

Draft**Statute on the National Health System, Version 1 B.E.....**

**Draft document submitted for generating ideas and suggestions from members of
the National Health Assembly**

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(draft)

Statute on the National Health System

version 1

B.E.

Preamble

Considering health system reform in the past decade, the organizations, networks, and members that were involved in the reform effort reached the following consensus. The national health system of the country must have a clear, correct, and forceful direction. The reform of the system must achieve the goal of comprehensive good health and done with active participation of people from all parts of society. To achieve such aims, it is necessary to have in place a statute on the national health system to express the will and commitment of the society, so that all its sections can refer to it as the framework and guideline for the determination of policies, strategies, and action to develop the health of the nation.

Later on, in the process of drafting into law, the National Legislature approved the principles, structure, and core content of the statute. The Legislature also ordered the preparation and review of the national health statute to be done periodically, at least every 5 years. This is so the statute would be a dynamic one, capable of solving problems and also evolve to be in harmony with changing situations.

In order to implement Section 46 and 47 of the 2007 National Health Act, the National Health Commission has prepared the Statute on the National Health System version 1, B.E....., which incorporates the principle of participation and also provides opportunities to solicit opinions and ideas from all parts of society. The statute preparation process was also based on utilization of technical data, information and the concept of management of knowledge. The rationale of the statute is for it to be a reflection of the social will and commitment, and for it to be a reference for society to determine direction and objectives of a health system for the future. In this respect, associated networks can also prepare statutes on a health system for their own local areas, provided such statutes do not conflict or is incongruent with the Statute on the National Health System. Also, the Cabinet has approved this Statute in it's..... meeting on (insert date), in order that the State and other related agencies can use it as a framework and guideline in determining policies, strategies, and action on the health of the country. The statute is detailed below:

Article 1: This statute shall be called “Statute on the National Health System version 1 B.E.....”

Article 2: The Statute shall have effect in accordance with Section 48 of the National Health Act B.E. 2550 (2007) on the day after its announcement in the Government Gazette.

Definition of terms

Article 3: In this Statute,

“health” means a state in which human beings have a sense of completeness in the physical, spiritual, and social dimension, as well as having wisdom, and an interconnectedness such that forms a holistic and balanced entity.

“wisdom” means comprehensive and insightful knowledge, as well being able to use reason to distinguish between good and bad, and between what is beneficial and what is harmful, all which thus leads to a mind that is good and beautiful as well as kind and generous.

“State agency” means the central government agencies, regional and local agencies, state enterprises, organizations overseeing professional bodies, publicly owned organizations, and other agencies of the State”

“morality”¹ means goodness, morals, and respect for truth which persons should have embedded in their minds and which form the guiding principles in their day to day living.

“ethics”² means concepts guiding behavior that is rooted in morality.

“humanity”³ means virtue, which humans should use in their interaction with other humans, such as kindness and compassion.

“sufficiency economy”⁴ means guidelines in the maintenance of life and for behavior of people at all levels, from family, community, up to the state level. It is a principle guiding the direction of development and management of the State using the principle of the middle way, especially in the area of economic development, so that the country can progress and cope in the context of a globalizing world. Sufficiency means prudence and reason, including the need to build up immunity in oneself so as to be able to withstand impacts from internal and external sources. This build up will require knowledge, prudence, and carefulness in the use of knowledge at every stage of one’s planning and implementation. At the same time, the spiritual qualities of the people must be developed, especially that of government officials, theoreticians, and business people, so that they would gain virtue, integrity, and acquire comprehensive and balanced knowledge on how to live with endurance, perseverance, mindfulness, and wisdom. They will then be well equipped to cope with the rapid and wide-ranging changes in material, social, cultural and environmental conditions impinging on them.

“good governance”⁵ means management or government that aims to create benefits and happiness to the people, that results in the achievement of the task at hand, that achieves quality, and a state of value for money. It means not having to go through superfluous procedures. It means improving the work process to be up to date in accord with the current situation. The result of good governance is that people receive services and facilities that meet their needs, and that all actions and implementation are assessed on a continuing basis.

Actions in accordance with good governance must follow the principle of participation, transparency, accountability, efficiency, effectiveness, and the rule of law.

¹ Source: Standards for health professionals

² Source: Standards for health professionals

³ Source: Standards for health professionals

⁴ Source: National Social and Economic Development Board: A compilation of His Majesty’s explanation on the sufficiency economy presented on various occasions

⁵ Source: adapted from content in the Royal Decree on Principles of Good Governance 2003

“creation and enhancement of good health“⁶ means action that aims to promote and support people so that they would have physical, spiritual, social health, and wisdom. This is done by supporting appropriate behavior in individuals and by management of the environment in such a way as to enhance the health and quality of life of the individual, family, community, and society.

“public policy” means direction that society or community agree it should be followed. This also includes written policies indicated by the government.

“participation” means having participation in any activities in a way of thinking, planning, making decision, implementing, getting benefits, monitoring, and evaluating.

“sexual health“ means the type of health that includes a good attitude towards sexual relations and gender situation. That is, having respect for divergent sexual way of life of individuals. The term also means having sexual experience that is safe, satisfying, free from coercion, discrimination, and violence.

“gender” means a state of being female or male that is not determined by the biological system, but by cultural, social, and other factors, resulting in expectations of a certain way of behavior for the female and male in specific circumstances. Gender expectations have influence in determining beliefs, attitudes, myths, including cultural practices with regard to the role of females and males, such that it becomes embedded as the standard of society. Gender expectations vary from culture to culture, and also according to the time period one is living in.

