

# **Collaboration Between State and Health NGOs in the Kyrgyz Republic**

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## **Abstract**

The Ministry of Healthcare is the central state agency for the management and implementation of health policy in the Kyrgyz Republic. Nevertheless, local health NGOs are quite active in providing important social services that supplement, and in some cases replace, the role of the state. The majority of NGOs in this field are busy with providing basic health services to vulnerable groups. Inevitably, these NGOs also have to collaborate with state agencies in order to fulfil their missions and perform their activities. Understanding that health NGOs strongly depend on donor support, this paper will examine the question of whether state-NGO partnerships can reduce the reliance of NGOs on donor support in the future and improve service delivery in Kyrgyzstan. Based on interviews with representatives of state agencies and NGOs, it also provides an overview of the current status of state-NGO collaboration while looking at such factors as mutual understanding between actors, the role of donor impact/competition, actor characteristics, and the funding framework.

## **Introduction**

Health NGOs in the Kyrgyz Republic (Kyrgyzstan) are active in providing important social services that supplement, and in some cases replace, the role of the state. There are benefits and consequences to their activities. On the one hand, the ability of NGOs to raise funding for their activities from foreign donors allows them to provide the public with services that they might not otherwise enjoy. On the other hand, reliance on foreign donors and a lack of financial sustainability in the long term limits the ability of NGOs to provide reliable service. In theory, state support for NGOs, especially through contracting for health services, could provide an alternative or at least a supplement to fickle donor funding, providing a steady funding stream to NGOs that would allow them to operate in the fields in which they have their strengths in a more consistent and, consequently, more effective manner. This paper will explore the question of whether state-NGO partnerships can reduce the reliance of NGOs on donor support in the future and improve service delivery in Kyrgyzstan. To answer this ambitious question, it is necessary to assess the current state of state-NGO partnerships in the country.

While assessing the outcomes of partnerships between the state and NGOs, this paper will explore the factors contributing to the development and affecting the success of these partnerships in Kyrgyzstan: mutual understating between actors, the role of donor impact/competition, actor characteristics, and the funding framework. This paper will attempt to demonstrate that while state-NGO partnerships in Kyrgyzstan hold potential for increasing the stability of the health delivery in the country, there are a number of factors that exist that are still hindering the development of these partnerships.

## **Civil Society in the Kyrgyz Republic**

In order to understand which meaning of civil society is applicable to Kyrgyzstan, it is first necessary to look at how civil society has been defined by scholars. According to Edwards, one definition of civil society is that it is a part of society (the non-profit sector/NGOs).<sup>1</sup> Carothers argues that the meaning of civil society should not be limited to the non-profit sector (NGOs); because NGOs all have their own agendas and missions to follow, it is very unlikely that they will reflect the concerns of the whole public and thus there must be other aspects of civil society to supplement the work of NGOs.<sup>2</sup> Clark likened NGOs to a “conduit” for civil society, meaning that NGOs help to formulate the concerns of communities, ensuring that communities are involved in the decision-making process.<sup>3</sup> Fisher also finds NGOs to be active

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<sup>1</sup> Michael Edwards, *Civil Society* (Cambridge: Polity Press, 2004).

<sup>2</sup> Thomas Carothers, “Civil Society.” *Foreign Policy* 117 (Winter 1999/2000), 18.

<sup>3</sup> John Clark, “The State, Popular Participation and the Voluntary Sector,” in *NGOs, States and Donors: Too Close for Comfort?* ed. David Hulme and Michael Edwards (New York: St. Martin's Press, 1997), 56.

mediators in balancing the interests of the state and the public.<sup>4</sup> From the above, it becomes clear that civil society does not have one specific meaning. However, many scholars view NGOs as at least one part of civil society, if not everything that civil society means, and that, as such, NGOs can be influential in mediating relations between the state and the public.

In the Kyrgyz Republic, the term of “civil society” became widely used in the beginning of the 1990s, when the country began to receive grants from international donors promoting their own conceptions of “civil society”. Later, “civil society” came to be understood in the popular mind as being synonymous with the “third sector” or the “NGO sector”, similar to Edward’s definition from above. Influenced by the ideas of Western scholarship mentioned above, it also eventually came to be believed, especially by those in the NGO sector, that society can make its voice heard and participate in the policy-making process through the activities of NGOs.<sup>5</sup> The extent to which this has yet happened in Kyrgyzstan will be discussed below.

### **NGO Development**

In Kyrgyzstan, NGOs are understood as a substantial part of civil society. Consequently, it is necessary to take a closer look at the role of NGOs and their development in the country. For a better understanding of NGO development, it is necessary to look at the development of NGOs in the country in terms of three distinct stages. The first stage (1991–1997), represents the entry of international organizations into the country with the intention of motivating grassroots activities, and advocating the notion of civil society. During the second stage, which lasted from 1998 to 2003, the NGO sector realized its power through lobbying and advocacy campaigns. The beginning of the third stage was characterized by the emergence of leading NGOs from out among existing NGOs.<sup>6</sup>

As noted above, the role of donors in the establishment of NGOs in Kyrgyzstan was significant. Mainly, their assistance was through the provision of training, equipment and financial support to Kyrgyz NGOs.<sup>7</sup> Kyrgyz NGOs continue to strongly depend on financial assistance from international donors. They are quite active as long as there is foreign support

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<sup>4</sup> Julie Fisher, *Nongovernments: NGOs and the Political Development of the Third World* (West Hartford, CT: Kumarian Press, 1998), 13-39.

