

[Working Paper Series: Pandemic Crisis and Democratic Governance in Asia – Part 2]

Pandemic Crisis and Democratic Governance in Thailand

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Introduction

The COVID-19 pandemic has spread throughout the world since first emerging in early 2020. The first recorded case was reported in Wuhan, China and the first confirmed case outside China occurred in Thailand. Since the initial outbreak on January 13, 2020, Thailand has faced disruption both to its economy and the rhythm of everyday life of its citizens. According to the previous working paper entitled “Pandemic Crisis and Democratic Governance in Thailand,” a second wave of COVID-19 infections in Thailand provoked responses from various organizations and calls for policy recommendations.¹ Thailand is currently experiencing a third wave of infections; therefore this paper updates the COVID-19 situation in Thailand, including responses from the government and other sectors; lessons learned from the pandemic in Thailand; and policy recommendations.

COVID-19 in Thailand

In the first outbreak, the government of Thailand had effectively limited the spread of the virus. The Thai government launched measures to control the rapid increases of new cases, including political, economic, social, legal, and regulatory actions. Since this crisis was new for Thailand, the COVID-19 Situation Management Center was established as the single information communication center for COVID-19. The Thai government declared a state of emergency decree to prevent a COVID-19 outbreak. The first state of emergency period lasted from March 26 to May 31, 2020, which included a ban on foreigners entering the country; 14-day state quarantine for those entering Thailand; a nationwide curfew from 10 p.m. to 4 a.m.; recommendations to avoid inter-provincial

¹ Bureekul, Thawilwadee, Sangmahamad, Ratchawadee, and Moksart, Nuchaprapar, “[ADRN Working Paper] Pandemic Crisis and Democratic Governance in Thailand,” East Asia Institute, http://www.eai.or.kr/avanplus/filedownload.asp?o_file=2021041223227558402312.pdf&uppath=/data/bbs/eng_workin gpaper/&u_file=6.Thailand_PandemicCrisisandDemocraticGovernance.pdf (Accessed April 20, 2021).

movement; measures encouraging 50 percent of the workforce to work from home; and mandating the wearing of facemasks.² The State of Emergency was extended for eleven times, which expires on May 31, 2021, but some restrictions, such as lockdown measures, were eased. After that, the Cabinet approved the announcement on the twelfth extension for two months until July 31, 2021. The government provided a 5000-baht allowance during the three months (April - June 2020) for each individual who is in the unemployed and vulnerable groups, had been severely affected by COVID-19, and were not eligible for support through the Social Security Act B.E.2533, Section 33.

The partnership between the government and civil society was become a crucial factor for Thailand being able to manage the pandemic. Thailand has strengthened its civil society, known as “the warriors in grey shirts,” which has played an important role to help local communities.³ Approximately 1.04 million village health volunteers have conducted house-to-house visits to monitor the health of community residents.⁴

Although COVID-19 has been quite well controlled in Thailand, uncertainties remain, and the risk of further outbreaks persists. Most key informants warn that low-level transmission is most likely to happen, with occasional small outbreaks occurring until vaccines are distributed.⁵ The government has begun administering vaccines, but progress has been slow. The opposition filed a censure motion against Prime Minister Prayut Chan-o-cha over his mishandling of the COVID-19 pandemic in January 2021.⁶ On February 17, 2021, the Thai government was scrutinized in parliament over its coronavirus vaccine policy. Opposition lawmakers accused authorities of delaying the start of inoculations and relying on a single vaccine producer.⁷

In February 2021, the first 200,000 doses of Sinovac and 117,600 doses of AstraZeneca arrived in Thailand. Vaccinations were to be provided to those over the age of 60, and those with chronic diseases, in addition to doctors, nurses, and medical staff working closely with infected patients. The Prime Minister and the Cabinet were also part of the first group to receive the vaccine to help build confidence and trust in the vaccination program.