“reproductive health” means health that incorporates the process and function of the reproduction of the human being throughout its lifetime.

“ prevention of disease” means actions or avoidance of actions in order to prevent illness and disease and its recurrence. Prevention can be divided into 3 levels: prevention prior to having an illness or disease, prevention whilst being ill or contracting the disease, prevention of diseases and rehabilitation after a disease had been cured.

“control of disease”⁷ means the control of epidemics, non-communicable diseases, communicable diseases, dangerous communicable diseases, including those that arise from contamination by substances present in the environment and food. It also includes control of those diseases that undermine one’s health, life and ones resources but which could be prevented if detected early.

⁶ Source: adapted from a definition contained in the Fund to Build Health Act and the draft National Health Act version 24 September 2002

⁷ Source: from the report on the Thai national health system, Senate Committee on Public Health, 2000

“the prevention and control of health hazards“ means the management of factors harmful to health whether it be the physical environment, biological factors, germs, chemical substances, and natural disasters. The term also encompasses systems in society that seek to prevent disease occurrence and decrease its impact on health. It also includes building elements that facilitate good health.

“public health services” means services related to enhancing health, such as: prevention, control of health and health hazards; examination, diagnosis, and treatment of illnesses; rehabilitation of the individual, family, and community.

“ the quality of public health services“ means the characteristic of public health services that is based on knowledge of the nature of the human being, society, science, technology, and other fields; that is based on professional morality and ethics; and is a service that meets the needs and expectations of the people and society in an appropriate manner.

“public health services with a human heart” means public health services that is compassionate and is provided with harmonious relationship between public health officials and the people. It is a service which is aimed at providing benefits and health to the people, family, community, and society, and performed in accordance with honest professional ethics, without domination by sectional business interests.

“primary health care“ means services emphasizing the individual, the family, and the community. It is services based on accumulated knowledge and technology, but also emphasizing the dimension of concern for humanity and society. It is a blended service that aims to promote good health, to prevent and control disease and health hazards, to provide treatment, and to rehabilitate individual capacity. It is a holistic service that features close interconnections among service providers, community and family service centres, and public health services at other levels. One element in this interconnection is the mutual referral and redirection of responsibilities among such service providers

“public health services that emphasizes business interests”⁸ means public health service provided with the aim of maximum profit and is tied to the market mechanism, the final aim being distribution of profit among the business enterprises as is commonly practiced in the business world.

“local wisdom on health” means a body of knowledge, ideas, beliefs, and expertise on health care that derives from accumulated local knowledge, including Thai traditional medicine, indigenous medicine, and other alternative medicines that people and community use in health care and which is congruent with the local community.

“Thai traditional medicine” means health care that relies on Thai knowledge and traditional medicine textbooks that has been accumulated, transmitted and developed, or that relies on studies and teaching in educational establishments that have been validated by the law on medical practice. The concept also covers certain medical and scientific tools used to diagnose and treat diseases as specified by the law.

“indigenous medicine” means health care that relies on knowledge accumulated, used, and developed over time, and that is specific to the local community’s culture, tradition, resources, and accepted by such community.

“Other alternative medicines” means health care that relies on medical knowledge other than modern medicine, Thai traditional and indigenous medicine.

“community” means a group of people with a unique identity due to having the same interests or values, or facing the same problems, or living in the same geographical area, or having the same interest and activity in a particular topic.

“local community” means a community living together in a village or sub-district.

“Indigenous medical practitioners” means persons who have knowledge and capabilities in health care, using local indigenous medical wisdom.

“the consumer” means the buyer or those receiving services or those who have been approached to buy products or services or information. The term also includes those who use products or services legitimately even though they did not pay for it.

⁸ Adapted from explanatory notes attached to National Health Act (version 24 September 2002)

“sustainable consumption” means consuming to meet the essential needs for products and services, needs both of the present and the future, and consuming them in a way that results in a sustainable economy, society, and environment.

“creating knowledge on health“ means compiling knowledge from practice, from the management of knowledge, from exchange of learning, from accumulated learning and experience, from research and development, and from a synthesis of knowledge and data related to health and the health system.

“the dissemination of information on health” means information on health that State agencies and other sections of society have prepared for distribution and communication to the public, and done by using various modes and channels.

“public health personnel” means a public health service provider who works under the relevant law, rules or regulations

“manpower for health“⁹ means persons or groups who come together to play a role in developing health, in providing care and treatment, in protection against disease, and in the rehabilitation of capabilities. They comprise public health personnel, public health professionals, supporting staff, people practicing Thai traditional medicine, indigenous medicine, and other alternative medicines, volunteers in various areas of health, key persons, networks on health, and other persons working in health connected areas.

“monetary and fiscal system for health ” means monetary and fiscal management with the aim of enhancing people’s health and ensuring efficient access to public health service for all.

“collective financing“ means a financing system where people contribute according to their capability to pay, and according to the principle of fair sharing of hardship and happiness. The system brings all the money pooled to finance the provision of necessary public health services for good health and life maintenance for all.

⁹ Adapted from a definition given in the Thai Strategic Plan on Health Manpower 2007-2016

Section 1

Philosophy and basic concepts on the health system

Article 4: Good health is a basic right of the people.

Article 5: The health system comprises of all relationships connected with health, and the public health service system is part of the health system.

Article 6: The health system is a part of the societal system and is part of the national security system. The State and every part of society shall accord high importance to developing the health system.

