MDGs 4 & 5 Development in Thailand
Proposed Foreword
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Role of Parliamentarians in Achieving MDGs 4 & 5

Thailand is one of the South-East Asian Countries that has been in the process for health reform during the last decade. Importantly, the country exemplifies the application of Millennium Development Goals in a middle-income country which its most of MDGs already achieved in advance of the 2015 deadline. The MDGs indicators were transformed in order to prevent ceiling effects on the future development to a so called MDG-Plus for the ultimate commitment and development of the country.

The country’s unique experience offers learnt lessons for maternal and child development as indicated in MDG 4 and MDG 5. There have been many changes in the health care reform process that effect the health care delivery and financing system since the year 2001. After many years of debates and sluggish process in the attempt to reform the system of health care, the previous government implemented “30 baht treat all” scheme for universal access to subsidized health care after a 6-month pilot study in several provinces. The “30 baht treat all” mandates people to co-pay only 30 bahts or $0.89 for each visit or admission at the beginning. By pooling the MoPH budgets for hospital and health facilities as well as low income and voluntary health card schemes and provided additional fund. In brief, the 30 baht scheme was established at the policy level and started the implementation without legislation in 2001. This process allowed time for preparing and debating for later legislation supporting the health reform. Presently, there is no co-payment required. It serves more than 45 million people, except those already paid by their work places or private agencies.

The National Health Security Act was passed by the parliament later in November 2002 in order to regulate the quality and financial elements. The MoPH is the core agency implementing this universal coverage health care services.
In 2007, The National Health Act also passed the parliament. Notably, it is the first health act that addresses “Health” as “Right of the people” in Section 5 of Chapter I. Similarly, the promotion and protection of women’s health is addressed in Section 6 of the same chapter which includes the health of a child, a disable person, an elderly, and a socially deprived person. The mentioned legislation sections demonstrate the attentiveness and the significant roles of the parliamentarian in improving maternal and child health in Thailand that resulting in the country high achievement of MDGs’ outcomes.

The maternal and infant bonding and breast feeding support during the first 3 months is evident as the government regulation established 14 years ago offers maternity leave with pay for 90 leave days among female government officers. Those mother who would like to extend their maternity leave for 150 days or less are allowed, but without pay. This regulation provides the opportunity for mothers to stay home and take care of the babies longer than those 2 months leave in the past.

We received not only the government’s support for maternal and health child development, but also the significant contribution of the Royal family support. Particularly, the support from HRH Princess Srirasm, Royal Consort to HRH Crown Prince Maha Vajiralongkorn who wholeheartedly support mothers and babies bonding by promoting breastfeeding during the first 6 months of life. The project such as Three Age Center is also one of several initiations by HRH Princess Srirasm to promote health of mothers, babies, and elder persons in many provinces in Thailand. The project aims to improve family well being as well as the health of its members.

Lastly, we appreciate very much the valuable information sharing among countries at the session “The Role of Parliamentarians in Achieving MDG 4 & 5” during the 122nd Assembly of the Inter-Parliamentary Union. The occasion offers Thailand the opportunity to be a host country and a good example of health reform through legislation during the last decade. We hope that the arranged field visit to Health Center and Hospital will provide the more insight of implementation and health practices related to MDG 4 and 5 as well as universal coverage health care service in Thailand.