
Management Systems for Health and Well-being in a Polycrisis

The 18th National Health Assembly considered the report entitled “Management Systems for Health and Well-being in a Polycrisis¹”,

Recognized that Thailand, both at present and in the future, is confronted with a situation of “Polycrisis”, defined as a condition in which multiple crises occur simultaneously or are interconnected, thereby generating overlapping, continuous, and increasingly severe impacts. Such crises include disease outbreaks, flooding, earthquakes, drought, climate change, inflation, income insecurity, social inequality, stress and mental health problems, political tensions and ideological conflict, accidents, consumer protection issues, online fraud, and unrest in border areas. The interconnection and overlapping of these crises amplify their effects, resulting in broader and more severe consequences. Fragmented, insufficiently integrated, delayed, lacking unity, and not adequately responding to the needs of population management across systems not only undermines the effective prevention and mitigation of widespread impacts but may also give rise to a crisis of public trust and long-term social fragmentation.

Acknowledged that past disaster and crisis management efforts have faced significant limitations, particularly in the pre-crisis phase, where systems for prevention, mitigation, and preparedness remain insufficient and ineffective. While response and post-crisis recovery efforts have involved multiple agencies, they continue to lack integrated, timely, and holistic systems and mechanisms. Critical gaps persist across key domains, including governance and administrative structures, workforce and community readiness, technology and information systems, risk communication, health services, legal and budgetary frameworks, and participation of communities, partners, and networks. These challenges are especially evident at the district level, including Bangkok Metropolitan districts and Pattaya City, where local areas remain unable to manage crises

¹ The document on the 18th National Health Assembly / Main 4

sustainably on their own. Support from central authorities is often untimely, fragmented, and misaligned with local needs, encompassing shortcomings in proactive management before crises, unified and rapid response during emergencies, and sustainable recovery with systematic lessons learned in the post-crisis phase.

Acknowledged that Thailand has laws, policies, strategies, and plans related to disaster and crisis management, including the 20-Year National Strategy, the National Disaster Prevention and Mitigation Plan, the Public Health Disaster Prevention and Mitigation Action Plan (2023–2027), and several relevant Acts, which together constitute key operational frameworks for implementation. Technological advancements—including big data analytics, artificial intelligence (AI), interactive dashboards, real-time alert systems, and integrated digital health information systems—constitute essential instruments for strengthening and enhancing the effectiveness of crisis management at the local level. Recognizing that the concept of “**Resilient and Sustainable Systems for Health**” (RSSH), together with the core components of the health system, can be applied to strengthen system governance and management for well-being amid Polycrisis comprehensively and sustainably, grounded in integration and the participation of communities, partners, and networks.

Commended that government agencies, the private sector, local administrative organizations, communities, and civil society have continuously undertaken actions and actively participated in the management of disasters and health-related emergencies. In many areas, diverse disaster management models have been initiated and developed, including the establishment of ad hoc command centers, the creation of local disaster funds, the formation of civic volunteer and civil society groups, and the training of community leaders. These efforts have enabled rapid crisis management that is responsive to and aligned with local contexts.

Concerned that crisis management systems at the local level remain insufficiently robust, particularly at the district level, including Bangkok Metropolitan districts and Pattaya City. This weakness is evident across all phases of crisis management. In the pre-crisis phase, gaps persist in integrated and participatory governance mechanisms, operational plans, drills, incident command systems, data management systems, communication and early warning systems, as well as in the capacity of personnel, community leaders, and volunteers, and in learning processes within communities and educational institutions. During the crisis response phase, limitations are observed in the management of emergency operations centers, the delivery and continuity of health services,

the management of data and resources, and the operation of evacuation and shelter centers. In the post-crisis phase, challenges remain in achieving holistic and sustainable recovery, including the restoration of health and public service systems, the management of information systems, the establishment and operation of community and local recovery funds, systematic lesson-learning, and the continuous improvement of plans. Furthermore, supporting systems that should be coherent and well-integrated to enable effective local operations remain insufficiently robust across all phases of crisis management. In the pre-crisis phase, weaknesses persist in laws and budgetary frameworks, data systems and communication platforms, standards and operational guidelines, joint training and simulation exercises, health and psychosocial workforce networks, human resources, community, and infrastructure development, as well as in the promotion of collaboration. In the crisis response phase, gaps persist in the availability and implementation of urgent operational guidelines related to budgeting and resource allocation, a unified command system, personnel preparedness at all levels, resource mobilization, decision-making mechanisms, and public communication. In the post-crisis phase, limitations remain in the integrated multidimensional recovery, centralized digital databases, and platforms for knowledge exchange, shared learning, and health assemblies.

