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COLLEGE OF POPULATION STUDIES
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THAILAND'S PATH TO SUSTAINABLE POPULATION AND DEVELOPMENT: A 30-YEAR PROGRESS SINCE ICPD



Thailand's Path to Sustainable Population and Development: a 30-Year Progress since ICPD

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**THAILAND'S PATH TO
SUSTAINABLE POPULATION AND DEVELOPMENT:**

**A 30-YEAR
PROGRESS SINCE
ICPD**

By

Office of the National Economic and Social Development Council
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Ministry of Public Health
Ministry of Social Development and Human Security
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ICPD

30

International Conference
on Population and Development



United Nations Population Fund
กองทุนประชากรแห่งสหประชาชาติ



Foreword

Towards a Resilient Future: Advancing Population and Development through Rights and Choices for All

As we commemorate the 30th anniversary of the International Conference on Population and Development (ICPD30), this report stands as a testament to Thailand's resilience, innovation, and unwavering commitment to addressing complex and emerging challenges. Guided by the ICPD agenda, this comprehensive review reflects on the remarkable strides made over the past three decades and sets a visionary path forward.

Since the historic 1994 conference, our global commitment has been steadfast: placing people's rights, dignity, and well-being at the heart of sustainable development. This commitment was reaffirmed at the Nairobi Summit (ICPD25) in 2019, which emphasized ensuring universal access to sexual and reproductive health services, upholding these rights in humanitarian contexts, combating sexual and gender-based violence, leveraging demographic diversity for economic growth, and mobilizing sustained financing. These priorities are encapsulated in the ICPD's transformative vision of achieving three zeros by 2030: zero unmet need for family planning, zero preventable maternal deaths, and zero sexual and gender-based violence, alongside the eradication of all forms of discrimination against women and girls. Realizing these goals requires a concerted effort supported by robust financing, political will, and participatory policy processes.

This report chronicles Thailand's experience with multifaceted demographic and developmental challenges, including low fertility, population ageing, and evolving socio-economic conditions. It provides a thorough analysis of the shifting demographic landscape, highlighting issues such as delayed childbearing, increased singlehood, and their impacts on child development and early-life vulnerabilities. Additionally, the report addresses the ongoing repercussions of the COVID-19 pandemic and escalating environmental concerns, such as climate change and PM2.5 pollution. In response, Thailand has embraced a comprehensive life-cycle approach, demonstrating a commitment to supporting individuals at every stage of life through targeted policies and programmes. This framework has been pivotal in enhancing multisectoral coordination, fostering grassroots community involvement, and developing innovative solutions to persistent challenges.

Thailand has achieved notable advancements in sexual and reproductive health and rights (SRHR). The nation's robust legal reforms and policy initiatives reflect a profound dedication to improving health outcomes for all. Particularly transformative have been the enhanced services for vulnerable groups—such as individuals with disabilities, migrants, and LGBTQIA+ communities. The strategic integration of digital technologies has revolutionized

access to essential health services, affirming Thailand's leadership in SRHR advancements.

Gender equality remains a cornerstone of Thailand's development strategy. This report provides a comprehensive analysis of the current state of gender equality, focusing on disparities in education, economic opportunities, and experiences of gender-based violence. It underscores the importance of gender-responsive budgeting in addressing wage gaps, educational inequities, and the varied impacts of COVID-19. The report also details efforts to enhance economic empowerment for women and advance inclusive policies, exemplified by initiatives like the SoSafe Project.

Despite significant progress in human capital development, challenges persist. Key issues include unequal access to education, with many individuals remaining outside employment, education, or training, and disparities in educational quality. Labor market dynamics reveal a shifting age profile, increasing qualifications, and growing skills, but also highlight critical challenges such as slow income growth, informal sector employment, and inclusivity issues for vulnerable groups, including migrant workers, individuals with disabilities, female workers, and older workers. In the health sector, the rise of non-communicable diseases and financial constraints on the universal health coverage system continue to pose significant hurdles. Addressing these issues is crucial for ensuring equitable health outcomes and advancing sustainable development nationwide.

Data and statistics are vital for crafting effective policies and programmes. This report underscores the importance of advancing data inclusiveness and enhancing statistical systems to ensure comprehensive coverage for all segments of

society. The evolution of Thailand's National Statistical System Master Plans—from the inaugural plan (2011-2015) to the current framework (2023-2027)—highlights a commitment to improving data accuracy and inclusivity. Key initiatives, such as revising the Enumeration Area Frame, transitioning to a digital and hybrid census, and utilizing Model Population Estimates, are crucial for informed decision-making. Collaboration with UNFPA Thailand further supports these efforts, reinforcing the importance of these strategies in addressing existing challenges and planning for a more inclusive future.

As we celebrate these milestones, it is essential to recognize the invaluable contributions of our government partners, experts, and stakeholders. Their dedication, expertise, and collaborative spirit have been instrumental in advancing our shared goals. The support and commitment of all involved are crucial as we continue to address the evolving needs of our population and strive toward sustainable development.

Looking ahead, this report serves as a call to action for all sectors to renew their commitment to the ICPD agenda and the principles of human rights, equality, and sustainability. We must continue to innovate, collaborate, and act decisively to build a future where every individual has the opportunity to thrive. Together, we can overcome the challenges and realise the vision of an even more prosperous, inclusive and resilient Thailand.

With gratitude and determination,

Dr. Julitta Onabanjo

Dr. Julitta Onabanjo
Country Director of UNFPA Thailand and
UNFPA Representative for Malaysia

Foreword

ICPD30+: A Vision for a Sustainable Thailand

We are honored to present this report in commemoration of the 30th anniversary of the International Conference on Population and Development (ICPD). In 1994, Thailand proudly joined other 178 UN Member States in adopting the Programme of Action of the ICPD. Since then, the country has demonstrated its unwavering commitment to the population and development objectives outlined in the Programme, recognizing these as essential pathways to sustainable development. Thailand is committed towards improving the quality of the country's population, human rights, and gender equality, while addressing emerging challenges like climate change and technological disruption.

Reflecting this commitment, Thailand has set ambitious national targets to expand Universal Health Coverage by comprehensively including sexual and reproductive health services, reducing maternal mortality and lowering the teenage pregnancy rate within the scheme. The country is also focused on promoting gender equality, reducing child, early and forced marriage, increasing access to gender-based violence prevention services, and fostering human capital development.

These goals have been pursued with concrete actions and tangible results. Thailand has achieved notable success in key areas such as decreasing the adolescent birth rate and integrating sexual and reproductive health services into Universal Health Coverage. Initiatives like providing free contraceptives, expanding pregnancy choices, and offering infertility treatments have been pivotal in these achievements. Moreover, Thailand has taken proactive steps to advance gender equality, including by implementing comprehensive national policies and establishing specialized services for survivors of gender-based violence. Innovative use of technology, such as digital platforms for rapid-response assistance, further supports these efforts. Additionally, the passage of the Marriage Equality Act has marked a historic milestone, making Thailand the first country in Southeast Asia to recognize same-sex marriage.

In pursuing a holistic development agenda, Thailand has prioritized the principle of leaving no one behind as reflected in the country's major policies and strategies, leading to the advancement of a life-cycle approach to population ageing and human capital development. To support these

efforts, Thailand is also enhancing the collection of comprehensive and inclusive data and statistics. The progress Thailand has made under the ICPD framework aligns closely with the Sustainable Development Goals (SDGs), particularly those related to health and well-being (SDG 3), gender equality (SDG 5), and reducing inequalities (SDG 10). Achieving the ICPD goals is instrumental in accelerating progress towards the SDGs, as they are mutually reinforcing and share a common vision of promoting human well-being, rights, and dignity.

Despite significant progress, challenges remain. The low fertility rate and aging population are pressing issues, with the total fertility rate estimated at 1.2 for the year 2023—far below the replacement level. Projections also indicate a dramatic rise in the share of older persons and an overall population decline. These trends, coupled with the impacts of the COVID-19 pandemic and the rise in noncommunicable diseases, necessitate a more integrated approach to population development.

Moving forward, achieving our vision of inclusive and sustainable development requires renewed dedication and collaborative action. To translate this

vision into effective actions, it is crucial to enhance partnerships at all levels to encourage sufficient mobilization of resources and to ensure that all stakeholders can contribute effectively and

synergize their efforts towards these shared objectives. Strengthened collaboration will help bridge existing gaps, drive innovations, and amplify the impact of policies and programmes, thereby ensuring that Thailand’s sustainable development is inclusive, resilient, and continue to progress beyond ICPD30 and beyond 2030.

The ICPD@30 report will provide a comprehensive overview of Thailand’s progress to date and present policy recommendations to address ongoing challenges. It is a call to action for all stakeholders—public sector, youth, civil society, the private sector, and international partners, including UNFPA—to work together and leverage their collective resources, expertise, and perspectives. By embracing this collaborative approach, Thailand can build a future that is equitable, sustainable, and inclusive, ensuring that no one is left behind.



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Celebrating ICPD 30 in Thailand

*Three decades of progress, we gather together,
To honour a journey, brighter and clearer.
From life's first breath to twilight's age,
Thailand's human story graces every page.*

*Through a life-cycle approach, holistic and kind,
For every soul, every gender, for every mind.
With "her power" rising, we hear the song,
Where silence lingered, now voices grow strong.*

*Universal health for all, a dream come true,
Where illness fades, and wellness grew.
From youthful dreams to wisdom's light,
We've journeyed together, day and night.*

*No one left behind, no matter the land,
For every life, we lend a hand.
The older adults, the lost, displaced,
Within our paths, they've found their place.*

*From mountain peaks to rivers' flow,
Migrant hands help us sustainably grow.
For those whose strength may falter still,
We lift them up; we share the will.*

*Yet challenges loom, and we must strive,
The tides are shifting, storms may rise.
An aged nation, but not in despair,
We build an inclusive future with thoughtful care.*

*"Empowering our youth", and all the ages,
To shape society, strong and courageous.
Through "SoSafe"'s vision, we clearly see,
A whole-of-society for a world of equity.*

*Technology leads, the future's near,
All side by side, we persevere.
A life treasured, a life that's free,
Celebrating ICPD, fulfilled with dignity.*

By Adhipat Warangkanand, October 2024

EXECUTIVE SUMMARY

Thirty years after the 1994 ICPD Programme of Action (PoA), Thailand's commitment to its goals remains steadfast and increasingly relevant. As part of a global coalition of 179 Member States, Thailand has embraced the ICPD PoA, which underscored the importance of reproductive rights as fundamental human rights and the empowerment of all population groups.

This report provides an in-depth overview of Thailand's progress since the 2019 Nairobi Summit, detailing significant advancements and the country's evolving approach to addressing population and development challenges. It also highlights major historical shifts that continue to influence Thailand's population and development trends today, demonstrating the lasting impact of past policies and trends on the nation's current trajectory.

Key Highlights of the Report

Population Shifts and Low Fertility

The report highlights Thailand's declining fertility rate, alongside economic and social pressures. These include underemployment, reproductive health challenges, and gender inequality. Targeted initiatives aim to empower individuals and families to meet their desired family sizes, supporting long-term demographic resilience.

Reproductive Health and Universal Access

Comprehensive policies have integrated reproductive health into Thailand's universal healthcare system. Despite successes in family planning and adolescent health, there are still barriers to access for vulnerable populations, such as ethnic minorities and persons in remote areas. Efforts to overcome these challenges are ongoing.

Advances in Gender Equality

Thailand has made landmark progress in gender equality, notably becoming the first Southeast Asian country to pass marriage equality legislation. However, deeply ingrained social norms and household gender roles continue to hinder full gender equality, particularly in reducing gender-based violence and increasing women's participation in decision-making.

Human Capital Development

Education and healthcare universalization have been key priorities, yet structural inequalities persist. The

report underscores the need for upskilling and lifelong learning, particularly for older adults, migrants, and women re-entering the workforce, to foster an inclusive labour market and maintain a healthy workforce.

Data for Policy Development

Thailand is at the forefront of modernizing its demographic data collection methods. Digital advancements in census techniques, such as online self-enumeration, are improving data accuracy and inclusivity. However, challenges remain, including the digital divide and the need for stronger data protection.

Future Directions

Looking forward, Thailand must prioritize systemic policy restructuring. Strategic plans need to shift from broad guidelines to actionable measures that address the unique needs of vulnerable groups. Multistakeholder partnerships, alongside private sector involvement, will be key to sustaining economic stability and responding to megatrends such as AI, climate change, and urbanization.

Thailand's journey over the past 30 years has been marked by both remarkable progress and ongoing challenges. The government's strategic focus on demographic resilience, social inclusion, and sustainable development demonstrates its unwavering commitment to the ICPD PoA. Moving forward, addressing the needs of vulnerable populations, advancing gender equality, and ensuring equitable access to resources will remain at the core of Thailand's policy framework to build a prosperous future for all.



INTRODUCTION

THAILAND'S POPULATION DEVELOPMENT JOURNEY:
FIVE-YEAR RETROSPECTIVE AND FUTURE DIRECTIONS

1

CHAPTER



Ensuring the quality of life of future generations requires a comprehensive, life cycle and multifaceted approach, starting from family formation, planning and reproductive health to ageing with dignity. These essential elements lay the foundation for a healthy start in life, allowing couples to have children at an optimal time and for the parents and children to receive necessary support at all stages of life. Laying good groundwork is crucial for developing quality human capital throughout life, fostering inclusivity, and addressing the diverse needs of all population groups, particularly the most vulnerable. These principles are at the heart of population development, as countries globally are striving to meet the Sustainable Development Goals.

The year 2019 marked a significant turning point for every nation. The outbreak of the COVID-19 pandemic at the end of 2019 not only introduced new challenges but also intensified existing ones, bringing underlying issues to the forefront. Despite these difficulties, Thailand has made notable progress in various areas. There has been a steady decline in adolescent pregnancy rates, a reduction in impoverished households, and improved access to education and financial assistance for disadvantaged families, among other achievements. On another positive note, these challenges have also opened opportunities to advance new, innovative, and multifaceted initiatives. Prominent among these is the promotion of digital adoption to improve service efficiency and the mobilization of community task forces and civil society actors to support and enhance existing state structures.

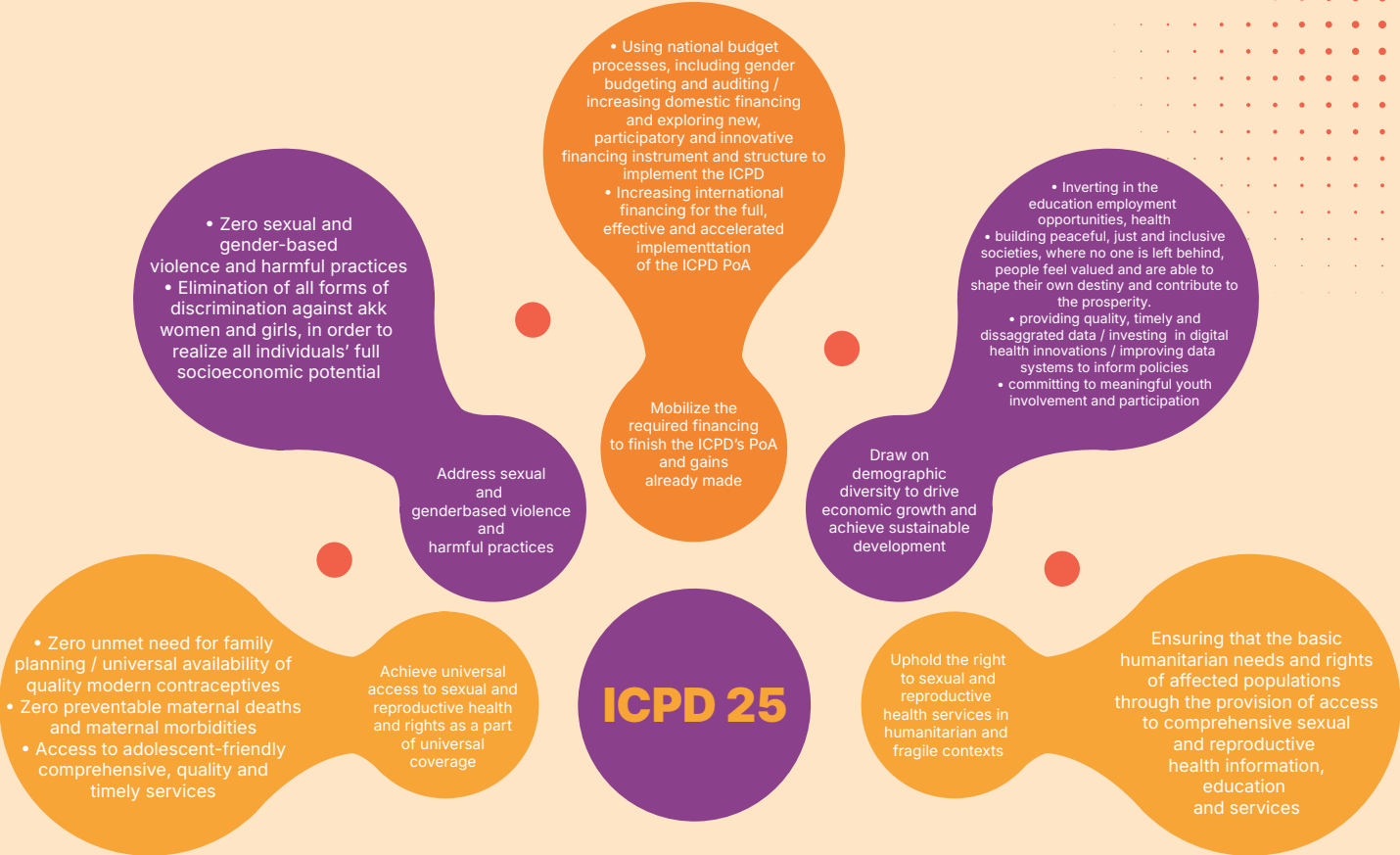


Despite significant advancements, much work remains to sustain progress made and address both persisting and emerging challenges. The period from the Nairobi Summit to the present has been characterized by both progress and setbacks, providing valuable insights for reflection and serving as a launching point for the ICPD beyond its 30th anniversary.

Setting the Population Development Framework: from Nairobi to Thailand

The Nairobi Summit (ICPD25) in 2019 set global commitments across five priority themes to achieve population development. These themes include ensuring universal access and rights in sexual and reproductive health as part of universal health coverage, emphasizing rights to sexual and reproductive health services in humanitarian and fragile contexts, addressing sexual and gender-based violence, leveraging demographic diversity to drive economic growth and achieve sustainable development, and mobilizing the required financing to complete the ICPD Programme of Action (PoA) while sustaining existing gains.

Priority themes of the Nairobi Summit Commitments



The ICPD's goals envision three zeros by 2030: NO unmet needs for family planning, NO preventable maternal deaths and maternal morbidities, NO sexual and gender-based violence and harmful practices, including discrimination against all women and girls, facilitated by a participatory policy process and supported by national and international budgets. Moreover, quality education, health services, and employment opportunities are essential for building prosperous, peaceful, just, and inclusive societies.

In response to the global commitments set forth at the Nairobi Summit, the Thai Government, through the Ministry of Public Health, has expressed its firm commitment to accelerate the unfinished work of the ICPD Programme of Action (PoA) to make the rights and choices for all a reality. This commitment includes reducing maternal mortality from 21.8 deaths per 100,000 live births to 15 per 100,000 live births by 2030 and lowering teenage pregnancies from 23 per 1,000 live births among adolescents aged 15-19 in 2019 to 15 or fewer by 2027, as well as addressing early marriage before the age of 18.¹

The Universal Health Coverage (UHC) scheme, previously validated as a successful approach to significantly reduce mother-to-child transmission by providing free maternal health care to all preg-

nant women, regardless of citizenship, has been identified as a key intervention. At the Nairobi Summit for ICPD25, this scheme was announced to be expanded to ensure that “everyone on the Thai soil has access to all essential health services including sexual and reproductive health, without financial barrier.”² Through the UHC scheme, the government ensures that women and girls will have equal access to quality and comprehensive gender-based violence prevention, information and services. Moreover, empowering women and girls, including encouraging teen mothers to continue their education, is recognized as another vital intervention to fulfill this promise.

The Thai government has taken the ICPD commitments very seriously and has approached their fulfillment sustainably, as evidenced by the enactment of new legislation and several proactive policies implemented even before the Nairobi Summit in 2019. For instance, the 2016 Prevention and Solution of the Adolescent Pregnancy Problem Act, the 2nd National Reproductive Health Development Policies and Strategies (2017-2026) to promote the Quality of Childbirth and Growth, and the first national strategy for the development of Thailand—the 20-year National Strategic Plan (2018-2037)—aiming at enhancing population health and well-being

¹ Nairobi National Commitment on ICPD25 by the Royal Thai Government. 2019. Retrieved July 18, 2024. <https://www.nairobisummiticpd.org/commitment/nairobi-national-commitment-icpd25-royal-thai-government>

² The Royal Thai Government's Commitment on ICPD25 delivered at the Nairobi Summit on ICPD25 by Dr. Samrueng Yangkratok, Vice Minister of Public Health, Ministry of Public Health, Thailand. Retrieved July 18, 2024. <https://thailand.unfpa.org/en/ICPD-commitments-official-speech>



and supporting the achievement of the Sustainable Development Goals (SDGs). After the Nairobi Summit, notable policy developments, in chronological order, include the 2nd National Condom Strategy (2020-2030), the Long-term Population Development Plan (2022- 2037), and the Measures to Prevent Recidivism of Sexual and Violent Crimes Act (2022).

The principles and actions outlined by the ICPD PoA are fundamental to human capital development, thereby reinforcing the foundation for the country's future. Recognizing the importance of this, the Thai government has focused on enhancing human capital, particularly in response to shifting demographics and rapid technological advancements.

To this end, specific targets have been established under the 20-year National Strategy (2018-2037) to be achieved by 2027, including increasing the Human Development Index (HDI) from 0.804 in 2019 to at least 0.82, improving the Early Childhood Development (ECD) index from 82 in 2020 to at least 85, and boosting the family strength score from 85.5 in 2019 to over 92.³ Notable policy developments in relation to human capital development include the enactment of the 2023 Promotion of Learning Act, aiming at promoting lifelong learning for all, particularly for vulnerable groups (UNFPA Thailand, 2023a).

From the inception of the International Conference on Population and Development (ICPD) in Cairo to

³ See the targets and indicators for the 23 Master Plans under the 20-year National Strategy on the National Strategy and Country Reform (NSCR) website (<http://nscr.nesdc.go.th/>).

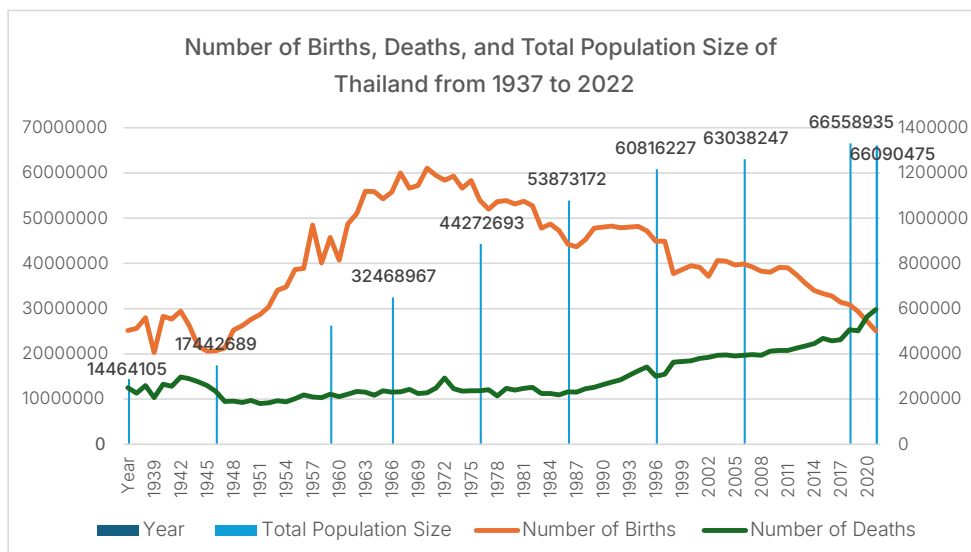
the global commitments reaffirmed at the Nairobi Summit, Thailand has not undertaken this journey alone. The ICPD PoA and recent global commitments have been seamlessly integrated into Thailand’s key development policies and initiatives. These efforts are detailed throughout this chapter and report. Such advancements have been made possible through substantial technical and financial support from UNFPA Thailand. Noteworthy contributions include the development of a policy framework for a Life-Cycle Approach to Population Ageing in Thailand, providing policy guidance to address social and public challenges amid rapid population ageing

(see UNFPA Thailand, 2021a for a full report), the production of the National Transfer Account (NTA) for the next phase and the application of Social Return on Investment (SROI) to monitor and evaluate pilot initiatives under the implementation of the Long-term Population Development Plan (2022- 2037).⁴ Over the years, the partnership between the Government of Thailand and UNFPA Thailand has strengthened significantly, exemplified by the joint development of UNFPA’s 12th Country Programme (2022-2026). This programme sets a clear direction for cooperative activities, including resource mobilization.

Multiple Demographic and Developmental Dilemmas

Too Few Babies, Unprepared Motherhood, and Effects on Child Development Outcomes

Figure 1.1 Number of Births, Deaths, and Total Population Size of Thailand from 1937 to 2022



Source: National Statistical Office, Thailand

⁴ Division of Human Resources and Social Development Strategy. 2022. Retrieved July 18, 2024. https://www.nesdc.go.th/ewt_news.php?nid=13725&filename=index

Thailand's declining fertility rate (Figure 1.1), along with the challenges many children face in environments that do not support their development and learning, has been widely referred to as "Fewer Babies, Lower Quality." Since the 1970s, Thailand has seen a steady decrease in birth rates. The country, once characterized by the "Million Birth Cohort Era (1963-1983)", has witnessed annual births dropping below 600,000 since 2020.⁵ Although many tend to view declining fertility as inherently negative and a result of a lack of desire for children among recent generations of Thais, evidence suggests that the situation is more nuanced. Recent statistics reveal that there are segments of the population eager to have children but facing significant obstacles. About 11.6% of individuals in their reproductive years report difficulties in conceiving (UNFPA Thailand, 2021b). This struggle is pronounced within the LGBTQ+ community. Among Thailand's 3.6 million LGBTQ+



individuals, around 29% express a desire to have children, yet their paths to parenthood are obstructed by unique challenges and societal barriers (Thailand Policy Lab, 2023).

Despite the overall decline in fertility, there remains a high birth rate among the youngest segments of the reproductive population. According to the United Nations World Population Prospects, the birth rate among women aged 15-19 has peaked in 2011 at 52.0 births per 1,000 women and has decreased to 31.6 births per 1,000 women by 2022 (United Nations, Department of Economic and Social Affairs, Population Division, 2022). Although this decline is significant, the current rate is still higher than in other countries within the region like Singapore, Malaysia and Vietnam, with repeated pregnancies among these young women being another notable concern. Early unions, often occurring after pregnancy, are also prevalent. Between 2015 and 2020, there was a slight decline in early marriages, yet in 2019, approximately 5.7 million Thai girls and women were married or in union before the age of 18, with 1.2 million getting married before the age of 15⁶, despite the Thai Family Law decreed the legal age of marriage at 17 with parental consent and 20 without.

Challenges stemming from adolescent motherhood and unintended parenthood are multifaceted, impacting not only the social and educational opportunities available to the parents but also the health and well-being of the children in various ways.

⁵ Civil Registration Database. The Bureau of Registration Administration, Ministry of Interior. <https://stat.bora.dopa.go.th/stat/statnew/statMenu/newStat/home.php>

⁶ Statistical Profile on child marriage: Thailand.



Recent data from the 2022 Multiple Indicator Cluster Survey (MICS) reveal that many Thai children face significant barriers to accessing healthcare and often grow up in disadvantaged environments. Alarming, the survey found that approximately 17% of children aged 12-23 months do not receive all basic vaccinations by their first birthday, despite the essential role vaccines play in preventing serious diseases. Furthermore, nearly 20% of children from economically disadvantaged families are born with low birth weight, which can lead to long-term health issues. Malnutrition is another major concern, with over 10% of children aged 0-5 years experiencing

stunted growth (National Statistics Office of Thailand, 2023).

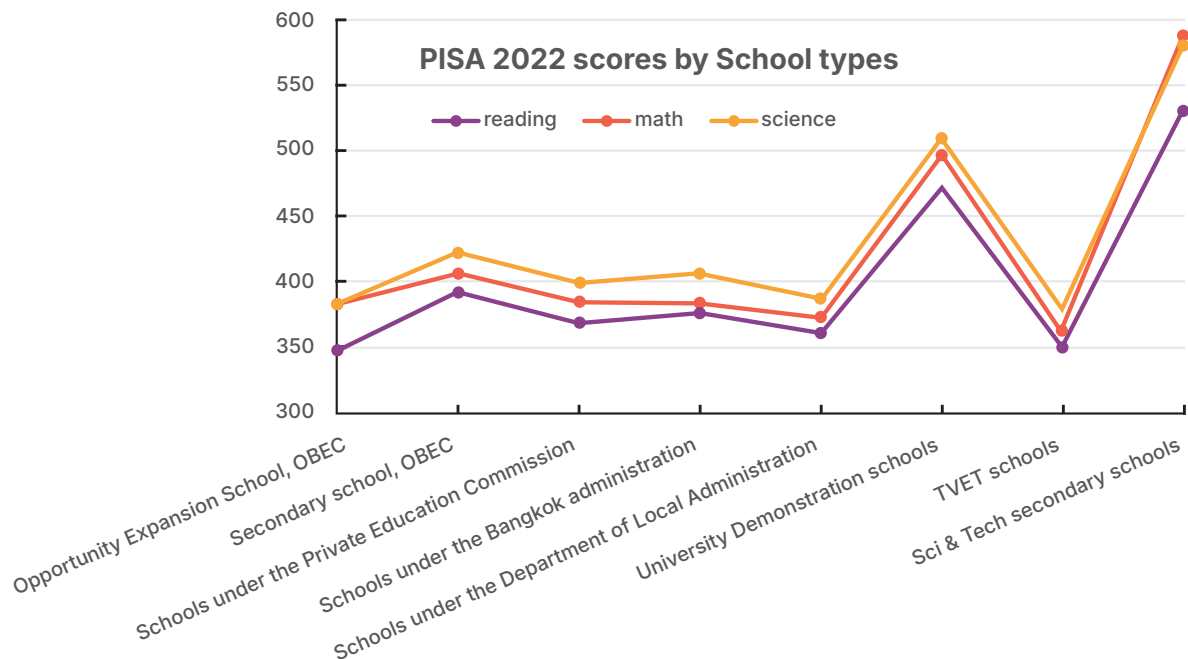
Family relationships are essential for the full potential development of human capital. The 1990 Convention on the Rights of the Child (CRC) emphasizes that a child should grow up in a family environment filled with happiness, love, and understanding.⁷ However, the most recent MICS report reveals significant challenges faced by Thai families, especially those with young children. In 2022, only half of Thai children aged 0-17 years lived with both parents, with the rest living with either one or none, due to various rea-

⁷ Preamble of the 1990 Convention on the Rights of the Child text. Retrieved July 18, 2024.
<https://www.unicef.org/child-rights-convention/convention-text>

sons such as premature death of parents or migration for work. Moreover, approximately half of the household heads where the children reside have only completed primary education (National Statistics Office of Thailand, 2023). These factors impact children's development, leading to delays in cognitive, emotional, personal, and skill development. These children are also more likely to drop out of school due to a lack of support and face a higher risk of violent punitive methods, as evidenced by the 2022 MICS data that 53.8% of children aged 1 to 14 have experienced violent discipline at least once in the month before the survey (National Statistics Office of Thailand, 2023).

Furthermore, a 2023 survey by the Department of Women's Affairs and Family Development showed a national average family strength score of 71.47, exceeding the national target of 68.40 but marking a decline from 85.47 in 2022. The survey also indicated that while one in four Thai families is considered strong, an equal proportion are classified as having family vulnerability (Department of Women's Affairs and Family Development, 2023). Children's adverse experiences in their formative years can lead to both short-term and long-term detrimental outcomes, affecting them well into adulthood. One clear indication of the short-term impact is the development of their growth. Recent health data from 2023 has revealed that around one-fifth (22%) of Thai children aged 0-5 who have undergone developmental screening are found to have developmental delays.⁸

Figure 1.2 PISA scores by school types



Source: PISA 2022 Results (Volume I and II) - Country Notes: Thailand

⁸ Department of Health (DoH) Dashboard. Retrieved July 18, 2024.

<https://dashboard.anamai.moph.go.th/dashboard/delaydspm/index?year=2023>

The long-term impact can be reflected by the Programme for International Student Assessment (PISA) scores, which evaluate 15-year-old students in reading, mathematics and science. In 2023, Thai students scored 393 in reading, 419 in mathematics, and 426 in science. All scores are not only below the OECD average but also fall short compared to those of top-performing Southeast Asia countries like Singapore and Vietnam.^{9,10} A closer examination of performance trends over time and the detailed characteristics of students further reveals a downward trend in PISA scores and significant disparities within Thailand's education system. Students with excellent scores are primarily concentrated in a small subset of schools, particularly those emphasizing science and mathematics and university-affiliated demonstration schools (Figure 1.2).¹¹ Extensive discussion of Thai education system can be read in Chapter 5.

Considerable effort has been made to ensure the universal coverage of basic education and to improve the equity and quality of Thai education to meet the demands of high-level competencies. Among notable initiatives are conditional cash

transfers and scholarships to support students from the country's lowest-income households, ensuring that financial barriers do not impede access to education. To enhance the quality of instruction, targeted teacher training programmes are developed to address the unique challenges schools face in remote areas. Complementing these efforts is the innovative implementation of area-based education sandboxes designed to allow the education system to adjust to specific contexts and challenges of the area.

As of 2024, the education sandboxes have been implemented in 19 provinces, covering 1,574 schools.¹² Although still in their early stages, these initiatives represent a promising commitment to achieving greater equity and excellence in Thai education. Recent research by the Thailand Development Research Institute (TDRI) found that around 90% of pilot schools in three sampled provinces reported revising their curriculum during the first year after joining the education sandbox initiative, with positive feedback on increased autonomy in budget utilization and classroom assessment methods (TDRI, 2022).

⁹ PISA Thailand. <https://pisathailand.ipst.ac.th/news-21/>

¹⁰ OECD Economic Surveys: Thailand 2023 https://www.oecd.org/en/publications/oecd-economic-surveys-thailand-2023_4815cb4b-en.html

¹¹ PISA Thailand. Evaluation Results of 2022 PISA: Executive Summary. <https://pisathailand.ipst.ac.th/pisa2022-summary-result/>

¹² Office of Educational Innovation Area, Ministry of Education. Pilot Schools under the Education Sandbox initiative.

From Early-Life Vulnerabilities to Employment Insecurity

In today's rapidly evolving job market, early-life vulnerabilities and developmental obstacles significantly impact employment security during the working-age years. The combination of these early challenges with an outdated economic structure exacerbates job market constraints, particularly regarding skill mismatches.

Over 55% of the Thai workforce experience horizontal mismatches, where their skills and qualifications fail to align with job requirements. This issue is driven by an oversupply of graduates, insufficient quality of education, and intense interdisciplinary competition. Furthermore, approximately 36% of workers aged 20-59 face vertical mismatches, with 31% being overeducated for their positions (TDRI, 2024). This phenomenon underscores a more profound issue within the Thai economic structure, which falls short of generating sufficient demand for skilled labour. Consequently, the economy struggles to create adequate opportunities for highly skilled jobs. This mismatch between the workforce's qualifications and market needs is further intensified by heightened job competition among graduates. Those with higher education levels often find themselves vying for positions that do not utilize their full potential, thus significantly contributing to employment insecurity during the critical working-age period (TDRI, 2024).

Figure 1.3A Share of labour by education level

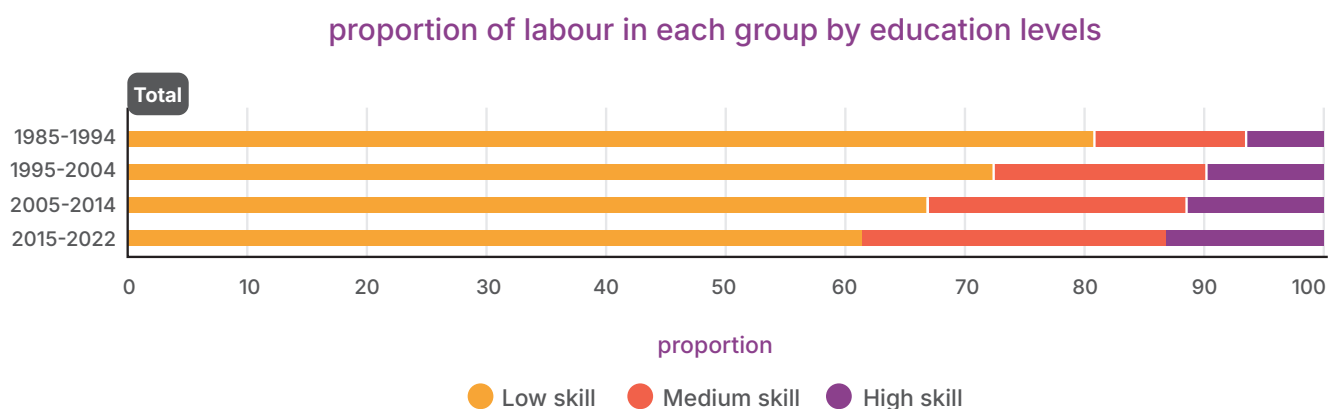
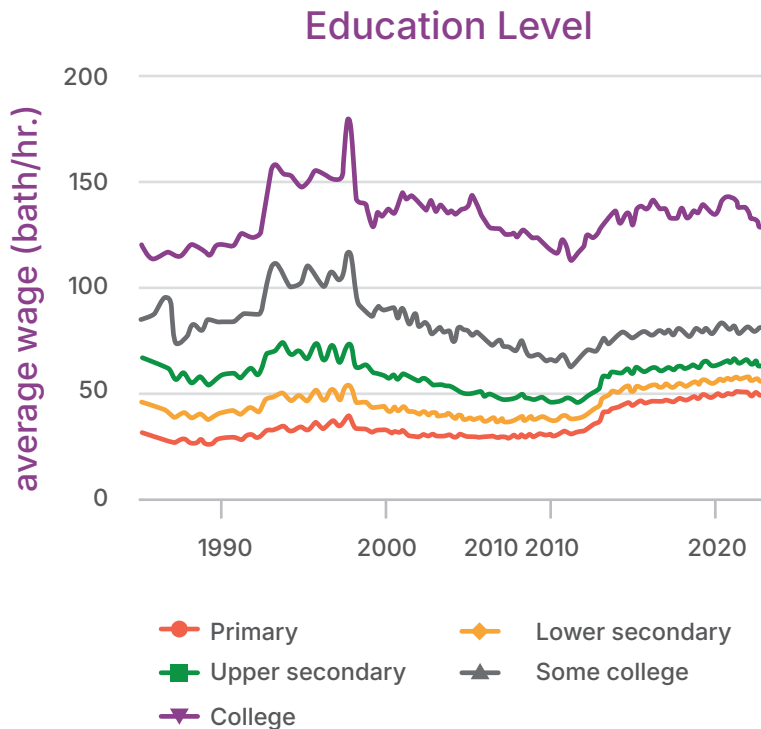


Figure 1.3B Average wages by education level



Source: Lathapipat et al. (2023).

identical skill sets between two occupations, reveals a substantial skill distance of about 0.8 between low-skilled occupations and managerial or professional roles. This considerable gap indicates that low-skilled workers' abilities do not align with those needed for higher-level positions. Even within the formal sector, only a small percentage of employees (2%) continuously engage in self-development to update their skills and develop new professional competencies (Lan & Stepanyan, 2020). This lack of participation is generally attributed to low motivation, insufficient employer support, and unattractive training programmes.

Despite the widespread availability of lifelong learning courses from government initiatives such as Thailand Cyber University, Department of Skill Development, and Thailand Professional Qualification Institute, as well as private sector offerings, there is still a need for high-quality courses and effective matching mechanisms. These improvements are essential to attract more participants, equip them with the necessary skills to enhance their prospects and earnings, and ultimately increase their motivation for attendance.

Employment security is closely linked to earning levels. In Thailand, the labour market predominantly comprises low- and middle-skill workers, with only about 13% employed in high-skilled professions, as depicted in Figure 1.3A. Consequently, many workers receive low earnings (Figure 1.3B), making them more vulnerable to economic fluctuations and lacking savings or financial safety nets.

Low earnings typically signify positions with limited career advancement opportunities, leaving workers more susceptible to insecure employment conditions and lower wages. According to the 2020 IMF report, labour mobility across different skill-level occupations in Thailand is challenging. The skill dissimilarity metric, where 0 indicates



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Under-utilized Workforce Segments

As Thailand grapples with a shrinking working-age population due to declining fertility rates and an aging society, it has become evident that significant segments of its labour force remain untapped. One notable trend is the early departure of women from the workforce, often around the age of 45. This phenomenon is especially common among women with lower skill levels or educational backgrounds below the secondary level. Many women leave the workforce to fulfil caregiving duties for children, sick relatives, or older parents (World Bank, 2022). Recent statistics reveal that over a million young

Thais aged 15-24 fall into the NEET category—Not in Education, Employment, or Training (UNICEF Thailand, College of Population Studies & Social Research Institute, 2023). This group includes school dropouts, recent graduates struggling to find employment, and those who have temporarily withdrawn from the labour market for various reasons. Key contributors to the rise in NEETs include lack of family support, poverty, uninspiring educational environments, and limited career progression.