The arrival of the vaccines boosted public confidence and many speculated that the public health situation in Thailand would improve, and the economy would begin to recover in time for the Songkran festival in mid-April. However, due to low public awareness of the pandemic, limited law enforcement, and ineffective government management, Thailand faced a third wave of infections in April 2021. The highly contagious alpha COVID-19 variant, commonly known as the UK variant, was reported in Thailand, which resulted in a new nationwide outbreak centered on nightspots in Bangkok’s upmarket Thong Lor area and Krystal Club. Since the Alpha variant is 1.7

² United Nations Thailand, “Social Impact Assessment of COVID-19 in Thailand,” Oxford Policy Management, December 23, 2020.

³ Bangkok Post, “Volunteers on the frontline,” <https://www.bangkokpost.com/thailand/special-reports/1903330/volunteers-on-the-frontline>)Accessed April 15, 2021(.

⁴ WHO, “Thailand's 1 million village health volunteers - ‘unsung heroes’ - are helping guard communities nationwide from COVID-19,” <https://www.who.int/thailand/news/feature-stories/detail/thailands-1-million-village-health-volunteers-unsung-heroes-are-helping-guard-communities-nationwide-from-covid-19>)Accessed August 28, 2020(.

⁵ United Nations Thailand, “Social Impact Assessment of COVID-19 in Thailand,” Oxford Policy Management, December 23, 2020.

⁶ Bangkok Post, “PM faces censure motion over virus fight,” <https://www.bangkokpost.com/thailand/general/2046039/pm-faces-censure-motion-over-virus-fight>)Accessed May 4, 2021(.

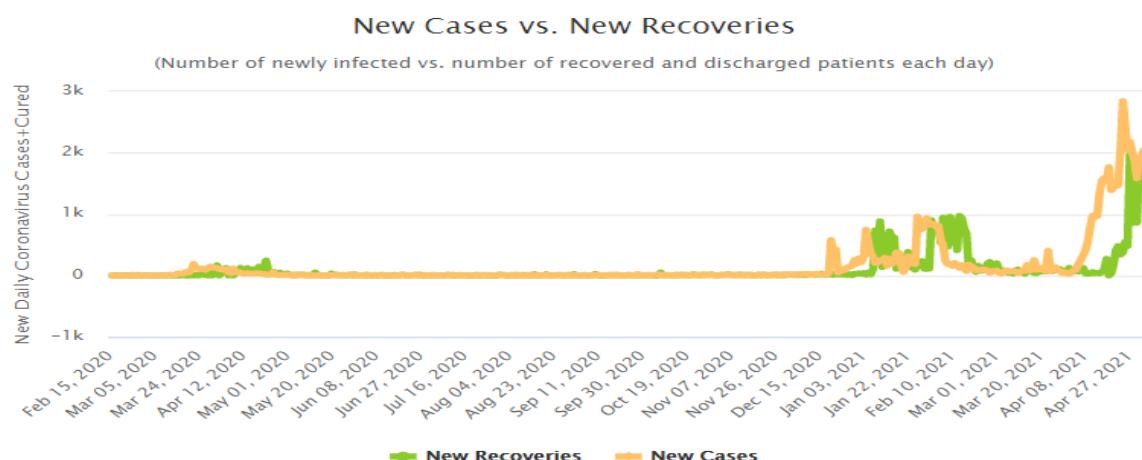
⁷ Reuters, “UPDATE 1-Thai government feels heat from lawmakers over vaccine rollout,” <https://www.reuters.com/article/health-coronavirus-thailand-idUSL1N2KN0JH>)Accessed May 4, 2021(.

times more contagious and deadlier than previous strains, April 2021 saw a sharp rise in new infection cases including police officers, politicians, Japanese diplomats, government officers, celebrities, and doctors.

