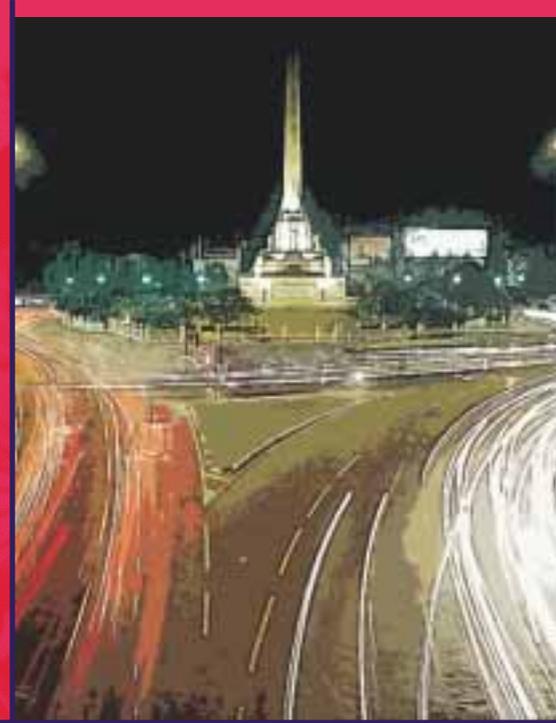
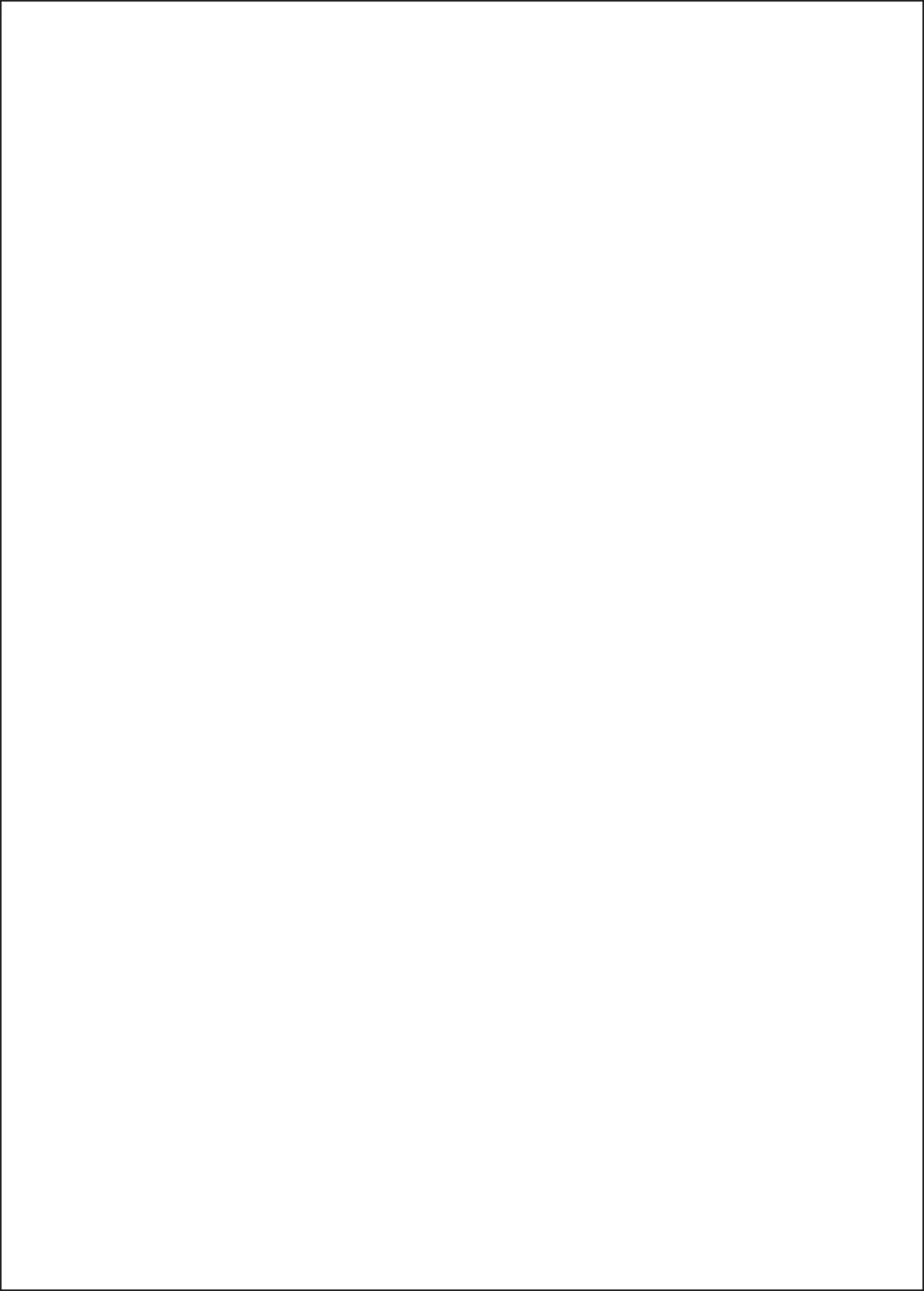


# THAILAND

## Common Country Assessment





**THAILAND**

**Common  
Country  
Assessment**



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# Preface

Thailand's progress in human development is well known and documented. Poverty has been drastically reduced, most children are in school, malaria is no longer an issue of concern, HIV infection prevalence continues to edge lower, social services have been enhanced and the democratic system strengthened. All this has been achieved mainly thanks to political commitment, a vibrant civil society and a rapidly growing economy.

However, challenges still lay ahead to ensure that the benefits of growth will equally reach all people living in the Kingdom. Progress has been uneven and some vulnerable groups and geographical areas are lagging behind. Continued efforts should aim at reaching those marginalized, creating the legal frameworks, enhancing capacities and allocating resources to this end.

It is against this background that the United Nations agencies in Thailand present this Common Country Assessment. We have come together to analyse the current development situation of the country, discuss challenges and opportunities following our shared analytical UN perspective. We are grateful to the Royal Thai Government and all our civil society partners for their active participation in the drafting of this document, which greatly benefited from the many comments and suggestions received along the process.

The formulation of this Common Country Assessment signals an important step in the preparation of a joint partnership framework which, on the basis of this analysis and stated national priorities, will identify a clear set of strategic objectives and define the specific technical cooperation that each United Nations entity will make available for the period 2007-2011. This is to reaffirm our pledge to be an effective and cohesive partner of Thailand in its efforts to realize the commitments taken under the Millennium Declaration, the Millennium Development Goals and other international conventions.



**Joana Merlin-Scholtes**  
UN Resident Coordinator in Thailand

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# Executive Summary

This Common Country Assessment (CCA) is a key document for the United Nations in Thailand. It aims to summarize the principal aspects of the development situation, identify the priority concerns and prepare the ground for the United Nations Partnership Framework for the period 2007-2011.

Thailand has made remarkable progress in human development over the last years, drastically reducing poverty, enhancing social services, strengthening the democratic system and focusing on “people-centred” development. However disparities across regions and among different groups of people are a matter of concern. Although there are still many poor people in Bangkok and in the central region, the most difficult development challenges are in the more remote areas in the North, the North-East and the deep South which are home to many of the country’s most marginalized and vulnerable people – including traditional communities and people without a legal status, migrants, refugees and person with disabilities. Among these children and women are the most vulnerable.

In its introductory section, the CCA points to some of Thailand’s development successes, notably in reducing poverty and infant mortality and in boosting educational enrolment. As a result, Thailand is not only likely to achieve most of its Millennium Development Goals, but has decided to raise the bar by setting itself MGD-Plus targets.

The introduction also touches on a number of issues that cut across the subsequent chapters. One of these is gender. Many more girls are now going to school. Nevertheless many Thai women are still confined to stereotyped roles and have fewer opportunities than men for career advancement and can be subject to violence and abuse. They are also very under-represented in electoral politics.

Another crosscutting issue is the need to respond to emergencies derived from natural and human-made disasters. Thailand took much of the force of the December 2004 tsunami that killed thousands of people and left many disabled. Although the response has been rapid and efficient, many people are still suffering the consequences, particularly fishing communities and those who rely on the tourist industry. Avian influenza represents a major threat with potentially disastrous social, economic, health, and agricultural consequences. Unrest in southern Thailand also remains a complex and highly sensitive issue, as well as the situation along the Myanmar border.

Following the adoption of a new Constitution in 1997, Thailand has also made significant progress on human rights. Nevertheless there are still issues to be addressed as indicated in the July 2005 Concluding Observations of the UN Human Rights Committee.

Section II of the CCA consists of six chapter covering subjects that the UN Country team has identified as the main development challenges.

## Poverty and social protection

Thailand’s rapid economic growth has contributed to a significant overall decline in poverty. However, not everyone has benefited from economic growth or from government programmes, some regions and vulnerable groups have been left behind and the gaps are widening. Most of Thailand’s people living in poverty reside in the rural areas and work in agriculture, though there are also one million people who are poor in the urban areas. A number of marginalized and vulnerable groups, in particular, are likely to be poor and not to be equitably reached by social services and protection measures. These include children in the North-east, the North and the deep South, where more than one million of them also suffer from malnutrition. Another group of rural poor are persons with disabilities.

The Government's anti-poverty strategy is guided by His Majesty the King's philosophy of the 'Sufficiency Economy' which adheres to the Buddhist concept of the middle path. For this purpose it has devised a number of anti-poverty schemes, including a farmers' debt moratorium, revolving funds and microcredit schemes.

Since official social security schemes are largely confined to workers in the formal sector most people rely for social protection on their families and communities. The Government does, however, offer one widely available form of protection through the Universal Health Care Scheme which provides the right to medical treatment for only 30 baht per visit.

In view of the above, the CCA identifies a number of priority concerns to be addressed:

- Disparities in economic opportunity
- Vulnerability and social protection
- National and community-level data and capacity

### **Decentralization and local governance**

Thailand has ambitious plans for devolving duties, personnel and fiscal authority to local governments, implementation however has been slow. The main priority issues here identified are:

- Effective functional, administrative and fiscal decentralization
- Local capacity for the delivery of quality services
- Promotion of local participatory democracy and the quality of governance
- Data for evidence-based decision-making

### **Environment and natural resources**

As a fast-growing middle-income country, Thailand has faced many of the environmental problems that typically arise from industrialization. These include deforestation, land degradation, a loss of biodiversity and increased levels of pollution. There are also concerns about access to environmental resources. In some cases ethnic minorities have been denied their right to own and use their lands and resources. There is now, however, much greater awareness of environmental priorities thanks both to a strong environmental movement and to greater government commitment. Some of the main priority environmental concerns are:

- Local capacity and public participation
- Environmental education and awareness
- Forest resources and biodiversity
- Tsunami and coastal resources
- Land and water resources
- Pollution
- Energy efficiency, renewable energy and climate change

## HIV infection and AIDS

Thailand is one of the few countries to have successfully addressed HIV/AIDS and prevalence continues to edge lower – currently around 1.5% – though this national prevalence masks higher HIV infection rates in particular geographic areas and population groups. Compared with the successful national response to the HIV epidemic in the early 1990s however, Thailand seems to be investing less time, energy and resources in combating the epidemic. The main priority concerns now are:

- Active leadership and investment in a multisectoral response
- Stigma and discrimination
- Prevention
- Access to care and treatment
- Priority populations
- Better data and analysis

## Migration and mobile populations

Thailand faces the great challenge of dealing with a large number of mobile populations, consisting of a variety of groups, such as asylum seekers and other displaced persons, ethnic minorities, labour migrants from other countries as well as from poorer parts of Thailand itself. Identified priority issues are:

- Policy coherence
- Asylum seekers, displaced people and persons without legal status in Thailand
- Guaranteeing the rights of migrant and children without legal status in Thailand
- Improving the situation of labour migrants to Thailand
- Addressing irregular migration
- Protecting Thai nationals working abroad

## Education

Thailand has made significant progress and appears to be on track to meet the Millennium Development Goal of 100% net primary enrolment by 2015. Moreover it has set MDG-Plus targets of universal lower secondary education by 2006 and universal upper secondary education by 2015. However, to make them a reality for all, continued efforts are needed. The main priority issues identified for education are:

- Educational quality
- Reaching vulnerable and marginalized groups
- Data collection and analysis

### **Key areas for development cooperation**

The CCA summarized three overall areas for cooperation:

- **Concentrating on vulnerable people and vulnerable areas** – Thailand needs a more inclusive form of development that respects the rights of everyone. For agencies of the United Nations this underscores the importance of ensuring that all programmes take a rights-based approach and that investment in human development focuses on the most deprived areas.
- **Developing local capacity** – In an era of decentralization much more responsibility will fall on the shoulders of local representatives and officials who may have neither the experience nor the necessary skills. One of the key areas of cooperation should therefore be to support capacity development for locally elected representatives, local government officials, community leaders and service providers, especially in the poorest areas.
- **Data collection and analysis** – Thailand needs a more comprehensive system of data collection – disaggregated by region, by sex, and by many other socio-economic categories. The United Nations agencies can capitalize on their international experience and expertise to support better systems of data collection and analysis. This would enable Thailand's future development agenda to be much more data driven – and responsive to the rights of the most vulnerable.

# SECTION I

Introduction

# Introduction

The Common Country Assessment (CCA) is a key document for the resident and non-resident United Nations agencies in Thailand. It aims at highlighting the main issues facing the country, considering how and why these have arisen, and then identifying strategic priorities. The CCA thus prepares the ground for the United Nations Partnership Framework that will guide the agencies' activities over the period 2007-2011 and support Thailand's efforts to meet not just the Millennium Development Goals (MDGs) but also the more ambitious MDG-Plus targets.

This assessment has been a joint effort by the UN Country Team (UNCT) in Thailand, which consists of those agencies and programs that are either entirely focused on Thailand or which have a regional mandate but maintain a significant degree of country focus.

## The UNCT in Thailand

**Agencies with Country Offices covering exclusively Thailand:** Asian Development Bank (ADB), International Finance Cooperation (IFC), UNAIDS Thailand, UN Development Programme Thailand (UNDP), UN Population Fund (UNFPA), UN Children's Fund (UNICEF) Thailand, World Health Organization (WHO)

**Agencies that are regional/sub-regional in scope but which maintain a significant degree of country focus:** Food and Agriculture Organization (FAO), International Civil Aviation Organization (ICAO), International Labour Organization-Sub-regional Office (ILO-SRO), International Organization on Migration (IOM), UN Office for the Coordination of Humanitarian Affairs (OCHA), UN Environment Programme (UNEP), UN Educational Scientific and Cultural Organization (UNESCO), the UN Refugee Agency (UNHCR), UN Industrial Development Organization (UNIDO), UN Development Fund for Women (UNIFEM), UN Office on Drugs and Crime (UNODC), UN Office of the High Commissioner for Human Rights (UNOHCHR), UN Office for Project Services (UNOPS), World Food Programme (WFP), World Bank.

The team met early in 2005 to identify a selected number of areas which were considered to represent development challenges for the country and deserved a thorough assessment and analysis.

The criteria used for the selection of these main themes comprised its link to national priorities, including the MDGs, as well as UN mandates, capacity, and resources availability. Other factors considered were their regional dimension and disparities among marginalized and vulnerable groups. It was also decided that the analysis would mainstream human rights and gender issues and would consider disaster (natural and human-made) prevention, management and mitigation as well as population issues throughout the assessment of the different areas.

