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The Imbalance Between Government and Civil Society in Global Fund Processes: A View from Thailand

One of the key aspects of the Global Fund is the fact that the Fund permits, and indeed encourages, civil society to be actively involved in the governance and implementation of grants. However, over the past year or two, the Fund has increasingly been pushing for a more formal and a more standardized way of implementing grants. This invariably leads to more dominance by government, and less influence by civil society, in the country-level process. The Global Fund needs to counter this by creating more channels for civil society participation. Effectiveness in managing the balance between civil society and government at the country level should be used as an indicator of success both within a particular country and of the Fund's work globally.

Background

The Raks Thai Foundation was established in 1997 as an independent Thai NGO involved in multi-sector development. The Foundation became the Principal Recipient (PR) for the project, "Prevention of HIV/AIDS Among Migrant Workers in Thailand," or "PHAMIT," funded in Round 2 as a result of a proposal submitted by the CCM (see www.phamit.org).

In the first two years of the programme, the PHAMIT project has reached over 200,000 illegal migrants, sex workers and their families in 22 provinces. This has been achieved mainly through NGO activities, involving the use of migrant health assistants and migrant volunteers working in the community, on fishing boats and in drop-in centres; and through the use of education materials in the language of the migrants (Burmese, Cambodian and Lao). Although the PR is an NGO, the grant involves both non-governmental and governmental Sub-Recipients (SRs), working together in a cooperative way. The Department of Health Services Support, the government SR, coordinates with the provincial public health offices to

improve migrant-friendly services.

In Round 3, the Raks Thai Foundation became the PR for the project, “HIV Prevention, Care and Support for Injecting Drug Users,” or “CASIDU,” funded as the result of a non-CCM proposal from an NGO. Proposals from NGOs are rarely funded; this one was successful because the NGO in question made a convincing case that most members of the CCM would not support any proposal that included prevention programs for injecting drug users. At the time, the Thai government had initiated a war on drugs which resulted in over a thousand extra-judicial killings. It had also indicated an unwillingness to engage in harm reduction programmes. The main objective of this project is to reduce new HIV infections among people who inject drugs by using a peer-driven approach. This includes setting up peer- and NGO-operated harm reduction centres with outreach programmes into the community. This project is being implemented with the Thai Drug User Network and two other NGOs.

Civil Society Involvement

The Global Fund considers that only a multisectoral CCM can legitimately express what is suitable or unsuitable for the country. For this reason, it has invested considerable decision-making authority in the CCMs and it has tried to strike a balance between government and civil society. However, while the Global Fund has made several attempts to support civil society within the CCM in Thailand, these efforts have had minimal success. The problem is that like CCMs in many other countries where the governments are strong and assertive, the Thai CCM is dominated by government representatives. As a result, the voice of civil society on the Thai CCM is weak, and the CCM tends to follow government priorities rather than representing all stakeholders collectively. This is reflected in the proposals that the Thai CCM has submitted over the years, most of which have had NGO components that are clearly secondary to, or weaker than, the government components.

In Thailand, and probably in many other countries as well, there are those who argue that since governments are ultimately responsible for the delivery of programmes, they should have a greater say in decision-making on the CCM. On the contrary, it is civil society that has pushed for private and public programmes to ensure coverage of hard-to-reach and highly vulnerable populations such as drug users, sex workers, migrant workers and men who have sex with men. It is also civil society, in many countries, that has advocated successfully for the increased involvement of people living with HIV/AIDS.

Most of the Thai CCM members are unfamiliar with NGOs, including how they operate, and their organizational structures and budgetary requirements. Furthermore, the government officials on the CCM frequently disagree with NGO interventions concerning the need for changes in policy, and the need for rights-based approaches in programming for vulnerable marginalized populations.

Another problem is that civil society representatives frequently lack skills that government representatives have in areas such as proposal development, report writing and operating accounting systems.

In these circumstances, it is not enough to declare that government representatives and civil society representatives should have a similar number of seats on the CCM, as the Global Fund has done through its CCM Guidelines. The Global Fund needs to do more to strengthen the involvement of civil society, including (a) finding ways to enable civil society to participate more effectively on the CCM; (b) improving the skills of civil society representatives; and (c) encouraging the development of NGO components that are not hidden within government-inspired CCM proposals (and/or making it easier for non-CCM proposals to be funded).

Greater Rigidity

At its inception, the Global Fund promoted flexibility and creativity, and this attracted the attention of civil

society. However, over the years, the Global Fund has steadily moved towards increased rigidity in its regulations and systems. This has tended to push local civil society organizations outside the reach of the Fund.

For example, the PHAMIT project featured mainly innovative aspects, based on the belief among NGOs and many others that long-term reductions in HIV vulnerability among migrants in Thailand requires illegals to become legal, access to health services to be improved, and human rights not to be violated. While this approach seemed to be welcome at the time that the project was first submitted, more recent communications from the Global Fund appear to question activities and outputs that do not fall in line with traditional Global Fund indicators. The problem is that the Global Fund focuses on specific HIV-related outputs such as condoms distributed, people reached with behavioural change messages, etc. Thus, broader social interventions, such as legalization of migrant workers (so that they have immediate access to health services), are not included in the standard indicators of the Fund. In the past, there were no standard indicators, and so projects had more room and flexibility.

Furthermore, the increased formality in reporting and financial requirements puts civil society at a disadvantage – and opens the door for government and international organizations to have greater influence – because civil society representatives tend not to have relevant skills comparable to those of the representatives of other sectors (as I indicated above).

Conclusion

There is no doubt that civil society in Thailand continues to support the basic principles of the Global Fund and the challenging programmes funded by the Fund in countries in need around the world. Civil society also sees the Global Fund as a rare opportunity to involve civil society in the process of identifying, reviewing and implementing national programmes. However, ways have to be found to offset government dominance of the country-level process.

The Global Fund needs to identify ways to increase civil society involvement in the Global Fund processes, including in the CCM and in the implementation of projects. There should be more NGO PRs and SRs in Thailand, and NGOs should be given responsibility for specific programme areas, particularly those areas (such as drug use and sex work) where the government is not keen to become involved.

In addition, the Global Fund needs to demonstrate greater flexibility in its processes. Finally, CCM processes (including proposal development and review) should recognize the value that civil society brings to the table, such as innovative social interventions and ideas concerning how to reduce stigma and promote the rights of vulnerable populations.

[Note: Promboon Panitchpakdi is Executive Director of the Raks Thai Foundation. This article, which is based on a presentation he made at a satellite session at the International AIDS Conference in Toronto in August 2006, expresses Mr. Panitchpakdi's personal views.]

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