

Social Policy and Community Welfare Management for Poverty Reduction in Thai Experiences: An Implication for Asian Countries*

Montri Kunphoommarl, Ph.D.** & Sirinapa Kunphoommarl***

Abstract: This paper aims to provide an overview of the causes, consequences, and social policy of the Thai government towards poverty reduction by examining rural development strategies and experiences during the past two decades. Discussion is focused on the question of universalization of social protection from the national level down to the local level. We use an institutional approach to identify the roles of state administration and community welfare management in social protection schemes for local poor and disadvantaged groups. Social protection schemes will be surveyed in terms of social assistance, social security, and social insurance. Furthermore, community welfare management at the grassroots level in Phitsanulok province has been purposively selected for this paper.

* Paper presented at International Conference “International Comparative Analysis of Poverty in Asia: Urbanization, Migration and Social Policy” November 1-3, 2012, Southwest Jiaotong University, Chengdu, PRC.

** Montri Kunphoommarl is currently an Assistant Professor in the Department of Sociology and Anthropology, Faculty of Social Sciences, at Naresuan University, Thailand from the year 2005. His areas of teaching and research include rural development, community based management, human security, social protect, civil movement and democratization.

*** Sirinapa Kunphoommarl is a freelance researcher and has a Master Degree in Family Study and Social Development from Sukhothai Thammathirat Open University. Her work is currently based in Phitsanulok province, Thailand. She worked with the Canadian Embassy, Bangkok in 1991. Her interests cover the areas of resource management, family financial management, community planning and project evaluation.

The management patterns of active community welfare organizations are described, analyzed, and evaluated in terms of activities implementation, member participation, and impact evaluation to tackle poverty and inequality. Factors affecting the effectiveness of community welfare management are also discussed in detail. Finally, the suggestions are employed in terms of the significant contributions of active participation of concerned stakeholders from Thai cases to other Asian countries.

Keywords: Poverty reduction, Community welfare, Social protection

Introduction

Thailand has been facing an economic crisis since 1997. The country turned to a poverty reduction policy and strategy. The issues of social safety nets and social protection have emerged along with poverty relief programs as seen in the eighth national socio-economic development plan (1997-2001), the ninth, and the tenth national socio-economic development plan (2002-2011). The above poverty alleviation measures initiated by the government were short-term and long-term policies. In summary, most of the poverty reduction initiatives undertaken by the government gave priority to not only holding skills training or generating income involving one particular organization but also enhancing the involvement of local groups and organizations to solve related problems.

The objectives of this paper are the following:

1. To review the current social policy of the Thai government towards poverty reduction.
2. To examine social protection schemes and practices.
3. To identify factors affecting the effectiveness of community welfare management.
4. To make suggestions/recommendations for community welfare management in other Asian countries.

Thailand Social Policy

Overview of the Thai Situation

Thailand covers the area of approximately half a million square kilometers, a size comparable to that of France. Thailand is divided into four regions: Central, North, Northeast and South and is administratively divided into 77 provinces, one of which is the Bangkok Metropolis. Each province is further subdivided into 877 districts (amphoe and king-amphoe), 7,255 sub-districts (tambon) and 74,944 villages (muban). Some areas are also designated as municipalities, including all provincial capitals.

In terms of poverty rate, Thailand has made impressive progress in poverty reduction. Poverty incidences in Thailand dropped from 33.69 percent in 1990 to 9.6 percent in 2008. This means that Thailand has already achieved the Millennium Development Goal 1: Eradicate extreme poverty and hunger.

With regard to the budget for social welfare and its percentage of the total national budget in 2009, the Ministry of Social Development and Human Security, which is a key organization of the government to provide social welfare services for women, children, persons with disabilities, older persons and other vulnerable groups was allocated 9,698.6278 million Baht. This was 0.53 percent of the total national budget. The health budget has increased from 4 percent of the total national budget in 1980s to 9.5 percent in 2009.

Table 1 General Information for Thailand

General Information	Data	Year
1. GNI per capita (US \$)	3400	2009
2. Poverty rate	9.6	2008
3. Adult literacy rate		
Male	96	2008
Female	90.6	2008
4. Urban population (%)	36.1	2009
5. Budget for social welfare as % of total national budget	0.53	2009
6. Budget for health as % of total national budget	9.5	2009

According to the Institute of Population and Social Research, Mahidol University, as of 1 July 2009, the population of Thailand is 63.4 million, almost 10 million of whom work and reside in Bangkok. When considering the age group, it was found that the young population (aged 0-14) accounted for 13.412 million, or 21.16%, of the total population. The working –age group (age 15-59) accounted for 42.71 million, or 67.37%, and the elderly group (aged 60 or more) accounted for 7.274 million or 11.47%.

Change in demographic structure is a major factor contributing to human resources development, which in turn, strengthens economic development. The Thai demographic structure is changing to an aging society. The fertility rate has slowed down while the crude birth rate fell from 35.6 per 1,000 population in 1974-1976 to 12.5 per 1,000 in 2009 and the crude death rate was 8 per 1,000. The total fertility rate (TFR) dropped from 6.3 in 1964-65 to 1.5 in 2009.