Article 7: The health system must promote the value and dignity of the human being and must give importance to the idea of justice and equity in society.

Article 8: The health system must give consideration to development as a holistic concept, encompassing the human condition that is complete in the physical, spiritual, social dimension and wisdom and connected in a balanced way.

Article 9: The health system must place high importance to the building up of health which leads to the sustainable happiness of the people.

Article 10: Every part of society has the duty to work together to push for the development of the country away from consumerism in the direction of the sufficiency economy, including stimulating a conduct of life in accordance with religious principles in order to build strength in mental health, in wisdom, and promote a strong society.

Section 2

Objectives and desirable characteristics of the health system

Article 11: The health system must be based on the principles of morality, ethics, humanitarianism, good governance, knowledge, and wisdom.

Article 12: The health system must be consistent with the way of life and the culture of the community, both at the local and the national level. It must be congruent with the principle of sustainable development. It must promote mutual help, support for the idea of self-reliance, and adhere to the principle of sufficiency economy.

Article 13: The management of the health system must abide by the principle of good governance.

Article 14: The health system must underpin, promote, and facilitate the achievement of rights and duties in all aspects of health in accordance with the constitution of the Kingdom of Thailand and the 2007 National Health Act and other related laws.

Article 15: The time frame of objectives set in this statute in effect provides an overall picture of the health system up to the year 2020.

Section 3

Providing guarantees and protection so as to create good health

Article 16: Guarantees and protection to create good health must cover every one living on Thai soil, without discrimination according to economic status, society, physical status, sex, age, place of residence, nationality, beliefs and political ideology.

Article 17: The establishment of guarantees and protection as stated above is to be done with the participation of every part of society, including state agencies, private sector, academic sector, professional sector, and civil society. The participation shall be one of harmony, mutual assistance, and compassion.

Article 18: Guarantees and protection to foster health must cover management of all factors that affect health. Such factors are personal factors relating to the individual, and factors affecting the whole public health service system. Such management must be inclusive—not just ensuring access to the public health services – but also include taking into account pertinent elements such as the environment, physical, biological, economic, social factors, and various relevant public policies.

Section 4

The strengthening of health

Principles

Article 19: Efforts to strengthen health must aim to create a state of holistic happiness for all in the society, that is, aim to decrease the rate of illness, disability, and untimely death. Also, such efforts must aim to lessen expenditure on health, following the concept of “strengthening health, before repairing it”, which is to be implemented at every level and at all stages of the cycle, from the time one is in the mother’s womb to the final moment of life. At least five strategies to achieve this are presented:

- (1) Development of a public policy that facilitates good health.
- (2) Development of the environment and surroundings that facilitate good health.
- (3) Strengthening the community following the concept of sufficiency economy, by emphasizing development that includes participation.
- (4) Development of the capacity to achieve good health of the individual, family, and community.
- (5) Reform of the public health system in a way that support the idea of strengthening health.

Objectives

- Article 20: Develop participatory healthy public policies
- Article 21: Develop health promoted environments
- Article 22: Promote the health of the individual, family, and society in a balanced manner. Also, such efforts must be an interconnected one, in accordance with the concept of strengthening for good health.
- Article 23: Build communities that have health strengthening elements in place, aiming to cover 80% of all the sub-districts in the country.

Measures

Article 24: The State shall promote state agencies at all levels and all sections of society to develop an overarching public policy that enhances health, by a participatory process all through the necessary stages. It is to be a policy that has a knowledge base platform.

In order to achieve a healthy public policy, state agencies shall arrange to form sub-policies and plans to develop the master health promotion policy, and continually implement policies that are concrete and practical.

Article 25: The State shall support state agencies at all levels and all parts of society to together develop an environment and surroundings that nurture health in the physical, mental, biological, economic, and social dimensions. Examples of things to be done are: management of public parks, health parks, sport grounds, community squares, creation of happy workplaces, development of an urban town plan that nurtures happiness, development of a safe transport system, good management of water management system and agro-industrial system.

Article 26: The State and all parts in society should promote and support education and exchange of knowledge of individuals, family, and community in order to build up knowledge and skills in the conduct of life and enhancement of health, which in the end will lead to expanding the capacity of the individual, family, and community to continuously look after oneself and be self-reliant. Furthermore, such promotion should lead to the opening up of more public space and the development of tools and innovation in order to cope with changes. In all these efforts, one must also take into account the existing social context, the bioregional map, and local wisdom.

Article 27: The State and all parts of the society shall promote and support the individual, family, community, and networks so that all becomes stronger. They shall also promote distribution of the needed drugs, medical supplies, knowledge and technologies in a sufficient and encompassing manner. This is in order to build up self-health promotion and self-reliance in the individual, family, and community.

Article 28: The State shall promote and support the enhancement of the capacity of community and the individual and also their capacity to participate so they can look after and protect natural resources, the environment and surroundings in a way that facilitates good health.

Article 29: The State and parts of society shall develop financial measures aimed at strengthening the health and quality of life of children, the disabled, elderly, and disadvantaged in society. This is to be done by emphasizing management at the community level so that there is movement towards sustainable development. In addition, the development of a community welfare system, community funds, and various community activities aiming for holistic health shall be promoted and supported.

Article 30: The State and all parts of society shall support the building and management of knowledge, research, technology, capital and marketing in order to develop agriculture, industry, business, and services that facilitate good health and environment, that enhances social responsibility. Examples include promotion of natural agriculture that does not use pesticides, promotion of community and environmental friendly industry, promotion of businesses and services that does not harm health.

