many to feel unthreatened by them and to trust them as sources of reliable information and advice.
- **A mobile clinic located in close proximity to an intervention would increase uptake of offers of voluntary counselling, testing and treatment.** The *Este Amor* team was not asked to keep track of how many people actually went to the two health clinics after being told the clinics' names, locations and operating hours. However, they felt that people would have been far more likely to take up offers of health services by an immediately available mobile clinic.
- **Condoms and lubricants are in short supply.** On previous projects, *Este Amor* had been able to get all the condoms they needed from the *Instituto Dermatológico* (IDCP) but this was no longer the case. COIN supplied them with condoms for this project but was unable to supply enough to meet the demand. As for lubricants, they had none to distribute during this project even though they knew water-based lubricants are essential for safe anal sex. Beyond the project, across the Dominican Republic, young males report that it is generally hard to get condoms. They are disapproved by many Christians and they are kept behind the counter in pharmacies. It is acutely embarrassing to ask for them when the adult behind the counter probably thinks you

are too young to be having sex or suspects you must be gay or HIV-positive if you need condoms. Water-based lubricants are not widely available, are very expensive and are even more embarrassing to ask for than condoms since they raise the suspicion that the purchaser is having anal sex.

- **It is very difficult to reach young people less than 15 years old with any sexual and reproductive health education at all.** Dominican religious and school authorities, parents and adults in general too often bury their heads in the sand and refuse to face up to the reality that many young Dominicans begin having sex as soon as they reach puberty, if not before. To protect them from serious harm, they need information about sexual and reproductive health and human rights and the knowledge and skills to protect themselves from sexual exploitation and abuse.
- **There are no trustworthy and effective mechanisms for dealing with human rights violations.** Dominican adolescents are often sexually and otherwise exploited or abused by their peers and by adults, including adults in positions of authority. Among the people they trust least are police officers, who may arrest them on false pretences because they want their money or sexual gratification. Adolescents often do not know anything about their basic human rights, do not know enough to record information that would help anyone identify and convict a perpetrator, and do not know where they can go with a complaint and expect help achieving justice.
- **Structural problems in Dominican society leave young people highly vulnerable to sexual exploitation and abuse and consequent health problems.** Deep inequalities and widespread poverty combine with much hypocrisy surrounding religion and sex to make many adolescents and young adults highly vulnerable. The quality of education provided to any but the elite is generally poor and contributes to early drop-out and high levels of unemployment in an economy where there are not nearly enough legitimate, well-paying jobs to go around. This situation puts pressure on individuals and families that contributes, for example, to widespread substance abuse, petty crime and family violence and break-down. The pleasure industry (serving locals and tourists) thrives alongside conspicuous displays of religious conviction and there is widespread denial of what is blatantly obvious to many young people: that they are sexually exploited and abused; that they are easily lured into situations where sexual exploitation and abuse occur; that they have access to few remedies.

### *Applying lessons and carrying on with the work for two more years*

An evaluation at the end of the pilot project found, “By almost any measure, this project constitutes very promising practice and is worthy of being sustained, scaled up and continually strengthened. *Este Amor* hopes to see it evolve into a continuing programme that extends across all five provinces in the Eastern Region and that serves as a model for programmes in other regions.”<sup>7</sup>

During Phase Two of the CVC/COIN Vulnerabilised Groups, *Este Amor* submitted proposals and received second and third CVC/COIN Mini-Grants to finance two additional projects. In 2013, they used the second Mini-Grant to continue providing peer education to young men, including active and potential MSM, in San Pedro de Macoris. In 2014-2015, they used the third Mini-Grant to partner with *Jovenes Aliados a Este Amor* (JALEA) to deliver a similar package of interventions to young men in the Province of La Romana, to the immediate east of San Pedro de Macoris.

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<sup>7</sup> Adams S (2013). CVC/COIN Vulnerabilised Groups Project Phase One: An Independent Evaluation. Santo Domingo, CVC/COIN Vulnerabilised Groups Project.

### A second year of peer education in San Pedro de Macoris

With a second CVC/COIN Mini-Grant of US\$20,000, the *Este Amor* team was able to continue offering a full package of HIV-related interventions to young MSM in San Pedro de Macoris and to strengthen those interventions. The Project Coordinator and Peer Education Supervisor remained the same and so did some of the peer educators. This meant there was less need for intensive training and the existing team could train new recruits.