Another particularly underutilized group is that of individuals with disabilities. Data from 2021 reveal that out of 1,625,191 persons with disabilities, 81.5% have received education up to the primary level, with just 11.6% attaining secondary education. This educational disparity significantly impacts their employment opportunities. In the next 10 years, Thailand is set to enter the super-aged society stage, meaning over 28% of the population will be 60 years or older (NESDC, 2019). Older persons represent another group whose capacities are often overlooked. With advancements in public health and health technologies, older individuals live longer, and many remain physically and mentally healthy in their senior years. However, these capable workers

do not continue engaging in economic activities due to the official retirement age. In addition to this, barriers such as age discrimination, lack of flexible working arrangements, and insufficient retraining opportunities prevent these healthy older persons from continuing to contribute to the workforce. An unpublished report by UNFPA in 2023 has estimated that Thailand has 6,353,810 older workers aged between 50 and 79 years, with 61% being economically active. This indicates that approximately 40% of this potential workforce is still under-utilized (UNFPA Thailand, 2023b). More insight and information on the situation of Thai education and labour force can be gathered from Chapter 5 of this report.

Disruptions Faced during the Five-Year Journey

Enduring Impact of the COVID-19 Pandemic

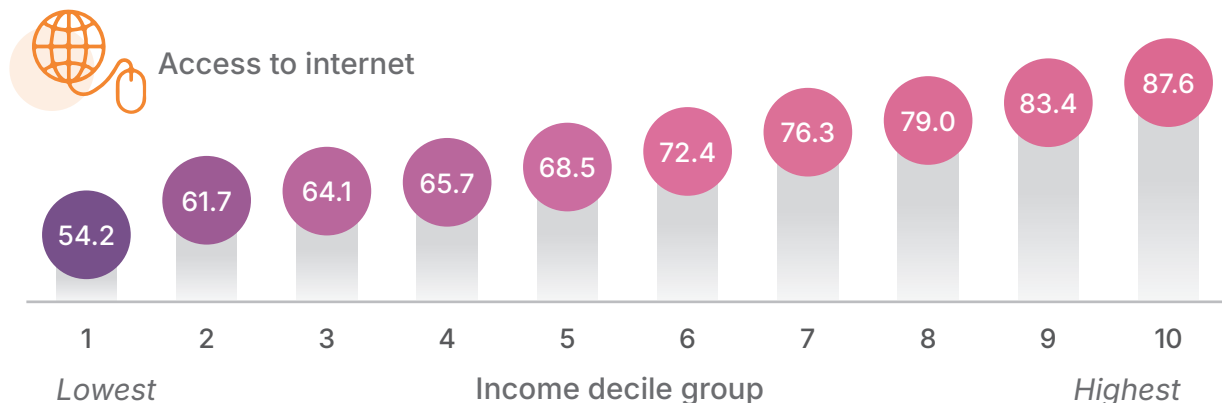
The COVID-19 pandemic has cast a long shadow over Thailand, impacting not just public health but also education, social well-being, and economic stability. The economic downturn, marked by job losses and reduced incomes, has adversely impacted living standards and mental well-being across households. In 2020 alone, approximately 400,000 more people have fallen below the poverty line, with those most affected being individuals living with disabilities and chronic illnesses (UNICEF Thailand, 2022). Family violence has surged from 34.6% in 2020 to 42.2% in 2023 (Thai Public Broadcasting Service, 2021). The strain on social services is also evident, as mothers and newborns have experienced reduced access to health services, leading to decreased breastfeeding rates. Furthermore, disruptions to reproductive health services have increased unintended pregnancies (Srangsook News, 2021).

The long-term implications of COVID-19 on human resource development are profound, with the “generation of learning loss” being a grave concern. Research by Kilenthong and colleagues (2023), in collaboration with Thailand’s Equity Education Fund (EEF), has reported that school closures during the pandemic have caused enormous learning losses in cognitive skills among Thai kindergartners. Specifically, mathematics and working memory skills have regressed by amounts equivalent to 35 and 49 school days, respectively. This setback has adversely affected language and communication development and relational skills.

Figure 1.4 Technological readiness for distance learning

TECHNOLOGICAL READINESS FOR DISTANCE LEARNING

% as of November 2021 [2]



Source: UNICEF Thailand (2022).

The Tech Revolution

Thailand is undergoing a dramatic transformation fuelled by the rapid advancement of technology. This surge—aligned with the principles of Industry 4.0, often called the Fourth Industrial Revolution—is reshaping the nation’s economy, society, and people’s daily life. Integrating technologies and digitalization into Thailand’s national strategy has garnered significant attention and optimism, promising economic growth and innovation and guiding the country out of the middle-income trap.

In recent years, there have been remarkable advancements in artificial intelligence (AI), especially since 2019. Deep learning algorithms now enable machines to perform at human-level efficiency in specific tasks. For instance, DeepMind’s AlphaFold 2, developed in 2021, predicts protein structures with unprecedented accuracy—a breakthrough that could revolutionize drug discovery (Jumper et al. 2021). Similarly, AI-powered chatbots—for example, Google’s LaMDA—have become adept at conversational interactions, blurring the line between human and machine communication (Thoppilan et. al., 2022). One particularly exciting area of AI is generative AI, which allows machines to create

new content, including realistic images, music, and even text. Tools like OpenAI’s DALL-E 2 can generate images from textual descriptions with stunning detail and coherence (OpenAI, 2022).

Despite their numerous benefits, these technological advancements are not without significant challenges. One of the most pressing issues is the displacement of jobs, particularly in sectors that rely heavily on physical labour due to automation. Furthermore, the ethical implications of AI are critical, as biases in training data can lead to discriminatory algorithms. Digital technologies like social media can foster echo chambers and misinformation campaigns, impacting social cohesion (Allcott and Gentzkow, 2017). Cybersecurity threats remain a constant concern as our dependence on digital infrastructure increases. Responsible development of AI and other technologies requires robust ethical frameworks that mitigate bias and ensure transparency (Jobin et al. 2019). Ultimately, responsible innovation and ethical considerations must guide technological progress to ensure that it serves humanity for the better.

Escalating Environmental Risks: Climate Change and PM2.5 Pollution

Since 2019, global warming trends have continued unabated. The Thailand Meteorological Department (TMD) has reported a rising average annual temperature by 0.5°C between 2019 and 2023. These environmental and weather changes present a myriad of challenges, among them being natural disasters. Thailand is expected to be one of the nations most severely affected by global warming, with significant repercussions for agriculture and food production (Eckstein, Künzel, & Schäfer, 2021). Higher production costs and food prices threaten access to food, while erratic weather patterns jeopardize future food security. The health and well-being of Thai society are increasingly at risk, as climate change exacerbates new infectious diseases, raises mortality and morbidity rates, fuels mental health issues, and causes displacement.

Apart from the issue of climate change, Thailand faces another grave environmental threat: PM2.5 pollution. This fine particulate matter is notorious for its ability to penetrate deep into the lungs and poses severe health risks. The record compiled by Thailand's Pollution Control Department (PCD) has shown that PM2.5 levels have consistently exceeded safe limits since 2019. That year alone has seen an estimated 32,200 premature deaths attributed to this pollutant (Health Effects Institute 2020). The repercussions extend beyond health. The economic impact is profound, with losses from decreased tourism, reduced productivity, and soaring medical expenses. The Kasikorn Research Centre has estimated the PM2.5-related medical costs range between 1.6 and 3.1million Baht, depending on the duration of the pollution period. The economic damage could reach up to 6.6 billion Baht (ThaiPBS World, 2019).

Thailand's efforts to combat climate change and PM2.5 pollution require a multifaceted approach. This includes stronger regulations, increased investment in clean technologies, and comprehensive climate adaptation plans. Equally important are public awareness campaigns to foster behaviour changes that support a cleaner environment.



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Government Responses to Population Development Challenges

Since 2019, the Thai government has launched a series of strategic initiatives to tackle the country's diverse and urgent challenges in population development. This period represents a pivotal era for policy advancement, particularly in tackling demographic, health, and social issues in a comprehensive manner. Central to these efforts are three strategic approaches: the life cycle approach, the multisectoral approach, and the community-driven approach, the first two of which have been committed at ICPD25.¹³ These strategies are aligned with the principles of ICPD, supporting

Thailand in meeting both global ICPD and Nairobi commitments, as well as the broader sustainable development goals.

This section highlights two recent policy developments: the Long-Term Population Development Plan (2022-2037) and the “5×5 Let’s Turn the Tide” Policy. These policies are presented to illustrate how they collectively embrace the three strategic approaches. Chapters 3 to 5 discuss other key initiatives aligning with these approaches while emphasizing specific ICPD priority themes.

¹³The Royal Thai Government’s Commitment on ICPD25 delivered at the Nairobi Summit on ICPD25 by Dr. Samrueng Yangkratok, Vice Minister of Public Health, Ministry of Public Health, Thailand. Retrieved July 18, 2024. <https://thailand.unfpa.org/en/ICPD-commitments-official-speech>.

Embracing the Life cycle Approach

The life cycle approach underscores that an individual's capabilities and well-being result from a cumulative and interconnected process. Each stage of life is critical to the next, requiring the development of social and human skills for a fulfilling life that extends into older age (UNFPA Arab States Office, 2021).

The Long-term Population Development Strategy (2022-2037), developed by the National Economic and Social Development Council (NESDC), marks the first explicit mention of the life cycle approach to address demographic challenges. Its core principle,

“Born Well, Live Well, Age Well,” reflects this philosophy. This strategy represents Thailand's first inclusive, forward-thinking population plan to foster stability and growth across all life stages. It emphasizes quality childbirth as a solid foundation, followed by the accumulation of education, training, and skills from early childhood onward, leading to a healthy and thriving population. The strategy encompasses the design of an environmental system for learning and living, aiming for all Thai individuals to live to their full potential, enjoy good health, and pursue income-generating professions, thereby achieving lifelong stability.

Long-term Population Development Plan (2022-2037)

Vision “Thailand has a population that is born and grows up with quality, enjoying a good quality of life, and possessing the potential to contribute to the country's development.”

Indicator Human Achievement Index (HAI) increase to 0.7756 in 2037

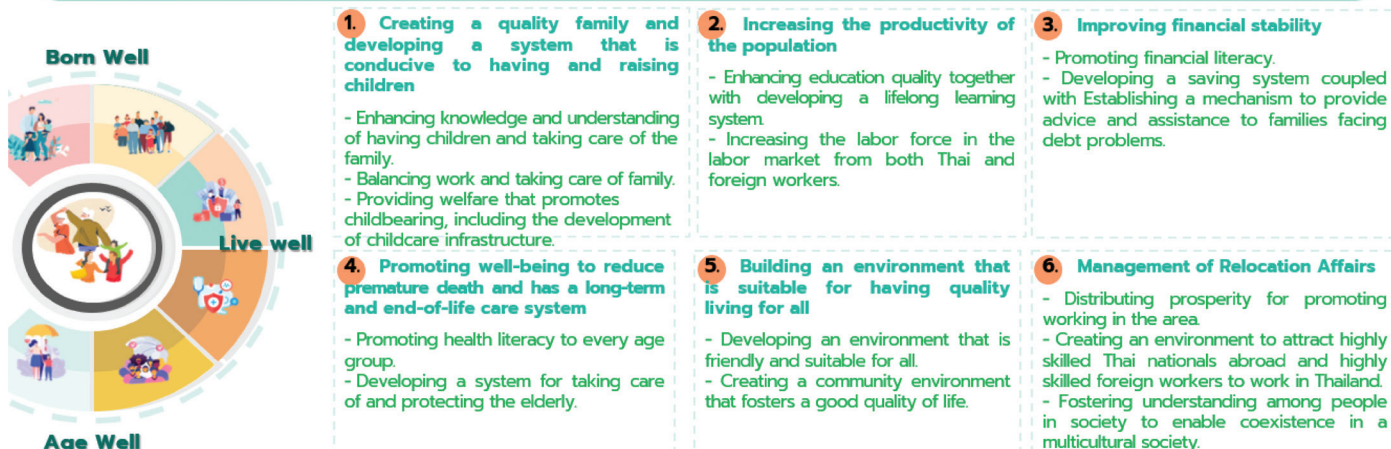
Goals Thai population is developed according to its highest potential and quality in line with the country's development context. Based on having skills for the 21st century world



Thai population has income security and sufficient assets throughout their lives.



Thailand has a social protection system that creates stability in life while having long-term fiscal sustainability



Another noteworthy policy is the “5×5 Let’s Turn the Tide” initiative, led by the Ministry of Social Development and Human Security. Known simply as “5×5,” the policy refers to five key strategies, each comprising five measures for action. This innovative policy addresses the needs and challenges of all age groups, from childbirth to old age. The “5×5” policy is rooted in the family as the smallest social unit and foundation for life. It aims to empower working-age individuals with the necessary skills and financial preparedness for retirement.

Additionally, it seeks to provide opportunities and resources for older adults to remain active and economically productive, thereby enhancing their quality of life.



Strengthening Multisectoral Coordination and Partnership

Tackling demographic challenges demands more than just isolated efforts; it calls for a robust coordination across various sectors. The multi-sectoral approach and strong partnerships among the government, civil society and private sectors are vital for achieving the ICPD goals by 2030. These strategies are embedded in both the Long-term Population Development Plan and the 5×5 policy, which are notable for their collaborative and integrated approach addressing multiple development aspects simultaneously.

The Long-term Population Development Strategy envisions comprehensive support systems for educational and living environments across all ages. It also encompasses the management of international migrants to attract high-quality labour, thus contributing to the national development and an inclusive society. Given the complexity of administrative and institutional structures, a mechanism for driving inter-sectoral coordination becomes essential. The Population Development Plan highlights this necessity, outlining four distinct mechanisms at both state and local levels to guide implementation, including rigorous monitoring and evaluation processes. This ensures that actions are coordinated and effective.

A notable mechanism at the implementation level is the adoption of a “social movement” approach. This mechanism actively engages network partners, particularly those embedded in local communities. These partners are not mere participants; they are deeply involved in a dynamic cycle of learning and action to foster concrete and sustainable outcomes.

Recognizing that government resources alone may not be adequate to tackle the swiftly changing challenges, the Population Development Plan encourages active involvement of private entities in sharing resources to enhance budget efficiency. This collaborative approach not only prevents duplication of efforts and optimizes resource utilization, but also fosters a sense of shared responsibility and commitment to the plan’s goals.

Similarly, the 5×5 policy integrates these interconnected strategies to create more inclusive actions. The policy’s action plans provide a clear framework for multisectoral collaboration. The action plans of the 5×5 policy designate both core and supportive responsible agencies, ensuring that different sectors work together towards common goals. Core agencies are tasked with leading specific initiatives, setting strategic directions, and making key decisions. Supportive agencies, on the other hand, provide the necessary resources, expertise, and assistance to successful implementation of these initiatives. This structured approach promotes synergy among stakeholders, leveraging their strengths and resources to achieve the policy’s objectives.



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Community Involvement: The Beauty from the Ground up

The principles of the International Conference on Population and Development (ICPD) advocate for empowering local communities as a cornerstone for sustainable development. This strategy has demonstrated significant success in Thailand. Since 2011, administrative reforms in Thailand have focused on decentralizing functions to the sub-district level, thereby enhancing local decision-making, improving public services, and increasing community participation. Under this approach, community members act as integrators, linking policies and mobilizing resources from various sectors to address local issues. To achieve this, they must be empowered to learn, plan, and manage local issues independently and effectively bridge the gaps left by centralized problem-solving approaches or those segmented based on ministerial responsibilities. Support from external networks—including guidance, academic expertise, tools, and data management—is crucial. The success stories, particularly in health initiatives during the COVID-19 pandemic, underscore the effectiveness of this

community-led approach. The most recent Family Smile project illustrates the tangible benefits of community involvement

Both the Population Development Plan and the 5×5 Policy acknowledge the power of community involvement as a key driver of success. The Population Development Plan emphasizes the critical role of empowering and engaging local communities. This plan highlights that by equipping communities with the necessary skills and resources, they can better address the challenges and issues affecting their populations. Moreover, the 5×5 Policy positions communities as pivotal change agents. By placing communities at the forefront, the 5×5 Policy acknowledges their central role in policy implementation and empowers them to take ownership of the change process. This approach fosters a sense of responsibility and collaboration, ensuring that the policy objectives are met through collective action and local leadership.

Community-led approach to solving family and child development

● The Family Smile project by the Thai Health Promotion Foundation (ThaiHealth) employs a community-led approach to bolster processes concerning vulnerable children and youth based on community-driven concepts. This includes that each child is collectively cared for by the entire village, fostering community bonds, raising awareness, and promoting mutual aid within the community. This is facilitated through data collection, mechanism development, community participation, tool utilization, home visits, and database management. The cooperation model involves community/sub-district task forces collaborating with provincial mechanisms to support and develop prototype sub-districts for future expansion. The work begins with collecting data on children and youth, which forms a crucial axis in networking efforts, particularly at the grassroots level. This fosters participation starting from children's and youth's vulnerabilities based on experiences or standards derived from collaborative discussions among workers. This encompasses support, assistance, and referral of children and youth into protective and assistance systems.



Pictured: Family Smile Project. Thai Health Promotion Foundation



Pictured: Community assistance by Family Smile Project during COVID-19. Thai Health Promotion Foundation

● However, there are significant limitations regarding resources and assistance for vulnerable children and youth facing severe problems beyond the capacity of the community, such as the need for specialized care processes or resources to support children with persistent issues. Establishing collaborative work relationships with governmental mechanisms and linking resources from various sectors, including the private and other civil society sectors, is essential. Moreover, active involvement in driving a regional policy process is necessary to consolidate diverse resources and work efforts, promoting community-level work and ultimately leading to systemic changes in local operational policy mechanisms (Thai Health Promotion Foundation, 2024).

Future Directions of Thai Population Development Based on Lessons Learned

From exemplary lessons to systemic policy restructuring

The successful outputs and impact of operations at the local level highlight the importance of conducting a comprehensive analysis of the lessons learned. This analysis should drive systemic structural changes, particularly in local governance, to support the strengthening of teams operating in the community and to create opportunities for other stakeholders, such as the private sector and social enterprises, to participate or lead initiatives with the government overseeing and ensuring fairness and stability in operations.

Transitioning from developmental guidelines to targeted measures

Although strategic plans have been developed to support population development across various dimensions, it is evident that these plans predominantly outline broad directions, covering overarching issues but lacking specific measures and initiatives to address critical problems faced by target groups or areas with more significant challenges than others. Moreover, there is a lack of measures that involve non-state actors in the implementation process and insufficient emphasis on fostering self-reliance within families or communities as the primary basis for problem-solving. Additionally, there is a need to prioritize in-depth research to address longstanding issues and prepare resources to cope with escalating challenges, particularly in the context of socio-demographic changes, technological advancements, climate change, etc.

Shifting the welfare provision paradigm towards capacity development rather than financial assistance

According to the NESDC, the social expenditures focusing on human development remain relatively low. Specifically, three-fourths of social budget expenditures are allocated towards retirement, death, and health-related issues, while expenditures on education, childcare, and family support account for only 8.0% and 6.5%, respectively. Moreover, the predominant form of assistance largely consists of monetary aid, which may not effectively enhance the long-term sustainability of welfare for the target groups. Additionally, limitations exist regarding difficulty in verifying redundancies due to multiple agencies overseeing welfare and a lack of data integration. Therefore, it is imperative to establish a comprehensive database linking welfare benefits with recipients and emphasize assistance measures geared towards self-reliance rather than solely providing monetary aid.

Robust and concrete preparation for changes

In addition to adjusting the aforementioned government processes, it is increasingly imperative for the government to translate the context of change into concrete actions for adaptation, mitigation, and resilience, especially in three contexts, namely: the coming of the super-aged society, AI, and climate change amplification.



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Thailand's entry into the super-aged society stage may worsen the labour shortage and fiscal stability of the country. If the economic structure remains unchanged, the income deficit is projected to increase from 2.79 trillion baht in 2021 to 3.45 trillion baht by 2030. Therefore, developing and redesigning the revenue sources, such as implementing cost-sharing policies, improving tax collection efficiency, and optimizing social expenditure is imperative. Additionally, contingency plans should address future income and expenditure imbalances (NESDC, 2023).

Regarding technology, while Thailand has developed the National Artificial Intelligence (AI) Development Strategy (2022 - 2027), there appears to be limited systemic changes compared to several other countries that have earnestly implemented plans and declared substantial investments in this area.

For instance, Singapore has been implementing the Singapore National AI Strategy (NAIS) since 2019, which aims to leverage AI for economic transformation. The recent iteration, NAIS 2.0, is supported by a government budget exceeding \$1 billion over the subsequent five years, directed towards AI computing infrastructure, talent development, and industry growth.

Similarly, there is a need to proactively address climate change by devising supportive strategies to mitigate its high-level impacts on Thailand's agricultural and industrial sectors, which are not yet clearly implemented. As a final thought, realizing the trends is an important first step to setting the future directions of population development that should be followed by a systematic change of how the policy will be orchestrated with concrete action plans.



**THAILAND'S POPULATION CHANGES
AND PROSPECTS IN THE ERA
OF VERY LOW FERTILITY AND POPULATION AGEING**

2

CHAPTER

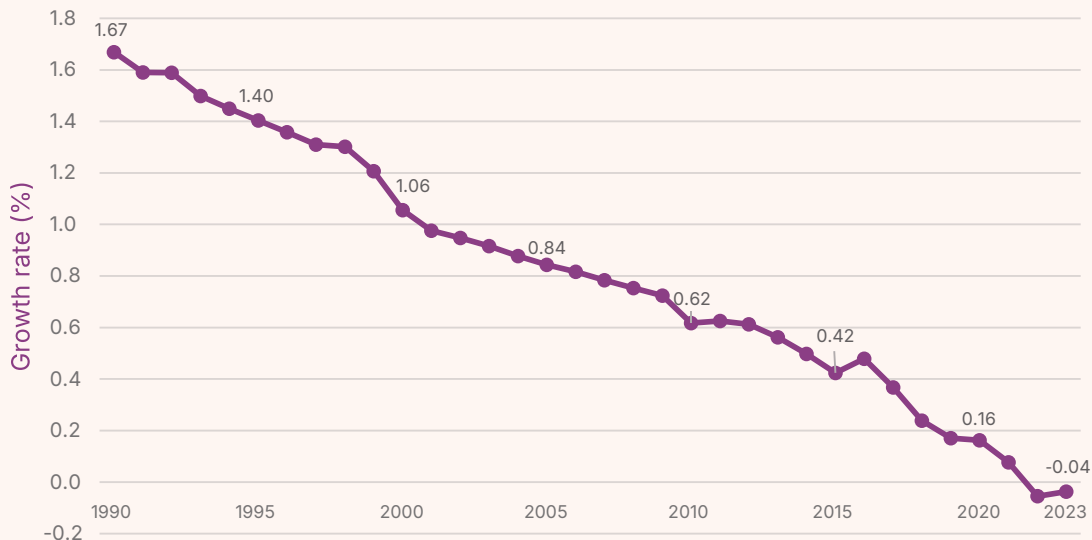


Population Overview

Demographic shifts and population dynamics in Thailand (1990-2023)

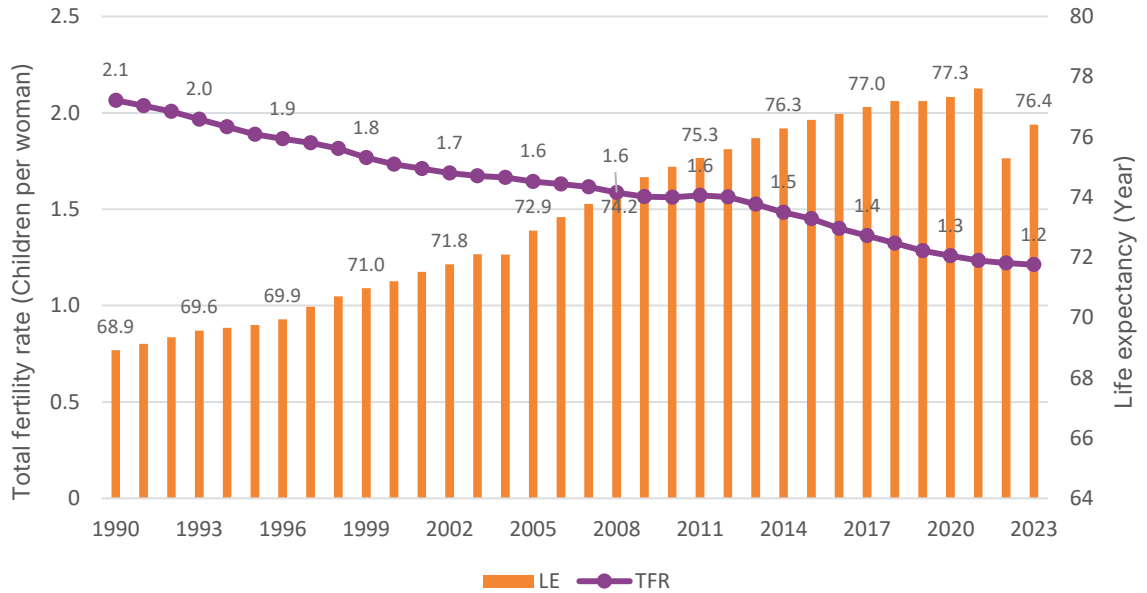
Thailand's demographic landscape has undergone profound changes over the past three decades. According to the UNDESA Population Division (2024), the population growth rate of Thailand stood at 1.67% per year in 1990. By 2001, this figure had fallen below 1%, significantly decelerating to 0.98%. This trend continued, and by 2020, the growth rate had plummeted to 0.16%. The COVID-19 pandemic further exacerbated this decline, with the growth rate dropping to 0.08% in 2021 and turning negative in 2022 and 2023, at -0.06% and -0.04% respectively (Figure 2. 1).

Figure 2.1 Growth rate of population from the registration, Thailand, 1990-2023



Source: UNDESA, Population Division (2024).

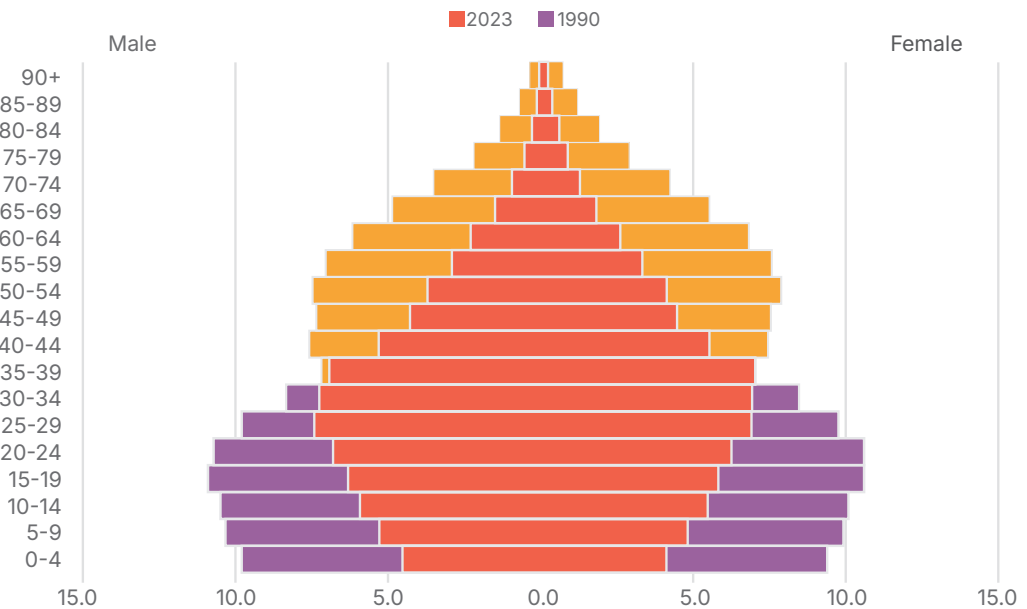
Figure 2.2 Trends in total fertility rate (TFR) and life expectancy (LE) in Thailand, 1990-2023



Source: UNDESA, Population Division (2024).

The transition from high fertility rates to low ones, combined with higher life expectancy, results in an aging population (Figure 2.2). This demographic shift presents challenges such as a shrinking labour force and increased pressure on social security systems and healthcare services due to a higher proportion of older individuals, defined in the Thai Constitution as those aged 60 years and above.

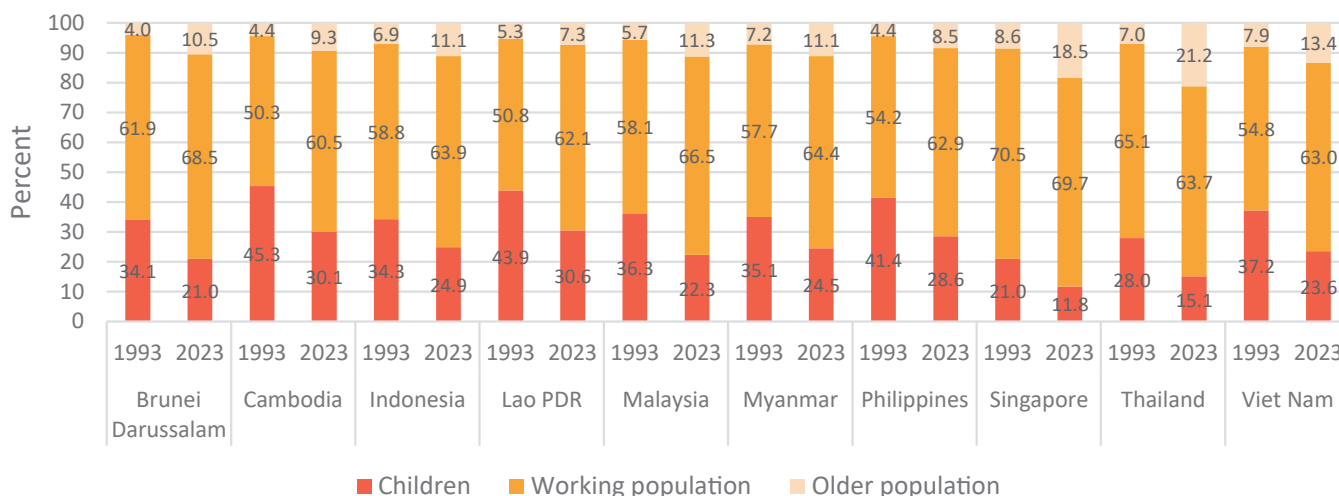
Figure 2.3 Trends in total fertility rate (TFR) and life expectancy (LE) in Thailand, 1990-2023



Source: UNDESA, Population Division (2024).

Between 1990 and 2023, the proportion of the young and adult population aged 15–39—a critical segment of the workforce—declined substantially. In 1990, this group comprised approximately 6.94% to 10.93% of the population. By 2023, their proportion had decreased to between 4.09% and 7.47%, reflecting a rate of decline ranging from 3.89% to 41.76%. In contrast, the proportion of older individuals in each age category has surged dramatically, with increases around 3 to 7-fold (Figure 2.3).

Figure 2.4 Proportion of children, working, and older population, 10 ASEAN countries, 1993 and 2023



Source: UNDESA, Population Division (2024).

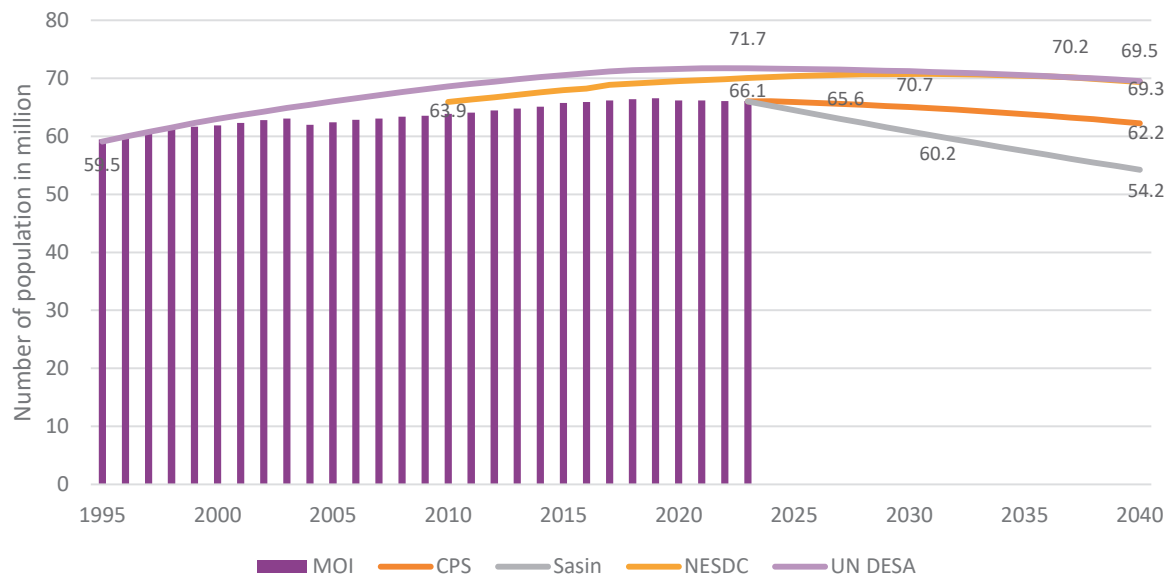
Figure 2.4 illustrates that over the past 30 years, Thailand has experienced the highest rate of increase in the older population among ASEAN countries, with an annual increase rate of 3.7 percent, rising from 7.0% in 1993 to 21.2% in 2023. Following Thailand, Brunei Darussalam has an annual increase rate of 3.2 percent (increasing from 4.0% in 1993 to 10.5% in 2023). Singapore has an annual increase rate of 2.6 percent. Other ASEAN countries have experienced annual increases ranging from 1.1 to 2.5 percent.

Concurrently, there has been a notable decline in the children population across all ASEAN countries, with annual decrease rates ranging from 1.1% to 2.1%. Thailand, in particular, has experienced a significant annual decrease rate of 2.1% in its children population.



Population in the Future

Figure 2.5 Trend of population, Thailand 1995-2040



Source: 1) 1993-2023: Ministry of Interior (MOI) Population Statistics
 2) 2023-2040: Sasin School of Management: Sasin
 3) 2023-2040: College of Population Studies: CPS
 4) 2010-2040: NESDC from the report of the population projections for Thailand 2010-2040 (Revision) of National Economic and Social Development Council: NESDC.
 5) 1994-2040: UNDESA, Population Division (2024), Medium Variant.

Thailand’s demographic future is currently a subject of considerable analysis and debate. Figure 2.5, derived from different sources of national projections—including those from the National Economic and Social Development Council (NESDC), the UN Department of Economic and Social Affairs (UN DESA), Chulalongkorn University’s College of Population Studies (CPS), and Sasin School of Management—reveals varied forecasts.

According to projections from CPS and Sasin, the population is expected to decline based on 2023 data from the Ministry of Interior. CPS forecasts a decrease to 62.2 million, while Sasin predicts a

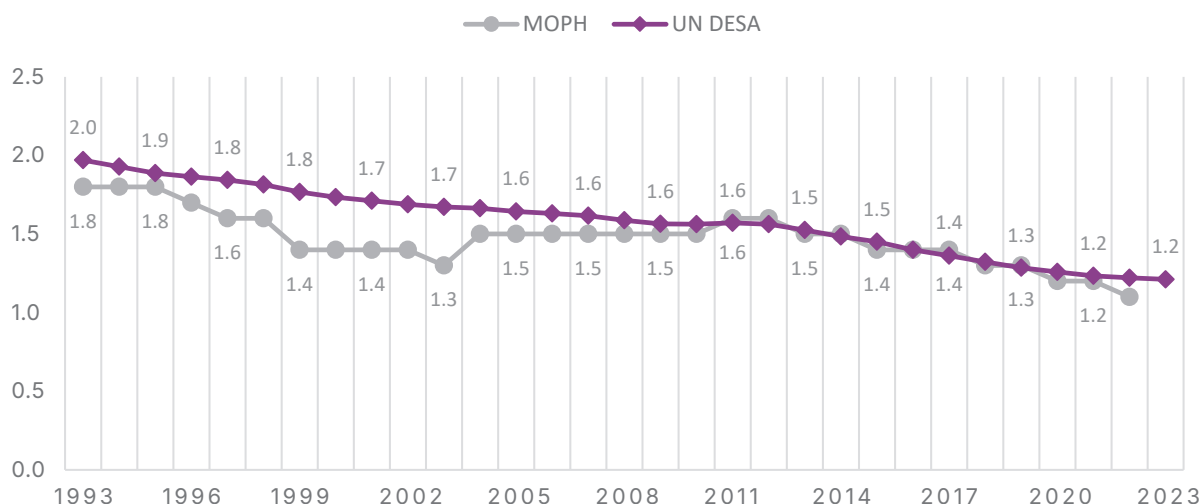
sharper fall to 54.2 million by 2040. In contrast, the NESDC projection, based on the 2010 Census and revised in 2019, anticipates an initial population increase from 63.9 million in 2010 to 70.7 million by 2030, followed by a gradual decrease to 69.3 million by 2040. The UN DESA, based on the medium variant and updated assumptions in 2022, anticipates the population increasing from 59.8 million in 1995 to 71.7 million in 2022. Afterward, there will be a gradual decline to 69.5 million by 2040. Despite differing assumptions and methodologies, all projections converge on a consensus: **Thailand’s population is expected to decrease in the upcoming decades.**

Trends in demographic components and their determinants

Fertility

Thailand has undergone a remarkable demographic transition characterized by a substantial decline in fertility rates. Starting with a high fertility rate of around 6.25 children per woman in 1965, the country reached replacement-level fertility around 1986.

Figure 2.6 Total fertility rates from different sources, Thailand, 1993-2023

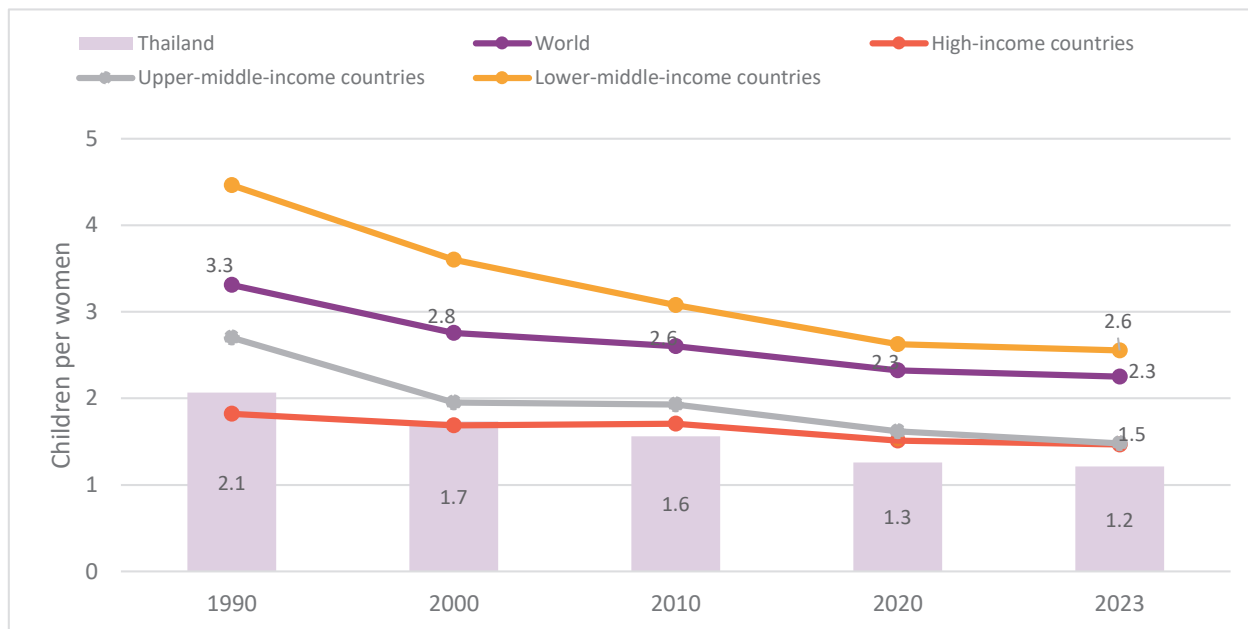


Source: 1) 1965-1986, 1991-2022: MOPH Thailand Reproductive Health Database
 2) 1994-2040: UNDESA, Population Division (2024), Medium Variant.

Estimates of the total fertility rate (TFR) in Thailand from 1993 to 2023 are based on two different sources: the Ministry of Public Health (MoH) and the United Nations Department of Economic and Social Affairs (UN DESA), as shown in Figure 2.6. The UN DESA estimates, published in 2024, are derived from comprehensive data, including registered births, national surveys, censuses, and

indirect estimation methods applied to historical and recent demographic data. These sources include the UN World Population studies, the 1975 World Fertility Survey (WFS), the 1987 Demographic and Health Survey (DHS), and multiple rounds of the Multiple Indicator Cluster Surveys (MICS), among others.

Figure 2.7 Total fertility rates from different country groups and Thailand, 1990-2023



Source: UNDESA, Population Division (2024).

Significant discrepancies were observed between the MoH and UN DESA estimates between 1996 and 2003; however, these differences have diminished in recent years, with MoH estimates generally falling below those from UN DESA. UN DESA said the TFR declined from around 2.1 in 1990 to 1.5 in 2013. Since then, Thailand has experienced ultra-low fertility, with TFR ranging from 1.2 to 1.4 children per woman (Figure 2.6). Thailand's TFR has consistently been lower than the global average and the averages for lower-middle-income countries throughout this period. By 2023, Thailand's TFR will be comparable to the rates observed in high-income and upper-middle-income countries, indicating a demographic transition towards ultra-low fertility rates similar to those of high-income countries (Figure 2.7).