Article 31: The State shall arrange to have a strategic plan on sexual health and reproductive health that contains elements of participation, and also support measures to make the plan concrete.

The State shall also support the development of laws connected with the development of sexual and reproductive health.

Section 5

The prevention and control of diseases and health hazards

Principles

Article 32: Persons have the right to live in an environment and surroundings that facilitate good health, and where persons receive up-to-standard and timely preventive and control services for diseases and health hazards. This is seen as responsibility and duty of every part and every level of society, and it is to be done by pro-active measures that are embraced by good governance on the basis on economic, social, environmental equilibrium and sufficiency economy principles.

Objectives

Article 33: The State acts with unity to prevent and control diseases and health hazards using a multi-means and multi-level approach.

Article 34: The community is to be strong and participates at the local level in the prevention and control of diseases and health hazards

Measures

Article 35: The State shall arrange for the preparation of a strategic plan to prevent and control diseases and health hazards, a plan which incorporates the element of participation and the notion of interrelated measures covering national, provincial and local levels. To achieve this, the State shall set up mechanisms consisting of state agencies, private sector organizations, academic organizations, and civil society in an appropriate balance, also taking into account the need to link efforts with the international arena, particularly with neighboring countries.

Article 36: The State shall support decentralization of power, and strengthen the capacity of local governmental organizations, in terms of structure, manpower, and budgetary support, so that a state of readiness is achieved to implement the strategic plan for prevention and control of diseases and health hazards.

Article 37: Local governmental organizations at every level are to prepare a plan of participation incorporating every part of society to implement the strategic plan to prevent and control diseases and factors threatening health at the national and provincial level.

Article 38: The State shall arrange to have developed a mechanism for assessing health impacts deriving from public policies, projects, or activities that may affect health, that is in accord with the constitutional provisions and related laws.

The State shall enhance the capacity of local governmental organizations to do health impact assessments when they determine policy and when they issue permission to institute projects or activities that may affect health.

The State shall promote organization by the people in order to participate in the process of health impact assessment to protect the rights of the community from the pursuance of public policies, projects and activities in the community. The State shall also arrange for the establishment of a mechanism to receive complaints from people who have been affected and a mechanism to solve problems in a timely manner.

Article 39: The State shall accelerate efforts to develop an efficient system and mechanism to maintain vigilance in order to prevent and control diseases and health hazards. To achieve this, there has to be integrative work done between State and other connected agencies at all levels.

Article 40: The State shall bring in tax measures to use in the effort to prevent and control diseases and health hazards, such as environmental tax, garbage tax.

Article 41: The State shall develop laws to protect rights as stated in Article 30, and develop laws on case adjudication or dispute resolution for cases on the environment and surroundings. Also, mechanisms to mediate, to provide remedy and compensation for people suffering from impacts are to be crafted, and in the case where disputes arise, ways to resolve them have to be found.

Article 42: The State shall promote the continuous campaigning to disseminate information, news and the right values to the public, including strengthening the community so it could be self-reliant and possess immunity. Support is also to be given to communities to link together to become a network to work towards proper life conduct and towards forming well-informed behavior that will render them safe from diseases and health hazards.

Section 6

Public health services and quality control

Principles

Article 43: The ideal public health service is one that is system-based, that is of high quality, efficient, effective, and not expensive. The aim also is to support and invest in services and technologies which provide high returns in health.

The public health services must be in harmony with the ideal health system. The State must support a public health service system with a human heart, i.e, one that emphasizes service to the public rather than catering to business interests.

The system of public health services must be such that it enhances good health for all, with emphasis on looking after the health of the people on a continuing basis, as well as having linkages with all its service elements to engender joint responsibility. In addition, encouragement and support must be given to the locality and community to participate and play a role in providing primary health care, and at the same time encouragement must be given to the concept of self-reliance in health matters among the people.

Objectives

Article 44: The primary health care system must be accepted by the people, must be dependable and trustworthy as well as being honorable. It must have efficient linkages with other public health systems. It must be a service that supports the community and the locality to gain higher competency in strengthening health and self-reliance.

Article 45: The public health system must be one with a human heart and such quality is expressed in concrete terms at every level.

Measures

Article 46: the State shall promote a primary health care system that is organized by doctors or family public health personnel so as to provide comprehensive services for all in both urban and rural areas. The primary health care centres must support the idea of enhancement of health, must support pro-active type of work that aims to solve health problems of the people through cooperation with the locality, community, and relevant agencies, in addition to linking up with public health service systems at other levels through an efficient referral system.

Article 47: The State shall promote and support efforts to increase the capabilities of the local governmental organizations so they will be able to take up the responsibility of providing public health services, especially primary health care. The State shall also initiate transfer of such services to be run by the local governmental organizations by a process of systematic and step-by-step preparation and implementation, all the while relying on the principle of voluntariness and readiness of local governmental organizations, of public health personnel, and of public participation. All such efforts are to focus on benefits for the people.

Article 48: The State shall promote the development of the public health services for specific target group populations, and for those with limitations in accessing public health services which include children, the disabled, elderly, and the socially disadvantaged. The effort is to be done systematically, efficiently, and running through the complete cycle of service.

Article 49: The State and all parts of society shall work together to create a public health service with a human heart in a practical manner, by placing importance on the idea of people's participation in the provision of public health services, for example, by using volunteers and by emphasizing the idea of public interest in public health service provision.