Table 2 Demographic Information of Thailand

Vital Statistics	2009
1. Total Population	63,121,000
1.1 Population by Sex	
Male	31,241,000
Female	32,155,000
1.2.1 Population in Urban Areas	22,899,000
1.2.2 Population in rural Areas	40,497,000
1.3 Population by Region	
Bangkok Metropolis	6,720,000
Central (excluding Bangkok Metropolis)	15,301,000
Northern	11,721,000
Northeastern	21,231,000
Southern	8,423,000
1.4 Population by Age Group	

Children (under 15)	13,412,000
Labor force (15-59)	42,710,000
Elderly (60 and over)	7,274,000
School ages (-21)	15,347,000
Women in RH ages (15-44)	17,819,000
2. Crude Death Rate (per 1,000 population)	8.0
3. Crude Birth Rate (per 1,000 population)	12.5
4. Infant Mortality Rate (per 1,000 live births)	12.5
5. Under 5 Mortality Rate (per 1,000 live births)	14.5
6. Maternal Mortality Rate (per 100,000 live births)	41*
7. Life Expectancy at Birth (years)	
Male	69.5
Female	76.3
8. Total Fertility Rate (per women)	1.5

Source: Mahidol Population gazette Midyear 2009 (1st July)

* Bureau of Policy and Strategy, 2009

Government Policy towards Poverty Reduction

Thailand's first attempt to institutionalize a social security system was undertaken as early as 1932 when Thailand moved from an absolute to a constitutional monarchy. Dr. Preedi Phanomyoung aimed to set up a social insurance scheme in which every Thai citizen would be entitled to receive a regular income from the state. The social insurance plan was later rejected. In 1954 the Thai parliament approved a Social Insurance Act covering six types of contingencies: maternity, sickness, invalidity, childcare, old age and death, but the law was heavily attacked from different groups and never implemented. However, in 1951, a Government Officials Pension Act was passed to provide old-age pensions for retired government staff. A Civil Servant Medical Benefit scheme, covering medical expenses for public employees was legally

enacted in 1980. During the 1980's, several social security bills were drafted, but no decisive step was taken. In 1990, the parliament unanimously passed the Social Security Act on July 11, under the General Chatichai Choonhavan government. The political decision was a historical event in the country's long struggle for a social security law. Moreover, as a result of successful advocacy campaigns launched by the informal sector, the parliament passed the Ministerial Regulation on home-workers in April 2004 and the Ministerial Regulation on agricultural workers in December 2004 which allows home-based workers and agricultural workers access to labor protection. In addition, the other laws addressing social welfare are the Social Welfare Promotion Act of 2003 and the Social Welfare Law Reform and Pensions Act of 2006.

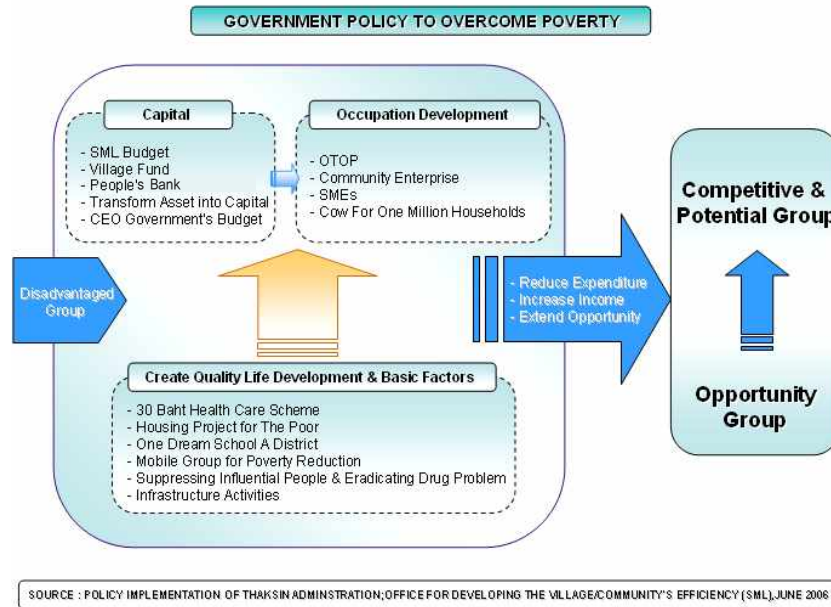
In 2001, the Thai Government declared a 'war' on poverty. In order to reduce the incidence of poverty to less than 4 percent by 2009 it has established a 'Center for Fights Against Poverty' which involved all government agencies at all levels, namely national, ministerial, departmental, provincial, and district with a four year plan. Poverty reduction policy was also guided by His Majesty the King's philosophy of the "Sufficiency Economy" which adheres to the Buddhist concept of the middle path. The Ninth National Economic and Social Development Plan (2002-2006) not only used the King's concept but also emphasized community involvement to reduce poverty and strengthen social protection to take down the problems by themselves and promote community based learning processes and knowledge management. Key elements of Thailand's strategy include: a pro-poor macro- economic environment; widening opportunities for the poor; improving social protection for the vulnerable and disadvantaged; managing resources with participation from communities and local administrative bodies; and improving public management. Some of the individual schemes promoted by the Thaksin Shinawatra government included: Farmer's Debt Moratorium, Village and Urban Community Revolving Fund, People's Bank, One Tambon One Product (OTOP), Asset Capitalization,

Universal Health Care Scheme (pay 30 baht per visit) and Land Reform. Abhisit Vejjajiva government's People's Development Policy (2008-2010) provided a package of social welfare measures including low-interest loans for taxi drivers, food vendors, and farmers; free electricity for minimal monthly use, and initiated a free-15 year quality education program.