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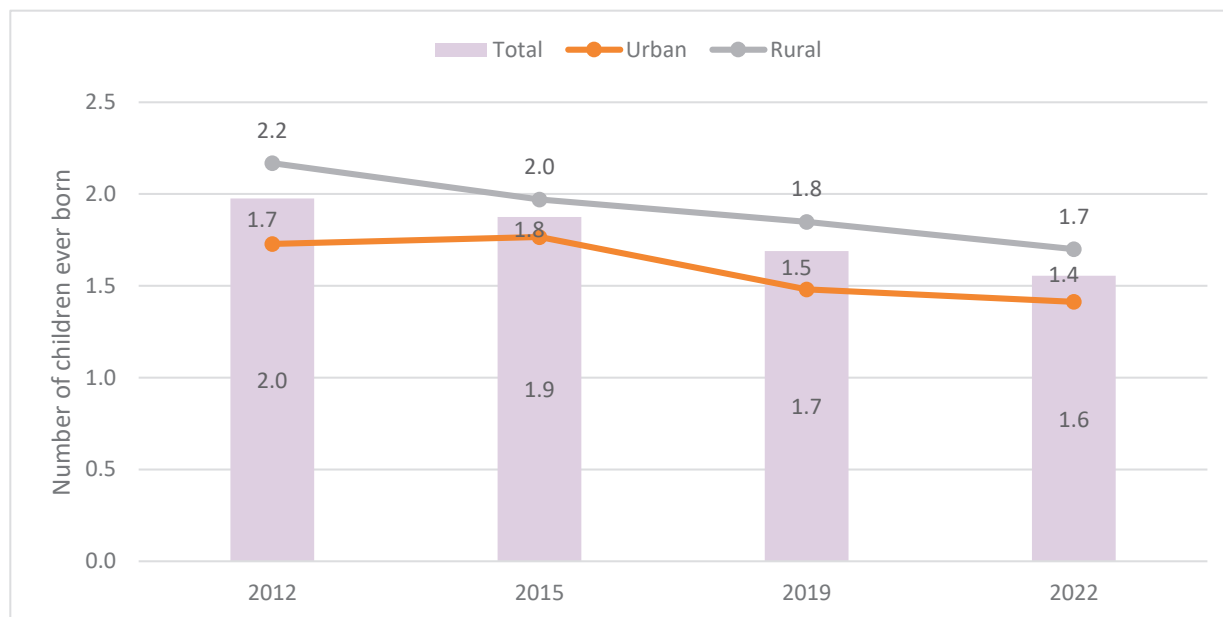
Table 2.1 Total fertility rates by residence area, and regions, Thailand, 2012 – 2022

	2012	2015	2019	2022
Total	1.8	1.5	1.4	1.0
<i>Residence area</i>				
Urban	1.5	1.3	1.1	0.9
Rural	2.1	1.7	1.9	1.2
<i>Region</i>				
Bangkok	1.2	1.1	0.8	0.6
Central	1.8	1.6	1.3	1.0
North	1.7	1.9	1.6	0.8
Northeast	2.2	1.4	1.9	1.2
South	2.0	1.8	1.7	1.6

The overall decline in TFR across Thailand from 1.8 in 2012 to 1.0 in 2022, particularly in urban areas and specific regions like Bangkok, underscores a shift towards smaller family sizes. The TFR in urban areas decreased from 1.5 in 2012 to 0.9 in 2022. Bangkok, the capital city, exhibited the lowest fertility rates among all regions, decreasing from 1.2 in 2012 to 0.6 in 2022 (Table 2.1).

Source: The reports of Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022

Figure 2.8 Number of children ever born among women by age 45-49, 2012-2022



Source: Authors' calculation from the Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022.

The shift towards ultra-low fertility has been accompanied by a decline in the number of children ever born to women by age 45-49. Figure 2.8 shows that in 2012, women typically had around 2 children over their lifetime. By 2022, this number had sharply fallen to 1.6 children. This downward trend signifies a broader demographic shift towards lower fertility in Thailand.

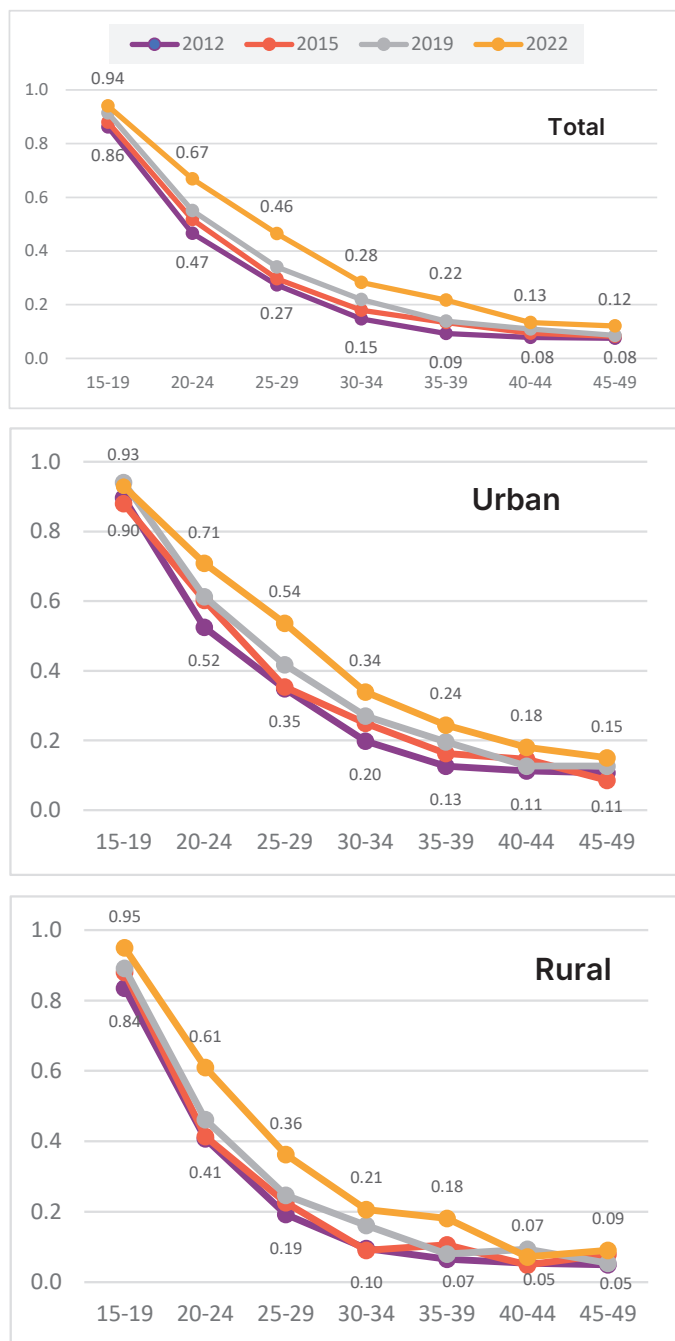
The disparity between urban and rural fertility rates is evident, with rural areas maintaining higher numbers of children born than urban areas. In urban areas, the number of children born started at 1.7 in 2012 and decreased slightly to 1.4 by 2022. Conversely, rural areas significantly decline, from 2.2 children in 2012 to 1.7 in 2022. The steeper decline in rural fertility suggests a convergence towards the lower fertility rates observed in urban areas, possibly

driven by improved access to education, healthcare, and family planning resources.

The determinants of below-replacement fertility are multifaceted, involving both proximate and underlying factors. Key proximate determinants include an increase in the proportion of single women and delayed marriage, which reduce the number of individuals in the reproductive stage and shorten the time they spend there. Additionally, contraceptive use is a deliberate action that significantly lowers birth rates by preventing or terminating pregnancies. Furthermore, infertility—arising from factors such as age, health conditions, and lifestyle choices—also contributes to low fertility. Delayed childbearing, in particular, increases the risk of infertility, exacerbating the decline in birth rates.

Increase in the proportion of single women

Figure 2.9 Proportion of single women by age group and residence area, 2012 – 2022



Source: Authors' calculation from the Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022

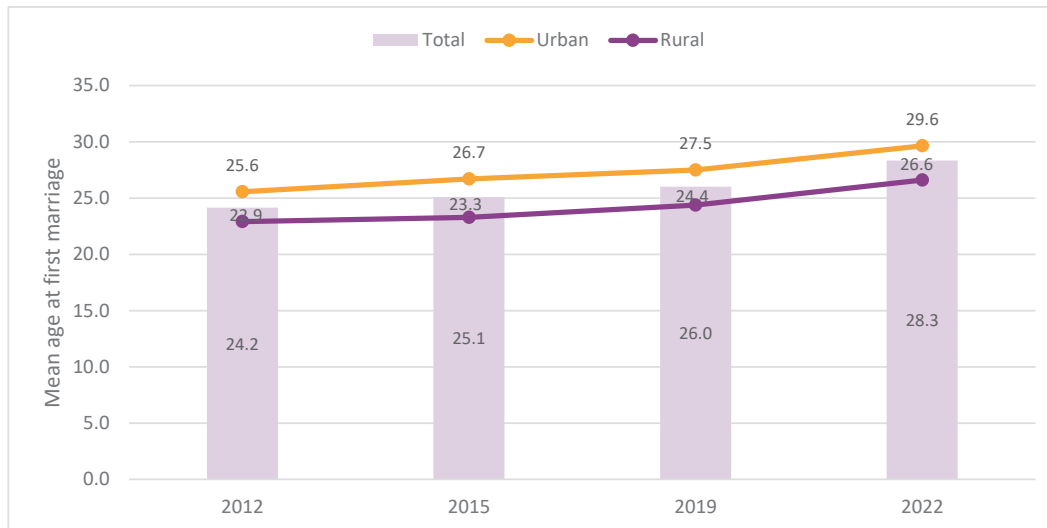
The data from Figure 2.9 highlights the gradual shift in marital patterns among Thai women over the decade. An increasing proportion of single women in younger age groups suggests a trend towards delayed marriage and union formation. In the total population, the proportion of single women declines with age across all surveyed years. Marital status, particularly long-term singlehood indicated by the percentage of unmarried women, is likely a significant factor in the very low fertility rates. There has been a noticeable increase in the number of single women of reproductive age across all age groups over the past decade.

Additionally, there is a growing trend of women choosing to remain single permanently. This is evident in the rising percentage of single women aged 35-39, which increased from 9 percent in 2012 to 22 percent in 2022. Similarly, for women aged 40-44, the proportion of single women rose from 8 percent in 2012 to 13 percent in 2022. Comparing urban and rural areas, the proportion of singles in rural areas is slightly lower. However, there has been an upward trend in permanent singlehood in both areas. The proportion of single women aged 40-44 in urban areas has increased from 11 percent in 2012 to 18 percent in 2022, while in rural areas, it has increased from 5 percent to 7 percent during the same period (Figure 9).

Delayed Marriage

Previous research has noted that since fertility in Thailand has reached a replacement level, it is crucial for the country to closely monitor age-at-first marriage trends. This is because the age at first marriage is one of the most significant factors determining fertility rates in Thailand (Knodel, Chayovan, & Frisen, 1988; Prachuabmoh & Mitranon, 2003; Jones, 2013).

Figure 2.10 Singulate mean age at first marriage (SMAM), 2012-2022



Source: Authors' calculation from the Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022.

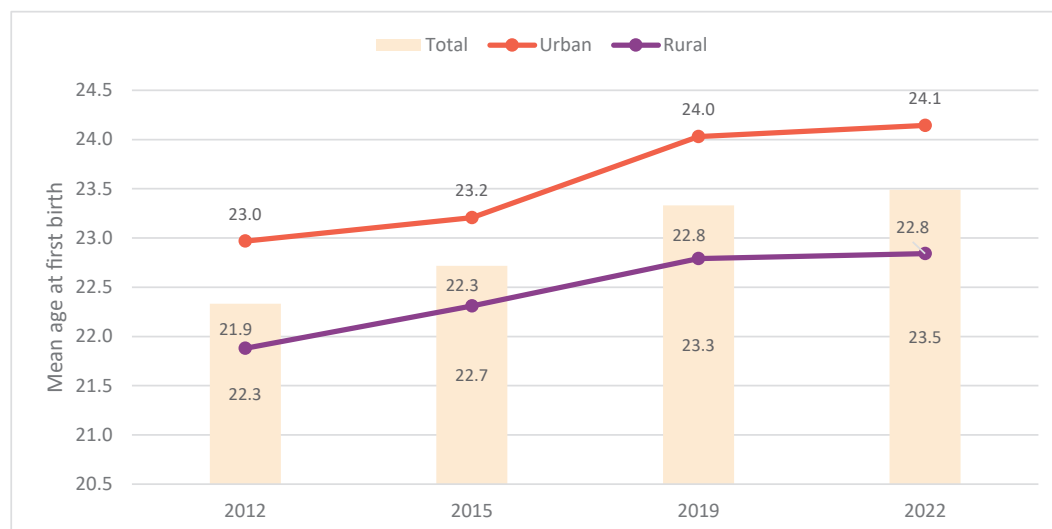
Figure 2.10 illustrates the singulate mean age at marriage (SMAM) in Thailand from 2012 to 2023, categorized by residence areas. The total SMAM in Thailand has steadily increased from approximately 25.5 years in 2012 to around 27 years in 2022. This trend indicates a shift towards later marriages over the past decade, reflecting broader socio-economic changes and evolving cultural norms regarding marriage (Jones & Gubhaju, 2009).

Urban areas consistently exhibit a higher SMAM compared to rural areas. In 2012, the urban SMAM was about 26 years, rising to

approximately 28.5 years by 2022. In contrast, rural areas saw the SMAM increase from around 25 years in 2012 to approximately 26.5 years by 2022. The difference between urban and rural SMAM highlights the impact of urbanization, education, and career opportunities on marriage patterns (Lesthaeghe, 2010).

Urban and rural areas show a gradual increase in the age at first marriage, although the increase is more pronounced in urban areas. This consistent upward trend across all regions suggests a nationwide shift towards delaying marriage.

Figure 2.11 Mean age at first birth among women married or in union in Thailand from 2012 to 2022



Source: Authors' calculation from the Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022.

The delayed mean age at first marriage contributes to delayed childbearing or an increased mean age at first birth. Figure 2.11 illustrates the mean age at first birth among women married or in union in Thailand from 2012 to 2022, categorized by total, urban, and rural populations. The total mean age at first birth in Thailand has steadily increased from approximately 22.3 years in 2012 to 23.5 years in 2022.

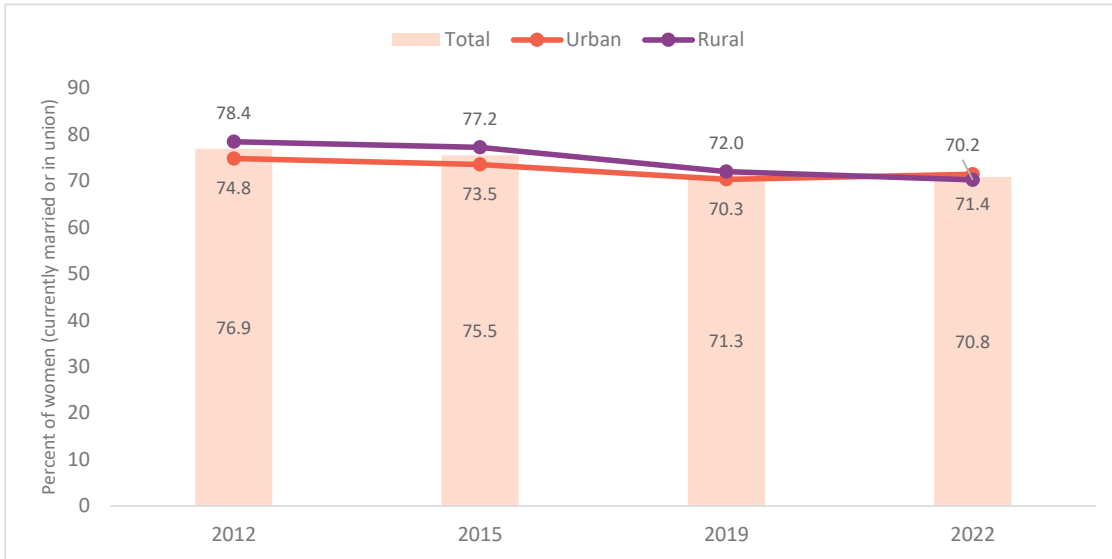
Urban areas consistently exhibit a higher mean age at first birth compared to rural areas. In 2012, the mean age at first birth in urban areas was 23.0 years, rising to 24.1 years by 2022. This significant increase indicates that women in

urban areas tend to delay childbirth more than those in rural areas, likely due to greater access to education and career opportunities (Blossfeld & Huinink, 1991; Jones & Gubhaju, 2009).

In rural areas, the mean age at first birth increased from 21.9 years in 2012 to 22.8 years in 2022. While the increase is less pronounced than urban areas, it still indicates a trend towards later childbearing. The convergence of the mean age at first birth between urban and rural areas suggests that rural populations are gradually adopting similar reproductive behaviours as urban populations (Bongaarts, 2009; Lesthaeghe, 2010).

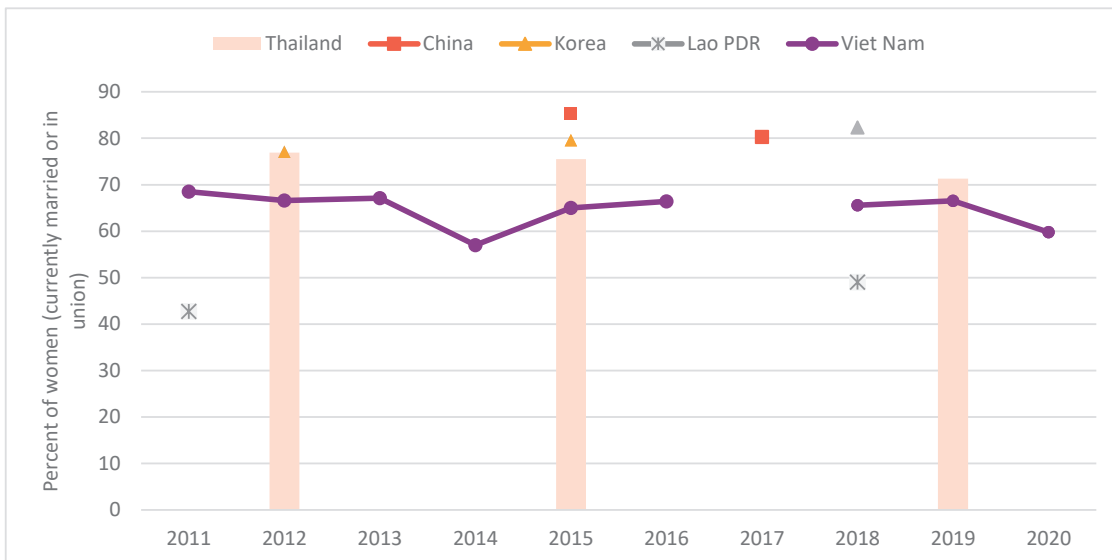
Contraceptive use

Figure 2.12 Percentage of modern contraceptive use among women who are currently married or in union, Thailand, 2012-2022



Source: The reports of Thailand Multiple Indicator Cluster Survey (MICS), 2012-13, 2015-16, 2019, and 2022.

Figure 2.13 Percentage of contraceptive use among women who are currently married or in union, China, Korea, Lao PDR, Viet Nam, and Thailand, 2011-2020



Source: UNDESA, Population Division, World Contraceptive Use 2022.

Contraceptive use directly influences the number of births by allowing couples to plan and space their children. Effective contraception reduces the likelihood of unintended pregnancies, significantly lowering fertility rates. Figure 2.12 illustrates that the contraceptive prevalence rate among women who are currently married or in a union ranges from 70.8% to 76.9%. These rates are comparable to those in China and Korea but are significantly higher than the prevalence rates in Lao PDR and Vietnam, as shown in Figure 2.13.

Although the contraceptive prevalence rate remains relatively high, the observed downward trend suggests potential issues related to accessibility, education on contraceptive methods, or shifts in demographic policies (Figure 2.12). This data underscores the necessity for targeted interventions to sustain and improve contraceptive use rates, especially in rural areas where the decline has been more pronounced.



Infertility

According to the UNFPA report on the population situation analysis of Thailand (2021), postponing childbearing, especially beyond the age of 35, can lead to increased health risks such as miscarriage, preeclampsia, and Down syndrome in babies. Infertility rates among Thai women of reproductive age have ranged from 2.5% in 1997 to 11.6% in 2016 with higher rates generally observed in urban areas. Geographic differences show varying infertility rates across regions. Additionally, there has been a rising trend of childlessness among individuals aged 50-59 from 2011 to 2017, indicating that future older generations may face increased childlessness, potentially leading to vulnerabilities among older adults without children.

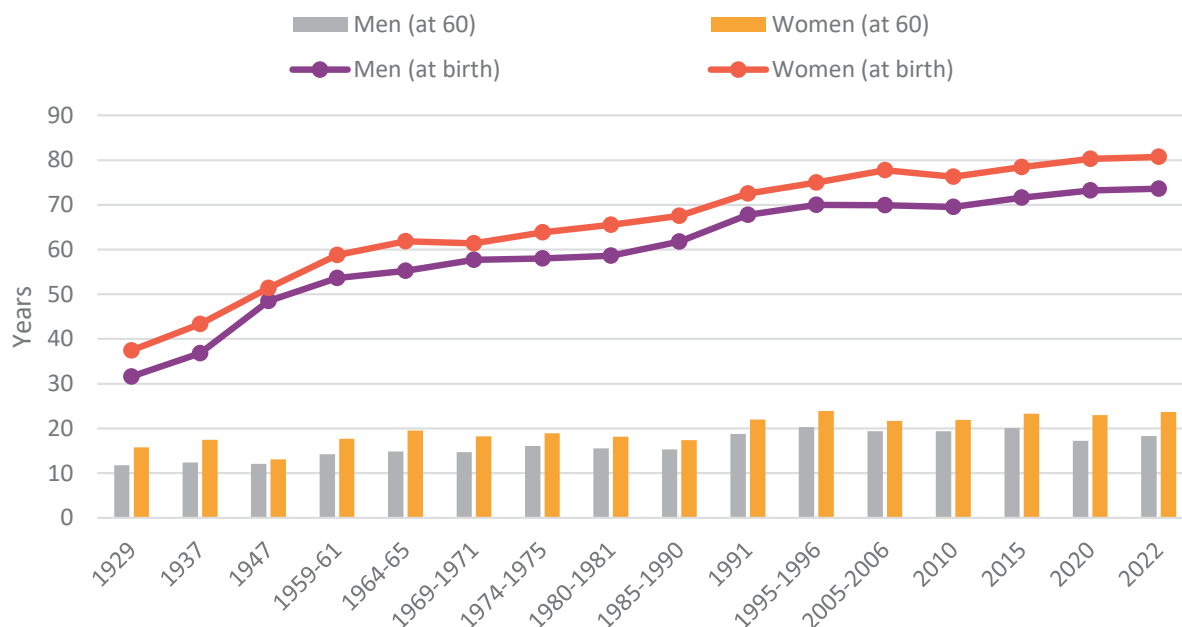
Underlying factors

Previous research has identified several factors that influence marital fertility. First, there are the costs of childbearing and rearing, including monetary and opportunity costs, especially for women. Second, gender role inequality refers to the persistent traditional norms for women's role in child-rearing, caregiving for older persons, and household chores, even in the context of dual earners. Finally, the challenges of maintaining a work-life balance for couples can also affect marital fertility (Jones, 2013; Kohara, 2021; Latshaw&Yucel, 2022).



Mortality

Figure 2.14 Life expectancy at birth and life expectancy at 60 years, 1929-2022, Thailand.



Source: Health statistics, Ministry of Public Health, Thailand.

Thailand has successfully undergone the mortality transition phase, leading to significant increases in life expectancy at birth and age 60 over time. As shown in Figure 2.14, life expectancy at birth for men in Thailand rose from 31.1 years in 1929 to 73.6 years in 2022. For women, life expectancy at birth increased from 37.5 years in 1929 to 80.7 years in 2022—a substantial rise of 42.0 years for men and 43.2 years for women over 93 years. Moreover, according to the Twenty-Year National Strategic Plan for Public Health (B.E. 2561-2580), the MOPH’s ambitious goal is to increase life expectancy at birth to be over 85 years by 2037.

This achievement can be attributed to various factors, including advancements in healthcare and medical technology, which led to the shift from infectious to degenerative diseases. However, the combination of ultra-low fertility rates and these positive trends is rapidly leading Thailand towards becoming a super-aged society.

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Non-communicable diseases

The Sustainable Development Goal (SDG) target 3.4 aims to reduce premature mortality from non-communicable diseases (NCDs) by a third by 2030 relative to 2015 levels and to promote mental health and well-being. NCDs are the leading cause of death globally and particularly affect the elderly. In 2023, Thailand reported that 75% of its elderly population, or 7,404,202 individuals, had NCDs, with high blood pressure (46.91%), diabetes (21.79%), stroke (2.51%), and cardiovascular disease (1.97%) being the most common (Health Data Center, 2023). Risk factors include poor diet, lack of exercise, smoking, alcohol consumption, air pollution, stress, and insufficient sleep. Without regular health screenings and proper treatment, these conditions can lead to severe complications such as chronic kidney failure, bedridden status, and disability, significantly impacting the quality of life.

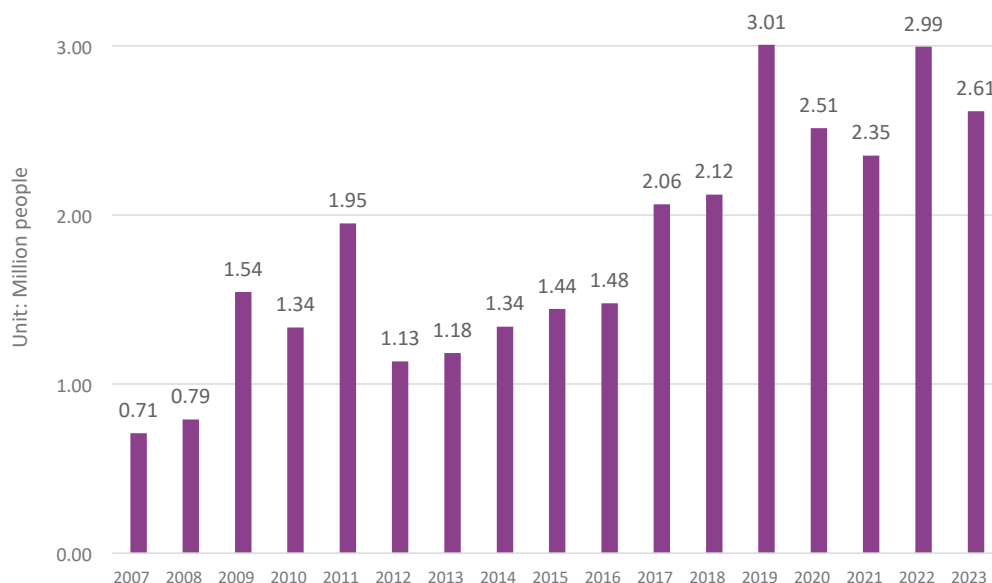
COVID-19 pandemic

The COVID-19 pandemic has significantly impacted human life, but assessing its true impact on mortality is challenging. Studies using excess mortality to gauge COVID-19-related deaths in Thailand indicate that mortality rates during the pandemic were 1-3.4% higher than they would have been without the outbreak (Pothisiri et al, 2023; WHO 2022). While this increase likely reflects deaths directly caused by COVID-19, other factors, such as strained healthcare systems and reduced access to treatment for non-COVID conditions, also played a role in the heightened mortality. Moreover, one study identified a gender disparity in excess mortality, with women experiencing better outcomes than men (Pothisiri et al, 2023). COVID-19 did not impact the population's age structure, but it shortened the longevity of older people, affecting their well-being. The emergence of COVID-19 has highlighted the critical importance of robust public health responses, equitable healthcare access, and enhanced preparedness for future health emergencies regarding age-specific risks.

International migration

From the late 1980s to the early 1990s, Thailand underwent a remarkable economic transformation that propelled it to become a leading Asian economic power. This impressive achievement was largely credited to the globalization of Thailand's financial market, international trade, direct foreign investment, and a surge in international labour migration (Lee and Rhee, 1999; Jansen, 1997; United Nations Population Division, 2001). Throughout this period, the nation enjoyed exceptional economic growth and increased demand for unskilled and 3D jobs. Simultaneously, neighboring countries faced political instability and lower economic development, leading to a significant influx of people into Thailand from these nations (Prachuabmoh et al., 2011).

Figure 2.15 Number of Migrant workers in Thailand, 2007-2023



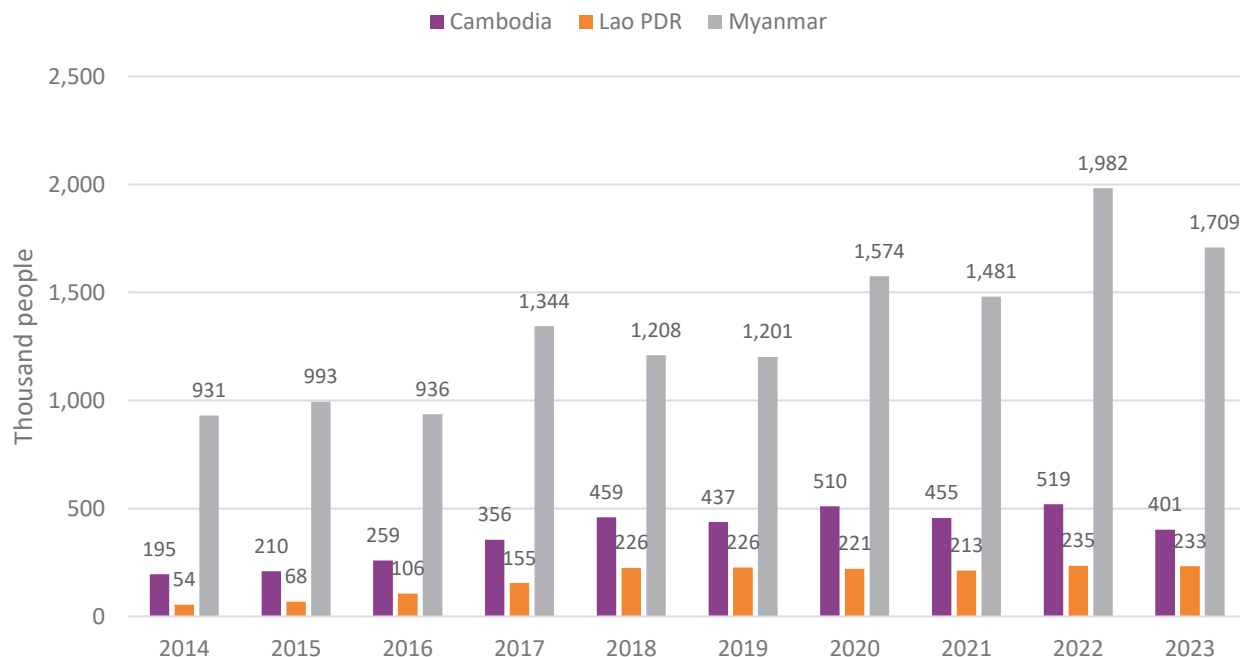
Source: MOL, 2024

The economic boom and political and economic instability in neighbouring countries significantly increased the number of migrant workers in Thailand. Figure 2.15 illustrates the number of migrant workers in Thailand from 2007 to 2023, highlighting a clear upward trend. In 2007, there were approximately 0.71 million migrant workers, which increased steadily, reaching a peak of 3.01 million in 2019. However, there was a slight decrease in 2020 and 2021, likely due to the COVID-19 pandemic. The government's measures regarding lockdowns and movement restrictions to confine the pandemic may retard the migrant workers' movement and border

crossing process. These measures include 14-day quarantine requirements upon entering Thailand, vaccination, and additional health examinations (Khemanitthathai, 2021).

Thailand's robust economic growth has created numerous job opportunities, particularly in sectors that require unskilled labour such as construction, agriculture, and domestic work (Huguet & Chamrathirong, 2011). Migrants from neighbouring countries, such as Myanmar, Cambodia, and Laos, have been drawn to these opportunities.

Figure 2.16 Number of Migrant workers from neighboring countries, 2014-2023

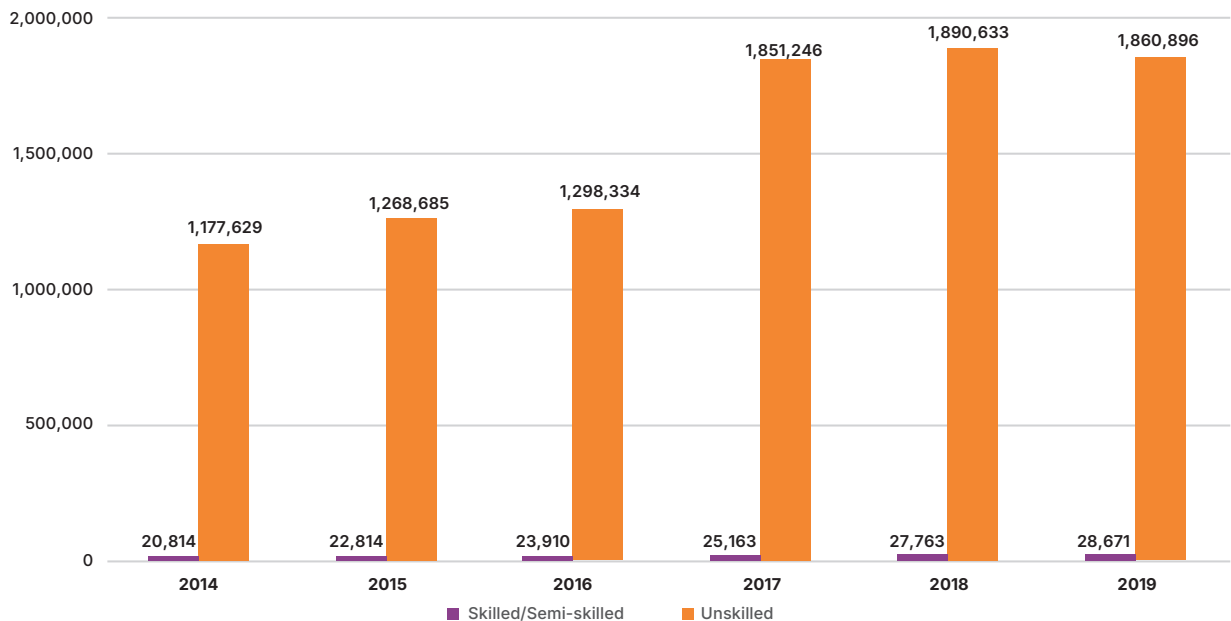


Source :MOL, 2024

Figure 2.16 illustrates the number of migrant workers from Cambodia, Lao PDR, and Myanmar in Thailand from 2014 to 2023. Over this period, there was a clear upward trend in migrant workers, reflecting Thailand’s increasing dependence on foreign labour. In 2014, there were approximately 931,000 migrant workers from Myanmar, 195,000 from Cambodia, and 54,000 from Lao PDR. By 2023, these numbers had risen to 1,709,000 from Myanmar, 401,000 from Cambodia, and 233,000 from Lao PDR.

The push factors driving migration from these countries vary. The high number of migrant workers from Myanmar can be attributed to ongoing political and economic instability, which drives many to seek better opportunities in Thailand. Cambodia has shown a steady increase in migrant workers over the years, likely due to economic challenges and limited job opportunities within the country. In contrast, Lao PDR has contributed the smallest number of migrant workers compared to Cambodia and Myanmar, which can be attributed to relatively stable economic conditions and strong ties with Thailand.

Figure 2.17 ASEAN migrant workers in Thailand, by skill types, 2014-2019



Source: MOL, 2024

According to Figure 2.17, the notable escalation in ASEAN migrant workers in Thailand were mostly unskilled, making up nearly 98% of all migrant workers. Flexible immigration pathways should be implemented to attract skilled and experienced workers. For example, easy-access visa pathways facilitate permanent high-skill worker employment and offer entry passes or employment passes to

those of high-skilled and highly educated talent who are qualified for specific technology occupations. Furthermore, human resource management should prioritize worker training and professional development plans to increase the supply of local skilled workers and respond to the growing demand for advanced technology sectors.

Challenges

Shortcomings in both quantity and quality of the population

Thailand is facing demographic challenges due to the extremely low birth rate. The population is also aging rapidly, and its overall quality is not very high. This poses a significant challenge for the country to escape the middle-income trap, as the market will become smaller with fewer producers and consumers. Furthermore, this may lead to a decline in economic development.

The quality and productivity of the population must be significantly improved to maintain or accelerate the country's development in both economic and social aspects. This is particularly important in the digital age, where the workforce needs to adapt to market demands and economic trends. Therefore, the education system must respond by improving childhood education quality and ensuring that the limited workforce is equipped with the necessary skills to succeed in the modern economy.

The demographic dividend presents great opportunities for countries with a large working-age population. This dividend can occur in a relatively short period, typically a few decades. Thailand has experienced a demographic transition due to changes in its structure.

At the end of the 20th century and the beginning of the 21st, the country's fertility rate gradually decreased from a very high level to a level close to replacement levels. This resulted in a shift in

the age structure of the Thai population. In the past, this higher proportion of the child population (under 15 years of age) has decreased over time. Meanwhile, the proportion of the working-age population (ages 15-59 years) increased, which was a positive development for the country's economy. As a result, in Thailand, this dividend emerged over three decades. During this time, the proportion of the working-age population grew from 55.64 percent in 1980 to 61.68 percent, 65.92 percent, and 67 percent in 1990, 2000, and 2010, respectively (Wongboonsin, Guest, and Prachuabmoh, 2005).

This period was considered a time of great opportunity, as the shift in demographics which had a positive impact on economic growth. Despite a period of economic development resulting from an increase in the proportion of the working-age population, Thailand has not fully benefited from the demographic dividend when compared to other countries in East Asia. This is because although Thailand had a large working-age population at that time, the skills and abilities of its workers were relatively lower compared to East Asian countries such as Japan, Taiwan, and South Korea during the demographic dividend (Wongboonsin, Guest and Prachuabmoh, 2005). In other words, while Thailand had a sufficient number of working-age people, it lacked the quality of skills and abilities that were present in the East Asian countries mentioned above.

Financial instability in governmental welfare and security systems

The country's rapid transformation into an aging society, while still being a developing country, will significantly impact its welfare systems, which the government has prepared for. The remaining challenges are monthly allowances, social security, and the health insurance system (Ministry of Social Development and Human Security, 2024).

Monthly allowance

The government has spent approximately 77 billion baht to support 10.3 million older persons, as a monthly allowance in fiscal year 2023. The payment is based on age group, ranging from 600 to 900 baht. The government plans to transition from a living allowance to basic welfare or income security for older persons. The living allowance is projected to increase to 120 billion baht within five years (Ministry of Social Development and Human Security, 2024).

Instability of social security system

The growing number of older individuals poses a risk to the sustainability of the Social Security System. In addition to relying on investments for high returns and to increase the fund's income, the Social Security System faces a significant challenge due to the rapidly growing older population. As many people enter the older person age group, the system will have to bear a substantial increase in expenses towards paying pensions to retired older workers. However, the revenue from the working-age population, which funds the Social Security Fund, has decreased significantly and is not proportional to the older population. This has made the fund's insolvency challenging, given the trend of fund expenditures for older pensions exceeding revenue collected (Ministry of Social Development and Human Security, 2024).

The universal health insurance system

The health insurance system is currently in a state of concern due to increasing health costs among the aging population. The government is expected to cover healthcare costs for older persons (excluding civil servants), amounting to 3,957.30 Baht per person per year. Suppose per capita health expenditure remains constant, and the older population increases to 15 million people in the next five years. Health expenses for older persons will rise to approximately 59.359 billion Baht annually. Over the next ten years, the older adult population is projected to increase to 17.4 million. Consequently, health expenses for the older population are expected to rise as high as approximately 68 billion Baht annually (Ministry of Social Development and Human Security 2024).

Policy Responses to Ultra-Low Fertility and Population Ageing

Building stable families: environments for family growth and human security

Pronatalist policies are designed to boost fertility rates that have dropped below replacement levels. However, countries like Japan, Korea, and China show that raising birth rates is challenging and requires long-term commitment.

Thailand's 2nd National Reproductive Health Development Policy and Strategy (2017-2026) focuses on quality births through enhanced health services, equal access, and family financial support. Despite these efforts, fertility rates remain critically low, indicating that health and financial support alone are insufficient.

To foster family stability, Thailand must also improve social and physical environments. This includes reforming welfare and state services, offering housing benefits, and developing quality care systems for children and older adults. Age-friendly transportation and expanded daycare services for infants under two years are also crucial. Current initiatives include expanding daycare to accept infants as young as three months old and increasing paternal leave, though it is currently limited to the government sector.

Promoting gender equality by sharing family responsibilities supports personal aspirations and family care, helping create a pro-family culture and potentially higher birth rates. Additional measures are necessary to support these goals.



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Intensive investment in human capital

Intensive investment in human capital, including education and health, is crucial to achieving the ICPD targets and SDGs. A major challenge for human capital development in Thailand is the education system. The quality of the curriculum, teacher training, resource allocation, and teacher distribution must align with the needs of learners and the labour market. Changes are needed in the learning ecosystem to develop skills and desired qualifications in students.

The education system should support lifelong learning by providing opportunities and welfare support to develop skills throughout life. With the decline in the working-age population, which supports both young and old generations and drives social and economic development, reskilling and upskilling the working-age population is essential. Optimizing the education system to minimize inequality and meet all learners' needs is also crucial. Reducing the high cost of quality education can encourage more couples to have children.