The outbreak centered on Krystal Club was a scandalous state failure to control the pandemic. The outbreak rapidly hit 77 provinces within two weeks after the government allowed people to return home for Songkran. The outbreak severely affected the economy, with experts predicting that the tourism industry would lose a further 130,000 million baht in the first quarter of 2021. The third outbreak fostered public anger, especially among the working class and small businesses owners who were severely affected. Each outbreak in Thailand has caused issues for informal laborers who do not have access to social support. Although the managers of Krystal Club were sentenced to two months in jail,⁸ many consider the punishment to be too lenient considering the dire national economic consequences.

Figures 1 and 2 show that the number of COVID-19 cases and deaths increased through to the end of April 2021. Some people died while waiting to be tested or treated. Issues in government management have raised further concerns about the ability of the medical sector to manage the rapidly rising number of COVID-19 cases.⁹

Figure 1. Total COVID-19 cases in Thailand, from February 2020 to April 2021

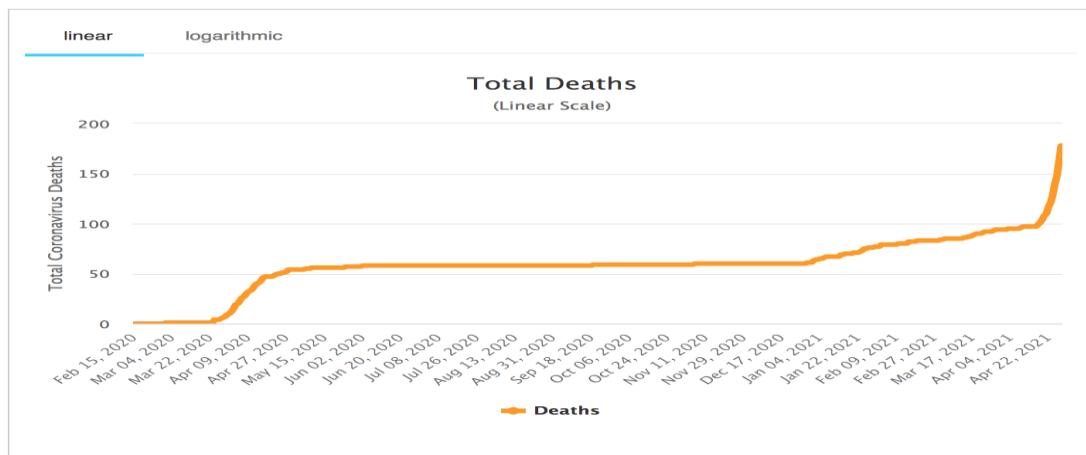


Source: <https://www.worldometers.info/coronavirus/country/thailand/>¹⁰

⁸ Bangkok Post, “Covid hotspot club managers in Bangkok jailed 2 months,” <https://www.bangkokpost.com/thailand/general/2098367/covid-hotspot-club-managers-in-bangkok-jailed-2-months>)Accessed April 19, 2021.

⁹ The Thaiger, “CORONAVIRUS)COVID-19(Famous Thai gamer dies from Covid after waiting 5 days for test,” <https://thethaiger.com/coronavirus/famous-thai-gamer-dies-from-covid-after-waiting-5-days-for-test.>)Accessed April 29, 2021(.

¹⁰ Worldometers. “New cases vs. New Recoveries in Thailand,” in Worldometers. <https://www.worldometers.info/coronavirus/country/thailand/>)Accessed May 5, 2021.

Figure 2. Total COVID-19 deaths in Thailand, from February 2020 to April 2021

Source: <https://www.worldometers.info/coronavirus/country/thailand/>¹¹

Responses from Government and Other Sectors

1) Government Responses

COVID-19 Vaccine Distribution

The Vice Minister of Public Health, Dr. Sophon Mekthon, stated that the vaccination program would target five groups in the following order: 1(Medical personnel)1.2 million people(; 2(Frontline personnel)1.8 million(; 3(Chronic disease patients, including respiratory disease, heart and blood vessel disease, chronic kidney failure, brain vessel, cancer, diabetes, and obesity)4.3 million(; 4(The elderly over 60 years)11.7 million(; and 5(The remaining adult population)31 million people(. Each group is required to register for vaccination via the “Mor Prom” or “Doctors ready” application.

