

**A Summary of USAID's Development
Activities in Northern
Thailand**

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Introduction

USAID has been contributing to the development of Northern Thailand for over 20 years. The numerous USAID projects in Northern Thailand have led to an increase in the people's confidence in the government and private sector to provide basic needs, mainly in the areas of agriculture, health and education. This is especially important in an area where ethnic minorities live in geographically remote villages. The hill people are culturally and linguistically unique from each other and from the lowland Thais. They have special problems adapting to modern life in Thailand. Some hill tribe people are traditional opium producers. While these people earn high incomes from this unique cash crop, special efforts need to be made to find legal alternatives. USAID is assisting the RTG to address the development problems in the hills, as well as meet the RTG's development goals in the other rural areas of the North.

Development Problems in Northern Thailand

The hill people of Northern Thailand are among the poorest in the country. Infant mortality is high, children suffer from malnutrition and the literacy rate is low. Rice deficiencies in villages are common. As there are few alternative sources of income, farmers grow opium or work as laborers in the poppy fields. Opium addiction is common among some hill tribes which creates a further hardship on families, greater need for cash income and a lower capacity to grow or buy food.

Environmental degradation and population pressures both in the hills and the lowlands have decreased the hill people's resource base. Swidden agriculture is an important aspect of both poppy and subsistence crops in the hills. Poppies are grown in a field for several years until the land is exhausted. Then the farmers move to new locations. Traditionally, subsistence crops are grown in fields which are slashed, burned, and cultivated for one year and left to fallow for up to 20 years before they are used again. Recent population pressures have resulted in fields being

cultivated after only 3 to 5 years of regeneration. As a result, soil erosion is increasing and the marginal soil is becoming even more infertile. Poppy fields are planted in more hidden areas deep in the hills to avoid detection. There is less land competition with other hill tribes and lowland farmers in these remote areas. As a result, more forests are destroyed, soil erosion increases, the hill farmers' yields decline, forcing them into greater poverty.

Soil erosion and population pressures have brought highland opium growing tribes to lower altitudes where they compete for land with subsistence farmers. Population pressures in the lowlands have led to lowland farmers moving up to the hills. Some of these lowland farmers try to emulate the hill farmers by practicing swidden agriculture. They are generally unfamiliar with the technique. Often fires started to clear a small field will rage out of control. The lowland farmers are also unfamiliar with the careful rotation system used by the swidden farmers. Other lowland people are attracted by the opium trade and have begun to grow poppies in the hills. The viability of life in the hills is declining as a result of the changes in land use.

The projects in which USAID participates attempt to increase both the political and economic security of the hill people. Their image of the Thai government and the Thai people is changing in the project areas. The people realize the government can provide needed services. Project Implementation requires government personnel to be present in previously remote areas. Participation in projects leaves less time for farmers to cultivate the labor intensive opium crop. Access to outside areas is increased due to new roads, radios and contact with lowland Thais. Education projects which emphasize Thai literacy and vocational skills provide hill people with the opportunity to augment their income by practicing their new vocations in the villages or by leaving the hills to search for better opportunities in the lowlands. Government establishments such as schools, health facilities, and agricultural centers also encourage hill people to remain in one village instead of practicing swidden agriculture.

The USAID projects described below address some of the basic needs of the hill people. Some, particularly the health projects, are concentrated in the lowlands. If lowland farmers can be encouraged to stay in the lowland (and out of the hills), the pressure on land and water resources in the hills can be limited.

The Projects

The impact of the USAID projects, if successful, will positively affect village life in Northern Thailand. Some projects are national in scope, such as the family planning and anti-malaria projects. Others have components which emphasize northern development, such as the Micro-Mini Hydroelectric project. A few are specifically directed at hill area development, such as the Mae Chaem Watershed Development Project and the Hill Area Education Project. All of them address the basic needs of villagers in the North - the need for food, health services, education and access to alternative sources of income.