Article 50: The State shall support continuous campaigning to disseminate information and the right values to the public and public health personnel. This is in order to build good relations among these two entities, that is based on a mutual understanding of limitations of public health service and of various possibilities occurring which might lead to undesirable things. The State is also to forge cooperation among all parts of the society in order to lessen the occurrence of such undesirable factors and help remedy problems together in a harmonious way.

Article 51: The State shall not give special support or tax or investment privileges for public health services that emphasis business interests.

Article 52: The State shall arrange for a national mechanism to be established to oversee the direction of public health services and improve its quality. Other necessary mechanisms shall also be developed, one which is a mechanism to oversee and develop appropriate scientific knowledge and appropriate technology for use in public health.

Section 7

The promotion, support, use and development of local wisdom on health, of Thai traditional medicine, indigenous medicine, and other alternative medicines

Principles

Article 53: The promotion, support, use and development of local wisdom on health, of Thai traditional medicine, indigenous medicine, and other alternative medicines should be based on the following principles:

(1) Harmony with the community's way of life, culture, traditions, beliefs, and religion, leading to a state of self- reliance in health.

(2) Promotion of all systems of medical care equally, in order to strengthen the health system.

(3) Ensuring that all people equally have the right to choose and access the various medical systems to look after their health and that of their families. Ensure that the people have updated knowledge and also receive protection as consumers, by having a health information system that is correct, objective and accessible.

(4) Use of wisdom, knowledge, rational thinking in developing on a continual basis academic knowledge and traditional knowledge, so as to achieve a system that generates maximum benefit, that has the quality of value for money, that is effective and safe.

Objectives

Article 54: The community in general and the local community in particular realizes the value of local wisdom on health, of Thai traditional medicine, indigenous medicine, and other alternative medicines; the communities also play a role in promoting and supporting the use and development of such systems in order to look after the health of the communities.

Article 55: Thai traditional medicine, indigenous medicine, and other alternative medicines are to receive promotion and support so that they have sufficient mechanisms and resources for their functioning and so that their development can proceed in a systematic and holistic manner. This involves the build up and management of knowledge, the building and development of the health and public health system, of public health personnel, of the system of Thai medicine and of Thai drugs developed from herbs. Another objective is to arrange sufficient budget for hospitals utilizing Thai traditional medicine, and for the protection of Thai traditional wisdom.

Article 56: That a list of Thai medicine and medicine developed from herbs is included in the national medicine list at the proportion of at least 10% of all the medicine contained in the national list. Also, that both types of medicine are promoted and used in public health services, in order to maintain the country's self-reliance on medicine.

Article 57: That there is a robust system and mechanism to protect local wisdom on health, Thai traditional medicine, indigenous medicine at the level of community, country, and region.

Article 58: That there exists a strong system and mechanism, a strong technical base that is independent and neutral, to select and promote alternative medicines. There should exist also a mechanism that protects consumers of alternative medicines. Such systems and mechanisms are to be effective, economical, safe, and have value for money, all in order to generate maximum benefit in the care of the people's health.

Article 59: That there is sufficient allocation of the budget to support the development of local wisdom on health, Thai traditional medicine, indigenous medicine, and other alternative medicines. This is to reach the goal of creating and managing knowledge systematically, in the area of research and study, in the production of needed personnel, and in the development of textbooks.

Article 60: That there is a Thai traditional medicine hospital, to be a model for emulation. The hospital is to exemplify high standards in services, research and study, and training of personnel. At least one such hospital per region is to be established.

Measures

Article 61: The Committee on Development of Local Wisdom on Health under the National Health Commission shall provide advice and recommendations to the Commission and the Cabinet on: implementation, monitoring and evaluation of the national strategic plan, the development of Thai traditional wisdom on health, and Thai approaches to health. The committee is also to prepare reports and recommendations of a policy and strategic nature in order to push forward in the area of local wisdom on health, Thai traditional medicine, indigenous medicine, and other alternative medicines. Such reports and recommendations are to be submitted to the Commission, after which they are then to be submitted to the Cabinet for approval, and then implemented by relevant state agencies.

Article 62: The State shall develop the participation and strength of the community in general and the local community in particular, so they can help to rejuvenate and utilize local wisdom in health matters and also apply and develop it in a way that is responsive to the changing social, economic, and cultural contexts. Also, the State shall promote and support the community in general, the local community in particular and local governmental organizations to play a role in managing local wisdom in health at the community level.

Article 63: The State shall develop the strength and participation of the local community, local governmental organizations, and academic institutions in the community, in order to promote, support the utilization and development of indigenous medicine. This is to be done by supporting and enhancing the status and capacities of indigenous medicine practitioners. One way to do this is by passing on this tradition of knowledge through encouraging new generation youth to see the worth of indigenous medical practitioners. Other ways are: by preserving medicinal patterns of the community; developing the system of knowledge management both through textbooks and through indigenous medical practitioners; promoting research and development of the knowledge of indigenous medical practitioners. All this is for the purpose of adding to traditional knowledge and utilizing it for the health care of the people.

State agencies and community shall strengthen the network of indigenous medical practitioners, and support the development of linkages among such networks at the level of the community, region, and country, through the process of participation and horizontal coordination.

State agencies related to development of legal and other measures are to support the status of indigenous medical practitioners.

Article 64: The State shall promote and support the utilization and development of traditional Thai medicine so that it has high quality and standards. This is to be done as follows:

State agencies, production institutes, and academic institutions must work together to develop a system to study, research, and develop the science of Thai traditional medicine. Topics to be included are: basic knowledge on the body and workings of the human being, the process of disease occurrence, causes of disease, methods of disease diagnosis, methods of medicine preparation, means of treatment and cure of disease, system of rectifying mistakes in treatment and cure, system of technical development, of organizing academic conferences and publishing academic periodicals, as well as creating and developing standards of medical practice, textbooks, and manuals.