Health promotion, prevention, and rehabilitation policies are important, especially with rapid population aging. The healthcare system should shift from treating diseases to preventing them and rehabilitating patients. Promotion and prevention are crucial for healthy aging, reducing illness and disability, and lowering healthcare costs for individuals, families, and governments. Likewise, prioritizing good health before giving birth is essential. This includes pre-marital health

screenings, pre-pregnancy preparation, prenatal care, and healthcare for both the mother and fetus, as well as promoting infant and child health. These steps ensure that each new generation is born healthy and empowered to thrive.

It is crucial to prioritize the health and wellness of the working-age population. This group significantly contributes to their families and the national economy. Maintaining their physical and mental well-being is a vital investment in human capital to ensure sustained high productivity and independence throughout their lives. The public health system should focus on preventing and managing chronic diseases, promoting occupational health and safety through health literacy, and fostering and regulating a healthy workplace environment.



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Migrant management policy

Due to the continued decline in the working-age population, replacement migration has become one of the targets for maintaining the number of working-age people, the country's productivity, and economic growth. In 2018, foreign workers accounted for approximately 10 percent of the total workforce in Thailand. They contributed significantly to the Thai economy's GDP growth of approximately 4-6 percent in 2017 (United Nations Thematic Working Group on Migration in Thailand, 2019).

The Thai government has implemented a regularization of migration policy on an international scale to address the labour shortage within the country. However, long-term challenges remain, and future uncertainties should not be overlooked.

Changes in workers' destinations, a lower growth rate of migrants, and industry upgrades may increase the demand for high-skilled workers. Given Thailand's reliance on migrant workers, effective policies are crucial to managing foreign labour efficiently, ensuring stable progress amid an ageing society. To this end, policies should define the precise number and types of foreign workers needed. An efficient registration system and streamlined work permit processes are essential, alongside measures to protect workers' rights and foster their development. However, this solution only offers a short-term fix for the ageing population. Within the next decade, the working-age population in major migrant-sending countries like Myanmar is projected to decline. To counteract labour shortages, Thailand must harmonize support and recruitment strategies while investing in workforce development, increasing wages, and improving productivity.

Relieve the severity of the aging population wave

Thailand's older population is growing significantly, propelled by a large group of adults aged 40-59, totalling about 20 million people, according to statistics from the Bureau of Registration Administration (BORA) as of June 30, 2023. This age group is expected to become elderly within the next two decades. Policy efforts should focus on keeping future and current older persons active and engaged for as long as possible. One measure to achieve this could involve older people in the workforce, which may help offset the decline in the working-age population and utilize the elderly as a substitute workforce. In 2017, Thailand had an estimated potential of 6,353,810 older workers, yet only 3,847,050 were employed, leaving a gap of 2,506,760. This untapped capacity includes 1,195,138 males and 1,311,622 females. Utilizing this potential could boost Thailand's GDP by up to 9.16% by 2050, highlighting the economic benefits of integrating older adults into the workforce (UNFPA Thailand, 2023).

Encouraging older individuals to work helps maintain their income, activity levels, and independence, thereby reducing their reliance on families and government support. To achieve this, a holistic approach addressing health, economic, social, and environmental needs is required.

Promoting healthy aging is essential, including focusing on prevention and behavioural changes to reduce or control chronic diseases. This approach helps to minimize the risk and duration of dependency and being bedridden in old age.

Continuous education and reskilling are vital for older adults to align with job market demands or transition to age-appropriate professions. The government should raise awareness about quality aging, particularly for those aged 40-59, and ensure that education and training programmes meet the needs of this demographic. Economic and financial literacy is also important, helping older persons manage finances and reduce debt through targeted government initiatives.

Creating an environment that encourages active aging involves adjusting homes, workplaces, and public areas, as well as providing comprehensive services and infrastructure to meet the needs of older persons. This includes supporting families and communities in caring for older persons and promoting their social engagement. Relevant ministries should provide knowledge and resources to strengthen these support systems.

Addressing technological advancements is also essential. While technology can disrupt industries, innovations like assistive technology can help older adults remain engaged in the workforce. The government should ensure that older people are proficient in technology to fully benefit from these advancements and remain active in a changing society.

By addressing these areas—health, environment, education, economic literacy, and technology—Thailand can better manage the impacts of its aging population and harness the potential of older adults to contribute meaningfully to society and the economy.

Future-Ready Thailand: Embracing Population Change for Sustainable Development

Thailand has experienced significant demographic changes, including a substantial decrease in ultra-low fertility rates and the resulting challenges an aged population poses. The decline in fertility rates has led to a shrinking population, which presents significant economic and social development challenges. Furthermore, the aging population challenges the sustainability of welfare systems and economic productivity. To tackle Thailand's demographic challenges effectively, the following key recommendations are proposed:

Create Supportive Environments for Building Stable Families:

Develop conducive social, economic, and physical ecosystems to foster family stability and encourage quality births. Implement measures to advance gender role equity and support family formation, including welfare reforms and improved access to childcare.

Invest in Human Capital:

Significantly invest in education and skills development from birth onwards to enhance the quality and productivity of future generations.

Prioritize Replacement Migration:

Address labour shortages by integrating replacement migration strategies and revising employment systems to support older workers.

Empower Older Adults:

Facilitate the inclusion of older individuals in economic and social activities, ensuring their continued health and productivity as the workforce ages.

By adopting these strategies, Thailand can effectively address its demographic challenges, paving the way for a resilient and sustainable future.



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End Notes

- i - Sasin's assumptions: Life Expectancy (LE) calculated from NESDC's projections, Total Fertility Rate (TFR) in 2023 = 1.6, TFR in 2050 = 0.7
- CPS's assumptions: One-year increase in LE for every 5 year, TFR = 1.0
- NESDC's assumptions: Male LE increases from 70.52 years in 2010 to 76.75 years in 2040, female LE increases from 77.84 years in 2010 to 83.15 years in 2040. TFR based on a medium fertility scenario, TFR in 2010 = 1.62, TFR in 2040 = 1.30.
- UN WPP's projections: LE increases from 79.7 in 2022 to 83.1 in 2040. TFR increases from 1.32 in 2022 to 1.40 in 2040.
- ii 1969-1971 Data are obtained from the report of the National Economic Development Board
- 1974-1975 The Survey of Population Change, National Statistical Office
- 1980-1981 Data are obtained from the report of the working group on population projections, Office of the National Economic and Social Development Board, 1985
- 1985-1990 Data are obtained from the report of the working group on population projections, Office of the National Economic and Social Development Board, 1985, and Life expectancy at age 60 years are interpolated from life table west model level 1 at 19-21
- 1991 From the report of Population and Housing censuses
- 1995-1996 The Survey of Population Change Report, National Statistical Office
- 2005-2006 The Survey of Population Change Report, National Statistical Office
- 2010-2022 Mahidol Population Gazette, January



**SEXUAL AND REPRODUCTIVE HEALTH
AND RIGHTS, AND CHOICES FOR ALL**

3

CHAPTER



Sexual and reproductive health and rights (SRHR) are vital for the well-being and autonomy of all individuals. The significance of SRHR was first highlighted by the International Conference on Population and Development (ICPD) in 1994, which marked a pivotal shift towards acknowledging the fundamental nature of reproductive health and rights within the broader context of human rights and gender equality. This imperative was echoed at the Nairobi Summit 2019, which aimed to accelerate the ICPD Programme of Action and renew the global commitment to these crucial issues.

This chapter begins with a thorough review of key legislation and policies that have driven the advancement of SRHR for Thai citizens from 1994 to 2019. It then discusses the achievements and ongoing efforts of the past five years (2019 to present). It highlights how the Thai Government, especially the Ministry of Public Health, has broadened its sexual and reproductive health agenda to tackle emerging issues prompted by demographic changes. Finally, the chapter recommends sustainable SRHR, presenting actionable strategies to ensure sexual and reproductive health choices and rights for all Thais.

The Path to Advocating SRHR for Everyone: 1994 - 2019

Half a century ago, Thailand grappled with rapid population growth that strained its ongoing development in education, health, and economy. In dealing with this issue, the Thai government introduced its first Population Policy in 1970 to promote voluntary family planning services. Through a notably successful and internationally acclaimed Family Planning Campaign, the birth rates were significantly reduced, highlighting the importance of integrating the principle of volunteerism and human rights within family planning programmes.

It was not until 1997, three years after the ICPD, that the first Reproductive Health Policy of Thailand was promulgated, declaring that “all Thai citizens, regardless of age, should have a good reproductive life” (Ministry of Public Health and UNFPA Thailand, 2010). The Thai Constitution of 1997 first enshrined equal rights in accessing public health services, later reaffirmed in the 2007 Constitution. Although sexual and reproductive health or rights were not explicitly mentioned in either Constitutions, the country’s commitment to promoting equal protection of rights for women and children was clear. This was demonstrated by the government endorsement of several related international conventions, including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Convention on the Rights of the Child (CRC), and the Convention on Rights of Persons with Disabilities (CRPD).



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The period from 2000 to 2014 marked an outstanding era for Thailand in achieving most of the goals and objectives outlined in the ICPD Programme of Action (PoA). The country's dedication to fostering an inclusive and equitable environment for sexual and reproductive health and rights for all individuals was remarkable. Key initiatives included enhancing information provision, counselling, and reproductive services for adolescents and youth, involving men in promoting women's reproductive health and amending the National Health Act to include the promotion and protection of women's reproductive health. Other key actions included issuing the first National Reproductive Health Strategy, ensuring reproductive health choices are available for all, including those vulnerable women, and emphasizing reproductive health in the Tenth National Economic

and Social Development Plan as a priority. However, evidence indicated that certain population groups, including youth and marginalized populations such as migrants, ethnic minorities, sex workers, and transgender populations, still required special attention and care. (Ministry of Public Health and UNFPA Thailand, 2010)

The subsequent period between 2015 and 2019 also saw substantial progress in SRHR for the general population, alongside focused efforts to tackle challenges specific groups face. According to the ICPD+25 report, published in 2019 by UNFPA Thailand, Thai women increasingly realized and exercised their rights in family planning at their own pace. In 2016, the Act for Prevention and Solution of the Adolescent Pregnancy Problem was enacted,

responding to growing concerns over adolescent pregnancies. This legislation safeguards the rights of all adolescents under 20, providing access to sexual and reproductive health services and aiming to prevent early pregnancies. The Act guarantees access to care and social support for pregnant adolescents, allowing them to continue their education and pursue vocational training.

Another significant policy development was the drafting of a comprehensive 20-year Population Development Plan. Aligned with the 20-Year National Strategy Framework, this policy addressed the quality of childbirth and childhood experiences, adopting a rights-based approach to SRHR and reinforcing the central premise of the ICPD in that population considerations need to be integral to national efforts to achieve sustained development.



Achievements and Ongoing Efforts (2019-Present)

Legal reforms and policy initiatives

In the past, women and girls in Thailand faced significant SRHR restrictions, particularly regarding their bodily autonomy. These restrictions severely limited their ability to make informed decisions about continuing pregnancies, considering critical factors such as health, economic circumstances, and family planning.

One of the most pressing issues was the lack of access to pregnancy choices, including safe abortion services. This led to a troubling increase in the number of unsafe abortions, which directly impacted women's health. Recent estimates from the Referral System for Safe Abortion (RSA) indicate that the number had surged to around 300,000 unsafe abortions annually before 2021 (Batschke, 2023). Thai law deemed abortion illegal, with only a few specific exceptions where the procedure was allowed.

Unsafe abortion is a significant cause of maternal mortality and morbidity, posing a major global public health concern. In many countries, including Thailand, the illegal status of abortion leads to a lack of official data or, if available, it is often heavily underreported. This situation places a substantial burden on the healthcare system, as resources must be allocated to address complications from unsafe abortions and their long-term effects on women's

health. Despite these concerns, there are mixed reactions among the public. As a predominantly Buddhist country, many in Thailand still view abortion as morally wrong.

In early 2021, an amendment to safe abortion was passed, highlighting it as the right and choice for women and girls and allowing abortions up to 12 weeks of gestation without specific conditions. This reform, the first in 60 years, highlights crucial moral and legal perspectives. It aims to protect both unborn children and women from the serious health risks of unsafe abortions while also recognizing the importance of potential life and, importantly, the women's rights to reproductive choice—enabling them to make free and responsible decisions crucial to controlling their lives.

To ensure that women have access to the right and choice to discontinue the pregnancy, the Universal Health Coverage Scheme has been promptly expanded to include abortion care within the legal parameters. Moreover, the Ministry of Public Health has mandated the registration of service centres offering safe abortion care and counselling as choices for pregnant women. Qualified counsellors for pregnancy termination are required to complete the training programme provided by the Department of Health. This training is aimed to equip counsellors



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with proper knowledge to provide comprehensive abortion care, including referrals for safe termination services and appropriate social welfare assistance for women with unplanned pregnancies (Sanitya et al., 2020).

The cultural stigma surrounding abortion continues to impact social acceptance of abortion services and the willingness of professionals to perform the procedure (Chainok et al., 2022; Prasertwong et al., 2021). It is important to note that the amended Act retains the criminal penalty of imprisonment for up to six months or a fine of up to 10,000 THB, or both, for pregnancy terminations beyond 12 weeks (Bangkok Post, 2020).

The Ministry of Public Health, together with relevant agencies, formulated the 2nd National Reproductive Health Development Policy and Strategy 2017-2026. The Strategy promotes Healthy Birth and Child Development, aims to promote and support voluntary births, in which every pregnancy has been planned and well-prepared before pregnancy and also with the support of safe motherhood and neonatal care and postnatal care; and ensures that the newborn will have a high-quality upbringing in a supporting environment. The Ministry of Public Health also provides vulnerable and disadvantaged populations access to family planning services, creates a comprehensive service system, and provides a fast track on counselling and contraception services. It has also developed a referral system

to help tackle unplanned pregnancy problems. Moreover, the Ministry of Public Health advocated to include pregnancy termination medicines on the National List of Essential Medicines under the UHC benefit package to reduce the problem of unsafe abortion and adolescent pregnancy.

Despite the government's significant efforts, these challenges demand ongoing and close monitoring. This significance is highlighted by the rising incidence of sexually transmitted infections (STIs) over the past five years, as reported by the Department of Disease Control (HFocus, 2024). The rate of syphilis infections in 2023 has surged to 28.1 per 100,000 population, a 2.5-fold increase from 2018

(HFocus, 2024). This figure has tripled among the youth, escalating from 27.9 to 91.2 per 100,000 population. This alarming rise in infection rates not only indicates prevalent unsafe sexual behaviors but also poses a 5 to 9 times higher risk of HIV infection (HFocus, 2024).

Adolescent sexual activity statistics further underscore the urgency of these issues. In 2019, condom use among adolescents and young adults aged 15-24 rose to 80.3%, up from 74.5% in 2017. However, a recent study in Bangkok revealed that around one-third of sexually active adolescent students did not use contraception to prevent STIs or pregnancy (Thepthien & Celyn, 2022).

The Ministry of Public Health has made it a priority to foster a supportive environment for adolescents to access reproductive health services. Since 1997, the Youth Friendly Health Services (YFHS) initiative has been addressing youth health needs. In 2023, the ministry launched the "Fantastic Love, Safe Sex" initiative, which aligns with several national goals, such as achieving 100% condom use and reducing adolescent pregnancies. It also fulfills the 2019 Nairobi commitments to expand essential health services, including sexual and reproductive health, without financial barriers. In partnership with the National Health Security Office (NHSO), the Universal Health Coverage benefit package has been currently expanded to provide free oral contraceptives and condoms through various accessible channels, including mobile applications and automated dispensing machines.



Free condoms administered through a vending machine. NHSO.

Access to Available SRHR and FP Services Among Vulnerable Groups

Women and youth in vulnerable groups, including those with disabilities, living in sensitive cultural settings, migrant women, those living below the poverty line, and LGBTQIA+ individuals, are often excluded from accessing rights-based services and information regarding sexual and reproductive health. Significant issues with SRHR and FP services were identified for two specific groups during the examined period.

Women and youth living with disabilities

According to the 2022 Disability Survey, approximately 4.2 million or 6% of the Thai population are persons with disabilities, an increase from 3.7 million (5.5%) in 2017 (Thai National Statistical Office & UNICEF, 2022). Among persons with disabilities, only 42.6% are officially registered as disabled persons, with reasons for not registering being either the person not wanting to register or the disability not being at a severe enough level to qualify for registering (Thai National Statistical Office & UNICEF, 2022). Among persons with disabilities, 56.35% are women. 1.13% of the total number of persons with disabilities are girls aged 5-17, 3.42% are women aged 18 to 39, and 42.47% are women aged 40 and above (Thai National Statistical Office & UNICEF, 2022).

Thailand signed the Convention on the Rights of Persons with Disabilities on 30 March 2007 and ratified it on 29 July 2008. The Convention entered into force for Thailand on 28 August 2008. After eight years of national implementation, Thailand acceded to the Optional Protocol to the Convention on 2 September 2016, which entered into force for Thailand on 2 October 2016. Under the adequate standard of living and social protection (Article 28, Convention on Rights of Persons with Disabilities), especially on the Right to Health in 2021, 66.449

million Thais, or 99.39 percent of the population, had registered under the Universal Health Coverage scheme and 47.64 million or 71.26 percent of the population had registered for the Universal Coverage Scheme. The number of persons with disabilities registered under the Universal Coverage Scheme was 1,320,827. Persons with disabilities, including women, are entitled to all the Universal Coverage Scheme medical and healthcare benefits, including reproductive health. The same report further addressed that there are several Persons With Disabilities (PWDs) who could not access Health Services due to a lack of knowledge of the rights of people with disabilities (Srisom et al., 2023). For instance, health professionals, particularly in rural areas, lack knowledge regarding the rights of PWDs (Srisom et al., 2023). In addition, persons with disabilities often struggle with purchasing private health insurance and obtaining coverage on the same level as other individuals (Srisom et al, 2023). These issues became especially pronounced during the COVID-19 pandemic (Srisom et al, 2023).

In 2019, UNFPA Thailand, in collaboration with Mahidol University, Planned Parenthood Association Thailand (PPAT), and Thailand Research Institution for the Development of Persons with Disabilities



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(TRIPs), conducted a review of the SRHR situation among women and youth with disabilities. The report further indicates that many women, youth, and girls with disabilities report experiencing unsafe sex, unsafe abortions, and unintended pregnancies (UNFPA Thailand, 2021). Due to negative norms and stigma, discussing sexual relations or sex is considered shameful, especially for women with disabilities (UNFPA Thailand, 2021). The study also highlights cases of pregnant women and adolescent girls with disabilities being advised to terminate their pregnancies without being given informed choices (UNFPA Thailand, 2021).

The UN Joint Team on Youth and Mahidol University surveyed Vulnerable Youth and COVID-19 in Thailand: Socio-Economic Impact of the Crisis (UNFPA Thailand, 2020a). Another review has been done by the UN Joint Team on Youth to examine access to SRHR services and information

during COVID-19 among youth, including those with disabilities, ethnic minorities, those living under the poverty line, and those stateless. The findings reveal that women and youth with disabilities are not well-informed about sexuality and SRHR in schools or any other government settings. Although educational sessions on SRHR are provided, they are often not applicable to real-life situations and are not well-adjusted to different types and degrees of disabilities (UNFPA Thailand, 2020b). It was reported that during COVID-19, around 90% of youth with disabilities aged 15-19 were unable to access SRHR services due to public closures and lack of assistance. With limited access to adaptive and rights-based SRHR and family planning services, and lacking quality information on rights and choices, women and youth with disabilities of reproductive age face significant challenges in planning their lives and families (UNFPA Thailand, 2020b).

Migrant Women and Youth

As Thailand grapples with an aging population, the nation confronts a looming labour shortage that threatens its economic growth. Migrant workers appear to be a short-term solution. The International Organization for Migration (IOM) estimates that 4 to 5 million migrants live and work in Thailand. Alarming, about 1 to 2.5 million of these migrants are believed to hold irregular status (OIM Thailand, 2024). Official data from Thailand's Department of Employment in 2022 provides some insight into the demographics of these migrant workers (ILO Thailand, 2023a). Roughly half of the migrants are women, and approximately half a million are young migrants.

The plight of migrants in Thailand is fraught with vulnerability, a condition exacerbated by gender. Female migrants, in particular, face multiple levels and forms of risks. Many may experience discrimination and abuse before arriving in Thailand and after. Access to information and healthcare can be great challenges for most migrant women and youths (Map Foundation, 2015). Barriers include

language, financial constraints, and inconvenient location and timing of available services, as commonly reported in previous studies (Hounnaklang et al., 2021; König et al., 2022). Unregistered migrants are in an even more precarious situation, as they are unable to obtain health insurance cards and often fear contacting hospitals due to the risk of deportation, despite the existence of non-profit resources such as the Migrant Fund (M-Fund), leading many not to purchase health insurance cards (Sitkulanan et al., 2024; Tschirhart et al., 2020; Tschirhart et al., 2021).

A study by Thwe and Chuemchit (2018) has found that the knowledge of contraceptive use among migrant adolescents is relatively good, with more than 80% reporting being aware of modern contraceptive methods. However, despite this awareness, the vast majority have a poor knowledge level. The uptake of these methods was only 59.7% among sexually active youths. Low utilization of modern contraceptive methods puts this population



at risk of sexually transmitted infections, including HIV, as well as unintended and unsafe pregnancies. A similar observation was made among the migrant women in Bangkok. Thein and Thepthien (2020) have found that the prevalence of unmet needs for family planning among migrant women was 15.8%. The primary factors contributing to the high unmet need among these migrant women were insufficient knowledge, limited accessibility, and older age. Over 90% of these women lacked awareness of emergency

contraception, and less than 50% had a correct understanding of intrauterine devices (IUDs). Maternal and reproductive health among migrant workers is often neglected worldwide. However, international scholars have observed that Thailand's reproductive health issues among migrant workers receive more attention in research compared to other areas such as non-communicable diseases, occupational health, and mental health issues (König et al. 2022).

Table 3.1 SRHR Services Coverage among Thai Citizens and Migrant Populations

Characteristics	Eligible population		
	Thai Citizens	Documented Migrants	Undocumented Migrants
Type	National Health Insurance Scheme (NHIS) under UHC	Social Security Scheme (SSS)	Health Insurance Card Scheme (HICS) with the following services included
Services covered	<ul style="list-style-type: none"> ● Family planning (contraception, including tubal ligation) ● Reproductive services (childbirth, emergency birth services) ● Maternity care (antenatal care, child support up to 7 years old) ● General medical services (hospitalization, laboratory services, check-ups, emergency, accidents) ● Preventive, curative, and palliative care ● Dental care (tooth filling, extraction, scaling) ● High-cost services (cancer therapy, stem-cell transplant) ● Health education and home health care 		<ul style="list-style-type: none"> ● In-patient and out-patient medical services (board and meals, diagnosis, alternative medicine) ● Emergency and ambulatory care ● Health promotion (health education, health examination) ● Select high-cost treatment (chemotherapy, antiretroviral treatment for pregnant mothers)
		Pension and unemployment allowance	

Characteristics	Eligible population		
	Thai Citizens	Documented Migrants	Undocumented Migrants
<i>Services not covered</i>	<ul style="list-style-type: none"> ● Abortion care ● Comprehensive HIV/AIDS related services ● Drug rehabilitation and treatment. ● Infertility and in vitro fertilization ● Sexual reassignment and plastic surgery ● Psychological services ● Organ transplant ● Hospitalization beyond 180 days <p>*For documented migrants, with conditions included in the health insurance card.</p>		<ul style="list-style-type: none"> ● Abortion services ● Comprehensive HIV/AIDS related services ● Pension and unemployment allowance ● Palliative care ● Dental care ● Drug rehabilitation and treatment. ● Infertility and in vitro fertilization ● Sexual reassignment and plastic surgery ● Psychological services ● Organ transplant ● Hospitalization beyond 180 days <p>**With conditions addressed in health insurance card.</p>
<i>Source of funding</i>	General Tax for all Thai with ID Cards.	Conditions: 5% from employer, 5% from employee (based on monthly salary) and 2.75% from the government	Conditions: 1600 baht/ annually (two-year mandatory payment)
<i>Out-of-pocket fee</i>	30 baht/ consultation (free for those under exemption categories)	<ul style="list-style-type: none"> ● 600 baht – annual health screening ● 1300 baht – annual membership ● 30 baht/ visit when receiving care from healthcare facilities 	<p>Fees for a required health check-up prior to enrolment:</p> <ul style="list-style-type: none"> ● 500 baht – adult ● 350 baht – child under 7

Source: Authors' update based on the Policy Implementation Analysis on Accessing SRHR and Family Planning Services among Migrant Women Report, UNFPA Thailand Country Office, 2022.



Furthermore, the expansion of health protection for migrant workers in Thailand has gradually improved. Presently, Thailand offers three main health assurance schemes for migrant workers: (1) Social Security Scheme (SSS) - Compulsory for documented migrant workers, providing comprehensive health coverage; (2) Health Insurance Card Scheme (HICS) - Voluntary, aimed at undocumented migrants; and (3) National Health Insurance Scheme (NHIS) - Automatic coverage for all Thai citizens, but not applicable to undocumented migrants. Reproductive and health services covered for documented and undocumented migrants, compared to Thai citizens, are displayed in Table 3.1. The benefits of the SSS and HICS schemes are similar, though the SSS also includes pension and unemployment benefit coverage (Srisai, Phaiyaron & Suphanchaimat, 2020). The HICS coverage has conditions. While the card covers antenatal care and delivery, it has a limit of 10,300 Baht (Ministry of Public Health, 2020). Likewise, the SSS beneficiaries may need to pay for reproductive healthcare if costs exceed the lump sum payment limits of 12,000 baht (ILO, 2021).

The initiatives led by NGOs to safeguard migrant workers' rights are particularly commendable. For example, in 2022, the World Vision Foundation of Thailand (WVFT), in partnership with Sansiri Public Company Limited and the Safe and Fair programme, unveiled the Reaching Women Migrant Workers and Their Families in Construction Camps (REACH) initiative. This innovative program seeks to elevate the knowledge and comprehension of labour rights among women migrant workers as stipulated by Thai law. Furthermore, REACH is dedicated to raising awareness about safe recruitment practices and the array of support services available, including health services and



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mechanisms for grievance and remediation, offered by governmental and non-governmental entities. Since its launch, REACH has successfully trained over 950 women migrant workers in the construction sector, addressing various subjects, including reproductive health and family planning, women's and children's rights, and skills development (ILO Thailand, 2023b).

Another notable non-profit initiative is the M-Fund, which targets vulnerable undocumented migrants at the Thai-Myanmar province. The M-Fund is a healthcare initiative designed to provide coverage for undocumented migrant women, particularly

those along the Thailand-Myanmar border. The programme collaborates with Thai government hospitals and NGOs (Pudpong et al., 2019). For a monthly fee of 100 baht, with an additional 100 baht for a pregnancy plan, which can increase if the beneficiary is registered later in the pregnancy, it offers reproductive and maternity services, including childbirth and emergency caesarean sections (Tschirhart, 2021; Pudpong et al., 2019). Pregnant women can receive coverage up to 80,000 THB per year (Pudpong et al., 2019). Enrollment is accessible at various sites, including workplaces, homes, and the M-Fund centre in Mae Sot (Pudpong et al., 2019).

Infertility treatment

Ensuring that all individuals and couples who face challenges in conceiving naturally have access to necessary treatments is a critical aspect of SRHR. Thailand has been witnessing a persistent decline in fertility rates, resulting in fewer annual births. Although lower fertility rates are not inherently negative, offering options and viable choices empowers individuals to exercise their reproductive rights fully. By making infertility treatments accessible and affordable, along with providing proper information and counselling, couples can realize these rights and address their reproductive health needs effectively.

The endeavour to offer infertility treatments to Thai women under the Universal Health Scheme has been in motion since 2018. In early 2024, infertility

treatment was approved by the National Health Security Office (NHSO) to be included in a health package under the Universal Health Scheme. Thai women of ages 30-40 years who are legally married and experiencing infertility, with a desire to have children, can access three levels of services offered. Level 1 includes counselling, lifestyle modifications, treatment of underlying medical conditions, and referral for further treatment based on identified causes. Level 2 offers ovarian stimulation (OS) procedures (1-3 cycles) and intrauterine insemination (IUI, 1-3 cycles). Level 3 provides in vitro fertilization (IVF) or intracytoplasmic sperm injection (ICSI, one cycle of ET1-2) for individuals with contraindications to IUI (NHSO, 2024).





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Digital technology

Building on lessons and good practices from the effective use of digital systems during the COVID-19 pandemic to ensure access to healthcare services, the Ministry of Public Health's Digital Health Strategy B.E. 2564-2568 (2021-2025) emphasizes the integration of digital technologies into reproductive health services development. The Department of Health has adopted and implemented digital solutions Teen Club, the first official Line Application innovative digital platform tailored to the needs of

adolescents and youth, ensuring access to appropriate, safe, and demand-driven healthcare and Sexual and Reproductive Health services. The platform acts as a reliable and youth-friendly source to provide accurate SRHR information and counselling on Youth Health, Adolescent and Youth Reproductive Health, and Adolescent and Youth Health Literacy. With informed choices, adolescents and youths could make their own decisions on the family lives they want.

LGBTQIA+: Gender Equality and Sexual and Reproductive Health and Rights

Thailand is known for its relatively open and accepting attitude towards LGBTQIA+ individuals compared to many other Asian countries. Despite seemingly social acceptance, the process of obtaining legal recognition of same-sex partnerships has been a rocky journey. The push for same-sex marriage in Thailand gained significant momentum in the early 2000s, driven by LGBTQ+ activists and organizations.

For Thailand, still, there is no source of correct and right-based information and service officially provided to LGBTQIA+ adolescents and youth on sexual and reproductive health and prevention of high-risk related sexual and reproductive health. From the Review of the Comprehensive Sexuality Education in Thailand conducted by the Ministry of Education and UNICEF in collaboration with UNFPA, UNESCO, and Mahidol University conducted in 2016, topics related to gender, sexual rights, and citizenship; sexual and gender diversity; gender equality; safe abortion; safe sex for same-sex couples; and bullying

are less often taught. Many students still lack a correct understanding of a range of sexuality-related issues. Some hold attitudes that reject gender equality and sexual rights, and roughly half think that domestic violence is sometimes justifiable. Insufficient coverage of topics related to gender, rights and power is an important gap in Thai Comprehensive Sexuality Education (CSE) provision. It might help to explain why Thai adolescents and youths still face significant challenges in applying what they learn to their own lives, as well as why the rates of teenage pregnancy and STI/HIV incidence have remained high among Thai youth.

Over the years, the Cabinet introduced several bills supporting civil partnerships and same-sex marriage but consistently failed to pass through Parliament. However, after years of persistent advocacy and effort, Thailand became the first Southeast Asian country to legalize same-sex marriage. This milestone was achieved when the Senate passed the Civil and Commercial Code amendment, known as the Marriage Equality Act, in June 2024. This amendment replaces the gender-specific terms “men and women” and “husband and wife” with the more inclusive terms like “individuals” and “spouses,” allowing individuals to marry regardless of their gender or sexual orientation.



Recommendations for Achieving Universal Rights and Choices for All

1 Ensuring high-quality SRH services for all

To achieve universal rights and choices for all, it is crucial to ensure that the sexual and reproductive healthcare system offers comprehensive and inclusive services. These services must be responsive to the needs and rights of individuals of all ages while addressing the unique dynamics of gender and sexuality among young people. It is recommended that the quality of Sexual and Reproductive Health (SRH) services adhere to the World Health Organization's Quality of Care principles, ensuring that services are accessible, acceptable, equitable, appropriate, and effective.

A robust quality assurance system should be implemented to maintain these high standards. This system should follow the Youth-Friendly Health Services (YFHS) standard, revised in 2020 to incorporate the Global Standards for Quality Health Care Services for Adolescents (WHO and UNAIDS, 2015). Strict adherence to this standard is essential to ensure that SRH services suit Thai context and align with global best practices.

Furthermore, the government should continue developing a reproductive health surveillance data system that harmonizes data from all relevant stakeholders. This includes creating a unified format for collecting surveillance data, developing a YFHS application for online data collection, and establishing a strategic database for practitioners on adolescent pregnancy issues (teen act indicators).

2 Leveraging digital technology for enhanced adolescent healthcare services

Building on the success of implementing digital solutions in developing services for adolescents and youth, it is strongly recommended to continue utilizing digital platforms. These platforms enhance system capabilities and the delivery of quality SRH services. Sustaining digital platforms will improve SRH service delivery, ensuring they are user-friendly and accessible to all.

Furthermore, continuous evaluation and adaptation of these digital strategies are essential. Regular assessment of the effectiveness of digital approaches and adapting them to meet the evolving needs of all individuals will promote better health outcomes and reduce disparities in healthcare access. By maintaining and refining these digital strategies, we can ensure everyone receives the quality SRH services they deserve.

3 Intensifying effort in promoting quality births

To address the pressing issue of quality births, it is highly recommended that the government intensify its efforts to elevate this matter to a national priority, in collaboration with academia and civil society organizations. Currently, while the draft national agenda is under Cabinet review, several proactive measures can be prepared in anticipation of its approval.

Key initiatives directly related to sexual and reproductive health services include enhancing the capacity of health personnel to manage and treat infertility and establishing birth promotion clinics in hospitals run by the MoPH. Training programs can be organized for designated health providers through a collaboration with the Royal Thai College of Obstetricians and Gynaecologists. Meanwhile, the birth promotion clinics would not only serve as outlets for promoting quality births but also provide corresponding services and benefits for women in need.

4 Supporting the reproductive rights of LGBTQIA+ and same-sex couples

In light of the SRHR for LGBTQIA+ and the legalization of same-sex marriage in Thailand, it is important that the reproductive health challenges and healthcare-seeking behaviours of LGBTQIA+ adolescents and youth and same-sex couples be taken into account. Ensuring the availability of necessary information provided for LGBTQIA+ adolescents and youths regarding Sexual and Reproductive Health, especially how to prepare themselves for adulthood and where to seek information and services. While for same-sex marriage couples, there is a need to ensure healthcare environments are comfortable, accessible, and free from discrimination is crucial. A rights-based approach with a focus on gender equality may require institutional retraining for service and healthcare providers, as well as their families and communities, to reduce biases in both healthcare and non-healthcare settings. There is a need to include and integrate SRHR for LGBTQIA+ in any SRHR platforms, school RH/CSE curricula, and guidelines. It is also essential to understand and

support the reproductive aspirations of same-sex couples, including their access to fertility treatments and adoption services. These measures will uphold the reproductive rights of LGBTQIA+ and same-sex couples and promote a more inclusive and equitable healthcare system of its approval.

5 Strengthening multiple-sector partnerships and targeted outreach

To enhance the effectiveness and coverage of SRH services, it is recommended that the government develop and maintain robust collaborations with multi-sector partnerships and target population groups. This can be achieved by coordinating efforts with government and private sector agencies to identify best practices in implementation and develop effective data-sharing strategies for joint initiatives.

Engaging adolescents, youth, and vulnerable groups is crucial. The government can ensure comprehensive and targeted outreach by assessing their specific needs and designing activities and innovations tailored to their unique contexts and challenges. This customized approach will help address the specific requirements of vulnerable populations, leading to more effective and inclusive SRH services.

EVERYONE PLAYS A PART:
GENDER-RESPONSIVE ACTIONS FOR WOMEN
AND GIRLS AND FAMILY INSTITUTIONS





Current Status of Gender Equality in Thailand

Gender equality in Thailand can be assessed through global and local lenses, offering a comprehensive overview of the nation's efforts to bridge gender gaps and promote equality. Internationally, the Global Gender Gap Index (GGGI) provides a detailed assessment of gender disparities, enabling comparisons highlighting Thailand's current standing among other countries. Locally, Thailand's distinct demographic and social context provides a nuanced understanding of gender equality.

Global Perspective

Over the past five years, Thailand has demonstrated significant progress in advancing gender equality. Data from the World Economic Forum's Global Gender Gap Index (GGGI) indicates that its ranking has improved from 75th in 2020 to 65th in 2024 (Table 4.1). In 2024, Thailand achieves an overall score of 0.720, which exceeds the global average of 0.685. Despite this notable improvement, the country is still far behind the top five countries, boasting scores above 0.800. The GGGI measures gender disparities in four sub-dimensions besides the overall performance:

Economic Participation and Opportunity:

Scores in this dimension have varied narrowly between 0.722 and 0.795, remaining unchanged in the two most recent years. The country's ranking has varied moderately, with the highest in 2022 at 15th. The 2024 report highlights considerable gender disparities in high-level professional occupations. Disparities in the labour force participation rate and wage equality still require significant attention.

Educational Attainment: Thailand has excelled in this dimension, consistently scoring well above 95% over the past five years, reflecting near-equal enrolment rates for both genders across all education levels.

Health and Survival: Thailand has maintained a relatively high ranking in this dimension, with minimal gender gaps in life expectancy and sex ratio at birth.

Political Empowerment: This remains Thailand's most challenging area. Women's representation in political roles, especially in ministerial positions, is significantly lower than in other dimensions and countries. Despite some progress, the pace of improvement has been slow.

Table 4.1 Global Gender Gap Index ranking and scores for Thailand, 2020-2024
(Scores ranges between 0-1, with 1 indicating parity)

	2020	2021	2022	2023	2024
Aggregate performance					
Score	0.708	0.71	0.709	0.711	0.720
Ranking	75th	79th	79th	74th	65th
Performance by sub-index					
Economic Participation and Opportunity					
Score	0.776	0.787	0.795	0.722	0.722
Ranking	22 nd	22 nd	15 th	24 th	21 st
Education					
Score	0.991	0.992	0.979	0.995	0.985
Ranking	80 th	74 th	92 nd	61 st	95 th
Health and survival					
Score	0.978	0.978	0.978	0.977	0.977
Ranking	52 nd	41 st	37 th	42 nd	42 nd
Political Empowerment					
Score	0.086	0.084	0.084	0.101	0.147
Ranking	129 th	134 th	130 th	120 th	102 nd

Source: Global Gender Gap Reports, 2021-2024, World Economic Forum.

Local Perspective

Education, Economic Opportunity and Intergenerational Relationship

Educational Attainment and Gender Equality

Thailand has made significant achievements in gender equality in education since 2000, largely due to the government's commitment to investing in human capital development. According to the recent 2022 survey of the National Statistical Office on the status of children and women in Thailand, 94.6 percent of females are literate. When viewed through an intergenerational lens, this progress reveals deeper and complex social dynamics. Although traditional Thai culture has been influenced by a patriarchal family system that historically favoured men over women, previous studies show that Thai households generally allocate more resources to female children's education than male children, regardless of urban or rural location (Wongmonta & Glewwe, 2017). This

behaviour can be attributed to the social expectation that daughters would care for their parents in old age, both physically and financially. Evidence shows that female children send a larger share of their income to their parents than their male counterparts (Curran et al., 2005; Knodel, 1997), anticipating greater support in their later years. Despite an increase in the number of women in higher education, gender segregation stemming from persisting gender ideology in educational choices occurs. The number of higher education enrolment reveals that 69 percent of women tend to study social science. In comparison, 80 percent of men tend to select scientific fields (Ministry of Higher Education, Science, Research and Innovation, 2022).

Labour Force Participation and Income Disparities

Women's human capital enhancement generally correlates with higher labour force participation and increased incomes. However, this correlation is not consistently evident in Thailand. Educational reforms in 1977 and subsequent policies reduced the gender income gap between 1985 and 2006 (Mutsalklisana, 2011; Nakavachara, 2010). This reduction was driven by improved education for women and better occupational prospects for them relative to men. Nonetheless, discrimination against women still persists in the Thai labour market, particularly among middle to high-income groups (Bui & Permpoonwiwat, 2015).

Gender disparities concerning economic participation and opportunity have remained prominent in certain aspects until recently. Despite increased labour force participation by women, progress has plateaued since 2017 (Paweenawat, 2023). Major challenges still remain, such as inadequate social support for working mothers, limited paternity leave, and lack of quality childcare services, which hinder women from fully realizing their potential in the workforce.

Wage Gap, Occupational Segregation, and Women in Decision Making

Recent data from UN Women shows that the wage gap in Thailand has widened significantly from 2.5% in 2015 to 10.9% in 2020. Sectors requiring Science, Technology, Engineering and Maths education (STEM) and digital skills are predominantly male-dominated, with two-thirds of STEM graduates and half of IT graduates being men (World Economic Forum, 2024). This gender imbalance is likely to exacerbate the wage gap further. In addition, women's visibility at all levels remains low. With limited female representation in political leadership

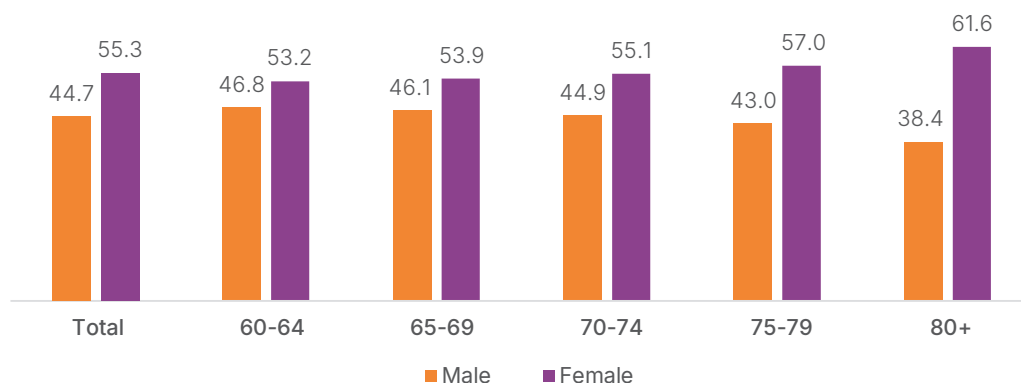
roles, women account for approximately 12 percent of the parliament. The public sector also reflects similar disparities; approximately 25 percent of senior executives are women in central government, while 11.85 percent of executives are women in local government (The Department of Women's Affairs and Family Development, 2024). The situation reflects the glass ceiling, which is a social barrier preventing women from high positions.