Mae Chaem Watershed Development Project. The purpose of the project is to provide land tenure, increased real income and access to social services to rural households in the Mae Chaem Watershed. Project components will lead to the improvement of the environmental quality of the watershed by using appropriate natural resource management strategies. Specifically, the Project seeks to attain by or before its completion: increased rice yields in Mae Chaem; increased real average income from cash crops other than opium; improved environmental conditions; and, increased capacity for local community planning and problem solving.

This grant project was designed to be a model for development in the highlands. Already, several aspects of the project have been duplicated in other highland projects. Royal Forestry land in the Mae Chaem watershed has been identified as suitable for agriculture. This land will be distributed to the farmers who will be given legal title to the land which they have traditionally farmed. This is the first time the RTG has recognized the

hill farmers' right to cultivate land in the hills. The first land use certificates were presented to 100 villagers in June, 1983. A total of 5,000 families should benefit from this program by the end of the project in 1987.

Secure land tenure combined with intense agricultural extension will provide a means for hill farmers to cultivate enough food and cash crops without resorting to swidden agriculture or poppy cultivation. The project funds land development for fields which farmers have already cleared and farmed. The land is terraced and, where feasible, water resources are developed for small-scale irrigation. Soil conservation is stressed. High yielding strains of upland rice and traditional cash crops are being developed. This will allow more intense cultivation of the small plots while arresting the degradation of the hills due to slash and burn agriculture.

Intense agricultural extension services are being provided to the Thai and hill tribe villages in Mae Chaem. Not only has the Department of Agricultural Extension provided enough agents at a rate of 1/400 farmers (the national average is 1/1000 farmers), but special teams have been assigned to live and work in the villages. The teams consist of highly motivated, young Northern Thai and hill tribe men and women who have been especially trained in methods of community development. Their job is to identify natural leaders in the village, and to help them and other villagers to identify problems and ways to resolve them. Often simple problems can be handled by the villagers themselves with little outside help. Building latrines or digging wells are common examples. Other needs such as road improvements, veterinary services or village teacher, require more inputs from outside sources. The special teams must then make sure these needs are transmitted to the proper authority. This method of local problem solving has been extremely successful. Mae Chaem farmers have increased confidence in their ability to improve their own living conditions. They have also learned how to contact government officials and realized that government agents will respond to their requests. This is another "first" in a remote, previously isolated area.

Hill Area Education Project. This \$1.6 million grant project is located in the most remote areas in the Northern hills. The project funds the activities of Non-formal Education teachers who live and work in hill tribe villages. Their job is to provide a Thai education to hill tribe children and adults. The teachers give the villagers a chance to earn a 4th grade completion certificate which is required to obtain Thai citizenship. A special curriculum has been designed to reach the culturally diverse hill people. Special attention is paid to Thai literacy and learning from village life experiences.

The teachers are not simply educators. Since there are no other government officials present, they must try to provide a wide range of services to the villagers. It is not unusual to find teachers dispensing basic medical care, agricultural advice, teaching vocational skills or supervising the construction of water systems or sanitation facilities. The teachers are often the only ones who have the technical knowledge to solve many problems in the villages.

The teachers are teaching the villagers skills which can be used to enhance their lives in the village. Thai literacy helps hill tribe people to deal effectively with Thai government officials and lowland merchants. It qualifies them for Thai citizenship which is the first step toward owning land, obtaining credit and voting for local officials. Thai literacy and vocational education also give villagers, especially young people, confidence to leave the hills and find work.

Hill area education is a powerful method of integrating tribal people into Thai society. The sensitive approach of the village teachers and the curriculum which draws upon hill tribe life help to preserve the unique traditions of the people. It allows them to make their own decisions. The teachers expose the hill farmers and their children to alternatives to growing opium. It is often the first time the people have received positive attention from the government. The trust that is evolving between the villagers and the teachers gives the people an incentive to participate more fully in the Thai political process.