It was agreed at the outset that this CCA should be highly focused. Thus, rather than presenting an overall picture of development in Thailand, or even of particular sectors, it should zero in quickly on the main themes – and within these identify the priority concerns.

Using the criteria above and the results of the recently-concluded UNDAF Mid-term review, the team agreed on six themes and established the following thematic working groups:

1. Poverty and social protection – Chaired jointly by FAO and UNFPA
2. Decentralization and local governance – Chaired by UNDP
3. Environment – Chaired by UNEP
4. HIV/AIDS – Chaired by UNAIDS
5. Migration and mobile populations – Chaired by IOM
6. Education – Chaired jointly by UNESCO and UNICEF

Each of the theme groups was composed of a number of UN agencies working in that area and met regularly during the first half of 2005. Some groups also met with sectoral counterparts, government and civil society, who contributed to the drafting of the thematic reports. The initial reports from each group were then edited and consolidated into a first draft of the CCA which was presented to the UN Country Team in July 2005. This meeting discussed the draft and also considered how to fully incorporate crosscutting issues such as gender, human rights and disaster preparedness. Based on the discussion at this meeting, and on comments subsequently received from a wider circulation, including participants at a youth workshop, each theme group amended their drafts.

A revised draft was then circulated again at the beginning of August among main counterparts within the Royal Thai Government and civil society organizations. Validation workshops were subsequently held to reach consensus on the overall analysis reported in the document. Two half-day workshops were conducted with the UNCT and, respectively, government counterparts and representatives from the civil society. Group discussions around the six themes were held in Thai seeking inputs on overlooked critical issues; changes needed to improve the quality of that section of the report; and key issues they considered the UN should address in that specific sector. Outcomes were properly registered and reflected, to the extent possible, in the final version of this document.

This Common Country Assessment recognizes the most vulnerable and marginalized groups in vulnerable areas in Thailand as the common thread that weaves throughout the main development challenges identified below. This is in keeping with the outcomes and recommendations of the working groups and consultations described above, and more detail will be found in the following sections of this document.

# SECTION II

**Assessment  
and Analysis**

## Country's socio-economic context

Thailand is a middle-income country that over the past 20 years has seen remarkable progress in human development moving from a Human Development Index of 0.678 in 1985 to 0.778 in 2003, and will achieve most if not all of the global Millennium Development Goals well in advance of 2015 (see Table below).

Thailand's progress can be attributed to a mix of astute policy making, stronger democratic governance, the industriousness of Thai people, public investment in social services, advantageous historic and geopolitical circumstances and, not least, economic growth.

## Demographic change

Over the last three decades annual population growth has fallen steadily as a result of a decline in fertility, and is now around 1%. In 2005 the population is estimated at 64 million and is projected to reach 70 million by 2015. Thailand is also experiencing rapid urbanization, with the urban population increasing from 19% in 1990 to 31% in 2000. Life expectancy for males is about 66 years, and for females 74 years. Thailand is now at the stage of its demographic transition where there has been an increase in the ratio of working-age to dependent youth – a favourable stage for development and the right time for making higher investments in health and education. On the other hand, the old-age dependency ratio is set to increase; over the next 20 years the proportion of population over 60 years is likely to double.

**Table 1 Status of the Millennium Development Goals in Thailand**

| MDG Target  | Scorecard   |
|---|---|
| Halve, between 1990-2015, the proportion of people living in extreme poverty.   | Already achieved  |
| Halve, between 1990-2015, the proportion of people who suffer from hunger.  | Already achieved  |
| Ensure that by 2015, boys and girls alike will be able to complete a full course of primary schooling.                                      | Highly likely   |
| Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.       | Already achieved  |
| Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.   | Not applicable  |
| Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.  | Not applicable  |
| Have halted by 2015 and begun to reverse the spread of HIV/AIDS.  | Already achieved, but signs of possible reversal in 2004-05 |
| Have halted by 2015 and begun to reverse the incidence of malaria, tuberculosis, and other major diseases.                                  | Already achieved for malaria; potentially for tuberculosis  |
| Integrate the principles of sustainable development into country policies and programmes and reverse the losses of environmental resources. | Potentially   |
| Halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation.                              | Already achieved  |
| By 2020 to have achieved a significant improvement in the lives of slum dwellers.   | Likely  |

Source: Thailand MDG Report 2004

## Commitment to the Millennium Declaration and the Millennium Development Goals

Between 1990 and 2002 Thailand reduced income poverty by almost two-thirds and over the same period the proportion of underweight children fell by half. Most children are in school; universal primary school enrolment is likely to be achieved within a few years. Malaria is no longer a problem in most of the country (however there is still high prevalence among migrants and border population). HIV infection prevalence also has come down; since the peak of the epidemic, annual new infections have been reduced by more than 80%, although there are signs of possible reversal.

The Government of Prime Minister Thaksin Shinawatra completed its first term in 2004 and was re-elected in February 2005 with a strong popular mandate and a considerably strengthened parliamentary position. Therefore a continuation, if not an intensification, of established policy patterns and directions is expected.

The Government's 30-baht 'universal' health care policy now covers 70% of the population. The programme seeks to provide basic medical services to all Thai people, though it has met with some criticism as to the quality of services. In late 2004 the Government launched the first phase of the national 'Healthy Thailand' strategy which, based on WHO guidelines, seeks to raise public awareness of good health. The initiative defines health in broad terms – physical, mental, social and spiritual – and is in accordance with HM the King's 'Sufficiency Economy' philosophy.

An important sign of government commitment to social goals is its endorsement of Thailand's UN Millennium Development Goals Report released in 2004. This transforms the goals into Government policy and means that the ambitious national development targets outlined in the MDG-Plus agenda should now be integrated into national planning.

Thailand has thus made substantial progress in recent years towards achieving the MDGs including the eighth MDG on the global partnership for development. In addition Thailand is the first non-OECD country to report on its contribution to MDG 8 in the lead-up to the 2005 World Summit, demonstrating its commitment to share development experience, offer development assistance, opening up markets to imports from Least Development Countries and providing foreign direct investment (see the jointly produced report by the Ministry of Foreign Affairs and the UNCT).

However, as the next section of this CCA demonstrates, a significant proportion of the population have yet to benefit – a number of regions, groups and pockets of society have been left behind or remain acutely vulnerable. Furthermore progress towards the fulfilment of the commitments made in the Millennium Declaration, beyond the MDGs, is mixed and might need further attention.

## Uneven progress

Much of the economic growth has been concentrated in Thailand's cities, primarily Bangkok. Those producing for the domestic economy, such as small-scale farmers, have generally gained less. And, as a result, although poverty has fallen it remains a serious concern – still widespread in the rural North-east, the far North and in the far South, which also suffer from higher rates of maternal mortality and child malnutrition.

Workers closely linked to the international economy by jobs in manufacturing for export have generally done better. Nevertheless, as industrialization progresses and the economy moves into more complex and more technologically advanced processes, Thailand will need more mechanisms for workplace cooperation and more organizations to represent employers and workers. Partially as a result of restrictive labour relations legislation, only 4% of the workforce outside the public sector is represented by trade unions. Education will also need to improve if economic progress is to be maintained. Although education reform has been greatly advanced in the last few years, gaps remain in terms of quality of education and adaptability to the needs of the economy.

There are also more general concerns across the country about the unsustainable use of natural resources. Additionally, there are warning signs of a resurgence of HIV infection and AIDS as the national resolve to combat the epidemic seems to have faltered. In some parts of the country there are also signs of increasing social unrest or unlawful group behaviour involving young people – in response to wider changes in Thai society.

## Gender concerns

Thailand has taken significant strides towards gender equality and many more girls are now going to school. Nevertheless many women are still confined to traditional roles and have fewer opportunities than men for career advancement opportunities. Many women are employed in the informal sector (Table 2).

**Table 2 Women and men in the informal economy, 2004**

|                                    | Women             | Men               | % Women   |
|------------------------------------|-------------------|-------------------|-----------|
| Employee (Agricultural Sector)     | 1,078,353         | 1,335,229         | 45        |
| Employer (Agricultural Sector)     | 70,313            | 276,017           | 20        |
| Own-account workers                | 3,845,795         | 7,151,662         | 35        |
| Unpaid family workers              | 5,000,162         | 2,832,240         | 64        |
| Members of producers' cooperatives | 25,792            | 23,649            | 53        |
| <b>Total</b>                       | <b>10,020,415</b> | <b>11,618,797</b> | <b>46</b> |

Source: TDRI, 2005

Women are also very under-represented in electoral politics, though the National Women's Development Plan has set ambitious targets to tackle these issues. There are still problems of inequality and domestic violence. Data on gender issues are also quite limited. Thailand will need to gather much more sex-disaggregated data to ensure that all plans, policies and programmes address their differential impacts on men and women.

## Responding to emergencies

Many people are vulnerable to external hazards such as the drought in the North-east in early 2005 and in the Eastern Seaboard in mid 2005. But the most dramatic event in recent years was the tsunami that hit Southern Thailand on 26 December 2004. As of October 2005, the toll was 5,395 dead – 2,059 Thai, 2,436 foreigners and 900 unidentified – and 2,817 missing. In addition, hundreds of thousands of people have lost their means of livelihood – including those in fishing villages along the Andaman coast and about 120,000 people who worked in tourism. The tsunami has also had a lasting impact on the natural environment – severely damaging marine and coastal national parks and degrading agricultural land with salt water – which again severely affects the livelihoods of the poor. Although the loss of homes and livelihoods was devastating and continues to affect many people, relief and reconstruction efforts have generally been rapid and effective. However, the monitoring of current rehabilitation efforts points to a need to engage more pro-actively the local stakeholder groups, in particular ethnic minorities and disadvantaged groups. In addition, the physical reconstruction work has indicated a need to develop guidelines for socio- and culturally-appropriate sustainable reconstruction in the long-term.

Avian influenza outbreaks also pose a wide-reaching threat to Thailand and its neighbours, with potentially disastrous economic, health, social and agricultural consequences. The need to detect outbreaks and take the necessary action to contain any potential pandemic in animals and in humans has become a pressing national and regional issue.

Unrest in southern Thailand remains a complex and highly sensitive issue. Violence escalated in January 2004, and continued during 2005. Of particular concern are the assassinations and violence against teachers and attacks on schools - both Muslim and Buddhist. A National Reconciliation Commission was appointed by the Prime Minister and charged with seeking peaceful solutions to the situation in the Southern provinces. A long-term resolution of this conflict will require respect for human rights and the rule of law by all parties concerned.

Some 140,000 refugees live in nine camps along the border with Myanmar. From time to time, as a result of clashes between armed forces in Myanmar, there are influxes of displaced persons from Myanmar into Thailand. Furthermore, the prevalence of landmines as well as the recruitment of child soldiers from Myanmar within the border areas remain issues of concern.

#### **Main Human Rights Conventions acceded by Thailand**

|      |   |
|------|---|
| 1985 | Convention on the Elimination of All Forms of Discrimination against Women. In 2000 it acceded to its Optional Protocol |
| 1992 | Convention on the Rights of the Child   |
| 1996 | International Covenant on Civil and Political Rights  |
| 1999 | International Covenant on Economic, Social and Cultural Rights  |
| 2003 | Convention on the Elimination of All Forms of Racial Discrimination   |

#### **The human rights agenda**

Thailand has also made progress on human rights. In 1997, it introduced a new Constitution which upholds human rights and lays ground work for decentralization, transparency, accountability, and people's participation. Thailand is also party to a number of international human rights treaties and conventions (see Box above).

In recent years it has established a National Human Rights Commission, a National Child Protection Committee and a National Reconciliation Commission that is charged with seeking peaceful solutions to the situation in the Southern provinces. In 2003 it passed a Child Protection Act and has also prepared a National Plan of Action on Human Rights.

However, serious human rights issues are still reported, such as instances of arbitrary arrest and detention, and involuntary disappearances. Some vulnerable groups, such as unregistered children and women, are also at risk of trafficking, violence and discrimination. This requires concerted efforts, including the support by relevant UN agencies to the government to fulfil its obligations under the various human rights conventions to which Thailand is party.

In July 2005 the United Nations Human Rights Committee, which monitors the International Covenant on Civil and Political Rights, welcomed the important work of the National Human Rights Commission but expressed concern that many of the Commission's recommendations to the relevant authorities have yet to be implemented. The Committee was also concerned about the lack of sufficient resources allocated to the Commission. In order to further the human rights agenda in the country it would be particularly relevant to implement the Concluding Recommendations of all UN treaty bodies, to withdraw reservations from treaties to which the state is party, and to accede to the remaining core human rights treaties, including the Convention Against Torture, the Migrant Workers Convention, and other ILO Conventions.

## 2.1 Poverty and social protection

Thailand's rapid economic growth has contributed to a significant overall decline in poverty. However, not everyone has benefited from economic growth or from government programmes, and some regions and vulnerable groups have been left behind. As a result the gaps are widening. Overall the richest 20% of the population account for more than half of total income. Achieving the Millennium Development Goal-Plus agenda will therefore require a concerted effort to attack poverty and reduce disparities in income, social protection and in access to social services.

Between 1990 and 2002, the poverty headcount was reduced by almost two-thirds. Latest estimates by the National Economic and Social Development Board, on a new consumption basis, put the national figure at around 11% (7.1 million people) – though the incidence varies from 16% in the North and 17% in the North-east to 8% in the South, 5% in the Central Region and only 1.6% in the Bangkok Metropolitan Area. Across the country, around half of the poor can be considered 'ultra-poor' in that their income is below 80% of the poverty line.

Despite the reduction in poverty in the North-east in recent years, this is still the poorest region and home to more than half the country's poor. It should be noted, however, that in addition to differences between regions there are also greater differences within regions – between provinces or districts. Within the South, for example the southernmost provinces are notably poorer than the others: in 2000 Pattani, Yala and Narathiwat registered a poverty incidence of 25.5, 28.1 and 35.1% respectively against an overall 11% in the South estimated at that time (UNDP, Thailand Human Development Report 2003).

Poverty in Thailand is largely rural. Most of Thailand's poor, about 6.6 million people, live in the rural areas and most work in agriculture - in family agricultural businesses or in labour services related to agriculture. The majority of poor households either have very little land or none at all.

Although most of the poor are in the rural areas there are also one million poor people in the urban areas. Many of these are in the 5,500 low-income or squatter settlements or scattered across the urban areas in the compounds of temples, in rented rooms, or living in the factories and construction sites where they work. Many of these are in the informal economy: poverty often drives workers, and especially women, to undertake unattractive and ill-defined income generating activities where they are trapped in a vicious circle of poverty as they remain outside of the protection offered by labour legislation.

Within both urban and rural areas some groups are particularly vulnerable: small and marginal farmers, ethnic minorities in the mountainous and most remote areas, undocumented migrants, people without legal status, individuals with HIV infection or affected by HIV and AIDS, people with disabilities, homeless people, the elderly, women, and children. They are also highly susceptible to unforeseen disasters such as avian flu, tsunami, drought, and financial crisis. Data on these groups is only collected sporadically so relatively little is known about their situation – though it is clear that their maternal and child health and other social indicators are much poorer than the national average.

Children are particularly vulnerable. In 2004, there were 4 million children living in poverty (2.4 million under 15) – including orphans and street children. In the North-east, the North and the deep South more than one million children suffer from malnutrition. The UN Committee on the Rights of the Child in 1998 recommended that the Government develop comprehensive policies and programmes to promote and improve breast-feeding practices to prevent and combat malnutrition.

Another group likely to be poor are persons with disabilities. According to a survey by the National Statistical Office in 2001, the majority lived in the rural areas and had little or no education; fewer than half were employed and they usually earned significantly less than other employees. Registered persons with disabilities, who constitute around one-third of the total, are entitled to State assistance. Those who cannot work receive 500 baht per month.