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Feminization of Aging

Figure 4.1 Percentage of individuals aged 60 years and older, total and by gender, 2022



Source: Survey of Older Persons in Thailand, 2022.

The term “Feminization of Aging” highlights the gender-specific aspects of an aging population, particularly how it increasingly comprises a higher proportion of women. This phenomenon is markedly evident in Thailand, where the older demographic skews heavily towards females. As illustrated in Figure 4.1, women outnumber men in all older age groups. Data from the 2022 Survey of Thai Older Persons conducted by the National Statistics Office reveals that women constitute 55% of the older population, surging to two-thirds among those aged 80 and above.

This demographic shift carries profound implications for gender disparities in various facets of later life. Financial challenges are particularly acute for older women. According to the same survey, employment remains the primary income source for men, with 43% of those aged 60 and above still working. Conversely, only 24% of older women are employed, with approximately 38% depending on their children

for financial support. The data also highlights a stark income disparity: about one-fourth of older women report annual earnings under 20,000 Baht, whereas a mere 16% have incomes exceeding 100,000 Baht. In contrast, fewer men (18.6%) fall into the lowest income categories, while 27.9% earn over 100,000 Baht.

Furthermore, given their longer life expectancies, women exhibit higher rates of widowhood compared to men - 41.5% of older women are widowed, in contrast to 14.8% of older men. Consequently, older women are more likely to live alone, which exacerbates the risks of social isolation and deteriorated psychological well-being. This demographic reality underscores a greater need for policies and support systems that address the unique challenges older women face. Providing gender-responsive care and creating community networks can help mitigate these risks and improve the quality of life for the aging female population.

Gender-based Violence

The importance of addressing gender-based violence (GBV) cannot be overstated, as it has profound impacts on individuals, communities, and nations. This urgency was first spotlighted during the ICPD and reaffirmed at the 2019 Nairobi Summit, where global leaders committed to ending GBV as a critical component of advancing human rights and achieving sustainable development.

Over the past decade, Thailand has benefited from data generated by both public and non-public agencies advocating for GBV awareness. While the extent of GBV varies across surveys due to differing objectives, definitions, and methodologies, it has consistently been indicated that GBV is pervasive in Thailand. Family violence and intimate partner violence are particularly troubling. A 2018 survey-based study found that family violence occurred in nearly one out of three families (Neelapaichit et al., 2018). Another study from the same year revealed that 15% of respondents experienced psychological, physical, or sexual violence, and one in six Thai women had faced intimate partner violence (Chuemchit et al. 2018). Factors such as limited income and substance abuse significantly contributed to these incidents, as reported in studies involving hill tribe families (Panjaphothiwat et al., 2021).

Impact of COVID-19

Global statistics have shown a rise in violence against women and family members during the COVID-19 pandemic. The meta-analysis reveals an increase in intimate partner violence during the pandemic of 31% (Kifle, Aychiluhm, and Anbesu, 2024). Thailand was not exempt from this trend. The prevalence of family violence in Thailand rose from 34.6% in 2017 to 42.2% in 2021 during the pandemic (Napa et al. 2021). Increased family stress and alcohol consumption during the pandemic were identified as key triggers for the rise in family violence, exacerbating both its frequency and severity.

Reliable data on gender-based violence remains scarce and often inaccurate. This scarcity largely stems from challenges in data collection, especially in contexts where violence occurs within the family, leading to significant underreporting. By improving data collection methods and supporting both public and non-public agencies in their advocacy work, Thailand can enhance its understanding and management of GBV.

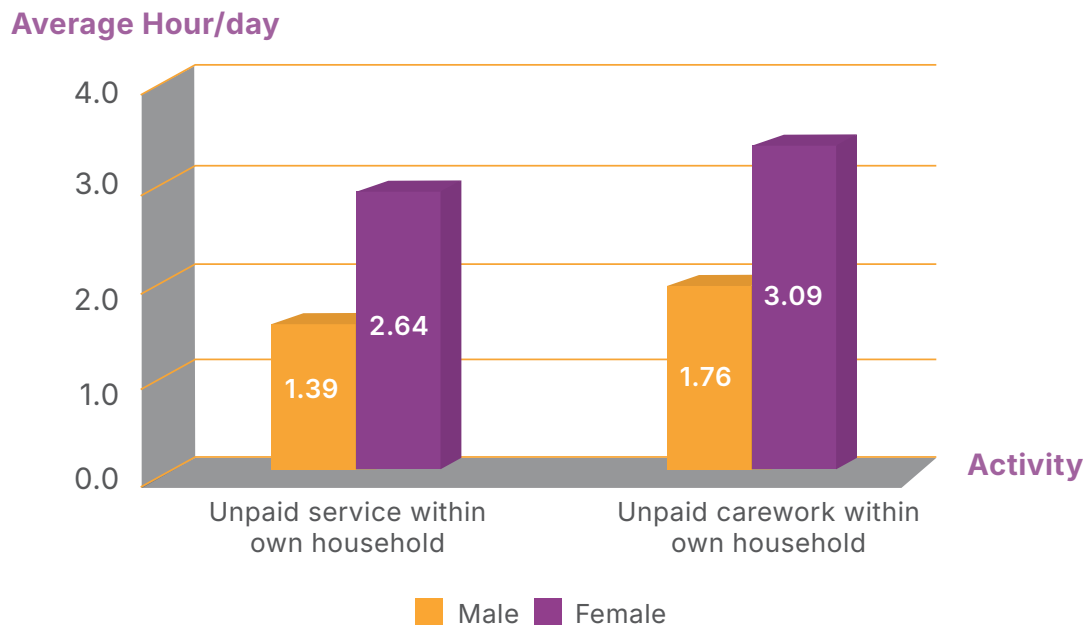
Gender and Family Diversity

Promoting gender equality requires understanding long-standing stereotypes that confine family structures to traditional paradigms and restrict distinct roles of family members based on their gender. Embracing diverse family configurations and supporting individuals in their gender identities and roles fosters a more inclusive environment where everyone can thrive.

As detailed in Chapter 2, Thailand has transitioned into a fully aged society. This demographic shift, coupled with economic development and social

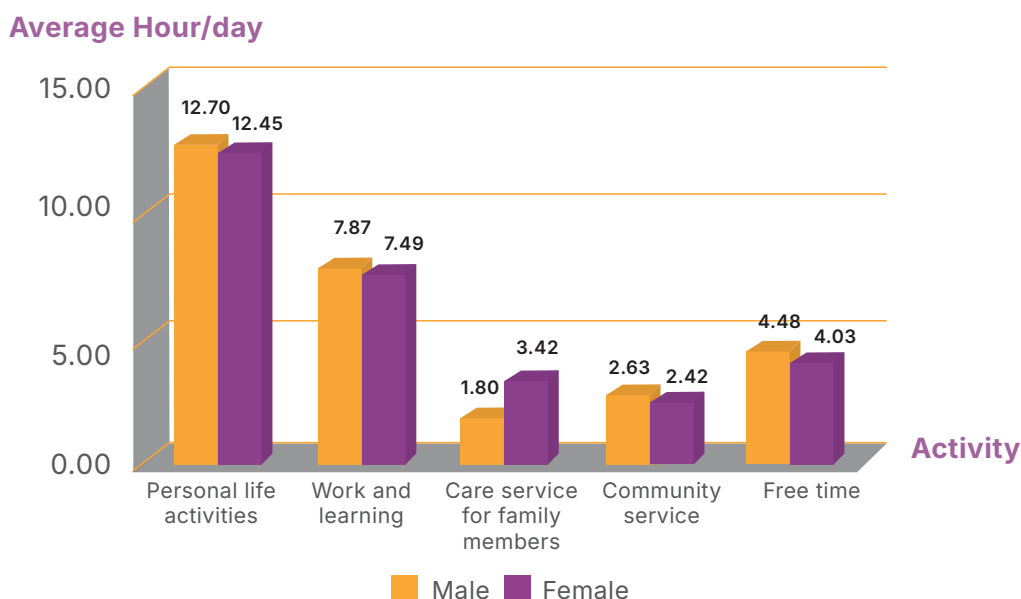
transformations, has altered family dynamics, particularly in the household division of labour. Women are gradually increasingly seen to participate in decision-making and income-earning while men take on traditionally female responsibilities, such as household chores and parenting, reflecting trends observed in Western countries. This shift towards more equal responsibilities presents an opportunity to strengthen families and communities.

Figure 4.2 Average Time Use of Population Age 6 and Above – Disaggregated by Care and Service Activities within the Household and by Genders



Source: Thai National Statistical Office (TNSO)'s 2015 Thailand Labor Force Survey and National Time Use Survey

Figure 4.3 Average Time Use of Population Age 6 and Above – Disaggregated by Main Activities and Genders



Source: Thai national Statistical Office (TNSO)'s 2015 Thailand Labor Force Survey and National Time Use Survey

However, the deep-rooted patriarchy contributes to the complexity of the situation in Thai society. According to the latest available statistics, there is an unequal distribution of domestic work, reflecting pervasive traditional gender norms. Thai men spend an average of 1.39 hours per day on unpaid domestic work, while women spend 2.64 hours daily (Figure 4.2). This disparity is particularly stark in care services for family members, with women spending 3.42 hours daily compared to only 1.80 hours for men. Consequently, women have less time for personal activities, work, learning, community services, and leisure (Figure 4.3).

UN Women's Rapid Gender Assessments (RGAs) provide an encouraging insight into the shifts towards men sharing more unpaid domestic work during COVID-19 (Seck et al., 2021). Among 5,031 Thai respondents, 53% of women and 44% of men reported increased unpaid care work since the onset of the pandemic. Furthermore, 68% of women and 57% of men acknowledged an increase in their unpaid domestic responsibilities. While these

statistics suggest a positive trend toward greater male participation in household chores, the reality is more nuanced. The increases are not evenly distributed. Single-parent women, in particular, have experienced significantly larger increases in unpaid domestic and care work compared to single-parent men.

Even though Thailand needs further surveys to provide updated analyses of sex-disaggregated time use for unpaid domestic and care work, it is likely that these gender inequalities still persist. Media terms like "double-burden syndrome" or "dual-burdened women" have become more common, vividly describing women who juggle both paid and unpaid work. These dual responsibilities are widely recognized and reflected in policies and measures as a significant factor influencing women's fertility decisions, often leading to negative outcomes. This situation reflects a need to provide gender-responsive policies on recognition and redistribution of women's unpaid care work, for example, care infrastructure and paternity leave.

Emerging family configurations

In today's rapidly evolving society, two family configurations are stepping into the spotlight: single-parent families and same-sex households. Both represent the changing nature of family life and reflect broader shifts in societal norms and values regarding gender.

Single-parent families are becoming more common due to various circumstances such as divorce, the death of a spouse, or personal choice. In Thailand, single-parent households comprised 7.1% of all households in 2013 (UNFPA, 2015), a number that has since surged to an estimated 20.5%. This significant increase underscores a broader transformation in family dynamics. Interestingly, many single-parent households are led by women, marking a notable shift in traditional family gender roles. However, Thai single mothers often face a unique set of challenges, including multidimensional stigma on personal, familial, community, and state levels (Zhang, 2023a, 2023b). Recent studies have highlighted how

factors like gender, class, ethnicity, religion, and HIV status contribute to the negative attitudes towards single mothers, shaped by Thailand's entrenched socio-cultural and gender norms (Zhang, 2023a, 2023b).

Thailand has made remarkable progress by legalizing same-sex marriage, signalling a greater acceptance of diverse family structures. Yet, this advancement brings new challenges, particularly regarding adoption rights for same-sex couples—an issue requiring a comprehensive review and inclusive adjustment of government family policies. Additionally, the visibility of same-sex couples and gender-diverse families is increasing, fostering acceptance of varied gender identities and roles. This diversification emphasizes the need to create supportive environments that celebrate and uphold the rights and contributions of all genders, ensuring that every family can thrive in its unique form.

Statistics and Facts

Population Statistics (2023):

- Percentage of Women: 51.2%
- Percentage of Older Adults Who Are Women: 56%
- Percentage of Persons with Disabilities Who Are Women: 52%
- Percentage of Ethnic Minorities Who Are Women (2016): 49%

Household and Labor Statistics (2023):

- Single Mothers: Over 120,000
- Households Headed by Women (2021): 41%
- Women in the Labor Force: 47%
- Women Working: More than 18.3 million
- Women Leading Start-ups (2018): 18% (up from 6% in 2016)

Political Representation (2022,):

- Women in Thai Parliament: 15.7%

Source: Unless otherwise noted, all statistics are from the "Situation of Thai Women in 2024" report by the Ministry of Social Development and Human Security. The percentage of women in the Thai Parliament is sourced from the Office of the Secretariat of the Senate.

Overview of Legislation and Supportive Mechanisms

This section outlines Thailand's legal framework and support mechanisms to advance gender equality and women's empowerment from 2000 to the present. Over nearly three decades, Thailand has enacted three Acts, amended one Act, introduced two draft Acts currently under review, and implemented two national policies and measures to promote these issues. These developments are summarized below in chronological order, allowing us to see what has been done during the past five years (2019-2024).

Legal and Policy Frameworks

The Protection of Domestic Violence

Victim Act B.E. 2550 (2007) aimed to safeguard individuals from domestic violence, focusing on human rights and family institution strengthening. Key aspects included mandatory reporting, comprehensive protection for all stakeholders, temporary protective measures by government teams, and victim rehabilitation. It is currently under revision to enhance victim-centred approaches.

The Juvenile and Family Court and

Procedure Act B.E. 2553 (2010) established juvenile and family courts and procedures for handling related cases. Victims of domestic violence or prosecutors were entitled to file petitions with the court for protection.

The Gender Equality Act B.E. 2558 (2015), effective from 2015, protected individuals from unfair treatment and discrimination based on sex, sexual orientation, and gender identity. It instituted the Gender Equality Promotion Committee and

the Committee on Unfair Gender Discrimination Complaints to handle complaints and provide remedies. The Gender Equality Promotion Fund was established to support projects and compensate discrimination victims.

The Constitution of the Kingdom of

Thailand B.E. 2560 (2017) enshrined principles of rights and gender equality, ensuring equality and prohibiting discrimination based on gender and other factors. It was aimed to protect vulnerable groups and ensure women's participation in law-making processes. More importantly, the 2017 Constitution underpins a notion of gender-responsive budgeting

The Measures to Prevent Recidivism of Sexual and Violent Crimes Act B.E. 2565

(2022) aimed to prevent recidivism of sex and violent crime offenders, including rehabilitation programmes, post-release supervision, and emergency detention if reoffending is likely.

The National Action Plan for Women's Development B.E. 2566-2570 (2023-2027)

promotes women's rights and gender equality, focusing on enhancing women's human capital, eliminating violence against women, promoting leadership, eliminating gender stereotypes, creating gender mainstreaming tools, and strengthening mechanisms for women's advancement.

Amendment to the Civil and Commercial Code (Equal Marriage – June 2024)

has granted legal recognition to same-sex marriages. This law reflects a progressive shift in societal attitudes and the government's dedication to equality and non-discrimination, marking a significant milestone in the region.

(Draft) Gender Recognition Act aims to provide legal gender recognition with valid reasons and medical certification. It is currently under review and has recently concluded a public hearing period since May 2024.

(Draft) Civil Partnership Act aims to guarantee the right of same-sex couples to establish a family to address various issues such as the right to receive benefits for same-sex couples living together, inheritance issues and joint adoption (Wimonkunarak & Manoleehagul, 2023).



Cover of the National Action Plan for Women's Development B.E. 2566-2570 (2023-2027)

Driving Mechanisms

The National Commission on Women's Policy and Development Strategies (NCW) has been established in 2018. It is chaired by the Prime Minister or Deputy Prime Minister, with the Minister of Social Development and Human Security serving as vice-chair. The commission includes government senior officials, experts and NGO representatives, advising on and monitoring policies related to women and gender equality. The Committee on the Promotion of Women's Development (CPWD) acts as a supporting mechanism for the NCW's operations. It can implement policies, strategies, and national-level plans assigned by the NCW.

The Ministry of Social Development and Human Security (MSDHS), through the Department of Women's Affairs and Family Development (DWF), acts as the central coordinating agency. At the ministry and department levels, Chief Gender Equality Officers (CGEO) and Gender Focal Points (GFP) promote gender equality within their organizations. Each ministry and department must appoint a Deputy Permanent Secretary or a higher-ranking official as CGEO and establish a GFP unit.

Figure 4.4 Government Support Structure for Gender Equality in Thailand



A whole-of-society approach is essential, involving government, CSOs, private sectors, women-led groups, and youth groups. Partnerships with local CSOs and the private sector enhance service provision and extend coverage, especially in rural and remote areas (see Figure 4.4 for the entire driving mechanism system). Innovative examples of promoting partnerships with civil society include:

The Declaration of Intent on “the Promotion of Equality and the Elimination of Gender Discrimination in Compliance with the Gender Equality Act B.E. 2558.” To drive the implementation of this act, 46 organizations—including government agencies, state enterprises, private organizations, political parties, and educational institutions—have declared their intent to promote gender equality and eliminate gender-based discrimination.

Family Development Centres, supported by local government organizations, serve as central units for family development, surveillance, prevention, intervention, and promoting knowledge for families. These centres are designed to foster collaboration in strengthening family units, promote the establishment of community-managed centres for family development, and create opportunities for community learning and participation in family development initiatives. As of April 2024, 7,225 centres have been established nationwide. They are being enhanced to become “Sub-District Social Assistance Centres.”

Table 4.2 Number and percentage distribution of projects/activities

Projects/activities	Number	Percentage
1. Family Development Project	386	37.2%
2. Project for Prevention, Surveillance, Intervention, and Protection of Individual Well-being from Domestic Violence	192	18.5%
3. Project for Preventing and Addressing Teenage Pregnancy Issues	113	10.9%
4. Project for Preventing and Addressing Substance Abuse Issues in the Community	144	13.9%
5. Family Empowerment Project through the Integration of Family Network Groups, such as Homes, Temples, Schools, and Communities Project	75	7.2%
6. Strengthening Family Mechanism Project	93	8.9%
7. Other projects include promoting legal knowledge for women and families and providing training on caring for patients within families.	35	3.4%
Total	1,038	100

Source: Department of Women's Affairs and Family Development (2023)

In year 2023, 1,038 projects and activities were implemented to promote women's rights and strengthen family institutions (Table 4.2). Family Development Projects constituted the largest category, making up 37.19% of the total. This varied distribution and focus of activities reflect the government's commitment to the whole-of-society approach.

Gender Responsive Initiatives and Policies

To chart a forward-looking path, it is essential to assess the progress made in Thailand. This section provides a summary of past initiatives and programmes of action. These efforts encompass not only the allocation of necessary funding and the addressing of gender inequality and gender-based violence but also the enhancement of women's roles in emerging issues such as economic participation, climate change, and peace and security.

Advancing Gender Mainstreaming through Gender Responsive Budgeting

Gender-responsive budgeting (GRB) is a critical tool designed to create budgets that address the needs of all individuals—women, men, girls, boys, and persons with diverse identities. By considering and analysing each group's unique requirements, GRB ensures that resources are efficiently and equitably allocated, reducing inequalities and promoting gender equality.

Since 2021, the Government of Thailand has demonstrated a strong commitment to addressing gender inequalities through budget allocation. Thailand has made consistent progress despite commencing these efforts later than several other nations. The 2017 Constitution laid the first concrete commitment towards gender budgeting.

However, a key challenge is the lack of understanding among government officials about gender budgeting and its implementation. Many mistakenly view it as only funding programs for women. Tools for gender budgeting are underdeveloped, and there are significant gaps in gender-disaggregated data crucial for understanding gender needs and informing policy development (OECD, 2021).



To streamline the gender budgeting process, the DWF developed a comprehensive Gender-Responsive Budgeting (GRB) handbook, approved by the Cabinet in 2021, to guide agencies in incorporating gender considerations into their budgeting processes. The same year, a Memorandum of Understanding on GRB cooperation was signed with eight public agencies, including the Secretariat of the Senate, the Secretariat of the House of Representatives, the Budget Bureau, the MSDHS, UN Women, the Department of Local Administration, King Prajadhipok's Institute, and the Office of the Securities and Exchange Commission.

Furthermore, the DWF has partnered with six organizations at various administrative levels nationwide to implement GRB principles. These pilot projects serve as models for incorporating gender considerations into budgeting processes. The DWF provides training and education to staff and communities, including practical exercises to analyse gender disparities and use GRB checklist methods. At the macro level, the DWF works with the Budget Bureau to integrate a gender perspective into budget cycles, revising guidelines and criteria to align with GRB principles and incorporating GRB into annual budget requests.

Selected examples of the GRB application in the pilot initiatives:

- **Mae Prik Municipality, Chiang Rai Province:** Conducted sex-disaggregated surveys for vocational training needs, organized career development projects, used GRB checklists for project implementation, allocated budgets for gender equality, and introduced GRB to educational institutions.
- **Koh Ka Municipality, Lampang Province:** Signed an MoU with the DWF, analysed In the pilot initiatives, the Gender-Responsive Budgeting (GRB) application was demonstrated through the following examples:
- **Mae Prik Municipality, Chiang Rai Province:** Conducted sex-disaggregated surveys to identify vocational training needs, organized career development projects, used GRB checklists for project implementation, allocated budgets for gender equality, and introduced GRB to educational institutions.



Actions Taken to Tackle Gender-based Violence

Thailand has made significant progress in continuously implementing measures to eliminate gender-based violence and promote gender equality. These efforts involve close collaboration between government agencies and the private sector, focusing on legal action, prevention, protection and assistance, as well as rehabilitation. In addition to the legal measures discussed in the first section of this chapter, various other government and grassroots initiatives actively work together to prevent and address gender-based violence.

Community-based Prevention

- Community Family Development Centres, with 7,194 centres across 878 districts nationwide, serve as key mechanisms for monitoring, preventing, and addressing domestic violence issues. They play a pivotal role in strengthening families and reducing domestic violence, with continuous support from the DWF through agenda-oriented workshops to enhance policy implementation in local contexts.

- The 117 Offices of Legal Protection and Public Assistance under the Office of the Attorney General are situated in the Public Prosecutor Office in each province. Their primary focus is providing legal knowledge and protecting individuals' rights, with a particular emphasis on preventing and addressing violence against children and women.

- "Safe Spaces for Women Project" is an example of a proactive strategy for establishing community surveillance and vigilance on all forms of violence against women. This initiative enhances women's safety in Bangkok through collaborative efforts among local communities, interdisciplinary teams and private organizations. Six communities participated from 2017 to 2022, and in 2023, the project expanded to 43 communities in Dusit District.

Prompt and Innovative Assistance Services

- 24-hour Hotline Service 1300, provided by the MSDHS. This hotline offers social assistance with support from provincial and community multidisciplinary teams. These teams assess clients' welfare and provide therapy and support for those facing social issues, including gender-based violence.

- The Human Security Emergency Management Centre (HuSEC) was launched in November 2023 to provide prompt, accurate, and reliable services to those facing social issues, including gender-based violence. HuSEC consolidates current services provided by MSDHS' agencies under a single roof. The centre is equipped with 24-hour rapid response multidisciplinary teams to assist people in need. A real-time monitoring system allows officials to track active cases and notify related staff on case progress.

- Developed by the MSDHS in cooperation with the Royal Thai Police Office, the Office of the

National Digital Economy and Society Commission, and the Equitable Education Fund, the Emergency Social Services (ESS) or "ESS Help Me" is a Line application for reporting social incidents, including 1) threatening to harm or physically harming, 2) detainment or confinement, 3) risk of being sexually violated or sexually assaulted, 4) causing harm or committing a crime, and 5) reckless behaviour leading to causing harm or accidents. Launched in April 2023, it has acquired 98,484 friends and received 1,899 incident reports.

- One Stop Crisis Centres under the Ministry of Public Health have been created in hospitals to provide immediate and holistic assistance to women and children in crises resulting from violence. Through a coordinated effort of interdisciplinary teams, the One Stop Crisis Centre provides immediate, holistic assistance to women and children in crisis. It offers medical care, mental health assessments, legal advice, and follow-up evaluations.



In Focus: The SoSafe Project

Overview

The **SoSafe Project** is a pioneering life-cycle digital platform developed by **UNFPA Thailand** in alignment with the objectives of the **International Conference on Population and Development's 30th anniversary (ICPD30)**. In collaboration with 14 **pilot provinces**—including their Provincial Governors, Provincial Social Development and Human Security Offices, Provincial Public Health Offices, Damrongtham Centers, key civil society organizations, and the **TraffyFondue** platform initiated by the **National Science and Technology Development Agency (NSTDA)**—SoSafe embodies the ICPD30 commitment to advancing human rights, gender equality, and sustainable development.

Accessible via the widely used **LINE** mobile application, SoSafe offers a user-friendly interface that empowers individuals to confidentially report social issues and access essential information about their rights, benefits, and government support services. By directly connecting users with local social and health authorities, the platform ensures timely assistance while prioritizing privacy and security.

Originally targeting issues such as unintended pregnancy, sexual harassment, and domestic violence, SoSafe has expanded to address a broader spectrum of social concerns, including those affecting older persons, mental health, and emerging challenges. This expansion reflects the ICPD30 agenda's emphasis on addressing the diverse needs of all population groups across the life cycle.

Objectives

- **Enhance Access to Essential Services:** Leverage a modern digital platform to improve accessibility to government services for all individuals. efficient and integrated service delivery.
- **Promote Inter-Ministerial Coordination:** Strengthen collaboration among various governmental bodies for more efficient and integrated service delivery.
- **Empower Vulnerable Populations:** Provide targeted interventions to improve the quality of life for women and girls, especially those from marginalized groups.



Target Beneficiaries

The primary beneficiaries are women across three age groups:

- **Adolescent Girls**
- **Women of Reproductive Age**
- **Older Adult Women**

The initiative also extends support to vulnerable groups, including:

- Persons with disabilities
- Older persons
- Young mothers
- Ethnic minority youth
- Women from the Southern Border provinces
- The LGBTQIA+ community
- Boys and Men

SoSafe ensures user privacy by requiring minimal personal information and directly forwarding reports to local authorities, fostering a secure and trustworthy environment.

Expected Outcomes

- **Data-Driven Policy Making:** Utilize detailed data to facilitate targeted policies and efficient resource allocation.
- **Gap Identification in Services:** Highlight and address deficiencies in location-based service provision.
- **Empowerment of Local Stakeholders:** Enable local authorities and communities to develop tailored solutions.

- **Increased Public Engagement:** Boost public awareness and interaction with the platform and available services.
- **Enhanced Quality of Life:** Improve overall well-being and promote equitable development across genders and age groups.
- **Capacity Building:** Strengthen capabilities for long-term, sustainable use of the platform.
- **Reduction of Social Issues:** Decrease the prevalence of targeted social problems through proactive intervention.

Challenges & Considerations

- **Technological Barriers:** Address digital infrastructure limitations in certain areas to ensure widespread accessibility.
- **Stakeholder Engagement:** Maintain continuous collaboration with stakeholders and provide effective training to maximize impact.
- **Data Privacy:** Uphold robust privacy protocols to protect user information and build trust.
- **Clear Communication:** Implement transparent communication strategies to enhance user confidence and platform adoption.

Scaling Up

Currently operational in 14 pilot provinces, the SoSafe Project is in its initial phase of implementation. These pilot provinces serve as testing grounds to refine the platform's features and effectiveness. The project plans to expand its coverage to all 77 provinces in Thailand by 2025-2026. This strategic scaling aligns with the ICPD30 goals of universal access to reproductive health services and the empowerment of vulnerable populations. Ongoing support and follow-up initiatives will be crucial to ensure the platform's effectiveness and sustainability on a national scale. This expansion is poised to significantly enhance human capital development and address critical social issues across the country.

LINE@SOSAFE

"One click to provide support"

- ✓ Easily access via Line application on mobile phone
- ✓ The case is directly forwarded to the nearby authorities
- ✓ Only provide the necessary information to be shared with government authorities
- ✓ Effective collaboration among responsible government agencies
- ✓ Provide benefits for all population groups, ages, and genders



Economic Empowerment and Workplace Policies

The MSDHS has implemented measures to support women as key economic agents. These measures aim to protect, support, and facilitate women's economic participation, ensuring they can contribute effectively while fostering men's involvement in childcare. These efforts align with the principles of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), to which Thailand is a signatory. The measures target three primary groups: 1) women workers in both formal and informal sectors, 2) single mothers, and 3) older women caregivers. Approved by the Cabinet on January 11, B.E. 2565 (2022), these measures consist of several sub-measures aimed at bolstering women's roles as economic agents:

1

Establishing Early Childhood Development Centres: These centres cater to children under 3 years old by expanding the services of existing centres or childcare facilities to include children aged 0-3. The opening hours of these centres are also extended to match local working hours.

2

Promoting paternity leave: Male civil servants are now entitled to 15 consecutive working days of paternity leave to assist their wives with childcare after childbirth. This measure has contributed to opening up greater opportunities for husbands' involvement in childcare responsibilities.

3

Extending maternity leave with pay. Female civil servants' paid maternity leave has been increased from 90 to 98 days, aligning with that in the private sector. Additionally, they can take up to 90 more days with a 50% salary, totalling approximately 6 months, which supports the WHO and UNICEF guidelines for exclusive breastfeeding.

In addition to these measures, the MSDHS, through the DWF, has been promoting gender equality and empowering women in various economic dimensions. Key initiatives include promoting career development and networking capacity building for women and families through 8 Learning Centres for Women and Families and 4 Protection and Occupational Development Centres. From October 2022 to March 2023, 9,366 people (8,028 females and 1,338 males) received career training. Among the women who completed their training, 7,907 were employed, achieving a success rate of 60.2%. In 2023, women who received skills development and

increased income accounted for 50% of the total number of women with completed training.

Recently, the DWF has focused on building women's financial discipline. In collaboration with the Stock Exchange of Thailand, the DWF has provided women with knowledge on financial planning and accessing funding sources. Furthermore, the ASEAN Women Entrepreneurs Network facilitates exchanges in economics and technology, helping women entrepreneurs develop their business capabilities and skills.

Women as Active Actors on Climate Change

“Let’s make photos and voices change the world”

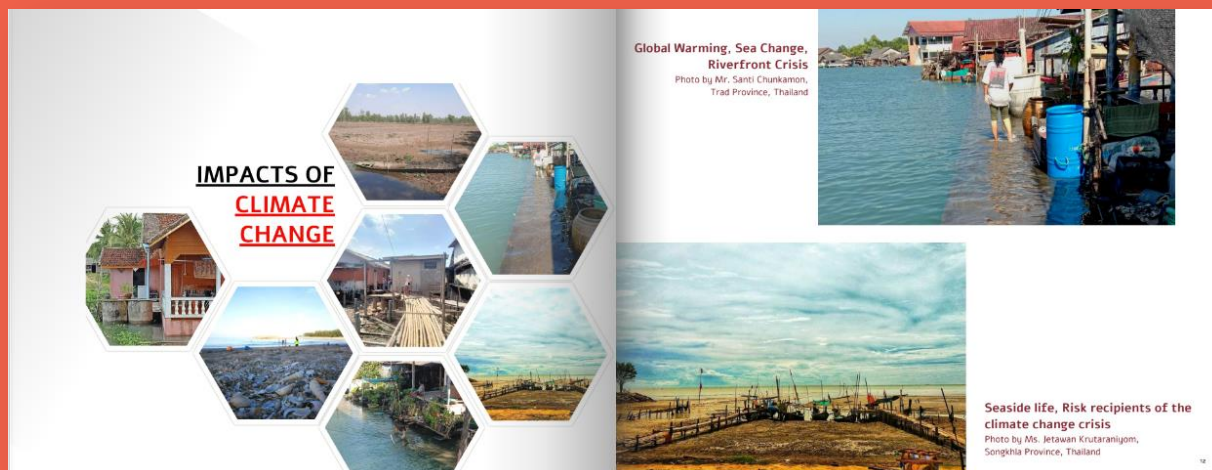


Department of Women’s Affairs and Family (DWF)
Ministry of Social Development and Human Security (MSDHS)



<https://fb.me/7mg6ki>

Women have been increasingly recognized for their significant contributions to mitigating and adapting to impacts of climate change. Their involvement spans various sectors including policy-making, grassroots activism and community-based initiatives, and is essential in developing comprehensive and effective climate strategies that are inclusive and equitable.



The Thai government has actively promoted women to play a critical role in climate action as active participants and leaders. This is evident from the capacity-building initiatives implemented to enhance knowledge and understanding of issues at the intersection of gender equality and

climate change. These initiatives focus on areas such as natural resource management and disaster resilience, aiming to empower women by improving their communication and advocacy skills, thereby providing diverse perspectives in the climate change discourse.



**CLIMATE CRISIS:
WOMEN'S VULNERABILITY**



Women... victims of climate crisis and natural disasters
Photo by Ms. Benjawan Pengroo,
Phatthalung Province, Thailand



**WOMEN
FOOD SECURITY.
NATURAL RESOURCES**

Local Fisheries: A woman who manages food security
Photo by Mrs. Mayuree Thammachad,
Trad Province, Thailand



Life begins at Songkha lake
Photo by Mr. Songkrod Kasem,
Phatthalung Province, Thailand

Knowledge dissemination on climate change and gender has been also facilitated through the production of reports such as "Management Strategies to Reduce the Impact of Climate Change from a Gender Perspective." These reports compile data on risk reduction strategies related to climate change from a gender perspective, providing foundational information for managing the impacts of climate change with a gender lens. Moreover, an online photo book has been

created to showcase perspectives from individuals, particularly women, involved in climate change adaptation and natural resource management. Developed under the concept "Let's make photos and voices change the world," this initiative highlights the critical role of women's voices in climate action. At the policy level, the DWF actively participates in the "NDC Support Project: Delivering Sustainability through Climate Finance Actions in Thailand" Steering Committee to oversee and monitor its progress, focusing on delivering sustainability through climate finance actions in Thailand.

Women, Peace, and Security

From 2017 to 2024, Thailand has implemented measures promoting women's roles in peace and security, in line with the United Nations Security Council Resolution 1325 on Women, Peace, and Security (WPS). This framework emphasizes human security and human rights principles and calls for gender mainstreaming in policies and practices on peace and security, aiming to eliminate violence against women and children in conflict situations and promote women's participation in conflict resolution.

To localize the WPS agenda, Thailand ensures the protection and participation of women, including in conflict-affected settings, and highlights their equal and meaningful participation in peacebuilding and peace processes.

At the international level, Thailand contributes to UN Peacekeeping Operations by underlining the role and visibility of women as effective agents of change and justice makers. Thailand currently deploys 14 female peacekeepers in three UN peacekeeping operations.

At national level, although Thailand has not formulated the National Action Plan on WPS, the Measure and Guideline on Women, Peace and Security was developed by the MSDHS through DWF in collaboration with multi-stakeholders. The Measures were approved by the National Committee on Policy and Strategy for the Development of the Status of Women in November 2016. The measures aim to protect women's rights from conflict situations; to promote the role of women in peacebuilding and security, to increase the roles of

civil society in the protection of women and their rights as well as the rehabilitation of women affected by conflict situations; and to establish conflict management/resolution mechanisms and peace processes. The Measure and Guideline focuses on five measures: (1) Prevention, protection, and recovery; (2) Capacity-building; (3) Empowerment and participation of public and private sectors; (4) CSOs and women; and (5) Promoting the development of mechanisms to advance the WPS policy. In 2020, The Sub-Committee on the Advancement and Monitoring of the Measure and Guideline on Women's Peace and Security was established to advance and monitor the implementation of the Measure and Guideline.

At the local level, The Coordination Centre for Children and Women in the Southern Border Provinces (CCCW-SBP) was established by the Southern Border Provinces Administrative Centre (SBPAC) in cooperation with MSDHS in 2019. The CCCW-SBP is a Government-CSO joint coordinating mechanism on women and children's issues in the SBP. This initiative focuses on ensuring access to justice and reconciliation processes, combating violence against children and women, and addressing peace and security issues affecting these groups. It also aims to enhance the well-being of children and women, improve their access to government services, foster participation in decision-making at all levels, and promote acceptance and gender equality. The CCCW-SBP is operated and driven by active participation of women and youth groups in close collaboration with government partners, particularly SBPAC and security sectors in the SBP.

The Future of Gender Equality: Special Considerations

Accommodating Diverse Family Structures and Demographic Change

Family policies and services must be reviewed and adapted to address the evolving needs of all population groups, including married couples with or without children, single parents, individuals, and same-sex couples. As family structures in Thailand diversify, the roles and responsibilities of women will shift accordingly. Despite existing legal measures promoting equal rights, challenges persist in overcoming social norms and achieving gender equality and equity. Regarding single-person households, especially in the case of older adults living alone, it is crucial to equip these individuals with the knowledge and services necessary for financial independence, social engagement, and good health. This approach will help minimize their reliance on public social welfare, which remains limited in Thailand. It is crucial to continue fostering positive public attitudes and ensuring respect and rights for all individuals, which are in line with international human rights standards. Tailored

support should be provided for each family type to address their specific needs effectively.

In addition, Thailand is expected to be in a transition of superaged society by 2036, and evidence suggests a difference in longevity between women and men, in which women live longer than men. Since gender inequality has impacted all aspects of women's lives from early ages—opportunity in education, economics, health, and decision-making, this inequality affects the well-being of women's lives in older age and poses them with vulnerable situations, for example, poverty, and violence against women. Therefore, a need to bring a gender-sensitive approach into demographic transition policies and practices is required, for example, health and social services and welfare, and community care, sensitized to gender-specific needs and opportunities. This will support the process of achieving a sustainable development agenda.



Men and Boys as Partners in Gender Equality

Active participation and shared responsibility of men and boys in domestic and unpaid care work are essential for advancing gender equality and fostering a modern family dynamic that respects and values all genders. Promoting gender-responsive and equitable household responsibilities ensures all family members can reach their full potential, thus enhancing human capital nationwide. Moreover,

men and boys play a crucial role in making gender equality a reality, benefiting individuals across all genders, including women and the LGBTQAI+ community, in every societal sphere—family, school, workplace, policy-making, and public spaces. A positive and inclusive mindset from all genders is vital for advancing gender equality, a core principle in Thailand's Population and Development agenda.

Responding to a New Form of Violence: Cyber Violence

While traditional gender equality challenges have been progressively addressed in Thailand, violence against women and girls, particularly in the context of emerging digital threats, remains a critical issue. Online violence and rights violations are pronounced, including online sexual harassment, gender-based harassment on social media, derogatory comments, and unauthorized use of private images. Such actions often result in intimidation, coercion, extortion, and severe emotional distress, sometimes leading to suicidal tendencies.

Romance scams are widespread, where individuals are deceived into romantic relationships for financial

gain. Statistics from 2017–2018 indicate that 332 victims experienced losses totaling 193 million baht (Tassanakunlapan, 2020). More recent data from the Royal Thai Police revealed 2,123 cases in just the first six months of 2022, with losses amounting to 861 million baht.¹⁴ A study found that women constituted 85.61% of these victims (Tassanakunlapan, 2020). Perpetrators often falsify information to build trust, leading to significant financial losses. Online fraud targeting women, involving deceptive high-return investment schemes, further exacerbates financial harm. Urgent state action is required to ensure that every place is a safe space for women, including a cyber environment.

¹⁴ "Do not fall for the 'love and invest' scam. Over 2,123 cases have been reported." (2020). Work Point Today. <https://workpointtoday.com/politics-romance06112565/>

Leave No One Behind

The Population and Development agenda promotes rights and choices for all population groups across all genders and ages, with a special focus on vulnerable groups. These groups include, but are not limited to, women, girls, older adults, LGBTQIA+ individuals, people with disabilities, people living with HIV/AIDS, people in rural areas, and migrant workers. Each population group in diverse geographical stances, at different stages of life, has distinct needs and priorities. Furthermore, men and women of the same age may have different needs and priorities. For vulnerable groups, the challenges in their lives are more complex than for others. To ensure that no one is left behind and to secure inclusivity in population and development, it is important to empower vulnerable groups in key areas, including in the following areas:

Education:

Elimination of gender stereotypes in education and cultivating equality of gender roles and human rights is a foundation for creating an equitable and inclusive society. This can be implemented through gender-transformative programmes and interventions, for example, establishing a policy to encourage and support more women and girls to study in fields that generally generate high income, such as Science, Technology, Engineering, and Mathematics (STEM), alongside social sciences and the arts, initiating human rights, gender and social inclusion curriculum at all levels.

Economy:

Women's economic participation is crucial for driving economic growth. This can be achieved at different levels. At the individual level, this can be implemented to encourage family members to share domestic housework and unpaid care work responsibilities, allowing all members to generate additional income, pursue education, participate in social activities, and engage in training for leadership and career development, as well as self-care. At policy level, a gender responsive policies will facilitate gender

transformation in economic participation, for example, childcare services and parental leave with pay. Furthermore, the elimination of all forms of discrimination against women in the workplace and barriers to women's economic opportunities should be implemented, for instance, the elimination of sexual harassment in the workplace and addressing the gender pay gap.

Health:

Health services should be affordable, accessible, and acceptable to all based on principles of equality, equity, and dignity. To achieve such a notion, addressing gender-related barriers to healthcare, advancing gender equality, and the empowerment of populations, including women and girls, in all their diversity is required. Furthermore, promoting gender-responsive and inclusive access to health services and self-care knowledge, especially in Sexual and Reproductive Health, as well as mental health, is a foundation for achieving ICPD.

