

Proactive Thai Health Systems amidst Geopolitical Turbulence

The 18th National Health Assembly, having considered the report on “Proactive Thai Health Systems amidst Geopolitical Turbulence¹”,

Recognizes that Thailand, as a medium-sized developing country with an open, export-dependent economy, has been directly affected by severe and complex **geopolitical turbulence**, which has emerged as a clear and present threat to national security and the daily lives of Thai citizens. The impacts are most tangible in border areas, where multidimensional crises have generated risks across fiscal, public health, and economic domains. These circumstances underscore the necessity of adopting a **comprehensive security approach**—one that views national security in an integrated manner, extending beyond the military dimension to encompass political, economic, social, and health aspects that are mutually reinforcing;

Concerns and unanimously agrees that, in such a complex global context, policies focused solely on short-term crisis response have trapped the country in a “**crisis-response-neglect**” loop—a pattern whereby society mobilizes all resources to respond to immediate crises, yet once the situation subsides, attention fades and long-term preventive investment is deferred. This self-reinforcing cycle has resulted in **policy gridlock**, where strategic long-term decisions cannot gain traction because resources and attention remain fixated on urgent necessities, stalling practical implementation of critical national agendas. A particularly serious issue is the neglect of vulnerable populations along the borders. This has created security gaps and exposed Thailand to an **endless problem-solving trap**, diverting valuable resources away from their optimal use in national development;

Acknowledges that this situation is largely driven by structural gaps. Although efforts have been made to design inter-agency coordination mechanisms, these frameworks remain fragmented and poorly interconnected in practice. Existing rules and procedures, rather than facilitating solutions, have become obstacles that add complexity to problem-solving. Such an unsupportive system has created “**grey zones**”—situations where formal systems fail to

¹ The document on the 18th National Health Assembly / Main 2

accommodate real-world complexities—forcing committed personnel to resort to workarounds outside formal frameworks in order to deliver results and fulfill their missions.

Realizes that reliance on the exceptional abilities of individual “heroes” is unsustainable and produces two critical consequences. First, personnel face a high risk of burnout and may ultimately exit the system—representing an irreplaceable loss of invaluable human capital. Second, the system fails to learn, as individualized workarounds are difficult to distill into improved procedures, policies, or institutional reforms; wisdom remains trapped within individuals rather than embedded in institutions, causing the system to stagnate and gradually decline, with inefficiency becoming the new normal. A situation in which human capital is depleted while institutional structures remain underdeveloped is a certain sign of systemic decline. **The desired system, therefore, is not one that waits for “heroes,” but an extraordinary system that enables ordinary people to work together at their fullest potential, with the system itself serving as the primary enabling mechanism;**

Supports a paradigm shift to break this cycle. This requires moving beyond reliance on individual effort toward building robust and scalable systemic capacity. Central to this shift is the redesign of a “**growth zone**”—a working environment intentionally designed as the antithesis of grey zones, fostering a genuine learning system where lessons from successes and failures are systematically captured, analyzed, and translated into continuous improvements of processes, policies, and institutional structures. The resulting capability is **systems** resilience—the capacity not merely to “bounce back” to the original state after crises, but to “bounce forward,” emerging stronger and better equipped to anticipate, absorb, adapt, and transform in response to future challenges. In advancing this agenda, **there is consensus that the health system is the most critical key**, given Thailand’s internationally recognized health-system capacity. This strength positions the health system as a key instrument in two domains: health diplomacy and the promotion of human security;