## National response

In 2001 the Thai Government declared a 'war' on poverty. The current goal, as expressed in the MDG-Plus target as approved by the Cabinet, is to reduce the incidence of poverty to less than 4% by 2009. For this purpose it has established a 'centre to fight against poverty' which involves all government agencies at all levels, and has approved a four-year strategic plan for the period 2005-2008.

The Government emphasizes, however, that it does not subscribe to the more orthodox view that poverty is simply an outcome of a lack of economic development. Rather it considers poverty in a more holistic way that takes into account other aspects of well-being that are not captured by levels of income or consumption. Thus its poverty reduction efforts are guided by His Majesty the King's philosophy of the 'Sufficiency Economy' which adheres to the Buddhist concept of the middle path. Based on this philosophy, the Ninth National Economic and Social Development Plan (2002-2006) aims at balanced development of human, social, economic and environmental resources. This involves integrated schemes to address poverty at individual, community, and national levels – by reducing expenses, offering investment, widening income generation opportunities, and also by providing greater social protection. It also emphasizes the importance of involving communities in efforts to reduce poverty and strengthen social protection – and allocates resources to them so they can tackle the problems themselves promoting community-based learning processes and knowledge management.

Key elements of Thailand's strategy include: a pro-poor macro economic environment; widening opportunities for the poor, improving social protection for the vulnerable and disadvantaged; managing natural resources with participation from communities and local administrative bodies; and improving public management. Some of the individual schemes include:

**Farmers' debt moratorium** – This involves a three-year suspension of both interest and principal repayments to farmers who borrowed from the Government Agricultural Bank. Nearly two million small farmers have benefited.

**Village and urban community revolving funds** – This provides each community with one million baht that can be used as a credit facility managed by a local committee. By September 2003 nearly 9 million people had received loans. Following strong advocacy by NGOs and the national women's machinery, the Government requires that each Village Fund Committee should consist of 50% women. Research also shows that when these committees are chaired or managed by women the funds tend to be better used.

**People's Bank** - This offers micro-finance to vendors, personal service providers, and other micro-businesses that cannot get funds from formal credit facilities.

**One Tambon One Product (OTOP)** – This is a partnership between Government and the community at Tambon (sub-district) level to promote, improve and market a community's most promising product.

**Asset capitalization** – This aims at allowing low-income and poverty-stricken groups in rural and urban areas greater access to capital markets. It involves formalizing various types of asset, such as land, leasing contracts, permits to utilize public lands, intellectual property and machines.

**Land reform** – The Government has started to register landless farmers, with the purpose of obtaining accurate statistics about the supply and demand of farm land and to grant land to around one million families.

## Poverty registration

The Government has also made efforts to address poverty at an individual level through a massive poverty registration drive. This encourages people to register as poor and indicate their problems – which the authorities are then asked to solve on a case-by-case basis. Among the eight million people who registered themselves as poor between December 2003 and March 2004, 46% were working in the agricultural sector and another 36% were working in labour services related to agriculture. For five million people, one of the main problems was debt; for four million, it was landlessness or not having sufficient farmland to make a living. More than 247,000 young people said they needed more financial support for their studies.

## Social protection

For most people the main form of social protection is through their families and communities: Thai society strongly supports family and community as important institutions. This includes civic movements based on the principles of the sufficiency economy and of accumulating 'social capital' to find solutions to local poverty problems. There is, for example, a network of 'alternative rice farmers' and an 'honest saving' movement among communities who share perspectives on 'sufficient economic development'.

There are some official social security schemes but these are primarily for workers in the formal sector. For the rest of the population, one of the most widely available forms of protection from the Government is the Universal Health Care Scheme Introduced in 2001. For people not covered by other forms of health insurance, this provides the right to medical treatment from hospitals and other providers with the cost capped at 30 baht per visit. This scheme has proved successful for the users, though there are concerns about its financial sustainability. The Government provides a capitation payment of around 1,300 baht which many hospitals and other providers regard as inadequate. Moreover, since this payment is based on the local population of people who are Thai citizens, hospitals that are also prepared to treat migrant workers and others on the same basis may quickly run out of funds. The impact of this scheme also needs to be reviewed from a gender perspective.

As a result of successful advocacy campaigns launched by the informal sector, the Parliament passed the Ministerial Regulation on Home-workers in April 2004 and the Ministerial Regulation on Agricultural Workers in December 2004 which allow home-based workers and agricultural workers access to labour protection.

In addition, Thailand in January 2004 introduced an insurance scheme to mitigate cyclical unemployment. While measured unemployment is low in Thailand, the unemployment rate for youth aged 15-24 years was 4.5 per cent in 2004 – nearly 5 times higher than the unemployment rate for adults – and has not yet dropped to pre-crisis levels. This suggests that special attention be paid to providing labour market information to guide career choices of young people as well as to collecting this information through government consultations with employers' organizations and trade unions.

## Priority issues

Poverty, social protection and access to health, education and other social services cut across many other sectors such as education, migration, HIV/AIDS and environmental degradation that are considered in later chapters.

This part includes three clusters of priority issues: disparities in economic opportunity; vulnerability and insufficient social protection; as well as national and community-level capacity.

## Disparities in economic opportunity

Poverty cannot be confined to an income-related definition, but should be looked at from a broader perspective considering the overall level of communities' and households' well-being. Growing disparities in terms of economic opportunity impact the livelihoods of the most vulnerable strata of the population in terms of income, access to social services, and overall empowerment to influence decision-making processes that directly affect their lives.

In the past, many official poverty programmes were not well targeted – with most of the funds going to the less poor regions. For example, the North-east received a poverty alleviation budget that was less than one-third of the national average (per capita of the poor). The North-east region receives also the lowest per capita public spending, including transport - only two-thirds that of the Central region, for example. Similarly there has been an imbalance between rural and urban areas: although most of the poor are in the rural areas they received only 18% of the budget. There is a similar imbalance in government investment in infrastructure, and by private investment in new enterprises.

Since most of the poor in the rural areas depend directly or indirectly on agriculture, one of the main priorities should be to boost agricultural productivity and on-farm and off-farm income through an integrated approach, particularly in the North-east, while also helping rural communities to diversify into non-farm activities. Pro-poor growth will be accelerated through an effective transformation from subsistence agriculture to more productive and market-oriented agro-business, industry and service activities allowing the poor to diversify and increase their sources of income. This would also mean provision of more effective public sector support to small farmers in terms of extension, credit and marketing.

In the case of urban poverty, the Government will need to find more flexible ways of addressing the informal economy – by enabling businesses to register, for example, adapting systems of taxation and providing official vending spaces. Informal entrepreneurs should also have access to training, micro-finance, and technical programmes as well as to various forms of social protection. A number of different government ministries have responsibilities for the informal sector. The national network of home-based workers, HomeNet Thailand, is actively participating in some of the relevant government committees such as the Committee for the Promotion and Protection of Home Workers. It has also contributed significant inputs into the Government's Informal Economy Strategies document.

The Government will also need to consider how to improve the representation of informal sector workers. At present many of the most vulnerable categories of worker fall outside the protective scope of either labour legislation or employment contracts, and are not permitted to establish or join organisations to defend or further their interests.

It will also be important to encourage small and medium-sized enterprises which have significant potential for growth and innovation, and also for exports. At present, however, they generally lack the capacity to produce the volume or quality of goods that can take advantage of international trade opportunities.

While trade liberalization has led to better trade performance and higher growth rates, economic liberalization can have negative social consequences for poor people, particularly for women. The actual impact of bilateral trade agreements on poverty, especially in rural areas, should be thoroughly analysed. Advocates, policy-makers and academics will need therefore to conduct a more widespread debate on the relationship between macroeconomic policies, poverty and gender.

Almost half the problems reported in the poverty registration drive were related to debt. Many anti-poverty initiatives typically involve extending credit but such credit needs to be closely linked to capacity building and to increasing economic opportunities if they are not to push people even further into debt.

## Vulnerability and social protection

Although around seven million people are now considered to be poor, millions more could fall into poverty at any time. In the rural areas they are vulnerable to natural hazards such as droughts or floods, or to changes in prices for their goods. There is no workable social protection and insurance scheme to prevent the poor from the economic losses caused by these unexpected incidences. More than one-million rural households depend on casual or irregular employment, while in the urban areas, more than one-third of people live in informal settlements and can be evicted at any time. In both urban and rural areas one of the most serious risks is the loss of earnings as a result of sickness, including HIV infection and AIDS. Drug abuse, especially among young people, adversely affects health and increases health-related expenditure, reduces school enrolment, and increases unemployment.

While the Government has initiated many schemes, only around one-fifth of the population are covered by formal social security – chiefly those working for the Government or for state-owned enterprises. This leaves more than 50 million people not covered. These include 6.4 million dependent employees, 10.0 million self-employed, 7.5 million unpaid family workers, 11.2 million people not in the labour force, and 14.4 million children under 15 years of age (ILO, SSO/MOL, NSO 2004).

These include many vulnerable groups, such as orphans, homeless people, street children, the elderly, persons with disabilities, ethnic minorities, and people living with HIV/AIDS. Among the most exposed are unregistered children – who may face deportation, forced eviction or relocation; as well as little access to basic education and health services mainly due to language problems. The practical application of the 1992 Thai Nationality Act covering registration is cumbersome for families living in remote areas. Simplification of this process is necessary to ensure Thailand meets its obligations for birth registration and fulfil its responsibilities under the Convention on the Rights of the Child.

Moreover, the poorest of the poor may be out of reach of government programmes. Many may be unable to engage with such programmes especially when they require some form of collateral on the part of the beneficiary, or official registration. The 30 baht health scheme, for example, is not available to unregistered people, such as many migrant workers or those without a birth certificate.

Land mines and unexploded ordnances still represent a challenge in rural, border areas of Thailand with 27 provinces identified as mine-affected. These cause a number of injuries and leave behind disabled persons (mostly men in their prime working years) who are more likely to fall into poverty and are often not reached by social protection measures (see Land Mine Impact Survey, Kingdom of Thailand).

Other groups living in extreme poverty, with very limited access to government services and schemes include those not having birth registration or citizenship documents (see Section 2.5). Older people too are becoming more vulnerable. In 2002, more than 9% of the population, around 6 million people, were 60 years or older – a percentage that will rise as fertility rates fall and life expectancy increases. In the past older people would typically have been part of the extended family but nowadays many are living alone. Older women will outnumber older men and a higher proportion of them will be widowed.

Within all these groups the most vulnerable are typically women. Over the past two decades, the number of households that are female headed increased from 15% to 25%. Women also suffer from a lack of access to services particularly reproductive health services – which in the poorer provinces results in higher levels of maternal mortality and morbidity. At the same time, due to the nature of their work, mostly at home, women remain outside legal and regulatory frameworks and are highly vulnerable with little access to social security benefits.

## National and community-level data and capacity

Thailand has made some progress in poverty mapping, and has redesigned a number of social and economic surveys. But it needs to do more to collect data that reflect social differences based on religion, ethnicity, gender, nationality and citizenship and other status. This will mean developing the capacity of national and sub-national institutions – for the collection and analysis of data, and its use for policy making, along with effective implementation and coordination with other ministries and departments. Moreover, the design and implementation of such schemes should have greater participation from stakeholders and beneficiaries, including children, adolescents, young adults, and women. Programmes addressing the needs of young people should be based on full participation of youth at all stages so that such programmes can be relevant to and owned by them.

There are also weaknesses reported in the child protection system, particularly at the local level. Thailand's Child Protection Act of 2003 is considered one of the most comprehensive and modern in the Asia region and guarantees protection to children and adolescents up to the age of 18 years. However, its implementation is at an initial stage and still weak most notably at the provincial, district, Tambon (sub-district) and community levels. Some provinces have established child protection committees but overall progress should be enhanced. A concrete plan for implementation could be designed and sufficient human and financial resources allocated for effective implementation.

The extension of decentralization will also put a greater onus on communities for the planning, implementation and monitoring of the process. They will need greater capacity for decision making as well as access to the appropriate information. Thailand also needs to develop a capability for emergency response in case of natural and human-made disasters. This is not just in high-technology areas but also at the society level in terms of awareness, prevention, protection and evacuation of individuals, families and communities.

## 2.2 Decentralization and local governance

Thailand has in the past had a highly centralized system of administration and policy making and most major decisions are still centred in Bangkok. But since the 1997 Constitution, Thailand has had ambitious plans for decentralization – shifting responsibilities to lower levels of government.

Administratively, Thailand has three tiers of public administration: the central level, deconcentrated provincial administration, and devolved local administration. The central administration is composed of the Parliament, the Office of the Prime Minister, 20 functional ministries, 159 departments, 7 constitutional independent bodies and 87 state enterprises.

The deconcentrated provincial administration comprises 75 provinces, each headed by a Governor appointed by the national government, and 876 districts, with an appointed district head. Governors have now been designated as 'Chief Executive Officers' (CEOs). These have been charged with the responsibility of running their administrations, which include local representatives of line ministries, on a more business-like basis so as to deliver services more effectively and also to make their provinces more attractive to investors.

The devolved local administration is composed of two modalities: a more general one covering most of the country and a special type applicable to two urban areas. The vision is to have local administration provide the devolved public services and the provincial administration provide technical backstopping and monitoring.

Within and cutting across the general type of provincial administration are elected bodies that form a two-tiered system. One tier consists of the 75 Provincial Administrative Organizations (PAOs) each of which covers the entire area of a province. The second tier consists of 1,156 municipalities for the urban areas, and 6,624 Tambon Administrative Organizations (TAOs) for the rural areas. All PAOs, municipalities and TAOs now have directly elected heads and councils.

In each of the 75 provinces, provincial administration and local administration co-exist, and overlap geographically. In addition, a PAO shares the areas of municipalities and TAOs, while having no authority over them. This has led to problems of overlap and ambiguity – between centrally appointed administrators and locally elected bodies on the one hand, and between PAOs and the lower levels of local authority on the other.

The 'special' local government system applies to just two units: the Bangkok Metropolitan Administration and the City of Pattaya which is in Chonburi province. The chief executive of each of these units is directly elected by the citizens.

Local government organizations have four major sources of funding:

1. Local revenue collected and generated by local governments;
2. Local revenue collected by national government for local government organizations;
3. National tax partly allocated for local government organizations;
4. Grants – sectoral block grants along other general and specific grants.

## National response

In response to the stipulation of the 1997 Constitution, the Government passed the Decentralization Act of 1999 which established the 'Decentralization to Local Government Organization Committee' to facilitate and monitor the process and quality of decentralization. This led to a three-phase programme to devolve duties, personnel and fiscal authority.

**Phase 1: 2001-2004.** During this period the Government devised the overall strategies and undertook a number of pilot implementations. It also amended a number of laws.

**Phase 2: 2004-2010.** This current phase involves full implementation of decentralization while also developing strategies for, and support of, people's participation in local governance. It also involves strengthening the capacity of local government as well as supporting coordination among local government authorities.

**Phase 3: 2010 – onwards.** By this stage local governments should be delivering quality services in a transparent, effective and responsive manner – while local people should be participating fully in local governance, which will include monitoring public service delivery. By then the provincial administrations will no longer be providing many of the public services but offering technical support and backstopping, as well as monitoring and assuring quality.

In 2002, the Government established, within the Ministry of Interior, the Department of Local Administration – to support local government organizations, monitor their performances and build their capacity. Committees have also been set up at the national and provincial levels to set policies and develop and implement civil service administration and management systems for local government organizations.