The National Medical Manpower Commission, under the National Health Commission is to prepare a strategy and operations plan to develop manpower in Thai traditional medicine.

State agencies, production institutes, and academic institutions must work together to develop the manpower system by setting a structure and framework to govern manpower management in Thai traditional medicine, by developing standards for producing manpower in Thai traditional medicine both by way of mentoring and formal learning in educational institutions, establishing a network of institutes producing personnel in Thai traditional medicine, imparting and developing new knowledge continuously to such personnel, to develop staff providing Thai traditional medicine services in State run public health centres so that they can qualify for the medical certificate to practice Thai traditional medicine and applied Thai traditional medicine.

The State shall also establish Thai traditional medicine hospitals so they can be a model exemplifying high standards in service, in study and research, and in the training of personnel to achieve the objectives Stated in Article 58.

Article 65: The State, state agencies and relevant entities in society must promote and support the insertion of Thai medicine and herbal medicine in the national drug list and in the pharmacopoeia of hospitals.

The Committee on National Drug System Development shall push for bringing more Thai medicine and herbal medicine to be included in the national drug list so that it will be sufficient for the health care of the people.

State agencies and relevant entities in society shall promote the development of the capacity of hospitals and communities to produce and use Thai medicine and herbal medicine.

Article 66: State agencies, local governmental organizations, and local communities must together create a system and mechanism to protect local community wisdom in health, Thai traditional medicine, and indigenous medicine so that they become strong and efficient; also linkages are to be developed among the community, country, and region for such purpose. This can be achieved by building understanding and deep knowledge within Thai society, by enhancing the potential and strength of the State and local community to protect local wisdom, by developing the legal system and

mechanism to support this effort, and by Thailand playing a pro-active role in negotiations in international forums on the protection of wisdom.

The Committee to Protect and Promote Wisdom in Thai Traditional Medicine shall, in accordance with the law on protecting and promoting Thai traditional medicine, set a clear direction and work plan to manage the fund for Thai traditional medicine, and manage it with adherence to the principles of good governance and participation. This is in order to build a strong and efficient system and mechanism to protect community wisdom in health, in Thai traditional medicine, and in indigenous medicine, a system that has linkages among the community, the country, and the region. What also must be done is to allocate money from the fund for Thai traditional medicine to support agencies of the State, organizations in the local community, and local governmental organizations so they can strengthen the system and mechanisms for protecting and promoting local wisdom on health, Thai traditional medicine, and indigenous medicine.

Article 67: The State in its efforts on health care shall promote and support the utilization and development of other alternative medicines that is effective, economical, give value for money, and safe by doing the following:

Establish an independent national level committee, one that has a solid technical base, in order to function as selector of types of alternative medicine that is effective, economical, give value for money, and safe. This is aimed at creating maximum benefit in health care for the people and at the same time protecting the consumer of other alternative medicines.

Set up networks on the technical aspects of alternative medicine at the community and national level, as well as supporting this kind of network at the regional level. The aim here is to promote and support the use of other alternative medicines that is effective, economical, give value for money, safe, and that encourage self-reliance in health care.

Section 8

Protection of the consumer

Principles

Article 68: The system of consumer protection must aim at defending and protecting their rights with emphasis on:

(1) Establishing a process of learning in order to enhance the capacities of the consumer.

(2) Imparting true and complete information so that the consumer can make decisions wisely.

(3) Establishing mechanisms to monitor and inspect products and services at all levels.

(4) Supporting the participation of the consumer, consumer organizations, and networks so that products and services of high standard and quality are supplied for all on an equitable basis; so that there is established a system of efficient, appropriate compensation and treatment for when damages to health occurs. And all has to be kept free of intervention from power politics, from the State, business, and from other forms of intervention.

Objectives

Article 69: The consumer's rights must be defended and protected in accordance with legal provisions. Also, his/her capabilities must be developed so as to be able to defend and protect his/her rights and that of society; and also to be able to access comprehensive and useful knowledge and information. The consumer must also have knowledge about impacts resulting from the act of consumption, and is able to utilize the knowledge and information received to help make the right decisions and make them in a timely manner.

The consumer who received damages as a result of consuming products and services must receive efficient, appropriate, and timely compensation and treatment.

Article 70: Children, youth, the elderly, and the disadvantaged must receive special protection in accordance with legal provisions, and must receive the opportunity to develop life skills, develop the ability to assess the media, and to have the opportunity to participate in consumer protection work. Also, any communication of information with these groups must be appropriate and fitted with their specific circumstances, must be easily accessible, easily understood and also practical.

Measures

Article 71: In protecting the consumer, the State must institute the following measures:

(1) Accelerate the establishment of an independent consumer protection organization in accordance with the constitution, and enact laws on the compensation and treatment for those suffering damages from consuming products and services. Such laws must be suited to existing situations and in tune with technological progress in the development of health products and services. Also, there must be efficient enforcement of the law on consumer protection. And an independent fund to operationalize consumer protection must be established and such fund to receive a sufficient budget allocation from the State.

(2) Promote and support the organization of the people in groups, clubs, societies, foundations, networks, and others, to work on behalf of the consumer, and to enhance his learning process. Other things to do are: work in every province to protect the consumer as a part of civil society; support business people and mass media to be responsible to society and work together as a group to protect the consumer.