Medical and frontline personnel were the first vaccine target groups to complete vaccinations by the end of May 2021. Chronic disease patients and the elderly were next, with vaccinations planned between June and July 2021)reservations opened on May 1(. The remaining adult population are then scheduled to start receiving vaccines in August)reservations will open on July 1(.¹²

¹¹ Worldometers, “Total Deaths in Thailand,” in Worldometers.

<https://www.worldometers.info/coronavirus/country/thailand/>)Accessed May 5, 2021.

¹² Hfocus, “D-Day May 1, jong vaccine “phu sung wai -7 rok pra jam tua” phan Line “Mor Prom” suan prachachon rerm jong July 1 JD-Day May 1, reserve the vaccination “Elderly-7 with underlying diseases” through the line "Doctor Prom", the NACC starts reserve on 1 July '19[,” <https://www.hfocus.org/content/2021/04/21517>)Accessed April 29, 2021(.

State of Emergency Decree

The Prime Minister announced the 11th revision of the state emergency decree between April 1 and May 31, 2021 to detect COVID-19 infections in various locations, especially local markets and communities.¹³ The decree included a nighttime curfew; a ban on reporting, selling, distributing, or disseminating any media content that could frighten people; prohibition on using a certain building or places; and mandatory wearing of facemasks outside the home. Breaking these rules incurs a fine of up to 20,000 baht under Section 51 of the 2015 Disease Control Act.¹⁴

Economic Support

The Thai government implemented a 50:50 co-payment scheme for general purchases by 1 million subscribers, while the Rao Chana payout scheme distributed a 3,500 baht monthly allowance for two months to eligible individuals to boost domestic consumption.¹⁵ The Labour Ministry announced the “Mor 33 Rao Rak Kan [We Love Each Other]” program to offer financial relief to private employees covered by Section 33 of the Social Security Act)SSA(and non-state welfare cardholders. To qualify for the financial relief, the recipient’s savings must not exceed 500,000 baht, including fund investments, bonds, or government savings bank lottery contributions. This scheme is expected to cost about 40 billion baht.¹⁶

2) Responses from Other Sectors

Provision of Medical Equipment and Support to Coordinate between COVID-19 Patients and Hospitals

Deaths due to waiting for COVID-19 hospital treatment has encouraged the private sector, people sector, such as volunteers and celebrities and individuals to launch campaigns to help those infected. Some have sent necessary supplies to those unable to work or required to quarantine at home for 14 days.¹⁷ The private sector and civil society groups have provided medicines, PPE, paper field hospital beds, vehicles, and coordinators between COVID-19 patients and hospitals.

¹³ TATNews, “Thailand extends Emergency Decree for eleventh time until 31 May 2021,” <https://www.tatnews.org/2021/03/thailand-extends-emergency-decree-for-eleventh-time-until-31-may-2021/>)Accessed May 4, 2021(.

¹⁴ Bangkok Post, ”Prayut among first fined for flouting mask rule,” <https://www.bangkokpost.com/thailand/general/2105839/prayut-among-first-fined-for-flouting-mask-rule>)Accessed May 3, 2021(.

¹⁵ ThaipBS World, “Third phase of consumer co-payment scheme expected in May,” <https://www.thaipbsworld.com/third-phase-of-consumer-co-payment-scheme-expected-in-may/>)Accessed April 20, 2021(.

¹⁶ Bangkok Post, “Ministry says Covid handout registration is postponed,” <https://www.bangkokpost.com/thailand/general/2063775/ministry-says-covid-handout-registration-is-postponed>)Accessed April 20, 2021(.

¹⁷ Bangkok Post, “Ha teang hai pu puay covid perm chong tang sue dara roumdoay choy kan [‘Finding a bed’ for patients with ‘Covid’ increase media channels - celebrities help together],” <https://www.bangkokbiznews.com/news/detail/934568> (Accessed April 29 2021).