Six areas of duties are being decentralized to local governments: (1) basic infrastructure; (2) improvement of quality of life; (3) community order; (4) local economic development and tourism; (5) management and preservation of environment and natural resources; and (6) promotion and preservation of local culture, art, tradition and local wisdom.

However, implementation of decentralization in Thailand has been slow and the commitment sometimes faltering. This has been suggested by the nature of public administration reform at the central level, some programmes that have bypassed the local government structure, and actual lack of capacity at the local level. All these initiatives should in principle support smooth local governance processes, but only if the Government also pushes forward the decentralization agenda and clarifies the divisions of roles and responsibilities and systems of coordination.

## Priority issues

Thailand's ambitious decentralization plans inevitably face a series of challenges linked to administration, local capacity and governance.

## Effective functional, administrative and fiscal decentralization

The most critical aspect of effective decentralization is coordination, both between appointed officials and elected bodies and between local government organizations. In principle, CEO Governors should be able to work closely with the leaderships of PAOs, municipalities and TAOs. In practice, however, the relationships, and the respective duties and responsibilities, have yet to be clarified and tested. Helping the most vulnerable groups in particular will demand a clearer understanding of who does what.

At the same time, local government organizations at various levels should be able to coordinate their activities – to implement them in the most effective fashion and take advantage of economies of scale, for functions such as solid waste management. PAOs in particular, whose geographical areas of responsibility overlap with those of municipalities and TAOs, need to determine who is responsible for which activities. Another priority is coordination between local authorities, but this has yet to happen on any significant scale.

The Law on Decentralization stipulates that by 2006, 35% of Government revenue is to be devolved to local government organizations. As of 2004, however, the proportion had reached only 24%, mainly because many of the duties had yet to be devolved, including education and healthcare functions. The 35% decentralization target is thus unlikely to be met, although studies from the Ministry of Finance show that this would not disturb the fiscal stability of the national government. The debate is expected to be on-going.

It will also be important to establish a system of fiscal transfers based on a clear formula – to ensure timely, predictable and transparent transfers and the continuity of service delivery. Increasing the proportion of general grants would also enable local authorities to provide more responsive and effective public services. Allocation of resources will also need to be gender responsive and meet the requirements of many different groups.

On personnel issues, decentralization has many implications for government staff. To date, only around 4,300 central officials have moved to the local level. People who move from central line ministries to local administrations will need sufficient incentives and should still be able to see a clear career path. In addition, locally appointed administrators will need support and training to take on new responsibilities. And if they are to fulfil their functions, local governments will also need sufficient budgets to be able to employ new types of staff such as social workers – whose lack was evident during the recent tsunami.

Shifting responsibility from line ministries to local authorities will also require changing many laws related to service delivery – around 60 in total. Either the laws will have to be amended individually or there will have to be one new law related to the distribution of responsibility.

Legal changes could also help boost the representation of women for which more affirmative action is needed. Article 45 of the Sub-district Council and Sub-district Administration Organization Act 1994, for example, could be amended to stipulate that each village be represented at the TAO not just by two people but by one man and one woman.

## Local capacity for the delivery of quality services

Local government organizations are being required to deliver a broad range of services, but at present they appear to be focusing their budgets and their energies more on economic than social development. This is partly because many administrations, particularly at the TAO level, lack the human resources and the technical capacity, as well as the necessary understanding and awareness.

Local government organizations, particularly in the upper North, the North-east and the deep South, will have to focus more attention on the most vulnerable groups – ethnic minorities, trafficked people, women and migrant workers. Some vulnerable groups, such as people without a legal status and migrant workers, do not fall under the responsibility of local government organizations; however, an active role of local government organizations in coordinating with the provincial and national authority would be of tremendous help. For those groups that fall under the responsibility of local government organizations, these should guarantee them access to a more balanced package of services – including social development and protection.

Decentralization can only fulfil its potential if both people and institutions have the knowledge and skills to take advantage of the new opportunities. This will require innovative forms of capacity development at all levels – in the national agencies, provincial administrations and local government organizations. This should cover many different areas: laws and procedures governing local government organizations; techniques of budget management; revenue generation; technical skills on devolved functions; data collection; and results-based management. But capacity building will also be needed, particularly for women, on major social concerns such as gender and the rights of vulnerable groups.

Local government organizations will also need to address conflict prevention and reconciliation. This should include general conflicts over natural resources and land tenure as well as special circumstances such as disaster preparedness and conflicts in the deep South. For the deep South in particular, appointed officials and elected bodies have an important role to play in responding to cultural sensitivities.

Although Thailand has no discriminatory legal provisions against women entering local politics, at present local government organizations have very few women. In 2003 women made up only 4.6% of members of the PAOs, 6.6% of municipalities, and 6.7% of the TAOs. More attention could be given to, among others, capacity building for women to contest in local elections, raising public awareness on the need to support women's candidatures, training for elected women representatives and building institutional mechanisms to promote transformational leadership. Local authorities would function much better, and pay more attention to social issues, if women were encouraged and empowered to participate more meaningfully in local politics and decision making. The UN Committee on the Elimination of Discrimination against Women (CEDAW) has recommended the introduction of affirmative action policies or temporary special measures to address the situation.

### Promotion of local participatory democracy and the quality of governance

Local government organizations currently suffer from poor governance, limited accountability and a reputation for corruption. Following the 1997 Constitution, the Government has taken a number of measures to improve the quality of governance at the national level, addressing such issues as transparency, accountability, combating corruption and ensuring greater access to information. The same principles need to be applied to local government organizations. The Office of the Decentralization to Local Government Organizations Committee and the Department of Local Administration already have schemes to provide grants based on 'good governance' indicators. These can serve as a starting point for other initiatives.

Some local government organizations already promote the participation of community groups, enabling them to participate in planning and implementation and also to act as claim-holders when it comes to service delivery. Other local authorities will need to make similar efforts and also introduce built-in mechanisms for participatory monitoring for service delivery. National agencies and local authorities will also need to promote civic education, including among youth groups, and empower civil society to hold local authorities accountable. It is particularly important that women play their full part in this, not just to fulfil their rights but because women, whose main concerns usually centre round the well-being of their family members and the environment, can make an important contribution to planning and implementation of development policies and service delivery.

Many local authorities may at present have limited capacity to undertake complex devolved tasks such as health care and education. However, devolution need not take place in one single step to all authorities. Instead it should start with those local government organizations that do have the capacity and whose experience can serve as pilot cases for others.

## Data for evidence-based decision-making

Thailand still suffers from a serious lack of data disaggregated to the local level. This will become an even more critical issue when local government organizations need data on which to base their decisions. As well as collecting information on the standard indicators, it will also be important to develop participatory forms of assessment that reflect the priority of service users. Local media could also play a role in promoting and facilitating community participation. At the same time, it will be crucial to ensure harmonization of the various plans, as well as coordination of data gathering and maintenance of database at both the national, provincial and local levels.

## 2.3 Environment and natural resources

As a fast-growing middle-income country, Thailand has faced many of the environmental problems that typically arise from industrialization. It has lost much of its forested area and biodiversity has been shrinking: Thailand is home to as much as 7% of the world's animal and plant biodiversity. However, of 3,978 wild animal species<sup>14</sup> have recently become extinct, 572 are 'near extinction', and 63 are 'endangered'.

The country has also suffered from increased levels of pollution. In 2004 the Ministry of Natural Resources and Environment tested the water in 44 major rivers and 4 fresh water lakes. It found that in 23% of cases water quality was good, 51% moderate, 21% bad, and 5% very bad.

Approximately 34% of the total agricultural area, or 174,203 sq.km, has experienced serious soil erosion, and it has also been estimated that 44% of the agricultural land is of poor quality. However, these two categories overlap to some extent so the total of degraded land is less than the sum of these two figures.

There are also concerns about ethnic minorities' access and rights to own and use their lands and resources, lack of holistic approach in ecosystem management, and insufficient capacity at local levels to effectively manage natural resources.

### National response

There is now, however, much greater awareness of environmental priorities thanks both to a strong environmental movement and to greater government commitment. At the administrative level, Thailand has reorganized the national institutions that deal with the environment and natural resources, while also decentralizing management to local authorities. It has also exercised greater discipline by improving law enforcement and pollution control. At the operation level, Community-based natural resources management has been promoted with increasing co-management between government officials and communities.

To increase integration and promote a more holistic approach, the Government has brought together the agencies dealing with resource management under the new Ministry of Natural Resources and Environment. This ministry has 16 regional offices to act as its technical arms and has appointed one senior environmental officer in each of the 75 provinces. Ecosystem approaches have been applied, for example, in wetland, river basin, and watershed areas, where trans-boundary environmental issues and livelihood aspects are taken into account.

The Government now has plans to further restructure the Ministry. It intends to divide it into a group of four Bureaux administered jointly by one centre as follows: Water; Forest, Coastal and Marine; Environment; and Land.

### Priority issues

Thailand has a number of serious environmental concerns. The Thailand 'State of the Environment Report' describes them as: the depletion of resources in natural forest and the threat to biodiversity; land degradation; loss of water resources, inland water pollution, and solid and hazardous waste management. The Government is also focussing more on renewable energy, both to save foreign exchange and to promote environmental sustainability, and it has expressed its commitment to help combat climate change.

## Local capacity and public participation

To improve long-term conditions for sustainable development, it is of high importance to enhance local capacities for sustainable natural resources management. In addition more equitable, gender sensitive, participatory planning for the access to and productive use of natural resources must be achieved. Capacity-building should be hence targeted to local communities, especially women and the younger generation, and interventions geared to both deliver outcomes and enhance processes.

Following the Decentralization Act a number of local agencies now have responsibility in natural resources and environmental management. Some of these can carry out their responsibilities effectively. Others, however, are finding it more difficult, either because they do not have sufficient budget or they lack the human resources or technical know-how for effective planning and monitoring. There are also shortcomings in the laws and regulations.

## Environmental education and awareness

Following the global trend, the Thai people have become more aware of environmental issues – partly due to efforts of the government and NGOs. The Government has also implemented several programmes and projects on environmental education and awareness. These include programmes through both the formal and non-formal education system, such as the 'Environmental Education Centre at Provincial Level'. As of 2004, there are 62 centres established in 51 provinces. There is also a programme called 'Environment Warrior' which involves university students monitoring sources of pollution and working on other related environmental issues.

Nevertheless, much more needs to be done to promote public awareness, particularly at the local level, and to disseminate success stories on community-based environmental management. Capacity building of information and media professional could also be undertaken to help raise people's awareness and knowledge about the environment.

The role of environmental education cannot be overstressed and hence the need to integrate the environment and other sustainable development issues into school curricula at all educational levels. The UN Decade of Education for Sustainable Development (2005-2014) provides an excellent opportunity for Thailand to offer its people educational opportunities to learn the lifestyles, behaviours and values necessary to create a sustainable future. Education for Sustainable Development is not limited to environmental issues. One of the major thrusts for the Decade is reorienting environmental education towards a more holistic approach to education for sustainable development in both formal and non-formal education. The success of this initiative will depend on capacity building for all educators and government support.

## Forest resources and biodiversity

Thailand terminated logging concessions in 1989 and has since been more active in conserving and regenerating forests. This appears to be paying off: between 1998 and 2000 forested land, excluding rubber plantations, increased from 25% to 33% of the country's total area. Future targets are even more ambitious. The National Forest Policy set the target for 2006 at 40%, and the 20-year (1997-2016) Enhancement and Conservation of National Environmental Quality Plan set the target for total forest cover at 50% – which comprises 30% conserved forest and 20% economic forest. The Government counts with various programmes to achieve this but it seems unlikely to hit the target by 2016 unless it does more to promote economic forests.

An important part of these activities will be to conserve the mangrove forests that are notable features of 23 coastal provinces. During the 2004 tsunami disaster many local communities observed that they offered significant protective functions. Mangrove forests had been declining: from 3,127 square kilometres in 1975 to 1,676 square kilometres in 1996. After that, however, Government measures as well as NGOs' activities for replanting these forests, along with a ban on shrimp farming in the mangrove areas, seem to have not only halted the decline but also increased the mangrove areas, as seen in the figures of 2,453 and 2,758 square kilometres in 2000 and 2004 respectively. Efforts to rehabilitate the mangrove forests will need to continue.

Thailand signed the Convention on Biological Diversity in 1991, and ratified it in 2004. To help halt the decline in biodiversity, and in accordance with the Constitution and international agreements, the Government passed in 1999 the Medicine Act and the Plant Species Protection Act. Then in 2003, it passed the Wildlife Conservation Act to enable commercial breeding of some protected wildlife species. It also has other Acts in draft stage. More important, the Government has been making efforts to increase public awareness of the need to conserve biodiversity. However, it still needs to do more to enforce the laws, particularly those on illegal trade in plants and wildlife.

### Tsunami and coastal resources

The 26 December 2004 tsunami hit Thailand's 954-kilometre Andaman Coast - killing more than 5,300 people and affecting the livelihoods of tens of thousands of households in six coastal provinces. Initial assessments estimated that it damaged 13% of the sampled coral reef area, particularly the shallow-water reefs, but the sea-grass beds and mangrove forests were less affected. The Government has, however, acknowledged the need for a more comprehensive assessment along with monitoring and rehabilitation of coastal habitats and natural resources as well as development of high technology early warning system. In addition to the rehabilitation effort, the Government should also take this opportunity to undertake long-term integrated management of coastal resources, work on the allocation of proper land rights, promote sustainable tourism, and build the capacity of officials at both local and national levels.

### Land and water

Thailand started to combat land degradation in 1963 after the establishment of the Land Development Department (LDD), and in 2001 became a party to the United Nations Convention to Combat Desertification (UNCCD) for which LDD is the focal point. The Government has certainly been making efforts to rehabilitate land: over the period 1997-2003 it rehabilitated 17,192 sq.km of eroded land and 11,900 sq.km of marginal lands but its efforts have clearly been insufficient to reverse the trend. Since Thailand has many organizations directly and indirectly involved in land management it needs to develop a comprehensive land-use policy, reach agreement on this among the relevant agencies and stakeholders, and implement it through a strong cooperative effort.

In 2002, total water consumption reached 77 billion cubic metres, of which agriculture accounted for around 65%. Thailand does suffer from water shortages but these depend on the location and the type of cropping and since 1993 the area affected has been declining. Approximately 21% of cropland is irrigated from small, medium and large-scale reservoirs while the rest is rain-fed. The government is making efforts to increase efficiency of water resource management and to allocate water in accordance with the demand of the production system and the respective areas. Over the next ten years the Government aims to increase water storage by 21% and increase the proportion of irrigated land to 27%. Thailand also has problems with flood and improper use of groundwater. It may be difficult, however, to construct medium and large-scale water resources development projects, so it will be important to look at alternatives for mitigating water shortage during the dry season and flood during the wet season – by managing and protecting watersheds, for example, improving the administration and management of surface water resources and by promoting more effective utilization of surface water and implementing Integrated Water Resources Management (IWRM) System.

### Pollution

Water quality varies considerably across the country. The worst problems of water pollution are in the most densely populated areas. At present Thailand has 80 central wastewater treatment plants with a further 15 plants under construction. These plants cover only around one-third of urban or municipal areas. Responsibility for collecting and treating waste water lies with the municipalities, but they often lack the manpower and technical capacity for operating these facilities and have problems collecting fees. Regulation and enforcement are inadequate, often resulting in improper management and handling of wastewater.

