

STANDING FOR, WITH AND BEHIND EACH OTHER: HOW TO FOSTER CIVIL SOCIETY CAPACITIES FOR SOCIAL PARTICIPATION

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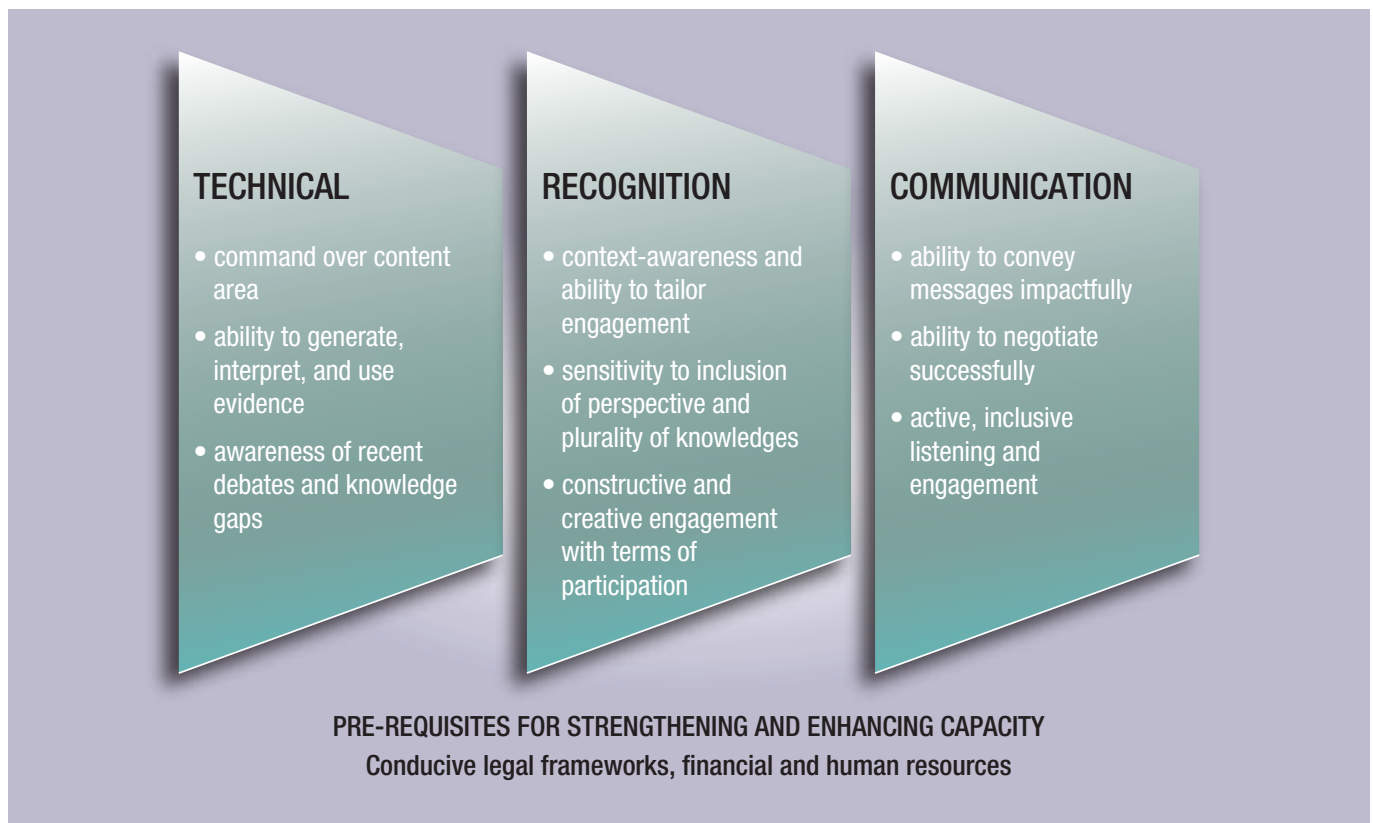
Summary: Civil society and communities are central players in social participation processes for health. Effective civil society engagement in health decision making processes requires specific capacities – including technical, recognition, and communication skills among others. These in turn have pre-requisites, like conducive legal frameworks, and adequate financial and human resources. This article shares examples from the European Union, Argentina, Burkina Faso, and Slovenia that demonstrate the importance of such capacities and how they can be advanced. Drawing from these, it reflects on lessons and recommendations for governments and civil society to stand for, with, and behind communities, especially those in vulnerable and marginalised situations, in social participation efforts.