Rural poverty has been a serious problem in Thai society for a long time. The attempts to reduce poverty and increase income distribution have been demonstrated under different names of various Thai government administrations. The first employment project began in 1975 under M.R. Kukrit Pramoj with a total budget of 2,500 million baht. The budget was distributed to employ rural labor to do public work such as road and bridge construction during the summer time in order to reduce temporary migration to Bangkok. After that, General Kriengsak Chomanan and General Prem Tinsulanonda also promoted rural job creation projects through government agencies. Later, the Chuan Leekpai administration launched the Miyasawa project with a budget of over 40,000 million baht for rural employment.

The Thaksin Shinawatra administration (2001-2006) set up a project called Developing the Village/Community's Efficiency (Small, Medium and Large Village Fund: SML) in October of 2004 to develop people's potentiality to think, analyze and work in groups in order to increase villagers' ability to participate in decision-making, resource management, budget allocation and village/community problem solving with efficiency as guided by the sustainable economic development way. *(See Figure 1)*

Figure 1. Government Policy to Overcome Poverty



The government policy to overcome poverty problems emphasizes three areas of project implementation. They are:

First, Capacity support consisting of

- Small, medium, and large village budget
- Village fund
- People's bank
- Transformation of assets into capital
- CEO Governor's budget

Second, Occupational promotion consisting of

- One Tambon One Product (OTOP)
- Community economic enterprise
- Small and medium enterprise
- Cows for 1 million households

Third, Quality of life and basic services consisting of

- 30 baht health care scheme

- Housing project for the poor
- One dream school a district
- Mobile group for poverty reduction
- Suppressing influential peoples and eradicating drug problem
- Infrastructure activities

Conceptual Framework

The main theme of this study focuses on three concepts: the rural development triangle, organization capacity development through empowerment, and community welfare management. The main definitions and components of each concept are discussed in detail as follows:

Rural Development Triangle

There are three important components to reduce poverty among disadvantaged groups which hereafter is called “The Rural Development Triangle” (*Aspen Institute, 1996*) as shown in Figure 2.

Figure 2. Rural Development Triangle



First, civic capacity or community capacity building

which aims to enable people in a community to work together, make well-considered and collaborative decisions, develop a vision and strategy for the future, and act over time to make these real. Community capacity building efforts can encompass a wide range of activities, from formal leadership development efforts to community-wide strategic planning, to a wide variety of less formal activities that build trust among citizens. Community capacity building forms the base of the Rural Development Triangle because the better a community's capacity, the better the decisions a community makes about its economic development or stewardship choices- and the better the community is at turning those decisions into effective action.

Second, economic development

centers on growing entrepreneurs from within the community and base business development strategies on the existing core competencies of resident people and firms, in other words, trying to take advantage of and strengthen what they are already good at. It focuses on finding and pursuing the market opportunities- that is, places to sell their existing products and skills, new ways to sell them, and ideas for developing new products and skills- that complement these core competencies.

Third, stewardship

which states that a community must steward its natural resources and way of life- and nurture its culture and people -if development is to be maintained at a healthy and sustainable level over time. Community stewardship is made possible when rural citizens acknowledge the value of their resources and engage in civic dialogue to determine, how and which resources should be developed or preserved. In general, community capacity building- can only strengthen a community's future

economic development and stewardship efforts.

Organization Capacity Development through Empowerment

Empowerment is the expansion of assets and capabilities of poor people to participate in, negotiate with, influence, control, and hold accountable the institutions that affect their lives. The four key elements of empowerment (World Bank, 2002) that must underlie institutional reform are:

Access to information

Information is power. Two-way information flow from government to citizens and from citizens to government is critical for responsible citizenship and responsive and accountable governance.

Inclusion/participation

An empowering approach to participation treats poor people as co-producers with authority and control over decisions and resources developed to the lowest appropriate level. However, in order to sustain inclusion and informed participation, it is usually necessary to change rules and processes so as to create a space for people to debate issues, participate in local and national priority setting, budget formation, and access to basic financial services.

Accountability

There are three main types of accountability mechanisms. Political accountability of political parties and representatives takes place increasingly through elections. Administrative accountability of government agencies is ensured through internal accountability mechanisms, both horizontal and vertical, within and between agencies. Social or public

accountability mechanisms hold agencies accountable to citizens, and can reinforce both political and administrative accountability.