Alternative Vaccines

In April 2021, approximately 586,000 doses of vaccines were administered; however, it could not prevent a third wave of infections. The pace of vaccinations in Thailand was slowed down due to a delay in shipment of Sinovac and AstraZeneca vaccines. The government was criticized for preventing the private sector from importing COVID-19 vaccines and accused of granting the potential vaccine monopoly. The private sector requires more vaccines for business owners, doctors, and those seeking alternative vaccines produced by Pfizer, Moderna, and Johnson & Johnson)J&J(.¹⁸

Health and Economy Trade-off

The latest outbreak had a significant impact on businesses and the national economy. The trade-off between public health and the economy in dealing with COVID-19 has been widely discussed on social media because preventative measures to contain the spread of COVID-19 have affected the economy rather than the pandemic. COVID-19 responses have damaged tourism and related sectors. Moreover, measures to prevent COVID-19 transmission have affected the employment sector, predicting approximately 1.3 million graduate students and 6 million workers to be unemployed during the pandemic.¹⁹ Many companies in Thailand expect liquidity to remain tight in 2021, with small and medium size companies most affected. Approximately 28 percent of the companies located in Thailand are at risk. The Thai economy is expected to take three years to recover to its pre-pandemic level.²⁰ In addition, household debt also increased to 91 percent of GDP in 2021)14 trillion baht(.

Lessons from the first and second outbreaks of COVID-19 management in Thailand

In the first outbreak, Thailand's COVID-19 response had been deemed to be successful because many mechanisms were implemented including strong leadership; a strong, well-resourced, and inclusive medical and public health system; highly effective and capable local health volunteers; efficient administrative systems; well-organized governance practices; close collaboration; a single command and information distribution system; and law enforcement and crisis management regulations.

- 1) Strong government leadership at different levels has effectively responded to the pandemic by allowing health professionals to manage the situation. The Prime Minister established the COVID-19 Situation

¹⁸ Bangkok Post, “Authorities defend vaccine policy,”

<https://www.bangkokpost.com/thailand/general/2098023/authorities-defend-vaccine-policy>)Accessed April 29, 2021(.

¹⁹ Bangkokbiznews, “Pitcovid Konthaitokngan Jopmaitefoon Raipanoam

]Covid poisoning, Thai people lose their jobs[,” <https://www.bangkokbiznews.com/news/detail/932552>)Accessed April 19, 2021(.

²⁰ Krungsri research, “COVID-19 Crisis: The Impact on Business and Choice of Policy Tools,”

<https://www.krungsri.com/en/research/research-intelligence/ri-covid19-crisis-en>)Accessed April 19, 2021(.

Management Center to monitor and communicate with the public and provide daily updates on COVID-19. The center significantly reduced potential issues and built public trust and confidence.

- 2) A strong, well-resourced, inclusive medical and public health system contributed to the prompt responses.

Before the outbreak, Thailand already had an established and excellent healthcare system with a decentralized health budget, plentiful medical instruments and hospitals, and medical staff working in local hospitals. In 2002, Thailand successfully introduced a free healthcare system dubbed “thirty-baht healthcare”, which enabled 48 million Thais to access hospital healthcare services for just 30 baht (less than 1 US dollar). This program later became a free universal healthcare program. Thailand’s healthcare services now include over a million health volunteers working in 72,000 villages. With an existing healthcare system, Thailand could successfully limit and control the pandemic during the first and second outbreaks.

