

#### Three Eras of Public Health System (Thailand)

	Socio-political Ideology	Health Infrastructure		
Before 1977	State's involvement in health	Vertical programme with		
	development, with restricted	central pool of authority,		
	sense of individual natural	technology and resources.		
	endowment.			
1978 – 1996	State's accountability for	Comprehensive health service		
	expansion of health service to	and responsibility to the poor,		
	cover all citizens.	including rural development.		
From 1997	Health as a human right and	Decentralization, devolution		
	cross-cutting issue for all	and empowerment of health		
	development sectors.	response as mandatory role of		
		broader stakeholders.		

**Table:** Evolution and development cycle Thailand's Health System: form "Health for All" to "All for Health" Phoolcharoen W..2005.





#### The public health situation in each era.

	Health Care Situation	Innovation			
Before 1978	Reform of the health care system: from traditional to Western medicine	grade I, II health center, and midwifery station			
1978-1996	Primary health care and health care financing reform to improve access to care for some specific populations	Basic Need Indicator, Referral system, Primary Health Center: PHC, village Health Volunteers: VHVs; VHCs, Community Primary Health Care Centers; CPHCCs Village drug Fund, Medical Welfare Schemes; MWS, Civil Servant Medical Benefit Scheme; CSMBS, Health promotion Program			
Since 1997	Universal access to essential care and the strengthening of primary care	Mini-health Center, health promotion program prior cure and care, UCs			

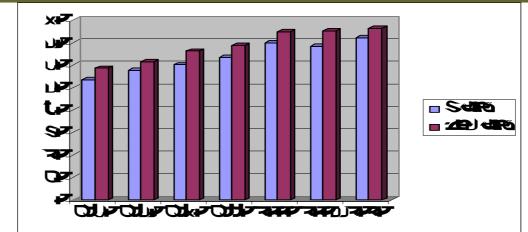


#### Current MOPH's Vision

- To be principal organization responsible in development of sustainable and efficient health systems to provide service to all people with quality and equity
- Regard to this vision, societal and community involvement is crucial partners to lead towards "Healthy Thailand"

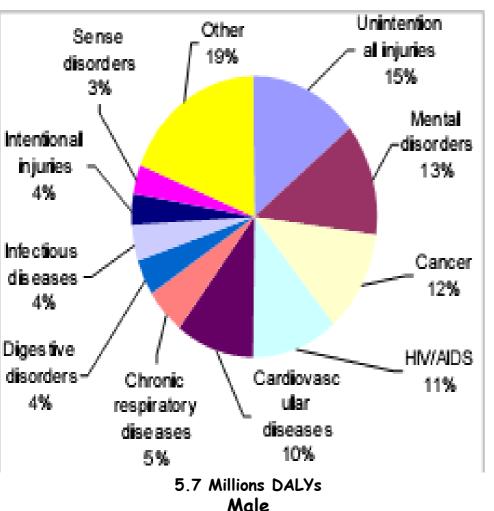
#### Thai's Life Expectancy and Birth (years)

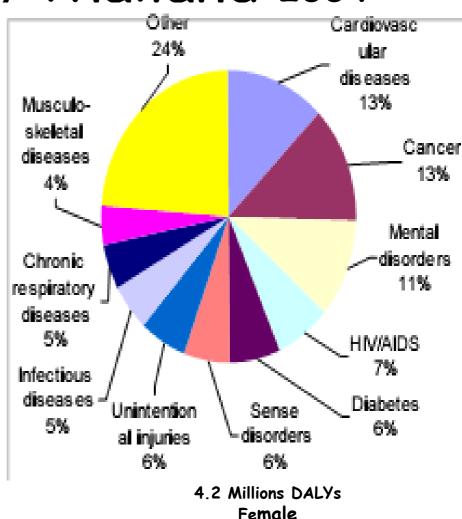
	1960	1970	1980	1990	2000	2007	2020
Males	53.64	57.73	60.25	63.5	70	68.4	72.2
Females	58.74	61.57	66.25	68.75	75	75.2	76.5