Keywords: Social Participation, Civil Society, Capacity Building, Human Right to Health, Health Policy Reform

“When we are still looking for the path we wish to tread, walk in front of us, help us find the way; then, as we grow surer, walk beside us; And finally, when we are truly strong, you must learn to walk behind us. We will still need you, in case we stumble and fall – but you must finally learn to walk behind us.”
– Sundaramma, Women’s Collective Leader, Bidar, North Karnataka ¹

Introduction

This statement, made by a woman leader in India, alludes to the importance of strengthening the capacities of people, communities, and civil society to foster mutual trust and empowerment, and thereby realise the potential of social participation. It also indicates the need for these capacities to continuously be strengthened in different ways over time. A recent review found that interventions working through civil society groups with a focus on capacity-strengthening for collective action, including groups facing disadvantage,

Figure 1: Capacities critical to social participationSource: ³

may be more effective at improving public good service outcomes than engaging unorganised citizens.² As the agenda of social participation advances, we must be mindful that central players in this process – communities and civil society – are both prepared and well equipped to make meaningful use of institutionalised platforms and claim opportunities to shape policy and reform processes for health.³

But what do we mean by community? By civil society? In *'Voice, agency, empowerment – handbook on social participation for universal health coverage'* published by the World Health Organization (WHO) in 2021, civil society is defined as “individuals or groups of individuals who associate together based on shared interests, goals, needs and functions.”⁴ Civil society is generally considered independent of the state, the market (and thus distinct from private for profit entities), and the realm of family.⁵ There is great variety in civil society’s actual legal and operational nature across and within countries: civil society

entities may be grassroots collectives, organisations, networks, advocacy groups, and even academic institutions. The WHO Handbook defines communities as “a group of individuals that have something in common... an individual can be a member by choice... or by virtue of their characteristics, such as age, ethnicity or residence.”⁴ Communities serve as the basis for civil society actors to have legitimacy and thrive.

Civil society and communities are critical to the exercise of ‘diagonal accountability,’ i.e. the contribution of people and non-state actors in holding government to account.⁶ Accountability mechanisms nurture and strengthen the social contract, whereby governments are responsible for delivering on the human rights to health⁷ and participation.⁸*

* It is also observed that civil society is widely diverse, and that indeed there may be pressure on governments from anti-democratic civil society organisations to advance actions that may violate rights to health and participation (for some).⁶

Social participation can take various forms, responding to and often shaping the political, economic, social, cultural, technological landscape within and across countries (see the article by Koch et al. in this issue). And as Sundaramma stated above, standing before, with and behind communities is a complex process. To identify and seize opportunities to engage with a range of actors across complex and changing power dynamics, to “speak the language” of health policy and to effectively communicate the interests of vulnerable and marginalised groups – all require capacities.

There are specific capacities that enable civil society to meaningfully participate in health decision-making processes: **technical** skills, **recognition** (or reflexivity) skills, as well as **communication** skills (see Figure 1).⁴ Technical skills mean having a command over the technical subject of the social participation process, which may include the generation, use and interpretation of evidence. Recognition skills involves

Box 1: Advocating for core funding for European health civil society to engage with EU policy processes ^{9 10 11}

Like many globally, European (health) civil society organisations (CSOs) face an increasingly shrinking civic space, with barriers in access to funding, as well as challenges to functioning experienced by civil society leaders. In such circumstances, core funding mechanisms are central in enabling CSOs to be independent and enhance their capacities to respond to external developments, such as the growing engagement of commercial interests in European policy processes.

In recent years, the Operating Grants from the European Commission that have provided much of this stability for members of the EU4Health Civil Society Alliance have declined,

undermining the capacity, sustainability, and in some cases, survival of the Alliance's membership.