Local organization capacity

This refers to the ability of people to work together, organize themselves, and mobilize resources to solve problems of common interest. Organized groups and communities are more likely to have their voices heard and their demands met.

Empowerment means enhancing the power of some group of people. Empowering interventions may take a variety of forms, including skill development (e.g., literacy, public speaking, record keeping), provision of assets (credit, transportation, meeting space) and information, assistance with networking (e.g., identifying others with shared interests, access to markets and politicians), and the facilitation of organization (e.g., institution building). Skill development and the provision of assets affect social organizations indirectly by improving opportunities for disadvantaged people. Other forms of empowerment directly interact with existing patterns of social organization, attempting to alter them in ways that improve the position of the relatively disadvantaged.

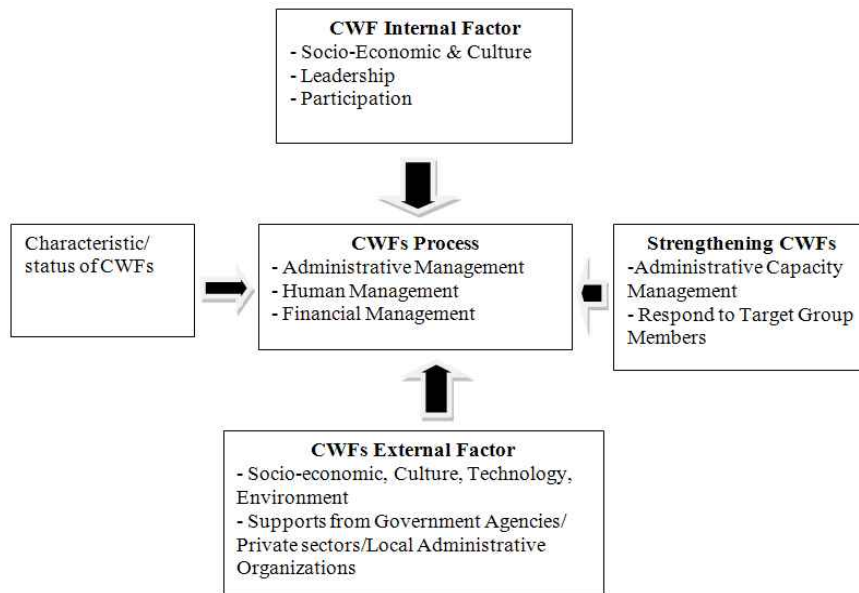
Community capacity building efforts tend to focus on some combination of four major strategies (Chaskin, R. J. and others, 2001). Leadership development centers on the skills, commitment, engagement, and effectiveness of individuals in the community building process. Organizational development includes the creation of new organizations or the strengthening of existing ones so they can do their work better or take on new roles. Community organizing targets the associational aspects of community functioning and the mobilization of individual stakeholders for particular collective ends. Finally, internal collaboration builds the organizational infrastructure of communities through the development of relationships and collaborative partnerships on the organizational level. These four strategies are brought together under the

umbrella of some sort of local governance mechanism, which guides initiative planning and implementation and tends to take on the more expansive role of speaking for and acting on behalf of the neighborhood. Capacity building efforts may adopt a largely programmatic approach (job training and placement, structuring access to financial opportunities) or a more procedural one (voter registration, block club organizing).

Community Welfare Management

The components of community welfare management consist of the characteristics of the Community Welfare Fund (CWF), Community Welfare Fund internal factors and external factors, Community Welfare Fund process, and Strengthening Community Welfare Fund as shown in details in Figure 3.

Figure 3. Community Welfare Management Diagram



In this study, the main techniques used were qualitative and

participatory methods including a preliminary survey, focus group discussion, in-depth interviews, guideline interviews, and SWOT analysis. Target Community Welfare Fund in 9 districts of Phitsanulok province, Thailand with 39 sub-districts and 3 of them were selected as effective Community Welfare Funds (CWFs). The obtained data was reviewed using descriptive analysis.

Social Policy and Implementation in Thailand

Social Protection Scheme

Social protection in Thailand has been given much more attention since the 1997 constitution referring to the citizen's right to a well-standard education as well as public health. The Ninth national economic and social development plan (2002-2006) has marked the importance of social protection improvement in terms of efficiency, equality and accessibility. The government uses the Household Basic Minimum Needs (BMN) data, which is collected from rural households every year, to identify the target group and poverty household (income less than the poverty line of 20,000 baht). The key features of social protection could include: Health Schemes under universal health care including - voluntary health card project, low income health project; Education Schemes including - compulsory education, loans for education funding, a school lunch project, and a school milk project; Worker Welfare Programs including - overseas workers aid fund, credit loans for overseas job seekers, worker's fund, construction workers and their families, and a skill development fund; Social Assistance Programs for vulnerable groups including -social service for children in families, services for disadvantaged women, a revolving fund for women, services for elders, services for disabled people, services for ethnic people, and services for disaster victims. The detail of social protection expenditure is shown in Table 3 below.