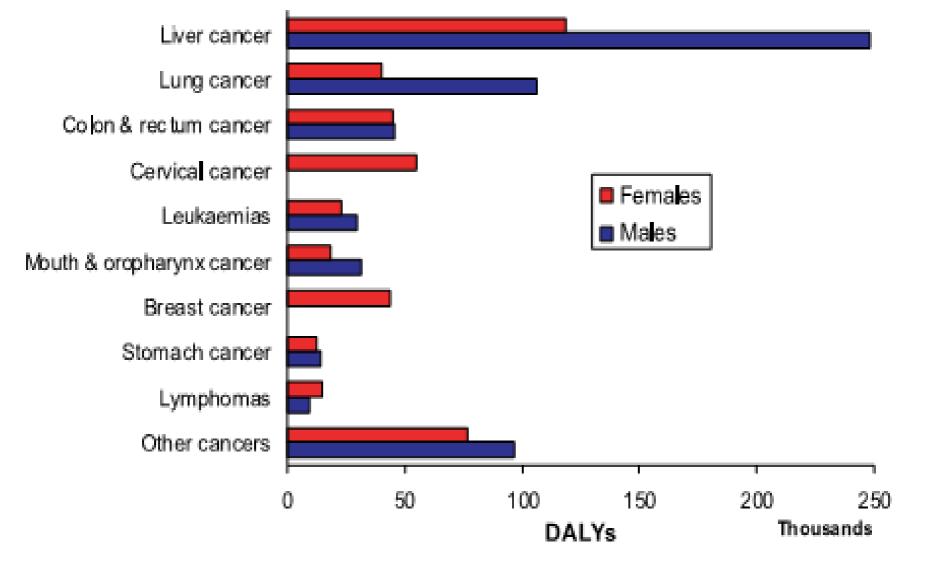
#### Health Status. Thailand 2004







الاصلحالية



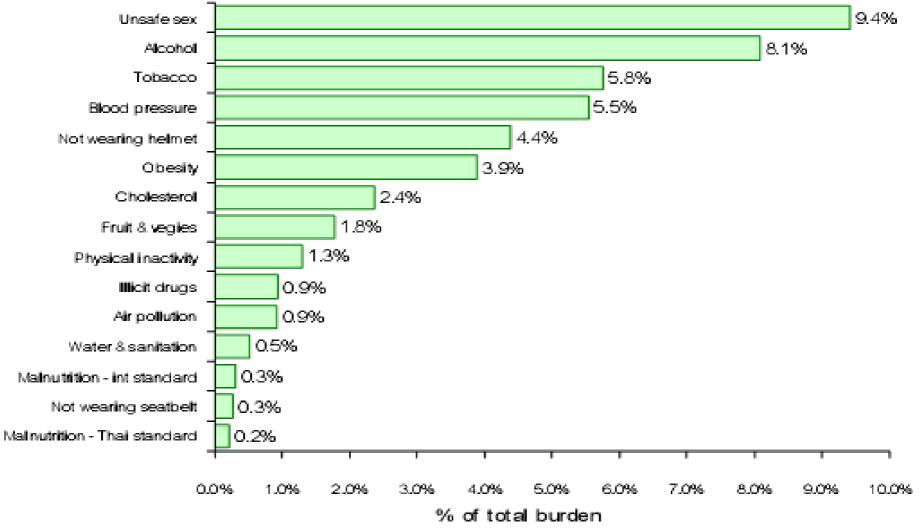
#### Cancer burden by sex, Thailand\*

\*Bureau of Policy and Strategy-MOPH, 2007

**J** 



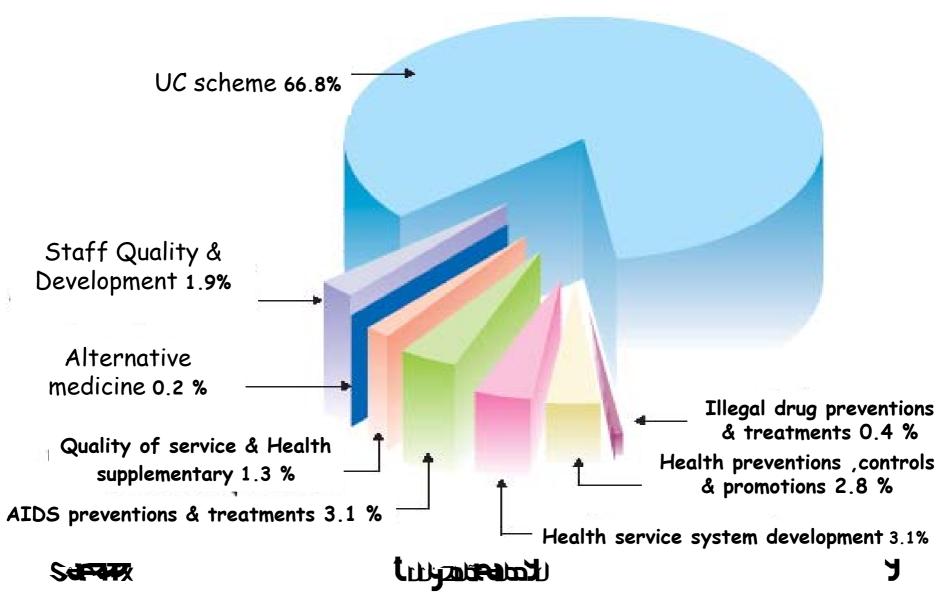
### Risk factors, 2004

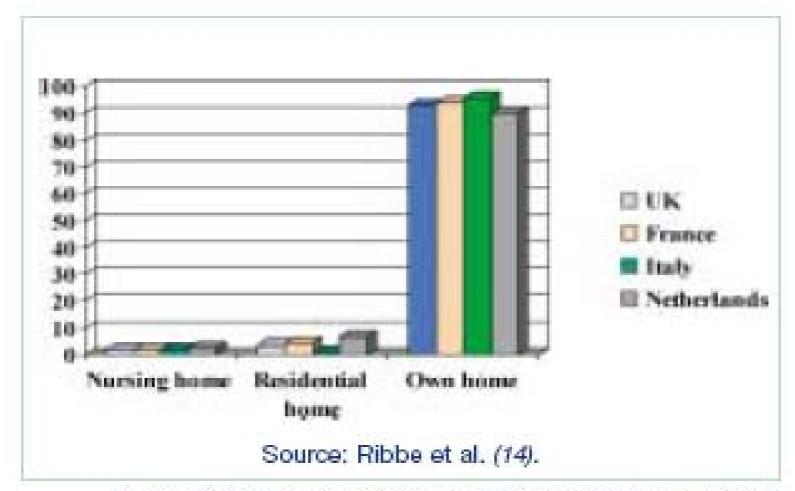






## Health Care Budget, 2550

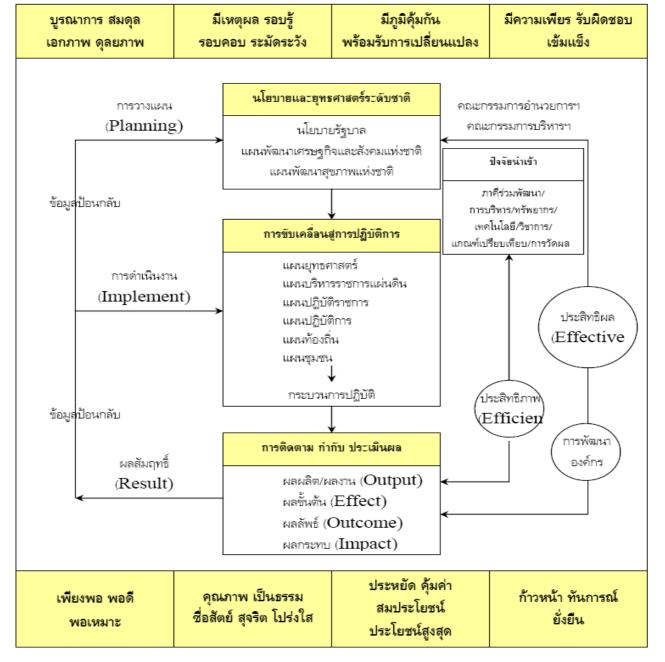




Place of residence for people >65 years in four countries







Sufficiency Economy in Health Administration Development



#### National Health Security Act

- Based on the article 52 of the Constitution the government is responsible to enable the people to access the essential health services
- The Policy of "30 baht schemes" attracted the popular vote for government in 2001
- The people participation in drafting the National Health Security Act enacted in 2002
- The policy to split the collective purchaser from the provider



#### Public Health Act. (2007)

- Meet the needs -physical, psychological, emotional, social, spiritual -of the patients & fam.
- Access: Equal, without discrimination
- Respect for Ethical principles
- Right to information
- Right to choice/empowerment
- Patients & fam. = A Unit of Care



# IHPP - International Health Policy Program Thailand

IHPP - International Health Policy Program Thailand is a semi-autonomous program conducting research on the national health priorities related to health systems and policy in Thailand. The program, which is now part of Bureau of Policy and Strategy-MOPH, aims to improve the national health care systems through generating knowledge and reliable evidence on improving health systems and policy to the public and Thai policy makers.