<sup>5</sup> Jay Cooper, “The Real Work: Sustaining NGO Growth in Central Asia” in *Civil Society in Central Asia*, ed. M Holt Ruffin and Daniel Waugh (Seattle: University of Washington Press, 1999), 216.

<sup>6</sup> Janice Giffen, Lucy Earle, and Charles Buxton, “The Development of Civil Society in Central Asia,” *INTRAC NGO Management and Policy Series 17*, (London: INTRAC, 2005), 112-113.

<sup>7</sup> M. Holt Ruffin, “Introduction” in *Civil Society in Central Asia*, ed. M Holt Ruffin and Daniel Waugh (Seattle: University of Washington Press, 1999), 7.

available for project implementation. However, they are unable to perform when outside revenue sources run dry.<sup>8</sup>

It can be argued that the state also stimulated the increase of NGOs in Kyrgyzstan through its own inability to provide services. Faced with economic crisis, the state did not have the resources to ensure the delivery of proper social services for the population. In contrast, NGOs, with the support of foreign donors, had the ability to mobilize far more resources. By allowing the services NGOs were rendering to substitute for state services, the state inadvertently provided a fertile environment for NGOs to develop.<sup>9</sup>

### **Public and State Attitudes towards NGOs**

More than 7,630 NGOs were registered between 1991 and 2006 in Kyrgyzstan.<sup>10</sup> The areas in which NGOs focus their activities vary considerably. The 2006 NGO database, developed by the Association of Civil Society Support Centers, identifies 25 fields in which NGOs are actively operating, including healthcare. There are more than 200 NGOs working in the area of healthcare according to this database.<sup>11</sup>

The attitude of the public towards NGOs remains generally positive. The International Republican Institute in May 2007 conducted a survey entitled “Moods of the Country”, which demonstrated that more than half of the population has a positive attitude towards the work that NGOs are doing.<sup>12</sup> This can be explained by the fact that the key responsibility of most NGOs is to supply social services for the population. Because of their service-provision role, it is not surprising that NGOs are generally found to be useful by the public.<sup>13</sup> The public’s attitude also bears out scholarly theories about NGO and public relations, which suggest that the fact that NGOs are community based allows them to clearly see and effectively respond to the needs of the community and to serve as effective mediators between the community and state structures.<sup>14</sup>

Unfortunately, the situation with state-NGO relations is different from the situation with public-NGO relations. On the eve of the National NGO Forum–2007, based on the initiative of a

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<sup>8</sup> A. Alumkulova and D. Seipulnik, “NGO Strategy for Survival in Central Asia: Financial Sustainability,” *Policy Briefs 22* (Ann Arbor, MI: William Davidson Institute at the University of Michigan, 2005), 4. [http://www.wdi.umich.edu/files/Seipulnik\\_Didara\\_22w.pdf](http://www.wdi.umich.edu/files/Seipulnik_Didara_22w.pdf) (accessed June 27, 2007).

<sup>9</sup> Asiya Esenbekova, “Bol’shinstvo organizaziyi grajdanskogo sektora Kyrgyzstana zavisimy ot zarubejnyh grantov, a znachit, ne mogyt v polnoi mere samorelizovatsa,” *Informational Agency 24*, January 23, 2007, Thursday, <http://www.24.kg/community/2007/01/23/28451.html> (accessed February 11, 2007).

<sup>10</sup> Elmira Shishkaraeva and others, *Review of the History of Establishment and Development of the NGO Sector in the Kyrgyz Republic*, (Bishkek: Soros Foundation, 2006), 63-64.

<sup>11</sup> Soros Foundation and Aga Khan Development Network, *NGO Database 2006*, Kyrgyzstan, (CD-Rom).

<sup>12</sup> International Republican Institute, Baltic Survey “Moods of the Country,” (May 2007), <http://www.iri.org/eurasia/Kyrgyzstan/pdfs/2007-07-03-Kyrgyzstan.ppt> (accessed June 16, 2007).

<sup>13</sup> Erkina Ubysheva, “Jit’ Deistvitelnost’u,” Association of Civic Society Support Centers *Tretie Sector 4*, July 2007, 54-57.

<sup>14</sup> Patricia Bert and others, *Experience of Partnership Development Between State and Civil Society Organizations in Kyrgyzstan*, (Bishkek: Aga Khan Development Network, 2007), 39-56.

few NGOs, discussions were held all over the country to identify urgent problems in the NGO sector in order to develop a strategy for strengthening the participation of NGOs in the policy-making process, and to build constructive interaction between the non-profit and public sectors. The discussions revealed that many NGOs find it difficult to interact with state agencies. Participants generally characterized these interactions as “confrontational” and “accusatory”. Another important point expressed by NGOs was the necessity of the state to begin actively supporting Kyrgyz NGOs through contracts for the provision of social services.<sup>15</sup>

## **Research Interest**

On July 10, 2007, a conference entitled “National Strategy for Health Strengthening of the Kyrgyz Republic for 2008-2015” was held in Kyrgyzstan. The goal of the conference was to promote the idea that it is important to invest in public health. During this conference, a new state strategy for dealing with public health was developed that would concentrate heavily on the promotion of healthy lifestyles among the populace. To make this kind of change in public health, a massive cooperative effort between local self-government agencies, NGOs and the mass media was envisioned.<sup>16</sup>