Unanimously agrees that it is **high time to elevate Thailand’s health system to the next level** as a strategic spearhead—one that operates proactively, with long-term vision, and integrates **geopolitical determinants of health** into planning. This requires a new working environment guided by comprehensive security principles and grounded in ethical standards. These principles will inform the design of new operational mechanisms with real decision-making authority and adequate resources, driven by three core pillars: (1) Content—the development of forward-looking policies framed by enlightened self-interest and forward defense at the source; (2) Collaboration and coordination—the dismantling of inter-agency silos, with pooled budgets as

a key enabling tool; and (3) Communication—the establishment of a transparent central data platform and a cultural shift from ‘confrontation’ to ‘dialogue’ grounded in deep listening. Under this new paradigm, initiatives such as humanitarian corridors would be reframed as strategic investments that mitigate risks at their origin; and

Firmly believes that leveraging these assets through a “**proactive health system**”, driven by collaborative mechanisms of this kind, constitutes a critical instrument for upgrading human capital, fostering economic growth, and strengthening national security in a sustainable manner.

Thereby, adopted the policy statement:

Amid geopolitical turbulence that has caused Thailand to forfeit strategic opportunities under reactive policymaking, the government must commit to a decisive transformation—from “holding ground and responding” to “leading proactively”—with the health system serving as the strategic anchor for comprehensive security. This entails systemic reconfiguration that embeds geopolitical awareness to manage risks upstream, while leveraging health diplomacy as the lead mechanism for stability-building. Concurrently, deliberate efforts must transform “grey zones”—where ambiguous rules impede effective action—into “growth zones” featuring transparent structures, explicit rules, and institutionalized systemic support. Underpinning this shift calls for anticipatory investment driven by enlightened national interest, aimed at building social resilience and bolstering national security sustainably.

The core contents of the five pillars of the Proactive Thai Health Systems approach are as follows:

1. Ensuring Sustainable Health Financing and Pharmaceutical Security

To build a sustainable and self-reliant health system, Thailand must concurrently establish fiscal resilience and guarantee access to medicines and medical supplies. Key proposals include: (1) Establishing a ‘Comprehensive Health Security Fund’ as a national pooled financing mechanism to respond to emergencies—such as pandemics, border instability, and emerging threats—with sufficient initial funding from government and transparent, accountable governance; (2) Developing flexible health financing mechanisms for non-Thai populations, with fund subsidies to ensure equitable access for vulnerable groups; and (3) Strengthening pharmaceutical and medical supply security across the value chain by accelerating domestic Research and Development (R&D),

and production of essential medicines and vaccines, to deploying them for health security purposes, to scaling commercially—all supported by robust intellectual property management and strategic international trade negotiations.

2. Strengthening System-level Operational Resilience to Crises

To enhance crisis preparedness and recovery capacity, the government must strike a balance between unified command and ground-level empowerment by: (1) Establishing a "Joint Emergency Command System" with decisive and unified authority, capable of integrating resources across the health sector, security agencies, partner networks, and civil society to ensure timely crisis response; and (2) Decentralizing management authority to local areas while fostering broad-based social participation—enabling communities, including cross-border populations (e.g., migrant health volunteers), to actively engage in building robust social safety networks, easing the burden on the core health system, and cultivating resilient community self-reliance.

3. Developing Strategic Foresight and Intelligence

To shift from ad-hoc problem-solving to future preparedness, the government must drive policymaking through strategic foresight and intelligence by: (1) Establishing a ‘Strategic Mechanism for Geopolitics and Health’ as a national think tank and strategic watchtower, responsible for synthesizing data, detecting future signals, and developing scenarios for proactive planning; and (2) Building transparent communication processes and institutionalized collective learning mechanisms to address emerging national challenges—enabling all sectors to exchange data, convert it into meaningful information, build shared knowledge, and through evidence-informed dialogue, arrive at shared new understanding and collective wisdom for sound decision-making. This approach will genuinely transform citizens and stakeholders from passive policy takers into active co-shapers of the country’s future.