Thai Hillcraft Foundation Project (THCF). The Thai Hillcraft Foundation is an indigenous, private and voluntary organization. USAID has supported this unique PVO since 1978 with a grant of \$155,485. The purpose of the foundation is to preserve traditional ethnic handicraft skills of the hill people, to promote small home industry through training programs to improve their craftsmanship and to build loyalty to Thailand and its royal family by teaching the students about the history and government of Thailand. Basically, THCF is a training center for hill tribe youth. Its goal is to give the young people a basic Thai education while teaching them to have pride in their own traditions and culture. THCF serves as a link between the Thai and hill tribe people, helping each to understand the art and culture of the other.

Students at the foundation range in age between 7 and 25, most are between 12 and 17. They are taught the Thai language, math and given a general education about the history and culture of Thailand. The students are also taught skills to enhance the quality of their traditional crafts. When the students return to their villages, they act as teachers and community development workers. Like the villages in the Hill Area Education Project, these villages are in remote areas.

The THCF students provide a unique service to their villages. They help their people identify and resolve problems at the village level. They help identify village leaders and training needs. THCF has a village outreach program which provides short courses for these leaders in a varieties of fields (vegetable gardening, for example) at their center in Chiang Rai. The outreach program includes training villagers in their village to plan and carry out self-help projects.

THCF, like the Hill Area Education Project, provides a way to integrate the hill tribe people into Thai society while preserving the tribes' cultural identity. The literacy and vocational skills taught at the center provide young people with the option to adapt to life in modern Thailand.

Micro/Mini Hydroelectric Project. This project is an \$8.5 million dollar loan to the Thai government to develop 12 hydroelectric sites, the majority of which are in the Northern hills. The average site will provide electricity to 5000 inhabitants, most of whom are traditional rice farmers with no previous experience with electricity. One of the sites is located in the Mae Chaem Watershed. This site electrifies an agricultural research and training center which services the Mae Chaem farmers.

Besides the obvious benefits of electricity to working and living conditions, electric power opens the possibility of new home industries, better health standards in the village, and more efficient agricultural production. The Micro/Mini Hydroelectric Project provides for a consumer promotion specialist to work in the villages to explore options and to instruct villagers in the productive uses of electricity. Together, the specialist and the villagers will develop the productive capacity of the village to use the electricity. The electricity serves as an alternative to fuel wood as an energy source.

Pumping water to dry fields enables farmers to grow more food crops. Clean drinking water is a prerequisite to good health in villages. Food processing leads to improved nutrition in a village and increases the value of cash crops other than opium. Coffee is a good example of this. Oil seed crops such as peanuts and soybeans are also grown in the hills. Electric lights permit villagers to work longer hours. Evening education and study is facilitated.

The provision of electricity is an important government service. It demonstrates the government's willingness to invest in remote areas. Special staff assigned to work at the village level show that officials are willing to work for the benefit of the people.

CARE-Cash Crop and Agro-Forestry Project. In 1983, CARE instituted a pilot project in the Mae Chaem watershed to identify new cash crops with secure markets. CARE is working in the USAID project areas and draws upon

project staff, data and other resources to facilitate this pilot project. CARE is focusing on high value crops which can be transported over the rugged trails. These crops include medicinal herbs, spices and essential oil plants. Marketing is a major problem for these crops and CARE staff are seeking to identify buyers and encourage them to invest in the Mae Chaem villages. The pilot project will demonstrate the feasibility of this approach.

CARE is drawing on the Mae Chaem approach to village development by working with villagers so that they themselves decide which crops, if any, are most appropriate for the local conditions. CARE staff then assists the villagers to plant, maintain and harvest the new crop. CARE provides the necessary inputs and sells the crop for the villagers. The goal is to provide alternatives to opium as a means of earning income. It remains to be seen whether or not these new crops are viable in the Mae Chaem watershed.

