The Recent Developments in Social Policy in Thailand:
With a Special Focus on the Health Policy Reform

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Abstract

This paper first provides a brief introduction of Thailand’s universal health care coverage scheme which is commonly called “30 Baht Health Care Scheme.” The introduction of universal health care has been highly controversial everywhere in that it requires high financial commitment from the state and stirs ideological conflicts over resources and entails material interests of almost all people from the society. As Thailand became one of a handful of countries providing universal health coverage with a comprehensive benefit package, one fundamental political puzzle arises. Why and how does a low and middle income country like Thailand develop such a comprehensive health care system in a relatively short period of time? This is more important especially considering that Thailand’s health reform was achieved in a situation where state leaders possess much higher position vis-à-vis various societal actors, a counter example to the pluralist and structural power views stressing the power of society in public policy making.

With an aim to better understand Thailand’s move to expand health benefits to all segments of society, this paper firstly reviews and criticizes the three common families of existing frameworks advanced to explain social policy. Secondly, this paper argues that Thailand’s 1997 Constitution reshaped elected politicians’ incentives to adopt universal health care policy and also enhanced government capacities to an unprecedentedly high level. The centralization and insulation of executive power in post-1997 Constitutional era lowered the degree of consensus needed to implement health policy and thus made Thaksin government more capable of steering public policy reform.