In Kyrgyzstan, in addition to the Ministry of Healthcare, which is the central state agency for the management and implementation of health policy in the country, there are currently 200 NGOs working in the field of healthcare.<sup>17</sup> The majority of NGOs in this field are active in providing basic health services to vulnerable groups such as the poor, the homeless, women, children, invalids, drug-users, sex-workers, former prisoners, persons living with HIV, and others. Inevitably, these NGOs have to collaborate with state agencies in order to fulfil their missions and perform their activities. The level of collaboration and the number of collaborations between NGOs and state agencies will inevitably increase if the aforementioned national strategy for health is to be implemented. Clearly, developing functional relationships between NGOs and the state will be critical if this effort is to be a success, however, there is a lack of understanding and research on what factors can impact the development of such relationships in the context of Kyrgyzstan.<sup>18</sup>

This paper attempts to examine the nature of collaborations between the state and NGOs in the health sector in Kyrgyzstan. The specific objectives of this research were to:

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<sup>15</sup> Association of Civic Support Society Centers, *Tretie Sector* 5, July 2007, 2-5.

<sup>16</sup> The Ministry of Healthcare, Press release on the conference “National Strategy on Health Strengthening of the Kyrgyz Republic for 2008-2015” Bishkek: July 10, 2007, <http://www.med.kg/News/2007/7/11.shtml#657> (accessed July 14, 2007).

<sup>17</sup> Soros Foundation and Aga Khan Development Network, *NGO Database 2006*, Kyrgyzstan, (CD-Rom).

<sup>18</sup> Elmira Shishkaraeva and others, *Review of the History of Establishment and Development of the NGO Sector in the Kyrgyz Republic*, (Bishkek: Soros Foundation, 2006), 26.

- Study existing collaboration between state agencies and NGOs;
- Investigate the impetus on both sides to enter into collaborations;
- Identify factors necessary for all actors to consider the collaboration beneficial;
- Discover the advantages and disadvantages of state-NGO collaboration.

## Method

Prior to undertaking the primary data collection phase, a literature review relevant to the topic of research was conducted. In particular, policy papers from the Ministry of Healthcare, articles related to the healthcare sector and state-NGO partnership in general and in Kyrgyzstan, and published and unpublished reports compiled by donors working in the field of healthcare were reviewed. Since the meaning of the term NGO has not yet been agreed upon in the international community, for this study, it was decided to use Smith's definition, which defines an NGO as (1) a self-governing organization, (2) a non-profit organization, and (3) an organization with a voluntary nature.<sup>19</sup>

Primary data were collected through semi-structured interviews with the heads of state agencies and leaders of NGOs doing work in the health sector. Interview questions for state agencies and NGOs were designed to elicit their views and experiences related to collaboration. Questions were piloted with representative of state agencies and NGOs to verify the relevance of their answers and their understating of the questions.

The NGO Database 2006, developed by the Association of Civil Society Support Centers, was used in order to locate appropriate NGO leaders to interview. The NGOs in the list were contacted by phone to ensure that their contact information remained the same and that their nature met the criteria of the definition of an NGO used in this study. After the list was vetted in this way, SPSS software was used to select a random sample of organizations to interview. Random sampling selected interviews in Chuy Oblast (which includes the capital Bishkek) as well as in Issyk-Kul Oblast (in the north of the country), and Osh and Jalabad Oblasts (in the south of the country). Looking at these four diverse oblasts provided a perspective on the nature of cooperation between state agencies and NGOs across the country. During the course of the study, a total of thirty interviews were conducted with NGO representatives.

With respect to state agencies, a list of departments was obtained from the official webpage of the Ministry of Healthcare. They were contacted by telephone to verify their relevance and the level of their experience working with NGOs. A random sample of these state

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<sup>19</sup> Karl Smith, "Non-Government Organizations in the Health Field: Collaboration, Integration and Contrasting Aims," *Social Science Medicine* 29, no. 3 (1989): 395-402.

agencies was selected with the help of SPSS software for interviews. NGO representatives were also asked during interviews whether they had any contacts with any state agencies in order to ensure that all relevant state agencies were taken into consideration in the research. A total of twelve interviews were conducted with representatives of state agencies.

In addition, consultations were held with personnel running health programs at local branches of six donor agencies in order to gain a better understanding of the critical current issues in the health sector.

Taking into account the fact that the interviewed people constantly interact with each other because of their common area of interest, it was decided to keep their names and other identifying information confidential. To this end, the discussion of interview findings uses coding as a stand in for the names of interviewees; for instance, R: 1 and so on.

### **Health Reform in Kyrgyzstan**

With independence, the budget cuts in the healthcare system made it difficult to maintain the health infrastructure inherited from the Soviet Union. Consequently, obsolete medical equipment was not replaced, and many health professionals moved to neighbouring countries in search of better salaries. Because of shortages in technical and human resources, a decline in the quality and availability of health service was observed.<sup>20</sup>

In particular, the absence of good healthcare has led to the worsening of the overall health of the population. Therefore, the health situation in the country is characterized by low life expectancies, and high rates of infant, maternal, and adult mortality. Many infectious diseases previously thought to have been eradicated have reappeared and a few new ones have appeared, including HIV/AIDS.<sup>21</sup> As of April 1<sup>st</sup>, 2007, the number of registered cases of HIV had reached 1,135. However, according to the WHO and other national experts, the number of people living with HIV in the country is more than 4,000 and increasing rapidly.<sup>22</sup>

Understanding that health reform was of high importance, the government adopted laws in 1992, which became the legal basis for this reform. These laws included the People's Health Protection Act, the Medical Insurance Act and the Sanitation Act. Several years later, the government began implementation of the first phase of the "Manas" National Health Reform Program. Sponsored by the World Bank, and other donors such as WHO, UNICEF, DFID, USAID, and the Swiss Cooperation Office, the program called for restructuring hospitals and

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<sup>20</sup> European Observatory on Health Care Systems, "Health Care Systems in Transition – Kyrgyzstan," (WHO, 2000) <http://www.euro.who.int/DOCUMENT/e69818.pdf> (accessed June 1, 2007).