Social Protection Practices

The key actors implementing social protection schemes in Thailand consist of Governmental Agencies, NGOs, Local Government at Provincial and Tambon levels, and Community based Organizations which can be described as follows: Firstly, Government agencies including the Ministry of Interior –Community Development Department (village fund and SML fund at village level), Ministry of Social Development and Human Security (social assistance for elders, women and disable people, social Insurance for disadvantaged groups), Ministry of Labor and Welfare (worker welfare, employment and job seeker protection, skill promotion), Ministry of Health (Medical care, 30 baht health care card), Ministry of Education (loan for education fund, education fee support). Secondly, NGOs in the name of Community Organization Development Institute (CODI) support housing welfare (Ban Munkong, Ban Aua-Ar-Thorn). Thirdly, local government takes action on social protection activities in place of the national government after the decentralization period in 1996. Fourthly, community based organizations have launched social protection activities by themselves with some support from the government, NGOs and local governments such as the community welfare group and the saving group.

The Ministry of Social Development and Human Security, as shown in Figure 4, is the principal government agency dealing with services to the needy and distressed people throughout the country. The nature of its welfare program is remedial, preventive, curative and developmental in order to enable people being helped to become productive citizens. Its services are extended to specific target groups of children, women, the elderly, the disabled, the destitute, discharged mental patients, disaster victims, needy families, poor and homeless persons, and the hill tribes.

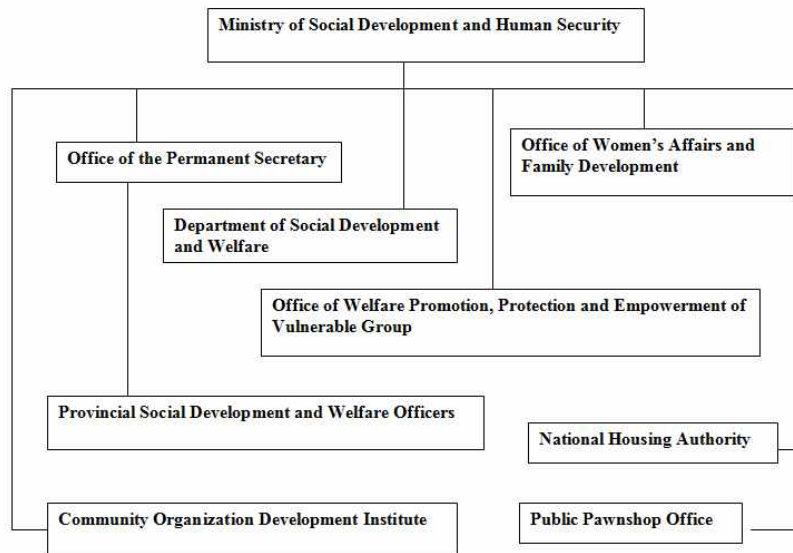
Table 3. Social Protection Expenditure (million Baht) (5 THB = 1 Yuan)

Items	Year		
	1998	1999	2000
1. Corporate employees			
- social security regarding illness, disability and giving birth	3,578.18	3,637.08	3,964.81
- social security regarding child care and old age	-	3,853.30	4,076.71
- financial endorsement to the employee fund	200	-	-
2. Government officials			
- medical care	16,439.96	15,253.21	17,057.56
- pension fund	27,825.17	30,047.27	29,349.12
3. Private school teachers	317.06	326.31	469.25
4. Children & youths	90.66	90.66	90.66
5. Underprivileged women	28.41	28.41	28.41
6. Elderly people	763.35	763.35	1,440.15
7. Homeless people or beggars	0.10	0.10	0.10
8. Disabled persons	207.13	117.13	117.13
9. Casualties or victims	107.63	106.92	807.03
10. Families and communities	52.85	142.86	242.86
11. Hill tribe people	15.10	17.36	12.61
12. People in need of social welfare (case of peoples' health care card)	9,944.67	8,405.62	8,812.40
13. Veterans	600-700	600-700	600-700
Total expenses for social protections	60,200.27	63,439.69	67,118.80
Total governmental expenses	800,000	825,000	860,000
The percentage of social protection expenses in comparison to the total governmental expenditures	7.49	7.65	7.75
National GDP as of current rate	4,628,431	4,615,388	4,900,330
The percentage of social protection expenses in comparison to GDP	1.29	1.37	1.36

Source: Thadaniti, Suwattana (2004). *Urban Poverty and Social Safety Nets in Thailand*, p. 129.

Note: The average cost of veteran support of 850 million Baht is included.