Recognized that, in the absence of a robust local-level governance system for health and well-being in Polycrisis—particularly at the district level, including Bangkok Metropolitan districts and Pattaya City—supported by coherent and interconnected support systems and strengthened participatory engagement, the effective prevention or mitigation of severe adverse impacts will be impossible. Such impacts may affect lives, physical health, mental health, health service systems, the environment, economic security, social vulnerability and equity, as well as public confidence and trust in government mechanisms.

Considering that the development of a public policy on “Management Systems for Health and Well-being in a Polycrisis” constitutes a crucial mechanism for comprehensively and sustainably strengthening the management capacity of systems related to well-being in Polycrisis situations. Such a policy would enhance the effectiveness of preventing and mitigating severe adverse impacts on lives, health, property, the environment, society, the economy, the health system, and public trust in government mechanisms. This approach emphasizes strengthening local-level management systems for well-being in Polycrisis contexts—particularly at the district level, including Bangkok

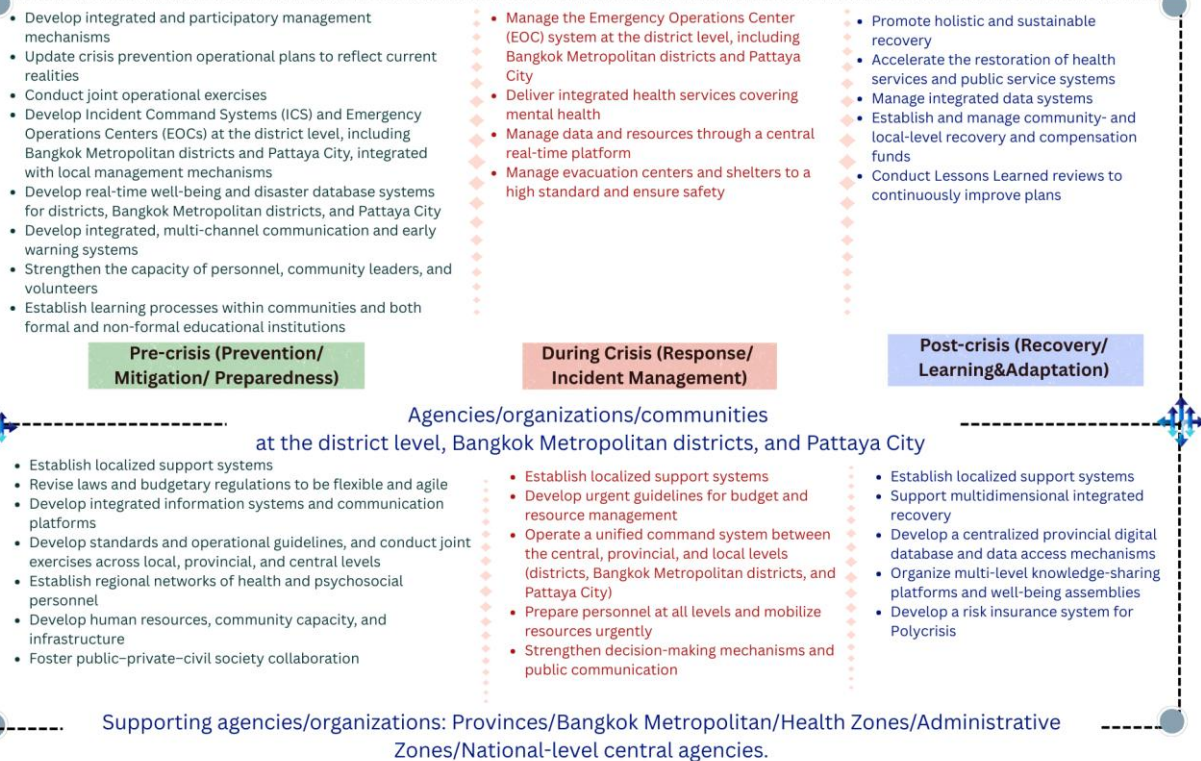
Metropolitan districts and Pattaya City—through coherent and well-integrated support systems and strengthened participation across sectors and stakeholders, to ensure that management systems are resilient and sustainable. Ultimately, this approach promotes the well-being of people and communities.