<sup>21</sup> Josef Katzin, "Assessment of Health Care System in the Kyrgyzstan", WHO Kyrgyzstan 2003, <http://hpap.med.kg/MyFiles/Evaluation%20methods,%20revised.R>. (accessed May 2007)

<sup>22</sup> Valentina Kirichenko, "Situation on HIV/AIDS in the World and the Kyrgyz Republic," *Pulse: Informational Journal of Issues of HIV/AIDS*, (Bishkek: Government of the Kyrgyz Republic, UNDP, and WHO, Spring 2007).

sanitary epidemiological services, strengthening primary health care, and substituting polyclinics with a network of family physicians at the local level. The program also touched on requiring health insurance payments by the public to the state, incentive-based payment systems, the development of health information systems, and better pharmaceutical management.<sup>23</sup>

After completion of the program, an assessment took place. During it, there were other areas in the health sector that were identified as requiring further improvement. Consequently, the second phase of the program, called “Manas Taalimi” began in 2005. The main areas of focus were: (1) to improve the health of the population, (2) to achieve equity in the accessibility of health services, (3) to reduce the financial burden of healthcare for the population, (4) to raise the effectiveness and quality of medical services, and (5) to raise the level of transparency in the health sector.<sup>24</sup> Although this program is still in the process of being implemented, and thus how it will work in practice is still unknown, the program plan explicitly states the necessity of involving local self-government agencies, the mass media, and, particular, NGOs working in the field of healthcare for the more effective achievement of program goals.

### **State–NGO Collaboration in Healthcare**

The true value of NGOs lies in their interaction with state agencies. While interacting, NGOs start playing a stronger role in local development.<sup>25</sup> When facing problems in healthcare, state agencies in developing countries may see value in cooperating with the non-profit sector in service delivery<sup>26</sup> because NGOs have relevant experience in working with communities, and also have the ability to fundraise external sources of support for their projects.<sup>27</sup> Thus, when donors provide support for local NGOs to implement activities related to healthcare, they also unintentionally build the basis for a relationship between the state and NGOs.

Donors also intentionally stimulate state-NGO partnership by stressing the need for the state to involve the non-state sector in projects. Most donor organizations believe that state-NGO cooperation in healthcare delivery ensures better quality service.<sup>28</sup> The WHO, for example, has highlighted state-NGO partnership as a key factor for healthcare development and

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<sup>23</sup> Derick Brinkerhoff, “Government–Nonprofit Partners For Health Sector Reform in Central Asia: Family Group Practice Associations in Kazakhstan and Kyrgyzstan,” *Public Administration and Development* 22 (2002): 51-61.

<sup>24</sup> National Health Program ‘Manas Taalimi’”, Ministry of Healthcare of the Kyrgyz Republic, <http://manastaalimi.med.kg/> (accessed May 2007)

<sup>25</sup> Michael Bratton, “The Politics of Government–NGO Relations in Africa,” *World Development* 17, no. 4 (1989): 569-587.

<sup>26</sup> Derick Brinkerhoff, “Government–Nonprofit Partners For Health Sector Reform in Central Asia: Family Group Practice Associations in Kazakhstan and Kyrgyzstan,” *Public Administration and Development* 22 (2002): 51-61.

<sup>27</sup> Karl Smith, “Non-Government Organizations in the Health Field: Collaboration, Integration and Contrasting Aims,” *Social Science Medicine* 29, no. 3 (1989): 395-402.

<sup>28</sup> Natasha Palmer, “An Awkward Threesome – Donors, Governments and Non-State Providers of Health in Low Income Countries,” *Public Administration and Development* 26 (2006): 231-240.



the tackling of health issues in developing countries particularly.<sup>29</sup> It noted that uncoordinated efforts between the state and NGOs result in the duplication of work and the ineffective expenditure of resources and thus partnership is essential in order to reduce waste.<sup>30</sup> In addition, donors believe that state-NGO partnership is important because NGOs are meant to voice the needs of community.<sup>31</sup>

### **Issues of Partnership**

In the reviewed literature, partnership is used as a more official term for “cooperation” or “collaboration”. Usually, partnership is described as two or more organizations working jointly to achieve common goals. In partnerships, the roles and duties of the partners are explicitly stated and mutually agreed upon. Partnership does not necessarily imply a financial obligation on the part of either of the actors, and it can take various forms from the simple to the more complex.<sup>32</sup>

Bratton found that in partnership building, the state and NGOs need to consider the following factors, which can impact their relations. First, partnership will not work unless there is explicit commitment and willingness from both sides. Mutual understanding of the goals of partnership and the means for achieving those goals must be found at the outset. Second, when donors provide support for NGOs, they unintentionally impact state/NGOs relations. This is because donors have their own policies and approaches to solving issues and they expect NGOs to abide by these policies and use these approaches. Therefore, if there is a disconnect between the understandings of donors and the state as to how to deal with health issues, the relationship between NGOs and the state are put at risk.<sup>33</sup> Third, when focusing on the same service area, the state and NGOs can view each other as competitors and this sense of competition can hinder the development of cooperative relations. Even though, the state can recognize the value of NGOs’ contributions to the health sector, there are still factors, which force the state to be cautious. When the state believes that NGOs are guided by a “foreign hand” it can fear losing control over state policy. At the same time, when NGOs feel that the state is skeptical of their intentions

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<sup>29</sup> K. Buse and A. Waxman, “Public-Private Health Partnerships: A Strategy for WHO,” *Bulletin of the World Health Organization* 79 (2001): 748-753.