In response, CSOs have advocated for the continuation and reinstatement of funding, which itself required a range of capacities. A campaign for multi-year CSO funding – which was done in partnership with representatives from the European Parliament, countries and the media – culminated in the renewal of operating grants in 2023 and the reinstatement of framework partnership agreements for 2025–2026.

The campaign continues to ensure funding is part of the European elections agenda in 2024 and aligns with the next EU strategic agenda (2024–2029), as well as a dedicated EU-wide Civil Society Strategy.

acknowledging the value and benefit of one's voice to inform more responsive policies and programmes; identifying opportunities for participation; understanding and assessing the needs of the community, including capacity needs to meaningfully engage. Finally, communication skills require the ability to design, tailor and deliver clear and compelling messages for different audiences, to foster confident public speaking, to listen, exchange and negotiate contested views.

Global evidence regarding capacities

Pre-requisites for strengthened civil society capacities – legal frameworks and financial resources

There are certain pre-requisites in order to strengthen the capacities of civil society and communities for social participation, and these include a conducive legal environment that enables civil society to organise, function and receive funds. Further, sufficient and predictable financial resources for staffing, capacity development and the ability to represent people facing vulnerability and marginalisation, as well as the implementation of activities, are pivotal (see Box 1).

Technical capacities

Health policies, plans and programmes can involve highly technical concepts, such as health financing, as was the case in Burkina Faso (see Box 2).⁹ Technical

skills can imbue a form of managerial empowerment that allows for engagement on an “equal footing” with experts and powerful players.⁹ It is both possible for and in the interest of government actors to ensure funds and tools exist for communities to interpret and influence technical discussions, so that policies can also be validated by communities and civil society for ownership and buy-in.

This requires that civil society and community members are aware of basic technical principles, terms, evidence and guidance, current debates and knowledge gaps, as well as equipped with analytical skills to review and appraise content that may be discussed in a participatory process. To have an informed opinion and meaningfully engage, literacy and numeracy skills are also key. Policy processes involve a lot of reading and analysis to understand what exists, what doesn't, and the subtext that underpins use of certain phrases, approaches and epistemologies.

In some cases, particularly where governments do not share data transparently, it may be important for civil society to generate, interpret and use evidence on their own accord. This requires familiarity with major data sources and other evidence on the subject that is the focus of the participatory process (e.g. health financing models, the latest developments around a drug, or evidence for the effectiveness of a policy intervention). In Guatemala and

India, information and communication technologies (ICT) have facilitated the gathering of data by citizens which enhanced technical competency as well as transparency and sharing of health data.¹²

In other cases, it may not be possible to hold all the technical skills; in such circumstances, social participation requires deep and sustained collaborations and partnerships with technical experts. This was a key feature of the coalition-building efforts in Burkina Faso (see Box 2).

In many contexts, capacities have been acquired through a “learning by doing” model. For instance, through sustained engagement in Thailand's National Health Assemblies and Portugal's Health Councils, over time participants have been able to cover a range of formats and topics, learning in the process how social participation platforms – and capacities to meaningfully engage – may be optimised.⁹

Recognition capacities

Recognition skills involve understanding the context, processes and key stakeholders, to identify or claim spaces for participation in the first instance. In the case of health reforms in India in 2005, civil society actors saw and leveraged the opportunity to formalise community-based and community-driven accountability processes and models that they had thus far been incubating.¹³

Box 2: Cross-learning and exchange through coalitions in Burkina Faso

In Burkina Faso, CSOs unite under umbrella coalitions such as the National CSO Council (CNOSC), which is for local civil society, and the permanent secretariat of NGOs (SPONG), which includes both local and international civil society organisations (<https://spong.bf/>). These cohesive platforms have facilitated civil society engagement with policymakers, while fostering internal collaboration among civil society with the aim to consolidate their voices for more effective engagement and policy impact. The formation of such coalitions reflects the recognition skills of Burkinabe civil society in the potential of collective advocacy to influence policy decisions.

These umbrella coalitions offer opportunities for cross-learning to leverage the different technical skills and expertise brought in by different members. For example, SPONG facilitated joint learning and capacity-sharing during the development of the Burkina Faso free healthcare policy for pregnant women and children under-five, making them a valuable partner for the Ministry of Health in different stages of strategy development. They also ensure that a wider group of members have sufficient technical command of various topics so that they are able to step in if and when more specialised civil society organisations cannot participate.