Decision Making and Leadership:

In addition to education, experience and networking, guidance and mentorship are great enablers that empower individuals from vulnerable groups to participate meaningfully in political and social activities and to build their capacity to be effective leaders. This can be done through empowering women in leadership skills, opening space and opportunities for women and girls as well as other specific groups, being suppressed from patriarchal structures, and establishing policies and measures to promote women's participation at all levels.

Beyond the scope of legal frameworks and institutional mechanisms, societal attitudes and beliefs play a critical role in perpetuating and reinforcing gender norms through socialization processes. Therefore, to achieve women's rights and a gender-equitable society, as the ICPD underscores, it is imperative to transform these societal attitudes and beliefs, particularly those propagated by entertainment media and cultural influences. This holistic approach is essential for meaningful and sustainable progress.

The Road Ahead:

Fostering a Gender-Equal Future in Thailand

As Thailand continues its journey toward gender equality, this chapter underscored the importance of adapting to the nation's evolving social and demographic landscape. While significant progress has been made, the future of gender equality in Thailand hinges on addressing several critical areas that require focused attention and innovative approaches.

First, the diversification of family structures and demographic changes demand a reassessment of existing policies and services. As family dynamics shift, with increasing numbers of single-parent households, same-sex couples, and aging individuals living alone, it is vital to provide tailored support that meets the specific needs of each group. This includes ensuring that women, who are particularly vulnerable in older age due to longer life expectancies and lifelong gender disparities, have access to financial independence, health services, and social engagement opportunities. By implementing gender-sensitive policies that account for these demographic shifts, Thailand can better support the well-being of all its citizens, particularly women who face increased risks of poverty and violence in their later years.

Second, the active involvement of men and boys is essential for advancing gender equality. Promoting shared responsibilities in domestic and unpaid care work can create a more inclusive family dynamic that benefits all genders. Encouraging male participation supports women and strengthens the social fabric, contributing to national socio-economic development.

Addressing gender-based violence, particularly its new forms in the digital sphere is another urgent priority. While integral to modern life, online platforms present new risks such as cyber harassment and exploitation. These threats disproportionately affect women and girls, leading to significant emotional and financial harm. The SoSafe Project exemplifies Thailand's innovative efforts to address major social issues using technology in the form of a digital platform, and it is imperative that such initiatives continue to evolve to address emerging threats.

Furthermore, achieving true gender equality requires recognizing the rights of all individuals, including same-sex couples. Legalizing same-sex marriage was an essential and monumental step in ensuring equal rights for LGBTQIA+ individuals. Continuing the work to build an inclusive society will not only validate the dignity and relationships of LGBTQIA+ individuals and couples but also advance broader social equality.

In conclusion, pursuing gender equality in Thailand demands more than legal reforms; it requires transforming societal attitudes and beliefs. By fostering a collective commitment to gender equity and engaging all members of society, Thailand can build a future where everyone participates fully and equally in all aspects of life.





HUMAN CAPITAL DEVELOPMENT IN THAILAND: THE LAST 30 YEARS

5

CHAPTER



Introduction

Defined loosely as the stock of 'skills, knowledge and capabilities' of the workforce (Burton-Jones and Spender, 2011), human capital is considered a productive factor that determines economic outcomes. At the individual level, it positively impacts wage and employability premia and at the national level, it promotes and sustains economic growth (OECD, 2022). Much like other types of capital, human capital must be accumulated over time. Investments in human capital also require resources in a similar fashion as investments in other forms of capital, e.g., machinery or even social networks.

The importance of human capital development is well-noted in Thailand. According to a recent report by the Equitable Education Fund (EEF, 2024),

approximately two-thirds of the working-age population in Thailand were identified as lacking foundational skills. They were low performers, particularly in reading and digital skills. This generated an economic cost valued at 20.1% of GDP in 2022.

This chapter is composed of three sections and addresses correspondingly three components of human capital: education, employment in the labour market, and health. Each section describes the evolution of related macroeconomic indicators and provides a brief overview of what has been done to improve human capital in Thailand in the past 30 years, highlighting existing challenges and policy gaps.

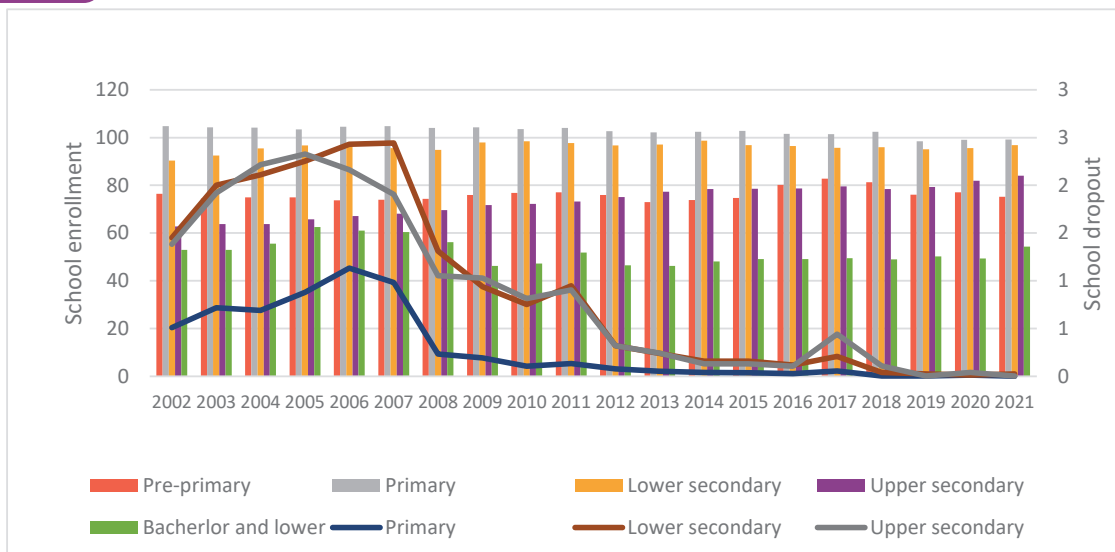
Education

In the past three decades, the Thai government has implemented policies to improve both access to and quality of education. The 1997 Constitution marked the most pivotal point in the recent history of Thailand's educational reform. Motivated by the Asian Economic Crisis, the constitution proposed progressive human capital initiatives as a strategy to accelerate economic recovery and promote future competitiveness. Examples of legislation based on the initiatives included the provision of at least 12 years of free basic education and 9 years of compulsory education (mandated by the 1999 National Education Act and its amendments in 2002 and 2003), as well as the establishment of educational service areas and administrative units (e.g. the Offices of the Basic Education, Higher Education and Vocational Education Commission),

which served as a means of decentralizing and introducing structural changes to the system (Fry and Bi, 2013; Sangnapaboworn, 2018; Ministry of Education, n.d.).

More recent attempts to further reform education have met with limited success. Proposals for what was dubbed "the second decade of educational reform (2009-2018)" (with the first decade referring to 10 years after the 1999 National Education Act) represented a notable example. With their focus on strengthening learning opportunities, educational quality and civic participation in educational management, the proposals were expected to make an important difference. Unfortunately, they were interrupted by a series of political unrest in 2010-2011 and a military coup in 2014 (Sangnapaboworn, 2018).

Figure 5.1 School enrollment and school dropout rates, 2002-2022 (%)



Source: Office of the Permanent Secretary, Ministry of Education; Office of the Basic Education Commission (OBEC)

Despite the reform discontinuities, Thailand has made considerable progress in education provision. The school enrolment rate among the school-age population has risen steadily in the past two decades (Figure 5.1), from 77.8% in 2002 to 83.2% in 2022. The crude enrolment rates among the population aged 6-11 and 12-14, referring to the official primary and lower secondary school age ranges, respectively, are currently close to 100%. For higher levels of

education, which are not compulsory, the enrolment rates are lower but have similarly been on the rise. For upper secondary education, the enrolment rate increased from 60.8% in 2002 to 84.0% in 2022, while, for university education (including bachelor's degrees and undergraduate diplomas), it rose from 45.4% to 54.3% during the same period. The school dropout rate, on the other hand, has been less than 1% since 2010.



Table 5.1 Average years of education by gender and age, 2002-2022

Table 2: Average years of education by gender and age							
	Age group	2002	2006	2010	2014	2018	2022
Total	15 - 39	9.3	10.1	10.6	10.7	10.8	11.2
	40 - 59	6.3	6.9	7.4	7.4	8.2	9.1
	60 and over	3.8	4.2	4.6	4.8	5.1	5.8
Male	15 - 39	9.3	10.0	10.2	10.3	10.3	10.7
	40 - 59	6.8	7.4	7.8	7.7	8.4	9.2
	60 and over	4.5	4.9	5.3	5.4	5.7	6.5
Female	15 - 39	9.3	10.2	10.9	11.1	11.3	11.7
	40 - 59	5.9	6.5	7.1	7.2	7.9	9.0
	60 and over	3.2	3.6	4.1	4.3	4.6	5.4

Source: National Statistical Office of Thailand (NSO), analyzed by the Office of the National Economic and Social Development Council (NESDC)

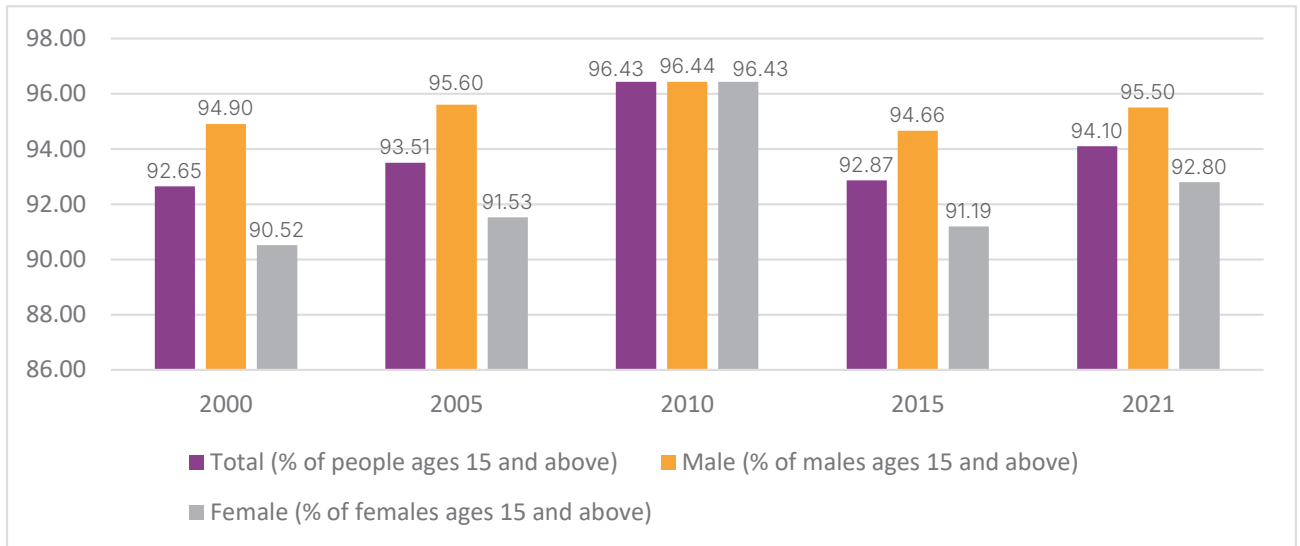
The expansion of learning opportunities is also reflected through an upward shift in educational attainment across generations over time. From 2002 to 2022, the average years of formal education increased from 9.3 to 11.2, from 6.3 to 9.1, and from 3.8 to 5.8 for the population aged 15-39, 40-59, and 60 and over, respectively (Table 5.1).

The gender gap in education has narrowed. In 2002, in the 40+ age groups, men were better educated than women by approximately one year on average (Table 5.1). By 2022, women in the 15-39 age group had become better educated than men, and the gap between men and women in the 40-59 age group had been drastically reduced, falling from 0.9 to 0.2 years within the span of two decades.



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Figure 5.2 Adult literacy rate (% of people ages 15 and above), 2000-2021



Source: World Development Indicators



As a result, Thailand’s adult literacy rate is relatively high. It has been over 90% for both genders since 2000 (Figure 5.2), higher than the global average of 87.0% and comparable with the average literacy rate among upper middle-income countries of 95.9% in 2022 (according to the World Development Indicators).

With recent lifelong learning efforts, it is expected that access to education in Thailand will be further enhanced in the future. In 2005, the government pushed forward what was known as the Thailand Cyber University Project to support higher education institutions to develop e-learning materials and educational resources, thereby leveraging

technology to improve the quality of learning. In 2015, a Massive Open Online Course (Thai MOOC) system was developed, providing an online platform for knowledge to be shared with the general public (Thailand Cyber University, n.d.). In 2021, addressing the fact that older individuals may not be accustomed to online learning, elderly schools were established nationwide. These schools provide a space for social interactions and facilitate the development of age-appropriate occupational skills for older people (Department of Older Persons, 2021).

Major Challenges to Progress

Unequal Access to Education

The Thai education system faces significant challenges. First, despite the provision of free and compulsory education, access to education is not universal. It remains closely linked with personal characteristics and circumstances, including, for example, socioeconomic status and adolescent pregnancy. The fact that vulnerable population sub-groups cannot fully attain free basic education indicates that social safety nets in Thailand are lacking and that addressing access problems requires coordinated efforts from both within and outside of the education system.

Table 5.2 School enrollment rates by income decile, 2011 and 2021

Year	2011			2021		
	Primary	Lower secondary	Upper secondary	Primary	Lower secondary	Upper secondary
1st decile (10% poorest)	86.3	64.0	42.0	85.8	64.9	51.1
2nd decile	87.6	62.3	47.7	86.3	70.1	60.1
3rd decile	85.8	68.2	51.8	90.6	71.0	58.5
4th decile	88.6	72.1	55.2	87.6	66.1	62.3
5th decile	87.6	65.9	54.2	85.8	67.0	65.9
6th decile	84.8	71.8	62.3	85.3	69.1	70.2
7th decile	86.3	74.9	58.7	86.4	68.2	71.8
8th decile	88.8	75.3	64.5	92.1	74.9	69.9
9th decile	87.6	72.8	65.5	90.3	75.3	78.4
10th decile (10% richest)	91.1	81.3	72.2	92.7	80.8	78.7
Total	87.2	69.6	55.9	87.6	69.5	64.1

Source: National Statistical Office of Thailand (NSO), analyzed by the Office of the National Economic and Social Development Council (NESDC)

Notwithstanding the free education, school enrolment is associated with socioeconomic status (Table 5.2). In 2011, the enrolment rates in primary, lower secondary and upper secondary education among children from the poorest 10% of households ('poor' is defined based on household income) were 86.3%, 64.0%, and 42.0%, respectively. Enrolment rates for children from the richest 10% households were 91.1%, 81.3% and 72.2%. Enrolment—especially in upper secondary education—has improved, but the inequity persists. In 2021, the difference in the enrolment rates in upper secondary education

between children from the poorest 10% and those from the richest 10% households was approximately 27.6%.

Disability is negatively linked with school enrolment. According to the 2022 Disability Survey, only 85.9% of disabled persons aged 5 or over in Thailand were formally educated (National Statistical Office, 2023). More than half (51.2%) left the system at the pre-primary level, followed by the primary level (15.5%) and the lower secondary level (7.8%). Slightly more than one-tenth of the disabled

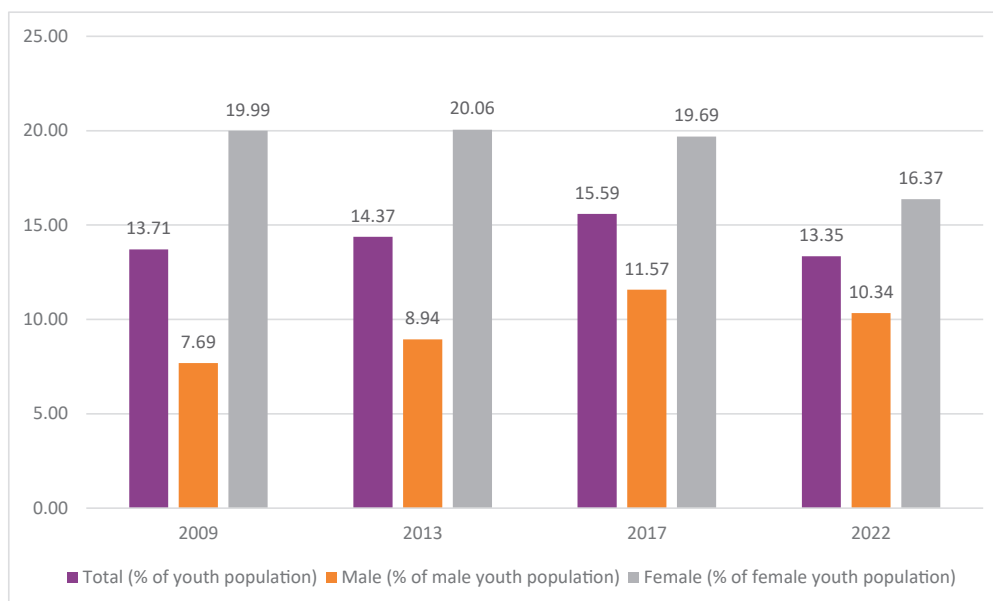
population went beyond compulsory schooling, with 5.9% having obtained upper secondary education and 5.3% having received a diploma or higher level of education.

Despite the fact that the Thai government has legally extended access to education to migrant families, barriers exist for migrant children. Under the 2005 Cabinet Resolution on Education for Unregistered Persons, all individuals can access 15 years of basic education without producing evidence of civil registration or proof of citizenship status (United Nations Thematic Working Group on Migration in Thailand, 2019). Nevertheless, according to the 2019 Thailand Migration Report, approximately 200,000 migrant children (equivalent to 55%) were reported to be out of school.

Adolescent pregnancy complicates educational attainment, although the situation has improved in recent years. Since the enactment of the 2016 Act on Adolescent Pregnancy Prevention and Solution, both the adolescent pregnancy rate and the school dropout rate of pregnant students have declined. Among adolescents aged 15-19, the birth rate fell from 5.33% in 2012 to 2.1% in 2022 (Bureau of Reproductive Health, 2024). The school drop-out rate of pregnant students was 53.5% in 2016 and decreased to 36.1% in 2021 (Bangkok Post, 2023). A higher proportion of pregnant students is expected to remain in school in the future, as the government issued a new ministerial regulation in the Royal Gazette in 2023, prohibiting schools from dismissing pregnant students.

Left Behind – Not in Employment, Education or Training

Figure 5.3 Share of youth not in employment, education, or training (NEET) (%), 2009-2022



Source: World Development Indicators

The share of young people not in employment, education or training (NEET) is non-negligible, hovering around 13-16% within the past decade (Figure 5.3). This represents a lost opportunity for current and future economic growth and is an indicator of future socioeconomic problems, as youth NEETs have higher risks of becoming unemployed, poor, and socially excluded (International Labour Organization, 2022; United Nations Children's Fund et al., 2023). Although young women make up a larger proportion of youth NEETs, there is an upward trend for NEET concentrations among young men and a downtrend trend among young women.

Causes of NEET are based on complex interactions among youth characteristics, contextual factors (including family, peer, and school situations), socioeconomic environment, and youth experiences regarding education, as well as their perception of life (United Nations Children's Fund et al., 2023). For young women, major causes of NEET include pregnancy (as discussed above) and family poverty (which leads to full-time household responsibilities). For young men, they are disability and lack of motivation in education (International Labour Organization, 2022).

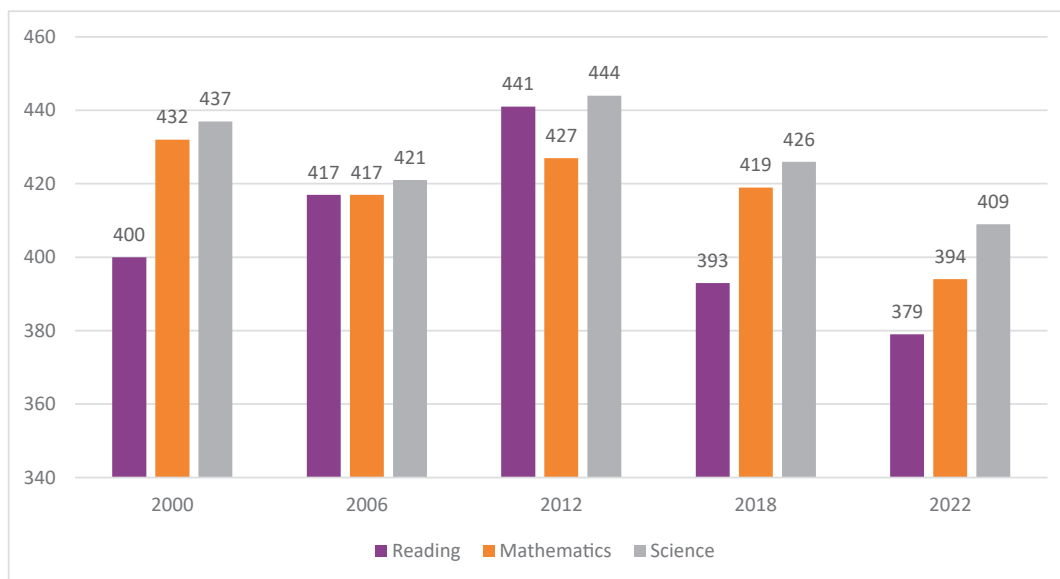
Table 5.3 Thai students' scores in four main subjects: Thai, English, Mathematics, and Science (%), 2003-2022

Education level	Subjects	2003	2007	2011	2015	2019	2022
Grade 6	Average score of 4 subjects	42.56	43.10	45.41	43.92	37.99	39.73
	Thai	45.26	36.58	50.04	49.33	49.07	53.89
	English	41.14	38.67	38.37	40.31	34.42	37.62
	Mathematics	41.70	47.55	52.40	43.47	32.90	28.06
	Science	42.14	49.58	40.82	42.59	35.55	39.34
Grade 9	Average score of 4 subjects	41.24	36.66	35.72	35.82	36.30	35.68
	Thai	53.98	48.05	48.11	42.64	55.14	52.95
	English	37.92	28.68	30.49	30.62	33.25	32.05
	Mathematics	34.99	34.70	32.08	32.40	26.73	24.39
	Science	38.07	35.21	32.19	37.63	30.07	33.32
Grade 12	Average score of 4 subjects	39.21	35.01	28.58	33.58	31.50	29.30
	Thai	44.49	46.76	41.88	49.36	42.21	44.09
	English	39.14	28.59	21.80	24.98	29.20	23.44
	Mathematics	33.99	30.06	22.73	26.59	25.41	21.61
	Science	N/A	34.62	27.90	33.40	29.20	28.08

Source: The National Institute of Educational Testing Service (NIETS), analyzed by Office of the National Economic and Social Development Council (NESDC)

Finally, the quality of education remains a pressing issue. Based on national standardized examinations administered by the National Institute of Educational Testing Service, the average scores in four main subjects (including Thai, English, Mathematics, and Science) and the average overall score across the four subjects has been less than 50% every year in the past two decades (Table 5.3). Students in grade 6 have consistently performed better than those in grade 9, and students in grade 9 have consistently outperformed those in grade 12.

Figure 5.4 PISA scores of 15-year-old Thai students, 2000-2022



Source: Institute for the Promotion of Teaching Science and Technology (IPST)

A similar conclusion can be drawn by analyzing the OECD's Programme for International Student Assessment (PISA) test results. PISA tests aim to measure the scholastic abilities of 15-year-olds across the globe, and the results are scaled to fit a normal distribution with a mean score of 500 points and a standard deviation of 100 points, having no maximum or minimum. PISA performance of Thai students has been below the global average in the past two decades (Figure 5.4). In 2022, while the

average scores for reading, mathematics, and science among OECD nations were 476, 472, and 485, respectively, they were 379, 394, and 409 for Thailand. There was a significant decline in test scores for all subjects, likely due to COVID-19, as well as a wide socio-economic gap in scholastic performance, with students from wealthier households having consistently obtained better scores than those from less wealthy households (OECD, 2023; PISA Thailand, 2022).



Labor Market

A legal infrastructure has been built and constantly updated to encourage labour participation and protect workers. According to the Ministry of Labour (2024), labour laws in Thailand may be classified into four categories. The first category pertains to labour protection, encompassing laws that impose requirements to ensure fair working conditions (e.g., the 1975 Labour Relations Act, the 1979 Labour Court and Labour Court Procedure Act, and the 1998 Labour Protection Act, with amendments during 2008-2019) as well as those aimed at maintaining a safe working environment for workers in specific sectors (e.g., the 2010 Homeworkers Protection Act, the 2015 Maritime Labour Act, and the 2019 Labour Protection in Fishing Work Act) (Kongtip et al., 2015; Suttawet and Bamber, 2018).

The second category attempts to promote employment for the general population and specific population

subgroups. It includes, for example, the 1985 Employment Arrangement and Jobseeker Protection Act and its amendments in 1994 and 2001, the 1978 Alien Employment Act and its amendments in 2001 and 2008, and the 2007 Persons with Disabilities Empowerment Act and its amendment in 2013.

The third category involves providing skill development programmes for different groups of workers. Examples of laws in this category include the 2002 Skill Development Promotion Act and its amendment in 2014 and, to a lesser extent, the 2008 Civil Service Act and the 2015 Gender Equality Act.

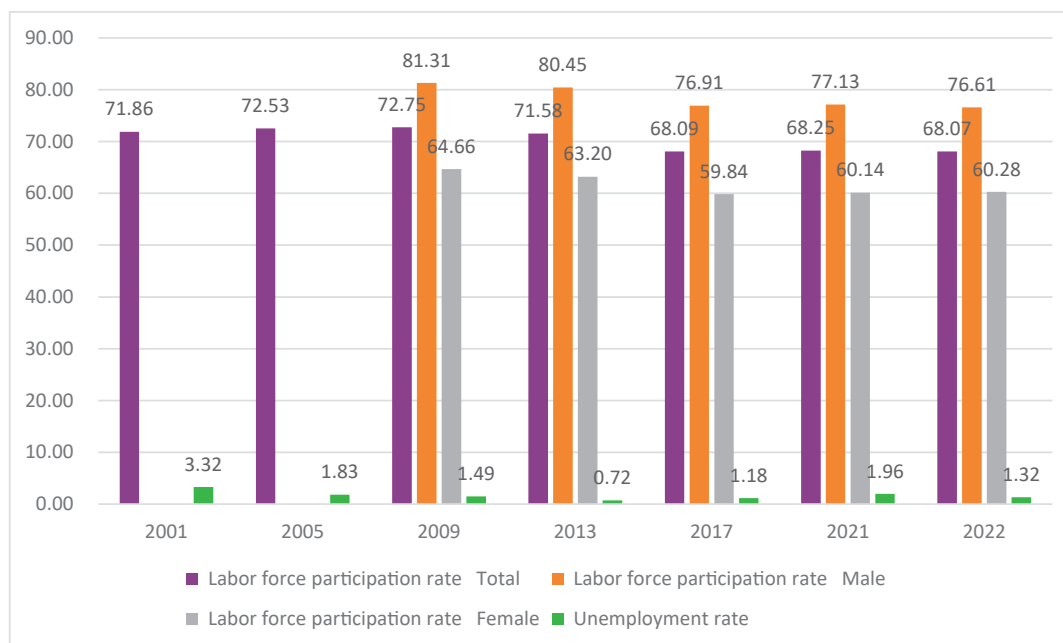
The final category is intended to strengthen social security, providing (monetary) assistance to workers in difficult or uncertain situations. According to the 1990 Social Security Act and its amendments in 1994, 1999, and 2015, members of the Social Security



Fund—which includes formal-sector workers who are legally required to contribute to the fund and informal-sector and self-employed persons who can join on a voluntary basis—are entitled to seven benefits: sickness, maternity, invalidity, death, old-age, child allowance, and unemployment. In addition, under the 1994 Workmen’s Compensation and its 2018 amendment, formal-sector workers are entitled to monetary compensation if they experience work-related injuries, fatalities, and disabilities as well as certain occupational diseases (Kongtip et al., 2015).

Thailand currently has plans to expand the scope of labour protection. As one of the founding members of the International Labour Organization (ILO), the country is committed to fulfilling the obligations to uphold basic human values inherent in the ILO Declaration on Fundamental Principles and Rights at Work. More recently, the government has developed a Decent Work Country Programme (DWCP) covering the period of 2023-27, with a view to strengthening labour participation and protection (ILO, 2024). It has also devised a 20-year national strategy for the period of 2017-2036, serving some of the same purposes (Ministry of Labour, 2016).

Figure 5.5 Labour force participation and unemployment rate (%), 2001-2022



Source: National Statistical Office of Thailand (NSO).

Remarks: 1) Seasonal inactive labour force is not counted in the unemployment rate.

2) Sex-disaggregated labour force participation rate unavailable for years 2001 and 2005.

Thailand has enjoyed a relatively stable labour market. The labour force participation rate has been around 70% in the past two decades, with a higher ratio of men participating in the labour market than women (around 80% versus 60%). On the other

hand, the unemployment rate has been less than 2% since 2005 (Figure 5.5), with a slight increase in 2021-2022 when the economy was hit by the COVID-19 pandemic.

A Shifting Age Profile

Table 5.4 Labour force and employment rate by age group, 2001-2022

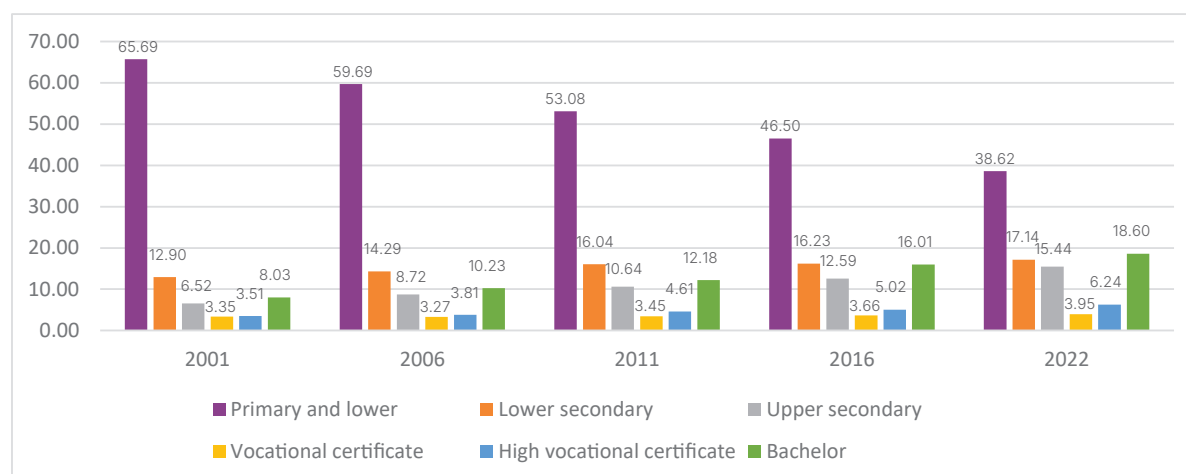
Age group	2001	2006	2011	2016	2022
15-19	5.60	4.20	3.27	2.32	1.47
20-24	12.30	10.00	9.18	8.31	7.95
25-29	14.70	12.80	11.75	10.84	11.55
30-34	14.10	13.40	12.32	11.11	11.05
35-39	13.10	13.60	12.81	12.14	10.76
40-49	21.90	24.40	25.00	24.97	23.41
50-59	12.60	14.70	17.71	20.11	21.87
60 and over	5.70	6.90	7.97	10.20	11.94
Total	100	100	100	100	100

Source: National Statistical Office of Thailand (NSO)

The age profile has shifted within the labour market. The younger population has increasingly made up a smaller proportion of the labour force. The opposite is true for the older population. In 2001, the population aged 15-19, 20-24, 50-59 and 60+ constituted 5.6%, 12.3%, 12.6% and 5.7% of the labour force, respectively. In 2022, the figures were 1.5%, 8.0%, 21.9% and 11.9% respectively (Table 5.4), reflecting Thailand's demographic transition into an aged society.

Increased Qualifications and Growing Skills

Figure 5.6 Labour force by education level (%), 2001-2022



Source: National Statistical Office of Thailand (NSO)

In addition to becoming older, the Thai workforce has also become better educated. People with at least a Bachelor's degree now make up a larger proportion of the workforce than they did two decades ago (18.6% in 2022, compared to 8.0% in 2001), while those with primary education or less have made up a smaller proportion of the workforce over time (38.6% in 2022, compared to 65.7% in 2001) (Figure 5.6). The rise in average years of schooling discussed earlier suggests that people stay in school longer and enter the labour market at an older age.

Informal Sector Employment

Table 5.5 Employment in formal and informal sectors by age group and education level (%), 2009-2022

Year	2009		2014		2019		2022	
Age group	Formal sector	Informal sector	Formal sector	Informal sector	Formal sector	Informal sector	Formal sector	Informal sector
15 - 19	35.42	64.58	40.83	59.17	43.33	56.67	43.51	56.49
20 - 24	45.36	54.64	57.44	42.56	57.07	42.93	57.37	42.63
25 - 29	53.83	46.17	64.23	35.77	65.83	34.17	66.32	33.68
30 - 34	48.52	51.48	60.76	39.24	63.84	36.16	64.92	35.08
35 - 39	41.53	58.47	51.05	48.95	59.68	40.32	63.55	36.45
40 - 44	35.49	64.51	41.65	58.35	49.80	50.20	56.80	43.20
45 - 49	31.31	68.69	36.32	63.68	41.57	58.43	48.15	51.85
50 - 54	27.91	72.09	31.73	68.27	35.16	64.84	41.68	58.32
55 - 59	20.94	79.06	26.65	73.35	30.49	69.51	33.79	66.21
60 and over	8.96	91.04	9.86	90.14	11.97	88.03	13.65	86.35
Total	36.63	63.37	42.42	57.58	45.73	54.27	48.98	51.02
Education level								
No education	25.14	74.86	43.33	56.67	49.64	50.36	47.52	52.48
Primary and lower	17.03	82.97	15.78	84.22	15.68	84.32	16.64	83.36
Primary	30.37	69.63	31.40	68.60	32.70	67.30	33.79	66.21
Lower secondary	40.60	59.40	44.73	55.27	46.09	53.91	48.01	51.99
Upper secondary	47.66	52.34	51.73	48.27	53.54	46.46	55.12	44.88
Bachelor	72.80	27.20	75.58	24.42	75.47	24.53	74.59	25.41
Total	36.63	63.37	42.42	57.58	45.73	54.27	48.98	51.02

Source: National Statistical Office of Thailand (NSO)

Compared to the formal sector, informal-sector employment is larger but has shrunk over time. In 2009, 63.4% of employed persons aged 15+ worked in the informal sector. The proportion became 57.6% in 2014 and 51.0% in 2022 (Table 5.5). The association between age and informal-sector employment is changing. More than half of employed persons aged 15-19 and 40-59 and almost all employed persons aged 60+ have traditionally been in the informal labour market and remain so to date. On the other

hand, employed persons aged 20-39, who were more likely to work in the informal market a decade ago, are now more likely to work in the formal sector – a trend that has been observed since 2014. The association between educational attainment and informal-sector employment is quite clear. Employed persons with a higher level of education (especially, from upper secondary education upward) are more likely to engage in formal-sector employment.

Challenges in the Thai Labour Market

Slow Income Growth

Table 5.6 Average income and spending by income quintile, 1998-2021

	Quintile	1988	1994	2000	2006	2011	2017	2021
Average income (THB/month)	Quintile 1 (Lowest income)	244	451	668	1,083	1,844	2,426	2,838
	Quintile 2	429	815	1,231	2,178	3,460	4,424	5,002
	Quintile 3	660	1,294	1,946	3,476	5,122	6,639	7,312
	Quintile 4	1,098	2,181	3,357	5,756	7,839	10,159	11,027
	Quintile 5 (Highest income)	2,897	6,342	9,713	16,059	21,771	24,710	25,385
	Total	1,066	2,217	3,383	5,710	8,007	9,671	10,313
Average spending (THB/month)	Quintile 1 (Lowest income)	405	759	931	1,572	2,439	2,423	2,667
	Quintile 2	558	999	1,308	2,272	3,202	3,746	4,099
	Quintile 3	749	1,321	1,739	3,064	4,197	5,251	5,669
	Quintile 4	1,051	1,962	2,626	4,425	5,679	7,484	8,084
	Quintile 5 (Highest income)	2,211	4,155	5,471	8,939	10,749	14,759	15,206
	Total	995	1,839	2,415	4,054	5,253	6,733	7,145
Income quintile share ratio	Quintile 5/Quintile 1	11.88	14.07	14.54	14.83	11.81	10.18	8.95

Source: National Statistical Office of Thailand (NSO), analyzed by Office of the National Economic and Social Development Council (NESDC)

Several challenges exist in the Thai labour market. First, income growth is sluggish and is not commensurate with the cost of living. The income difference between the top and bottom quintiles has been approximately 12-fold in the past three decades, and while workers with more income are able to cover their living expenses, those with less income struggle. In 1988, for people in the bottom income quintile, the average income was 244 Thai

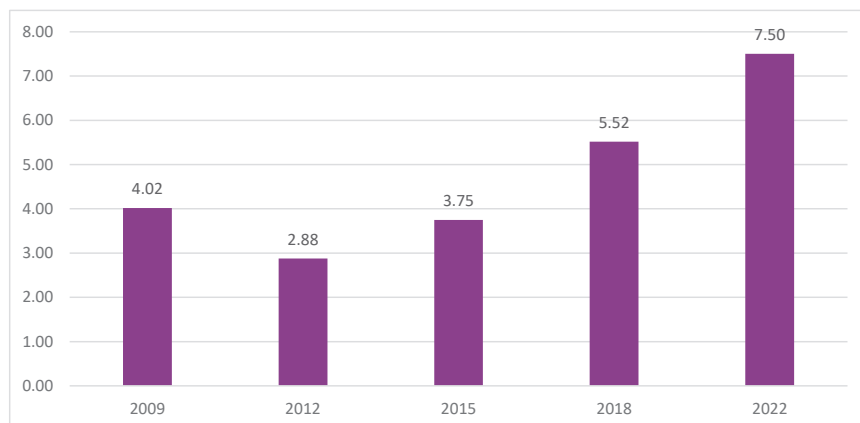
Baht (THB) per month, while the average spending was 405 THB per month (Table 5.6). For people in the top income quintile, the average monthly income was 2,897 THB, just enough to cover the average spending of 2,211 THB. In 2021, the average monthly income and spending of people in the bottom income quintile were 2,838 THB and 2,667 THB, respectively; they were 25,385 THB and 15,206 THB, respectively, for those in the top income quintile.

Inclusivity for Vulnerable Groups

Inclusivity in the labour market continues to be unresolved. The issue is particularly evident when examining data pertaining to four population sub-groups: migrants, persons with disabilities, female workers, and older workers.

Migrant Workers

Figure 5.7 Labour force by education level (%), 2001-2022



Source: Department of Employment, Ministry of Labour

Migrants constitute an increasingly important part of the workforce. Their contributions to the Thai economy were estimated to account for approximately 0.03% and 0.06% of real national income in 1995 and 2005, respectively (Pholphirul and Rukumnuaykit, 2010). The number of documented immigrants (inclusive of migrant workers) is on a rising trend, increasing from approximately 1.5 million in 2009 to 2.9 million in 2022. This is equivalent to 4.0% and 7.5% as a share of the Thai labour force (Figure 5.7).

Migrant workers are protected under Thai laws, most notably the 1990 Social Security Act and the Criminal Code, the 1998 Labour Protection Act, and the 2008 Alien Employment Act, all of which ensure that migrant workers, irrespective of their status, are treated in accordance with international labour standards (Paitoonpong and Chalamwong, 2012). Nevertheless, the existing legal framework tends to protect more predominantly workers in the formal sector. In contrast, a large proportion of migrant workers are employed in the informal sector,

including agriculture, fishing and domestic work. It has been reported that their basic labour rights have often been violated (Harkins, 2019). A recent report by Yeenang (2023) suggests that migrant workers in the agricultural sector experience poor living conditions, are susceptible to wage exploitation and misinformation, have high risks of forced labour, and find legal provisions in Thailand to be neither sufficient nor effective in addressing their grievances.