Anti-Malaria Project. Beginning in 1980, the USAID assisted Anti-Malaria Project provided an assistance package intended to continue throughout four fiscal years ending in 1983, with funding consisting of \$500,000 grant, and \$4 million loan, for a total of \$4.5 million financial assistance. The project purpose is to develop the RTG institutional capacity for providing to the 9.3 million rural inhabitants of Thailand's endemic malaria areas of high risk, continuing malaria control services for the foreseeable future at a level and quality sufficient to minimize the occurrence of the disease and to provide timely and proper treatment to those who do contract the disease. The assistance occurs at the national, regional, zonal and sector levels. The primary emphasis of the project is directed at interventions made at the first point of contact in the malaria control service delivery system in order to improve the extension of the services to rural residents.

USAID has been funding anti-malaria programs in the North since 1965. Approximately 25% of the resources of this project is directed to Northern Thailand. The malaria death rate in Thailand has decreased from 30.2 per 100,000 population in 1960 to 8.1 per 100,000 population in 1980. However, malaria remains an important health hazard along Thailand's borders, particularly in the remote mountain regions of the North. Malaria vectors breed in the mountain valley streams and in standing water in the jungle. As farmers move further into the forest to cultivate crops, the greater the danger of contracting the disease becomes. Farmers then carry the disease back into their villages. A total of 20% of the Northern Thai population faces the risk of malaria.

Health workers and volunteers have been trained to detect and treat malaria. Malaria workers spray villages regularly. Often the malaria workers are the only government officials to enter the remote villages. Volunteers, chosen by the village committees, are located in 9000 villages in 13 provinces. They are trained to treat malaria with medicine provided by the government officials. The village level monitoring and treatment have led to the stabilization of the disease. Malaria incidence is not increasing in the North as it is in other parts of the country.

The malaria workers and volunteers are respected in the villages. The Ministry of Public Health workers were welcome in hill villages even during times of heavy insurgency. The villagers recognized that these officials were there to help them. Villagers often tell the malaria workers where they are farming so that the area of infection can be identified. These people are usually farming on Royal Forestry land. Sometimes they are cultivating poppies. The fact that the villagers are willing to provide this kind of information to the Ministry of Public Health officials shows that a deep level of trust has been established between the villagers and the health workers. This beneficial contact with public officials gives the hill people a more positive impression of the government. It eases the way for future contact with the government and gives the hill people a sense of belonging to the Thai nation.

Rural Primary Health Care Expansion Project. This project is a national program directed at 4.2 million people living in 7 provinces in 3,834 villages. About 25% of the project's \$5.5 million is spent in the North. The goal of the project is to improve the quality of health care delivered at the village level and to make these services available to a greater number of people. The emphasis is on maternal-child health care.

The project includes a community nutrition program, training of non-physician health personnel and general health education in the villages. Health assistants specialize in family planning at the district and sub-district level. Nurse practitioners improve the quality of care at the district and provincial hospitals. Midwives and sanitarians work in the tambol clinics. Health volunteers work in the villages. They are the focal point for health care in the village. The volunteers dispense basic drugs and contraceptives and are trained in some simple curative techniques. They refer villagers to tambol clinics and district hospitals when the volunteers are unable to treat an ailment. Health communicators teach health education and practice preventive medicine in the villages. Child nutrition center attendants practice nutrition surveillance in the villages. They also help mothers to produce and process supplemental food for the children.

The USAID project has had a major impact on the quality of health care in the North because of the training these health workers have received as part of this project. Like the Anti-Malaria Project, the Primary Health Care Project brings beneficial services to remote, rural villages. Better health care leads to decreased morbidity, particularly among children, and more productive lives for the adults. Health care is a service which is greatly desired by the hill people who often walk for hours to reach distant clinics and hospitals. By providing health services in the village, the government shows the people that it cares about them and their children.