Accordingly, the following Policy Statement is hereby endorsed.

Urgently strengthen and drive forward the management systems for well-being in Polycrisis at the local level, with district administrations, Bangkok Metropolitan districts, and Pattaya City serving as central hubs, supported by coherent and well-integrated support systems, with a strong emphasis on building the capacity of individuals and teams and empowering participatory engagement, through: (1) proactive management to prevent crises, reduce risks, and enhance preparedness in the pre-crisis period; (2) rapid and unified management to respond to and mitigate the impacts during the crisis period; and (3) sustainable recovery management and lessons learned in the post-crisis period, implemented through local administrative mechanisms, local government organizations, and community networks, in order to ensure that management systems are resilient and sustainable and ultimately contribute to the well-being of people and communities.

Policy Recommendations: Management Systems for Health and Well-being in a Polycrisis

Resilient and Sustainable: Strong Local Areas, Targeted Support, and Empowered Participation for Community Well-being



The core elements of the policy framework are as follows.

1. Proactive management to prevent, reduce risks, and enhance preparedness in the pre-crisis period

1.1 Strengthen the capacity of local area management systems (at the district level, including Bangkok Metropolitan districts and Pattaya City)

1) Develop integrated and participatory management mechanisms by coordinating and integrating collaboration across all sectors, including local administrative organizations, local authorities, government agencies, religious institutions, educational institutions, the private sector, and civil society, through memoranda of understanding (MOUs) and central coordination centers at the district level, including Bangkok Metropolitan districts and Pattaya City.

2) Update crisis prevention operational plans to reflect current realities, adopting a collaborative governance framework that balances bottom-up and top-down approaches. These plans must encompass all phases of crisis and continuity management, supported by clear Standard

Operating Procedures (SOPs) and workflow charts. Key components include defining risk zones, establishing evacuation protocols for vulnerable populations, and identifying alternative transportation routes for emergency response.

3) Conduct joint operational exercises at both the agency and community levels, including cross-jurisdictional and cross-sectoral drills. These should be reinforced by regular simulation exercises and the establishment of a Mutual Aid System capable of rapidly and systematically mobilizing resources and personnel.

4) Develop Incident Command Systems (ICS) and Emergency Operations Centers (EOCs) at the district level, including Bangkok Metropolitan districts and Pattaya City, integrated with local management mechanisms to provide specific academic information to support decision-making, efficient management structure and mechanisms by establishing advisory committee from all sectors, deploying specially trained staff and volunteers, and integrating all health service providers under a unified command structure.

5) Develop real-time well-being and disaster database systems for districts, Bangkok Metropolitan districts, and Pattaya City to assess risks, monitor vulnerable populations, and manage resources accurately, by using a single data system that efficiently links data across platforms, regions, and central hubs, along with developing data analysis and forecasting systems using Artificial Intelligence (AI) technology, and displaying the results through a dashboard.

6) Develop integrated, multi-channel communication and early warning systems—encompassing online, offline, social media, and community networks—to ensure timely and equitable access for all population groups. Promote accurate, transparent, and trust-building risk communication, leveraging digital technologies and artificial intelligence to detect, analyze, and respond to misinformation and disinformation through participatory engagement across all sectors.

7) Strengthen the capacity of personnel, community leaders, and volunteers in core operational competencies, risk communication, assisting vulnerable groups, and providing basic mental health care. This includes continuous exercise to enhance skills, providing enabling resources to support operations, and incorporating crisis management preparedness indicators in the performance evaluation systems of local administrative organizations.

8) Establish learning processes within communities and both formal and non-formal educational institutions to foster public awareness and media literacy. This ensures citizens can

accurately analyze information, remain resilient, and follow proper protocols during crises—cultivating these essential life skills from early childhood.

1.2 Strengthening support systems (Province, Bangkok Metropolitan, Health Regions, Administrative Regions, and National-Level Agencies)

1) Establish localized support systems for proactive management to prevent crises, reduce risks, and enhance preparedness in the pre-crisis period.

2) Revise laws and budgetary regulations to be flexible and agile for immediate disbursement in crises, reduce redundant procedures, allocate special budgets for high-risk areas, and establish a “matching fund” among the government, local authorities, communities, and private sectors to support urgent operations.