Figure 4. Structure of Ministry of Social Development and Human Security



Community Welfare Management

Community Welfare Management at Grassroots Level

In 2001, the Thai government focused more on poverty reduction by using the King's philosophy of "Sufficiency Economy" (as a middle path of the development concept). Key elements of Thailand's strategy included a pro-poor, macro-economic environment, widening opportunities for the poor and improving social protection for the vulnerable and disadvantaged. In 2003 and 2007, the Social Welfare Promotion Act was formulated by giving the meaning of social welfare as the social services system pertaining to the prevention remedy, development and promotion of social security in satisfaction of the basic minimum needs of the people to enable a good quality of life and self-reliance in terms of education, health, housing, occupation and income creation, justice processes and general social services. Since

then, the community welfare concept was introduced to assist people in difficult circumstances by setting up a new fund allocated and launched by people at the grassroots level. For example, one baht allocated funds from its members or saving group activities. In 2010, the National Committee on Social Welfare, chaired by the Prime Minister approved an implementation policy as follows: contribute to the welfare society in Thailand; aim to provide the welfare for all in 2017, focus on the government investment in social welfare and the investment for encouraging social sections to participate in a social welfare system and social promotion system. Currently, a 3 pronged model of community welfare management at the sub-district level which is a pattern of welfare allocated by 3 sectors: Government (Ministry of Social Development and Human Security by Community Organization Development Institute (CODI)), Community (CWFs: Community Welfare Funds) launched by local people, Local Administrative Organization (SAO: Sub-district Administrative Organization, Municipality) has been designed in CWFs at every sub-district level throughout the country.

Table 4. Numbers of Community Welfare Organizations in 2010

Region	No. of CWF	No. of Villages	No. of membership	Money Allocation (Baht)
Central	227	1,644	99,065	58,106,766
North	241	1,617	60,853	66,559,544
South	249	1,641	172,389	243,340,312
Northeast	215	2,422	99,157	34,219,196
Total	932	7,324	431,464	402,225,818

Source: Ministry of Social Development and Human Security

In 2010, Community Welfare Organizations have been strengthened and certified by the Social Welfare Promotion Act. There are 932 organizations throughout the country, with the highest numbers of organizations in the Southern provinces (about 249 organizations) as shown in Table 4. The work types of community welfare organizations can be divided into 6 types, with the welfare services provided in at least 7 categories as shown in Table 5 and Table 6, respectively.

Table 5. Work Types of Community Welfare Organizations in 2010

Region	Com. Financial	Com. Business	Resource Environment.	Ideology/ Religion	Disadvantage Group.	Com. Welfare Network	Total
Central	126	26	2	38	33	2	227
North	172	15	7	16	26	5	241
South	206	14	3	11	11	4	249
Northeast	130	21	1	41	17	5	215
Total	634	76	13	106	87	16	932

Source: Ministry of Social Development and Human Security

Table 6. Main Welfare Services in Community Welfare Organization in 2010

Region	Maternal	Elder	Sickness	Death	Occupation Money	Education	Dis-education
Central	146	118	189	180	57	47	44
North	90	76	136	101	73	70	49
South	185	190	226	219	152	155	150
Northeast	135	110	169	152	75	42	59
Total	556	494	720	652	357	314	302

Source: Ministry of Social Development and Human Security

Case Study of Community Welfare Management in Phitsanulok Province, Thailand

Community welfare management can be illustrated using three case studies in Phitsanulok province. Lessons learned from these cases are discussed as follows:

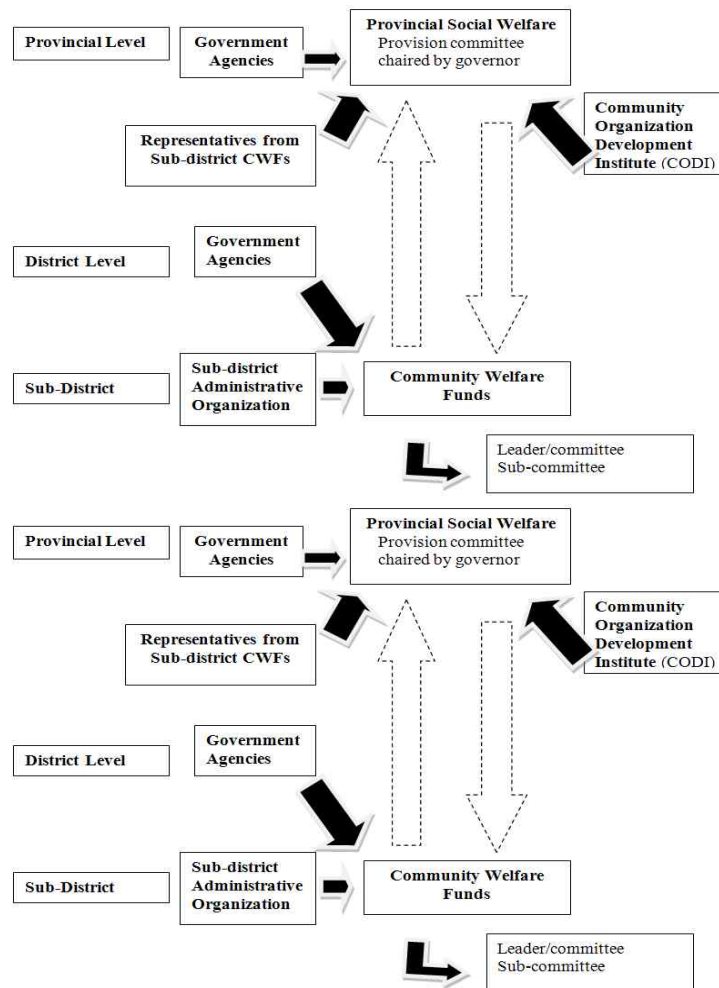
Community Welfare Management

Most of the total (39) CWFs studied in Phitsanulok, Thailand were started in 5 years or less with the number of members ranging from 130-3,000 adults/children. The main financial services offered by CWFs were for sickness, maternity, death benefits, income or occupation purposes, old age, transport to hospital, education costs, and needy disability, disadvantaged groups which sometimes provide for non-members as well. In addition, CWFs also donated money to support community activities, such as Buddhist cultural days, social welfare

study tours, and bath room construction for handicapped persons.