4. Establishing an Open Data Ecosystem and Mobility Data Analytics for Strategic Decision-Making

To enable incisive strategic decision-making while respecting cultural sensitivities and diverse values, the government must lay a connected, real-time data foundation—with particular attention to highly mobile cross-border populations. This entails: (1) Developing an ‘Open Data Policy Learning System’, accessible to all stakeholders, leveraging mobility data analytics to understand population dynamics and inform targeted resource allocation; and (2) Building enabling infrastructure—in the short term, deploying offline-capable digital health records to

create a "Digital Health ID," potentially incorporating biometrics for universal identity verification. This offline-first approach ensures reliable data capture in connectivity-limited border and remote areas, while serving as the foundation for future online integration when infrastructure matures. In the long term, instituting robust data governance that builds and sustains public trust.

5. Investing in Human Capital and Driving Health Diplomacy Towards Global Leadership

The government must recognize that human capital represents the most sustainable investment a nation can make—and the most powerful diplomatic instrument at its disposal. This requires decisive action to: (1) Nurture talent from cross-border populations by reframing them from a perceived ‘burden’ into ‘capital for development,’ through investing in education and child protection, and designing regulatory frameworks that enable cross-border health personnel to deliver services to their own communities at the point of need; (2) Position Thailand as a hub for high-skilled talent exchange, attracting international experts in critical shortage fields; and (3) Drive health diplomacy decisively—transforming geopolitical turbulence from a threat into a catalyst for deeper international engagement. By leveraging cooperation frameworks to jointly address shared challenges, Thailand can emerge as a trusted partner and reliable anchor in times of uncertainty, while fostering friendship and mutual trust through shared capacity-building for youth and health professionals—Thai and international alike. This includes initiating scholarship and exchange programs, internships and secondments to international organizations, and stationing health attaché to cultivate robust and enduring alliances on the global stage.

The National Health Assembly hereby adopts the following resolutions:

1. Members of the National Health Assembly endorse, commit, and fully support advancing Thailand toward a proactive health system amid geopolitical turbulence, using the guiding policy statement comprising five core pillars as a shared conceptual foundation and common direction for all sectors to drive forward. The substance of this framework shall be refined and adapted to align with evolving contexts as appropriate.

2. It is proposed that the National Health Commission (NHC) assign relevant agencies and mechanisms to establish a ‘Strategic Mechanism for Geopolitics and Health’ to address challenges arising from geopolitical turbulence and to support data-driven, forward-looking policy decisions, as follows:

2.1 The National Commission on International Trade and Health Studies (NCITHS) shall expand its mandate and composition to encompass geopolitics and health issues, and study

appropriate approaches for establishing the ‘Strategic Mechanism for Geopolitics and Health,’ with recommendations to be submitted to the National Health Commission. The International Health Policy Program Foundation (IHPP Foundation) and the National Health Commission Office (NHCO) shall serve as joint secretariats to the NCITHS.

2.2 The Committee on the Assessment of National Security Situations and Threats, together with the National Security Council Office (NSC), shall incorporate geopolitics and health dimensions into their operations.

2.3 Actions under Sections 2.1 and 2.2 shall conduct in-depth studies of the five core pillars outlined in this resolution to develop concrete policy proposals. This shall include feasibility assessments, prioritization of issues and target areas, prior to advancing toward tangible implementation.

3. It is recommended that the Cabinet initiate policy sandbox approaches guided by the essence of a ‘proactive health system,’ enabling relaxation of existing constraints or the design of new institutional arrangements and rules to foster system-level innovation that demonstrates tangible outcomes before scaling. As an initial step, it is proposed to pilot a ‘health personnel certification mechanism’ in designated areas.

4. It is recommended that the Ministry of Public Health, the National Security Council Office (NSC), and other relevant agencies study and consider, as a matter of urgency, the feasibility of establishing a ‘Comprehensive Health Security Fund.’

5. The Secretary-General of the National Health Commission is requested to support the collaborative mechanisms under Resolution 2 (establishment of the Strategic Mechanism for Geopolitics and Health), foster a strategic learning cycle through ongoing developmental evaluation, and report to the 20th National Health Assembly.