3) Develop integrated information systems and communication platforms by establishing provincial and regional well-being data centers linked with the local level. This includes revising information governance regulations to ensure public access to data and analytical use, thereby supporting risk assessment, situation monitoring, and unified communication during crises.

4) Develop standards and operational guidelines, and conduct joint exercises across local, provincial, and central levels to ensure consistent practices and sustained readiness, including tabletop exercises, field drills, and simulation-based training.

5) Establish regional networks of health and psychosocial personnel while strengthening support teams to ensure readiness for timely local support, including emergency support systems in terms of personnel, referral, and resource management.

6) Develop human resources, community capacity, and infrastructure by enhancing the core competency and surge capabilities of personnel in local administrative organizations, civil society, and communities to systematically analyze data, manage plans, and manage risks in their areas. This includes supporting educational institutions in developing curricula and producing crisis management professionals, as well as enhancing infrastructure preparedness, such as field hospitals, backup energy systems, safe shelters, and emergency transportation systems.

7) Foster public-private-civil society collaboration to co-invest in early warning technologies, fortify surveillance networks in border and vulnerable areas, and enhance public communication to build understanding, trust, and public participation in crisis preparedness.

2. Rapid and unified management to respond to and mitigate the impacts during the crisis period

2.1 Strengthen the capacity of local area management systems (at the district level, including Bangkok Metropolitan districts and Pattaya City), in line with the guidelines established for the pre-crisis periods

1) Manage the Emergency Operations Center (EOC) system at the district level, including Bangkok Metropolitan districts and Pattaya City, using a unified or single command structure, linking districts (or Bangkok districts and Pattaya City), local administrative organizations, communities, health service units, with participation from all sectors. This includes managing the incident command system and operational teams to ensure a timely, comprehensive, and efficient response to incidents.

2) Deliver integrated health services covering mental health by integrating cooperation among local administrative organizations, government service units, private sector entities, foundations, university hospitals, and organizations at the district level, Bangkok Metropolitan districts, and Pattaya City. This will enable the rapid deployment of mobile clinics and patient referral systems, while strengthening emergency health response teams and Mental Health Crisis Assessment and Treatment Team (MCATT) to deliver comprehensive physical and mental health care to the population.

3) Manage data and resources through a central real-time platform for situation monitoring, budget allocation, resource and personnel deployment, and shelter management, to reduce duplication, enhance transparency, and support effective decision-making.

4) Manage evacuation centers and shelters to a high standard and ensure safety, by screening and managing resident data, providing equitable assistance and care to vulnerable groups, screening mental health using standard tools, conducting continuous mental health rehabilitation activities, and systematically referring at-risk groups and psychiatric patients. This also includes managing food, clean water, donated items, sanitation, and other necessities to ensure they reach target groups comprehensively and transparently.

2.2 Strengthening support systems (Province, Bangkok Metropolitan, Health Regions, Administrative Regions, and National-Level Agencies), in line with the guidelines established for the pre-crisis periods

1) Establish localized support systems for rapid and unified management to respond to and mitigate the impacts during the crisis period.

2) Develop urgent guidelines for budget and resource management to enable flexible and immediate disbursement without requiring a formal disaster declaration, establish expedited approval timelines, revise regulations to cover essential expenses in evacuation shelters, integrate budgets across agencies, and create a clear operational manual.

3) Operate a unified command system between the central, provincial, and local levels (districts, Bangkok Metropolitan districts, and Pattaya City) using a single national standardized reporting system, while coordinating provincial and regional emergency health services, mobile service units, and providing support for medical, psychiatric, and specialized personnel.

4) Prepare personnel at all levels and mobilize resources urgently through training and practical exercises to create field leaders capable of working effectively under pressure and limited resources. Mobilize resources from the private sector, public organizations, partners, and networks with transparency and accountability.

5) Strengthen decision-making mechanisms and public communication by developing situational analysis reports for national-level decision-making. Ensure unified information dissemination to the public to counter misinformation, foster public trust, and implement continuous monitoring of outreach impact.

3. Sustainable recovery management and lessons learned in the post-crisis period

3.1 Strengthen the capacity of local area management systems (at the district level, including Bangkok Metropolitan districts and Pattaya City)

1) Promote holistic and sustainable recovery covering physical health, mental health, housing, infrastructure, schools, and community centers, guided by the “Build Back Better” approach. This includes restoring the mental well-being of the public and frontline personnel through therapeutic activities, psychosocial recovery programs, and resilience-building interventions to enhance quality of life and safety.