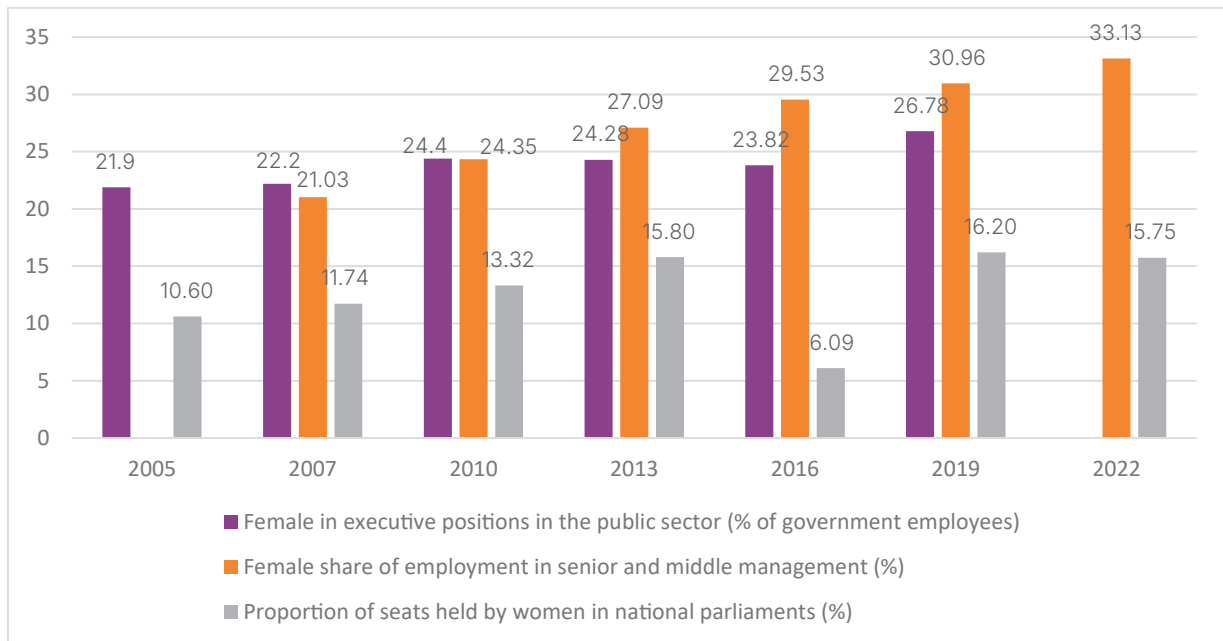
Workers with Disabilities

Persons with disabilities (PWDs) represent another population sub-group that has yet to be fully integrated into the workforce. The government has attempted to increase the employment of PWDs using legal measures. In addition to public-private partnership programs often embedded in National Plans on the Empowerment of Persons with Disabilities, the Persons with Disabilities Empowerment Act was passed in 2007 and amended in 2013 to enhance opportunities in terms of health, employment, and living standards in the hopes that self-reliance would be achieved among PWDs. The Act encompasses, inter alia, the establishment of PWD service centers as well as a disability employment quota, where businesses and state agencies are required to either hire PWDs

in a fixed proportion (i.e., 1%) or contribute to the National Disability Fund or support employment of PWDs in alternative ways (Asavanirandorn et al., 2020; Cheausuwantavee and Keeratiphantawong, 2021; Thanathiti, 2019). Despite these attempts, employment of PWDs remains limited. According to the 2022 Disability Survey (National Statistical Office, 2023), PWDs made up 6% of the total population in Thailand in 2022. Among PWDs aged 15 years and over, only 21.2% were employed, among which 49.2% worked in the agricultural sector and 38.8% in the trade and services sector. The remaining 78.8% were unemployed, with disability cited as the foremost reason why one was not part of the labour force.

Female Workers

Figure 5.8 Gender in the labour market (%), 2005-2022



Source: 1) Office of the Civil Service Commission (OCSC) 2) World Development Indicators

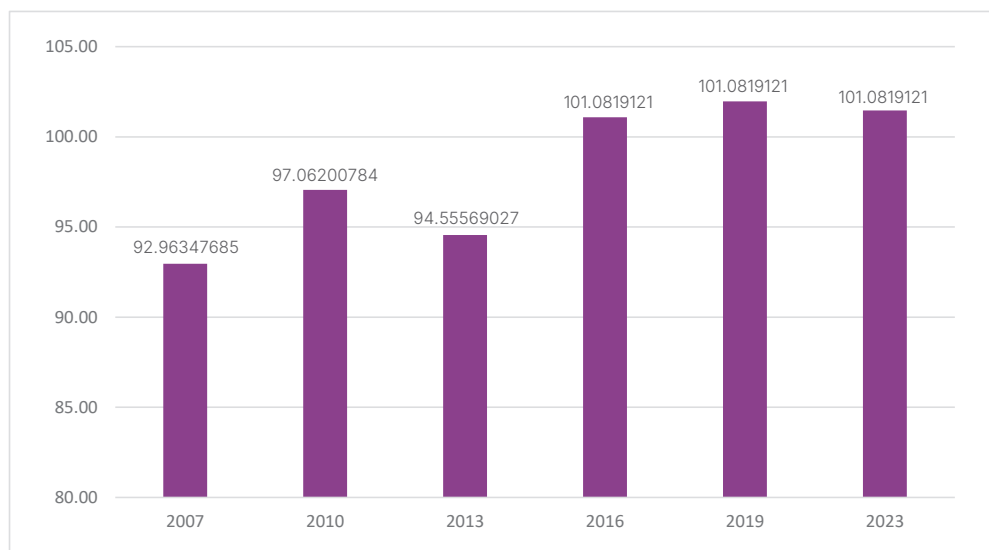
Remarks: 1) Columns for the female share of employment in senior and middle management (%) and the proportion of seats held by women in national parliaments (%) are missing in 2005 and 2022, respectively, due to the unavailability of data

Despite legal provisions to ensure equal pay and prevent gender discrimination, most notably the 2010 Homeworkers Protection Act, the 2015 Gender Equality Act, and the 2019 Labour Protection Act (Kongtip et al., 2015; Moroz et al., 2021), differences in terms of labour-market opportunities among male and female workers persist. According to the World Bank gender data portal, the labour force participation rate among females has been lower than that among males in the past decades; in 2023, 59.2% of the female population participated in the labour market, compared to 75.6% among the male population (World Bank, 2024). Career advancement opportunities tend to be more limited for women (Figure 5.8). During 2005-2022, around 21-27% of employees in executive positions in the public

sector and approximately 21-34% of those in senior and middle management were female, while women held less than 20% of seats in the Thai parliament.

Gender imbalance similarly exists in the science, technology, engineering, and mathematics (STEM) job market. In 2023, the share of female employment in STEM in Thailand was 42.80%, while it was 57.20% for males (ILO, 2023). Nevertheless, the extent to which women are involved in STEM fields is better in Thailand than in many countries. In 2021, the proportion of female inventors in Thailand was 26.3%, which was considerably larger than the global average of 16.5% (Rubin and Utomo, 2022).

Figure 5.9 The female-to-male earnings ratio (%), 2007-2023



Source: National Statistical Office of Thailand (NSO)

Although the gender wage gap has improved, with the female-to-male earnings ratio increasing from 92.96 in 2007 to 101.47 in 2023 (Figure 5.9), women's wage is disproportionately affected by parenthood. Using the 1985-2017 waves of the nationally-representative Labour Force Survey, Paweenawat and Liao (2022) reported evidence of parenthood wage penalty for both genders. It found that the

wage gap between mothers and non-mothers was sizeable and on an increasing trend. The fatherhood penalty, on the other hand, was smaller and relatively unchanged in the past decade. These findings are consistent with the fact that Thai women are traditionally expected to perform household chores, and that their family and the state do not adequately support them to be able to achieve career success.

Older Workers

The final population sub-group to consider is older people. Currently making up approximately 20% of the population, the aged population is expected to expand in size, projected to reach 31% in 2060 (World Bank, 2021). Without any interventions, rapid population aging (and, correspondingly, a shrinking of the working-age population) will cause a drop in economic growth and an increase in the need for publicly-funded welfare services (World Bank, 2021). According to the 2019 National Transfer Account, consumption expenditure among the population aged 60-80 years was valued at approximately 141,948 baht per person per year or 11,829 baht per month, with 3,381 baht coming from the government and 8,448 baht from the elderly themselves (Department of Older Persons, 2023).

Population aging does not bring about only challenges but also opportunities. Referring specifically to economic activities that serve the demands of the older population, the so-called 'silver economy' is expected to become substantially larger in the next decade (World Bank, 2020). According to projections by the World Data Lab (World Bank, 2020), the total annual spending power of people aged 60 and over in Asia will increase from 4.2 trillion US dollars in 2019 to 8.6 trillion US dollars by 2030. In Thailand, it has been predicted that the silver economy will grow at an average rate of 4.4% per annum, and its value will reach 2.6 trillion Thai baht by 2030 (Krungthai, 2023).

The expansion of the silver economy highlights the importance of financial independence, defined loosely as the ability to support one's own consumption needs without having to rely on the assistance of others. In addition to accumulating pre- and post-retirement savings, one way older people could be more financially independent

is to engage in paid work. Policies encouraging the employment of older workers in Thailand are manifold. Examples of past and existing national frameworks include National Plans for Older Persons in 1982–2001 and 2002–2021, the 1999 Declaration of Thai Senior Citizens, the 2005 Strategic Framework in the Preparation of Thai Society for an Aging Society, the 2017–2021 National Master Plan of Labour, and the 20-Year National Strategy (2017–2036) – all of which acknowledge the importance of the older workforce in the face of rapid population aging and suggest that employment be promoted and occupational training and job-matching advice be provided for older people. These plans are supplemented by the 2003 Act on Older Persons, Royal Decree no. 639 (issued in March 2017), and a memorandum of understanding signed by the Ministry of Labour in March 2019, which not only protect labour rights of older people but also provide tax and non-tax incentives for employers hiring people over 60 years old (Asavanirandorn et al., 2020; Moroz et al., 2021).



Table 5.7 Elderly population and labour force participation rate, 2007-2022

Year	2007	2010	2013	2016	2019	2022
Elderly population aged 60 and above (million)	7.05	7.99	8.60	10.85	12.21	13.07
Labor force aged 60 and above (million)	2.66	3.04	3.60	3.90	4.30	4.76
Labor force participation rate of elderly (%)	37.71	38.04	41.86	35.96	35.18	36.44

Source: National Statistical Office of Thailand (NSO)

Nevertheless, the labour force participation rate among older people in Thailand remains low, especially in comparison to the target of 80% set forth by the government under the 2018 National Agenda on the Aged Society (Asavanirandorn et al., 2020). The size of the older workforce (defined as age 60 and over) has indeed grown substantially, yet the labour force participation rate has been stagnant (Table 5.7). In 2007, out of 7.1 million older people, approximately 37.7% participated in the labour market. In 2022, the number of older people became 13.1 million, among which 4.8 million or 36.4% were

in the labour force. The fact that the Thai government has not been able to produce a larger proportion of older workers indicates, to a certain extent, that the existing policy framework may be inadequate in addressing the complexities of the labour-market behaviours of older Thai people. Using a nationally representative sample in Thailand, Witvorapong et al. (2022), for example, demonstrated the probability that an average person would save decreases if he/she expects to financially rely on his/her family in old age.

Health

Table 5.8 Health Statistics, 1990-2021

Year	1990	1995	2000	2005	2010	2015	2021
Life expectancy at birth (years)							
Total	70.45	70.95	72.32	73.82	76.13	77.72	78.72
Male	66.76	66.54	68.43	70.04	72.09	73.54	74.52
Female	74.20	75.74	76.43	77.76	80.36	82.03	83.04
Survival to age 65							
Male (% of cohort)	65.55	64.49	67.08	69.01	71.55	73.29	75.63
Female (% of cohort)	76.93	79.29	80.54	82.43	85.44	87.24	88.80
Mortality rate							
Neonatal (per 1,000 live births)	20.70	16.00	12.40	9.70	7.70	6.10	4.70
Infant (per 1,000 live births)	30.30	23.70	18.70	14.70	11.70	9.30	7.10
Under-5 (per 1,000 live births)	37.10	28.40	21.90	17.20	13.60	10.80	8.30

Source: World Development Indicators

Health is an area of human capital development in which Thailand has made considerable progress. This is reflected through changes in key health indicators over time (Table 5.8). Life expectancy at birth has increased significantly, from 70.45 years in 1990 to 78.72 years in 2021. The ratio of Thai people surviving to age 65 has increased by approximately 10% for both genders during the same period. The neonatal, infant, and under-5 mortality rates have similarly improved and are currently under 10 deaths per 1,000 live births.



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Table 5.9 Health Expenditure, 2000-2020ⁱⁱⁱ

Year	2000	2004	2008	2012	2016	2020
Domestic general government health expenditure (% of GDP)	1.71	2.01	2.61	2.68	2.85	3.07
Current health expenditure (% of GDP)	3.10	3.14	3.46	3.52	3.94	4.36
Out-of-pocket expenditure (% of current health expenditure)	34.19	26.41	14.70	13.42	10.81	10.54

Source: World Development Indicators

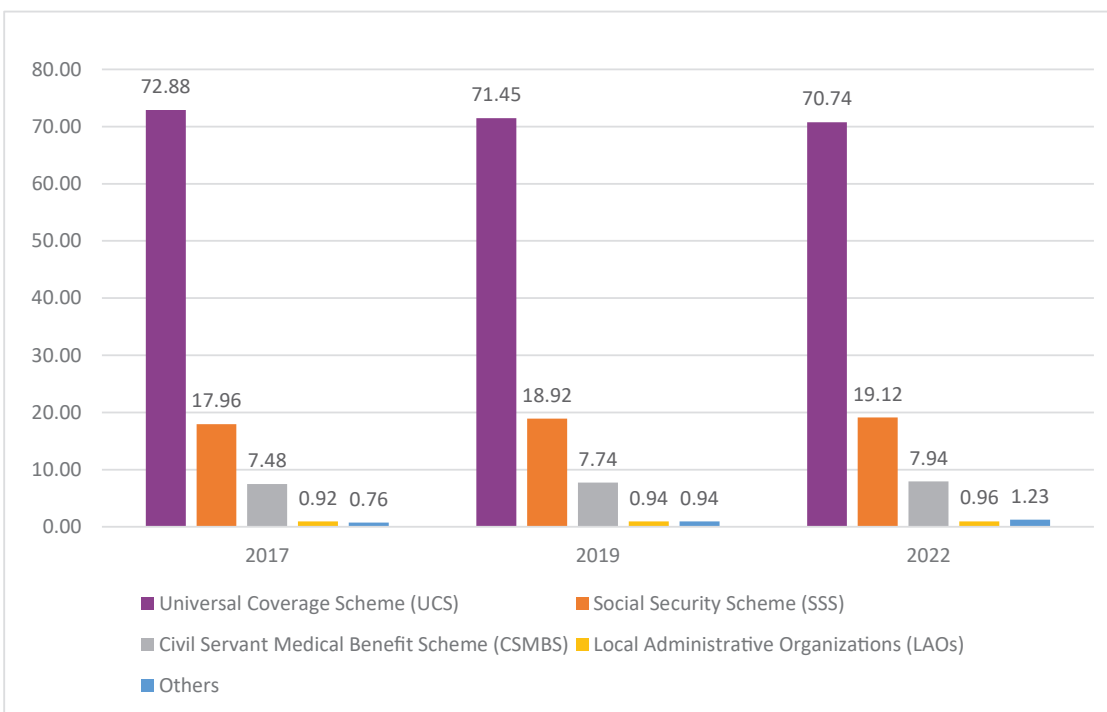
The Thai government has substantially invested in population health (Table 5.9). Government health expenditure increased from 1.71% of GDP in 2000 to 3.07% in 2020. Current health expenditure is slightly less than 5% of GDP today, and out-of-pocket expenditure currently makes up about 10% of the total health expenditure, compared to approximately 30% two and a half decades ago.

ⁱⁱⁱ - Domestic general government health expenditure refers to public expenditure on health from domestic sources, including, for example, internal transfers and grants, subsidies to voluntary health insurance beneficiaries, and social health insurance contributions (World Bank Group, n.d.).

- Current health expenditure refers to the value of health-related goods and services consumed each year and does not include capital health expenditures (e.g., buildings and machinery) (World Bank Group, n.d.).

- Share of out-of-pocket payments of total current health expenditures. Out-of-pocket payments are spending on health directly out-of-pocket by households. (World Bank Group, n.d.).

Figure 5.10 Percentage of the population covered by each health insurance scheme (%), 2017-2022



Source: National Health Security Office (NHSO)



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Universal health coverage has been achieved since 2002. There are three main public health insurance schemes: (1) Civil Servant Medical Benefit Scheme (CSMB), which covers current and retired civil servants as well as their dependents; (2) Social Security Scheme (SSS), which covers employees in the formal sector; and (3) Universal Coverage Scheme (UCS), which covers the rest of the population (including informal workers, unemployed people, older people and children) (Popattanachai et al., 2021; Supakankunti and Witvorapong, 2017). There are also other smaller schemes, including e.g. those offered to employees of local administrative organizations, persons with disabilities, private school teachers and parliament bureaucrats, and non-Thai residents. Altogether, these schemes cover 100% of the Thai population (Figure 5.10).

Table 5.10 Number of medical professionals and ratio of medical professionals to the midyear population, 1994-2022

Year		1994	2000	2006	2012	2018	2022
Medical professionals	Doctor	14,098	18,025	21,051	25,367	36,910	39,125
	Dentist	2,984	4,141	4,187	5,721	7,720	8,132
Ratio to the midyear population	Doctor	4,165	3,427	2,975	2,533	1,772	1,665
	Dentist	19,677	14,917	14,957	11,233	8,472	8,012

Source: Ministry of Public Health

Table 5.11 Hospital beds, 2002-2022

Year		1994	2000	2006	2012	2018	2022
Medical professionals	Doctor	14,098	18,025	21,051	25,367	36,910	39,125
	Dentist	2,984	4,141	4,187	5,721	7,720	8,132
Ratio to the midyear population	Doctor	4,165	3,427	2,975	2,533	1,772	1,665
	Dentist	19,677	14,917	14,957	11,233	8,472	8,012

Source: Ministry of Public Health

Supply-side expansion is another strategy central to Thailand's success in achieving good population health. The number of medical professionals has risen over time (Table 5.10). In 1994, one doctor and one dentist served, on average, 4,165 and 19,677 people, respectively, while they served 1,665 and 8,012 people, respectively, in 2022. Medical facilities have also expanded (Table 5.11). During 2002-2022, the number of hospital beds increased by approximately 27%, and in 2022, there was one hospital bed for every 380 Thai people.



Challenges in the Thai Health System

Financial Challenges to the Universal Health Coverage System

Nevertheless, there are causes for concern concerning population health in the future. An important problem is that Thailand's public health insurance system may not be financially sustainable (Supakankunti and Witvorapong, 2017). The system (particularly the UCS and the CSMBS schemes) is largely tax-financed and, to enhance access and protect the population against health-related financial risks, user charges and copayments are limited, leading to a substantial increase in demand for healthcare services. Given that the main provider payment mechanism is largely capitation-based, with service providers contractually given a fixed fee per patient per year by the public health insurance

schemes, it is possible that service providers – more specifically, public hospitals – may suffer financial losses, having to bear the costs of rising healthcare needs. In 2021, it was reported that hundreds of hospitals in the public sector experienced a liquidity problem, with 7 hospitals identified as being in a 'critical' condition, and, in 2024, four associations representing a majority of healthcare providers in the public sector submitted an open letter to the Ministry of Public Health, requesting that financial problems within the system be promptly addressed (Bangkok Biz News, 2024).

Rise of Noncommunicable Diseases

Another important challenge facing the Thai healthcare system is the epidemiological transition towards non-communicable diseases (NCDs), which are importantly linked with unhealthy behaviours. According to WHO Thailand et al. (2021), the prevalence of smoking among Thai adults (aged 15 and over) was about 17% in 2021. The prevalence of alcohol use disorder was 5.4% in 2016, which was higher than the 3.9% average for the Southeast Asian region. Approximately 31% of adults reported being physically inactive in 2020. The average sugar consumption in

the country in the same year was about 4 times higher than the amount recommended by the World Health Organization. In 2019, the economic cost imposed by four main NCDs, including cardiovascular diseases, cancer, diabetes, and chronic respiratory diseases, was estimated to be as high as 1.6 trillion Thai baht, equivalent to 9.7% of GDP. This costing exercise accounted not only for health care spending but also productivity losses resulting from presenteeism, absenteeism, and premature deaths associated with the four diseases.

Vulnerable Groups

Although the Thai public health insurance system has removed much of the financial barrier to health care, accessibility remains an issue for certain population sub-groups. Low-income individuals struggle to acquire health services. Susceptible to the precarity of employment, they tend to forgo health care for economic reasons. Poorer households are often unable to afford to see a physician and not work. They may be reluctant to go to the hospital, especially when the transportation costs are high relative to their daily wage (Thailand Development Research Institute, 2023).

People with disabilities face a similar problem. According to the 2022 Disability Survey, 4.1%, 9.2%, and 16.6% of people with disabilities reported having unmet needs for medical treatment, rehabilitation services, and prosthetics or assistive devices, respectively. Reasons included the

difficulties and costs of traveling to access required services (National Statistical Office, 2023).

Access to health care is more limited for people living in remote areas. There is a demand-side explanation: people in remote areas utilize health services less frequently because the costs of traveling to the nearest health facility are prohibitively high. There is also a supply-side explanation. In remote areas, supply shortage is commonly observed. For example, the Northern region has the lowest density of computed tomography (CT) scans, magnetic resonance imaging (MRI) machines, and ambulances. In contrast, the Southern region has the lowest density of ultrasound and haemodialysis machines per capita. There is also a much lower concentration of doctors, especially specialists, in rural areas. In 2022, an acute shortage of forensic pathologists



was documented for 29 out of 77 provinces—all of which were smaller cities (Thailand Development Research Institute, 2023).

Finally, the existing health system is not sufficiently well-equipped to meet the unique needs of LGBTQIA+ individuals and sex workers. Here, sexual and mental health are of particular importance. Examples of sexual health issues that are common among LGBTQIA+ individuals include sexually transmitted infections (STIs) and hormone treatments for transgender people (United Nations Development Programme, 2019), while those for sex workers include STIs, musculoskeletal problems and unwanted pregnancies (Chevasutho and Jiamjarasrangri, 2022). Also, both groups are exposed to non-negligible mental health risks. A national survey conducted by the United Nations Development Programme (UNDP) in 2018-2019 revealed that almost half of the LGBTQIA+ respondents had considered suicide, and almost one-sixth reported having attempted it (United Nations Development Programme, 2019). Similarly, sex workers face occupational health hazards, including, for example, physical assaults from customers and substance abuse resulting from low self-esteem, all of which have perverse mental health effects.

Both LGBTQIA+ individuals and sex workers have difficulties accessing health care services. For LGBTQIA+ individuals in Thailand, stigma was found to be a major barrier, with LGBTQIA+ individuals experiencing discrimination at healthcare facilities (United Nations Development Programme, 2019). The issue is more complicated for sex workers. In addition to societal stigma, sex workers are subjected to legal restrictions (Chevasutho and Jiamjarasrangri, 2022). As sex work is illegal under the 1996 Prevention and Suppression of Prostitution Act, sex workers' rights are limited. Under the Universal Coverage Scheme (UCS), certain services are either not covered or provided only on a partial basis (Coverage, 2023). For instance, HIV testing is free only twice a year, and treatment for injuries and certain diseases resulting from intercourse, like genital wounds and genital warts, is not covered.



Navigating Thailand's Human Capital: Strategies for a Resilient Future in a VUCA World

Although much progress has been made in the past three decades, investing in human capital remains a priority in Thailand. In terms of education, it is recommended that the government focuses on improving the quality of education at all levels (including preschool education) and enhancing access to (quality) education, especially for children from geographically and/or economically disadvantaged families (Lathapipat, 2018). Workforce knowledge and skills need to be further strengthened to ensure that productivity increases proportionately to the inflation rate. Inclusivity in the labour market could be improved (Moroz 2017; Testaverde et al. 2017). Lifelong learning programmes to empower older workers may be provided. Professional upskilling and reskilling programmes, particularly for migrants, people with disabilities, and women who may temporarily exit the labour market for reproductive and non-reproductive reasons, may similarly be offered, allowing them to have a better chance of improving their employment opportunities and working conditions. A long-term strategy to protect rights and minimize exploitation in the labour market should also be devised. Finally, innovative policies motivating positive behavioural modifications, both in terms of health-seeking

behaviours and lifestyle choices, are needed in order to ensure that the health insurance system is financially sustainable (Supakankunti and Witvorapong, 2017), allowing the country to maintain a healthy workforce.

In an environment characterized by **Volatility, Uncertainty, Complexity, and Ambiguity (VUCA)**—brought on by rapid population aging, low fertility, weakening family ties, drastic technological advancement, and pandemics, to name a few—human capital development involves more than provision of basic skills. Current and future generations need to possess resilience and creativity and understand the importance of continuously developing their skills to minimize the risks of failing to adapt to the evolving needs of the labour market. The process of human capital development in Thailand is susceptible not only to existing challenges but also to the fact that the landscape of human capital in the VUCA world is ever-changing, constantly posing new challenges. It is important to devise and implement national and region-specific strategies that are sufficiently aligned, consolidated, and well-coordinated, requiring full commitment from the government.





**INCLUSIVE DATA AND OFFICIAL STATISTICS
TOWARDS THAILAND'S TRANSFORMATIVE SOCIETY
ENSURING NO ONE IS LEFT BEHIND**

6

CHAPTER



Thailand's aspiration for inclusive growth focuses on establishing a more equitable and sustainable society, ensuring every citizen can thrive. Central to achieving these goals is the National Statistical Office's (NSO) work in providing accurate, comprehensive, and disaggregated data. These data are more than just numbers; they are indispensable for informed decision-making, effective policy formulation, and diligent progress monitoring, ensuring that no one is left behind in the nation's transformative journey.

Overview of Thailand's Statistical System from the 1st National Master Plan to Present

It has been over a century since Thailand started engaging in statistical activities, collecting and utilizing data to analyse and forecast various situations. In 2007, the Statistics Act B.E. 2550 was enacted, establishing a comprehensive framework for the country's statistical operations. This act designated the NSO as the primary agency and mandated the development of the National Statistical System Master Plan. This plan serves as a strategic roadmap for the country on its statistical work, involving collaboration with all sectors to ensure

the availability of high-quality official statistics for planning and evaluating development at all levels. Currently, Thailand is implementing the third National Statistical System Master Plan, which covers the period from 2023 to 2027.

Below are summarized key initiatives and activities to date, categorized by the phases of the master plans to illustrate step-changes.

The 1st National Statistical System Master Plan (2011-2015)

The initial phase of implementing the National Statistical System Master Plan (2011-2015) successfully engaged various stakeholders and agencies at national, ministerial, and local levels. This engagement was facilitated by establishing operational mechanisms, including committees and subcommittees. More than 2,000 statistical datasets

from over 200 agencies were compiled and made accessible. Additionally, official statistics were developed aligned with local strategies according to the provincial development plan for all 76 provinces. This initiative marked a significant turning point in developing official statistics, addressing the diverse needs at sub-national levels

The 2nd National Statistical System Master Plan (2016-2022)

The second phase (2016-2022) emphasized various activities that promoted the inclusiveness of Thailand's data and evidence while showcasing the effective use of existing data and resources. A significant advancement during this phase was integrating data from multiple agencies. This inter-agency collaboration included leveraging administrative and registry data to support censuses and sample surveys. For example, the Community Development Department under the Ministry of Interior provided basic needs data, while the Ministry of Social Development and Human Security shared social welfare registration data. These datasets were crucial for internal research and developing prototype for the Population and Housing Census based on registry databases. Moreover, business registration data from the Department of Business Development, the Office for Small and Medium Enterprises Promotion, the Department of Industrial Works, and the Department

of Industrial Promotion were integrated to create a comprehensive sample frame for the 2022 Business and Industrial Census.

Another major initiative was the establishment of a framework to enhance the quality of official statistics in Thailand, adhering to the United Nations Fundamental Principles of Official Statistics. This framework included the development of standards for key statistical variables such as sex, age, country, employment status, and industry, which the Cabinet approved on October 22, 2019. These standards now guide agencies in producing integrated and collectively utilized statistics.

The National Statistical Office (NSO) developed the Government Data Catalog (GD Catalog) to promote the effective use of government data further. This centralized platform aggregated data catalogues from central and local government agencies,

enabling seamless integration with the Open Government Data portal and other systems via Application Programming Interfaces (APIs). The NSO also supported capacity-building initiatives for government statisticians, providing them with the knowledge and skills to analyse and utilize data from central and local systems.

This period, particularly in 2019, is notable in terms of legislative and policy advancement and the creation of new agencies focused on enhancing government data systems and promoting efficient data management.

- Digitalization of Public Administration and Services Delivery Act B.E. 2562 (2019): This act mandates data governance as a framework for managing agency data and collecting and disclosing them in digital formats. The Digital Government Development Agency (Public

Organization) plays a key role in implementing this act.

- Personal Data Protection Act B.E. 2562 (2019): This act sets out principles for collecting and utilizing personal data to prevent misuse, with enforcement by the Personal Data Protection Commission.

- Cyber Security Act B.E. 2562 (2019) establishes measures to address cybersecurity threats that could compromise data storage and lead to personal data breaches. The National Cyber Security Agency oversees its enforcement.

The Government Big Data Analytics Framework has been established to ensure consistent use of government data. It facilitates inter-agency data integration for effective analysis and utilization. The Big Data Institute (Public Organization) oversees this framework.

The 3rd National Statistical System Master Plan (2023-2027)

This period underscores the continued commitment to the effective use of data and inclusiveness. The primary aim is to enhance Thailand's statistical capabilities by reviewing and refining the current central statistical legislation. Additionally, the NSO is supporting government agencies and personnel who work with statistics by providing training and resources. This support enables them to collect, produce, analyse, and disseminate high-quality and reliable statistics that meet user needs.

Collaboration and Development of Official Statistics: The NSO has established guidelines for collaboration

with other agencies to ensure that statistical development aligns with national strategies and master plans under the national strategical framework. The focus is on developing "Official Statistics," which are crucial for national development. These Official Statistics are categorized into three domains: Economic Statistics, Social Statistics, and Environmental Statistics, covering 21 specific areas. Each year, the NSO identifies priorities for developing Official Statistics based on global trends, national policies, and the country's direction. Examples of these priorities may include addressing the aging population, assessing the workforce, and

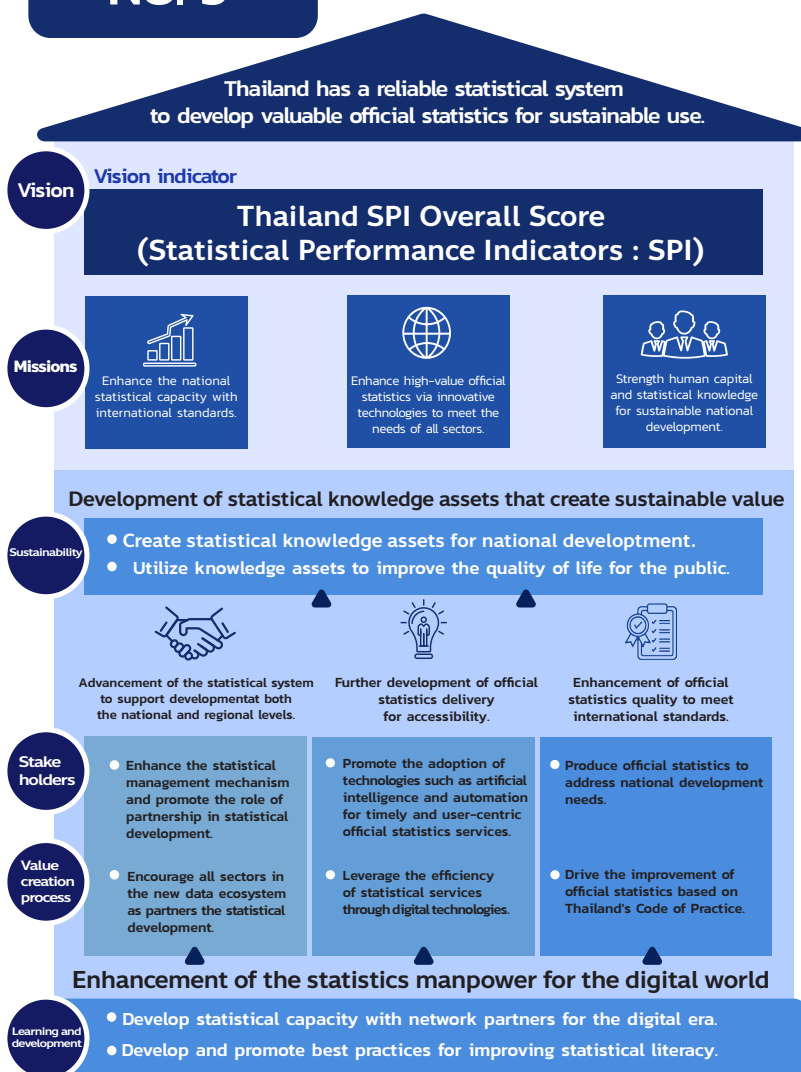
strengthening education. The NSO aims to provide the government and relevant agencies with statistical data to formulate effective policies, plan for the future, and evaluate development outcomes across various sectors. This will ensure that Thailand is well-prepared to address its changing population structure in the future.

Promoting Accessibility: The NSO is committed to making statistical information accessible to a broader user. To this end, the NSO has created an interactive website to help individuals plan for their future us-

ing statistics. This website offers information on financial planning, retirement planning, and nutrition, along with various academic resources. In addition, the NSO is enhancing the GD Catalog project by making it more advanced and standardized. Linking the GD Catalog to key statistical data and international indicators will make the data more readily accessible and easily exchangeable according to the international SDMX (Statistical Data and Metadata Exchange) standards. The enhanced GD Catalog will be available on the Statistics Sharing Hub to promote its widespread use further.

Draft of the National Statistics System Master Plan

NO. 3



Enhancing Data Inclusiveness: NSO's Strategies and Plans

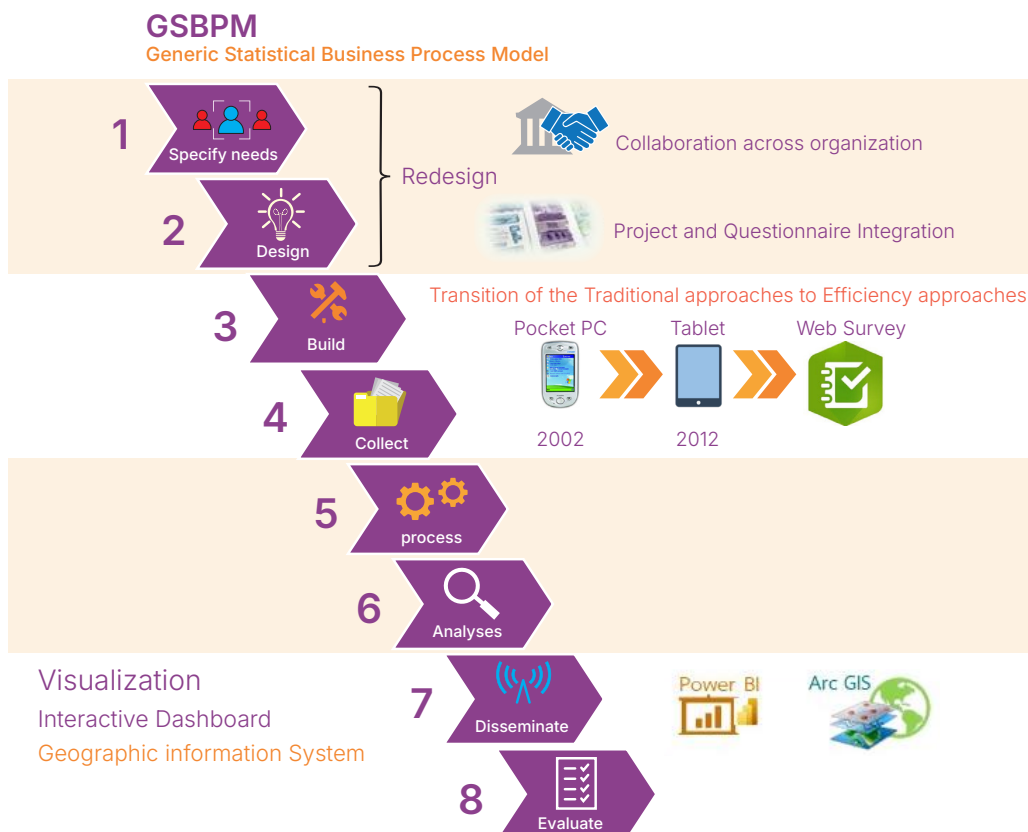
This section offers the key strategies currently employed and planned by the NSO to ensure data inclusiveness.

Generic Statistical Business Process Model (GSBPM)

The NSO's data production process follows the Generic Statistical Business Process Model (GSBPM), as depicted in Figure 6.1. The concept of inclusivity is integrated from the early stages of the statistical process, particularly in the design of surveys and data collection instruments.

By collaborating with relevant stakeholders at this phase, the NSO ensures that the collected data reflects the needs and experiences of all population groups, incorporates diverse perspectives, and maintains transparency.

Figure 6.1 Enhancement of Statistical Data Collection



Source: Adapted from (UNECE Statistics Division, 2019)

Revision of Enumeration Area Frame

An enumeration frame is a comprehensive list or database of all the units in the target population that are eligible to be included in a survey or census. Recent censuses in Industry, Business, and Agriculture, as depicted in Figure 6.2, serve as excellent examples of how their enumeration frames are revised to ensure comprehensive and inclusive data collection.

Figure 6.2 Enumeration Area Frame Revision



Population and Housing Census: Shifting from traditional to hybrid census

The Thailand Population and Housing Census exemplifies the nation's dedication to understanding its demographic and socioeconomic characteristics, including population size, age-sex structure, and distribution. This information is essential for developing national policies and plans, estimating the population, and providing data for national surveys. Thailand's census-taking has a long history, beginning in 1909 with the Ministry of Interior conducting the first five "Household Censuses." In 1960 the responsibility shifted to the National Statistical Office (NSO). Following the United Nations' recommendation to conduct censuses in years ending with "0" for international comparability, Thailand has adopted and maintained a decennial cycle since then. The 2010 Census was the eleventh round, marking the 100th anniversary of Thailand's Population Census.

The COVID-19 pandemic in 2020 disrupted the usual census schedule, making traditional door-to-door surveys with paper-based questionnaires impractical. Challenges such as unusual population movements during the pandemic

and those pertaining to data collection methods, such as enumeration errors and manual data entry inaccuracies, highlighted the limitations of traditional methods. These processes were labour-intensive, time-consuming, and delayed data availability, hindering timely decision-making and policy formulation.

The limitations of traditional census methods underscore the need for modern, technology-driven approaches to enhance data inclusivity. Innovative data collection technologies—such as digital surveys, online self-enumeration, and automated data capture tools—improve data accuracy, timeliness, and quality and facilitate participation for hard-to-reach populations, including those difficult to access physically. They can also improve coverage by identifying housing units in remote or informal settlements often overlooked in traditional methods. Moreover, online survey platforms can offer questionnaires in multiple languages, ensuring that non-native speakers are included in the census data.



The National Statistical Office of Thailand plans to conduct the 2025 Population and Housing Census primarily through a digital-first approach. This “Digital Census” will enable people to complete the questionnaire via digital channels. Contingency plans are in place to employ alternative methods for households that do not respond digitally, ensuring comprehensive and accurate data collection.

Implementing the Digital Census is new for Thailand. To ensure its success, experts from statistical offices in Australia, South Korea, Malaysia, Pakistan, the

United Kingdom, and the United States have been invited to share their knowledge and experiences. Collaborations with various governmental agencies, international organizations, academic institutions, and civil society are pivotal. Partnerships with entities such as the National Telecommunications Commission (NTC), Software Industry Promotion Agency (SiPA), and Thailand Post Co., Ltd., among others, will ensure data quality, accuracy, reliability, and timeliness. These efforts will expand coverage to hard-to-reach populations, ensuring that all demographic groups are represented and counted.

Harnessing the Multiple Indicator Cluster Survey (MICS) for the inclusive future of children

The Multiple Indicator Cluster Survey (MICS) is a multi-purpose household survey programme initiated by UNICEF in the 1990s. It aims to help countries collect internationally comparable data on various indicators concerning children and women. In Thailand, MICS is periodically conducted by the NSO with support from UNICEF. MICS results are critically important for monitoring the progress of the Sustainable Development Goals (SDGs) and national strategies and plans, such as the Early Childhood Development Plan (2021-2027), the National Strategic Plan for Teen Pregnancy Prevention and Solution (2017-2027) and the Five-year National Nutritional Action Plan (2019-2023).

The latest MICS in 2022 is particularly noteworthy for its capacity to provide not only key demographic and health statistics for the country, such as Total Fertility Rates and Adolescent Birth Rates but also detailed insights into diverse groups to understand inequalities better and promote inclusion. Notably, the survey covers all children outside mainstream systems, such as those out of school and living with

families without social protection (UNICEF Thailand, 2024). This comprehensive sampling approach ensures that marginalized and vulnerable children are represented in the data.

Furthermore, as the MICS data can be broken down by various factors, specific needs and disparities among children across different socio-economic groups can be identified. Moreover, findings on disparities presented by region and province enhance the understanding of where inequalities exist.

The 2022 MICS includes two comprehensive reports and the usual situation report: “The Report of Selected 12 Provinces of Thailand” and “Addressing the Gaps: Ensuring Every Child in Thailand Has an Equal Chance to Thrive.” By leveraging insights from these reports, Thai policymakers and stakeholders can develop strategies to address the unique challenges faced by different child populations, fostering a more inclusive society.



Cooperation with UNFPA Thailand

The National Statistics Office (NSO) and the United Nations Population Fund (UNFPA) have a history of long and fruitful collaboration, enhancing statistical capacities and demographic research. Over the years, this partnership has significantly contributed to the development of reliable, comprehensive, and inclusive statistical data, which serves as a foundation for informed policy-making and sustainable development.

The NSO has received long-standing support from UNFPA Thailand, particularly in population and development through various NSO projects. These include the Population and Housing Census, the Survey of the Older Persons, the Health and Welfare Survey, and the Survey of Population Change. This

cooperation has played a crucial role in supporting Thailand's development through reliable population statistics and towards a greater inclusive society.

Currently, the NSO is receiving assistance and support from UNFPA Thailand for the study of conducting a hybrid census in collaboration with experts from WorldPop research programme based at the University of Southampton. This support aims to implement the Hybrid Census, combining data from multiple sources for more accurate population estimation. Furthermore, with support from UNFPA Thailand, the NSO is reviewing the methodological approaches to conducting a digital census in other countries, aiming to apply the gained knowledge and experience to Thailand.

Remaining Challenges and Future Directions

Towards Leaving No One Behind

Challenges

Data availability for the inclusive development of all population groups leads to better societal changes. However, the development process is still encountering challenges and changes in the data ecosystem, including regulations, government resource management, data, and digital technology security, as well as the development of capacity and potential of personnel in the statistical data systems.