The CNOSC and SPONG have both gained legitimacy as facilitators for engagement with the government as well as development partners, based on their broad civil society membership.

Box 3: Recognition skills to bring about the Gender Identity Law in Argentina

The Gender Identity Law in Argentina was pioneering for gender recognition, helping to reduce stigma and discrimination, and guaranteeing rights and access to healthcare. It was achieved thanks to the collective effort of Lesbian, Gay, Bisexual, and Transgender (LGBT) and other community organisations, in partnership with lawyers who helped to craft the technical content. It is a great example of social participation in which legislators worked together with the community to achieve legal change.

The sequencing of legal reform was also tactical, and required a technical understanding of what kind of legal precedents

would enable others. CSOs placed emphasis first on an Equal Marriage Law, around which gender identity debates took place, and its passage provided the basis for the Gender Identity Law, which was unanimously approved.

A priority now is to ensure that social participation continues in policy implementation. This requires new and different capacities, such as seeking out participatory opportunities and technical command to meaningfully contribute. Novel research methods like witness seminars are now being used to advance advocacy and foster linkages between generations of activists involved (earlier) with the formulation of the Law and (now) its implementation.

Recognition skills can also help identify limitations in participatory spaces that do exist and bridge them, in which boundary spanning actors, like collectives or civil society groups can play an important role. For instance Apoio in the Netherlands (Kingdom of the) created “hybrid participatory spaces” that were “offering connections to the state but avoiding being dominated by the professional or bureaucratic concerns which usually characterise invited spaces.”¹⁴ These resonated with and reflected the perspectives of group participants from marginalised situations in social participation initiatives, allowing them to have voice despite the powerlessness and marginalisation that may be reinforced in participatory spaces. Indeed, civil society

can harness and leverage particular skills across coalitions for the benefit of the many, as has been the case in Argentina (see Box 3).

Recognition skills require a critical understanding of and engagement with the actors and players involved – a kind of political savviness, knowing when to be proactive or responsive – shaped by a strong understanding of power relations at individual, interpersonal, organisational and structural levels.¹⁵ In Tunisia for instance, the context of the revolution made it appropriate and timely for civil society to advance rights-based claims-making, buttressed by government support and a high level of volunteer commitment.¹⁶

In Slovenia, informal engagement with the government, carried out by high recognition capacity representatives of networks, has convinced government counterparts of the unique perspective youth can bring and the value of their engagement, creating a growing legacy of youth social participation in health policymaking (see Box 4).

Communication capacities

A great deal of evidence exists on the need for communication skills for civil society to hold governments accountable as duty bearers, i.e. having the moral and legal responsibilities for the welfare of populations. This may include training on public speaking and advocacy, to

Box 4: Recognition and communication skills to strengthen meaningful youth participation in Slovenia¹⁸

The youth network No Excuse Slovenia is a national youth organisation which focuses on building the capacities of active young people who are passionate about positive social change in the fields of health, environment and youth participation. A great deal of the emphasis is on enhancing capacity of young people to be part of policy change conversations and campaigns. Since successfully engaging in activism to shape tobacco law reforms in 2007 with a focus on preventing youth use of tobacco, No Excuse has been recognised as a valuable civil society partner and collaborates with the government both formally and informally.

Advocacy has resulted in Slovenia establishing legal grounds for youth organisations to ‘have a seat at the table’, as a member of different government consultative bodies such as the Commission of Health and the Expert Group in the Field of Tobacco, as well as attending the Board of Health meetings. No Excuse facilitates sustainable and high-quality cooperation which gives the involved youth a sense of accomplishment, usefulness and hope for change. It also builds awareness of the limitations of one’s contributions to a certain challenge or policy agenda. This formal engagement is underpinned by substantial financial support from the Ministry of Health, which funds the continued development of youth organisations including human resources, activities and research.

convey points in a convincing way that is tailored to the context and audiences.¹⁷ In some cases, this involves bringing new voices and speakers, especially youth, to existing spaces (**see Box 4**). In this case, ongoing informal engagement has convinced government about the unique perspective youth can bring and the value of their engagement, which has been pivotal in initiating opportunities for social participation.