Thailand is also producing increasing quantities of solid waste. Of the 14.6 million tons collected each year, 23.4% is generated in Bangkok, 31.3 % in the municipalities, and 46% in the non-municipal (peri-urban and rural) areas. In Bangkok almost all this waste is collected and disposed of, but the municipal areas manage to collect only around one-third. Thailand has ambitious plans for increasing the share of municipal waste recycled: by 2004 it had reached a proportion of 21% recycled with an aim of 30% to be achieved by 2006 as set under its MDG Plus Report.

The country is also producing greater quantities of hazardous waste – over the past ten years the annual total increased from 0.9 to 1.8 million tons. Of this, around three-quarters is produced by industry and the rest by households. Management and treatment facilities are adequate for industrial waste, but not for that produced by households, and there are increasing concerns about waste from electronic equipment such as computers and cellular phones. Thailand will need to step up its efforts to promote sustainable consumption and production.

Both the government budget and the environmental fund have provided resources for local authorities to construct and operate systems to treat wastewater and dispose of solid waste. However, there are problems on fee collection since people do not fully understand the principle that the 'polluter pays'.

Sustainable industrial development initiatives, such as National Cleaner Production Centres, can help diffuse environmentally sound technologies and promote the sustainable use of resources in industrial production processes.

### Energy efficiency, renewable energy and climate change

To contribute to global sustainable development goals, Thailand will need to promote energy efficiency and make greater use of renewable energy sources – biomass, wind, solar, small-hydro and geothermal. This will require capacity building in, and transfer of, technology and technical know-how in the area of industrial energy efficiency.

For renewable energy, Thailand's target is to have increased the share of renewables in commercial primary energy from 0.5% to 8% between 2003 and 2011. To this end, the Government has been promoting the use of biomass, such as rice husks and bagasse, for local agricultural communities.

Thailand signed the Convention on Climate Change in 1992, and ratified it in 1994. It also signed the Kyoto Protocol in 1999 and ratified it in 2002. Annual production of carbon dioxide now appears to have stabilized – remaining at around 2.4 metric tons per capita over the period 1990-2001. Of this, around 74% comes from electricity production, transport and industry. In addition, Thailand is preparing to take advantage of the Clean Development Mechanism which should enable it to access overseas funds for emission control projects. Thailand has also made good progress in reducing the use of ozone-depleting chemicals; it signed the Montreal Protocol in 1989 and between 1990 and 2000 reduced the per capita use of chlorofluorocarbons from 0.1 kg. to 0.06 kg.

## 2.4 HIV infection and AIDS

Thailand is one of the few countries to have successfully addressed HIV and AIDS. Between 1991 and 2004 annual new infections fell from 143,000 to just over 19,000 per year. Thailand achieved this through strong political leadership that resulted in a well-resourced multisectoral response – implemented by a broad partnership of public, private, and civil society actors who were prepared to use innovative and practical interventions.

HIV prevalence continues to edge lower. UNAIDS and the Ministry of Public Health estimate the adult prevalence at approximately 1.5%. However, this national prevalence masks higher HIV infection rates in particular geographic areas and population groups. This includes a worrying shift of the epidemic's epicentre from the North to the South and the North-east. According to Ministry of Public Health statistics from 2003, prevalence is notably higher in the southern provinces of Phuket (2.4%), Ranong (2.1%) and Trang (1.7%). And within these provinces there are very high prevalence rates among direct sex workers: 25% and 14.6%, in Ranong and Phuket respectively, as well as among deep-sea fishing boat crews – 10.5% in Phuket, 6.5% in Ranong and 3.7% in Trang. Another worrying sign is an increase in the rate of sexually transmitted infections: between 2003 and 2004 there was a 30% increase in cases reported to the Ministry of Public Health.

Thailand's initial success resulted in part from a focus on sex workers and their clients. Nowadays, however, brothel-based sex work has been overtaken as a source of infection by other patterns of high-risk behaviour, particularly among young people. Women are now also at higher risk: more than one-third of adults living with HIV or AIDS are women – many of whom are being infected by husbands who are, or were, clients of sex workers. Among youth, for example, up to 70% of new HIV infections are female.

Other vulnerable high-risk groups are drug users, and men who have sex with men. At least 20% of all new HIV infections occur through unsafe injecting drug use and in some parts of the country more than half of injecting drug users are estimated to be infected with HIV. High rates of infection – up to 28% according to a recent study conducted in July 2005 by the Ministry of Public Health and other partners – for example, have also been reported among men who have sex with men. Difficulties in accessing these vulnerable groups render HIV surveillance and reporting problematic.

### National response

The basis for Thailand's response is the National Plan for the Prevention and Alleviation of HIV/AIDS, 2002-2006 – which guides national, provincial and local interventions, and provides a framework for programme planning, budgeting and implementation. Guidance and oversight is provided by the National Committee on AIDS Prevention and Alleviation (NCAPA) – a multisectoral body, officially chaired by the Prime Minister, that includes representatives from stakeholders along with actors from the public, private and civil society.

On a day-to-day basis, national coordination and leadership are provided by the Ministry of Public Health (MoPH) through the Bureau of AIDS, TB and STIs which manages and disseminates financial and technical resources. Officers of the MoPH also support implementation by local government organizations and NGOs.

Thailand's initial response to the challenges of HIV was pragmatic, zeroing in on high-risk behaviour and providing immediate access to services designed to reduce the risk of HIV transmission. It also attempted to improve the social, legal and political environments in which those most at risk of HIV infection lived and worked.

One of the most successful activities was the '100% Condom Use Programme' for sex workers; others included the scaling-up of access to Antiretroviral medications (ARVs) through collaborative public health clinic and community-based organization partnerships, as well as the national programme for the prevention of mother-to-child transmission (PMTCT), with transmission rates now at historic lows in Thailand. Thailand has been capitalizing on its expertise to support the efforts of neighbouring countries – providing supplies of ARVs as well as technical support to improve skills and capacities. Thailand has also developed and applied a National Code of Practice on HIV/AIDS at the Workplace.

Despite these bright spots in the Thai national response, however, there continues to be a gradually decreasing investment of the time, energy and resources that were the hallmark of the successful national response to the HIV epidemic in the early 1990s. At the same time there is a re-emergence of high-risk behaviours (such as multiple sexual relations without using condoms, particularly in the younger generation) that threatens to undermine the achievements of the past decade of work on HIV and AIDS in Thailand. As the HIV epidemic matures, Thailand will need to avoid complacency and return to the broad-based social and adequate resource mobilization of the early 1990s.

## Priority issues

Discussions within the UN System as well as with public and civil society partners, including young people, have produced the following list of priority concerns.

### Active leadership and investment in a multisectoral response

Thailand's initial success depended on an inspired, active and focused political leadership that stimulated extensive public sector investment and expanded the national response well beyond the health sector. Nowadays, however, very few national or provincial leaders are pushing for an effective response to HIV. Meanwhile, most activities are confined to the health sector: up to 90% of resources are currently invested for the direct and indirect care and treatment of individuals already infected or affected by HIV.

Nor is there sufficient involvement by groups representing people who are living with HIV and AIDS (PLHAs). Thailand has more than 800 PLHA groups, but these often lack the capacity to participate fully and actively in the planning or implementation of HIV programmes. Other vulnerable stakeholder groups, particularly youth, have also had little involvement in programme planning and implementation.

Budget cuts have restricted efforts at prevention as well as the multisectoral response. Decentralization and the reform of the public sector towards a more cost-effective and results-based approach bear the negative side-effect of undermining inter-ministerial cooperation and inhibiting that HIV and AIDS is established as a priority investment in the agendas of the provincial administrations, where the bulk of budget for interventions is now being devolved. While certain private sector partners are beginning to invest in workplace-based HIV prevention and education programmes, public and private resources to support civil society groups and NGOs are dwindling to a trickle. Public sector interventions are not unified and consistent, with public health and security services often taking diametrically opposed actions with respect to the same issue – migrants and drug users, for example.

### Stigma and discrimination

Despite a more open and tolerant approach, at least one-quarter of those living with HIV and AIDS in Thailand continue to suffer serious discrimination – ranging from insults and harassment, such as forced HIV testing, refusal of services or access to schools, physical violence, forced abortions or loss of employment. Even the health care system is not immune: one study found that 40% of PLHAs had suffered from breaches of confidentiality and other types of discrimination or stigmatization at the hands of health care workers.

There remains much scope for countering stigma and discrimination – and for shaping a response that upholds the fundamental rights and dignity of all those affected by the epidemic. This will require improvements in the legal, policy and regulatory environment, along with capacity development in service providers, combined with high-profile public information campaigns. The Government should be encouraged to adopt measures in accordance with the International Guidelines on HIV/AIDS and Human Rights and the March 2004 Bangkok Recommendations on Integrating Human Rights into HIV/AIDS Responses in the Asia-Pacific region.

## Prevention

Public concerns about individual and personal risk of HIV infection have ebbed to worrisome levels in Thailand, particularly amongst the youth. Fewer than 5% of young people are being reached by adequate prevention services and only 20-30% of sexually active young people used condoms consistently. Meanwhile public information and education programmes targeting adults, adolescents and youth are now barely perceptible.

There is a pressing need to re-energize prevention efforts – particularly focused on mobilizing effective behaviour change interventions at the individual and community level – to ensure that adequate resources are once again invested in prevention programming as a complement to Universal Access to care, support and treatment. For example there is a perceived need to revive specialized STI treatment centres throughout the country. The cost-effectiveness of preventing HIV infections from occurring – as compared to the costs of care, support and treatment of individuals once they have become infected – is undisputed and a lesson not to be soon forgotten.

## Access to care and treatment

Thailand has been able to scale up access to anti-retroviral therapy (ART) and programmes for PMTCT through effective collaboration between public health facilities and community-based groups of people living with HIV and AIDS, and is committed to providing Universal Access to prevention, care, support and treatment with ART to all of those in need through the 30 baht health scheme. Nevertheless, ART services still only reach around half of those needing treatment, and PMTCT programmes are often not easily accessible or available to all mothers in need, with HIV-negative pregnant women and their partners receiving insufficient preventive interventions. Care, support and treatment programmes – in particular the public-NGO partnership approach which has proven so successful in the current scaling-up effort – should be strengthened and also diversified to cover treatment for opportunistic infections, and have specific components for young people and vulnerable groups such as migrants and HIV positive children. In the face of international pressures on patent enforcement and intellectual property rights, Thailand will also need to ensure that it maintains the capacity to produce and distribute sufficient quantities of generic drugs as well as diversify drug production and treatment to second-line drugs as drug resistance to first-line treatments grows.

At the same time Thailand will need to extend voluntary counselling and testing capacity nationwide, again through public-NGO partnerships which have proven to be successful models of effective community-focused service delivery. Many people, particularly in the rural areas, have no way of knowing their HIV status, or how to seek care and treatment.

## Priority populations

It is critical that programme interventions focus on those population groups most at risk of, or vulnerable to, HIV infection with a right-based and gender sensitive approach. These include:

**Youth and adolescents** – Both in and out of school, youth and adolescents need clear information and education as well as life and reproductive health skills and competencies. Recent surveys have found that the average age of first sexual intercourse in Thai teenagers has now dropped to less than 13 years old, and that condom use is alarmingly low. This shows the need to mobilize schools and teachers to reach young people with prevention messages, including sex and reproductive health education early – probably as early as the last year of primary school or the first year of secondary school. Families also have a major responsibility to provide sex education and counselling to young people, and must be mobilized to become more involved.

This will require services that are youth- and adolescent-friendly – providing young people with access to sexual reproductive health care, counselling, and condoms along with programmes of peer-based education and behaviour change. So far, however, the Ministry of Education has failed to implement HIV prevention and sex education programmes as part of the compulsory curriculum. There is a pressing need for a progressive HIV prevention strategy within the Ministry, with a strong focus on improving teacher training in the area of HIV prevention education, sex and reproductive health education, promoting caring attitudes towards people living with HIV/AIDS and treatment education.

To address this it will be important to build the capacities of the education system and institutions, teachers and school administrators as well as ensure the involvement of parents, community and religious leaders. Health services too, particularly reproductive health care services, will need to expand and become more 'youth-friendly'. Young people out-of-school, as well as adults at risk of HIV infection and AIDS, could be effectively reached by mobilizing Thailand's non-formal education sector – including its wide network of Community Learning Centres. Some pilot activities implemented by the Non Formal Education Department have indicated the potential of this approach, but the programme has yet to be scaled up nationwide. Other groups that are in need of HIV prevention services, and are often out of school, include ethnic minorities, migrant workers, and disabled young people.

**Women and young girls** – The face of HIV and AIDS in Thailand is increasingly young and female. This is not necessarily because women and young girls are themselves engaged in high-risk behaviour. Rather, they are more vulnerable to HIV infection for a number of social and cultural reasons – including poverty, early marriage, lack of access to education and reproductive health services, gender-based violence against women and girls, and a lack of power in negotiating social and sexual interactions with men. Women and girls, particularly those from ethnic minorities and from neighbouring countries, can also become infected as a result of sexual or gender-based violence and of trafficking.

Women living with HIV and AIDS also face heightened stigma and discrimination. Compounding these disadvantages is the fact that in Thailand, as elsewhere, women are the primary providers of care and support at the community and household levels. Women and young girls will need greater support if they are to empower themselves to address and overcome these challenges. At the same time their male partners have to become an active and engaged part of the solution. This will mean starting early: young boys need to be aware of gender issues.

**Orphans and Vulnerable Children (OVC)** – More than 500,000 children are living with or are affected by HIV infection and AIDS. When orphaned, most of them live with their grandparents or extended families. These children are entitled to community care and treatment but only if they disclose their status, which caretakers often hide. Some HIV-positive children are also kept ignorant of their HIV status, despite regular hospital treatment for ART. They can also be denied access to day-care and schooling as a result of discrimination and a lack of understanding of HIV transmission. The best solution for such children is not institutional care but community care supported by the Government.

A number of more marginalized and vulnerable groups also continue to suffer stigma and discrimination that block their access to services:

**Drug and substance abusers** – Around 5% of the Thai population abuses drugs but many of those most in need of services do not, or cannot, access them for fear of arrest or discrimination. Attention thus needs to be given to drug users in communities and to harm reduction initiatives. Incarceration of drug users also heightens problems of high-risk behaviour: in adult prisons, juvenile detention centres and compulsory drug treatment centres, drug injection and unprotected sexual contact between prisoners, though prohibited, continues to occur. Staff in such institutions will need additional support if HIV transmission in these settings is to be reduced or eliminated.

**Migrants, ethnic minorities, asylum seekers, and mobile populations** – Infection rates are increasing among migrant workers and mobile populations, including rural-urban migrants and young people who migrate nationally or internationally to study. Cross-border migrants are doubly vulnerable, as their legal status to live and work in Thailand can be in question, and this often also means that neither the migrant workers nor their families have access to health, education or other social services. Ethnic minorities, asylum seekers and other populations without citizenship are also at high risk. These groups are often excluded from Thai public sector HIV/AIDS services, not targeted in HIV/AIDS initiatives and are at an increased risk of discriminatory practices and other rights violations in relation to HIV/AIDS. All of these factors limit access to HIV/AIDS prevention, care, treatment and support services.

**Men who have sex with men** – Many men who have sex with other men also have sex with women, whether sex workers, girlfriends or spouses. This is also an issue within schools and in prisons and young offenders institutes, and among sex workers, both male and transgender. Few use condoms, so are at risk of not only of becoming infected themselves but also of passing the infection on to male and female partners. Because of the risk of stigma they often avoid seeking sexual health services, which in many cases are insensitive to their needs. Comprehensive HIV prevention and sexual health care interventions are needed for this group.