(3) Promote and support the participation of the people in the determination of policy, planning, monitoring and inspection of the work done to protect the consumer, both at the national and local level.

(4) Manage the provision of public services to children, youth, the disadvantaged, and elderly in such a way that they can access and utilize it for the maintenance of life and the forming of a just and comprehensive relationship with other parts of society.

(5) Support the establishment of a testing system that incorporates public participation, to ensure that products and services meet appropriate standards. The testing system is to be used to assess for efficiency, value for money, safety, and impact. The results of testing must also be widely disseminated to the public.

(6) Promote a policy of sustainable consumption and integrate it into other public policies, as well as design measures to operationalize the idea of sustainable consumption.

(7) Support and promote local governmental organizations to play a role in surveillance, monitoring, inspection, and evaluation of products and services.

(8) The State shall support efforts to monitor the dissemination of health information to the public, so that it is correct, unbiased, and that such information is allotted sufficient and proportionate media space. Also, efforts must be made to inculcate ethics in mass media practitioners, incorporating the idea of responsibility in the dissemination of advertising and sales promotion that have an impact on good health.

Article 72: Local governmental organizations shall determine policy, plan, budget, draft local statutes, and mechanisms to protect the consumer. This is to be done by integrating the work of protecting the consumer as a major component of plans drafted, and also by enlisting the participation of the consumer in such plan determination.

Article 73: Academic institutes, professional councils, and professional committees on public health are to work together to create and develop a strong and just system to protect the consumer, and to jointly develop and assess a mechanism to protect the consumer by having a sufficient number of consumer representatives sitting in committees in the relevant organizations.

Article 74: Business people and mass media shall in their regular work take into consideration the safety of the consumer and give priority to social responsibility. They shall aim to support the idea of sustainable consumption by working together to find out and implement good practices in the production of products and services, and by adhering to ethical principles with regard to business conduct and sales promotion. They should also practice intra-group control so all is in accordance with relevant requirements, as well as promptly protect and help treat the consumer when he suffers from damages resulting from their business practices.

Article 75: With regards to the preparation of international agreements and laws deriving thereof, relevant State agencies shall do the following:

(1) Carefully and comprehensively consider its effects on the consumer in terms of health and state of happiness, following procedures allowed in the constitution. In performing this task, opinion must be solicited from a wide range of consumer and civil society organizations.

(2) Create guarantees in order to prevent damages occurring as a result of entering into such international agreements. Also, develop mechanisms to limit impacts of such agreements so that it would not create obstacles to the development of health and public health of the country.

(3) Open up opportunities to facilitate discussion concerning impacts on the consumer, especially in matters of health, resulting from the implementation of international agreements. This is in order to find ideas and mechanisms to compensate for any damages that occurred. Opportunities are also to be provided for discussion on changing or abrogating agreements in the case of widespread impact on health.

Section 9

The creation and dissemination of knowledge on health

Principles

Article 76: Knowledge on health is an important element in the development of a health system. The State has a duty to support the creation of such knowledge, with the participation from all parts of society, as well as to provide the opportunity for the people to access learning in a comprehensive range of relevant topics.

Article 77: Public policy must be developed from a knowledge base, that has qualities of comprehensiveness, sufficiency for the purpose, and reliable – that is, being able to reveal the source of such knowledge.

Article 78: The creation and dissemination of knowledge on health must put the public interest first and foremost, and must be in tune with the key problems of the country, so as to create a genuine learning society.

Objectives

Article 79: The State and all parts of society must invest and play a role in creation, management, and dissemination of knowledge on health, in order to build a health system that rests on a pillar of comprehensive and inclusive knowledge at every level.

Measures

Article 80: The State shall allocate a sufficient budget to support research on health, including on the health system and in other necessary fields. The amount of budget to be allocated to such research shall follow international standards.

Article 81: The State shall promote local government organizations to play a role in building knowledge on health and also allocate an appropriate budget to organizations in the localities, so they could participate in the creation, management, and spread of knowledge.

Article 82: The State shall promote and support civil society so that it is capable of creating, managing knowledge on health, as well as supporting the creation of appropriate and varied channels for learning in the community.

Article 83: The State shall support and promote the private sector, civil society, and the community to invest together, to create, manage, and disseminate knowledge on health.

Article 84: The State shall promote and support investment in the development of personnel and networks at all levels to create and manage health knowledge.

Article 85: The State shall build a system for inspecting, assessing, and monitoring the dissemination of health knowledge, with emphasis on encouraging the participation of all parts of society.

Article 86: The State shall determine measures and allocate a budget for all types of mass media so that they are able to set aside sufficient time and space for the dissemination of correct health knowledge. Such efforts by the State shall use the principle of appropriateness, that is, take into consideration the time period of the communication, how much media space to buy, the quality of the content, and the mode of reception of the target group.

Article 87: The State shall arrange for a national mechanism to be set up: to set direction and policy for the creation, management, and spread of health knowledge that is sufficient for the purpose of developing a good health system; to administer such policy, and to monitor and evaluate the results of the policy. The State shall also support the setting up of a network of health research organizations, and in this regard, it can either develop existing mechanisms such as the research institute on public health or start anew by forming new mechanisms as appropriate.

Section 10

The dissemination of health information

Principles

Article 88: The communication of information on health must be objective, ethical, comprehensive, and use appropriate channels. This is to enable the people to absorb such information and use it in their decision-making, and to modify their health behavior so as to lead to a state of happiness. The emphasis here should be on providing opportunities for the people to easily access news and information on health.