Population and Family Planning Projects. The USAID population and family projects have responded to strong felt needs of the rural population of Thailand. This is especially true among the hill people. Many are

willing to walk for days to reach a family planning clinic. Once there, they can choose from a variety of contraceptives. Many women have already borne many children and they come to the clinics to be sterilized. The USAID Population and Family Planning Projects (I and II) have provided \$18 million to the RTG since 1970. Approximately 20% (\$5 million) has gone to Northern Thailand. USAID contributes to the establishment of voluntary sterilization clinics in rural areas and mobile teams to reach the more remote parts of the country. Project funds are used to buy contraceptive supplies and to train district and sub-district personnel. The health and economic benefits of family planning are well known. By using safe and effective contraceptives, women can have fewer children without the risk of abortion or other unsafe methods of birth control. Longer birth intervals and fewer births lead to reduced maternal and infant mortality. Mothers can breastfeed their children longer and devote more time and attention to each child. With fewer children, women can work outside the home and contribute cash income to their families. Rural to urban migration can be reduced if enough productive land is available to everyone. This is especially important in Thailand's hill areas.

This Project also provides funds to PDA, an indigenous PVO directed by the dynamic development oriented Meechai Viravaidhaya. His village volunteers distribute contraceptives, oral rehydration solutions, vitamins and basic drugs to rural women, including women in the Northern hills.

The centrally funded Family Planning and Community Health Project is directed at health and family planning among hill tribe people in 2 provinces in Northern Thailand (Chiang Rai and Payao). Funds (\$120,000 over 3 years) are used for mobile teams that perform voluntary sterilization. Locally trained hill tribe volunteers distribute contraceptives in the villages.

Another centrally funded project, ASIN, has granted \$500,000 to private medical institutes which offer voluntary sterilizations to rural people.

Several years ago, USAID funded the Hilltribe Health and Family Planning Project through Chiang Mai's McCormick Hospital. Young hill tribe men were trained in basic health care and family planning. These young men successfully brought this necessary information to the hill tribe villagers in a language the people could understand. Hill tribe women sought voluntary sterilizations at McCormick's clinics. Once there, they received advice about nutrition and health services as well as family planning. Today, McCormick Hospital still sends out mobile teams once a week to work in the hills. They find Thai hill dwellers more receptive to family planning than the hill tribe people. The clinic staff feel that greater education efforts must be made in the villages. The people should be taught about health and family planning in their own language and within the context of the hill tribe village life.

The USAID health and family planning projects seek to address the needs of the Northern people, including those in the hills. Fewer children and improved health can improve the economic status of life in the villages.

Payap College is a liberal arts college in Chiang Mai which has been aided by ASHA grants totalling \$4.5 million. McCormick Hospital's School of Nursing was one of the founding bodies of Payap College and is an integral part of the college today. The college can enroll a total of 1,800 full-time students. Approximately 15% of the student body are hill tribe youth who attend the college on full scholarships. Those who graduate often find work in rural development. Several graduates are employed in the Mae Chaem Watershed Development Project. The college curriculum and method of instruction is modeled on American liberal arts schools. The graduates are unusually assertive and creative young people who are sought after by Northern businesses and other private concerns. Many serve in the Thai civil service and continue to live in the North. Improving the quality of education in the North helps to develop the leadership potential of the region's young people. They will have a greater capacity to deal effectively with the North's unique problems.

Past USAID projects have also had an impact on rural development and health in Northern Thailand. USAID funded YMCA activities in Chiang Mai from 1976 to 1979. The YMCA in Chiang Mai promotes rural development activities in Thai hill villages. Like the special teams in Mae Chaem, the YMCA community development workers (70% of whom are women) identify natural leaders in a village and help them and others to resolve their own problems. YMCA staff help villagers develop self-help projects and draw outside government and private agencies into the village when projects are beyond the capacity of the villagers.

Today, YMCA is working successfully in 258 villages in 9 provinces. The Chiang Mai YMCA also has an excellent resource library with a good collection of rural development texts, village level evaluations and studies, appropriate technology blueprints, and official census records for each of the Northern provinces, USAID gave this organization the impetus to begin their work in the hills. The villagers are learning to use their limited resources more efficiently as a result of the help received from the YMCA.