2) Accelerate the restoration of health services and public service systems by resuming operations as soon as safety permits, transparent and rapid repair of facilities, reducing administrative procedures and financial burdens on service users, establishing compensation mechanisms for affected facilities, and boosting personnel morale.

3) Manage integrated data systems by developing a centralized database that links evacuation centers, healthcare units, local administrative organizations, and civil society, as well as existing applications, to identify affected populations and vulnerable groups, reduce duplication of assistance, and continuously monitor recovery progress.

4) Establish and manage community- and local-level recovery and compensation funds to support housing repairs, vocational rehabilitation, and empower vulnerable groups, such as the elderly, persons with disabilities, and low-income families. This includes updating regulations to cover all essential recovery expenses.

5) Conduct Lessons Learned reviews to continuously improve plans through multi-sectoral and community-based assessments at the district level, including Bangkok Metropolitan districts and Pattaya City, to evaluate response performance and continuously refine future crisis management plans for improved readiness and flexibility.

3.2 Strengthening support systems (Province, Bangkok Metropolitan, Health Regions, Administrative Regions, and National-Level Agencies)

1) Establish localized support systems for sustainable recovery management and lessons learned in the post-crisis period.

2) Support multidimensional integrated recovery, encompassing physical and mental health, economic stability, social welfare, education, vocational development, environmental restoration, and human security. This includes establishing food banks and post-disaster relief supply management systems, as well as implementing real-time resource allocation tracking to ensure rapid, transparent assistance and recovery for vulnerable groups.

3) Develop a centralized provincial digital database and data access mechanisms on damage assessment and recovery to support continuous analysis, planning, and monitoring, and to enable long-term resource allocation and sustained support.

4) Organize multi-level knowledge-sharing platforms and well-being assemblies, from local to national levels, to synthesize lessons learned and drive collaborative policy implementation among policymakers, academia, and the public. These platforms will also foster cultural understanding and social cohesion between Thai and foreign nationals in border areas, for instance, using the health charter as a tool.

5) Develop a risk insurance system for Polycrisis through collaboration among the public sector, private enterprises, and a network of insurance and disaster-risk partners.

Hereby, adopted the following resolutions:

1. Members of the National Health Assembly endorsed the policy statement and the core contents of the “Management Systems for Health and Well-being in a Polycrisis” as proposed.
2. Members of the National Health Assembly called on local administrative organizations, communities, civil society, the private sector, agencies, organizations, partners, and networks at the district level, including Bangkok Metropolitan districts, and Pattaya City, to develop the localized management systems, together with flexible and sustainable participatory mechanisms, covering the pre-crisis, crisis, and post-crisis periods.
3. Members of the National Health Assembly called on agencies, organizations, partners, and networks at the provincial, health-region, administrative-area, and national levels—including relevant bodies under the Ministry of Interior, Ministry of Public Health, Ministry of Defense, Ministry of Finance, Ministry of Social Development and Human Security, Ministry of Natural Resources and Environment, Ministry of Agriculture and Cooperatives, Ministry of Digital Economy and Society, Ministry of Education, Ministry of Higher Education, Science, Research and Innovation, the Office of the Prime Minister, the Thai Red Cross Society, public charities, civil society organizations, and the private sector—to develop management systems and effective mechanisms to support localized operations across the pre-crisis, crisis, and post-crisis periods.
4. Members of the National Health Assembly designated the Ministry of Interior (through the Department of Disaster Prevention and Mitigation and the Department of Local Administration), the Ministry of Public Health (through the Emergency Public Health Division), and the National Institute for Emergency Medicine serve as the lead agencies in coordinating with relevant organizations to develop systems and mechanisms that integrate and synchronize operations and resources for crisis and disaster management. This includes establishing Operations and Coordination Centers at all levels—districts, including Bangkok Metropolitan districts and Pattaya City; provinces; health regions, administrative regions, and national levels—to ensure unified, rapid, and efficient execution throughout the pre-crisis, crisis, and post-crisis periods.

5. Members of the National Health Assembly requested a report on the progress, along with situation monitoring and analysis, to inform the development of public policies aligned with emerging contexts, to be presented at the 21st National Health Assembly.