<sup>30</sup> A. Thomas and V. Curtis, “Public-Private Partnership for Health: A Review of Best Practices in the Health” World Bank: Water and Sanitation program, July 2003, 2-22

<sup>31</sup> John Clark, “The State, Popular Participation and the Voluntary Sector,” in *NGOs, States and Donors: Too Close for Comfort?* ed. David Hulme and Michael Edwards (New York: St. Martin's Press, 1997), 56.

<sup>32</sup> Derick Brinkerhoff, “Government–Nonprofit Partners For Health Sector Reform in Central Asia: Family Group Practice Associations in Kazakhstan and Kyrgyzstan,” *Public Administration and Development* 22 (2002): 51-61.

<sup>33</sup> Michael Bratton, “The Politics of Government–NGO Relations in Africa,” *World Development* 17, no. 4 (1989): 569-587.

because of their belief in the power of the “foreign hand”, they tend to be wary of initiating partnerships.<sup>34</sup>

The organizational and structural differences between the state and NGOs are also factors influencing the potential for the development and success of partnerships. The fact that the strengths of one actor can help to overcome the weaknesses of the other actor is one advantage of state-NGO partnership. The state is a strategic actor for health development on the whole, whereas NGOs are likely to deal only with certain limited health issues. In addition, NGOs have access to foreign support, while the state possesses only limited resources (at least in a developing country context). Moreover, the fact that NGOs are smaller allows them to be more adaptable and flexible, whereas, the state is larger and more bounded by bureaucratic regulations and decision-making processes.<sup>35</sup>

### **Findings of Interviews**

In this part, the findings of interviews with representatives of state agencies and NGOs are presented. The interviewed health sector NGOs were working with the following vulnerable groups: the poor, women, children, the elderly, the disabled, sex-workers, drug-users, and HIV-infected individuals. The missions of these NGOs were to inform the targets groups about healthy lifestyles and to provide basic and limited health services and support. The interviewed NGOs had experience collaborating with one or more of the following agencies: the Ministry of Health Care, the Ministry of Justice, the Ministry of Labor and Social Defence, and other state departments, working in the health sector. The areas of collaboration included providing access to targeted groups, exchanging human and technical resources, providing consultations, and developing joint projects.

### **Mutual Understanding Between Actors**

Bratton found that mutual understanding between partners is a significant factor for the development of good state-NGO partnerships. In other words, when actors enter into collaborations, there should be a clear understanding between them as to the necessity and goals of the partnership. From the conducted interviews, it was seen that both state agencies and NGOs agreed on the need for partnership, and sometimes entered into contractual partnership agreements, although it is more likely for NGOs to approach the state with partnership

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<sup>34</sup> John Clark, “The State, Popular Participation and the Voluntary Sector,” in *NGOs, States and Donors: Too Close for Comfort?* ed. David Hulme and Michael Edwards (New York: St. Martin's Press, 1997), 56.

<sup>35</sup> Zafar Ullah and others, “Government-NGO Collaboration: The Case of Tuberculosis Control in Bangladesh,” Oxford University Press in association with the London School of Hygiene and Tropical Medicine, January 24, 2006.

opportunities than vice-versa and the burden tends to be on the NGO to prove to the state why the partnership will be useful.

Both state agencies and NGOs highlighted the necessity for partnership in such an important area as healthcare. Both players are limited in resources and they believe that if they unite their efforts in doing almost the same job, they can achieve more effective results. One state official stated, “Unfortunately, the state has limited resources to deal with the broad state health agenda at the moment. Therefore, we welcome any contributions towards dealing with health issues, and in particular [contributions] from NGOs. I believe that when the state and NGOs combine their efforts, they double the chance of making a positive change.” R: 1. From the side of NGOs, it was also noted, “We still need to understand that NGOs also have their limitations, we cannot help everyone. Therefore, the active participation of the state is necessary.” R: 2. These examples demonstrate that mutual understanding for both players begins with understanding their respective limits and the necessity of going into partnership in order to make improvements in the health sector.

NGOs are more likely to approach a state agency with the possibility of beginning a partnership than the other way around. For many NGOs, the stage of negotiation on access to target groups opens up the opportunity to offer a partnership. In some cases, obtaining mutual understanding on population access is as far as the cooperation between the state and NGOs goes. In many cases, state agencies remain the gatekeepers to the populations targeted by NGOs. Therefore, prior to working with these groups, NGOs must receive “official approval” from the state for their activities. Obtaining official approval requires informing state agencies about the planned actions and convincing the state of the necessity of the work they are doing. One NGO representative noted, “When we conduct educational seminars related to health and our target group is youths, we approach the school administration to receive their permission. We understand that they have authority on this territory, and getting their agreement, which is an understanding of the work we do, will speed up the process.” R: 3.