Problems facing CWFs members and management were as follows: lack of knowledge about social welfare; small numbers of CWF members; lack of support from SAOs, and local leaders who did not intend to support CWF activities and had little understanding of the CWF management system.

Figure 5. The Structure of Community Welfare Fund Management



Source: Adopted from CWF field data collection from Phitsanulok cases

Three Case Studies in Phitsanulok Province, Thailand

Three active CWF at Sub-district level in Phitsanulok were selected for in-depth study, namely, Sub-district Nakhonthai in Nakhonthai district, Sub-district Nongkham in Phrom Phiram district and Sub-district Saiyoi in Noen Maprang district by using establishment duration and effective management patterns; increased number of CWF members, and various types of CWF activities for its members as the main criteria.

Case I: The key management style of sub-district Nakhonthai: It was the first establishment of CWF in Phitsanulok started in 2005 by learning from CWF active management in Lampang province. The number of CWF members had increased from 708 to 1,690. All members came from all 13 villages with 10 CWF committee members and 18 sub-committee members. A three pronged welfare pattern has been developed and CWF fund divided into 3 types of uses namely, for social welfare (70%), for revolving fund in cash, and for reserved fund (20%).

Case II: The key management pattern of Sub-district Nongkham: CWF was first established in 2006 by allocating funds from an existing saving group. The number of CWF members had increased from 150 to 791. The CWF consisted of 21 committee members. About 5% of the fund was provided as compensation for the committee members.

Case III: The key management form of Sub-district Saiyoi: CWF was established in 2008 by learning from the study tour to CWF in Sub-district NakhonThai, Phitsanulok and Nakhon Srithammart Province in the South. The number of CWF members had increased from 293 to 2,335 with 27 CWF committee members. Sub-district Municipality provided office space for CWF and currently the Mayor of the sub-district Municipality had become the chair person which could contribute to an effectiveness of CWF in terms of financial support.

Lessons Learnt From Thai Cases

Factors affecting management capacity of Community Welfare Fund

CWF Work Site

The working places of CWF in general were CWF leaders' houses. Only some community welfare funds used the Sub-district Administration Organization office as the coordinating center which could promote more effective management and earn more opportunities for financial support from the Sub-district Administration Organization.

Internal Factors

The CWF management style provided by active indicators for CWF development including: 1) appropriate objectives of CWF focusing on life cycle support from birth to death; 2) leadership supported by CWF chair and its committee could contribute more for CWF members; 3) Active participation of CWF members in decision-making, planning, implementing, benefits obtained, and monitoring & evaluation could create a more effective CWF.

External Factors

The CWF supporting factors were: 1) the financial support from Sub-district Administrative Organization became main incentive tools; 2) the support from Provincial certified CWF Committee was used as the guideline for future CWF work.

Management Factors

Management patterns of CWF could be mostly defined by using the 4Ms concept: 1) Various characteristics of CWF committee members (in terms of sex, age, occupation, and experiences) could help other committee members to launch more beneficial CWF activities; 2) Good financial systems in terms of data recording and accounting documents improved budget control; and 3) Effective documents and good public

relations among members made more reliable work and more active participation from members.

Approaches for CWF capacity development were as follows:

Capacity Development

Capacity building for CWF committees in terms of work management, public relations, network making among government agencies, local administration organization, community groups, private sectors and academics were needed for future collaboration.

Sub-district Capacity Development

Strengthening leadership for CWF at the district level was planned in order to make the active district committee as a consultation committee for sub-district CWF.

Learning Center Development

Establishment of CWF learning center could become a focal point for exchanging knowledge of tested best practices and as a module for implementing CWF activities.

Activities Development

Development patterns of CWF activities should be structured and drafted by emphasizing the life cycle concept which is devoted to every walk of life in the village.

Conclusion and Recommendations

Conclusion

After a literate survey of social welfare and social protection in Asian Countries, it was found that most countries administered social protection schemes launched by government agencies and private

organizations without much emphasis on empowering community participation roles at the grassroots level as mentioned in the Thai case. Most of the programs or activities provided in other Asian Countries focused on the form of social security scheme or universal pension for elders, civil servants, and private insurance. The roles of local communities in welfare management have just emerged and promoted or extended less than 5 years especially in the South Asia region in the name of Social Protection Network. However, the lessons learnt from the Thai cases could be an example of community empowerment to manage social welfare and protection for other countries in Asia.