- 3) Administrative systems adapted to changing demands for government measures and public health measures to control the virus. Following the March 2020 outbreak, the government introduced lockdown measures between March and mid-June 2020 to limit the spread of COVID-19. The government declared a national curfew between 10 p.m. to 4 a.m., and encouraged the public to protect themselves from the risk of infections, such as avoiding high-risk areas, and the wearing of facemasks. Meanwhile, the government decentralized and distributed power to local governments and actively communicated with health professionals. Consequently, governors, local authorities, community leaders, and health volunteers were involved in monitoring and reporting new cases to local authorities and provincial governors.
- 4) Close collaboration with academia and the public sector helped Thailand manage COVID-19. Civil society played an important role in helping local communities in particular. Local health volunteers, civil society groups, and private organizations distributed food packages for people affected by COVID-19. In early May 2020, the “Too Pan Sook”, or “Pantries of Sharing” project was launched to share food with the underprivileged. The “Rice for Fish Exchanges” was a cooperative program between network partner organizations. Academic institutions and health professionals provided guidelines to prevent the transmission of the virus, such as health experts providing knowledge about personal hygiene practices to avoid infection, while the COVID-19 Situation Management Center and journalists updated the public about the COVID-19 situation for example the number of new cases and deaths, law and regulation, the government measures. Various sectors, such as private sector, entrepreneur, non-profit organization, and people organization, have made donations.
- 5) Cultural norms, such as non-contact greeting and mask-wearing, supported by consistent, transparent communication have improved levels of public compliance.²¹
- 6) During the first and second waves, the government implemented a single command for public communication and decentralized powers to provincial governors. After a third outbreak in April 2021,

²¹ World Health Organization, “The Ministry of Public Health and the World Health Organization Review Thailand’s COVID-19 Response,” <https://www.who.int/thailand/news/detail/14-10-2020-Thailand-IAR-COVID19>)Accessed May 4, 2021.

the case of Alpha strain was reported in Thailand for the first time. The government responded with a single command system to improve the efficiency of the national COVID-19 vaccination drive, aiming to inoculate about 30 million people over the next three months and 50 million by the end of the year.²² The government sought to improve state and private agency cooperation to ensure broad vaccine distribution. Meanwhile, alternative vaccination centers were planned to be installed in meeting halls, sports centers, and hotels to prevent hospital overcrowding. A minimum of 300,000 doses of vaccines was targeted to be administered daily. The government also planned to use spaces at religious organizations, government agencies, and universities as field hospitals and for vaccine allocation. The Prime Minister instructed all involved agencies to procure over 100 million vaccine doses by the end of 2021.²³

- 7) Vaccine management has become a political issue. In February 2021, the opposition began debating a no-confidence motion against the Prime Minister and nine Cabinet members with accusations of economic mismanagement and bungling the provision of vaccines. Moreover, public criticism on social media and television has become common in recent months.

Lesson learned from the third outbreak of COVID-19 management in Thailand

A third wave started in April 2021, one month after targeted vaccinations began. The COVID-19 situation has deteriorated with the increasing numbers of deaths and infections. Previous experiences did not help prevent these issues. The authors would therefore like to draw lessons learned from COVID-19 management failures during the current outbreak which are related to inefficiency in law enforcement; reduced public awareness about the COVID-19 outbreak; non-democratic leadership; limited good governance practices; and low resource allocation.

- 1) During the first and second waves, the government enforced an emergency decree to limit the spread of the pandemic. The decree, however, has been criticized for limiting the freedom of speech and expression and public rights and liberties. The Public Assembly Act has been used against anti-government protesters and to control the Thai student movement since the enforcement in 2015. Since March 2020, hundreds have been punished for breaking the law and the decree has been extended 11 times. Although the COVID Management Center spokesman insisted that the emergency decree helped control COVID-19, it was insufficient to control the third wave. The Prime Minister avoided drastic preventative measures after the new cluster in April 2021. A lockdown in Bangkok was necessary to stop an outbreak,

²² Bangkok Post, “CCSA takes reins of virus crisis,” https://www.bangkokpost.com/thailand/general/2105883/ccsa-takes-reins-of-virus-crisis?fbclid=IwAR1P8VotZkPT2TFwPXVoMW6UakF1CWr0qZwNpcuV7BAh0REsqh3Q6B_Z1s#group=nogroup&photo=0.)Accessed May 4, 2021(.