Applying lessons learned from the pilot project, *Este Amor* was able to:

- **Relax the rules somewhat as to who qualifies as a young MSM for monitoring and evaluation purposes.** It was agreed that if you want to reach active or potential bisexually-behaving young men, you cannot imply they are MSM or ask if they are MSM. The *Este Amor* team continued to use “gaydar” and their familiarity with the MSM community and its networks to estimate the numbers of young MSM participating in their various interventions. They were conscious of covering not only active MSM but other young men who might be vulnerable to being lured into sex with other men in exchange for money, gifts or favours. They set a target of reaching 2400 young MSM with the second project but exceeded that target and reached a total of 3500. This meant they had covered a total of 6,000 young MSM with the two projects.
- **Have a COIN mobile clinic on hand for some of their group interventions** so young men could take up offers of voluntary HIV and STI counselling and testing on-the-spot and did not have to go either of the collaborating health centres. Again, they did not monitor the numbers getting tested or ask for results but they were confident that far more had been tested in the second year than in the first.
- **Have a plentiful supply of condoms on hand.** They had been able to distribute only 13,800 condoms during the pilot project because they frequently ran out. They were able to distribute far more during the second year and, over the two years, managed to distribute more than 80,000 condoms.
- *El Observatorio de Derechos Humanos para Grupos Vulnerabilizados (ODHGV)*
- **Become an active member of El Observatorio de Derechos Humanos para Grupos Vulnerabilizados (ODHGV) – the Human Rights Observatory for Vulnerabilised Groups – established by CVC/COIN in 2012.** During the second year, the *Este Amor* team enriched their interventions with more information of the basic human rights of all Dominicans, including marginalized youth, sexual minorities and people living with HIV (PLWH). In addition, they began collaborating with the ODHGV on documenting individual cases of human rights violations.

### A complementary project in San Pedro de Macoris

Marcia Alvarez explains that, while the *Este Amor* team was running its CVC/COIN-financed projects in San Pedro de Macoris, it was holding discussions with other local and national organizations and international donors on things they might do to address some of the pressing needs of vulnerable youth.

One result was that they got financing from amfAR that allowed them to rent a space they could use for their San Pedro office, meetings and educational courses for youth. They managed to negotiate an agreement whereby the *Instituto Nacional de Formación Técnico Profesional (INFOTEP)* – the National Institute for Technical and Professional Training – provided courses that qualified participants as hair dressers and beauticians. There was huge demand for these courses, especially by gay and transgender people, but they were able to accommodate only five groups of 18 students each for a total of 90 students. On their practice days, the students offered

their services to the general public and more people showed up than they could handle. In general, people in the Dominican Republic take great pride in their appearance and are eager to find well-trained barbers, hair dressers and beauticians.

The amfAR grant and the INFOTEP courses came to an end in the spring of 2013 and Marcia observes that this is very regrettable, to say the least. There is a crying need for courses that provide marginalized youth with basic literacy and numeracy skills and technical and vocational training. There is insufficient government support for civil society organizations and institutions such as INFOTEP and they generally manage to serve only a few of the most qualified students in and near Santo Domingo.

#### [A third year of peer education, but in La Romana](#)

*Jovenes Aliados a Este Amor* (JALEA) – “Youth Allied with Este Amor” – is a group of MSM from 19 to 24 years old who volunteer as activists promoting the human rights and health of MSM in the Province of La Romana, to the immediate east of the Province of San Pedro de Macoris. The population of La Romana is 350,000, compared to San Pedro’s 390,000, but La Romana has only half the area of San Pedro and is more densely urban. It also has many more prosperous and well-educated Dominicans and foreign nationals, the latter of whom own vacation and retirement homes in La Romana, and its economy is much more focussed on the tourism/pleasure industry.

Comparative prosperity and the tourism/pleasure industry attract many MSM Dominicans to La Romana where they mingle with resident and visiting foreign national MSM. Among the MSM are many gay men and transgender women (biological males who self-identify as women) and many bisexually-behaving MSM willing to exchange sex for cash, gifts and favours from tourists and resident Dominicans and foreign nationals. While there is no reliable serological evidence specific to MSM in La Romana, there is evidence specific to La Altagracia to the immediate east. La Altagracia has much in common with La Romana – comparative prosperity, many resident foreign nationals, thriving tourism/pleasure industry – and, as mentioned earlier, a 2012 survey found it has HIV prevalence of 12.1 percent among its sex workers and 9.1 percent among its MSM.

*Este Amor* had principle responsibility for submitting the proposal and administering a third CVC/COIN Mini-Grant to deliver a package of services to MSM in La Romana similar to the package of services it has delivered to MSM in San Pedro de Macoris. JALEA was the principle implementing group and its Executive Director, Melvin De Aza, served as Co-Project- Coordinator and Peer Education Supervisor. Some distinguishing features of the project in La Romana were:

- **Somewhat older peer educators and lighter training.** JALEA selected potential peer educators from among its active members. On 3 October 2014, Marcia Alvarez provided them with one day of intensive training and she and Melvin selected eight to act as the project’s peer educators. Four were self-identified gay men and four were transgender women (biological males who self-identify as females). They ranged in age from 19 to 24 years old and they had more formal education than the peer educators in the two projects in San Pedro de Macoris. On 4 October, Marcia provided one day of training in project coordination, supervision and monitoring and evaluation (M&E) to Melvin De Aza and to Luis De Paula, who acted as the project’s M&E Officer. After the fieldwork was underway, the JALEA team met monthly to review progress and identify challenges and how to overcome them and Marcia provided additional support as needed. In addition, they received a series of talks on sexual health and human rights.
- **More focus on making sure people take up offers of health services.** The JALEA team not only urged any sexually active young men who did not know their HIV status and who had not been tested for HIV or STIs recently to go to clinics for counselling testing.