**Non-brothel-based sex workers** – Nowadays more sex work is occurring not through brothels but indirectly through bars, clubs, restaurants and hotels. An increasing number of these indirect sex workers appear to be migrants or women from ethnic minorities, often with no legal status or citizenship who are often engaging in sex work to obtain supplementary income. These are more difficult to reach than were the brothel-based workers. Managers of these establishments deny that their businesses are outlets for commercial sex, and have been reluctant to cooperate. Ways must be found to help empower and protect indirect sex workers and also to target their clients. More sex workers are also offering their services over the internet so strategies will also be needed to address internet users.

## Data

If policy and decision makers are to be encouraged to invest more effort, time and money into responding to HIV and AIDS they will need more and better analysis of existing data as well as new trend data to convince them of the urgency of the problem and the opportunities for tackling it. Likewise it is fundamental that data is available in a user-friendly format, translated in the local language and disseminated to all stakeholders.

## 2.5 Migration and mobile populations

Due to its geographic location in Southeast Asia, its open economy and its rapid social and economic development, Thailand is a country of origin, destination and transit of migrants. The large social and economic disparities between Thailand and some of its neighbours make it an attractive destination country. In addition to 1.28 million registered migrants from Lao PDR, Cambodia and Myanmar, it is estimated that Thailand also hosts at least 1 million unregistered migrants who also need the protection of labour laws and social services.

For several decades Thailand has also been a safe place for people seeking refuge from conflict and distress in the region. In the past two decades alone, Thailand has provided sanctuary for more than 100,000 displaced persons from Myanmar.

In addition to the foreign migrants and displaced persons, according to the Ministry of Interior in 2000, there are approximately one million Thai highland and minority people of which nearly half had obtained Thai citizenship. Of the remaining, about 100,000 are qualified for Thai citizenship; about 90,000 are entitled to permanent residency; and about 120,000 are hill tribe children, who are entitled to Thai citizenship. The remaining 190,000 tribal and minority people are permitted to stay temporarily in the country. Citizenship is an important issue for development because without it, students in Thailand cannot receive an official certificate after completing school; adults cannot vote, own land, secure employment or travel outside their province. Many also face difficulties in accessing basic social services. These restrictions can greatly increase the risk of being trafficked for highland children and young adults.

The large flows of people migrating irregularly to Thailand pose security concerns and challenges for the Royal Thai Government. Most of the irregular migrants do not have legal documents, particularly if they come from Myanmar. This is a particularly high-risk situation for women and children who are at risk of being abused and trafficked into exploitative labour or into the sex trade. Unaccompanied minors and children separated from their parents are of particular concern as they are not covered by social protection systems.

Thailand is taking steps to address trafficking in persons. Counter-trafficking has been declared by the Prime Minister as a national agenda and a new action plan is currently being drafted. To guarantee the protection of trafficked children Thailand has signed a number of bilateral and multilateral Memoranda of Understanding (MOUs) with countries in the region, and it is also an active member of regional processes and dialogues related to counter-trafficking.

Given Thailand's economic success and rapid growth it can be expected that migration to Thailand will continue in the coming years. Furthermore, many of the migrants from these countries will probably want to remain in Thailand. The Royal Thai Government has taken some important steps towards regularizing migration flows including its efforts to engage its neighbours due to its international commitments and with the hope for joint collaboration with its neighbouring countries. These efforts should continue and be more comprehensive so that all types of migration can be dealt with in an integrated manner.

Internal migration is also considerable as many Thais move within the country to find better employment opportunities and in so doing, often leave their families behind. Thailand is also a source of migrants and each year some 150,000 Thai nationals officially go to work in other countries within Asia and beyond.

### National response

The Royal Thai Government is addressing most of the key challenges related to registered and unregistered persons and displaced people in the country. These measures are not yet part of a comprehensive policy response on migration.

Thailand has long been providing sanctuary to groups fleeing conflict or political repression. Although Thailand has not signed the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, the Thai government cooperates closely with UNHCR in dealing with displaced people and, in practice, accords them protection. For humanitarian reasons, the Thai Government has allowed some 140,000 refugees from Myanmar to live in nine camps along the western border. UN agencies, IOM, NGOs and other international organizations in coordination with the Royal Thai Government provide assistance to this population.

The Royal Thai Government has also re-activated a national status determination and admission mechanism, operationalized by the Provincial Admission Board (PAB) for Myanmar asylum seekers. The PAB is expected to be fully operational in the last quarter of 2005. It will determine applicants' status on the basis of two main criteria, namely "fleeing fighting" and "political persecution". Legal counselling and representation is provided to asylum seekers brought before either the Thai justice system or the traditional systems of justice applied in the camps. In terms of resettlement which is one durable solution, according to the Ministry of Interior and IOM records, as of August 2005, 13,576 Laotian Hmong were resettled to the United States and Australia and one thousand-plus are left to be resettled. As for the Myanmar Persons of Concern (POC), 1,448 POCs were resettled in 2004 and 1,043 in the first semester of 2005. It is hoped that this year the country will be able to resettle a greater number of Myanmar refugees living in the camps along the border to third countries including the United States, Australia, Canada, Sweden, Norway and others. UNHCR will seek alternative durable solutions as soon as the conditions allow it, in accordance with and in respect of internationally accepted standards.

It is estimated that more than two million migrants in Thailand are working and contributing to Thailand's economy. While Thailand's legislation does not permit legal migration of unskilled workers, in 2003, the Ministry of Labour adopted new measures to enhance the management of irregular migration. Starting in 2004, the Thai Government has given the opportunity to irregular migrants from Cambodia, Lao PDR and Myanmar to regularize their status through country-wide registration processes administered by the Ministry of Interior and the Ministry of Labour. As of July 2004, 1,284,920 migrants from Cambodia, Laos and Myanmar had registered with the Ministry of Interior and 849,552 had work permits from the Ministry of Labour which also entitled them to health insurance under the Kingdom's "30 baht scheme".

From June 2004 to August 2005, migrants already registered with the Ministry of Labour, could renew their work permits for 12 months until 30 June 2006. There were 689,581 migrants who actually renewed their work permits representing a 19% drop compared to 2004. The reduction may be due to a number of factors including possibly the high registration fee of 3,800 baht and employers preferring to employ unregistered migrants.

Between October 2002 and June 2003, Thailand signed Memoranda of Understanding with Cambodia, Lao PDR and Myanmar on cooperation in the employment of workers. The Memoranda refer to the Bangkok Declaration on Irregular Migration of 1999 and raise concern about the negative social and economic impacts caused by illegal employment and are clearly an effort by Thailand to engage its neighbours in enhancing migration management. Thailand and Lao PDR are working together according to the Memorandum to identify Laotian migrant workers in Thailand and issue them proper identification so that they can continue to stay and work legally.

Thailand has ratified some of the international labour conventions which lay down labour standards that also apply to migrant workers. It would help to protect migrant workers from exploitation if Thailand became signatory to ILO Convention No. 87 on the Freedom of Association and Protection of the Right to Organize, 1949, and ILO Convention No. 98 on the Right to Organize and Collective Bargaining, 1949 which would ensure the right of migrant workers to organize. This may help to ensure the protections they have been afforded under the Memoranda of Understanding are observed, particularly in areas such as domestic work, where migrant women have difficulty ensuring their rights are respected.

In relation to highland people, the process of granting them citizenship is slowly progressing. However, the current administration plans to establish a task force to expedite the issuance of citizenship and permanent residence to those who have applied. The task force would first target 200,000 students who were born in Thailand but do not have Thai identification. It is also expected the citizenship issuance procedure to be centralized at the provincial level.

Thai government policy actively attempts to prevent trafficking. The government has been greatly involved in the creation of a sub-regional process called COMMIT (the Coordinated Mekong Ministerial Initiative against Trafficking) to address issues of trafficking in persons. Thailand is also an active participant in the Bali Process which was initiated in 2002 aimed at establishing coordinated regional action against the smuggling and trafficking of persons. With its neighbours, Thailand has signed bilateral agreements with Cambodia (May 2003) and Lao PDR (July 2005) to establish closer collaboration on counter-trafficking activities. Further initiatives along these lines would assist in reducing the incidence of trafficking and smuggling.

Thailand is also commended for working on the implementation of several recommendations outlined at various national and regional seminars.

### Priority issues

The overall goal should be to ensure that the rights and protection of migrants, displaced persons and mobile populations, both male and female, and especially the most vulnerable, are met. The main challenges are to ensure that the various migration policies are coherent and that they provide protection and opportunities for the many different types of migrant and mobile populations. In this regard, Thailand's support of regional processes and its efforts to engage its neighbours in migration management dialogues is to be commended and Thailand should also consider developing a comprehensive migration management system covering all aspects of migration with due regard for their human rights.

### Policy coherence

The aim is to align policies on migration with other policies on economic and social development – incorporating international migration into projections on the population and the labour force, for example, and into five-year plans on national and economic and social development. This entails reviewing migration trends and analyzing their social and economic impact – as well as establishing a migration management system for more accurate monitoring. All these issues would need to incorporate a gender and human rights perspective.

It will also be important to disseminate public information in the appropriate languages to ensure that migrants, employers, public officials and members of the general public are aware of their rights and obligations while also promoting an informed public dialogue.

### Asylum seekers, displaced people and persons without legal status in Thailand

Lack of legal status causes increased vulnerability to trafficking and abuse, and places children at particular risk, limiting their access to basic health care and education. In general, migrants, highland people, and other mobile populations often find it difficult to access basic social services, for example health information and services including reproductive health, vaccinations and primary health care. Migrants, with or without Thai citizenship or rights to stay in the country, are especially vulnerable to communicable diseases (including tuberculosis, filariasis and malaria) and HIV infection because of their isolation from local communities, their separation from regular partners, their anonymity and their lack of access to HIV and AIDS information, counselling and care. In this regard there is an urgent need for attention to the prevention and treatment of HIV infection and AIDS, sexually transmitted infections and communicable diseases.

The inclusion of registered migrants in the “30 baht” scheme is excellent progress towards improved health services for migrants and the efforts of the Royal Thai Government to ensure that registered migrants have access to health services is commended. It is important that initiatives continue to attempt to link source, transit, and destination communities and develop sustainable health systems that are accessible and meet the special needs of all mobile populations.

The UN Country Team in Thailand suggests that advocacy efforts continue to improve protection of the rights of displaced persons in the border camps, including the ongoing efforts to improve access to vocational training and education facilities and exploring other relevant areas.

### Guaranteeing the rights of migrants and children without legal status in Thailand

It is also vital to ensure that children born in Thailand, regardless of legal status, ethnicity, colour, sex, religion or language, are registered for a birth certificate. It is hoped that the government will withdraw its reservation to Article 7 on the Convention on the Rights of the Child, particularly as Thailand is already a signatory to the Convention on Civil and Political Rights which has a clause similar to Article 7. At the same time, governments of the countries of origin need to recognise these children as their own nationals. The UN Committee on the Rights of the Child has recommended that Thailand establish procedures to facilitate family reunification and take all appropriate measures to avoid the placement of displaced children seeking asylum in immigration detention centres.

Despite efforts by the government to ensure that all children can attend school, these schools face an enormous challenge to accommodate additional students.

### Improving the situation of labour migrants to Thailand

It is recommended that foreign migrant workers have opportunities to register at regular intervals on the basis of procedures that have been well publicised in advance and in the appropriate languages. Registration could also be made simpler and cheaper. At present, this is a two-step process involving the Ministry of Labour and the Ministry of Interior. The close coordination of the two ministries would help streamline registration – to the advantage of the migrants, their employers, and the Government.

The Government can also ensure that migrant workers are protected through the existing legal framework as well as through the implementation of the Memoranda of Understanding with Lao PDR, Myanmar and Cambodia – which should afford protection to many specific migrant worker categories, including domestic workers. The efforts of the Thai government to establish regular recruitment process from Lao PDR, Cambodia and Myanmar should continue to be strengthened. The Thai government could also work with these neighbouring governments to ensure that labour migrants are aware of the risks of irregular migration to Thailand. More generally, the Memoranda of Understanding can be used to maximize the opportunities to both sending countries and Thailand while at the same time protecting migrant workers from the risks of abuse and exploitation.

The UN Committee on the Elimination of Discrimination against Women has recommended that Thailand consider the issue of migration and commercial sex work as a critical human rights issue and explore the possibility of bilateral co-operation and coordination with non-governmental organizations.

### Addressing irregular migration

It is hoped that all migrants in irregular status be given the option of returning voluntarily to their country of origin. Consideration of deportation should take into account the conditions and possible risks in the areas of return. When migrants are returned to the country of origin, the process should be done in a manner that is dignified and respects migrants’ human rights, taking into account the special needs of women and other vulnerable groups.

Victims of trafficking require special consideration. It is recommended that efforts to enforce laws against trafficking, forced labour and slavery-like conditions should therefore regard them not as illegal immigrants but as victims in need of protection. National legislation on trafficking in persons and smuggling of migrants should therefore correspond to international standards of justice, particularly the two supplementary protocols to the United Nations Convention against Transnational Organized Crime: the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children; and the Protocol against the Smuggling of Migrants by Land, Sea and Air. Moreover, further implementation of the Memoranda of Understanding between Thailand and its neighbours that guarantee the protection of trafficked children needs to be supported.

### Protecting Thai nationals working abroad

The Government could take a number of measures to strengthen the management of overseas migration and ensure that it adheres to international norms and instruments – taking care to consider the differential impact of such measures on men and women. These include, for example, creating databases containing on statistical information disaggregated by gender, age, nationality of origin and place of residence, with specific emphasis on vulnerable groups, monitoring recruitment processes to combat fraud and deception, enhancing pre-departure training of migrants, signing bilateral agreements with destination countries, strengthening consular services for Thai workers overseas, including young people, and introducing gender sensitive measures for return and reintegration.

## 2.6 Education

Thailand has made significant progress in education. Gross primary enrolment has been above 100% and, on the basis of trends in the 1990s the country appears to be on track to meet the Millennium Development Goal of 100% net primary enrolment by 2015. Moreover it has set MDG-Plus targets of universal lower secondary education by 2006 and universal upper secondary education by 2015. However, efforts to increase the net primary enrolment – 85% in 2003/4 – should be made.

Compared with other middle-income countries in the region gross enrolment rates are somewhat low in secondary education – 77% in 2003/4 (vs. 84% in the Philippines or 87% in Sri Lanka). With 19% of girls and 15% of boys outside the system, the secondary education target will be difficult to reach. Based on information from household surveys and the 2002 secondary student profile, Thailand would only achieve universal secondary enrolment in 2007 if enrolment grew by 20% per year, which is improbable. A more likely outcome would be an annual growth rate of 5%, which would mean reaching universal secondary education by 2012.

The lowest school participation rates are in the North-east and the South which also have some of the poorest areas. Although education is free, poor families still find it difficult to meet many costs associated with schooling such as uniforms, transport and exercise books – particularly for secondary education. Added to this are the opportunity costs of losing their children's labour either for household chores or for earning income - costs that will vary according to seasonal labour demands.

About one million of the children who are currently not going to school are from the more marginalized sections of society. The largest numbers are from highland ethnic groups, but others likely to miss out on school are working and street children, those of migrant families and those affected by HIV/AIDS.

Many people in the education community in Thailand are also concerned about the quality of education – including the quality of teacher training, classroom teaching and curricula. Secondary School students in Thailand get low scores in international tests such as PISA (Programme for International Student Assessment) and TIMS (Trends in International Mathematics and Science). This applies particularly to the teaching of science, mathematics and English.