Many NGOs found it useful to involve state agencies even before discussions on population access in the process of proposal development. Involving state agencies at this stage makes them more willing to participate in the implementation project. Several interviewees mentioned that mutual understanding can be developed at this early stage through “correct communication”. In their words, this means persuading officials to become involved in their projects by showing them how they can benefit from the projects. One leader of an NGO stated, “From our experience, we noticed that it is good to approach the state agency at the stage of project development to check their interest in participation. This means that the proposal will also include their opinions, and thus will receive their immediate approval for further

partnership.” R: 5. This example shows that early involvement can help to nurture mutual understanding between players and increase chances for partnership.

When an NGO and a state agency are interested in carrying partnership beyond just population access, both sides normally sign an agreement on cooperation. This agreement explicitly states their responsibilities, and is used to guarantee the completion of planned actions. The agreement also helps in the coordination of activities, such that NGOs and the state do not duplicate each other’s work. As one representative of an NGO expressed, “Teamwork means a lot of responsibility, so I believe that the agreement helps to avoid misunderstanding in the process of project implementation. The agreement obliges the parties to complete the promised actions.” R: 4. In this case, mutual understanding is guaranteed by a contractual obligation.

Mutual understanding in the minds of players can be stimulated through increased information exchange. When state agencies are not fully aware of the intentions of NGOs, they are likely to be sceptical of them. Understanding this, NGOs invite officials to attend their project events, such as roundtables, seminars, and trainings. NGOs believe that providing a better idea of who they are and what they do will help to overcome negative attitudes on the part of the state towards their activities. One NGO representative expressed this opinion by stating, “I think that the negative attitude on the side of state agencies is because they do not have a clear picture of that work that NGOs do. When we invite them to our project events, they see our mission better. Thus, they are more likely to change their sceptical attitude later on.” R:6. Sharing information not only creates greater trust, but also prevents a duplication of efforts. One official mentioned, “To be informed is a plus. A vacuum of information leads to the duplication of work.” R:7.

In some instances, state agencies contributed to joint projects with NGOs by providing consultations. Actually, some NGOs considered the involvement of a person from the state agency to be an important indicator of the likelihood of the successful completion of a project, because consultants from state agencies are able to effectively combat interference from other unaffiliated state agencies. “Meanwhile, if someone from the other state agencies, like the police department, tried to put a spoke in our wheels concerning the relevance of our activities, he helped us to manage these tensions.” R: 8. As this illustrates, developing mutual understanding between one NGO and one state agency can help the NGO to manage its relationships with other state agencies as well.

### **Donor Impact/Competition**

The important channels of health aid for Kyrgyzstan are programs supported by such donors as USAID, SCO, UNICEF, WHO, UNDP, and the Soros Foundation. Each of the donors

tends to focus on one health area, however, they all work for the improvement of the quality of medical services to the population in general. The foci of their work varies and include improving the health of the poor, the health protection of mothers and children, reproductive health, family planning, improving health care systems, and controlling infectious diseases, such as HIV/AIDS, tuberculosis, and malaria. The interests of donors have an important impact on state-NGO partnership. The findings of interviews demonstrate that donor impact, especially the methods by which donor funding creates a sense of competition between NGOs and state agencies, was a factor affecting the ability of state-NGO partnerships to form and to be successful. At the same time another factor increasing hostilities between NGOs and state agencies was a simple lack of trust created by a lack of mutual understanding.

In the course of consultations with some of the coordinators of health programs in donor organizations, it became evident that the time when the state could provide only “political support” is over. The state is now being encouraged by donors to take more active part in the co-financing of health projects. At the same time, donors stress the necessity of collaboration between the state and NGOs in more than financing. One donor agency representative noted, “When we work with state agencies, we always stress the necessity of cooperation with NGOs. This is our constant message to the state.” R:9. This statement reflects the theory that it is donor agencies that do the most to encourage state-NGO partnerships.

Questioning the quality of current state-NGOs relations, donor agency representatives highlighted that these relationships are moving in a more productive direction now as the sceptical attitude between players is disappearing, and relations have begun to be built on “trust” and “understanding”. The indicator for that that many cite is the number of submitted joint projects. As one health coordinator mentioned, “ The number of joint projects from the state and NGOs has increased over the last few years. This is to mean that they have started trusting each other” R:10. At the same, if the coordination between state and NGOs does not happen before the project implementation, this can develop some misunderstanding. Feelings of competition may also arise when state agencies feel that NGOs are attempting to dictate priority areas and approaches instead of allowing them input in designing projects. State agencies can feel that NGOs are operating on their turf and should respect their ways of doing things. As one official explained, “Problem occurs when NGOs attempt to teach us what to do and how to do it” R:11. In its turn, it can also illustrate that increasing mutual understanding decreases feelings of competition.

When stimulating this relation, donors bring complication to the state and NGO relationship. Donors are more likely to give money to NGOs rather than to state agencies, but, nevertheless, the state agencies may seek donor support. When both the state and NGOs are

chasing after the same donor funding, they can tend to see each other as “competitors”. This can certainly be a hindrance to the development of fruitful relations between the state and NGOs. Developing an understanding of their strengths and weaknesses, aids in breaking down these suspicions. As one NGO leader stated, “This happens from time to time. The state may think that NGOs will take over their area of influence in the health sector. However, I think that the situation is slowly changing. State agencies and NGOs have started realizing that they are partners and do the same thing, although, they play different roles and make different contributions” R: 12.