In many cases, like in India, Iran and Uganda, by being involved in social participation processes, community members have even become health advocates in their communities, helping to amplify and widen access to messages and content they learn about in decision-making processes, in many cases engaging with the media (which requires its own set of unique skills and tactics).^{4 19 20}

Another area that is critical in communication is active listening across constituencies – governmental and non-governmental, throughout ensuring that constituencies facing marginalisation are heard. This is reflected in the approach taken in Thailand as part of preparing for the National Health Assembly process where working group meetings across types of stakeholders require extensive preparation, repeated interaction and exposure to each other,^{4 21} which can enhance active listening and engagement with experiential knowledge.

Lessons learned and recommendations

While strengthening the capacities of people, communities and civil society is crucial, they cannot adjust power asymmetries and achieve meaningful social participation without other enabling reforms – as are outlined throughout this issue. Nevertheless, various lessons emerge from the evidence about both the types of capacities required on the part of civil society, and how these can be acquired and supported, including by government actors, in order to enhance social participation processes.

Stand for: No capacities without prerequisite frameworks and resources

Strengthening the capacities of civil society to participate is meaningless in the absence of laws that enable civil society to organise and receive funding, and resources for civil society to be staffed and implement activities. As indicated in the EU4Health and No Excuse cases (**see Boxes 1 and 4**), making sure capacity-strengthening receives sustained resourcing and political priority is among the world’s greater challenges at present, particularly in the context of shrinking civic space.²²

Governments should commit to legal frameworks and fund flows for civil society that capacitate meaningful and constructive social participation. Civil society must make appropriate and ethical use of these opportunities and resources.

Stand with: Cross-constituency collaborations, coalitions can learn and grow together

Evidence that several case studies presented points towards cross-constituency engagement, across individual organisations in civil society, between civil society and state actors, as well as between civil society and technical actors, so as to create networks that complement each other, evolve and learn together. All our cases involved large coalitions brought together by boundary spanning individuals and entities – across regions (EU4Health), between technical and advocacy groups (Burkina Faso), between advocates and legal experts (Argentina) and using formal and informal platforms (Slovenia). In each case, these coalitions have set precedents for collaboration on other topics and possibly with other population subgroups.

Governments and civil society leaders alike should encourage diversity and inclusivity of social participation platforms, to bring in multiple perspectives and to work in multi-constituency coalitions to mobilise their respective strengths and streamline engagement.

Stand behind: “Learning by doing” for sustained periods and across generations sustains capacity

In countries where statutory mandates for social participation lead to sustained systematic engagement over time, civil society and communities tend to “learn

by doing”. This ongoing relationship helps to build trust and foster a culture of participation, in which participation may be better able to impact positive change. Bringing youth leaders to the fore to become movement vanguards as seen in Slovenia; keeping memories of movements and social change alive as was done in Argentina – will help to sustain gains in capacities and maintain impact as part of any single campaign or movement.

Governments should plan for long term sustained social participation, that will evolve as capacities do; civil society stakeholders should ensure that capacity strengthening efforts are practical and applied, extend over time, are constantly renewed, and inclusive of future generations.

Listen for change: Document for accountability and to keep learning

Understanding how various capacities were built or strengthened in the past can produce important learnings for sustaining capacities and building new ones. From leveraging peer technical skill strengthening via coalitions in Burkina Faso (see Box 3), to the recognition of systematic formal and informal engagement in Slovenia (see Box 4), careful documentation and dissemination of country experiences are vital to promote learning.

All stakeholders should carefully document and appraise how capacities are being strengthened, where gaps in learning remain and share lessons for continued improvement.

As countries endeavour to advance social participation, strengthening the capacities of people, communities and civil society to meaningfully engage can and must be a priority. Only with capacities in place can communities and civil society co-develop and contribute to formalised social participation mechanisms from national to local level, building and enhancing mutually empowering engagement with governments, with a commitment to ensuring inclusive representation of all population groups’ needs and aspirations. Capacity strengthening efforts need a strong base, wide, long-term and renewing collaboration, with a learning mindset.

All these features heed Sundaramma’s call of standing for, with, and behind community voices for a healthier future.

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