The 1999 National Education Act states that many functions shall be decentralized from the central level to Educational Service Areas (ESAs) and educational institutions. These functions include education administration and the management of academic affairs, budget, personnel and general administration. The Government has already carried out a pilot project in five provinces and is now implementing this decentralisation process nation-wide. Some progress has been made in general administration and academic affairs but less in the area of personnel. There is still an imbalance on the number of educational personnel between urban and rural areas.

### National response

The framework of education in Thailand is set by the 1997 Constitution and the 1999 National Education Act. The Constitution established for the first time that all Thai people have equal rights to a quality 'basic education' free of charge for at least 12 years – six years of primary school and six years of secondary school. The Constitution specifically mentions the education needs not just of children and youth, but also of women, the elderly, the underprivileged and the disabled.

The 1999 Education Act, amended in 2002, sets out the objectives and principles, and the rights and duties of various bodies. Children are required to enrol from the age of seven for nine years of compulsory education – six years of primary education and three years of lower secondary education. Overall responsibility lies with the Ministry of Education, though local administration is still under the supervision of the Ministry of Interior. The education reform has made provisions for increasing the budget and for administrative autonomy in schools and post-secondary education institutions.

The Government's commitment to education is evident in its budget allocations. Since the 1990s, education has comprised the largest share of the national budget by a substantial margin. In 1997, before the financial crisis, education's share of the budget was 22%, but over the past three years it has been around 25%. In 2004, 45% of education expenditure was devoted to pre-primary and primary education, 27% to secondary and 13% to higher education.

To support children from poor households, the Government has also introduced some special projects. The Government Lottery Office, for example, finances a 'One District: One Scholarship' scheme, which offers grants, across 926 districts and sub-districts nationwide, to poor high school students whose family income does not exceed 100,000 baht per year. It also finances an 'Essay Writing Scholarship Project' for students from poor families or disadvantaged groups. Indeed, although basic education is in principle free there are still a number of user's fees that can represent a significant financial burden on poor households.

## Priority issues

These include concerns about quality, disparities in access between different groups, early childhood development, and the quality of education data.

## Educational quality

The main challenges affecting the system as a whole include improving the quality of learning through better trained teachers, more modern teaching practices and new curricula for core subjects – including science, mathematics and English – as well as strengthened school management. The Government is pursuing these through the reform. Further involvement in the education system of parents, local communities and the students is also needed.

A recent study of Thai 15-year-olds found that 37% have a low level of proficiency in reading (see OECD/ UNESCO-UIS 2003). The study suggests that these findings may be related to the use of Standard Thai for children for whom this is not their first language, a majority of whom are from disadvantaged family backgrounds. The ability of children to learn is also affected by elements linked to household poverty such as their standards of nutrition, including the iodine intake that is critical for healthy brain development (WHO/ICCD/UNICEF 2005). The study further suggests that current levels of iodine intake in Thailand could contribute to reduce IQ levels in children by 10 to 15%.

At present neither the curriculum nor teacher training reflect the cultural diversity across Thailand which has a large range of ethnic and religious minorities. In many districts in the Southern Region 40% of upper secondary students attend schools offering religious instruction, for example. The curriculum needs therefore to be more sensitive to local concerns, but it should also be sufficiently broad to accommodate societal issues such as sustainable development, peace education and conflict resolution – particularly in relation to emerging conflicts in the Southern border area. It also needs to put more emphasis on life skills. Preventive education for HIV/AIDS could be reinforced through the systematic introduction of sexuality education into the curriculum.

## Reaching vulnerable and marginalised groups

**Gender Disparities** – The Government has taken significant steps towards achieving gender parity. Nevertheless a persistent gender gap remains at the primary level. Education data on gross enrolment ratios from EFA Global Monitoring Report 2006 show boys outnumbering girls in primary education – with 99% and 95% enrolment respectively and thus a gender parity index score of 0.96. The same report notes that gender parity has been achieved at the secondary level since the gross enrolment ratio for both boys and girls is 77%. Set against this however, is the fact that gross enrolment for both boys and girls fell considerably between 2001 and 2003/4, by 8 percentage points for boys and 4 percentage points for girls.

One legacy of this gender gap in enrolment is a gap in adult literacy: while the rate for men is 95% for women it is 90.5%. Two-thirds of adult illiterates are women. Women over 40 years old and particularly those living in the rural areas are more likely to have missed out on education. The literacy rate for women in the urban areas is 94% whereas for those in the rural areas is 89%.

The remaining gender gap is primarily due to the associated costs of education. For poor families, the opportunity costs for sending girls to school continues to be higher than for boys. Daughters are expected to care for family members, in particular younger siblings, help in the household and contribute to the family income from an earlier age than sons.

There has been more progress at the tertiary level where females outnumber males. Enrolments by subject area however reflect the traditional pattern of employment with males enrolling predominantly in fields such as engineering, architecture, law, mathematics, and computer science while women continue to dominate in the humanities and in health services. This reflects in part the traditional stereotypical beliefs about the roles of men and women which continue to hamper women's opportunities for development and for taking more public leadership positions.

Another important gender issue in schools, which is given little public attention, is sexual harassment. A recent study found sexual harassment pervasive in every school covered in the research (UNESCO/UNICEF/MOE 2005). A clear definition of sexual harassment seems not to exist in Thai law, let alone a policy or procedures for pursuing grievances.

The persistence of gender disparities, stereotyping and sexual harassment is due partly to a lack of official acknowledgement. The Ministry of Education still does not have professionals familiar with gender issues. Indeed many officials, as well as school administrators and teachers, continue to claim that in education there are no gender problems.

**Learning in an unfamiliar language** – The main language of instruction at all levels is Standard Thai, which the majority of children understand. But Thai has a number of different variants and across the country there are more than 70 languages in use (UNESCO 2005). For several million children the first language is Malay, Khmer or Chinese, and children from ethnic groups speak variants of Karen or Mon, for example. A significant proportion of children thus have to acquire concepts of reading and writing through an unfamiliar language. Generally, children do much better in school when they learn to read and write and develop conceptual skills in their own language before transitioning to a second language.

Until the late 1990s, the use of languages other than Thai in school was prohibited. However, the Constitution of 1997, and a more open Thai society, has provided new opportunities for ethno-linguistic minorities to use their languages. The new school curriculum allocates up to 30% of the curriculum for minority language study or other local content. However, few government schools are taking advantage of this.

**Low enrolment in more remote districts** – Linked with the language issue is the lack of access to schools for children living in remote border areas. The education statistics shows the disparities between regions and provinces. Disparities have been measured using an 'Education Index' which combines data on mean years of schooling, secondary enrolment, performance in national tests, and number of pupils per teacher and per classroom. The education index varies from a high of 0.649 to a low of 0.383 – highest in Central Thailand and Chiang Mai and lowest in areas where there are relatively large numbers of linguistic and ethnic minorities, especially along the border regions in the North-west, the East and the South.

In the case of ethnic minorities and mobile populations, the problems often relate to citizenship, for although education is guaranteed for all Thai children these guarantees are not extended to those without citizenship rights. This can also be reflected in budgets which are based on the number of Thai children, which means that schools in areas with high populations of 'non-Thai' children may not have the funds to cover all school-age children.

In response, in July 2005 the Cabinet has approved the Ministry of Education's proposal to allow children without a legal status and non-Thai children unlimited access to all levels of education. It has also instructed the Ministry of Interior to quicken the legal registration of people without a legal status.

**Low enrolment of children with disabilities** – According to a 2001 survey by the Public Health Research Institute, around 6 million people in Thailand have a disability – 10% of the population – with a slightly higher proportion in the North-east and the North. However, only a small percentage of this group has registered their disabilities with the Office of Empowerment of Persons with Disabilities. The Ministry of Education collects information on children and youth with disabilities, but the criteria for identification are not clear. A significant number of disabled children are not included in the statistics because they are not registered as disabled for not having followed the official procedure which involves a hospital visit and presentation of identification papers. Estimates of the proportion of disabled children attending school range from 10% to 23%. While proportion of children with disabilities should rise as more schools now have facilities for integration, improvements in the quality of education for all, coupled with awareness-raising on the right to education for disabled children would increase the numbers of children enrolled.

**Early childhood care and development** – By 2001, national coverage for pre-primary education had reached 86%. However there are wide disparities across the country, particularly between urban and rural areas. Moreover, the quality is often low: physical facilities are poor and many staff lack the capacity to provide adequate stimulation for the children. Nor is there much early childhood care in minority languages. To improve early childhood care the Government needs to provide adequate budgets and training for caregivers while setting minimum standards and establishing systems for monitoring. The centres should also use local languages and materials and establish stronger links with parents.

### Data collection and analysis

The education sector in Thailand faces systemic barriers to the appropriate planning and monitoring of performance and coverage due to a lack of institutionalization of information collection, processing and analysis. With responsibilities for data collection, processing, analysis and planning divided amongst various departments at the central level and through local education areas (LEA), it is difficult to consolidate information for analysis and planning purposes at all levels. Statistics that need to be considered include NER and completion and drop-out rates, disaggregated by gender, ethnicity and geography. Analysis of the accuracy of data needs to be made within the education sector for the further development of a capacity building action plan for institutional and systemic developments. There is a particular need for capacity building in relation to the conduct of the annual school survey and the ensuing processing and analysis of education statistics.

The Ministry of Education has attempted to address this by creating, in 2004, within the Office of the Permanent Secretary, a modern Information Technology Unit. This unit, which should become fully functional within the next two years, will be a central information service provider for both internal and external users on the functioning and status of the education system down to the school level.

# SECTION III

Key Areas for  
Development  
Cooperation  
and Next Steps

The six themes analysed in the previous section were pre-selected through a process of careful review and consultation within the UNCT. The selection of the six themes took into consideration the Royal Thai Government's development priorities, its MDG-Plus agenda, and the UN's limited but strategic role in Thailand as a middle income country.

This section helps to identify challenges and cross-cutting issues that emerged from the six themes reviewed above, an important step towards identifying strategic areas for UNCT development cooperation in Thailand for the UNPAF 2007-2011. Thailand is a middle-income country where the UN plays a more strategic and catalytic role in addressing common challenges across a wide range of themes and sectors – both at the upstream policy level and through engagement at the local and community levels.

## 3.1 Concentrating on vulnerable people and vulnerable areas

Thailand is a successful middle-income country that sees itself taking rapid strides towards becoming a developed, first-world nation, capable of sustaining long-term quality growth and lasting prosperity through its vision of a sufficiency economy. There is a real danger, however, that rapid growth will actually see disparities widen still further – benefiting most of the population, particularly in the urban areas, while those in the rural areas, particularly in the more remote areas in the North the North-east and the deep South, are left behind.

One of the major challenges therefore will be to ensure a more inclusive and balanced form of development that reduces disparity and respects the rights of everyone – particularly disadvantaged groups including minority ethnic and religious groups that may not be, or may not feel themselves to be, fully citizens of Thailand. This will mean regularizing the status of everyone within Thailand's borders, and ensuring that investment in human development focuses particularly on the most needy areas.

For agencies of the United Nations this underscores the importance of ensuring that all programmes take a rights-based approach. All people within Thailand's borders are entitled to the same basic rights. Even if fulfilling the rights of some groups is financially, socially or politically more difficult, this cannot be accepted as a reason for denying, or even delaying, the fulfilment of those rights. Key UN instruments such as the Universal Declaration on Human Rights and the UNESCO Declaration on Cultural Diversity should be used as the direct framework for UN programming in order to operationalize the rights-based approach.

This is likely to mean that United Nations cooperation with the government in Thailand should mainly focus on groups living in the far North, North-east and South of the country and in the border areas that are home to the highest numbers of marginalized people, as well as in supporting the country's efforts to reach all vulnerable groups throughout the country.

## 3.2 Developing local capacity

A key concern for all aspects of governance, particularly for delivering services and protection measures to the most vulnerable groups, will be the capacity of local government. In an era of decentralization much more responsibility will fall on the shoulders of local officials who may have neither the experience nor the skills to manage all that is expected of them – whether it involves fiscal management, providing basic social or economic services, or tackling the challenges posed by HIV and AIDS.

These capacities are likely to be weakest where they are needed most – far from Bangkok in the poorest and most vulnerable areas that face the most complex problems – delivering services and implementing antipoverty programmes for the most marginalized and mobile populations. One of the key areas of cooperation should therefore be to support capacity development for local government officials, local representatives, community leaders and service providers, as well as local media, especially in the poorest areas. In accordance with Thailand's "Sufficiency Economy" philosophy, capacity-building programmes for local officials must also focus on training them in prioritizing local models of development and growth, which draw upon local resources as a mechanism for poverty alleviation.

As indicated by both government and civil society partners during the CCA Validation Workshops, the UN could play a crucial role here in facilitating the creation of and supporting networks and partnerships among local authorities and community based organizations.

## 3.3 Data collection and analysis

In order to keep abreast of developments, and to respond appropriately to rapidly changing circumstances, Thailand needs a more comprehensive system of data collection – disaggregated by region, sex, ethnicity, residence (urban/rural) and by many other socio-economic categories – as well as data analysis to generate improved information for decision-making purposes.

As a middle-income country, Thailand should be in the position to generate regular flows of high-quality socio-economic data and analysis, and should have the capacity to ensure mechanisms for coordinated dissemination of data across different agencies, and improving effective use of data analysis for policy-making and evaluation. This would allow it to capture the full development picture – and in particular to perceive the often dramatic disparities between different groups and regions. At this stage of its development these disparities are beginning to assume even greater significance – for even if the administration at the centre does not fully appreciate these differences many of the disadvantaged groups are increasingly aware of ways in which they are falling behind.

One of the priorities of future cooperation by the United Nations agencies should therefore be to capitalize on their international experience and expertise to support better systems of data collection and analysis for evidence based decision making. This would enable Thailand's future development agenda to be much more data driven – and responsive to the rights of the people who are most vulnerable.

## 3.4 Next steps

Thailand has made remarkable progress in advancing human development. However, challenges remain to achieve the MDG-plus targets and to ensure that these become a reality for all. The UN system in Thailand aims at partnering with the Royal Thai Government to support its efforts in this direction.

The common analysis reported in this document will hence serve as the basis for the elaboration of the joint 'partnership framework' of the United Nations in Thailand: the UNPAF for 2007-2011. The UN agencies working in Thailand and the Royal Thai Government, considering the present analysis and in alignment with national priorities and goals, will agree on key priority sectors in which the UN system has the comparative advantage to strategically intervene and make a difference. From this framework will be drawn the country programme documents of the UN agencies working in Thailand.