Although donors give money to NGOs with good intentions, this act can still negatively impact the state-NGO relationship. In the words of officials, in long-term partnerships, the financial dependence of NGOs on donor funding brings the following issues. First, if the project is to consist of several stages, there is always the risk that donors may not fund the second stage, leaving the state in the lurch. Second, when a state agency and an NGO work together for some years, they can develop mutual trust and good working relationships. If the NGO fails to find funding, however, this relationship will disappear and new relationships will need to be built between the state and other NGOs. State agencies are sometimes suspicious of beginning cooperation with NGOs because they are sceptical of the NGOs’ long-term commitment to solving the social problem. Officials stressed the importance of NGOs’ demonstrating “responsibility” for making a contribution to solving the social problems at hand and not just attempting to gather donor resources for their personal enrichment. In connection with this, one official complained of “one day NGOs” which “get money and disappear” R: 13.

If NGO turnover is a problem for state agencies, staff turnover in state agencies is an analogous problem for NGOs in terms of developing stable partnerships. In particular, when new state representatives are brought in, negotiations have to be renewed with the new people, increasing the risk of project failure. One NGO leader expressed concern with the fact that, “You start working with one person, then the Minister changes, and consequently, he changes everyone by appointing ‘his own people’. So, we need to start from the very beginning and find an approach to the new people” R: 14. Familiarity breeds trust and thus too much turnover in partners from either the side of the NGO or the state agency will tend to erode a sense of trust and consequently will increase misunderstandings and competition.

### **Actor Characteristics**

NGOs and state agencies have certain structural characteristics that can contribute to mutually beneficial cooperation and some structural characteristics that tend to hinder the development of mutually beneficial cooperation. In particular, the mismatch between the

bureaucracy of the state and the flexibility of NGOs can create obstacles to the formation of partnerships.

The ability of NGOs to establish rapport with target populations was acknowledged by both state officials and NGO representatives. Many NGOs have years of experience working with people in their communities. Therefore, they know the problems of the local populations and the remedies they offer are also trusted by those populations. On the topic of understanding, one representative of an NGO stressed, “We meet the regular population everyday, so we know their vital issues better” R: 15. One state official stated on the topic of rapport and trust, “For the last few months, there have been brucellosis outbreaks in some rural areas of the country. So, there is a need to inform people about the measures to take against it. This is actually a situation when local NGOs are helpful. They help us to spread information about symptoms and necessary preventive measures to take. NGOs are good at reaching people, and people listen to them” R:16.

Nevertheless it is not always the case that NGOs have the best access to information about the needs and problems of the local population, sometimes NGOs have to turn to the state for these answers. One leader of an NGO stated, “Recently, we had a project to assist former prisoners in dealing with the physiological pressures of everyday life. So, we hired a person from the Ministry of Justice as our consultant. He was more aware of problems of this vulnerable group, so he acted as a trainer for our social workers” R:17.

The state is effortless to reach some vulnerable groups, in particular the homeless, drug-users, and sex-workers because they are limited by their own regulations. They are afraid to approach state medical centers because they believe that identifying themselves as homeless, or drug-users, or sex-workers, will bring them harm in the future. When seeking medical advice or help, these individuals are more likely to approach NGOs, which grant confidentiality. One official from a state agency stated, “Our regulations demand that prior to rendering any assistance, any state medical center needs to register the client. They [drug-users] will never go for it because they think we report their status immediately to the police” R: 18.

Although NGOs are not limited by their internal regulations in working with these groups, they can encounter certain problems in cooperating with the state when working with these groups. For instance, when the needle exchange programs, were first introduced a few years ago, many officials, including top people in law-enforcement agencies did not appreciate the idea behind this program. Many considered this action to be promoting drug use. If NGOs are involved in preventive measures against HIV/AIDS, then intravenous drug users became their direct clients. However, drug use is an illegal action in Kyrgyzstan, so drug-users are also criminals for law-enforcement agencies. As one NGO representative stated, “Drug-users are our

clients. They have a high risk of contracting HIV/AIDS. Meanwhile, they are also criminals for law-enforcement agencies” R: 19. Conflicting understandings of how to deal with persons on the margins of society can be a source of tension in state-NGO relationships.

The structure of organizations also impacts partnership relations. Bureaucracy on the side of the state can hinder fruitful cooperation with NGOs. While state agencies have to receive orders from above before taking action, NGOs are more flexible. Thus, NGOs can come to feel that cooperating with state agencies hinders them more than it helps them. As one representative of an NGO mentioned, “I understand that most officials are dependent, and they have to coordinate their actions with the head office first. However, this is a long process to go through” R: 20.

When approaching high-level officials, NGOs found that they were generally open-minded and welcomed their ideas. However, problems occurred when they approached mid-level bureaucrats. Many NGOs noted that this bureaucratic class is not well paid and has lack of understanding of the idea behind NGOs. Therefore, working with people at this level requires extra effort on the part of NGOs. One representative of an NGO explained, “For instance, understanding the bad sanitary conditions in the prison system and the health damage it can cause, we are conducting some health projects for prisoners. The prison staff does not understand why these people need help. We need to be more open and humane. They are also people” R: 21. Thus, mutual understanding can easily be achieved at one level of the state bureaucracy, while it is difficult to achieve at another level.

### **Funding Framework**

Also, for creating effective partnership between state and NGOs, it is necessary to have a supportive legal framework. The presence of a well-developed legal framework speaks to the state's support for strong NGOs. This in turn guarantees the participation of NGOs in policy formulation and implementation.<sup>36</sup> Although there have been some attempts by the state to increase the potential for state-NGO partnership, such as the aforementioned “MANAS thing” and a piece of draft legislation encouraging contracting with NGOs for social services, an overall government policy on state-NGO collaboration has not yet been developed.