²³ Ibid.

yet the government allowed travel for Songkran for economic reasons, which subsequently limited law enforcement and public awareness.

- 2) The public trust in government has been declining. After the third outbreak started, the Prime Minister, Minister of Public Health, and government agencies failed to communicate the COVID-19 management strategy and vaccine allocation to the public. There is low public participation to choose vaccines and no effective response from the Prime Minister to control the outbreak, resulting in rising cases and deaths. The Prime Minister and the Minister of Public Health have refused to take responsibility for mismanagement, including slow vaccine rollout. Law enforcement for those who went to Krystal Club is also absent. Limited leadership responsibility has fostered panic and has frightened society, while the private sector has requested for better mechanisms. A private opinion poll implies that there is a demand for the resignations of the Prime Minister and Minister of Public Health.²⁴
- 3) Limited good governance practices compromised the effective response from the government. There are concerns about vaccine distribution. The government has purchased vaccines from Sinovac and AstraZeneca and prevented the private sector from importing alternative vaccines, which created public distrust of government. Public participation in vaccine management is limited because people cannot choose which vaccination they receive. Moreover, the slow vaccination rate is related to the interests of pharmaceutical companies. Lack of good governance practice resulted in increasing numbers of deaths increasing since April 2021. Meanwhile, the slow distribution of vaccinations has damaged the healthcare sector's potential to control the virus and businesses' ability to restore the economy.
- 4) Resource management and management capacity of the government during the crisis was inadequate. The government faced crisis management issues as cases increased sharply in April 2021. Although the government increased spending to protect the economy and provide aid to the vulnerable groups, the latest outbreak has affected all sectors of businesses in Thailand. The vaccination program alone is insufficient. The government must purchase alternative vaccines to ensure quality, safety, and effectiveness of the vaccine. Household and public debt increased to 91 percent of GDP and 52 percent of GDP in 2020, respectively which will affect the government's capacity to restore the economy.
- 5) Low crisis management skills. In the third outbreak of COVID-19 Thailand had faced communication challenges because the government failed to communicate to create public understanding and trust to cope with the pandemic. The government cannot integrate the public and private sector to fight with the virus. Moreover, the government defended the decision not to join COVAX vaccine alliance (the WHO-sponsored coronavirus vaccine program) which related to transparency principle. The failure of government measures to prevent the outbreak and the delay of vaccine trials indicates low crisis management. Moreover, there is also a lack of information on vaccination purchasing process, well-planned vaccine allocation and well communication to boost confidence and trust to the people. The lack

²⁴ Prachachat online. “Phud Campange lar ray chue lai ‘Prayuth’ ji la oak phue chard [Pop up a campaign to hunt the name to force Prajuth resign for nation],” <https://www.prachachat.net/social-media-viral/news-660920>. (Accessed May 4, 2021).

of cooperation between government agencies. Consequently, many sectors are dissatisfied with the redundant work and inefficiency in government management.

Additionally, rising cases have prompted concerns about the ability of the medical sector of Thailand to handle increased cases of infections. People reportedly find it difficult to access healthcare services due to insufficient hospital beds, longer waiting times, long queues for vaccination, and lack of effective communication. Unfortunately, Thailand's medical sector is currently overwhelmed by COVID-19 and crisis management capacity remains low.

Policy Recommendations

Although the COVID-19 management proved effective during the first and second outbreaks, Thailand presently faces many challenges. The authors propose the following policy recommendations to approach future crises.

1) Democratic Governance Practices

To prevent COVID-19, the government should apply democratic governance practices by enforcing related laws and regulations to create public awareness and protect citizens from COVID-19. Lockdown measures may be necessary for some areas. Remedy measures and compensations for small business enterprises and workers were also needed under principle of responsibility. Government trust should be enhanced, especially regarding vaccine allocation.