They asked those who wanted to go to make themselves known privately and then offered to accompany them to the clinics.

JALEA's team in La Romana proved to be even more successful than the *Este Amor* team had been in San Pedro de Macoris. Apparent reasons for this were that, being older and better educated, their teams of two peer educators each were able to work unsupervised and in the evenings. They were able to go into venues barred to adolescents less than 18 years old and they had more experience with the target population. They delivered the full package of interventions from early October 2014 to the end of September 2015 and, in that time, they went far beyond their target of reaching 2400 MSM and reached more than 6500.

### **The personal experience of Luis De Paula, JALEA's M&E Officer**

Luis says he is 24 years old and came out as a gay men two years ago. He had just finished school and did not know anything about the lesbian, gay, bisexual, transgender, intersex (LGBTI) world and about the human rights and sexual health issues of that world. Melvin De Aza was a friend of his and told him about *Este Amor* and, after a few talks with Melvin, he decided he wanted to get involved. There were a few of them and they soon began calling themselves *Jovenes Aliados a Este Amor* (JALEA).

Luis says he was once very shy, did not socialize much and was fearful of the world. Since getting involved with *Este Amor* and JALEA, he has become more self-confident and has learned to accept himself as a gay man and become much more attuned to the challenges LGBTI people have to face in Dominican Republic. It has changed his life and given him new purpose. He knows from his own experience how belittled other LGBTI people feel and he wants to help change their lives too.

With his new self-confidence and feeling that he belongs to a community of friends, he has gone back to school and is now in his 7<sup>th</sup> quarter of a course that will qualify him as an industrial psychologist. He no longer sees only the bumps and roadblocks, he sees the road and is determined to go down that road towards his goals. Today, he has more dreams and they are not just fantasies but hopes for a future he knows he can realize. He has found refuge from the problems in his family and the prejudices in his community and he has found a new family and community in *Este Amor* and JALEA and the thousands of people they serve with their projects.

### *Looking ahead*

It continues to be the case that *Este Amor* hopes the projects financed by its three modest CVC/COIN Mini-Grants evolve into a sustained programme that extends across all five provinces in the Eastern Region and that is matched by similar programmes in other regions of the Dominican Republic. A theme running through *Este Amor's* and JALEA's reports about the projects is frustration at not being able to do more than they were able to do with their grants and about the uncertain prospects for the financing needed to strengthen, scale up and sustain their efforts.

## The CVC/COIN Profiles of Good Practice Collection

All projects covered in this series of CVC/COIN Profiles of Good Practice were supported by the CVC/COIN Vulnerabilised Groups Project, a component of the PANCAP Round 9 Global Fund Project (January 2011-March 2016). They include a variety of projects from the six countries covered by the CVC/COIN Project and at least one demonstrating an effective approach to sexual and reproductive health and rights (SRHR) among each of the Project's six target populations: men who have sex with men (MSM), transgender women, sex workers, drug users, prisoners, and marginalized youth. A project's exclusion from coverage in this series in no way implies it was not good practice.

Stuart Adams, the consultant who did the final evaluation of Phase One of the CVC/COIN Project (January 2011-March 2013), participated in the selection and then researched and wrote each Profile. To be approved for selection, a project had to meet or come close to meeting all five of the criteria for good practice recommended by the OECD's Development Assistance Committee (DAC) plus three additional criteria used by the German Federal Ministry for Economic Cooperation and Development (BMZ) when it selects projects worthy of being covered by publications in the German Health Practices Collection. The eight criteria are:

- **Relevant:** For example, based on sound behavioural, serological or other evidence of need for the intervention.
- **Effective:** For example, indicated by reliable evidence of results measured against objectives and targets established at the outset.
- **Efficient:** For example, makes good use of whatever human, financial and other resources may be available, including collaboration with partners that add value.
- **Impactful:** For example, reaches or demonstrates potential to reach large numbers of target populations with effective HIV prevention, treatment and care; creates safe environments where human rights are recognized and respected.
- **Sustainable:** For example, is sufficiently relevant, effective and efficient to merit continuing support from existing partners and to merit support from potential new partners.
- **Empowering:** For example, provides people from at-risk groups with knowledge, skills and tools to engage in responsible sexual behaviour or to assert their right to essential health care.
- **Transferable:** For example, develops and demonstrates the use of methods and tools that can be adapted for use by other organizations in other locales.
- **Well monitored:** Regularly gathers, analyses and reports data to measure results against objectives and targets and to identify any problems that may require corrective action; records events and personal stories to preserve qualitative information that may enrich knowledge and be useful for educational or advocacy purposes.

Collectively, the projects and programmes profiled in this series have made significant contributions to knowledge about HIV and how to respond to it among vulnerabilised groups in the Caribbean.