Overall, when discussing the funding framework, NGOs also expressed the opinion that devising strategies and offering proposals should not be purely the responsibility of NGOs, but also of the state. Together with NGOs, the state should decide whether further partnership with the state should be realized through contracts for services or through other mechanisms. One

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<sup>36</sup> Derick Brinkerhoff, "Government-Nonprofit Partners For Health Sector Reform in Central Asia: Family Group Practice Associations in Kazakhstan and Kyrgyzstan," *Public Administration and Development* 22 (2002): 51-61.)



NGO leader said, “We strongly depend on donor support. If this support is stopped one day, the state needs to have a back up plan. Who will take care of the areas in which NGOs are doing work?” R: 25. The state needs to get more involved in devising an overall policy on state-NGO cooperation, rather than letting partnerships develop on a purely ad hoc basis and exclusively at the initiative of NGOs.

In autumn 2006, a working group consisting of representative from Kulov’s government and NGOs developed and submitted draft legislation entitled “On State Social Order (*Zakaz*)” to the Parliament of Kyrgyz Republic for approval. This legislation was intended to stimulate the implementation of social programs in cooperation with NGOs, and actually obliged the state to secure funding from the state budget for the contracting of NGOs to address socioeconomic issues in the country.<sup>37</sup> Many viewed this law as another window of opportunity for state and NGO cooperation. Yet, the legislation did not receive the necessary votes to pass, and it was sent for further revision. Since that time, no attempt has been taken to lobby for a second vote on this law.

Regarding the strategy for partnership between the state and NGOs, NGOs see state contracts for social services as a key area for the potential expansion of partnerships. This is to mean that the state will secure money for some social projects, and hire local NGOs for their implementation. This is a potential method for achieving NGO sustainability. In addition, many of those interviewed noted that if the state started supporting the activity of NGOs financially, it would be a new step for state-NGOs relations in that the state would move from being an “observer” to being a more influential player.

Supporting the idea of state social order, some interviewees also raised the issue of to what extent the state would play a “fair game” with NGOs. One NGO leader concluded, “Personally, I find that state social order is a good idea, however, will the government’s selection process be transparent? Who can guarantee that the money will not be distributed among quasi-NGOs?<sup>38</sup> In this case, other NGOs cannot survive” R: 22.

However, many also acknowledged that even though there was an attempt to pass a law on the state social order, even if the law had been approved, the state would not be able to support this initiative financially at this point in time. This has to do with the fact that the current debt burden of Kyrgyzstan is more than two billion US dollars.<sup>39</sup> Because the government has

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<sup>37</sup> Legislation draft “State Social Order” from September 8, 2006, #640, available at archives of Ministry of Labor and Social Protection of the Kyrgyz Republic

<sup>38</sup>For more information on quasi-NGOs, please see Erkinbek Kasybekov , “Government and Nonprofit Sector Relations in the Kyrgyz Republic ” in *Civil Society in Central Asia*, ed. M Holt Ruffin and Daniel Waugh (Seattle: University of Washington Press, 1999), 72.

<sup>39</sup> Rafkat Hasanov, “HIPC: Logical Maneuver or Strategic Mistake,” Ministry of Economy and Finance of the Kyrgyz Republic, Bishkek 2006

refused to be enrolled in the Heavily Indebted Poor Countries Initiative (HIPC), it will face more challenges with regard to state finances.

NGOs do not see many alternatives to donor or government financing for NGOs. Some NGOs in healthcare have made attempts to move to self-financing by providing consultations and trainings for a charge. However, due to the specifics of the groups with which they are working, these attempts have not been successful. One NGO representative explained, “We can offer our services for a small fee. However, our target groups are usually indigent, so this seems to be unrealistic. Also, if we move to a more business focus, than the true sense of our NGO is lost, and we deflect our main goal” R:23. Involving the business sector in their activities has been similarly unsuccessful in terms of providing a realistic alternative to state or donor funding. Business support mainly consists of support for one short-term event like providing free meals, or donating money through an NGO to homeless or poor children. As one NGO leader stated, “It is okay if we approach [companies] for support for children or invalids, however, what if your target group is drug-users? Every good company has a PR department, and they would be right to say, “Sorry, our analysis of public opinion towards drug-users is not positive, helping them could negatively impact the image of our company”” R: 24.

## **Conclusion**

When assessing current collaborations between the state and NGOs in Kyrgyzstan, it is essential to consider the level of mutual understanding between actors, donor impact/competition, actors' characteristics, and funding frameworks. Each of these areas has certain implications for the state as well as for NGOs. Meanwhile, it is necessary to stress that the issues discussed above can impact state-NGO collaboration in either a positive or negative direction. Collaborations work better when partners believe that by uniting their efforts they will achieve more. In the context of Kyrgyzstan, it appears that mutual understanding between state agencies and NGOs of their relative strengths and weakness (and consequent ability to assist one another) tends to stimulate collaboration. Donors also contribute to the development of collaborations by stressing the need for them. They also bring complications to state-NGO relations, especially by stimulating competition for funding between state agencies and NGOs. The uncertainty for NGOs of their means for future support, also brings complication to state-NGO partnerships. Although, for the moment state-NGO collaboration cannot be a substitute for donor support, it seems that there is new interest in Kyrgyzstan both for increasing these collaborations and for trying out new methods to make these collaborations part of a plan for NGO sustainability in the country.