Regulations related to data and the Personal Data Protection Act (PDPA)

Data operations must comply with the laws or regulations of each agency and the Personal Data Protection Act (PDPA), which came into effect in June 2022. The NSO, as the country's main statistical agency, has operated under the Statistics Act B.E. 2550. However, this framework is increasingly seen as inadequate in addressing the challenges of linking or sharing personal data between government agencies and the private sector.

These challenges are increasingly more complex. More citizens are exercising their rights under the PDPA to withhold personal information from government agencies, complicating data collection efforts and limiting the inclusiveness of data available for statistical analyses.

Missions on limited resources and ongoing adjustments

The mission of producing data with traditional data collection methods involving direct interaction between staff and data providers is increasingly constrained by limited budgets and resources. This has prompted efforts to adopt online methods and develop digital platform tools for data collection. However, these online methods still face implementation challenges regarding access and low cooperation from target data providers. Even though the development of internet infrastructure has increased overall internet usage, the actual usage patterns still vary significantly across age groups and geographical areas. In 2023, the internet usage rate was 89.5%, but only 61.2% among the older population, and 86.9% in non-municipal areas. These disparities highlight the continued need to maintain traditional staff-based data collection methods alongside online approaches.

Cybercrime and security impact on data collection

The current rise of cybercrime, data breaches, and misuse of personal data has made citizens more cautious about disclosing and sharing personal information online. This mistrust also extends to the security of data and information technology within organizations. As a result, the development of online data collection tools, which could replace staff-based data collection, is hindered. Similar challenges are also encountered when collecting data from private sector organizations.

Empowering personnel is essential

In the digital age, developing personnel is crucial for organizational growth, yet it faces significant challenges such as rapidly evolving technologies, skills gaps, and the need for continuous learning and adaptation. The government needs to invest in developing its data personnel to address these challenges. This investment should focus on equipping them with the knowledge of techniques for effectively managing and analysing data and enhancing their skills and capacity in using advanced data processing tools. By empowering the data personnel with these capabilities, the governmental organizations will be better positioned to harness the power of vast amounts of data.

Data management in the context of change

Agencies face challenges in managing data to keep up with a fast-changing technological context. These challenges include the evolving need of the use of data by policymakers for the development policies, regulations, and resource allocation management, advancements in data and digital technology, increasing volume of data alongside data quality concerns, the need for personnel with up-to-date skills, the changing social and economic landscape—for example, population diversity, living habits, and differences between urban and rural areas. These factors collectively directly and indirectly impact data management and national data systems.

Future Developments

Dedicated efforts are underway to develop the statistical data system in various aspects, including streamlining the regulations that serve as operational mechanisms, fostering collaboration and teamwork, improving data quality and classification, advancing data-related systems and technology, and enhancing the statistical knowledge and skills of personnel. These efforts are made to develop inclusive data that cover all population groups across various socioeconomic dimensions and regional contexts, leading to effective policymaking that leaves no one behind and contributes to the achievement of Thailand's Sustainable Development Goals.

Streamlining regulatory barriers and enhancing cooperation

The NSO is drafting a new Statistics Act that will align with the current developmental context and data ecosystem. This act aims to reduce operational barriers caused by laws and regulations and to enhance cooperation among agencies. Efforts include developing cooperation agreements for possible activities under relevant laws or regulations and fostering cooperation with the private sector. It is also necessary to raise awareness and maintain ongoing communication with all sectors to ensure that they have the knowledge and understanding to participate in the collection and analysis of data for the benefit of policy development for the country's population, economy, and society.

Data quality and sharing

Advancements in data collection and utilization of data sources

The NSO has been striving to advance data collection through various methods. These include leveraging government data and resources jointly and incorporating digital technologies. The NSO is

currently developing surveys using registry data related to personal information, enhancing both applications and benefits of the data. This approach also helps reduce workload and resource utilization, increasing efficiency and therefore higher data quality and accuracy. Moreover, studies and efforts are underway to utilize existing data presented in various forms from diverse sources to support the planning and development of policies, such as initiatives exploring the use of satellite imagery and mobile positioning data as novel sources for official statistics.

Developing data quality and standardized data classification

The goal is to elevate the quality of national data to meet international standards, ensuring consistency and comparability across various agencies, both domestically and internationally. This approach allows for the joint use of data to support the formulation of well-informed policies that foster inclusive development of all population groups in economic and social dimensions such as age, sex, disability, international migration, education, occupation, income, etc. In addition, metadata development is important and must be carried out simultaneously to ensure that the data is used correctly without misinterpretation.

Data exchange on standards and data sharing

There is an ongoing effort to develop national data in accordance with the SDMX (Statistical Data and Metadata Exchange) standard. This aims to facilitate seamless data exchange among organizations within and across countries. Key datasets, particularly those related to the Sustainable Development Goals (SDGs), are being exchanged under the SDGs-SDMX structure, which international organizations use and encourage use by individual countries. The NSO is actively promoting the adoption of this standard within the country.

Personnel development

The NSO is committed to advancing the capabilities and potential of its personnel in the statistical process. This involves developing knowledge and skills in data engineering and data science, including data management tools and techniques. Key areas include:

- 1) Collection of data from various sources
- 2) Data analysis, including managing large datasets, employing machine learning methods for data analysis, and using tools to present data clearly to policymakers
- 3) Management of the national statistical system, such as establishing the statistical master plan, implementing and following up on the master plan with line ministries, and coordinating with stakeholders.

These skills contribute to the overall development of data systems and allow for the full utilization of large and diverse datasets.

Closing the data gap

The National Statistical Office (NSO) has employed various strategies to ensure data inclusivity. For statistical production, the NSO adopts diverse data collection methods such as face-to-face interviews, phone interviews, and online questionnaires to reach various segments of the population. To address evolving data requirements in the new data ecosystem, the NSO is driving the implementation of the Thailand National Statistical System Master Plan, which serves as a mechanism for the joint development of data and statistical systems across all agencies. Its goal is to develop quality standard official statistics for use in planning, policymaking, and development evaluation at national and provincial levels. This master plan also serves as a mechanism for driving the Sustainable Development Goals (SDGs) data, which will enable all agencies in the country to work together towards their achievement. The NSO's efforts are further supported by international organizations, fostering ongoing collaboration in various aspects of national data production.

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Driving the development of data and statistical information systems in the country is a mission that the National Statistical Office (NSO) is committed to carrying out in the context of change and emerging challenges. This will be done through cooperation and collaboration between agencies both domestically and internationally to develop high-quality data that covers all population groups and economic and social dimensions.

The data will be used to develop better and more inclusive policies, with a focus on developing the population into human capital for a better economic and social transformation in a sustainable manner that leaves no one behind.

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WAY FORWARD FOR ICPD 30+

7

CHAPTER



Introduction

This chapter serves three key purposes. Firstly, it provides an overview of the preceding chapters in the report which chronicles Thailand's population development journey over the past five years since the 2019 Nairobi Summit on the International Conference on Population and Development (ICPD25). It highlights the global commitments made at the Nairobi Summit and how these have been implemented at the national level in Thailand.

Secondly, this chapter examines Thailand's progress in fulfilling its Nairobi Summit commitments, identifying key gaps that remain. It analyses Thailand's efforts to ensure universal access and rights in sexual and reproductive health, address gender inequalities and sexual and

gender-based violence, leveraging demographic diversity for economic growth and sustainable development, and the mobilization of necessary financing.

Thirdly, the chapter concludes by offering a set of policy recommendations and a call to action. Drawing on the insights from the preceding chapters, it outlines strategic priorities and interventions that can help Thailand navigate its complex demographic transition, build resilience, and achieve sustainable progress in population development in accordance with ICPD Program of Action and the commitments made at the Nairobi Summit.



Overview of chapters

Thailand's Population Development Journey: A Five-Year Retrospective and Future Directions after the 2019 Nairobi Summit

Chapter 1 provides a retrospective on Thailand's population development journey over the past five years since the 2019 Nairobi Summit on the International Conference on Population and Development (ICPD25). The chapter highlights the key global commitments made at the Nairobi Summit and how these have been cascaded down to the national level in Thailand.

The Nairobi Summit in 2019 set out five priority themes for achieving population development goals globally - ensuring universal access and rights in sexual and reproductive health, addressing sexual and gender-based violence, leveraging demographic diversity for economic growth and sustainable development, and mobilizing the necessary financing. Thailand has worked to align its national strategies and plans to these global commitments.

At the national level, Thailand has adopted ambitious goals to be achieved by 2027, including reducing maternal mortality to 15 deaths per 100,000 live births (down from 21.8 in 2019), lowering the teenage pregnancy rate to no more than 15 per 1,000 live births among 15–19-year-olds (from 23 in 2019), and improving key development indicators like the Human Development Index, family strength score, and early childhood development index. These targets are being pursued through a range of sectoral plans and strategies.

Despite overall declines in birth rates, there are segments of the population facing difficulties in

reaching their reproductive aspirations, including individuals experiencing infertility and the LGBTQ+ community. There are also concerns around the readiness for family formation, with relatively higher rates of child marriage and adolescent pregnancies, especially in certain regions.

One of the primary challenges highlighted in the chapter is the issue of underemployment, which has become increasingly pronounced due to demographic shifts and economic pressures. Thailand is experiencing a declining fertility rate and an aging population, which have led to a shrinking labour market. This shift exacerbates the problem of underemployment, as many individuals struggle to find jobs that match their skills and qualifications. The chapter cites that over 55% of the workforce faces horizontal mismatches, meaning their skills do not align with job requirements. Additionally, approximately 36% of workers experience vertical mismatches, where they are overqualified for their positions. This situation not only hampers individual economic stability but also stifles national economic growth.

Once children are born, many face vulnerabilities in terms of limited access to healthcare, malnutrition, and lack of nurturing family environments. Approximately 15% of children do not receive necessary healthcare services, and nearly 1 in 5 children from disadvantaged families are born with low birth weight. Malnutrition is also

prevalent, with over 10% of children experiencing stunted growth.

The chapter notes that the COVID-19 pandemic has further stress-tested Thailand's social service delivery systems and underscored the need for a more holistic, life-cycle approach to population development. It emphasizes the importance of adaptive measures and resilience-building to navigate future challenges, leveraging both established frameworks and emerging community-driven initiatives.

To address these challenges, the Thai government has implemented several key population policies aimed at promoting sustainable development. Among these is the Long-Term Population Development Plan (2022-2037). This policy aims to enhance population health and well-being through a comprehensive approach that addresses demographic changes, economic needs, and social welfare. The plan emphasizes the importance of investing in human capital, with specific targets set to improve the Human Development Index (HDI) and the Early Childhood Development (ECD) index. By focusing on education, health, and social support, the plan seeks to prepare Thailand for future demographic challenges and ensure that all citizens can contribute to and benefit from economic growth.

Another significant initiative is the "5x5 Let's Turn the Tide" Policy, which aims to revitalize population

growth and address declining fertility rates. This policy is designed to create supportive environments for families, encouraging stable family structures and healthy child-rearing practices. It incorporates measures such as financial incentives for families, improved access to reproductive health services, and educational programs to raise awareness about family planning. The policy recognizes the need to empower young couples to make informed decisions about parenthood, thereby addressing both fertility decline and the associated societal challenges.

These national strategies operate hand-in-hand with community involvement and empowerment which are factors recognised as crucial elements for successful population development. The Chapter highlights how grassroots initiatives, and local partnerships have led to improved health outcomes, reduced adolescent pregnancy rates, and enhanced educational access. By showcasing successful community-driven projects, the chapter illustrates that when individuals and local organizations actively participate in decision-making processes, they foster resilience and innovation. This collaborative approach not only addresses immediate challenges but also builds long-term capacity within communities, ensuring that diverse needs are met, and sustainable development goals are achieved effectively. Empowering communities is therefore considered to be essential for Thailand's future prosperity.



Thailand's Population Changes and Prospects in the Era of Very Low Fertility and Population Ageing

Chapter 2 provides an in-depth analysis of Thailand's demographic evolution from 1990 to 2023, focusing on the implications of low fertility rates and an ageing population. It examines trends in fertility, mortality, and migration, while also addressing the socio-economic challenges these changes present. Additionally, it highlights the government's policy responses, particularly in the realm of sexual and reproductive health (SRH).

Thailand has undergone a remarkable demographic transition, moving from a high fertility rate of around 6.5 children per woman in 1960 to reaching replacement level fertility around 1986. However, since the 1994 International Conference on Population and Development, Thailand's total fertility rate has fallen to what is often referred to as 'ultra-low' levels, reaching approximately 1 child per woman according to the latest Multiple Indicator Cluster Surveys.

This shift towards ultra-low fertility has had profound implications. The number of births in Thailand has decreased from over 1 million per year in the early 1990s to just over 500,000 in 2022 - nearly a 50% decline. The average number of children ever born to married women has declined across all age groups, with the most pronounced drop among women aged 35 and above.

The determinants of Thailand's below-replacement fertility are multifaceted, involving both proximate and underlying factors. Among the proximate factors, delayed marriage and a rising proportion of single women are considered the most significant. The

single mean age at first marriage has increased from around 22 years for women and 24 years for men in 1970, to 23.7 years for women and 28.3 years for men by 2010. The single mean age at first marriage in Thailand has increased from 25.5 years in 2012 to approximately 27 years in 2022. This delayed marriage is linked to delayed childbearing, with the proportion of women having their first child at age 30 or older increasing from 10.4% in 2001 to 14.5% in 2016.

In addition, surveys indicate a growing trend of single women of reproductive age, especially in the 35-39 and 40-44 age groups. The proportion of single women aged 35-39 increased from 9.3% in 2009 to 15.8% in 2016, while for those aged 40-44 it rose from 7.4% to 11.5% over the same period. Given that most births still occur within marriage, this rise in singlehood likely contributes to the declining fertility rates.

The underlying factors behind the delayed marriage and increased singlehood include the higher costs of childbearing and rearing, persistent gender role inequalities, and challenges in maintaining work-life balance - especially for women. Recent research has highlighted the high cost of raising children, not reaching the desired age for having children, and the responsibility of caring for older family members as key reasons people are choosing to have fewer or no children.

Another major challenge is the rising mortality rates associated with non-communicable diseases, compounded by the adverse effects of the

COVID-19 pandemic. The pandemic has not only strained healthcare resources but also exacerbated inequalities in health access, particularly for marginalized communities.

This demographic shift has placed Thailand into the league of middle-income countries experiencing ultra-low fertility. The implications are profound, as Thailand must now grapple with the challenges of population aging typical of more developed nations. These include supporting a growing population of older persons, managing the economic and social impacts of a declining working-age population, and ensuring the sustainability of its social welfare and healthcare systems.

Sexual and Reproductive Health, Right and Choices for ALL

Chapter 3 examines Thailand's advancements in sexual and reproductive health and rights (SRHR) over the past five years, highlighting the expanded mandate of the Department of Health. This shift reflects a broader approach that now includes key demographic issues alongside traditional SRH agendas, underscoring the importance of an integrated health strategy.

Significant developments since 2019 include the amendment to the law, which provides a legal framework supporting women's rights to make their own pregnancy choices, including safe abortions. However, despite this progress, social stigma surrounding abortion persists, with some healthcare professionals still hesitant to perform the procedure.

In response to these challenges, the chapter emphasizes the need for robust policy measures. It suggests that the Thai government should prioritize initiatives that promote family stability and support human capital development. This includes enhancing access to reproductive health services, investing in education and training, and fostering a supportive environment for families to thrive.

Overall, the chapter delivers a clear policy message: to navigate the complexities of demographic change, Thailand must adopt inclusive and adaptive strategies that address both current and future population challenges. Embracing these changes is essential for ensuring sustainable development and improving the quality of life for all citizens.

The chapter also details the expansion of SRH services under the Universal Health Coverage Scheme. This includes access to free contraceptive pills and condoms, with a national goal of achieving 100% condom usage, as well as long-acting contraceptives and comprehensive abortion care. Notably, infertility treatment services have been incorporated into health packages for Thai citizens, reflecting a commitment to addressing diverse reproductive needs.

Furthermore, there has been an increased focus on vulnerable groups, such as women and youth with disabilities and migrant women, ensuring they receive the health coverage they require. The legalization of same-sex marriage marks a significant milestone, promoting the rights of

LGBTQIA+ individuals, though challenges in accessing tailored SRHR services for this (still marginalized) group remain.

The adoption of digital technology has also played a crucial role, with the creation of an online platform providing reliable, youth-friendly SRHR information and counselling. This initiative enhances accessibility for young people seeking guidance on important health issues.

Despite these advancements, several challenges continue to impede progress. There is still a lack of accurate, rights-based information and services for LGBTQIA+, migrant, and disabled adolescents concerning sexual and reproductive health, which is essential for preventing high-risk SRH-related issues. Additionally, a higher prevalence of sexually transmitted infections (STIs) has been observed among youth aged 15-24, with many sexually active students not utilizing contraception.

The cultural stigma surrounding abortion remains a significant barrier, leading to reluctance among some healthcare providers to offer these services. Furthermore, a growing demand for egg freezing services reflects an increasing desire for parenthood among women, highlighting the need for government policies to effectively monitor and regulate these practices.

Lastly, there is a pressing need for accurate and timely abortion surveillance systems to track significant issues following the legalization of abortion, such as fertility rates and marriage trends. This data is crucial for developing responsive policies that address emerging needs.

In summary, while Thailand has made notable progress in advancing sexual and reproductive health rights, ongoing efforts are essential to tackle the remaining challenges. Ensuring that all individuals, particularly the most vulnerable, have access to comprehensive, rights-based health services is vital for fostering a healthier society.



Everyone Plays a Part: Gender-Responsive Actions for Women and Girls and Family Institution

Chapter 4 examines the progress made in gender equality in Thailand, emphasizing the need for gender-responsive actions across various sectors. The chapter evaluates advancements through both global and local perspectives, providing a comprehensive view of the current state of gender equality in the country.

From a global standpoint, the chapter references the Global Gender Gap Index (GGGI) to assess Thailand's achievements in advancing gender equality. Notably, Thailand has made significant progress in areas such as health, education, and economic participation. However, political empowerment remains a critical area of concern. Women continue to be underrepresented in decision-making roles, limiting their influence on policies that affect their rights and opportunities. This gap highlights the necessity for ongoing efforts to enhance women's participation in political processes and leadership positions, ensuring their voices are heard at all levels of governance.

The local perspectives section provides a detailed analysis of gender inequality in Thailand, assessing various dimensions:

Firstly, educational attainment and gender equality are examined. The chapter highlights significant progress in girls' education, noting that women often achieve higher levels of educational attainment than men in various fields. However, challenges persist, particularly in traditionally male-dominated sectors. There is a pressing need to encourage young women to pursue careers in science, technology, engineering, and mathematics (STEM).

The chapter emphasizes the importance of fostering an educational environment that promotes gender equity, empowering women to explore diverse career paths.

The section also addresses the issue of aging, particularly the unique challenges faced by older women in Thailand. Many older adult women experience economic insecurity and health-related issues, often exacerbated by gendered societal norms. The chapter underscores the necessity for targeted policies and programs that support the health and financial stability of older women. This includes ensuring access to healthcare services, developing social support systems, and promoting initiatives that encourage active aging and community engagement.

Another critical area of focus is gender-based violence, which remains a pervasive issue in Thailand. Despite legal reforms and increased public awareness, many women continue to be vulnerable to various forms of violence. The chapter discusses the importance of comprehensive data-backed strategies to prevent violence, such as community education, support services for survivors, and stricter enforcement of laws. Addressing the root causes of gender-based violence, including societal attitudes and norms, is essential to creating a safer environment for women.

Lastly, the chapter explores gender and family diversity, acknowledging the evolving nature of family structures in Thailand. It highlights the variety of family configurations, including single-parent



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households and same-sex families. The need for policies that recognize and support all types of families is emphasized, ensuring equitable access to resources and services. Legal protections for diverse family structures are crucial in promoting inclusivity and safeguarding the rights of all individuals.

A key showcase in this chapter is the SoSafe Project, which demonstrates an innovative approach to addressing unintended pregnancies, sexual harassment, domestic violence, and other social issues, such as substance abuse and issues specific to older persons. This project aims to create a safe environment for women, girls, and persons of all aged and genders by providing them with the tools and resources necessary to navigate these challenges. The SoSafe Project promotes awareness and education around SRHR, empowering individuals to make informed choices. It also offers support systems, ensuring users have access to necessary services and legal protections by connecting them with local authorities responsible for their specific issues.

The project exemplifies a proactive strategy to foster equality and enhance the safety and well-being of persons of all ages and genders in Thailand.

In conclusion, Chapter 4 presents a thorough overview of the progress made in gender-responsive actions in Thailand, assessed through both global and local lenses. While notable advancements have been made in education, economic participation, and health, challenges remain, particularly in political empowerment and gender-based violence. Initiatives like the SoSafe Project highlights innovative approaches to addressing pressing issues faced by women. The chapter calls for continued efforts to address these disparities and promote a holistic approach to gender equality. By fostering collaboration among various stakeholders and implementing inclusive policies, Thailand can further its commitment to achieving gender equality and ensuring that all individuals can thrive in a just and equitable society.

Human Capital Development in Thailand: The Past 30 Years

The chapter examines the development of human capital in Thailand over the past 30 years, focusing on three key components: education, employment in the labour market, and health.

Education

Over the past three decades, Thailand has made significant progress in improving access to education. The school enrolment rate among the school-age population has risen steadily, with

enrolment rates approaching 100% for primary and lower secondary education. Enrolment rates have also improved at the upper secondary and university levels, though gaps remain. The average years of formal education have increased across all age groups, and the gender gap in education has narrowed substantially.

However, challenges remain. Access to education is still linked to socioeconomic status, with children



from poorer households having significantly lower enrolment rates, especially at the upper secondary level. The share of young people not in employment, education or training (NEET) remains non-negligible, at around 13-16% in recent years. This represents a lost opportunity for economic growth and a risk of future unemployment, poverty and social exclusion.

Moreover, the quality of education remains a pressing issue. Standardized test scores in key subjects like Thai, English, Math and Science have consistently been below 50% on average. Thailand's performance on the OECD's PISA assessments has also been below the global average over the past two decades.

Employment

Thailand has experienced significant structural changes in its labour market over the past three decades. The share of the workforce employed in agriculture has declined from around 50% in the early 1990s to less than 30% today. At the same time, the manufacturing and service sectors have grown in importance, employing a larger share of the workforce.

However, certain labour market challenges persist. There is a continued mismatch between the skills and qualifications of workers and the demands of employers, leading to high rates of over-education and underemployment. The informal sector remains sizeable, accounting for around 55% of total employment. This is associated with lower wages, less job security and limited access to social protection.

Gender disparities in the labour market are also notable, with women facing lower labour force participation rates, higher unemployment, and a significant gender pay gap. Youth unemployment remains a concern, at around 5-6% in recent years.

Health

Thailand has made substantial progress in improving population health outcomes over the past three decades. Life expectancy has increased from around 68 years in the early 1990s to 77 years today. Infant and child mortality rates have declined significantly, and communicable diseases have been brought under better control.

However, the country now faces a growing burden of non-communicable diseases (NCDs) such as diabetes, cardiovascular diseases, and cancer. NCDs account for around 75% of all deaths in Thailand. Certain behavioural risk factors, such as unhealthy diets, physical inactivity, and tobacco and alcohol use, have contributed to the rise of NCDs.

Additionally, despite Universal Healthcare Coverage, access to quality healthcare remains a challenge, especially for vulnerable groups and those in remote areas. Out-of-pocket expenditures on healthcare continue to be high, posing a financial burden for many Thai households.

In conclusion, Thailand has made notable progress in developing its human capital over the past three decades, particularly in expanding access to education. However, significant challenges remain in ensuring equitable and high-quality education, addressing labour market mismatches, and promoting good health outcomes for all.

Thailand's Statistical System Transformation in the Past Decade

Chapter 6 explores the policy frameworks and implementation strategies that have shaped Thailand's approach to sustainable development over the past 30 years. It emphasizes the critical role of data inclusiveness in effective policy formulation and execution, ensuring that the diverse needs of the population are considered in the pursuit of sustainable outcomes.

A central theme of this chapter is the necessity of data inclusiveness for effective policy-making. Comprehensive and disaggregated data is essential for understanding the varying needs of different demographic groups, including women, youth, older adults, and marginalized communities. By prioritizing data inclusiveness, policymakers can design targeted interventions that address specific challenges faced by these groups.

The chapter highlights key strategies employed by the National Statistical Office (NSO) to enhance data inclusiveness as part of Thailand's development in data collection and analysis. Notable initiatives include the Generic Statistical Business Process Model (GSBPM), which streamlines statistical processes and improves the quality and reliability of data. Additionally, the shift from traditional to hybrid methodologies in the Population and Housing Census reflects a commitment to utilizing modern approaches for more accurate demographic data. The revision of the Enumeration Area Frame ensures accurate representation of all population segments in data collection efforts. The Multiple Indicator Cluster Survey (MICS) focuses on gathering vital data about children and families, fostering an

inclusive future by identifying their unique needs. Furthermore, cooperation with UNFPA Thailand strengthens data collection, particularly in areas related to sexual and reproductive health, ensuring that marginalized voices are included.

The chapter outlines several key policy frameworks that have been instrumental in guiding Thailand's sustainable development efforts. National Economic and Social Development Plans prioritize inclusive growth and aim to reduce inequalities across various sectors. Gender equality policies emphasize gender-responsive actions to address disparities in education, employment, and health. Health policies aimed at achieving inclusive universal health coverage highlight the importance of inclusive health data for effective implementation. Environmental sustainability initiatives integrate environmental considerations into economic and social policies, promoting sustainable resource management.

Despite significant progress, the chapter identifies challenges in implementing these policies effectively. Issues such as bureaucratic hurdles, resource constraints, and the need for inter-agency coordination are discussed. The importance of stakeholder engagement, particularly involving local communities, is emphasized as a means to ensure that policies are relevant and adequately address local needs.

Looking ahead, Chapter 6 emphasizes the need for continuous improvement in data collection and policy evaluation methods. Establishing a robust monitoring and evaluation framework is essential



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for assessing the impact of policies and making necessary adjustments. The chapter calls for enhanced collaboration between government agencies, civil society, and the private sector to foster a holistic approach to sustainable development.

In summary, Chapter 6 provides a comprehensive overview of the policy frameworks and implementation strategies that have guided Thailand's sustainable

development efforts. By emphasizing the importance of data inclusiveness, the chapter highlights the potential for informed policies that address the diverse needs of the population. As Thailand continues to evolve, leveraging inclusive data and fostering collaboration among stakeholders will be crucial for achieving sustainable development goals and ensuring a prosperous future for all citizens.

Key cross-cutting themes:

Megatrends in action

Population ageing, digitalization, the climate crisis, and urbanization are recognised as key megatrends which are shaping the entirety of population and development. Each of these areas are covered in almost all of the chapters; however, it is worth drawing together these various strands to consider how megatrends shape the overall picture of population and development in Thailand.

Many chapters explore the process of rapid population ageing which is occurring in Thailand. While the associated challenges are explored, it is important to emphasise that as populations age, the potential of older workers emerges as a vital resource. Chapters 1 and 2 underscore the significance of untapped older workers, highlighting their numbers and economic contributions. Chapter 5 further delves into the nuances of older workers, discussing barriers they face in the labor market, such as ageism and workplace adaptability. It emphasizes the need for policies that promote inclusive employment practices, lifelong learning, and age-friendly work environments. By reaping the benefits of an aging workforce, societies can foster economic resilience and social cohesion. By engaging this demographic, economies can benefit from their experience, skills, and knowledge.

Chapter 2 expands on this issue by quantifying the potential impact of older workers on the economy, illustrating both their numbers and the value they bring. The “Silver Economy” concept signifies the growing market focused on the needs and

preferences of older adults, encompassing sectors such as healthcare, technology, and leisure. By harnessing the capabilities of older workers, businesses can innovate and adapt to the demands of an aging population.

More generally, older individuals are not merely passive recipients of care; they can and do act as change agents in their communities. While climate change is discussed primarily in relation to women in Chapter 4, the potential for older persons to contribute to climate action is significant. Older adults possess a wealth of life experience that can inform community-level actions and responses to climate challenges. Engaging older persons in climate initiatives can enhance community resilience. Their insights into local history, resource management, and sustainable practices can guide effective strategies for mitigating climate impacts. Encouraging intergenerational collaboration can also amplify the impact of these efforts, as older and younger generations work together to address environmental issues.

Additionally, the chapter highlights the importance of creating platforms for older individuals to share their knowledge and advocate for sustainable practices. By recognizing their role as change agents, societies can harness the potential of older persons to drive meaningful progress in combating climate change and fostering community resilience. The digital landscape is rapidly evolving, presenting both opportunities and challenges, particularly for older adults. Chapter 1 addresses the digital divide,

emphasizing that while technology can enhance lives, disparities in access and skills can exclude older individuals from its benefits. The tech revolution discussed in Chapter 1 highlights the need for inclusive digital strategies that bridge this divide.

Chapters 3 and 4 further explore the role of technology in enhancing sexual and reproductive health rights (SRHR) and addressing gender-based violence (GBV). Technological innovations can improve access to critical health information, yet there is a need for ongoing training to ensure older adults can effectively engage with these resources. Additionally, issues such as cyber violence and romance scams, mentioned in Chapter 4, underscore the vulnerabilities older individuals face in the digital realm.

Legislative frameworks related to digital data and digitalization, discussed in Chapter 6, play a crucial role in safeguarding the rights of individuals while promoting technological advancement. Ensuring that policies are inclusive and protective can mitigate risks associated with the digital divide and empower older adults to navigate the digital landscape confidently.

Climate change poses significant challenges that intersect with aging and technology. Chapter 1

outlines the urgent situations arising from climate challenges, emphasizing the need for adaptive population development strategies. The future direction of population development must consider the vulnerabilities of older adults in the context of climate impacts.

Women are disproportionately affected by climate change, as highlighted in Chapter 4. However, older women, in particular, face unique challenges related to health, mobility, and social support during climate crises. Addressing these vulnerabilities through targeted policies and community initiatives is essential for building resilience.

In summary, the cross-cutting themes of aging, digitalization, and climate crisis highlight the need for an integrated approach to address the complexities of contemporary society. By recognizing the potential of older workers, engaging older persons as change agents, and leveraging technology while addressing its challenges, societies can navigate these megatrends effectively. Promoting inclusivity, resilience, and sustainability will be crucial in harnessing the benefits of aging and ensuring a thriving future for all generations.



Thailand's Nairobi Summit Commitments: Progress, Gaps, and Future Priorities

Introduction

As the chapters have shown, since the 1994 International Conference on Population and Development (ICPD) and the ICPD+25 Summit at Nairobi, Thailand has made significant strides in developing its human capital and addressing demographic challenges. This final section reflects on some aspects of Thailand's progress, key gaps, and future priorities regarding its Nairobi Summit Commitments.

Successful Practices

The global commitments set forth at the ICPD25 Nairobi Summit in 2019 have served as a guiding framework for Thailand's population development initiatives over the past 5 years. Aligned with the summit's five priority themes, Thailand has demonstrated significant progress in several key areas.

Firstly, in the realm of universal access and rights in sexual and reproductive health, Thailand has made strides in integrating essential services into its Universal Health Coverage (UHC) system. This aligns with the ICPD's goal of ensuring no unmet need for family planning and no preventable maternal deaths and morbidities. Thailand has prioritized scaling up successful practices on family planning, elimination of mother-to-child transmission of HIV/Syphilis, and safe motherhood within the UHC scheme.

Furthermore, the country has established comprehensive population-related goals, such as aiming to reduce maternal mortality to 15 deaths per 100,000 live births by 2030, demonstrating its commitment to the ICPD's vision.

Secondly, in response to the ICPD's call to address sexual and gender-based violence, Thailand has taken significant steps. The country has integrated gender-based violence prevention, information, and services into its UHC system, ensuring that women and girls have equal access to quality and comprehensive support. Moreover, Thailand has leveraged its robust community taskforces and civil society actors to complement existing state structures in driving population development initiatives, fostering a participatory policy process as envisioned by the ICPD.

Table 7.1 Estimates of adolescent pregnancy rates

	Adolescent pregnancy			Marriage before 18	Marriage before 15
	UNWPP	MoPH	MICS	MICS	
2009	51.274				
2010	50.765				
2011	52.02				
2012	51.549				
2013	49.803				
2014	47.767				
2015	45.947			21.3	4.3
2016	42.869				
2017	40.013				
2018	36.046				
2019	33.628	28.76	23.0	20.2	3.0
2020	33.224	29.03			
2021	32.744	25.34			
2022	31.585	21.33	18	17	
2023		20.25			
2024		17.94			

Source: United Nations World Population Prospects, Ministry of Public Health, Multiple Indicator Cluster Survey.

Thirdly, Thailand has placed a strong emphasis on addressing the needs of adolescents and youth, aligning with the ICPD's priority to draw on demographic diversity to drive economic growth and achieve sustainable development. The country has implemented the 2016 Prevention and Solution of the Adolescent Pregnancy Problem Act, which promotes youth participation in policy implementation and monitoring. Additionally, Thailand has equipped adolescents and youth with knowledge and skills on sexual and reproductive health and rights, particularly contraception, aiming

to achieve a teenage pregnancy rate of no more than 15 per 1,000 live births among 15–19-year-olds by 2027. There are, however, discrepancies between different estimates of adolescent pregnancy (Table 7.1). As such, measuring the true scale of progress towards meeting the respective SDGs relies on the implementation of an abortion tracking system as in tandem with birth data.

Furthermore, Thailand has recognized the importance of building resilience and adapting to future challenges, as highlighted in the ICPD's call

to mobilize the required financing to fully operationalise the ICPD Programme of Action (PoA) and sustain the gains already made. The country has demonstrated a commitment to leveraging both established frameworks from pilot initiatives and emerging robust community operations to navigate upcoming challenges effectively. This adaptive and resilience-building approach will enable Thailand to continue its progress towards the ICPD's goals.

Underpinning these successful practices is Thailand's emphasis on evidence-based decision-making. The country has utilized data on population changes and megatrends, such as

population aging and climate change, to inform the development and monitoring of its population policies and programs. This aligns with the ICPD's principle of a participatory policy process, where data and evidence play a crucial role in shaping policies and interventions.

Lastly, Thailand's efforts to promote women's empowerment and gender equality, including through initiatives to reduce early marriage by empowering female students to continue schooling, resonate with the ICPD's commitment to addressing discrimination against all women and girls.



Gaps and Challenges

While Thailand has made substantial progress in several areas, the chapters also reveal persisting gaps and challenges that the country needs to address to fully align with the commitments made at the ICPD25 Nairobi Summit.

One key area of concern is the need to further strengthen access to sexual and reproductive health services and building a stronger rights framework. The Nairobi Summit emphasized the importance of leaving no one behind and ensuring the full realization of sexual and reproductive health and rights for all individuals, regardless of their background or circumstances. Despite very significant progress, many women face significant obstacles, particularly in rural areas, where access to healthcare facilities and information is limited.

Adolescents and youth often encounter barriers due to a lack of comprehensive sexuality education and youth-friendly services. This limits their ability to make informed choices about their bodies and health. Marginalized populations, including persons with disabilities and LGBTQ+ individuals, also experience discrimination and inadequate service provision. Their specific needs are frequently overlooked, resulting in gaps in care and support. Lastly, migrant workers often lack access to SRHR services due to legal and systemic barriers, making it difficult for them to obtain necessary health care. Thailand may need to expand the scope and coverage of SHRH services and interventions to better meet the diverse needs of its population, particularly marginalized groups.

The Nairobi Summit – and the ICPD Agenda more broadly – places a very strong emphasis on securing

gender equality and equity. A current topic of debate regarding gender equality within households in Thailand is the significant disparity in the distribution of household work and child care responsibilities between men and women. This imbalance is believed to contribute to the country's low fertility rates, as many women face the dual burden of professional responsibilities and an unequal share of domestic duties. The report highlights that women often spend considerably more time on household tasks, which can deter them from having more children. The lack of equitable distribution of these responsibilities not only affects women's decisions on family size but also impacts their overall well-being and career aspirations. Addressing this issue is crucial for fostering a more supportive environment that support couples to meet their reproductive aspirations while promoting gender equality in both domestic and professional spheres.

More specifically, the Nairobi Summit called for accelerated action to eliminate all forms of gender-based violence and harmful practices. While the chapters mention Thailand's efforts to integrate gender-based violence prevention and services into the UHC system, more comprehensive data and analysis on the effectiveness and reach of these interventions would be needed to gauge their impact.

The Nairobi Summit underscored the importance of mobilizing adequate and sustainable financing to finish the ICPD Programme of Action and sustain the gains made. The chapters explored some of the challenges in securing the necessary financing to implement its population development programs and initiatives. Thailand may need to strengthen its resource mobilization efforts, both domestically



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and through international cooperation, to ensure the long-term viability and expansion of its population development initiatives.

Another challenge highlighted in the chapters is the need for Thailand to further enhance its multi-stakeholder partnerships and citizen engagement in the policy and program development process. The Nairobi Summit emphasized the importance of a participatory approach, involving civil society, youth, and marginalized groups in the design, implementation, and monitoring of population-related policies and interventions. While the chapters mention the involvement of community taskforces and civil society actors, more detailed information on the extent and effectiveness of these collaborations would be helpful to assess Thailand's progress in

this area.

In conclusion, while the chapters highlight Thailand's successes in several areas, they also reveal challenges that the country needs to address to fully align with the commitments made at the ICPD25 Nairobi Summit. These include the need to further strengthen adolescent sexual and reproductive health services, address the needs of vulnerable populations, enhance data and evidence on gender-based violence, secure adequate financing, foster multi-stakeholder partnerships, and develop comprehensive strategies to navigate emerging population-related challenges. Addressing these gaps and challenges will be crucial for Thailand to achieve the vision and goals set forth by the ICPD Programme of Action and the Nairobi Summit commitments.

Policy Recommendations and Call to Action

As Thailand continues its efforts to advance population development in line with the ICPD Programme of Action and the Nairobi Summit commitments, several key policy recommendations emerge from the chapters. These recommendations can serve as a roadmap to address the gaps and challenges identified and drive meaningful progress towards the shared global vision.

- Thailand should prioritize the expansion and strengthening of adolescent sexual and reproductive health services and rights. This includes enhancing the scope and coverage of comprehensive sexuality education, ensuring access to youth-friendly health services, and empowering adolescents and youth to make informed choices about their bodies and wellbeing. By investing in the next generation, Thailand can fulfil the Nairobi Summit's call to realize the rights and full potential of young people.

- Thailand should intensify its efforts to address the needs of vulnerable and marginalized populations, such as persons with disabilities, migrants, and refugees. This may involve developing targeted policies and programs, strengthening service delivery systems, and partnering with civil society organizations to reach these groups effectively. Ensuring that no one is left behind is a fundamental principle of the ICPD Programme of Action and the Nairobi Summit commitments.

- Thailand should enhance its data collection, monitoring, and evaluation systems to better understand the prevalence, drivers, and impacts of harmful gender norms and practices, such as gender-biased sex selection and female

genital mutilation/cutting. This evidence-based approach can inform the design and implementation of more comprehensive interventions to eliminate all forms of gender-based violence and discrimination, as called for by the Nairobi Summit.

- Thailand should strengthen its resource mobilization efforts, both domestically and through international cooperation, to secure adequate and sustainable financing for its population development initiatives. This may include exploring innovative financing mechanisms, leveraging public-private partnerships, and actively participating in global and regional funding platforms. Securing the necessary resources is crucial to fulfilling the ICPD Programme of Action and the Nairobi Summit commitments.

- Thailand should further enhance its multi-stakeholder partnerships and citizen engagement in the policy and program development process. This can involve strengthening the role of civil society organizations, youth groups, and marginalized communities in the design, implementation, and monitoring of population-related policies and interventions. By fostering inclusive and participatory governance, Thailand can align with the Nairobi Summit's emphasis on a "people-centred" approach to population and development.

- Thailand should prioritize the integration of climate change considerations into its population development policies. By conducting comprehensive assessments of how climate impacts demographic trends, the country can develop adaptive strategies that ensure sustainability and resilience in the face of environmental challenges.

- To capitalize on the opportunities presented by an aging population, Thailand should implement policies that promote both active/productive ageing and consumption among older persons (the 'silver economy'). This includes fostering innovation and entrepreneurship among older adults, enhancing their participation in the workforce, and leveraging their experiences to contribute to society thus realising a second and third demographic dividend.

By doing so, Thailand can harness the potential of its aging population as a valuable asset for economic growth and development.

- Thailand should develop comprehensive, forward-looking strategies to address emerging population-related challenges, such as population aging, climate change, and urbanization. This may involve conducting in-depth analyses of megatrends, exploring innovative solutions, and continuously adapting its policies and programs to ensure the long-term resilience and sustainability of its population development efforts. Anticipating and responding to these challenges is a key component of the Nairobi Summit's vision for the future.

In conclusion, the policy recommendations outlined above provide a roadmap for Thailand to further strengthen its population development initiatives and align them with the commitments made at the ICPD25 Nairobi Summit. By addressing the gaps and challenges identified in the chapters, Thailand can serve as a regional leader in advancing sexual and reproductive health and rights, empowering marginalized populations, eliminating gender-based violence, securing sustainable financing, fostering multi-stakeholder collaboration, and building resilience to emerging challenges.

As a call to action, Thailand should demonstrate unwavering commitment and political will to implement these recommendations, ensuring that they are supported by robust institutional frameworks, sufficient resources, and strong monitoring and accountability mechanisms. By doing so, Thailand can contribute to the global progress towards the ICPD Programme of Action and the Nairobi Summit's vision of a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled.



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