Objectives

Article 89: The people shall be accorded protection, such that they would be able to receive sufficient and also correct news and information on health.

Article 90: There shall be a good system of information on health, one that includes a broad network covering the whole country, with linkages that enable international coordination.

Measures

Article 91: The State shall develop the system of news and information on health and develop a mechanism which can utilize it for support of the relevant public policy. It shall also push for a policy of continual monitoring of situations so as to prevent and protect against diseases and health hazards.

Article 92: The State shall arrange for a mechanism to inspect and assess the mass of health information and news, with the aim of providing early warning to the people, protecting them, and enhancing the strength of civil society.

Article 93: The State shall support local governmental organizations, the academic sector, the private sector, the civil and other social sectors so they can participate in all stages of management, administration, and supervision, so that there occurs appropriate dissemination and utilization of health information and news.

Article 94: The State shall arrange for a national mechanism to: determine the direction and policy to develop news and information system with regards to health; to implement the policy; to monitor, supervise, and evaluate the results of the policy on a continuing basis; and to support the building of network of organizations working on health information and news.

Section 11

The formation and development of personnel on public health

Principles

Article 95: Personnel in public health, including manpower working other aspects on health, play a crucial role in the health system, as they are the key human resource factor enabling the realization of society's desired health system.

Article 96: The State shall have the duty to determine policy and plans to produce, develop, and distribute public health manpower in an equitable manner, in order to meet the needs of the country. This is to be done in a way that does not place primary reliance on the market system.

Objectives

Article 97: Personnel working in public health and related health issues must have quality, ethics, and good social conscience. There must also be sufficient numbers of them widely and equitably distributed all over the country.

Article 98: Public health personnel servicing the public must do their work by way of a multidisciplinary approach, and must also work in close coordination with manpower working on other health aspects related to public health.

Measures

Article 99: The National Committee on Health Manpower under the National Health Commission shall have the duty of overseeing the direction, policy, and strategy on national health manpower. It is also tasked with the coordination, supervision, monitoring, and evaluation of the health manpower system so that it is working in accord with the desired health system.

Article 100: The relevant State agencies are to support a system of health manpower production in which people from the local communities have the opportunity to be educated and developed so that they could then go back to become public health personnel in their localities. Such system is to involve the close participation of the community and local governmental organizations.

Article 101: The State agencies, professional organizations, and various sections of society shall support public health personnel to work with personnel in other aspects of health so that all are working cooperatively to achieve the desired health system.

Article 102: The State shall support public health personnel in all fields to achieve professional status that is supported by law and also shall support professional organizations to work together. It shall also work to open up avenues for the people to participate in the work of health professional organizations in a substantive way.

Article 103: The State shall support development of a mechanism at the local level to coordinate the planning of local public health and health manpower. The aim here is to have a system of efficient and equitable distribution of such manpower to the various localities.

Section 12

Monetary and fiscal aspects of health principles

Principles

Article 104: Health care financing must aim for the sustainability of the desired health system.

Objectives

Article 105: Collective financing for health care in order to achieve objectives set for 2020 are to have the following elements:

(1) Decrease the proportion of expenditures for national public health services that derive from households from 36% of total national expenditures in 2005 to not more than 20%.

(2) Decrease the number of households suffering acute economic problems due to having to pay for medical services, from 2% of all households as recorded in 2006 to less than 1%.

(3) There exists justice and equity for people receiving public health benefits that are subsidized by the State.

(4) The rate of increase in national health expenditure is not to exceed the rate of growth of domestic gross national product.

(5) Collective financial system is implemented correctly based on principle without focusing on profits.

Measures

Article 106: The State shall organize collective financing such that funding follows the principle of progressive collection, including an increase in tax collected from public health services that emphasize business interests and from the supply of products that are harmful to health.

Article 107: The State shall expand the collective financing system to include people with permanent residence in the country, including migrant workers, so they all can access public health services. The system shall also work to limit co-payment when using specific public health services, in order to prevent higher than necessary usage of services. Co-payment is not a measure to bring forth more contributions to the system. If there is to be co-payment, then there must also be efficient measures to protect the poor and those with specific health care needs to receive the appropriate services.

Article 108: The State shall increase investment in highly efficient public health services. Such services involve the idea of building and enhancing health, and prevention and control of diseases and health hazards. Investment for such a system shall be increased at a rate not less than the rate of increase in investment in medical care and treatment. In addition, the State shall support the development of aspects of the health system that will become more important in the future, such as primary health care service concept, long-term convalescence services, rehabilitation services, Thai traditional medicine, indigenous medicine, alternative medicine, research for health system development, and tax measures to induce a decrease in consumption of products harmful to health.

Article 109: The State shall improve efficiency in monetary and fiscal administration of public health services so as to be able to control expenditures. This can be done by using the method of annual aggregate financial planning that sets the amount of expenditure clearly in advance to control spending, such as fixed payment per head or according to type of disease. There also has to be a plan to create appropriate incentives for service providers.

Article 110: The State shall promote the establishment of a community health fund which involves participation of state agencies, local governmental organizations, and the community in order to support enhancement of health, prevention and control of diseases and factors threatening health, and rehabilitation of capacities. The State shall also support a system of monitoring, evaluation, and inspection, for the purpose of establishing good governance in management and administration.

Article 111: The State shall establish a national mechanism to perform long term monetary and fiscal planning in health affairs, to do monitoring, and to support continuing research for the development of the monetary and fiscal system for health, by arranging for sufficient budget allocation.

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