The suggestion for implication of community welfare for other Asian Countries could be focused more on how local organizations managed their own community welfare through the saving groups or grassroots organizations. The saving group or grassroots organizations should be strengthened and adapted as key change agents and knowledge transformers. The comparative study with Thai local communities should be investigated more in the future.

Recommendations

Three other recommendation issues can be discussed as follows:

Recommendation for Policy Implication

The three pronged welfare system, a pattern of welfare allocation which is co-operated by three sectors namely government, local community, and local administration, is an important aspect of welfare policy. These should be strengthened by long term policy support. In addition, the efficiency of the welfare fund still has some difficulties in combining various related and supported funds available at the grassroots level such as the village fund, Sub-district health fund, women development fund, and the welfare fund into integrated funds.

The organizational structure of welfare fund provision committees

have already been established both at the provincial and the sub-district levels without any district committee at the district level. In order to support and link between the provincial and sub-district committees, the district committee should be promoted and designed as well.

Recommendation for Future Implementation

The work patterns of community welfare fund provision committee should have designed activities, including data management, activities linkages, welfare formulation, participatory monitoring and evaluation techniques which could increase the levels of participation among concerned stakeholder organizations.

Capacity building for community welfare organizations should be planned and operated efficiently in managing the project and financial activities. Moreover, the network of concerned organizations, such as government agencies (Provincial Social Development and Human Security) Provincial Community Development, Local Administrative Organizations (Sub-district Administrative Organization, Municipality), Community (Community Organization Council, local activity groups), and private sectors (business groups) can become main supporters of community welfare funds in the long run and could earn contributions from the sub-district up to the district and provincial levels.

Recommendation for Future Research

Future research should focus more on the established patterns and management through knowledge based, rights based, finance based, health based, occupation based, human based, cultural/tradition based and other bases by using administration mechanisms of various funds as the main factors for designing the appropriate community welfare fund to fulfill livelihood need of such community.

Future research should emphasize more in-depth study dealing with the issues of how community welfare funds could be strengthened by

community self management concepts using a social learning process approach and participatory action research techniques as the main tools. Comparative research among Asian countries is still needed because these countries have similar socio-economic, cultural, and geographic backgrounds.

References

- Aspen Institute. (1996). *Measuring Community Capacity Building*. Washington, D.C.: Rural Economic Policy Program.
- Chaiyaporn Pibulsiri. (2008). Factors Affecting to Success of Social Welfare for Community Organization. *Journal of Development Administration*. 1/2008. (in Thai).
- Chaskin, R.J.p. Brown, S. Venkatesh and A. Vidal. (2001). *Building Community Capacity*. New York: Aldine De Gruyter.
- Community Organization Development Institute. (2008). *Community Welfare: The Development of Villager's Welfare by community organization as main actor and concerned organization as supporter*. Bangkok: CODI, Ministry of Social Development and Human Security. (in Thai).
- Montri Kunphoommarl. (2012). *Research Report on Guideline for Strengthening Community Welfare Organizations at Sub-district Level in Phitsanulok Province*. Phitsanulok: Naresuan University. (in Thai).
- Montri Kunphoommarl. (2011). *Thailand and Sri Lanka Social Policy Experiences: Institutional Roles in the Extension of Social Protection*. Paper presented at International Conference on the Inter-University Cooperation Program Region Stability through Economic, Social and Environmental Development in the Great Mekong Sub-region and Asia Pacific. August, 7-12, Venue: Cinnamon Grand Hotel, Colombo, Sri Lanka.
- Montri Kunphoommarl. (2006). *Institutional Strengthening and Capacity Building: SML in the Government Context*. Paper presented at the International Conference on Sustainable Development for Peace: New Dimension of Friendly Cooperation in the Upper Greater Mekong Sub-region. September, 25-28. Grand Wat Phnom Room, Sunway Hotel, Phnom Penh, Cambodia.

- Narong Petchprasert. (2001). *Social Safety Net: meaning, concept, theory, role and the success for society*. Bangkok. (unpublished in Thai).
- Patamavadi Pochnukoon Suzuki. (2009). *Literature Review and Knowledge Synthesis on Community Welfare in Thailand*. Bangkok: Project on Learning for Happy Community.(in Thai).
- Rapeepan Kamhom. (2011). *Social Welfare in the Thai Society*. Bangkok: Faculty of Social Administration, Thammasat University. (in Thai).
- Singh Paguman. (2007). *Social Protection in ASEAN: Issues and Challenges for ASEAN and Its Member Countries*. Vietnam: ASEAN Go-NGO Forum.
- Thadaniti Suwattana. (2004). *Urban Poverty and Social Safety Nets in Thailand*, In Zhang Yuling (ed.) *Emerging Urban Poverty in East Asia*. Beijing: World Affairs Press.
- Worawan, Chandoevmit and others. (2010). *Alternatives of Social Welfare for Thai People*. Bangkok: Thailand Development Research Institute (in Thai).
- World Bank. (2002). *A Framework for Empowerment: Summary: Based on Empowerment and Poverty Reduction: A Sourcebook*. Washington, D.C.: Poverty Reduction Group.