SETEN

tulyantentu

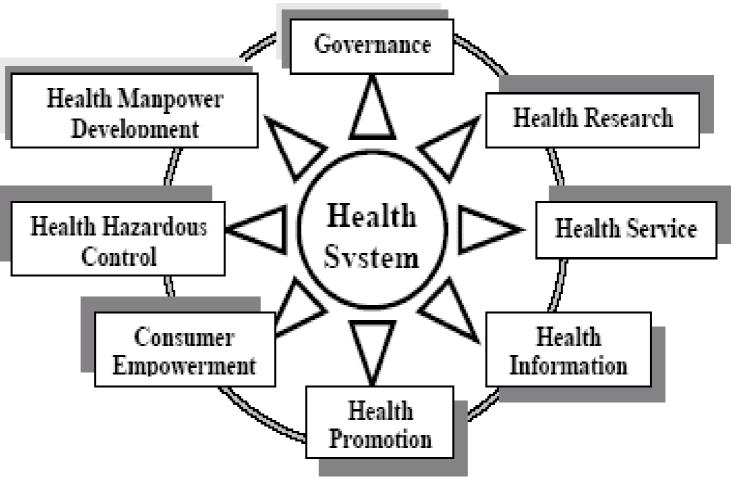


#### Thailand Healthy Lifestyle Strategy

- Healthy Public Policy
- Social Mobilization & Public Communication
- Community Building
- Surveillance & Care System
- Capacity Building



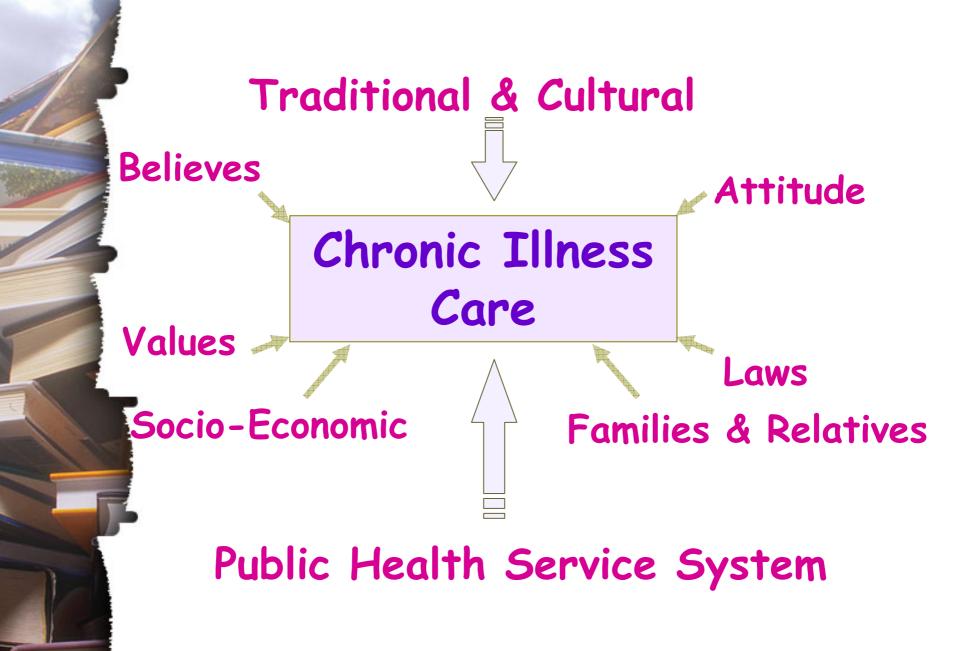
#### The National Health Act outlines eight components



**Table:** Evolution and development cycle Thailand's Health System: form "Health for All" to "All for Health" Phoolcharoen W..2005.







SEFER

truyzatrami





#### The Nursing Practice

- Management of patient health/illness in ambulatory care settings.
- Monitoring and ensuring the quality of healthcare practices.
- Organizational and work-role Competencies.
- Helping role of the nurse.
- Teaching-coaching function of the Nurse
- Effective management of rapidly changing situations.



#### Living with severe chronic illness

Caring - Healing Inquiry for Holistic Nursing Practice









Patient & Family Concern

Trust, Faith

Cooperation