The Research Institute for Health Sciences, formerly known as MALAN (Malnutrition and Anemia Research Clinic), received a USAID grant of \$322,409 from 1978 to 1982 to establish rural infant and child care centers (ICCs) in Northern Thailand. Three ICCs were established in three villages, including one hilltribe village (Doi Tao in Chiang Mai Province). Research on malnutrition and related diseases were carried out at the ICCs. MALAN staff introduced ways of processing common food crops to reduce the dietary deficiencies of the infants in the center. Income generating projects were also begun in the three villages and marketing outlets were located for hill tribe handicrafts and other farm products.

The ICCs were staffed by the villagers. MALAN staff trained them in child care, food preparation and primary health care. More problems were encountered in the hill tribe village than in the Thai villages. The villagers' education level was lower, making training more difficult. Oral, rather than written instruction had to be given and more examples from everyday life experiences had to be used.

The Chiang Mai Medical School was probably the most successful USAID project in Northern Thailand. The USAID/Bangkok medical education project begun in 1951 was redirected in 1957 toward the specific objective of aiding the RTG in the establishment of a new medical center in Chiang Mai. The stated objectives were: a) to produce 50 doctors and 50 nurses each year; b) to provide a model for additional medical schools; c) to demonstrate standards of administration in a hospital complex operated as an integral part of a medical school and a nursing school.

In 1958, the first consultant in medical education arrived in Chiang Mai. In June, 1958, the first students were selected to enter the first of a two-year premedical program and began their studies in special facilities made available by the University of Medical Sciences. That year, the RTG provided land for the new medical center and transferred the Provincial Hospital to the University of Medical Sciences. This act put service and education under the same administrative head.

Emphasis was placed on preventive medicine and public health. The University of Illinois provided technical assistance (34 faculty members) over a 10 year period to the medical school. The school's faculty was given training in the U.S. Classrooms and research facilities were constructed.

Over 1,500 doctors have graduated from the Chiang Mai Medical School since the project began over 20 years ago. Approximately one hundred new doctors and 100 nurses graduate every year, double the goal of the project. Facilities are being expanded to accommodate the increase. Patients come from all over Northern Thailand to be treated at the University's Suan Dok Hospital where they know they will get expert care from specialists in every field of medicine. About 1% of the patients are hill tribe people who are treated free of charge.

All graduating physicians are required to devote three years to government service. The young doctors are usually placed in rural hospitals at the district or provincial level. Now, even the most remote district

towns such as Mae Chaem, have a resident doctor practicing in its 6-bed hospital. About one-third of the doctors choose to remain in the rural areas.

An additional 24 students are now being trained at the Chiang Mai Medical School. These students will be especially trained in community health. Two students from each of the 12 Northern provinces will be chosen. After graduation, they must return to their provinces for a minimum of 5 years.

Twenty years ago, there was a severe shortage of doctors in rural Thailand. There are 1,500 more doctors in the country because of the Chiang Mai Medical School. The school continues to serve the needs of rural Thailand by graduating 100 new doctors each year. There is still a severe shortage of doctors in the Northern hills. Chiang Mai Medical School is helping to fill the gap.

Conclusion

USAID has been active in Northern Thailand for more than 20 years. The projects implemented have had and continue to have a strong impact in the hills. Health care has improved. Special education projects are being implemented which introduce the hill tribe populations to Thai culture without denigrating their own unique traditions. Once hill people learn the Thai language and master basic skills, they will have the opportunity to leave the hills for more productive lives in the lowlands. However, if the hill people choose to remain in their villages, they will know how to use their marginal resources more efficiently. The rural development projects such as the Mae Chaem Watershed Development Project is serving as a model to the development of the highlands. All the projects lead to decreased tensions between the people and the government. Trust is increasing. The government is becoming more aware of the special problems which hill tribe people experience. The RTG is trying to address those problems.