The distribution of vaccines is a key element to manage the third outbreak. To reduce deaths and infections, the government should allow the private sector to import alternative vaccines and allow citizens to choose which vaccine to take. Vaccine accessibility and COVID-19 treatment services should be simplified, while everyone should have the right to receive a good, standardized vaccine.

2) Economic Measures

The third wave severely hit the economy so the government should provide sufficient social support to ensure the wellbeing of its citizens and reduce the social impacts until the entire population is vaccinated. Building trust and confidence between the government officials and healthcare professionals, while proposing effective economic measures are key to fighting COVID-19. Cooperation between the public and private sectors should improve to minimize negative economic impacts and foster job creation.

In the short term, vaccine distribution is crucial to cope with COVID-19 and restore the economy. The economic measures, such as the government allowances, remedy measures, welfare policies, compensation are needed to help small business enterprise and unemployed workers. In the long term, the government must launch campaigns to encourage foreigners and Thais to travel in Thailand, for instance by becoming a medical hub for COVID-19 treatment and ensuring safe travel for tourists.

3) Information Management and Communication

An open government system is required to reduce fake news. Data should be easily accessible via various sources such as government organization, private enterprise, non-government organizations, civil society, academic institutes, and reliable media agencies. A single communication source such as the COVID-19 Single Management Center may be effective to communicate technical information to the public; however, a more interactive means of communication is needed to building trust, awareness, and partnerships with various interest groups.

Additionally, efficient public communication mechanisms for crisis management should be established. The government should integrate different sectors such as the private sector, civil society, the media, and people to participate in public communication to avoid contradicting information. Effective communication can establish trust and confidence in government agencies during crises. Knowledge and information can reduce public chaos and panic and is crucial to restoring the national economy.

4) Future Prevention Mechanisms

COVID-19 has impacted all parts of Thai society. To reduce the socioeconomic impacts of COVID-19 and create a crisis management strategy, the following social and economic policies and strategies should be considered:

4.1 Social Policy

COVID-19 has reflected Thailand's existing economic, social, and justice inequalities, in addition to its problems with law enforcement. In response, a sustainable social support or social safety net should be introduced, particularly to aid vulnerable groups and improve quality of life. COVID-19 offers lessons for Thailand to deal with health and economic crises. Many people, especially informal laborers, grassroots organizations, and the middle class had to fight for their basic rights and return to work despite the risk of infections. Social security would provide basic guarantees for such people.

At the height of the pandemic, Thailand successfully controlled the virus by promoting inter-sector cooperation. Strong social partnerships between local governments, provincial and national authorities, health professionals, the private sector, civil society, the people, and health volunteers have been success factors to cope with COVID-19. Inclusive social partnerships was crucial mechanisms for Thailand to cope with COVID-19 during the first and second waves. Inter-sector partnerships should be encouraged to effectively cope with future crises.

4.2 Economic Policy

COVID-19 has significantly affected Thailand's economy by increasing public and private debt.²⁵ To minimize economic effects and prevent a social crisis, the grassroots economy should be strengthened by enabling social and economic empowerment among the public, government, and private sectors. Moreover, the government should

²⁵ Office of the National Economic and Social Development Council, "NESDB clarified the fact of high household debt, https://www.nesdc.go.th/ewt_news.php?nid=9809&filename=index.)Accessed May 4, 2021.

place greater emphasis on expanding the scope and definition of financial benefits, including making welfare accessible to guarantee the quality of life. This will also maintain a healthy democracy, economy, and social partnerships for the benefit of the people and limit household debt. Decentralization of government power and redistribution of resources to reduce economic inequality are necessary to achieve this. In the long term, the government should support accessible healthcare, economic opportunities, education, and technology and also improve political engagement to recover the economic. Economic opportunities will enable a healthy democracy. Furthermore, Thailand's economic structure requires reform to erase big business economic monopolies and develop social security to improve living standards. Healthy relationships between the state, private sector, and the people will expand national resources, reduce household and public debt, and strengthen democratic governance. Meanwhile, the strong socio-economic security will help prevent future social crises. ■

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