# SECTION IV

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# SECTION V

Indicators

## 5.1 Millennium Declaration and Conference Indicators

| Conference Goal                                | Target  | Indicators <sup>a/</sup>   | Findings  | Sources                      |
|--|---|--|---|------------------------------|
| <b>Income-Poverty</b>                          |   |  |   |                              |
| Eradicate extreme poverty                      | Halve between 1990 and 2015, the proportion of people whose income is less than \$1 dollar a day (MILLENNIUM DECLARATION)                             | <b>Poverty headcount ratio (% of population below national poverty line)</b>             | <b>9.8 (2002)</b><br>(11 according to NESDB estimates on a new consumption basis, 2004) | Thailand MDGs Report 2004    |
|  |   | <b>Poverty gap ratio</b>   | <b>2.4</b>  |                              |
|  |   | <b>Share of poorest quintile in national consumption</b>                                 | <b>4.2</b>  |                              |
| <b>Food Security and Nutrition</b>             |   |  |   |                              |
| Eradicate hunger                               | Halve between 1990 and 2015, the proportion of people who suffer from hunger (MILLENNIUM DECLARATION)   | <b>Prevalence of underweight children under five years of age -% (excluding Bangkok)</b> | <b>8.6 (2002)</b>   | Thailand MDGs Report 2004    |
|  |   | <b>Proportion of population below national food poverty line (%)</b>                     | <b>2.2 (2002)</b>   |                              |
| <b>Education</b>                               |   |  |   |                              |
| Achieve universal primary education            | Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling (MILLENNIUM DECLARATION) | Net enrolment ratio in primary education   | 85 (2003/4)   | EFA Global Monitoring Report |
|  |   | Proportion of pupils starting Grade 1 who reach Grade 5                                  | 94.1 (2001)   |                              |
|  |   | Literacy rate of 15-24 year olds   | 98 (2000-04)  | EFA Global Monitoring Report |
|  |   | Adult literacy rate  | 92.6 (2000-04)  |                              |
|  |   | Men  | 94.9  |                              |
| Women  | 90.5  |  |   |                              |
| <b>Gender Equality and Women's Empowerment</b> |   |  |   |                              |
| Promote gender equality and empower women      | Eliminate gender disparity in primary and secondary education, preferably by 2005, and to all levels of education no later than 2015                  | <b>Ratio of girls to boys in: primary</b>  | 0.93 (2000)   | Thailand MDGs Report 2004    |
|  |   | <b>secondary</b>   | 1.01 (2000)   |                              |
|  |   | <b>and tertiary education</b>  | 1.12 (2000)   |                              |
|  | Equitable access to political institutions (FWCW)   | <b>Proportion of seats held by women in national parliament</b>                          | 10.60   | National Parliament Record   |

Notes: <sup>a/</sup> Indicators in bold are those being used for global and country level reporting on the Millennium Development Goals (MDGs).

| Conference Goal   | Target   | Indicators <sup>a/</sup>  | Findings  | Sources   |
|---|--|---|---|---|
| <b>Child Mortality and Welfare</b>                      |  |   |   |   |
| Reduce child mortality                                  | Reduce by two thirds, between 1990 and 2015, the under-five mortality rate (MILLENNIUM DECLARATION)                | <b>Under-five mortality rate</b>                                      | <b>26</b>   | IPSR, MU (01/2005)                                |
|   |  | <b>Infant mortality rate</b>  | <b>17</b><br>(per 1,000 live births)                    | IPSR, MU (01/2005)                                |
|   |  | <b>Proportion of 1-year-old children immunized against measles</b>    | <b>94</b><br>(2003)                                     | UNICEF  |
| <b>Reproductive and Maternal Health</b>                 |  |   |   |   |
| Improved reproductive health                            | Universal access to RH services and information by 2015 (ICPD)   | <b>Contraceptive prevalence rate</b>                                  | <b>72.2</b>   | IPSR, MU (01/2005)                                |
| Improved maternal health and reduced maternal mortality | Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio (MILLENNIUM DECLARATION)             | <b>Maternal mortality ratio</b>                                       | <b>24</b><br>(2002)                                     | Thailand MDGs Report 2004                         |
|   |  | <b>Proportion of births attended by skilled health personnel</b>      | <b>99</b>   | IPSR, MU (01/2005)                                |
| <b>HIV/AIDS, Malaria and other Diseases</b>             |  |   |   |   |
| Combat HIV/AIDS   | Have halted by 2015 and begun to reverse the spread of HIV/AIDS (MILLENNIUM DECLARATION)                           | <b>HIV prevalence among 15-24-year-old pregnant women</b>             | <b>1.4</b><br>(2002)                                    | Thailand MDGs Report 2004                         |
|   |  | <b>Rates of constant condom use of secondary school male students</b> | <b>27.7</b><br>(2002)                                   |   |
| Combat malaria and other diseases                       | Have halted by 2015 and begun to reverse the incidence of malaria and other major disease (MILLENNIUM DECLARATION) | <b>Prevalence and death rates associated with malaria</b>             | <b>Infected: 23,656</b><br><b>Deaths: 47</b><br>(2004)  | Bureau of Epidemiology, Ministry of Public Health |
|   |  | <b>Prevalence and death rates associated with tuberculosis</b>        | <b>Infected: 37,284</b><br><b>Deaths: 212</b><br>(2004) |   |
| <b>Employment</b>                                       |  |   |   |   |
| Creation of full employment                             | Universal access to paid employment (WSSD)   | Employment to population of working age ratio                         | 54.4  | NSO (12/2002)                                     |
|   |  | Unemployment rate   | 1.0   |   |
|   |  | Informal sector employment  | 592.2 (thousands)                                       |   |

Notes: <sup>a/</sup> Indicators in bold are those being used for global and country level reporting on the Millennium Development Goals (MDGs).

| Conference Goal                     | Target  | Indicators <sup>a/</sup>  | Findings  | Sources                   |
|-------------------------------------|---|---|---|---------------------------|
| <b>Environment</b>                  |   |   |   |                           |
| Ensure environmental sustainability | Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources (MILLENNIUM DECLARATION) | <b>Proportion of land covered by forest</b>                                     | <b>33.4 (2000)</b>  | Thailand MDGs Report 2004 |
|                                     |   | <b>Ratio of area protected to maintain biological diversity to surface area</b> | <b>17.6 (2000)</b>  |                           |
|                                     |   | <b>Energy use (kg oil equivalent) per 1,000 Baht GDP at 1988 price</b>          | <b>15.9 (2002)</b>  |                           |
|                                     |   | <b>Carbon dioxide emissions (per capita)</b>                                    | <b>2.3 (2002)</b>   |                           |
|                                     |   | <b>Consumption of ozone-depleting CFCs (ODP tons)</b>                           | <b>3586 (2000)</b>  |                           |
|                                     |   | <b>Proportion of population using solid fuels</b>                               | <b>30.5 (2002)</b>  |                           |
|                                     |   |   | Halve by 2015 the proportion of people without sustainable access to safe drinking water (MILLENNIUM DECLARATION) |                           |
|                                     | By 2020 to have achieved a significant improvement in the lives of at least 100 million slum dwellers (MILLENNIUM DECLARATION)                                    | <b>Proportion of urban population with access to improved sanitation</b>        | <b>99.5 (2000)</b>  | Thailand MDGs Report 2004 |
|                                     |   | <b>Proportion of households with access to secure tenure</b>                    | <b>93.6 (2000)</b>  |                           |
| <b>Housing and Sanitation</b>       |   |   |   |                           |
| Improved access to safe sanitation  | Universal sanitary waste disposal (WCW/WCS/WSSD/UNCED)  | Proportion of population with access to improved sanitation                     | 96 (2000)   | HDR 2004                  |

Notes: <sup>a/</sup> Indicators in bold are those being used for global and country level reporting on the Millennium Development Goals (MDGs).

| Conference Goal                          | Target   | Indicators <sup>a/</sup>   | Findings   | Sources   |
|--|--|--|--|---|
| <b>Drug Control and Crime Prevention</b> |  |  |  |   |
| Improved drug control                    | Measurable results in reducing cultivation, manufacture, trafficking and abuse of illicit drugs by 2008 (UNGASS, 20th Session) | Area under illicit cultivation of coca, opium poppy and cannabis                                       | Opium 6.6 hectares (2004)  | Drug Abuse Information Network for Asia and the Pacific (DAINAP), UNODC Regional Centre for East Asia and the Pacific |
|  |  | Seizures of illicit drugs (2004)   | Opium (raw and prepared) 1,595 kg  |   |
|  |  |  | Heroin 789 kg  |   |
|  |  |  | Cocaine 12 kg  |   |
|  |  |  | Cannabis herb 9,905 kg   |   |
|  |  |  | Methamphetamine (crystalline) 47 kg  |   |
|  |  |  | Methamphetamine (pills/tablets) 31,000,000 pills   |   |
|  |  |  | Ecstasy 123,174 pills  |   |
|  |  |  | Ketamine 164 kg  |   |
|  |  |  | Inhalants 277 kg   |   |
|  |  | Codeine 724 kg   |  |   |
|  | Prevalence of drug abuse   | Percentage of general population that have ever used the following drug types in the past year (2003): |  |   |
|  |  | Total for all drugs  | 1.00   |   |
|  |  | Cannabis   | 0.20   |   |
|  |  | Methamphetamine  | 0.20   |   |
|  |  | Ecstasy  | 0.00   |   |
|  |  | Kratom   | 0.80   |   |
|  |  | Inhalants  | 0.10   |   |
| Improved crime prevention                | Eliminate/significantly reduce violence and crime (UN Congress of Crime Prevention and Criminal Justice)                       | Number of intentional homicides per 100,000 inhabitants  | Intentional homicides, completed 8.46 (2000)<br>Intentional homicides, attempted 7.80 (2000)<br>Intentional homicides, committed with a firearm 32.99 (2000) | United Nations Surveys of Crime Trends and Operations of Criminal Justice Systems, covering the period 1990-2002      |

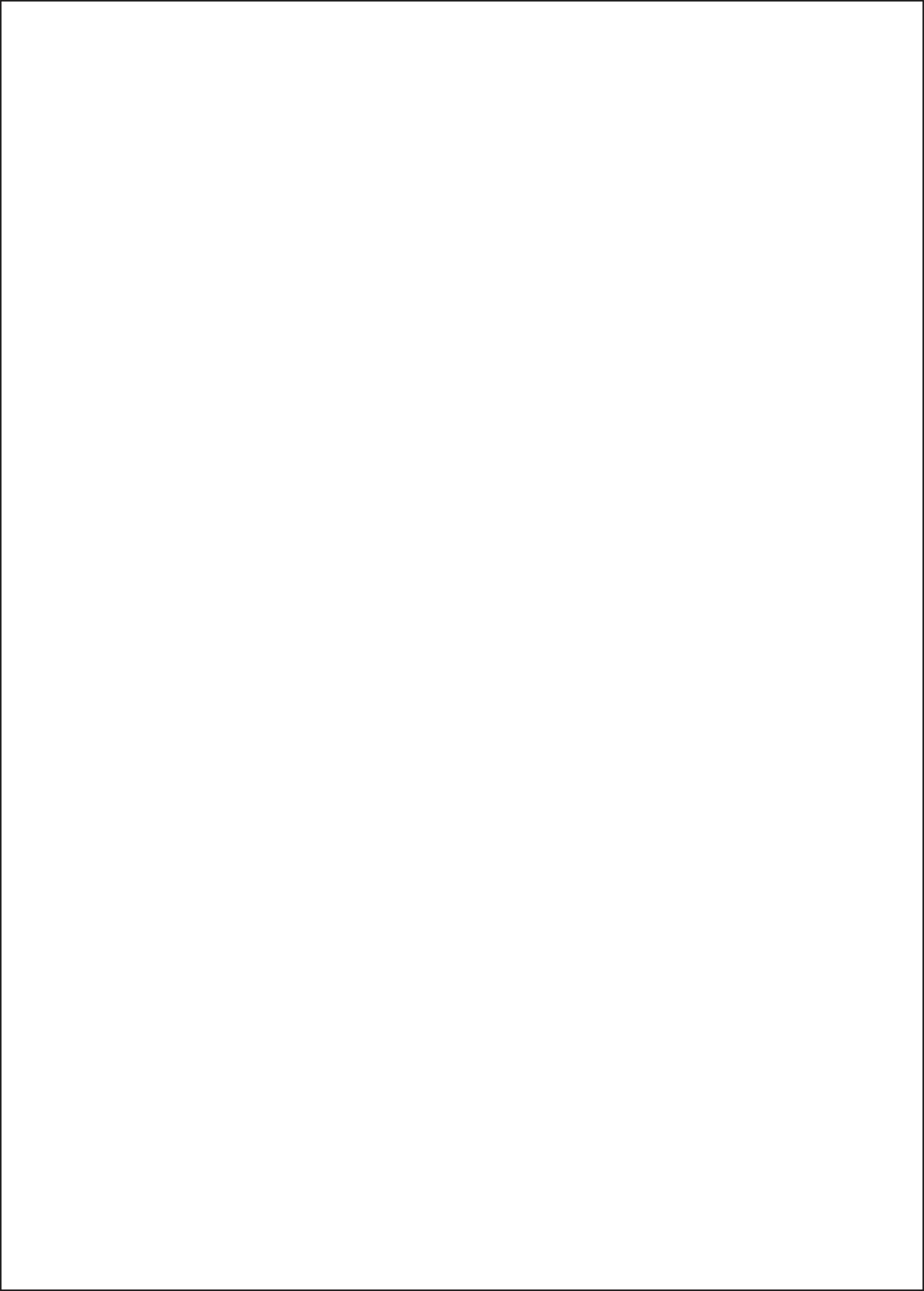
Notes: <sup>a/</sup> Indicators in bold are those being used for global and country level reporting on the Millennium Development Goals (MDGs).

| Conference Goal   | Target   | Indicators <sup>a/</sup>  | Findings  | Sources |
|---|--|---|---|---------|
| <b>International Legal Commitments for Human Rights</b>             |  |   |   |         |
| Universal ratification of international human rights instruments    | Acceding to all international human rights instruments and avoiding the resort to reservations, as far as possible | Status of ratification of, reservations to and reporting obligations under international human rights instruments | <p>1985 - accession to Convention on the Elimination of All Forms of Discrimination against Women.</p> <p>1996 - accession to the International Covenant on Civil and Political Rights.</p> <p>1999 - accession to the International Covenant on Economic, Social and Cultural Rights.</p> <p>2003 - accession to the Convention on the Elimination of All Forms of Racial Discrimination.</p> <p>Not Acceded: Convention Against Torture, the Migrant Workers Convention, the First Optional Protocol to the ICCPR (allowing the Human Rights Committee to examine individual complaints) and the Second Optional Protocol to the ICCPR (on the abolition of the death penalty).</p> | OHCHR   |
| Cooperation with the UN system's human rights monitoring mechanisms |  | Status of follow-up to recommendations made by the UN system's human rights monitoring mechanisms.                | Delays in reporting and only partial implementation of recommendations.   | OHCHR   |

Notes: <sup>a/</sup> Indicators in bold are those being used for global and country level reporting on the Millennium Development Goals (MDGs).

## 5.2 Contextual Indicators

|                     | Indicators <sup>a/</sup>                     | Findings                     | Sources       |
|---------------------|--|------------------------------|---------------|
| <b>Demographics</b> | Population size                              | 63.1 (million)<br>(2003)     | UNDP HDR 2005 |
|                     | Total fertility rate                         | 1.9<br>(2000-05)             |               |
|                     | Life expectancy at birth                     | 70 (total)<br>(2003)         |               |
|                     |  | 66.3 (male)<br>73.8 (female) |               |
|                     | Population ages 65 and above                 | 5.4<br>(2003)                |               |
|                     |  | 9.3<br>(2015 projections)    |               |
| <b>Economy</b>      | GDP per capita (US\$ and PPP)                | 7,595<br>(2003)              | UNDP HDR 2005 |
|                     | Gini Index                                   | 43.2<br>(2000)               |               |
|                     | Total Debt Service (US\$) as % of GNP        | 10.5<br>(2003)               |               |
|                     | Decadal growth rate of GNP per capita (US\$) | 2.8<br>(1990-2003)           |               |
|                     | Exports of goods and services as % of GDP    | 66<br>(2003)                 |               |
|                     | Imports of goods and services as % of GDP    | 59<br>(2003)                 |               |
|                     | Public expenditure on health as % of GDP     | 3.1<br>(2002)                |               |
|                     | Public expenditure on education as % of GDP  | 5.2<br>(2000-2002)           |               |
|                     |  |                              |               |





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